



**The SLP and the Bilingual Child:
Where are we today?**




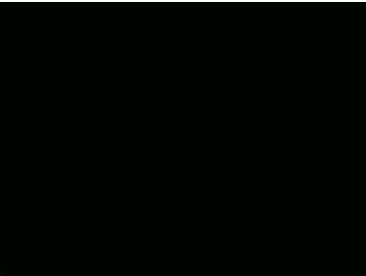
RUBEN DIAZ
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University of Cincinnati
Doctoral Student – University of Cincinnati
Cincinnati Children's Hospital Medical Center



Video Exercise

<http://www.youtube.com/watch?v=nhg0ylh-6yg>

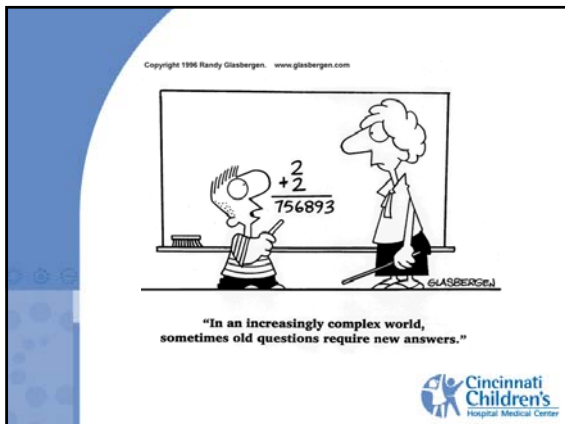


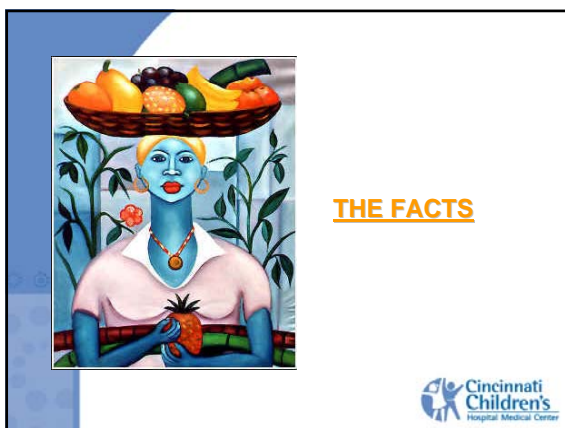














THE FACTS

**WHO I AM
WHERE I CAME FROM
MY RESOURCES
MY REALITY**

**WHO YOU ARE
WHERE YOU CAME FROM
YOUR RESOURCES
YOUR REALITY**



THE FACTS

1. This isn't a "ONE SIZE FITS ALL" workshop.
2. We will start by "shaking" our brains so we wake up and continue re-learning-re-thinking.
3. We must think how aspects of language development and speech perception come together for bilinguals, and then, only then, the so called techniques (what and how to do....) would make more sense to us.




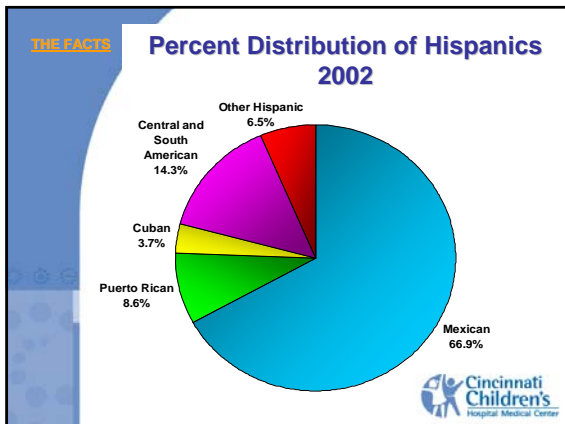
THE FACTS

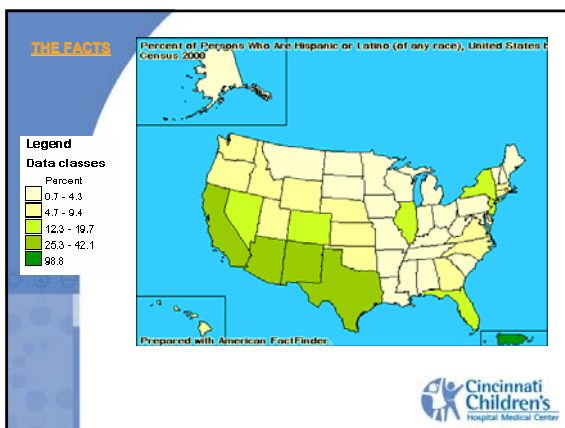
Table 1.
Population by Race and Hispanic Origin for the United States: 2000

Race and Hispanic or Latino	Number	Percent of total population
RACE		
Total population	281,421,906	100.0
One race	274,595,678	97.6
White	211,460,626	75.1
Black or African American	34,658,190	12.3
American Indian and Alaska Native	2,475,066	0.9
Asian	10,242,998	3.6
Native Hawaiian and Other Pacific Islander	398,895	0.1
Some other race	15,359,073	5.5
Two or more races	6,826,228	2.4
HISPANIC OR LATINO		
Total population	281,421,906	100.0
Hispanic or Latino	35,305,818	12.5
Not Hispanic or Latino	246,116,088	87.5

Source: U.S. Census Bureau, Census 2000 Redistricting (Public Law 94-171) Summary File, Tables PL1 and PL2.





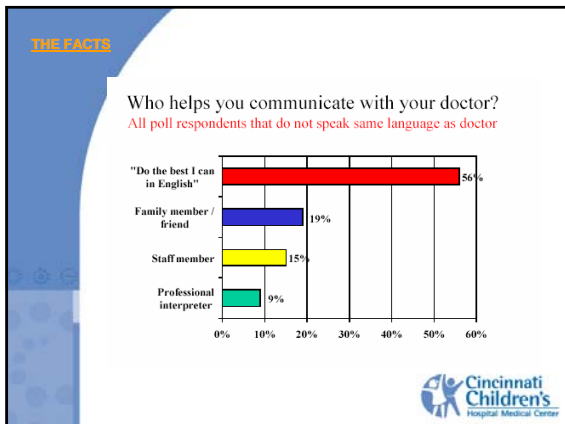


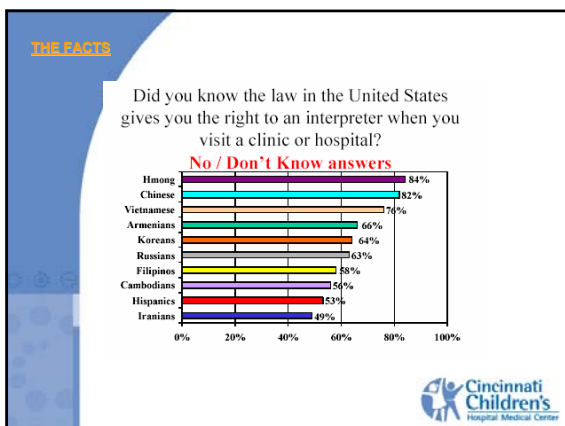
THE FACTS

A REALITY

The 2000 U.S. Census revealed that slightly more than half of those who said they spoke a language other than English at home also said they spoke English less than very well.

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THE FACTS

IT'S THE LAW

Under federal law, the forty-year Civil Rights Act of 1964 prohibits discrimination based on national origin, including ability to speak English fluently.

Hospitals and clinics that receive federal funds are required to provide trained interpreters and other language access services.

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THE FACTS

IT'S THE LAW

In August 2000, President Clinton signed *Executive Order 13166* to "improve access to federally conducted and federally assisted programs and activities for persons, who, as a result of national origin, are limited in their English proficiency (LEP)."

As clinicians, it is important that we provide culturally appropriate services to all of our clients, not only because it's the right thing but also because discrimination can result in a loss of federal funding. This federal legislation helps to establish ASHA policy documents supporting the provision of culturally and linguistically appropriate services.


For more information, go to www.lep.gov.



THE FACTS

WHY THE URGENCY

- It is a reality for many of our schools and clinics
- Proficiency Vs Competency for ELL
- Intervention Vs Support for teachers
- Private clinics possibilities Vs Schools



THE FACTS


WHY THE URGENCY

Proficiency Vs Competency for ELL

Overall Achievement Gap

Achievement gaps remain one of the greatest challenges for the nation. For some groups, the gaps in performance are large.

The federal No Child Left Behind Act requires that states hold schools and districts accountable for the achievement of each student group, including racial and ethnic groups, low-income students, limited English



THE FACTS


WHY THE URGENCY

Proficiency Vs Competency for ELL

Overall Achievement Gap

Title III specifies three requirements that states must include when establishing Annual Measurable Achievement Objectives. These requirements are:

- Annual increases in the number or percentage of children making progress in learning English;
- Annual increases in the number or percentage of children attaining English proficiency by the end of each school year, as determined by a valid and reliable assessment of English proficiency; and
- Making adequate yearly progress for limited English proficient children as described in Title I.



THE FACTS

State
Section 3301.02
Code 559


Met 23 out of 25 target goals (92.0 percent)

Ytd: Yes
Made Overall AYP: No

Under the federal No Child Left Behind Act a school district must make 100 percent of its target goals in order to qualify to receive federal Title I funds.


Student Group*	Met Annual Measurable Objective		Met Participation Rate	Other Academic Indicator**
	Reading	Mathematics		
All Students	Yes	Yes	Yes	Yes
White (Non-Hispanic)	Yes	Yes	Yes	
African-American	Yes	Yes	Yes	
Hispanic	Yes	Yes	Yes	
Asian	Yes	Yes	Yes	
Limited English Proficiency	Yes	Yes	Yes	
Free-Reduced Lunch	Yes	Yes	Yes	
With Disability	NO	NO	Yes	

* For other measures of school progress see Commonwealth Accountability Testing System (CATS) results at <http://www.ohio.gov/education>.
** If a student group is listed as "N/A" in the chart, it means there were not enough students in that group to be tested for AYP purposes. Each student is included in the "Other Academic Indicator" group.
*** For "Attendance" and "Attendance Behavior," the scores CATS 2006 Accountability Classification, which covers the other common areas as well as reading and mathematics. For high schools the "Other Academic Indicator" is the Graduation Rate. For other students indicators the scores will include the high school grade in both the CATS 2006 Accountability Classification and the Graduation Rate.



THE FACTS

Limited English Proficient (LEP) Students 701 KAR 5-07 Inclusion of Special Populations in the State-Required Assessment & Accountability Program	First Year: New LEP students are counted in participation rate, but need not be included in AYP or CATS accountability. New LEP students... <ul style="list-style-type: none"> • Must be tested using a state-approved English language proficiency assessment. • Must be tested in mathematics (grades 3-8, 11). • May be tested in reading (grades 3-8, 10). • The English language proficiency test will be used for determining Participation Rate instead of reading. 	No change since 2003-2004.
	Second and Subsequent Years: <ul style="list-style-type: none"> • Must participate in all state-required assessments (except the Writing Portfolio which is not required in the second year). • The test scores of LEP students are included in AYP and the Commonwealth Accountability Testing System (CATS). LEP Subpopulation Membership: <ul style="list-style-type: none"> • Students must be retained in the LEP accountability subpopulation for up to 2 years following attainment of English proficiency as reflected on results of the state-approved English language proficiency test. • However, in connection with reporting subpopulation results, LEP students who have attained English proficiency may be excluded from subpopulation size computation. 	




THE FACTS

WHY THE URGENCY

-Intervention Vs Support for teachers

The role of the SLP can't be mistaken as an ESL teacher or a Vocabulary Teacher Aid

SLPs are to maintain a close relationship with Content and ESL teachers to assist them with the process of determining if the child is learning English or indeed the child has a Language Deficit.



THE FACTS

WHAT IS THE REALITY FOR SLPs?

WHAT IS THE PICTURE AROUND THE COUNTRY?

WHAT'S YOUR PICTURE?



THE FACTS

WHAT ABOUT SLPs?

WHAT IS THE PICTURE AROUND THE COUNTRY?


Less than 2% of ASHA members are bilingual.

In most states, there are growing numbers of English Language Learners (ELL) in the public schools.

Since the 1990-1991 the ELL population has grown **105%**, whereas the general school population has grown only **12%** (Kindler, 2002)

In 2001, more SLPs had ELL students on their caseloads than in 1990.

The most represented group on SLP's caseload was **HISPANIC**, followed by **ASIAN**.

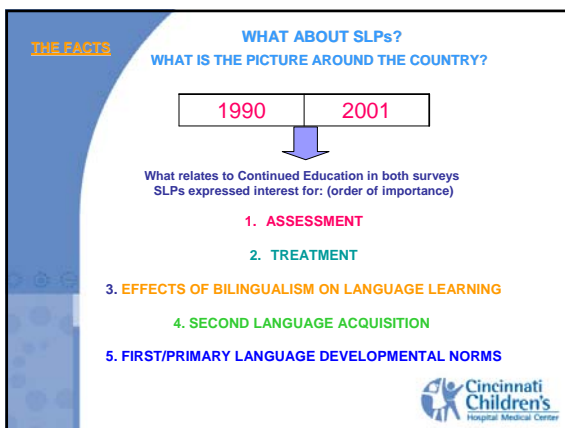


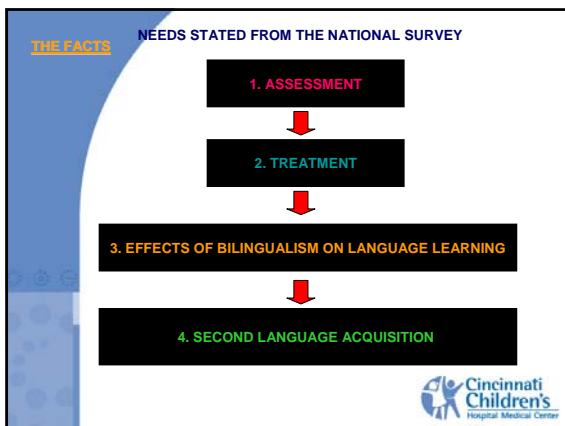
THE FACTS

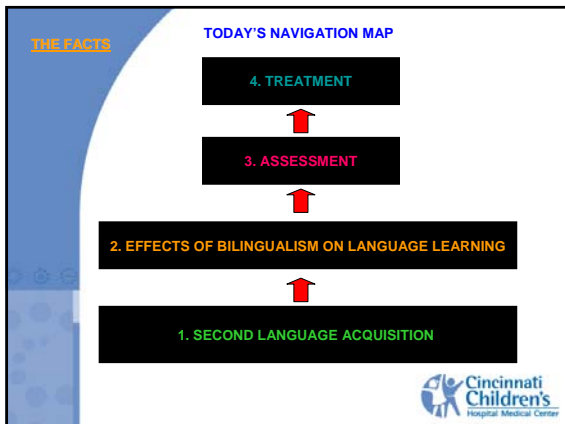
WHAT ABOUT SLPs?
WHAT IS THE PICTURE AROUND THE COUNTRY?

	1990	2001
Treatment for Language disorders	49%	91%
SLPs speaking another language with adequate fluency to provide clinical services to students who spoke that language	10% yes	12% yes
Problems that they encountered in both assessing/treating	"don't speak the language of the student" "lack of less biased assessment instruments" "Lack of professionals who speak students' languages"	"don't speak the language of the student" "lack of less biased assessment instruments" "Lack of professionals who speak students' languages"
SLPs that have coursework addressing service delivery to ELL students	76% NO	27% NO

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THE FACTS

WHAT'S OUR PICTURE?

THERE IS AN EXPRESSED INTEREST AT ALL LEVELS TO RECRUIT AND RETAIN BILINGUAL SLPs

ASHA is advocating for CEUs so SLPs can expand their knowledge and skills to serve this populations

ASHA is hoping for universities and school districts to increase amounts of Time and money to educating SLPs regarding topics of importance indicated by public school clinicians.

Ohio Department of Education and Ohio Board of Speech – Language Pathology and Audiology have "NO DATA".
(they do not collect this in their demographic information)

**Called MRDD in Hamilton Ohio (Cincinnati) and ...
They provided me with... MY NAME!!!**

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THE FACTS

WHAT'S OUR PICTURE?

THE SCHOOLS PICTURE ENGLISH PROFICIENCY ETC.

In Ohio, more than 29,000 limited English proficient (LEP) students were enrolled in the state's elementary and secondary public schools during the 2005-2006 school year.

The term "limited English proficient" refers to those students whose native or home language is other than English, and whose current limitations in the ability to understand, speak, read or write in English inhibit their effective participation in a school's educational program.

Ohio English Language Proficiency Standards for LEP Students


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THE FACTS

WHAT'S OUR PICTURE?



THE SCHOOLS PICTURE
ENGLISH PROFICIENCY ETC.

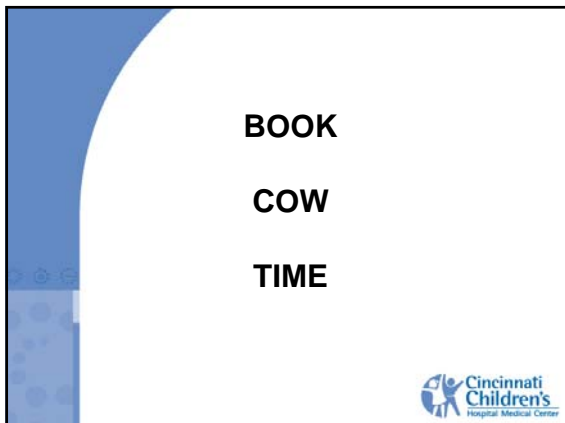
<http://education.ky.gov/KDE/Instructional+Resources/High+School/Language+Learning/English+Language+Learning/Assessment+Information+and+Regulations+>



BILINGUALISM

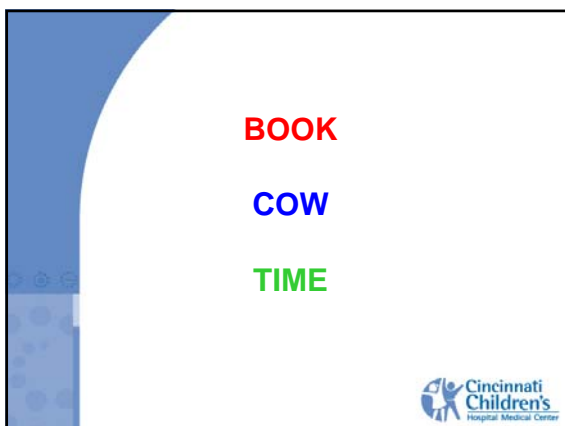






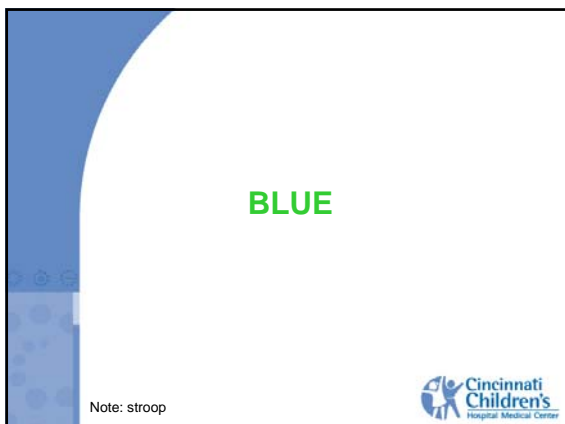
BOOK
COW
TIME

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BOOK
COW
TIME

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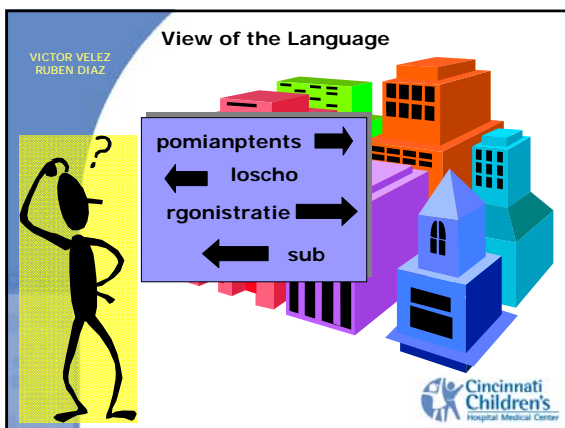


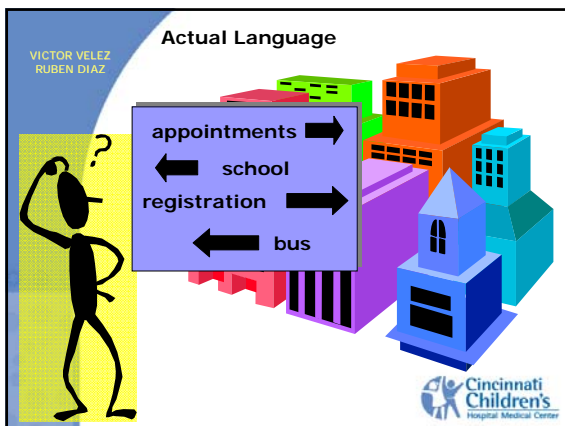
BLUE

Note: stroop

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Competent Communication-Language Skills

VICTOR VELEZ
RUBEN DIAZ

Appointments (citas)
School (escuela)
Registration (registracion)
Bus (camion)

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ADVANTAGES OF BEING BILINGUAL
(Baker C, 2000)

- Communication advantages (and/or survival skill)
- Cultural advantages
- Cognitive advantages
- Character advantages
- Curriculum advantages
- Cash advantages

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ADVANTAGES OF BEING BILINGUAL
(Jim Cummins, 1996)

One wheel (one language) can get you places...

So can a big wheel and a little wheel ...

However, when your wheels are nicely balanced and fully inflated you'll go farther...

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Important Definitions

BILINGUALISM

Use of two languages on a regular basis.
A person does not have to speak both languages with equal fluency to be bilingual.

BILINGUAL FAMILY

A family in which most of the members are bilingual.

CONSECUTIVE BILINGUALISM

Learning one language after already knowing another.
This is the situation for all those who become bilingual as adults, as well as for many who became earlier in life.
Sometimes also called *successive bilingualism*.



Important Definitions

SIMULTANEOUS BILINGUALISM


Learning two languages as "first languages".
A person who is a simultaneous bilingual goes from speaking no languages at all to speaking two languages.
Infants who are exposed to two languages from birth will become simultaneously bilingual.



Important Definitions

RECEPTIVE BILINGUALISM


Being able to understand two languages but only one is used to communicate with others (spoken).
This is normally not considered "true" bilingualism but it is a common situation in northern states.



Important Definitions


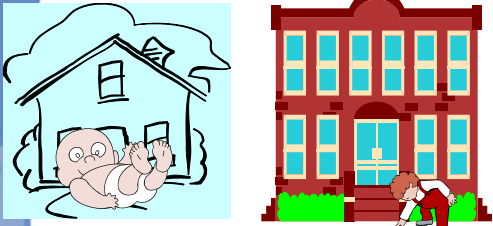
SUBTRACTIVE LANGUAGE ACQUISITION

Unique situation where a second language is learned without support of the first language. In subtractive language acquisition the first language is literally subtracted, making the task of learning English very challenging because there is not a first language to draw from or return to (e.g. international adoptees).



THE LANGUAGE BACKGROUND


WAYS TO BE EXPOSED TO A SECOND LANGUAGE (McLaughlin, 1984)




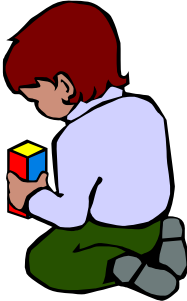
THE LANGUAGE BACKGROUND

(McLaughlin, 1984)

Before Age 3
simultaneous bilingualism



After Age 3
consecutive bilingualism



BRAIN MECHANISMS

SPEECH PERCEPTION AND PRODUCTION

ERP
Event-Related Potential

Chereshov et al. (1997)

BRAIN MECHANISMS

SPEECH PERCEPTION AND PRODUCTION

The Development of Cerebral Dominance and Language Acquisition

The history of this issue begins with Lenneberg (1967), who hypothesized that the development of cerebral dominance was complete by around puberty ("firmly established"). According to Lenneberg, the infant brain is not firmly lateralized; in case of damage to the left hemisphere, or in case of removal of the left hemisphere ("hemispherectomy"), the right hemisphere is able to assume the language function.

BRAIN MECHANISMS

SPEECH PERCEPTION AND PRODUCTION


The Development of Cerebral Dominance and Language Acquisition

Lenneberg (see also Scovel, 1969) also hypothesized that the end of the development of cerebral dominance coincided with the close of a "critical period" for language acquisition, noting that "foreign accents cannot be overcome easily after puberty" and that "automatic acquisition (of second languages) from mere exposure... seems to disappear after this age".


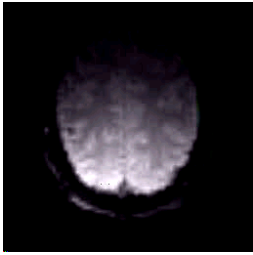
BRAIN MECHANISMS
SPEECH PERCEPTION AND PRODUCTION

The Role of the Right Hemisphere in Second Language Acquisition

The position that we conventionally outlined for first language acquisition is consistent with the idea that the right hemisphere may play some role in early stages, and interestingly enough, it has been suggested that the right brain is somehow involved in normal second language acquisition in much the same way.



BRAIN MECHANISMS
SPEECH PERCEPTION AND PRODUCTION



BRAIN MECHANISMS
SPEECH PERCEPTION AND PRODUCTION

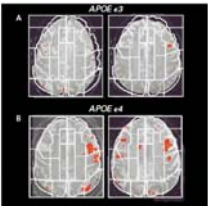
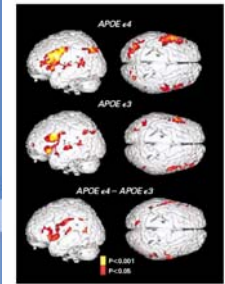

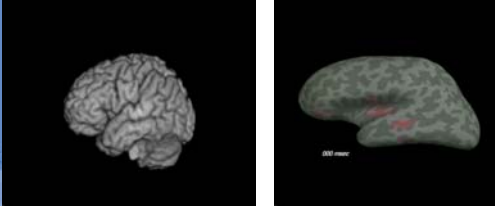


Figure 2. Examples of Activation Maps on Single MRI Planes.



BRAIN MECHANISMS
SPEECH PERCEPTION AND PRODUCTION



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BRAIN MECHANISMS
SPEECH PERCEPTION AND PRODUCTION

F. Pei et al. / Magnetic Resonance Imaging 19 (2001) 643-647

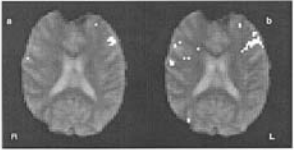


Fig. 1. The functional maps obtained from the same subject during the independent performance of Chinese and English tasks demonstrate activation in the corresponding T₂-weighted anatomical images. There is statistically significant activation ($p < 0.001$) involving the middle left frontal lobe in Chinese. In English, W (right, L, left).

Key: Chinese speakers

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BRAIN MECHANISMS
SPEECH PERCEPTION AND PRODUCTION

Kim K, Hirsch J, Reikin N, DeLazPaz R, Lee K-m.
Localization of Cortical Areas Activated by Native and Second Languages with Functional Magnetic Resonance Imaging (fMRI).
Proceedings of the International Society for Magnetic Resonance Imaging, 1, 283, 1996.

Adjacent but distinct areas of activation were observed for native and second languages within the anterior language area on the dominant hemisphere ("Broca's" area) for the eight subjects whose second languages were acquired after their early childhood. More overlap was seen within the posterior language area on the dominant hemisphere ("Wernicke's" area). For the two subjects with two native languages both the anterior and posterior language areas tended to overlap.


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BRAIN MECHANISMS
SPEECH PERCEPTION AND PRODUCTION

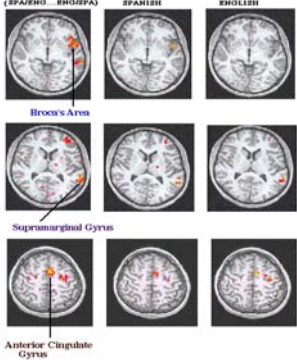
Kim K, Hirsch J, Reikin N, DeLazPaz R, Lee K-m.
Localization of Cortical Areas Activated by Native and Second Languages with Functional Magnetic Resonance Imaging (fMRI).
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They found that primary and secondarily-acquired languages are spatially resolvable in the anterior cerebral cortex when the second language is acquired after early childhood.

However, when two language are developed simultaneously during early childhood, they tend to occupy the same area in the anterior language cortex. Based on these observations, we conclude that the age of language acquisition may be significant in the functional organization of the anterior language area of human brain.



ALTERNATING-BIEXED (SPANISH - ENGLISH) **SPANISH** **ENGLISH**




Broca's Area


Supramarginal Gyrus

Anterior Cingulate Gyrus

Hernandez, Arturo et al. Neuroanatomical Correlates of Single and Dual-Language Picture Naming in Spanish-English Bilinguals. 1997




Mixing Two Languages: Is there any consequence?



LANGUAGE CHOICE:
A family faced with the decision about what language to speak at home.....


Important issues

1. Where they live
2. Importance to their culture
3. Language proficiency
4. Future plans



What Language Should be Used At Home?

- One problem which faces immigrant parents is the question of which language should be spoken to the children.
- There is a common assumption that more English = better English.
- Many parents are led to believe that speaking another language at home would somehow hinder the acquisition of English.
- There is an assumption that if one language is subtracted, then the child's English competence will improve.
- Amazingly enough, many educators and doctors also support this myth.




What Language Should be Used At Home?

Research has actually shown that if parents speak their native language at home, the children's competence in English will be better than that of parent's who speak imperfect English at home.

Children who speak their parent(s)'s language at home can learn better English from a pure source.

The linguist, Jim Cummins once stated (1984), *"proficiency in the home language represents an effective way of developing a conceptual and academic foundation for acquiring proficiency and literacy in the language of the school."*




What Language Should be Used At Home?

This can be seen in one case where an American girl of French decent spoke only English at home. She could only understand a little bit of French (from what she heard from her mother), but she only spoke English.

However, when they went for a trip to France, her mother suddenly changed from what she considered to be a rather unintelligent simpleton, to a person of far higher sophistication.

Contrary to what she had previously believed, her mother was not at all unsophisticated, but she could not produce English in sophisticated way, compared to her native language, French.



Mixing Two Languages: Is there any consequence?


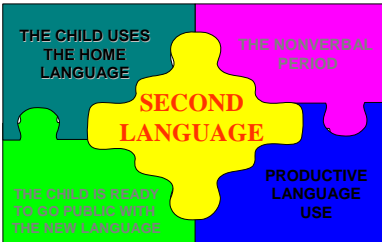
COMMON PATTERNS:

ONE PARENT, ONE LANGUAGE (OPOL)
The parents speak different native languages and each speak their own native language to the child(ren)

MINORITY LANGUAGE AT HOME (ML@H)
Also known as the Foreign Home pattern. Everyone speaks the minority language at home, and the community language outside.




FOUR STAGES FOR CHILDREN LEARNING A SECOND LANGUAGE SEQUENTIALLY



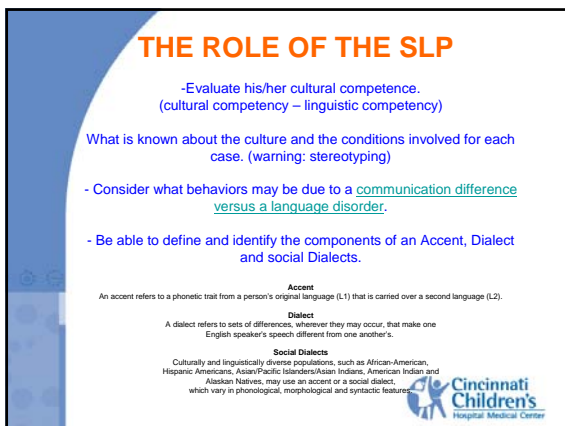
What Language Should be Used At Home?

The primary disadvantage of speaking only English at home is that the child becomes monolingual.











THE ROLE OF THE SLP

- School-based clinicians should be aware that the Individuals with Disabilities Education Act (IDEA) prohibits any testing that could be considered racially or culturally discriminatory and requires tests to be administered in a child's native language.
- Clinicians should consider how a child might react to the assessment setting and what kind of developmental information parents might be reluctant to share.



THE ROLE OF THE SLP

- Remember to ask questions about the child's language development from the English as a Second Language (ESL) teacher.
- If you determine that further speech and language assessment is appropriate, be sure to conduct the assessment in the client's dominant language(s).
- If necessary, know how to work with an interpreter to complete an adequate assessment *
- Be able to understand that speech-language pathology services should be provided to those who have a language disorder.
- It is important to note that dialectal or language differences do not constitute a language disorder; however, a client may choose to receive these services (e.g. accent modification) on an elective basis



THE ROLE OF THE SLP

- Know the guidelines for determining the most appropriate language of intervention with bilingual and nonstandard English speaking clients.
- Know cultural factors that impact on the intervention process.
- Implement a culturally appropriate intervention program.
- Selecting culturally sensitive materials and activities.
 - Participate in Research.
- Be critical about research publications and new alternatives for evaluation and treatment.




**LANGUAGE DIFFERENCE
VS. LANGUAGE DISORDER**

Disorder

A significant discrepancy in language skills from what would be expected for a client's age or developmental level

Difference


Is a rule-governed language style that deviates in some way from the standard usage of the mainstream culture.



**LANGUAGE DIFFERENCE
VS. LANGUAGE DISORDER**

Some children from culturally different backgrounds have language disorders. When they do, the SLP's job is to provide remediation in a culturally sensitive way.


But many children from culturally different backgrounds who are referred for language assessment do not have disorders, only language differences.



**LANGUAGE DIFFERENCE
VS. LANGUAGE DISORDER**

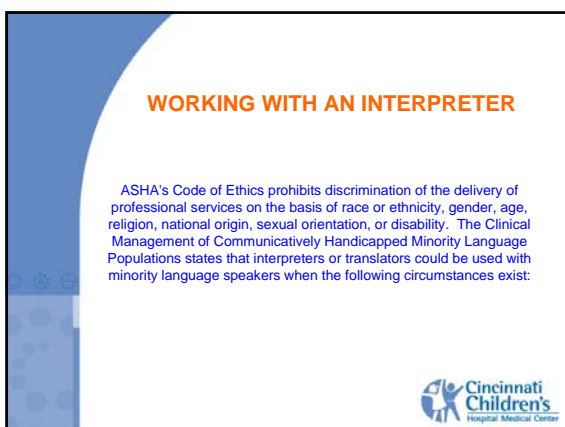
The clinician may deliver an educational program or consult on its development with a classroom or English as a Second Language (ESL) teacher.

Chapter 6 Child Language Disorders in a Pluralistic Society










WORKING WITH AN INTERPRETER

When the certified speech-language pathologist or audiologist on the staff does not meet the recommended competencies to provide services to limited-English proficient speakers.

When an individual who needs services speaks a language which is uncommon for that local area.

When there are no trained professionals readily available with proficiency in that language that would permit the use of one of the previously described alternative strategies.



WORKING WITH AN INTERPRETER


SELECTING AN INTERPRETER

Determine the interpreter's level of proficiency in both languages.

Obtain the interpreter's educational background and experiences.

Be aware of the interpreter's communication style.

Try to use the same interpreter so that you may establish a familiar working relationship



WORKING WITH AN INTERPRETER

PRIOR TO THE SESSION

Meet with the interpreter ahead of time so that the interpreter has time to adequately prepare.

Review the goals and procedures of the test and/or treatment materials.

Be certain that the interpreter understands your confidentiality policies.


Explain that the oral interpreter will need to limit non-verbal cues, such as hand gestures and vocal variation, which may impact assessment results.

Review test validity and reliability to be certain that the interpreter has an understanding of the need to avoid unnecessary rewording of testing prompts.

Establish a rapport with the interpreter.


Remind the interpreter to take notes on the client's responses.

Learn greetings and the appropriate pronunciation of names in the family's primary language or signs




**WORKING WITH AN INTERPRETER
DURING THE SESSION**

- Introduce yourself and the interpreter in the client's native language, if possible.
- Describe your roles and clarify the expectations.
- Use short, concise sentences.
- Pause frequently to allow the interpreter to interpret information.
- Allow enough time for the interpreter to organize the information for effective interpretation.
- Periodically check with the interpreter to see if you are speaking too fast or too slow, too softly or unclearly.
- Understand that words of feeling, attitudes and qualities may not have the same meaning when directly interpreted.
- Talk directly with your client.
- Be aware of your non-verbal body language and gestures which may be offensive to your family's culture.
- Avoid oversimplification of important explanations.
- Provide written materials in the family's native language whenever possible

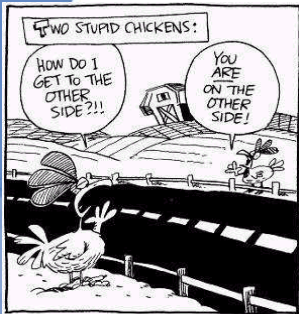


**WORKING WITH AN INTERPRETER
DURING THE SESSION**


<http://www.cincinnatichildrens.org/about/fcc/family/hispanic/default.htm>



ASSESSING BILINGUAL CHILDREN:




**The Big Question:
WHAT TO DO?**



**ASSESSING BILINGUAL CHILDREN:
WHAT TO DO?**

1. **Get the correct information**
(Disorder Vs. Learning a second language)


- Does the family believe there is a language deficit in his/her native language?
 - History of receiving ST in his/her native language?
 - Does the child have adequate hearing?
- Does the child need an ESL or bilingual program?
- Does the child read and write the native language at grade level?



**ASSESSING BILINGUAL CHILDREN:
WHAT TO DO?**

1. **Get the correct information**


- Are the child's academic skills near grade level in the native language?
- What specific aspects of the English grammar or vocabulary does the child lack?
- Is the child progressing in oral and written English?



**ASSESSING BILINGUAL CHILDREN:
WHAT TO DO?**

2. **Adequate actions**


- Placing the child with the appropriate SLP if further testing or therapy is needed
 - Placing the child in a program that develops his/her English while providing academic instruction
- Placing the child at the correct level of an ESL curriculum
- Providing ESL tutors or other instructional services if child does not show progress toward English proficiency or academic achievement



**ASSESSING BILINGUAL CHILDREN:
WHAT TO DO?**

2. Adequate actions

- Addressing specific weaknesses
- Providing access to technological resources
- Promoting parent and community participation in bilingual groups/therapy programs



BILINGUAL INTERVENTION-TREATMENT
What to do...

MONOLINGUAL THERAPY
BILINGUAL THERAPY
NATIVE LANGUAGE THERAPY




"RULES"
BASIC GUIDELINES WHEN MAKING THE SELECTION

CONSISTENCY
Whatever pattern you choose, stick to it.
Children are often disturbed when clinicians or parents break it.

RICH ENVIRONMENT
They need materials in both languages.

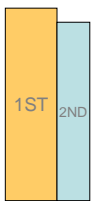
CHILDREN'S NEEDS FIRST
Children should not be forced into bilingualism if it makes them unhappy.

PLAYING IT DOWN
Make bilingualism seem like a natural and unremarkable part of family life.




BILINGUAL INTERVENTION-TREATMENT
MONOLINGUAL THERAPY

One language OR
1st and 2nd, both languages are delayed, and FIRST LANGUAGE IS CLEARLY DOMINANT

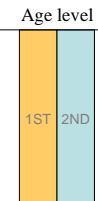


Introduce 2nd lang. When significant progress has been made in the first language -ESL tutor introduction/participation




BILINGUAL INTERVENTION-TREATMENT
BILINGUAL THERAPY

Child Dx with a bilingual communication deficit both languages below age level




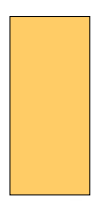
Developing both languages simultaneously



BILINGUAL INTERVENTION-TREATMENT
NATIVE LANGUAGE THERAPY

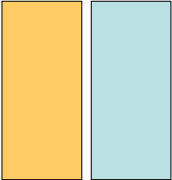
Same as providing any language therapy

Materials are to be culturally relevant and SLP must be culturally and linguistically competent to provide the treatment in that language



BILINGUAL INTERVENTION-TREATMENT
TWO WAY LANGUAGE THERAPY

ONE SLP in the first language
and second language
delivered by a second SLP











Gracias
Gracia