MULTILINGUALISM
in speech and language therapy

ADVICE FOR SPEECH
AND LANGUAGE
THERAPISTS
For Speech and Language Therapists it can be challenging to identify behaviours and linguistic features that fall under typical development in a bilingual setting and separate them from those that may be caused by a speech, language and communication difficulty. The following information is intended to better inform clinicians working with bilingual children.

**FREQUENTLY ASKED QUESTIONS**

**Is learning more than one language confusing for children?**

There is evidence that, when exposed to two languages, children develop two separate language systems. This differentiation process starts early on in infancy with the discrimination of two languages on the basis of phonology.

**Is switching back and forth from one language to the other a sign of communication difficulty?**

No. Children may use both languages in a sentence (code-switching), but this does not mean that they are not able to separate them. They may code-switch for different reasons; for example if a word does not occur to them in one of their languages, they may revert to the other one. They may also switch because a concept or a joke is better conveyed in their native language. Multilingual adults often code-switch too and this is actually a sign of linguistic sophistication.

**Should we advise parents to keep their languages separate?**

There is no scientific evidence suggesting that exposure to mixed input has a negative effect on a child’s ability to develop two separate language systems. The clinician should advise parents to do what comes naturally to them and reassure them that switching between languages is a sign of proficiency in the two languages.

**Can multilingual children who are very fluent in English be assessed as monolinguals?**

Children very often have a dominant language. This however does not mean that assessing them in their dominant language is equal to assessing a monolingual child in her only language. There is evidence that even receiving as much as 80% of the input in one language is not equivalent to receiving 100% (by input, we mean the amount of each language a child hears on a daily basis). Therefore, monolingual norms should not be applied to bilingual children.
**What is the best way to assess my client’s linguistic skills?**

Clinicians should consider all languages of their clients wherever possible and with the assistance of a bilingual co-worker or an interpreter. For example, when assessing vocabulary, research suggests that the best measure is Total Vocabulary which is obtained by summing the vocabulary scores in each language. You can also use cross-linguistic lexical tasks, non-word repetition tasks and parental questionnaires that consists of questions covering, among other things, early developmental milestones, family history and amount of exposure in each language.

**Should we advise parents of children with language disorders to give up their home language?**

There is no evidence showing that receiving input in two languages worsens language difficulties or slows down treatment. Instead, research shows that the best input in terms of supporting language growth is that provided by native speakers, possibly from several different people. For this reason, clinicians should not discourage parents from speaking their minority language at home in favour of English.

**USEFUL ASSESSMENT TOOLS**

To assess a child’s competence in his or her first language, you can ask the parents to complete the ALDeQ questionnaire. This consists of questions about early milestones, family history and current abilities and can be used to identify evidence of delay or difficulties in the first language. You can download the ALDeQ questionnaire by visiting the Bilingualism Matters section of the CeLM website.

To build a multilingual child’s case history, you can start by asking the family to complete the ALEQ questionnaire. This consists of questions about the child’s background, and specifically about the family’s migration history, the parents’ education level and the relative use of English and other languages at home. You can download the ALEQ questionnaire by visiting Bilingualism Matters section of the CeLM website.

Non-word repetition tasks have been shown to be a useful tool in the assessment of language disorders. The crosslinguistic nonword repetition framework is ideal for multilingual children because it minimises effects of language experience and knowledge. Sentence repetition has also been found to be a reliable indicator of linguistic knowledge and a good marker for SLI in school-age children.
WHO ARE WE?
The Centre for Literacy and Multilingualism at the University of Reading is the host of a branch of Bilingualism Matters, which provides research-based advice and information on child multilingualism to anyone interested in or involved with raising, educating and caring for bilingual and multilingual children.

HOW CAN WE HELP?
• Browse our website for more useful resources
• Get in touch if there is a specific topic you would like to know more about
• Invite us to give a talk about multilingualism and language disorders

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