

Towards a Better Understanding of Bilingualism: Considerations for Teachers of Children with Speech, Language and Communication Needs

Census figures show that more and more children in Ireland are growing up speaking two or more languages. While fluency in two languages is generally considered an asset for both children and adults, bilingualism is seen as a barrier to learning for children with special educational needs. The belief that developing two languages would be challenging for these children has been pervasive among education and healthcare professionals in Europe and beyond. This belief has informed both policy and practice, and for this reason for many years the majority of children with special educational needs have been deprived of the chance to become bilingual.

In recent years, international research has highlighted the benefits of bilingualism at the social, cognitive and educational level, and this has raised questions in relation to encouraging bilingualism among families with children who have special educational needs. Most of the research carried out in recent years shows that parents are advised to avoid bilingualism, to stop speaking their home languages, and to favour the use of the majority language or the language of instruction. However, research on bilingual language development has shown that children with language and communication difficulties can indeed grow up bilingually, and their abilities in each language does not differ from that of monolingual children who are affected by the same disorders.

The paper reviews relevant literature to shed light on the latest findings on bilingual language development in children with language disorders, and suggests possible solutions for some of the challenges faced by teachers.

Keywords: *Bilingualism; Education; Second language learning; Language impairment; Language disorders*

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INTRODUCTION

Ireland has seen a steady increase in the number of people who speak more than one language. According to the latest Census (Central Statistics Office, 2016) around 700,000 people in Ireland regularly speak a language other than English. Of these, 22,221 are pre-school children and 76,301 are primary school children who speak a language other than English or Irish at home. In addition, in the same year, 302 primary schools provided primary education through the medium of Irish to over 50,000 pupils. Research evidence from a variety of international studies points towards the many benefits associated with the regular use of two languages (Barac and Bialystok, 2012; Bak and Mehmedbegovic, 2017); however, it is still common for both healthcare and education professionals to advise parents to choose monolingualism over bilingualism, to better support the development of children who have additional language and communication needs (Yu, 2013). The advice to eliminate one language from a child's repertoire or to avoid bilingualism is not based on scientific evidence, and it has not been shown to have a positive impact on the child's linguistic development and on the family's ability to support the child. The aim of this article is to present some of the relevant literature that can stimulate reflection and inform the practice of those responsible for the education of bilingual children with speech, language and communication needs.

TERMINOLOGY

Speech, Language and Communication Needs in the Primary School Years

Children starting primary school are expected to be able to express themselves clearly, to interact with others, to communicate their needs, and understand what is said. Oral language skills are fundamental to successfully access the curriculum, develop literacy, and socialise¹. Children with speech, language and communication needs may struggle with some aspects of communication, and they may exhibit behavioural problems associated with the difficulty in self-expression and comprehension. In addition, these children may have difficulties developing literacy skills, which are essential to access most of the areas of the curriculum, and if they have difficulties in receptive language skills they may find it hard to understand spoken instructions, or they may need more time to process information. Speech and language difficulties might include incorrect pronunciation of sounds

¹. The Primary Language Curriculum (NCCA, 2015) addresses the importance of these fundamental skills by placing emphasis on practice and on supporting progression in children's language learning and development. The Primary Language Curriculum aims to support teachers to nurture language and communication skills, by fostering the children's ability to develop communicative relationships through language, to understand the context and structure of language and to explore using language.

morphemes and longer words, as well as possible difficulties following spoken language and constructing coherent narratives (Bishop, Snowling, Thompson, Greenhalgh and CATALISE-2 consortium, 2016). The term Developmental Language Disorders (DLD) has been recently introduced to refer specifically to some of these difficulties. Developmental language disorders are language problems enduring into middle childhood and beyond, which are not associated with a known condition such as autism, hearing impairment or Down’s Syndrome. In all other circumstances, the term ‘Language Disorder associated with X’ should be used (Bishop et al., 2016). These terms have been adopted in many different countries, including Ireland (Irish Association of Speech and Language Therapists, IASLT 2017)².

Simultaneous and Sequential Bilingualism

A child who can communicate in two languages is referred to as bilingual. The term itself is quite generic, and it does not mean that a child has developed two languages from birth or in early childhood. *Simultaneous bilingual* children develop two languages either simultaneously from birth or within the first two to three years of life. Exposure to two languages from birth does not guarantee fluency or equal proficiency in both languages and bilingual children who are raised in predominantly monolingual societies tend to have a dominant language (La Morgia, 2015). A child’s language dominance can shift over time, so it is possible for a child who is dominant in the language spoken at home to become dominant in the language spoken in the childcare setting or the school. When assessing the language skills of simultaneous bilingual children it is important to remember that they are exposed to varying degrees of quantity and quality of input in each of their languages, and they tend to use them for different purposes (La Morgia, 2013; Unsworth, 2016), so they should not be considered to be “two monolinguals in one” (Grosjean, 1989).

If children do not develop two languages simultaneously or within the first three years of life, they are considered *sequential bilinguals*. Similarly to simultaneous bilinguals, sequential bilinguals need regular exposure to both languages to develop them successfully (Unsworth, 2016b). Research has shown that there is a significant amount of individual variation amongst groups of sequential bilinguals, and outcomes can depend on a variety of different factors such as language aptitude, age, typology of the first language, quantity and quality of exposure to the second language as well as parental education (Paradis, 2011).

² Throughout this paper, *speech, language and communication needs* will be used as an umbrella term to refer to difficulties experienced by any child who needs language support. The term *developmental language disorder* will be used to refer to language difficulties that are not associated with known syndromes or other impairments.

Given the variation and the different trajectories of language acquisition of simultaneous and sequential bilinguals, it is common practice for researchers to investigate the context of acquisition and use of each language by using questionnaires. These tools are extremely valuable for early childhood educators and primary school teachers who want to gain a better understanding of the use of the languages outside the school environment and to profile the language learning history of their pupils (Paradis, Emmerzael, and Sorenson Duncan, 2010; Tuller, 2015).

ASSESSING LANGUAGE DIFFICULTIES IN BILINGUAL CHILDREN

Research on developmental language disorders in bilingual children has made significant advances since the seminal work by Paradis (2005). The key finding that emerges from recent research is that the gap between typically developing monolingual children and children with developmental language disorders is similar to the gap between typically developing bilingual children and bilingual children with developmental language disorders (Marinis, Armon-Lotem, and Pontikas, 2017). However, research also shows that bilingual children are over-diagnosed or under-diagnosed more than monolinguals (Grimm and Schults, 2014), and their language needs can be mistaken for special education needs (Lisiadou, 2013). Both simultaneous and sequential bilinguals can be misdiagnosed, but assessing language abilities in sequential bilinguals presents more challenges because it is difficult to disentangle normal second language acquisition from developmental language disorders. Testing skills in the new language is unlikely to offer a representative view of the child's linguistic abilities, and using other psychometric measures administered in a non-dominant language may also result in misdiagnosis. The difficulty in assessing sequential bilinguals is exacerbated by the fact that typical difficulties in second language learning are similar to those found in developmental language disorders. These include errors in the use of morphemes, limited expressive vocabulary, difficulty constructing narratives, production of sentences that are shorter or less complex than those of their peers, difficulty in using language for social purposes and in interacting with peers. (Kohnert, Windsor and Ebert, 2009; Tsimpli, Peristeri and Andreou, 2016; Vender, Garraffa, Sorace, and Guasti, 2016).

As suggested in the IASLT Guidelines for Speech and Language Therapists Working with Linguistically Diverse Service Users (2016), children should be assessed in each of their languages. However, this procedure is currently only possible through the employment of interpreters, who can help the speech and language therapist to better understand the child's competence, but cannot substitute a trained healthcare professional. There are problems associated with

using interpreters, which include their limited knowledge of speech and language therapy, differing dialects and cultures between the interpreter and the family and regular availability of qualified interpreters (IASLT, 2016). Therapy in the language spoken at home by family members can also be challenging, as it would be difficult for a speech and language therapist who is not familiar with the language to track progress.

THE VALUE OF SUPPORTING THE CHILD’S HOME LANGUAGE

One of the recommendations made by IASLT (2016) was to acknowledge that language is deeply embedded in a child’s identity and culture. Therefore, while it is important to support children to develop the language used in school, which will have implications for their socialization and academic achievement in the short and long term, it is also vital to value the language they use at home with their family members. First, some children may be more fluent in this language or they may prefer to use it. In addition, this language can allow the child to interact with the extended family and with members of the community, and it is therefore a fundamental medium of socialization and of construction of the child’s identity. A monolingual child in a bilingual family might feel excluded and might miss out on family interaction. It is also important to give parents the confidence that speaking their native language will not negatively affect the child’s development. Some parents may express themselves better and more spontaneously in their native language, and they would therefore represent a stronger language model.

In addition, it is clear that bilingualism does not cause language and communication difficulties. Research shows that children with language difficulties are able to develop two languages successfully, given the appropriate support (Ijalba, 2015). Parents of bilingual children with speech, language and communication needs should be encouraged to use the same language(s) they would use with a typically developing child (IASLT, 2016). Parents and teachers need to be aware that the advice to favour monolingualism over bilingualism has no scientific basis, and that removing one of the languages from the child’s repertoire does not reduce the impairment.

CURRENT CHALLENGES IN THE IRISH CONTEXT

In Ireland, as in other European countries, one of the main barriers in the timely identification of speech, language and communication needs in bilingual children

is the lack of tools that can fairly evaluate each of the child's languages. The lack of tools designed for bilinguals and standardized on the basis of bilingual norms is a barrier for the timely identification of language difficulties in sequential bilinguals who are learning English, but also in children who are fluent speakers of Irish, who currently access assessment and therapy in English. These challenges affect speech and language therapists but also teachers all over Ireland, who have seen an increase in the number of bilingual and multilingual children in their classrooms. Evidence from international studies shows that children with speech, language and communication needs who are learning an additional language are disadvantaged because of the lack of educators who can address both their needs as language learners and their special educational needs (McCray and Garcia, 2002).

Research within the Irish context also confirms that the lack of specialist training prevents teachers from providing appropriate support for bilingual children, both in schools where they are taught through the medium of Irish (An Chomhairle um Oideachas Gaeltachta & Gaelscolaíochta report, 2010; Barrett, 2016), and in those where they are taught in English. Since bilingual children represent a heterogeneous population, the challenge for teachers is to identify their needs, however they manifest themselves, and to address them using the right approach to suit the pupil.

One of the barriers in Ireland is the fact that most primary school teachers are not familiar with any of the most widely spoken migrant languages. This problem is exacerbated by the fact that primary school teachers need to show competence to teach the Irish language as well as a range of primary school curricular subjects through the medium of Irish (Department of Education and Skills, 2000), and this requirement makes it more difficult for foreign teachers who trained outside of Ireland to become eligible for teaching jobs (Mc Daid and Walsh, 2016). The same lack of linguistic, ethnic and cultural diversity is also present in the speech and language therapy profession, and linguistic barriers may prevent speech and language therapists who are trained in a language other than English from becoming eligible to work in Ireland³. The employment of teachers and speech and language therapists who are fluent speakers of the most widely spoken languages⁴

³. Where a candidate trained through a language other than English or where English is not the recognised language they are required to complete the International English Language Testing System. A Grade 8 or above (with no element below 7.5) is required on the I.E.L.T.S. (the highest score is 9). The exam alone does not guarantee validation, and applicants may be required to take the Clinical English Competence Examination.

⁴. According to the latest Census (2016), the five most widely spoken foreign languages in Ireland are Polish (135,895), French (54,948), Romanian (36,683), Lithuanian (35,362), Spanish (32,405).

has the potential to facilitate early identification of problems and could be an initial step towards the appropriate support of bilingual children and their families.

POSSIBLE SOLUTIONS AND FUTURE DIRECTIONS

Some of the problems described cannot be overcome in the short term. While new tools for assessing multilingual children are being developed (Armon-Lotem, de Jong and Meir, 2015), very little is known about best practice in intervention and in the support of these children in the classroom. However, it is possible to tackle some of the challenges in the clinic and in the classroom by implementing some small changes, which are achievable in the short term. The first step towards a better understanding of the linguistic skills and developmental pathways of bilingual children with speech, language and communication needs is raising awareness of the benefits of bilingualism. Professional training should provide teachers and speech and language therapists with sufficient knowledge to encourage families to maintain the home language, to investigate the context in which the child is acquiring and using the two (or more) languages, and to disentangle bilingual language development from language impairment. In addition, more opportunities should be provided to encourage professionals in healthcare and teaching professions working with bilingual children to learn more about other languages and to develop intercultural competence.

To achieve some of these goals, collaboration at grass roots is extremely important. In October 2017, the Irish Research Network in Childhood Bilingualism was established to advance understanding and improve practices in the area of childhood bilingualism by bringing together researchers from a wide range of disciplines with policy makers, teachers, early childhood educators, educational psychologists and speech and language therapists. While these collaborations are essential for advancing knowledge and establishing communication channels across professions, a long-term plan aimed at improving the learning experiences and the educational outcomes for bilingual children with speech, language and communication needs should be devised. This should include training in the areas of second language acquisition and bilingualism for all teachers and for healthcare professionals who are responsible for the assessment of children's language skills, and also the employment of bilingual and multilingual teachers and SEN teachers. More research is needed to understand the needs of staff working with bilingual children with speech, language and communication needs, and to develop tools that teachers can use to better disentangle bilingualism from language impairment and to allow these children to access the best possible education, which fosters diversity and inclusion.

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