Providing Assessment to Multilingual Children – Common Practices Used by Speech-Language Therapists in Austria

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Introduction

The pertinent issues relating to service provision including clinical assessment to multilingual children with suspected primary language impairment (LI), have been identified and discussed in the literature, also applies to Speech-Language Therapists (SLTs) in Austria. Continued globalization and immigration represented in nearly 20% of the Austrian population demonstrating a migration background, has resulted in growth in multilingualism, thus culturally and linguistically diverse patients.

Aim

This study aimed to investigate Austrian SLTs clinical assessment approaches to differentiate lack of language skills from a primary LI in multilingual children. In particular, which criteria SLTs do consider in order to derive a differential diagnosis.

Method

A quantitative, descriptive online survey method was employed. 81 practicing SLTs from all over Austria participated in this study. The questionnaire addressed the following areas: biographic information on the multilingual patients, the linguistic and professional background and skills of the SLT, a description of the assessment with respect to mode of intervention, use of materials / tools and interpreters.

Results

The patients’ cultural and linguistic diversity demand specific assessment practices of LI in order to assess children’s individual multilingual background and language knowledge system as well as the social and cultural contexts.

As difficulties with morphology are a core feature of primary LI, developmental information about morphology in bilingual children is an important tool for identifying language difficulties. However, the profiles of morphology development across languages are unlikely to be the same, e.g. for marking tense or subject agreement on verbs. Relying on these features as indicators of an LI in multilingual children may lead to errors of judgement, thus misdiagnosis.

Discussion

Assessment of language in multilingual children must include wider notions and self-reflections of SLTs. To inform professional judgement, we do not yet have unique clinical markers that distinguish between lack of language skills and primary LI. More research is needed to identify significant clinical markers as well as to assure best evidence practice for this group of patients.

References


