Differentiating Language Difference and Language Disorder: Information for Teachers Working with English Language Learners in the Schools

Raul F. Prezas PhD, CCC-SLP
Jacksonville University, prezasrf@sfasu.edu

Ahyea A. Jo PhD
Jacksonville University, ajo@ju.edu

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Raul F. Prezas

Jacksonville University

Ahyea A. Jo

Jacksonville University

Author Note

Correspondence concerning this article should be addressed to Raul Prezas, Department of

Communication Sciences and Disorders, Jacksonville University, Jacksonville, FL 32207. E-mail:

rprezas@ju.edu

Raul Francisco Prezas, Ph.D., CCC-SLP
Jacksonville University
2800 University Blvd. N., BRCHS, Jacksonville FL, 32211
P: 904-256-7218
E: rprezas@ju.edu

Ahyea Alice Jo, Ph.D.
Jacksonville University
2800 University Blvd. N. Founders 8C, Jacksonville FL, 32211
P: 904-256-7218
E: ajo@ju.edu

Abstract

In an era of growing numbers of linguistically and culturally diverse students in the U.S. schools, classroom teachers have a critical role in identifying the needs of all students, including bilingual students' language abilities and development. Oftentimes, teachers and other school personnel face challenges related to adequately identifying and meeting the language needs of children who are English Language Learners (ELLs). In many cases, children are often over- or under-identified for language-related support services and assessments. School teachers may benefit from this overview for making important decisions related to the language needs of bilingual children. A personal account as well as questions and discussions related to language difference and language disorder are offered, including suggestions for teachers who work with ELLs.

Keywords: language difference, language disorder, bilingualism, cultural diversity, teachers, public school, bilingual children

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Diversity and Multilingualism in US Schools

Classrooms in United States (US) public schools are becoming more and more multiracial, multicultural, and multilingual. Contemporary education in the US has experienced a rapid growth not only in the number of schools, but also in the diversity of students' native languages and diverse cultures and races. This trend is expected to continue exponentially (Garcia, 2011). Students who speak languages other than English at home (i.e., English Language Learners; ELLs) are making up a larger proportion of total school enrollment (Shin & Kominski, 2010). For example, 20% of K-12, school-age students spoke a language other than English at home in 2011 (US Census Bureau, 2011). With the increases in the number of ELLs in the school setting, it is predicted that public school teachers either have or will have at least one ELL in their classroom.

It is critical that teachers are knowledgeable in the identification of children who may need additional support services in the areas of language learning and bilingual development. Additional support would include information related to identifying bilingual children who may present with language concerns and who may require Response to Intervention and/or a comprehensive language evaluation. Is it a language difference or a disorder? Based on a case account, questions and discussion related to language difference and language disorder will be provided, including suggestions for teachers who work with ELLs.

Personal Account – A Bilingual Korean-English Speaking Student

Joy (a pseudonym and the co-author's niece), is a Korean-English speaking bilingual child who recently received two different sets of speech and language evaluations that were suggested by her school teacher. Joy is a 5-year-old child who has been learning two languages since birth (i.e., simultaneous bilingual). Joy's mother speaks to her in Korean and her father

speaks to her in English. She mixes her two languages often, which includes phrases and sentences with both Korean and English words. This linguistic phenomenon, referred to as code-switching, is when a speaker alternates back and forth between two or more languages (Garcia, 2011). Although she code-switches frequently, Joy uses the correct language or mix of languages appropriately depending on the speaker in order to convey concepts or thoughts she wants to deliver, which is a practice common with many bilingual children (de Jong, 2011). She experiences additional characteristics that are found in typically-developing bilingual children. For example, Joy has been described as thinking slightly longer when she is trying to speak in both languages. The hesitation prior to speaking, a common occurrence among bilingual children (de Jong, 2011), allows time for Joy to determine the correct words and phrases to use. Moreover, cross-linguistic effects, where features and/or characteristics of one language manifest in the second language, do occur in Joy's speech. Cross linguistic effects can be speech sound transfers or language (e.g., vocabulary) transfers that may occur from one language to the other (de Jong, 2011). Some of Joy's English intonation and accents, for example, mirror those of the Korean language.

Currently, Joy is enrolled in a public pre-kindergarten, which she has attended for the past 3 years. Joy's homeroom teacher, who is a monolingual English speaker, initiated a conversation with Joy's parents regarding concerns related to Joy's English language development. The teacher indicated a concern that Joy's English development was not age-appropriate and that some of Joy's English pronunciations/intonations were not accurate compared to other same-age children. The teacher proposed speech therapy to Joy's parents and began the initial process of evaluation. As a result, Joy received two language evaluations from different institutions; one by the school district and the other from a private institution. Based on

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the results from both institutions, Joy's speech and language skills were determined to be within

age expectations. As a result, individualized speech and language therapy was not indicated.

After the results from both evaluations were reviewed by Joy's family, her parents began

to question why school personnel initially had been concerned with Joy's development. They

expressed how anxious and worried they had been as they waited to receive the results. The

initial referral had come from Joy's classroom teacher who, as a monolingual English-speaking

professional, had primarily based her concerns on Joy's English language abilities. Based on a

study of parent and teacher ratings on language proficiency and ability, researchers have found

that while teachers are able to reliably provide information on English language proficiency, only

parents were able to reliably provide information on native (e.g., Spanish) language proficiency

(Bedore, Peña, Joyner, & Macken, 2011). In fact, professionals have reported uncertainty in

relation to working with children who are culturally and linguistically diverse, which

underscores the need for continued education and learning for professionals in this area.

Differentiating Language Difference and Language Disorder

There are many factors to consider when making the decision of whether a bilingual child

presents with a language difference or language disorder. Gillespie (2015, p. 1) defines a

language difference as "the result of the normal process of second language acquisition, and its

impact on the development of the second language". Although second language acquisition may

manifest as a delay in the second language (i.e., English), children with language difference have

language skills in their native language that are commensurate with typically developing

children. For example, a child's first language (L1) and second language (L2) may be developing

at the same time or sequentially and at a different rate of speed or pattern depending on their

linguistic environment. On the other hand, a language disorder is "characterized by deficits in

language comprehension and/or production in both the native language and the second language" (Gillespie, 2015, p. 1). Children with a language disorder struggle to communicate in both L1 and L2. It is important to differentiate children with a language disorder from children with a language difference. While some children may present with limited English language abilities (i.e., ELLs) and concerns arise related to skills in the language used in the classroom (e.g., L2 – English), this does not necessarily mean that a child has a language disorder. Many children have language systems that are appropriate in their native language as they are learning English as a second language.

Identification in the Classroom Setting. Bilingual/multilingual students in the classroom utilize varieties of language that are mixed, fluid, and dynamic. This is an increasing characteristic of the 21st century. One of the challenges that many professionals face, particularly classroom teachers, is determining whether or not a bilingual child is in need of additional help. Although teachers themselves are not responsible for making decisions related to language proficiency or assessment, teachers are in a very important role as early identifiers of students who may or may not need further observation and/or evaluation. Teachers are oftentimes the first professionals who have the opportunity to determine if a child needs additional supports in the classroom. When teachers confront the realities of teaching linguistically-diverse students in their own classrooms, they often report uncertainty and frustrations related to the understanding of differences in bilingual development (Shohamy, 2006) as well as a general lack of qualified bilingual staff or personnel who can help (Buysse, Castro, West, & Skinner, 2004). Fortunately, there are specialists trained to diagnose and identify children when there are concerns related to language use (e.g., Speech-Language Pathologists; SLPs). SLPs are responsible for assisting teachers with the process of identifying children who may need additional services through the

process of observation, identification, assessment, and treatment of children who have speech

and language related concerns. In addition to speech (articulation) and language, SLPs are

responsible for assisting with concerns related to voice (e.g., pitch level, vocal pathology),

fluency (i.e., stuttering), and swallowing, also known as dysphagia; for more information on

roles and responsibilities (American Speech-Language-Hearing, 2010).

Response to Intervention. In order to appropriately serve students' in concerns related to speech

and language, teachers and SLPs should work together within the framework of Response to

Intervention (RTI) to implement preliminary strategies that ensure the needs of children are

being met. Also known as a Multi-Tiered System of Support, RTI is a tiered framework used to

provide early detection and prevention through academic and/or behavioral support (at

increasing levels of intensity) to students in the school setting (Brown-Chidsey, & Steege, 2010;

Ehren, Montgomery, Rudebusch, & Whitmire, n.d.). There are three tiers of support within the

RTI framework. In Tier 1, which includes all students, teachers monitor student progress and

inform families and appropriate school personnel of any concerns should they arise. Family

members also may approach a teacher and indicate a concern. Oftentimes school-based SLPs

provide in-service trainings to teachers/staff and explain basic communication skills and

speech/language disorders; including things to monitor in the classroom. If a teacher does have a

concern regarding a student and his/her progress, a meeting with appropriate campus staff is held

(start of Tier 2) to consider the need for additional supports and/or observations. In Tier 2 and

matters related to speech and language concerns, the campus SLP participates as a consultant to

the teacher, observer in the classroom (observation and/or screening with parent consent), and

may offer teachers strategies and tools for working with a student (e.g., a list of target words that

teacher can practice with a student). After a period of time where the teacher has tried strategies

suggested by the SLP (usually a few weeks but varies based on student needs), data from Tier 2 is analyzed and a decision is made whether more individualized strategies/supports are needed for a student (Tier 3). The Tier 3 process is similar to Tier 2 in relation to consultation, observation, and suggestions for continued support. During Tier 3, however, the SLP usually is more involved and visits the classroom in order to model strategies and provide intervention (either one-on-one or in small groups, such as a classroom center).

As teachers are making decisions about student concerns, it is important to remember that concerns should be present in both languages for students who are bilingual. Oftentimes, teachers will need to consult with the families in order to determine if there is a concern at home as well as in the classroom (e.g., concern in L1 and L2). Collaboration with the campus SLP is important and encouraged throughout all three tiers. In some cases, consultation with bilingual professionals (e.g., bilingual teacher/SLP) is strongly recommended. Moreover, progress monitoring data is critical during all tiers of the RTI process (Harlacher, Sanford, & Nelson Walker, n.d.) and often will determine whether a child is recommended/referred for a speech and language evaluation.

Bilingual Speech and Language Assessment. Once RTI and other classroom strategies have been implemented, established, and progress monitoring data yields minimal progress in the classroom setting, bilingual children who are suspected of having a language disorder (including speech concerns) should be tested in both the native and second language (Bedore & Pena, 2008). Although bilingually-trained SLPs that can appropriately diagnose students who are bilingual are present in many areas, the numbers of available service providers who are bilingual are surprisingly low with the higher proportions of bilingually-trained SLPs residing in the larger states such as Texas, California, and Florida (ASHA, 2015). Results from national surveys have

consistently shown that, in the absence of bilingual SLPs, monolingual English-speaking SLPs

primarily rely on English assessments when making diagnostic decisions related to students who

are bilingual (e.g., Caeser & Kohler, 2007; Skahan, Watson, & Lof, 2007). As a result, ELLs are

often over- or under-identified for speech and language services, also known as

"disproportionality" (National Education Association, 2007).

Yet native language assessment is critical, for many reasons. Children who speak a

language other than English often have speech and language strengths in their native language

that are not observed when they attempt to speak English (L2) in the classroom. Without

information related to their native language, children may present as having a language disorder

when, in fact, they simply have a language difference and are learning English. Moreover, in

order for a student to qualify as having a language disorder and receive language services in the

school setting, language skills must be significantly low in both languages (Prezas, 2015).

The Individuals with Disabilities Education ACT (IDEA, 2006) and the American

Speech-Language-Hearing Association (ASHA, 2004) support the idea of the use of appropriate

personnel and native language speech and language assessment. For example, school districts

must ensure that trained and knowledgeable professionals are available to identify and assess

children (IDEA, 2006, Sections 300.304(c)(1)(v) and 614(b)(3)(A)(iv)). In addition, any

decisions related to bilingual/multilingual students should always occur in the native language

'unless it is clearly not feasible to so provide or administer' (IDEA, 2006, Sections

300.304(c)(1)(ii) and 614(b)(3)(A)(ii); Prezas & Rojas, 2011). Assessment of the native language

(through the use of an SLP paired with an interpreter or a bilingually trained SLP) is the only

way to determine whether a child has a true language disorder (i.e., deficits in both L1 and L2) or

a language difference (i.e., delay in L1 and strengths in L2). Based on the resources, therefore, an

appropriate evaluation for bilingual children should include a bilingually-trained SLP and/or a trained interpreter that can assist in the assessment of the native language (L1) of the student (ASHA, n.d.-a; Johnson & Saad, 2014; Langdon & Cheng, 2002). Formal and informal measures (in both languages) are used to make decisions related to eligibility for speech and language services. Most school districts should have procedures in place for campus staff to adequately request the assistance of a bilingually trained SLP and/or interpreter (Prezas, 2015, December).

Teacher Involvement in Language Identification and Assessment

Although teachers are not responsible for formal speech and language assessment, they are very important professionals that provide critical information (e.g., academic, social) to SLPs for determinations of educational need for services in the schools. In addition, teachers are directly involved in the process of identifying students who may have a speech or language disorder. Oftentimes, teachers make the initial referral to begin the process of RTI (as in Joy's case). If a teacher has concerns with a child's speech or language skills, it is important to initially consider several factors, which are shown in Table 1.

Table 1. Some Initial Considerations for Suspected Language Disorder

1. Whether parent(s)/Caregiver(s) have concerns
2. Languages spoken by the student/dialects
3. Language use (both at school and at home)
4. Proficiency in both languages
5. Whether concern is present in both languages
6. Age of child
7. Age of US public school exposure/enrollment
8. School Program (e.g., Dual-Language, English Immersion)

As teachers make initial decisions regarding whether a child is struggling in the classroom, it is critical to communicate with parents and collect background information about the student, including L1 language development and previous school experiences. Parental

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concerns are an important factor, and the teacher can help determine (with parent input) if those concerns are present in both languages. In order to account for linguistic differences in the school setting, most school districts in the US use a Home Language Survey. The Home Language Survey asks specific questions about language(s) spoken in the home to determine whether additional information related to language use is needed. If families indicate that they speak a language other than English at home, the child (in most cases) automatically participates in an English language screening process. This process may include language dominance testing (i.e., proficiency; where trained professionals (e.g., school diagnostician) administer formal assessments in each language. These data often are used to make placement decisions that may include a support classroom (e.g., English for Speakers of Other Languages) or a Dual-Language program. If children already are enrolled in a Dual-Language program (compared to an English Immersion program) there is an expectation that students in the Dual-Language program will have academic knowledge in both languages. Although academic knowledge and language of instruction may vary, depending on the model, this information will help professionals better understand which skills (and in which languages) the student has that knowledge.

A child who has previous English instruction in the school setting will likely have more English skills, for example, than a child who is a recent immigrant and is learning English for the first time, regardless of age. Yet, in some cases, age does play a factor as well. Children who are younger and come from a home environment where a language other than English is spoken will likely have more dominance (and skills) in their native language. Children who are older who come from the same home environment will have more English exposure through school instruction and experiences. Bilingual children, therefore, may need more time to develop their expressive language skills in L2 depending on age and age of US public school exposure (e.g.,

English; Levine & McClosky, 2009; Wright, 2010). Many bilingual and multilingual children often go through a period of observation wherein there is initially, little, expressive communication present, known as the silent period (Krashen, 1982; Lightbown & Spada, 2013). As time progresses, bilingual students acquire more learning in L2; however, it is critical for teachers to understand that children learning a second language often require as many as 5 years or more for mastery (Kohnert & Bates, 2002).

Teachers, who remain concerned with a student's language abilities after addressing many factors, can and should collect additional data related to deficiency areas in both languages. Receptive and expressive language skills, for example, can be addressed by informally evaluating a child's ability to do various tasks, which include answering WH questions, retelling a story, and following directions. Rojas and Iglesias (2009) advocate the use of narrative speech samples in both languages for bilingual children. These samples may be short and involve picture stories that the teacher can use informally to gauge a student's L1 and L2 abilities. In addition to collecting informal data, teachers are advised to consult the school-based, campus SLP with additional questions and concerns. The campus SLP can offer more specific suggestions and should be an active member in the identification process that precedes RTI. Once the decision is made to pursue a speech and language evaluation for persistent concerns that have been documented through RTI, the campus SLP will intervene and lead the evaluation. If a child qualifies for language disorder, documentation should show that deficiencies were present in both L1 and L2. Children who present with scores significantly low in both language and demonstrate an educational need (based on additional factors including grades and teacher report) should qualify for languages services in the school setting and receive language therapy.

What are some strategies teachers can use to develop and augment bilingualism in classrooms?

Bilingual children, who are receiving language services in the school setting, may receive instructions in both languages or solely in English depending on the school program models. Given what we know related to bilingual intervention strategies, there are two specific models that have been proposed in recent years: the Bilingual Approach and the Cross-Linguistic Approach (Kohnert, 2010; Kohnert & Derr, 2004). In the Bilingual Approach, professionals focus on target structures common to both languages. For example, if a child has speech sound errors, professionals would target sounds that are found in both languages (e.g., the /d/ sound). Moreover, language skills that are common to both languages (e.g., plurals) may be targeted in one language or both. This approach is supported by evidence that language transfer exists; which is the notion that skills in one language may transfer or generalize to the second language (Paradis, 2001). In the Cross-Linguistic Approach, professionals focus on skills unique to each language. For example, a Spanish-speaking child may need additional help with the trilled /r/ sound in Spanish, which is not a phoneme that exists in English. Other language-specific examples would include the English contractible copula (e.g., *He's tall.*; *He is tall.*). Kohnert and Derr (2004) recommend a combination of the two approaches and highlight the importance of considering several factors for choosing a child-specific approach.

Given the two approaches discussed above, consultation with the campus SLPs to determine target sounds/linguistic features of concern is critical. For example, if a bilingual (Spanish-English) child is having difficulty producing initial consonants (e.g., initial stops /d/, /t/, or /b/), the campus SLP can provide the teacher with selected target words to model and practice with the student in the classroom. Given the fact that stops /d/, /t/, and /b/ are present in both

Spanish (L1) and English (L2), it would be expected that generalization would occur from targeting the sounds in one language only (e.g., L2 – English). The American Speech-Language-Hearing Association has information related to shared and unshared sounds in various languages (ASHA, n.d.-b).

Additional recommendations for increasing bilingual children's learning include promoting peer interaction, allowing and encouraging bilingual interaction in the classrooms, and providing linguistically and culturally appropriate topics (Cummins, 1997; Krashen, 1982; Ortiz, 2001). Offering a variety of opportunities to work and practice different language forms and function in the English language will enrich English language development for bilingual children (Levine and McLoskey, 2009) as well as shared constructs in the native language (Kohnert, 2010). Classroom teachers are recommended to implement the bilingual strategies mentioned above, which will benefit ELLs, bilingual and multilingual children's language development on both languages while providing them with an equitable learning environment. Campus SLPs have various tools and word/sound lists. Flashcards with short, one- or two-syllable words for practice, for example, are recommended. Another example would be the use of vocabulary in story content to improve comprehension and, if needed, oral expression (story retell). If a bilingual child has difficulty sequencing information from a story, books that are printed in both languages exist and could be incorporated in the classroom. Moreover, supporting parents/caregivers and inviting involvement in their child's learning are recommended and will augment the experience of the learner.

Summary

Public school classrooms in the US are already multilingual and multicultural. Numerous bilingual students are in the process of developing two languages and each child's bilingual

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development may be unique. Bilingual children's language development is complex and

classroom teachers need to consider a variety of factors, including case history, language

sampling, L1 and L2 environment, appropriate testing, and whether formal instruments are

needed (ASHA, 2009). The most important message for teachers who are taking the initial step

for student speech or language referral is to not solely rely on English observation. It is a subtle

and sensitive area of differentiating between bilingual children's language development with

language disorder. Given the fact that there are disproportionate numbers of bilingual children

over-identified in special education who are receiving language therapy rather than bilingual

language support or English as a Second Language (ESL) program (Artiles & Ortiz, 2002; Ortiz,

2001; Sullivan, 2011), it is critical to prepare teachers and administrators to work with growing

populations in the area of language acquisition, acculturation, and how ELLs learn (Fernandez &

Inserra, 2013).

There are millions of children like Joy growing up in the U.S. who are attending public

schools. Most of these children present with adequate speech and language development despite

the fact that they are bilingual. It is important to remember that information from parents and

caregivers provides valuable insight into the abilities of the child. In fact, researchers have found

that parent reports provide accurate estimates of a child's vocabulary (Gutierrez-Clellen &

Kreiter, 2003) and can serve as important progress monitoring of a child's abilities (Mancilla-

Martinez, Gámez, Banu Vagh, & Lesaux, 2016). However, it is equally important to consider

information from classroom teachers. Other investigators have found that contributions from

multiple perspectives (i.e., parent, teacher) provide a wider view of bilingual children's language

development (Dubasik & Svetina, 2014). Therefore, professional development for classroom

teachers should encompass language acquisition and multiple aspects of bilingualism. Learning

how ELLs learn additionally guides teachers to differentiate between language difference and

language disorder; which better serves the growing populations of linguistically diverse children.

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