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Modules

1 Overview, Myths, Bilingualism & CAS

2 Assessment of CAS in Bilinguals

CAS Treatment Approaches for Bilinguals

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Disclosures

- Relevant Financial Disclosures
- 。 Christina is employed as a professor at Portland State University
- Relevant Non-Financial Disclosures
- 。 Christina is a member of Apraxia-Kids Professional Advisory Council
- $_{\circ}\,$ Ashley, Brenda, and Izela have no non-financial disclosures.

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Bilingual CAS Treatment Strategies	
Bilinguals with CAS:	
Module 3	
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Learning Objectives

- The participant will be able to
- 。utilize motor learning principles in treatment for bilingual or non-English speaking children with CAS
- select appropriate segmental, phonotactic and suprasegmental goals for bilingual children with CAS
- 。understand ways to incorporate caregivers in treatment in the home language.

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Intervention Research

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Evidence-Based Treatment for SSDs^{34,35}

- Many studies of treatment for SSDs in the last 50 years!
- 。134 between 1979 and 2009
- $_{\circ}$ Over 100 more speech treatment studies between 2009 and present
- Growth in studies over the last 10 years! Quality of evidence
- 。~15 % randomized control trials
- 。 50% experimental studies non-RCTs
- 。35% nonexperimental and case studies

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Evidence-Based Treatment for CAS

- Increased dramatically over the last 20 years
- Quality of evidence increasing
- Research on different aspects of treatment
- 。 Targets
- Approaches
- 。 Treatment conditions
- 。 Feedback

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Evidence Treatment for SSDs: Multilingual Studies^{31, 36, 37, 38, 39, 40, 41, 42}

- A total of 8 studies published in English
- 。4 studies between 1979 and 2009
- 4 studies between 2009 and 2021
- 10 children total; all learning English
- 2 Spanish-English, 2 Punjabi-English, 2 Cantonese-English, 1 Arabic-English, 1 iXhosa-English, 1 Portuguese-English, 1 Hindi-Gujarati-English
- Quality of Evidence
- 7 case studies
- . 1 experimental design

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Bilingual Treatment for CAS Evidence³¹ • A total of 1 study published in English • 1 Spanish-English (subset of SSD study) • Experimental single-subject design

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Bilingual Treatment Summary Findings

- Most researchers found cross-generalization occurred
- improvement in phonetic inventory, accuracy measures, and intelligibility in languages that were not treated or that received less intervention.
- $\bullet\,$ A variety of intervention approaches and settings were successful.
 - 。 Individual differences in
 - · when to treat each language,
 - order of treatment of languages,
 - · when to switch languages,
- 。 Importance of treating and monitoring both languages

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Some Research on Intervention Approaches

- Treat in 1 language
- . Most likely to see transfer from home to L2
- Treatment for both languages eventually needed
- 。 Some effects of treatment won't transfer
- $_{\circ}\,$ Some sounds need specific instruction if different across languages.

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Multilingual Children

- Similar needs as monolinguals
- Treatment approach must fit CAS characteristics
- Need to decide which language(s) to treat in, emphases on language properties
- Consider past, present and future needs in language choice(s).

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Intervention for SSD

- Monolingual & Bilingual children need individualized
 - . Treatment approach
 - Plan for language(s) of intervention
- · Heterogeneous nature of bilinguals
- . Who speak languages with
- 。 Proficiency
- . Use

. US

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Goals for Multilingual Speech Intervention

- Increase intelligibility, sound and word shape inventory and
- Increase overall communication in both languages
- Increase functional use of speech
- Address academic setting needs as appropriate
- Consider interplay between phonological systems of languages
- Treat languages efficiently and effectively
- Transfer strengths across languages

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4.5

 Same for bilingual as for monolingual When each child receives best intervention for their motor planning needs
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Intervention Approach

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Pacilitation of overall communication Includes Intense motor-based speech treatment Likely will include Augmented or alternative communication Promote language development Increase intelligibility Low- or high-tech

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Importance of Bilingual Therapy⁷

- Children with speech and/or language disorder
- 。Need as rich a communication environment as possible
- Reduced child internal factors affecting motor planning
- Need for enriched external factors
- Bilingual children with CAS need intense therapy in both languages

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Bilingual CAS Treatment

- Bilinguals with CAS at greater risk of losing their L1
- Bilingual child needs support in their twophonological system
- 。Same prognosis for success as monolingual
- Generalizability deficit in CAS

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Benefits of Bilingual CAS Therapy

- Comprehensible to child and family
- 。Family can support treatment in L1
- Child with CAS may have more difficulty generalizing new skills to second language.
- Facilitate learning of both languages (interrelated)
- Encourages generalization

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Using L1 in Treatment^{30, 31}

- Can use L1 to strengthen L2 (English)
- Learn new information in stronger language, transfer to second language
- If start with home language
- More efficient
- More opportunities for generalization of treatment

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Difficulties in CAS

- Motor planning and programming that all aspects of speech, including
 - 。Phonemes, phonotactics, prosody
 - 。Sequencing movements
 - $_{\circ}$ Generalization to new environments

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Treating Speech Motor Planning Deficits

- Looking to increase
- Motor planning and programming for speech movements
- Building to
- 。 Automaticity of movements
- 。Generalization of knowledge

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Principles of Motor Learning^{14, 32}

- Process of acquiring the capability for producing skilled action
- Attention must be on intent to learn & improve movement
- Occurs as a result of experience and practice
- Motor performance vs. motor learning differ
- Foundation of most treatment approaches for CAS

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Precursors to Motor Learning

- Learner is the locus of control. Improvement greatest if
- Motivated
- by success
- by transfer
- Focused attention
- Appropriate supports
- Language needs and interests
- Critical for Bilingual CAS

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Treatment Conditions

- 。 Drill to Natural Setting
- $_{\circ}$ Frequency & length of sessions
- 。Language(s) of bilingual sessions
- Variability
- 。Generalization Transfer of Motor Learning

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Other Principles • Feedback • Rate • Self-Monitoring

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Motor Learning Approaches Require

- Best # and type of stimuli to facilitate motor performance & motor learning
- Ample opportunities
- Quality practice (focused attention & feedback)
- Mass practice & functionality

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CAS Motor Learning Treatment Approaches³³

- DTTC, ASSIST, ReST, PROMPT
- General motor treatment components for CAS
- $_{\circ}$ "Watch me, listen to me, and do it with me"
- 。Cueing strategies for motor movements
- Attention to/modification of rate for success
- Prosodic components

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Formal Treatment Approaches

- · Mostly a starting point
- Combine treatment approaches
- 。 Take what works best for a particular child
- Assess your efficacy
- Be ready to adapt
- Incorporate additional elements as understand needs of child

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Language of Intervention Factors

- How well does child speak L1 and English
- Is it possible to conduct treatment in English?
- What language is spoken in home? Who speaks it and in what situations? How frequently is child around it?
- Is maintenance of L1 important to the family? The client?
- Is there support from school, academic setting for home language?

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Bilingual Intervention Approaches 31,36,37,38,40

- Effective for Improvement in both languages
- _o May be more efficient than monolingual treatment
- If treat in 1 language, treat more in L1 (stronger language)
- $_{\circ}$ Most likely to see carryover from L1 to L2
- Treatment for both languages eventually needed
- 。Some effects of treatment won't transfer

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Which Language to Focus On?

- In most cases, a multilingual child needs intervention in all languages
- · Bilingualism is the best choice
- Need both for social & communicative function
- · Without both, limit future opportunities
- Intervention of L1 won't jeopardize attainment of L2

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Timing, Language Choice, Future Planning

- Elective vs. Circumstantial Bilingual
- Simultaneous vs. Sequential Bilingual
- · Languages families speak
- Current language environment of child
- Who the family interacts with
- Daily/Annually/Occasionally
- Value of language for
- Child

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Exceptions to Treating Both Languages

- Only home language
 Not in school yet

 - English not yet functional. Wait!

 - Home language immersion
 Child with severe CAS or other
 disabilities
 Who needs strong foundation in
 communication first
 - Limited exposure to school
- language • Not now doesn't mean not
- Only school language
- Speech and communication skills functional in both
- Focus on school with transfer to home
- Communication skills for English
- academics poor
- If home language English and L2 is elective(?)

Consider Language(s) of Intervention

- Current communication needs
- Future communication needs
- What other supports they are receiving
- Language needs will change over time

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Some Models for Bilingual Treatment

- Bilingual SLP only
- Monolingual + Bilingual SLP
- English SLP + Bilingual Paraprofessional
- . Well-trained in treatment methodology
- SLP & Interpreter with Parent
- English SLP + SLP-Trained L1 Interventionist
- 。English portion SLP
- 。L1-SLP Trained & Monitored individual

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Select Language(s) of Intervention

- Monolingual in L1
- Monolingual in L2
- Bilingual
- 。Skills common to both languages treated in both languages
- Crosslinguistic
- 。Attention to specific aspects of either Spanish or English

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If You Don't Speak Child's L1 • Learn the phonological, articulatory, phonotactic, and suprasegmental properties of L1. • And relationship to L2 • Find out important words and phrases in both languages (FCPQ)

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Difficulties in CAS

- Motor programming
- Consonants, Vowels, Suprasegmentals
- Sequencing
- Generalization
- Want to consider adding new information, generalizing what child can already do

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Other Thoughts on Targets

- Meaningful stimuli
- 。Relevant to child's communication
- $_{\circ}$ Appropriate phonetic complexity
- Impact on language
- · Impact on intelligibility

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Bilingual SLP Intervention Treat in both languages Determine ratio of therapy to child's current communication needs Ratio will change over time Emphasize functional communication⁴³ Treatment goals (sound, word shape, prosody) Key words & phrases in both languages that contain goal sounds Functional parent communication questionnaire – English & Spanish

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Bilingual Target Selection Approaches • Use functional targets in both languages • Within context of motor planning and execution complexity • Key utterances • Consider: • Shared L1 & L2 phonemes/properties • Overall effect • Greater generalizability

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Choosing Across-Language Targets • Errors rates similar in both languages • Consider importance of syllable or segmental property in both languages

• Phonologically, morphologically

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Unshared L1 & L2 Targets

- Intervention only required in one language
- Typically selected after treated cross-language targets
 - . May treat earlier if
 - Language treated in is of greater functional importance to child
 - Large effect on intelligibility

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Transfer Effects in English

- Select targets and procedures that yield the greatest amount of transfer possible in shortest amount of time
 - Intra-linguistic generalization results in improved performance on untreated targets in a variety of conditions
 - Inter-linguistic generalization can increase communication across L1 & L2.

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General Consonant Phoneme Categories

- Early
- Stops, nasals and glides labial & alveolar
- Middle
- Velar / Other places
- Voicing distinctions
- 。 Frication
- Late
- 。Liquids
- 。Elaborated consonants

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- Consider
- Function & frequency of sounds
- 。 Acoustic properties
- 。Cross-linguistic effects

d consonants

Initially Use Early Speech Properties

Consonants: /p, b, t, d, m, n, w, j/
 Vowels: /i, I, e, ε, θ, a, æ/

• Word shapes: CV, CVCV, CVC, CVCVCV

CV Frames

。Labial + Central Vowels

。 Alveolar + Front Vowels

。 Velar + Back Vowels

Prosodic patterns

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Bilingual SLP Intervention Planning

- Think of language properties in one language as treat other.
 - E.g., Longer phrases in English prepare for longer words in Spanish
 - And vice versa
- 。Complex word shapes in Russian prepare for complex word shapes in English
- If few final consonants in home language, focus on other properties in English initially so can transfer
- Not producing final consonants may not be a sign of disorder in this case
- Ratio of English to L2 will differ dependent on child's current need

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Encourage Cross-linguistic Transfer

- Promotes
- 。 generalization
- $_{\circ}\,$ depth of linguistic understanding
- 。bilingual facility

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Ways to Encourage Cross-linguistic Transfer

- Look at cross-linguistic correspondences, differences
- Activity possibilities
- Translating from one to other
- Highlight similarities and differences
- E.g., home interviews, discuss in therapy
- Back-and-forth vocabulary books

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Bilingual Intervention Approach

- Teach metaphonological transfer
- "We said words with /s/ in phrases today. What are /s/ words in Spanish? Yes, those have /s/ sounds! Now let's say them a few more times, and in some longer phrases!"
- "I was listening to you working with Maestra Marquez. You said lots of words in Spanish with /l/. Do you remember some? Now let's practice some in English!

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Bilingual CAS Treatment Methods

Frequency and Intensity

- Provide frequent and intensive treatment in both languages
 - 。For example:
 - Per week, 2 sessions in L1 and 2 sessions in L2
 - In a single session, 20 minutes in L1 and 20 minutes in L2
 - Do 5 targets in L1 and 5 targets in L2

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Bilingual Treatment

- Drill play, narrative, storybook
- Prepractice target words
- Alter languages per session?
- $\bullet\,$ Begin (or end) session with 10 minutes of application to 2nd language
- Coming up with functional words and phrases in other language that meet goals
- $\bullet\,$ Practice a few words in other language, then build story around it.
- Think improvement in whole system

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Other Ways to Support Home Language

- · Teacher training
- Teacher collaboration
- Create peer-mediated intervention strategies in L1
 - 。Planned play with typical peers
 - 。 Classroom peer mentors
 - 。 Social language groups (around school topics, events)

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Other Ways to Support Home Language

- Caregivers/Sibling training (with interpreter)
- $_{\circ}\,$ Seminars, workshops on CAS
 - Motor planning deficits
 - 。 Principles of motor learning
- 。Brainstorm ways to encourage target phrases
 - $_{\circ}\;$ Prepractice with SLP, activities at home
 - 。 Talk about feedback, rate, precursors
- 。 Sibling-mediated activities

Parents as Communication Partners Intervention by trained parents as effective as by SLPs Consistent with federal mandates for partnerships between parents & professionals

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Interpreter Role

- During consultation, meetings
 - Traditional interpreter role
- Direct child interactions
 - Direct communication in L1 when appropriate
 - Interpret your guidance to communication partner
 - Explain what SLP is doing if SLP:Child Interaction

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Involve Others

- Bilingual SLPs
- Paraprofessionals
- Teachers
- Parents
- Siblings
- Extended family
- School buddies

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Importance of Bilingual Considerations¹⁸

"Language treatment approaches and considerations for bilingual families may be impacted not only by differences in families but also by the clinician's cultural lens, experiences, expectations and implicit bias."

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Importance of Parent Collaboration

- Differences across cultures in parent "knowledge" of child development
- o Individualistic US household or collective Spanish-speaking household
- · Family "buy-in"
- Parent education, Functional communication in both languages
- Language environment to support carryover and generalization
- 。 Motor skills and motor learning
- Parent report as a screening tool and guide for functional targets

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Professional Misconceptions

- Cultural Perspectives
- . Views on disability
- 。Parent involvement will look different in different cultures
- · Parent-child interaction
- · Parent-SLP interaction
- Barriers and facilitators to services and resources
- 。Language barriers, transportation reliability, work flexibility

What to Tell Parents • Children communicating at highest level with parents • Continuing to develop language and cognitive skills • Encourage them to continue using L1 at home with 。Provide complex, accurate language model Any use of L1 at home, both oral and written, will benefit the child's cognitive development. This will transfer to cognitive and academic development in L2 when students acquire L2 communicative patterns.

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Treating a Bilingual Child with CAS

SPANISH-ENGLISH BILINGUAL APPLICATION

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Thinking About CAS in Spanish

- Spanish has
- Fewer vowels, larger vowel space for each vowel
 No voiceless stops or fricatives
- Few meaningful contrasts of
- Final consonants
- More meaningful contrasts of CV syllables in multisyllabic
- Syllable-timed language
- Prosody patterns dependent on length of word (stress second to last syllable)

Angel - 3;9 Spanish Preschool (2 years) • Evaluation in Spanish. • Found • Inconsistent repeated production of words • Excess equal stress • Difficulty transitioning, errors increase as get longer • Inconsistent consonant and vowel errors • Vowels <60% correct • Diagnosis of severe CAS

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Angel - Treatment Plan at 3;9 Intervention considerations in a non-English speaking child Current and future communication needs What other supports they are receiving Treatment Spanish-only Strengthen phonological foundations in motor planning More articulatory practice possibilities Meaningful practice at home Goal to eventually transfer from stronger (L1) to weaker (L2) language

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Angel at 3;9: Spanish-Only

- Bilingual SLP
- 2x/week, two 50 minute sessions
- Integral Stimulation Approach. Backward chaining
- Targets
- 。Early /Shared Phonemes
- 。Sequencing of meaningful CV syllables in words & phrases
- Multisyllabic Spanish words
- Prosodic factors
- Apply to future multi-word utterances in English

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Angel's Spanish Treatment Provided

- Lots of practice in <u>functional</u> words . Will not be in English environment for 1½ years
- More rapid progress if functional speech goal
- Home practice in functional settings to support treatment
- Increased speech output
- Existing consonant & vowel inventory
- Work on functional word length in Spanish. CVCV
- 。Work on sequencing sounds
- Practice long words & phrases with simple syllable shapes in Spanish

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Angel: 5;6 Shift in Intervention

- Angel in Kindergarten
- 。Lost contact
- 。Treatment in English (at school with English-only SLP)
- Not effective
- Contacted by English-only SLP about Angel
- Reassessed to determine
- 。 current language level
- Bilingual approach, English at school, Spanish in clinic

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Angel – 6;3 to 8;9 (1st through 3rd Grade)

- Sequential Bilingual
- Collaborative Model (university clinic / school)
- 。1 hour/week English School SLP
- 。 2 hours/week PSU clinic
 - 。3 out of 4 sessions Spanish, 1 English
 - Homework assignments, family involvement in clinic

Angel: Intervention Goals in L1 & L2 • Both languages 。Longer word shapes 。Reduce /s/ distortion 。Working on phonological properties that transfer 。Increase multisyllabic words & phrases; cluster-level accuracy • Language-specific 。Rhotics in Spanish and English 。Treatment in English for vowels

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Angel - Emerging Bilingual in 3rd grade • Treatment in both languages

- 。Academic focus (literacy, narratives, homework)
- Crosslinguistic practice
- Support academic skills in Spanish for depth of learning
- Transition to English-only therapy

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Angel – Intervention Summary

- Early treatment in Spanish-only
- 。Strengthen phonological foundation
- 。 More articulatory practice possibilities
- . Meaningful practice at home
- Easier to transfer from stronger (L1) to weaker (L2) language
- Bilingual treatment later to match educational setting

Examples of Different Bilingual Approaches to Meet Different Needs of Children with CAS

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Rubén, 5;4 Severe CAS

Sequential Spanish-English Initial Focus on Home Language

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Rubén: Background

- Home 90% Spanish
- 。 Mother monolingual Spanish
- 。 Father Spanish dominant
- 。2;0 sister
- Kindergarten 75% English
- CAS Intervention
- ∘ 5;0 5;6 English-only
- 。Little to no progress
- Factors: primarily English, not intensive format

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Rubén: Change in Intervention

Treatment study (University Clinic)

- 5;6 5;8 Spanish & English (3:1)
- Significant changes in Spanish and English
- When Spanish/English treatment,
- 。Speech improved in both languages
- Parent & teachers note greater overall change when Spanish included

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Shift in Language Use & Intervention

In-between (Kindergarten)

- 5;10 6;4 English-only
- Moved one hour away
- Treatment in English (at school with English-only SLP)
 - 。Not effective

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Shift in Language Use & Intervention

Return to University Clinic 2 times/week, 1 hour

- 2:1 Spanish to English. Focused on Spanish because
- Children's skills stronger in Spanish
- 。Parents could aid with practice words, phrases
- Children could discuss and apply information from Spanish to English
- Assistance in generalization through application

Move to full English by 2nd grade

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Rubén – CAS Intervention Approach Integral stimulation

- Treatment emphasis on Spanish
- 。Strengthen overall phonological foundation, motor planning skills, learn new articulatory movements
- More articulatory practice possibilities
- Meaningful practice at home
- Easier to transfer from stronger (L1) to weaker (L2) language

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Rubén: Bilingual Treatment Summary

- Early treatment focused more on Spanish than English
 - Children's skills stronger in Spanish
 - Parents could aid with practice words, phrases
- Children could discuss and generalize information from Spanish to English
- Some treatment in English
- 。 English targets same as Spanish within different context
- Shorter English words in carrier phrases
- · Learning new vocabulary
- Improvement in both languages • Transition to treatment in English
- · Spanish as foundation to learn new concepts

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Xavier, 9;2 Severe CAS

Expressive English, Receptive Bilingual Add Home Language

Xavier - English-only "Choice" • Diagnosed with severe CAS at 2.

- Parents monolingual Spanish
- Home environment Spanish-English
- 。Older sibling speaks English. All others Spanish-only
- Parents told
- $_{\circ}\,$ CAS too difficult for bilingual
- 。Accept only English from Xavier (more important)
- 。Learn to speak English
- 。CAS intervention in English

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Xavier - Current Situation

- Receptive Spanish
- Expressive English
- Concerns
- 。Academic
- 。Behavioral
- 。 Communication

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Xavier – Decision

- Speak in Spanish at home
- Switch therapy in Spanish/English
- $_{\circ}$ Parents can support him
- . He can communicate with community

Jean, 4;6 Moderate CAS

English-French Home Environment English therapy, French generalization

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Jean: Background

- Mother English-French bilingual
- Maternal family French or French-English
- Father English, some French
- Older siblings French/English
- SLPs advised to speak English-only

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Jean: English-French "Elective" Bilingual

- Consultation
- 。Goals for child
- 。Needs for communication with family
- 。Shared experiences with siblings
- Parent decision to enroll in bilingual school
- 。Continue French-English
- 。Parent learning strategies to support French

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Jean: 2 years later

- In bilingual kindergarten
 - 。 Better in English, basic French
- Therapy in English, home application in French
- A bilingual child with CAS
- Positive Outcomes
 - 。 Same languages as sibling
 - 。 Communicate with extended family
 - 。 Full family participant in language situations

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Kaitlin, 5;4 Moderate-to-Severe CAS

English-Only Home Environment Spanish-English Intervention

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Kaitlin: Elective Bilingual

- English-only child
 - Family L1 English
- 。Siblings in Spanish-immersion school
- 。Place in bilingual school?
- Family factors
- 。Same experience as siblings
- . Advantages in overall language learning
- 。 Many Spanish-speakers in community
- Bilingual SLP
- Decide immersion and bilingual intervention approach

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Kaitlin: 7;6 (3 Years Later)

- Therapy 2 hours/week in English, $\frac{1}{2}$ hour per week in Spanish
 - 。 Improvement in both languages
 - 。 Increase from 65% to 85% intelligibility in English
 - Late developing consonants not accurate in both languages yet
- Better at shared phonemes of English in Spanish
 - 。Simpler syllable shapes?

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Kaitlin: 7;6 (3 Years Later)

- Thriving
 - 。Other kids learning Spanish, too!
 - 。 Everyone gets corrected in Spanish
 - 。 Confidence and participation increase
- Still has CAS
 - $_{\circ}\,$ Struggles in both
 - 。Resorts to gestures at times

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Cruz, 11;0

Moderate-to-Severe CAS
Focus on Academic Language

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Cruz: Background • Born in U.S., older sibling • Attended English-only preschool • First assessment at 4 • Only communication delay • Moved to Mexico at 5 • Stronger English at that point, but little spoken language. • Parents told "would speak when ready" • One hour per week of services to speak Little education?

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Cruz - Background

- Return to US at 9
- Highly unintelligible
- Pre-literacy level
- Limited academic instruction
- Bilingual SLP requests additional assessment/consult
- Co-assessment with English-only SLP

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Cruz: Intervention Planning

- Full assessment in both languages
- FCPQ (adapted for older kids) English
- Input from teachers and aides
- Moving to middle school
- English-only? Life skills?
- Family fine with Spanish
- 。Communicates with friends
- Child's goals
 No AAC

Cruz: Intervention Phase 1 (3 months)

- Intense Spanish approach
- Teach about CAS and about therapy in Spanish
- Used DTTC approach
- 。Single words to longer phrases
- 。Full consonant production
- $_{\circ}\,$ Smooth movements between sounds
- 。 Prosody
- 。Self-monitoring, rate, drill, cueing strategies
- Focus on academic language

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Cruz: Shift to English Intervention

- Initially resistant
- Start single words in English
- Apply same goals as Spanish to English
- Discuss important words & phrases
- Work with interpreter on application of strategies in Spanish to English

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Cruz - Intervention Summary

- Start with Spanish targets
- Learn about CAS treatment in Spanish
- Move to English with Spanish consult
 - Same targets as Spanish within different context
- Shorter English words in carrier phrases
- Learning new vocabulary
- $_{\circ}$ Easier to transfer from stronger (L1) to weaker (L2) language

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Different Needs – Similar Consulting

- Both Spanish-speaking families from Mexico
- Both children were suspected of CAS by their school SLPs.
- Both were assessed and determined to have CAS
- Provided intervention twice a week for 50 minutes
- 30 minute parent coaching sessions once a week

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Memo 5;6 Severe SSD Sequential Bilingual

- Effectively monolingual Spanish speaker
- 1st year in public school (kindergarten)
- First IEP
- Family in the U.S for 2 years.
- Lives at home with mom, dad, and two older brothers (10 and 14 years old)
- Relies heavily on his 10 year old brother for communication
- Receiving speech therapy at school primarily in Spanish

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Memo: Treatment Approach

- Sequential bilingual
 - Spanish-only treatment
- Treatment during Covid
 - Zoom school and treatment
- · Teaching cueing strategies to family
- · Working with 10-year-old brother
- Generalization opportunities!

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Kamila 8;6 Moderate CAS. Sequential Bilingual

- Parents monolingual Spanish-speakers
- 13-year-old bilingual brother
- Receiving speech therapy at school in both English and Spanish
- Kamila prefer English and avoids speaking Spanish
 - Understands Spanish but responds in English
 - Spanish made her stomach hurt

Portland State University

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Kamila - Intervention Approach

- Treatment was mostly in Spanish
- Honored English communication attempts
- DTTC cueing & hierarchical approach
- Principles of Motor Learning
- Bilingualism is a superpower!

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Kamila - Outcomes

- Participating in tx sessions using L1 spontaneously.
- · Demonstrating increased codeswitching.
- Self-reported increase in liking Spanish, confidence in Spanish
- Willing to try Spanish at home
- Has "3" languages
- Parent-reported Kamila using L1 more frequently in the home spontaneously.

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Parents: Education on CAS

Prior

- One parent had heard about CAS but had no information about what it was.
- Other had never been told what disorder was
- Family did not have appropriate strategies to support communication
- Families thought errors were sign of lack of effort

After providing information on CAS

- Trained in feedback types
- Demonstrated appropriate strategies
- Learned that inconsistencies are part of CAS and do not reflect the child's effort.
- Safe environment- for making mistakes.
- Valuing effort/participation rather than accuracy

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Information on Bilingualism - Prior

- Misinformed about bilingualism.
- 。hesitant about receiving tx in L1.
- Wanted best language for
- $_{\circ}$ Parent wanted to focus on English for their child to have success in this country.
- Misinformation about code-switching
- Did not understand the importance of supporting L1.
- 。No plan in promoting L1.

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Bilingualism is a Superpower: Kamila

- Immediate changes
- 。Change in perspective on bilingualism
- 。Child increases in willingness to speak L1
- $_{\circ}\,$ Found ways to support L1 in the home.
- Changes over time:
- 。 Increase in communication partners
- 。Increase in L1 use
- 。Child willing to talk with L1 speakers
- $_{\circ}$ School SLP: L1 improvement and increase in L1 participation

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Parents: Bilingualism is a Superpower!

- Informed parents about bilingualism
- Addressed myths of bilingualism confusing children
- Valuing heritage language and identity
- Increases communication with family, culture, & community.
- Benefits of supporting L1
- What parent can do to promote L1 in the home
- Provide information about code switching
- Ongoing consult with parents

Manual State University

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Bilingual CAS Approaches

- Speech improves in both languages
- Treatment focuses change depending on
- Language environment
- Sequential vs Simultaneous
- Parent supports

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Social Justice Lens

- Focus on whole child and family
- Integration of social and academic needs
- Value of home language
- Functional goals

Summary

- Use motor learning treatment approach
- Each bilingual child with CAS is unique
- Language(s) & targets of intervention based on individual needs
- Consider each language's phonological properties in treatment decisions
- Select goals based on present and future needs of multilingual child
- Consider changes to decisions over time
- Work with family, if possible

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Summary

- Determine priority vocabulary and utterances
- Teach building blocks in stronger language
- Generalize to functional activities
- Monitor effects on both languages through treatment probes
- Alter treatment as necessary

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Which Language to Focus On?

- In most cases, a multilingual child needs intervention in all languages
- 。Bilingualism not a choice but life's circumstance
- 。Need both for social & communicative function
- 。Without both, limit future opportunities
- 。Intervention of L1 won't jeopardize attainment of

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Final Summary

- Bilingual children have CAS
 CAS will not go away or get better if they become monolingual
- Monolingualism for a bilingual child
- 。 Is isolating
- 。Creates an impoverished communication environment
- Bilingual children with CAS need us to support them with
 - 。 Bilingual assessment
 - Bilingual intervention
 - 。Family involvement
 - CAS and bilingualism advocacy

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THANK YOU!

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REFERENCES & RESOURCES