

# Language Impairment or Second Language Learner? The Complexities of Educating Young Culturally and Linguistically Diverse Children with Disabilities



**HIGHER EDUCATION TASK FORCE ON QUALITY  
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# Laws that Regulate Special Education Services for Children from Birth to 5 Years of Age



- PL 99-457, the Education for All Handicapped Children Act Amendment of 1986, renamed in 1990 as the Individuals with Disabilities Education Act (IDEA) re-authorized programs for the education of students with disabilities ages 5 to 21 and mandated that programs for children ages 3 to 5, with disabilities be put in place by 1991-1992. The law also provided states with incentives for developing comprehensive systems of services for infants and toddlers experiencing developmental delays in one or more areas of development or at risk of developmental delays due to established physical or mental conditions and their families. All states took advantage of the incentives and by 1993 all states provided special education services to eligible children from birth to 21 years of age (Howard et al. , 2010).

## Laws that Regulate Special Education Services for Children from Birth to 5 Years of Age (Continued)



- The law was re-authorized in 2004 as PL 108-446 the Individuals with Disabilities Education Improvement Act. Since the Education for All Handicapped Children Act (PL 94-142) was first enacted in 1975 it mandates: 1) Zero reject; 2) free appropriate public education; 3) in the least restrictive environment with 4) parental participation in the assessment process and in the development of the Individualized Education Plan (IEP) or Individualized Family Service Plan (IFSP) for infants and toddlers. It also guaranteed due process and appropriate, nondiscriminatory multi-disciplinary evaluation.
- What is unique in EI is that children do not have to be labeled, the development of an IFSP, designation of a service coordinator, and family-centered services often provided at home, called home-based intervention (Howard et al., 2010).

## Laws that Regulate Special Education Services for Children from Birth to 5 Years of Age (Continued)



- In New York State the lead agency for the education of children birth to 3 years of age is the NYS Department of Health. Since 1993 the State of NY offers Early Intervention (E.I.) to babies and toddlers who have a confirmed disability or established developmental delay, as defined by the State, in one or more of the following areas of development: physical, cognitive, communication, social-emotional, and/or adaptive. ([http://www.health.state.ny.us/community/infants\\_children/early\\_intervention/](http://www.health.state.ny.us/community/infants_children/early_intervention/))
- Children 3 to 5 years of age with disabilities are served by the NYS Department of Education through the Committees on Preschool Special Education.
- In this presentation I will examine the issues in the identification, parental participation, assessment, and instruction and services offered to CLD young children and their families.

## Issues in the Identification of Young CLD Children with Disabilities



- We are all well aware of the changes in demographics in the US and in NYS. These changes are especially dramatic in early childhood. According to Hardin et al. (2007) in the last decade nineteen States experienced a 100 percent increase in the number of immigrant children 6 years or younger. In 2005, 25 percent of students in Head Start spoke a language other than English at home. In some States there is overrepresentation of CLD students in certain special education programs and in other States there is underrepresentation (Artiles, 2010; Skiba et al., 2008).
- Young CLD children share two important characteristics: 1) they live in households with different culture than the mainstream society, and 2) they speak a language other than English. However, they vary in many ways: i. e. parents education, SES, time in the U.S., level of acculturation, proficiency in English of different people in the household.

## Issues in the Identification of Young CLD Children with Disabilities (Continued)



Both language and culture have an impact in educating young CLD children. ZERO TO THREE defines culture “as a shared system of meaning, which includes values, beliefs, and assumptions expressed in daily interactions of individuals within a group through a definite pattern of language, behavior, customs, attitudes, and practices (Maschinot, 2008; p. 2).

- Child development does not happen in a vacuum. This definition emphasizes the fact that culture shapes the expectations of what children should be able to do at a young age. What is valued is stressed in child development and how child development is supported (i.e. child-rearing practices; A.D.L; independence versus interdependence.)
- Culture also defines what is considered developmental delay for CLD families. When should the child be considered delayed? Should the family criteria be followed?

## Issues in the Identification of Young CLD Children with Disabilities



- Cultural values and beliefs are expressed: 1) on the definition of and attitudes toward “disability”; 2) the family’s perception of the stigma placed on the child and the family; 3) the ways in which children are socialized into language and through language to the beliefs and values of their cultures: situation-centered versus child-centered. (Zentella, 2005); 4) the importance given to independence, individual success (mainstream US culture) “Being best in the world” the success of a person as part of the group or to interdependence, the success of the group: “Be best for the world”. (Maschinot, 2008.)
- CLD parents may not refer their child for special education services or may not accept suggestions that their child should be evaluated for special education services because they think that the child will outgrow the problems or delays. Or that praying will solve the problem (Maldonado, in review). Also they may think that the solution (special education) may be more damaging than the problem (child’s delays).
- Often young CLD children do not pass developmental screening tests (Harding et al. , 2007). What does this really mean?

## Issues in Parental Participation of Young CLD Children with Disabilities



- Parents may not be aware of the availability of services and their rights.
- Parents who do not speak English and are not familiar with the education system are afraid of asking questions. Although materials are translated into a few languages, some parents may have difficulties reading them. Also parents may be afraid of being sent back to their home countries.
- When translators are available they may not be adequately trained to work with parents of young CLD children.
- Often CLD parents, especially Latino parents, trust that teachers and clinicians “know “ what to do for their child. They think that they don’t have the knowledge needed to help their child therefore they don’t have anything to bring to the table and they do not actively participate.



# Issues in Parental Participation of Young CLD Children with Disabilities



- Parents may find teachers and administrators insensitive to their needs.
- Parents may feel that they are not welcomed in the schools.
- Parents may feel overwhelmed in the IEP or IFSP meeting and afraid of expressing their thoughts in front of so many people.

## Issues in the Assessment Process to Determine Eligibility for Special Education Services



- The law requires a non-discriminatory assessment. More than one test should be administered by qualified personnel in the child's native language, unless it's not feasible to do so.
- These are the problems encountered in the assessment of young CLD children.
  - -Lack of clinicians that speak the language (to test the child bilingually) or they lack knowledge of second language acquisition or cultural issues relevant to interpreting the results.
  - -Lack of standardized instruments in which CLD children were included in the normative sample. Language minority children have very different background experiences than the ones used in tests designed for mainstream children. And they have very different ways of approaching a task in a test (McLean, Wolery & Bailey, 2003).

## Issues in the Assessment Process to Determine Eligibility for Special Education Services (Continued)



- When instruments are translated but not designed for these children there are other kinds of problems, such as the order of the questions do not match the level of difficulty, and often CLD children were not included in the normative sample. It's also very difficult to include the dialects of a language such as Spanish.
- Difficulty interpreting the child's behavior in light of a different culture, language, and family experiences that may not be familiar to the examiner or the teacher.
- Assessing the communicative skills of young children who are in the process of acquiring their native language and English is particularly complicated. In fact young children may be in the process of learning English and losing their native language. The clinician needs information about the child's home language experiences, and knowledge about second language acquisition.

## Issues in the Assessment Process to Determine Eligibility for Special Education Services (Continued)



- Tests normed for native English speakers have lower reliability and validity for ELLs (Skiba et al. , 2008).
- Examiner unfamiliarity with the examinee impacts the performance in standardized tests (Skiba et al. 2008, p. 272).
- Negative beliefs about African American and Latino families held by educators (Skiba et al. , 2008).
- Lack of time needed to evaluate CLD young children suspected of having disabilities or developmental delays.
- Tests such as the SALT 2008 Bilingual Version: A tool for Assessing the Language Production of Bilingual (Spanish/ English) Children will help to identify language disorders in children kindergarten through third grade.

# Issues in the Delivery of Services for CLD young children with developmental delays and disabilities



- **Choice of the language of instruction.** Although there is ample evidence that supports the use of the native language and English (Genesee, 2008; Paradis, Genesee, & Crago, 2011), and the advantages of bilingualism (Yoshida, 2008), the majority of young children in NYC and in the State of NY are served in what are called alternate interim bilingual classes or monolingual English classrooms. However, between July 1, 2004, and June 30, 2005, 44% of children assessed for EI services in NYC were assessed with a bilingual component (Puig, 2010). During the period of July 1, 2008 and June 30, 2009 54% of the evaluations of EI children in NYC were bilingual (Driver, 2010).
- **Parents are told that the child cannot handle two languages or bilingual services are not available and speech and language services are more often than not offered in English. What are the misconceptions about bilingualism behind this recommendation?**

## Issues in the Delivery of Services for CLD Young Children with Developmental Delays and Disabilities (Continued)



- Family-centered early intervention for very young CLD children should “recognize and respect family members as **experts on their child**, as the ultimate **decision makers**, and as the constant in a child’s life. .... As always, professionals need to respect differences in family’s cultural identity, beliefs, values and coping styles” (Howard, et. al pp 416-417).
- Who makes the decision about the language of instruction and who should make the decision? What should be the criteria to decide the language of instruction? What are the consequences of educating young CLD children with disabilities in English? ( For example, loss of native language and inability to communicate with family members.)
- Shortage of bilingual teachers and clinicians. Districts do not open bilingual classrooms because they don’t have the personnel; and candidates do not apply because they think that there are no jobs available.

## What can we do with what we have ?



- Prepare teachers and clinicians to involve parents in their children's assessment and choice of services.
- Educate teachers, clinicians, parents, administrators, and policymakers in issues related to bilingualism and second language acquisition.
- Educate teachers in culturally responsive teaching.
- Address misconceptions and unquestioned assumptions about young CLD children and families who are also often poor.
- When children are placed in monolingual or alternate interim bilingual classrooms, teachers and clinicians should accept, respect, and value the home language and culture of the children (NAEYC, 1996) by supporting their native language and culture and not just English.
- Encourage every bilingual in the school to use the other language especially paraprofessionals.

# What can we do with what we have ? (Continued)



- National Center for Culturally Responsive Educational Systems.  
[www.ncrest.org](http://www.ncrest.org)
- Rebecca H. Cort (2011). Bilingual and ESL services required for ELLs/LEP who are students with disabilities. Available at  
<http://www.p12.nysed.gov/specialed/publications/bilingualservices.htm>
- **Office of Special Education Projects Addressing Shortages of Bilingual, English as a Second Language, and Special Education Personnel:**
  - -Intensive Teacher Institute in Bilingual Special Education (ITI-BSE)  
[http://www.esboces.org/Specially\\_Funded\\_Programs/BETAC/ITIBSE.aspx](http://www.esboces.org/Specially_Funded_Programs/BETAC/ITIBSE.aspx) or  
<http://www.p12.nysed.gov/biling/bilinged/iti.html>
  - **-NYS Bilingual School Psychology Support Center**
    - Website: [www.fordham.edu/nysbspsc](http://www.fordham.edu/nysbspsc)
    - ✦ E-mail: [nysbspsc@fordham.edu](mailto:nysbspsc@fordham.edu)



# What can we do with what we have ? (Continued)



## **-Speech-Language and Bilingual Speech-Language Personnel Development Technical Assistance Center (SLPD-TAC)**

- ✦ Website: <http://schools.nyc.gov/TeachNYC/default.htm>
- ✦ Email: [vhill@ufttc.org](mailto:vhill@ufttc.org)

## **New York City Preschool Bilingual/English as a Second Language Technical Assistance Center (NYC Preschool TAC)**

- *The purpose of the NYC Preschool TAC is to increase the capacity of section 4410 preschools in NYC to serve preschool students with disabilities with limited English proficiency by providing services in the following two areas:*
- *Training*
- *Train paraprofessionals (teaching assistants and teacher aides), teachers, administrators, related service personnel and other members of multidisciplinary evaluation teams (speech therapists, school psychologists, occupational therapists, physical therapists, and social workers), and interpreter/translators employed by approved preschool programs on topics including but not limited to:*

# What can we do with what we have ? (Continued)



- *Bilingual and ESL methodology,*
- *Cultural and linguistic diversity,*
- *Effective professional/paraprofessional teams,*
- *Working as or with an interpreter/translator, and*
- *Integration of bilingual programming throughout a school.*
- University Training Program Enrollment and Capacity Survey
- *Gathers information on the enrollment and unused capacity of programs leading to bilingual and monolingual certification in special education, related services, and TESOL*
- Website: <http://www.magiservices.com/index.htm>

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