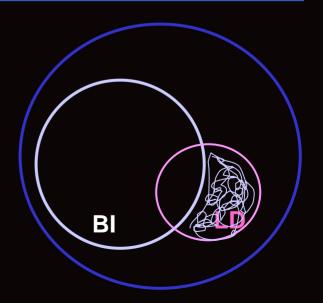
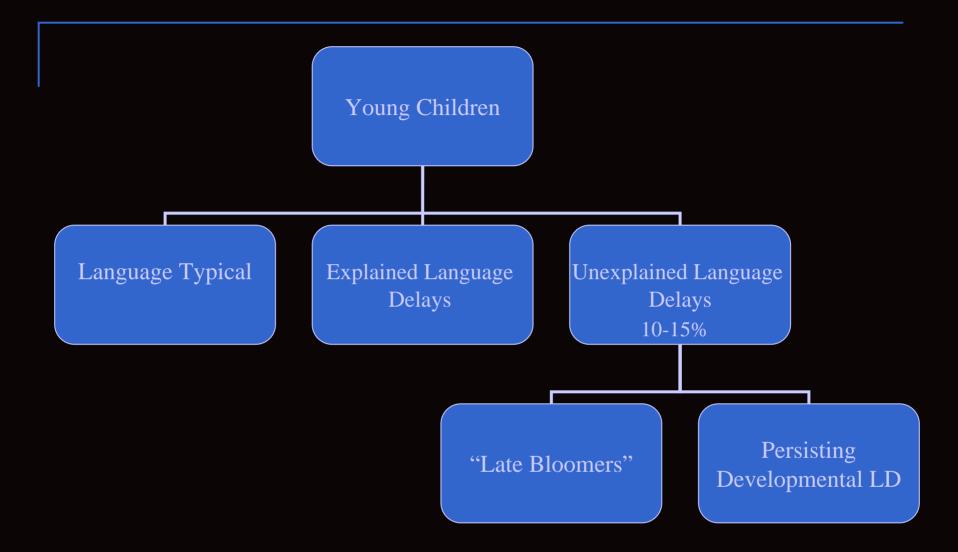
Primary Developmental Language Disorders in Young Bilingual Children

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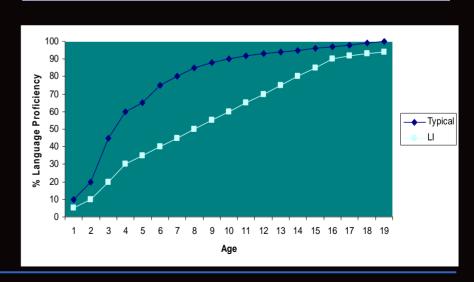


(e.g., APA, 1994 see Kelly, 1998; Leonard, 1998; Rescorla, 2005; Thal & Katich, 1996 for reviews) English-speaking children with Primary Language

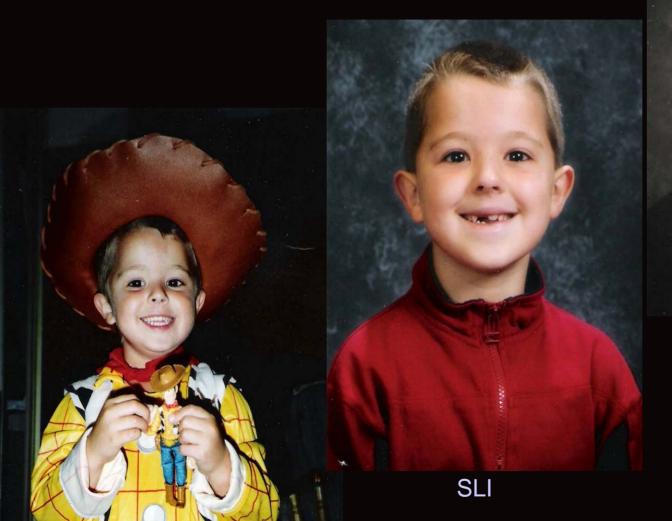
Disorders (LD)

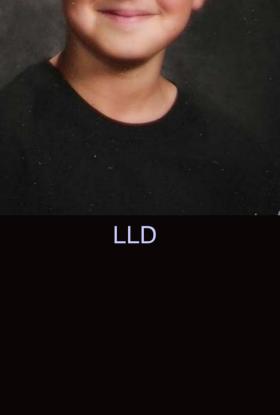
- AKA
- Common (~5 or 7/100)(Paul, 2001; Tomblin et al., 1997)
- \blacksquare Boys > girls
- Clusters
- Persists
- Range of severity
- Associated negative academic, social, emotional outcomes.

Language	Typical C.A.	LI C.A.
First words	1:1	2:3
50 words	1:6	3:4
MLU 2.0	2:1	4:0
MLU 3.16	3:0	5:3
MLU 4.40	4:0	6:6



Same Child, New Label





Late Talker

(cf. Kohnert, 2008; Leonard et al., 2002; Thal & Katich, 1996)

BEYOND language:

Weaknesses in general information skills

• Children with LD are slower or less accurate to press a button in response to a shape or tone, to tap their fingers, to recall & repeat a series of flashing lights, to scan a row of digits, to move pegs along a board or to mentally rotate shapes.

(e.g., see Kohnert & Windsor, 2004; Kohnert, Windsor & Ebert, 2008; Miller, Kail, Leonard & Tomblin, 2001; Windsor & Hwang, 1999; Windsor, Kohnert, Loxtercamp, & Kan, 2008).

Early identification and robust, responsive intervention are seen as important vehicles for improving social, educational and vocational outcomes in children with LD.

Identification of LD in young EO speakers:

- Collect child data: RIOT (e.g., Langdon & Cheng, 2002)
- Interpret: normative data
- Complications
 - Behavioral profile
 - Overlap with other disorders
 - Variability in typical development
 - Late bloomers vs. late talkers
 - Salient symptoms change



- Poor comprehension skills
- Positive family history of LD or "related" CDis.
- History of delayed communication
- Fewer gestures, less elaborated play.
- Frequent, recurring and difficult to treat ear infections.

Treatment: Indirect

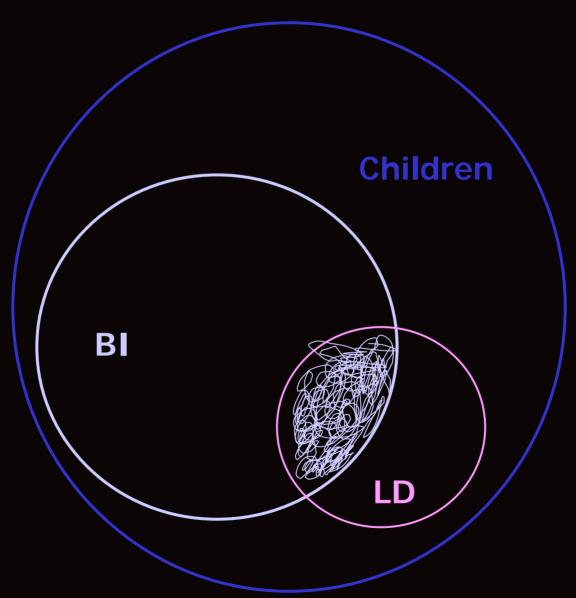
Law, Garrett, & Nye, 2004

- Meta-analysis-10/13 studies focused on language tx to 2-3 yo EO speakers
- Comparable outcomes for trained parent-provided tx as compared clinician-provided tx.
- Implication: Emphasizing the use of language within meaningful social environments with key communication partners is effective.

Robertson & Ellis Weismer, 1997

- Matched ten 4-5 y.o children with LD to a typically developing age peer (TDAP). Also a control group with LD. All English.
- Instructed to play house in established area, using various props for 15 min periods/ 4 days per week.
- Results: LD experimental group made gains on a number of linguistic features than control group.
- Implication: Low-structured play with typical peers facilitates language.

Bilingual Children with LD



BI-LD compared to Monolingual-LD

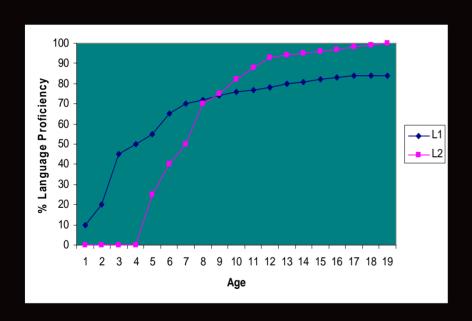
- Monolingual-LD are challenged in one language; BI-LD are challenged in two languages (but apparently not more than monolingual-LD) (Paradis et al., 2003).
- No evidence to indicate lower or higher rates of LD among bilinguals, all else being equal.
- BI-LD may exhibit similar kinds of impairment in each of their languages as monolingual speakers of that language with LD.
- As with EO-LD, there is evidence of subtle weakness in general information processing system (Kohnert & Windsor, in prep).

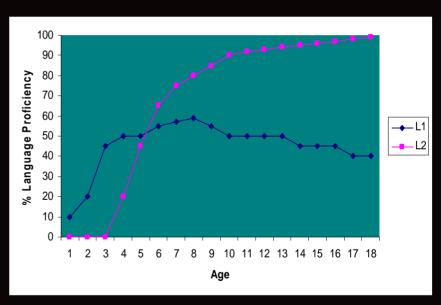
BI-LD compared to Typical-BI Learners

- Same backgrounds and communication needs: Diminished ability does not negate social need.
- For both groups the relative degree of cross-linguistic proficiency may vary.
- Are more vulnerable to effects of limited language-specific experience, with earlier plateaus or faster loss of L1 than typical ELL

peers (cf., Kohnert et al., 2005; Restrepo, 2003; Restrepo & Kruth, 2000; Salameh et al., 2004).

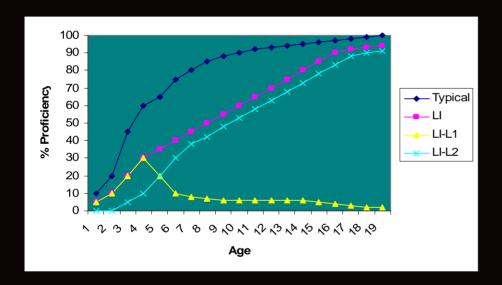
e.g., Typical (Sequential) BI Learners: Minority L1 to Majority L2 Shift





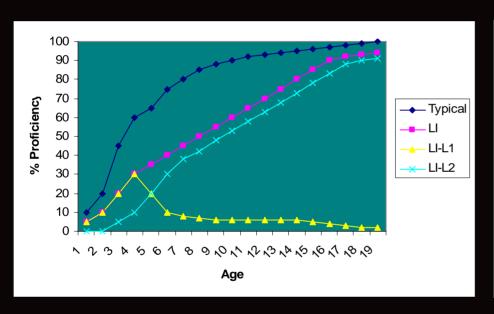
(c.f., Jia, Aaronson & Wu, 2002; Jia, Kohnert, Collado, & Aquino-Garcia, 2006; Kan & Kohnert, 2005; Kohnert, Bates, & Hernandez, 1999; Kohnert & Bates, 2002 all *JSLHR*)

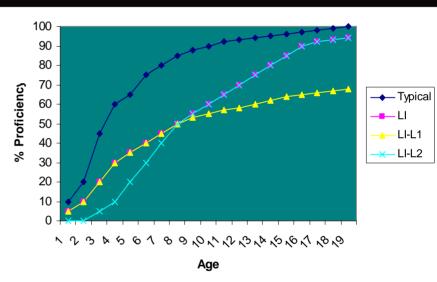
Vulnerability of L1 in BI-LD



(cf., Restrepo, 2003; Restrepo & Kruth, 2000; Salameh et al., 2004; Kohnert et al., 2005).

Language Interrupted, Premature Shift & Exacerbated Gap vs. ALTERNATIVE PATH





(cf., Restrepo, 2003; Restrepo & Kruth, 2000; Salameh et al., 2004; Kohnert et al., 2005).

(see Kohnert, 2008a for discussion)

Service to young
BI Children
with suspected LD:

Complications & Consequences

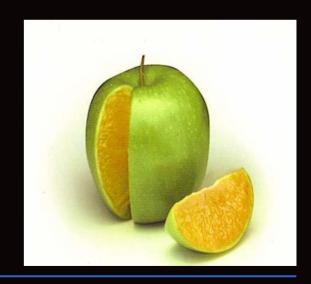
Identification

Complications

- Lack of tools.
- Limited data base on young typical BI (in BOTH L1 & L2).
- Normal variation in L1-L2 learning.
- Language/Culture Mismatches.
- Insufficient training of professionals on front lines.
- Research focused on single aspect of LD profile

Consequences

- Over-, under-, mis-identification
- Missed opportunities (BI more severe, later)
- Inappropriate allocation of limited resources



Intervention

Complications

- Poor understanding of why L1 support needed.
- Language/Culture Mismatches.
- Lack of bilingual intervention models.
- Insufficient training of professionals on front lines.
- Complete lack of research.

Consequences

- Poorer L1 outcomes.
- Poorer English outcomes (e.g., Perozzi & Sanchez, 1992; Thordardittir et al.,1997).
- Lower academic achievement, higher drop out rates, higher rates of suicide, juvenile delinquency, incarceration.**
- For BI, exacerbated communication gaps within families could compound associated negative outcomes.

Potential starting points for improving services to young bilinguals struggling with language:

- Increase database investigating both languages of young bilinguals –typical & struggling.
- Investigate cross-language associations in young bilinguals with and without LD.
- Complement analytical approaches with creative thinking to explore alternative methods of supporting a home language.
- Consolidate & expand training efforts.
- Increase recruitment & retention efforts for ECE /SLPs from general population.

Thank you!

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