



Speech-Language & Audiology Canada  
Orthophonie et Audiologie Canada  
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*SAC Position Paper on*  
**School-Based Speech-Language Pathology  
Services in the Context of Multilingualism**

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A position paper represents the direction SAC has taken on a particular topic or provides guidelines for particular areas of practice. These positions are time-bound, representing the thinking at a particular point in time.

## Position

It is the position of Speech-Language & Audiology Canada (SAC) that home languages, dialects, and cultures are critical to the emotional, psychological, familial, social, cognitive, and academic well-being of students. Educational speech-language pathologists have a unique role and responsibility in supporting and advocating for multilingual students with, or at risk of communication and learning needs. Speech-language pathologists use training, clinical skills, experience, and knowledge to help students develop language, communication, and literacy abilities in all the languages, dialects, and modes of communication needed to participate fully in their many communities (e.g., immediate and extended families, cultural, spiritual, social, recreational, educational). SAC advocates that school speech-language pathology services be:

- provided with cultural and linguistic safety, humility, awareness, and responsiveness;
- delivered with a strength-based perspective and multicultural, multilingual lens, informed by practice-based findings, collaboration, and evidence;
- implemented with the understanding that communication reflecting dialectal variations and developmental patterns and processes associated with learning additional language(s) are not pathologies;
- aligned with the equity, diversity, and inclusivity standards and initiatives of professional regulating bodies, and;
- consistent with government legislation and initiatives protecting cultural and linguistic rights.

## Background

There is significant diversity in the languages spoken by Canadians. At least 215 different languages have been documented (Statistics on Official Languages of Canada, 2019). There has been an increase (12.7%) in the use of home languages other than English or French (Statistics Canada, 2022a). In addition, data reveals that 41.2% of the population can conduct a conversation in more than one language (Statistics Canada, 2022b). There are many environmental factors impacting the opportunity and process of learning additional language/dialect(s), such as quantity and quality of language input, language of schooling, and language of the community. Students can progress through varying stages of learning additional language/dialect(s), exhibiting typical developmental patterns and processes (e.g., pronunciation and grammatical differences). These patterns and processes are not indicative of a communication pathology (Paradis et al., 2021).

Speech-language pathology pre-service training, perspectives, assessment, intervention, and reference tools often have a monocultural, monolingual perspective (e.g., Grosjean, 2008, Genesee, 2022; Thordardottir, 2006). For this and other reasons, students who speak more than one language are at increased risk of delayed identification, under-identification, and over-identification of speech, language, communication, or literacy disorders (Paradis et al., 2021, Zeidler, 2011). All students deserve access to timely and comprehensive speech-language pathology services (SAC, [2019](#), [2021a](#)). Failure to provide early identification and culturally and linguistically informed services is a systemic bias. A strength-based, multicultural, multilingual lens regarding every aspect of service delivery is therefore required.

Educational and clinical decisions have sometimes been based on faulty assumptions, myths, stereotypes, as well as conscious and unconscious biases regarding multilingual learners, especially for those with a risk profile impacting development, communication, and/or learning (e.g., Groupe d'Action AntiRaciste en Orthophonie et en Audiologie, 2020; Hamayan et al., 2015). Professionals have been known to counsel families out of raising their child to be bilingual (Marinova-Todd et al., 2016). There are significant consequences when students lose home language skills, including impact on sense of identity, decreased interaction with family members, altered parenting practices, and diminished academic benefits (Bornstein et al., 2020; Cummins, 2001; Place & Hoff, 2011). Research indicates that maintenance and development of the home language does not pose a risk to learning additional languages or to academic success (Genesee & Geva, 2006). Moreover, multilingual learners with communication disorders can acquire skills in each language that are equivalent, or nearly equivalent to those of monolingual children with the same profile, provided they are afforded an adequate learning environment (e.g., Beauchamp et al., 2022; Genesee & Lindholm-Leary, 2021; Gonzalez-Barrero & Nadig, 2019; Kay-Raining Bird et al., 2005). Research also indicates that students with diverse needs in dual-language educational programs are able to achieve equal or better academic outcomes compared to their monolingual peers with the same risk profile (Genesee & Lindholm-Leary, 2021; Kay-Raining Bird et al., 2021).

There are many advantages to being able to function in more than one language (e.g., Adesope et al., 2010; Kwon et al., 2021). Strong skills in the home language (oral and written) benefit children's socio-emotional well-being (e.g., Han, 2010), facilitate the development of an additional language (e.g., Paradis et al., 2021), serve as a lever for increased academic success (e.g., Geva & Genesee, 2006), and benefit communities by optimizing multilingual competencies in an increasingly diverse national and global context (Heritage Canada, 2016). Speech-language pathologists are uniquely positioned to collaborate with students' communities of support regarding realistic expectations for multilingual learners with communication and learning needs.

The need for speech-language pathology services to be culturally and linguistically appropriate has been recognized for decades (e.g., Crago & Westernoff, 1997; Young & Westernoff, 1996) and clinicians have been professionally responsive. Speech-language pathologists have a growing understanding of their role in supporting multilingual, multiliteracy development for students with communication and learning needs, and regularly implement culturally and linguistically informed practices even when they do not share the culture, language, or dialect of the students and families they serve (e.g., SAC, 2023; Westernoff et al., 2021).

## Rationale

Classrooms are multiculturally and multilingually diverse, and this is reflected in the caseloads of school speech-language pathologists. Educational and clinical services should be strength-based, culturally and linguistically appropriate, and grounded in practice-based findings, collaboration, and evidence.

This position paper was created to:

- guide speech-language pathologists in providing culturally and linguistically informed services (e.g., prevention, informed consent, screening, assessment, intervention, advocacy, consultation) that promote communication and literacy in all the languages, dialects, linguistic communities (e.g., minority, majority) and modes of communication needed for students to participate fully in their many communities (e.g., Mayer-Crittenden & Leduc, 2023; Vogel & Garcia, 2017);
- support clinicians in providing services, whether or not they share the culture, or language/dialect(s) of the students and families they serve (e.g., Goyer & Borri-Anadon, 2018);
- highlight speech-language pathologists' responsibility to share information needed by parents/caregivers to make informed decisions, partner with them as agents of change (e.g., Cheng et al, 2022; Lowry, 2022), and recognize, respect, and champion their roles in multilingual, multiliteracy planning for their family;
- affirm speech-language pathologists' advocacy role in collaborating with governments, policymakers, educators, professionals, and the public regarding multilingual learners with differing language or literacy needs;
- contribute to SAC's advocacy messaging regarding access to, and provision of school-based speech-language pathology services in multicultural, multilingual contexts (e.g., SAC, [2018](#); [2021a](#); [2021b](#)), and;
- celebrate the inspiring professional service changes that speech-language pathologists have already embraced which address the speech, language, communication, and learning needs of multilingual learners.

## Recommendations/Guidelines

### General Principles

- Treat multiculturalism and multilingualism as the norm rather than the exception, acknowledging that all cultures, languages, and dialects are equally valuable.
- Recognize, respect, and promote Indigenous languages and First Nations English Dialects, which are protected under the *Indigenous Languages Act* (2019).
- Recognize home language/dialect(s) as vital for participation in family and community life, key to positive socio-emotional development and well-being, foundational to learning additional languages, and instrumental in facilitating academic success.
- Apply, emphasize, and model strength-based perspectives and practices regarding multiculturalism and multilingualism.
- Understand that distinct clinical considerations are needed in response to the different ways students learn additional languages. These differences include but are not limited to sequential bilingualism (acquisition of an additional language after the first one was acquired) and simultaneous bilingualism (learning multiple languages from birth), changes in language exposure and/or use over time, changes in home and/or community

language due to adoption and/or immigration, immersion programs, bilingual/trilingual education programs, Heritage language programs, attending a minority language school in a majority language community or a majority language school in a minority language community, and speaking a home language or dialect that is different than the language of schooling and/or the community. <sup>e.g., 1,2</sup>

- Demonstrate that providing culturally and linguistically relevant services for all students (e.g., applying different world views of communication and language development <sup>e.g., 3</sup>, collaborating with community members, using diverse materials, dual language books, and adapted documents) benefits everyone by modelling respect, encouraging understanding, bridging differences, and preparing all to succeed in a global world.
- Provide timely and accessible services to all students to ensure the opportunity to benefit from early identification, educational support, and clinical intervention, regardless of the type of program (e.g., enriched, dual language) or length of exposure to the school language.
- Recognize and readjust when professional practices unintentionally contribute to loss of the home language/dialect(s), which can jeopardize family-child relationships and future language and academic outcomes.
- Provide screenings, assessments, support, and interventions that consider all the languages, dialects, and modes of communication needed for the student to successfully participate in the different aspects of their life.
- Apply and model best practices when partnering with interpreters, translators, community members, and cultural brokers. <sup>e.g., 4,5</sup>
- Collaborate with others (e.g. extended family members, educators) to leverage opportunities (e.g., promoting family and educators' roles in supporting home language development, advocating for school support services and home language classes).
- Recognize and respond to personal need for continued professional development regarding culturally and linguistically responsive knowledge and practices. <sup>e.g., 6</sup>

### **Culturally and Linguistically Appropriate Assessment Practices**

- Minimize the risk of over-identification or under-identification of communication concerns by employing valid assessment protocols (e.g., qualitative, authentic, dynamic assessment, multi-language assessment, strategic use and interpretation of standardized tests, recognizing the patterns and processes associated with learning additional language/dialect(s)). <sup>e.g., 7,8,9</sup>
- Advocate for best assessment practices, especially when faced with the demand to use normed tests adhering to standardized protocols.
- Optimize assessments to document students' best possible performance (e.g., interpreter qualifications, family perspectives, culturally and linguistically informed materials and practices, favourable assessment conditions, representation of student language, dialect, and geography in the standardized test population).

- Gather information about the student’s full communication repertoire to describe language development, identify strengths and needs, and provide a professional response.
- Evaluate communication in multiple contexts (e.g., social, academic) and consider the perspective of significant others (e.g., parents, caregivers, family, elders, community, educators).
- Access resources that contribute to sensitive and specific interpretation of communication functioning. <sup>e.g., 10, 11, 12, 13, 14, 15, 16, 17</sup>

## Culturally and Linguistically Appropriate Intervention Practices

### Family Factors:

- Provide services to parents/caregivers in the language they best understand. <sup>e.g., 18, 19, 20</sup>
- Consult with parents/caregivers to document students’ language experiences, which may change over time. <sup>e.g., 21, 22</sup>
- Partner with parents/caregivers as agents of change and involve them in supporting their child’s communication, especially regarding the home language/dialect(s). <sup>e.g., 23, 24, 25</sup>
- Help parents/caregivers understand that language and literacy skills in the home language/dialect(s) positively impact socio-emotional well-being and serve to bootstrap the development of language and literacy at school.
- Provide parents/caregivers with evidence to inform multilingual, multiliteracy planning for their family, especially for children with diverse language or literacy needs, and support their choices.
- Encourage and equip parents/caregivers to share evidence-based information with others who might counsel against their decision to promote multilingual, multiliteracy development. <sup>e.g., 26, 27, 28</sup>

### School Factors:

- Support educator’s efforts to learn more about multilingual learning, home language maintenance, and dual language education.
- Help educators set realistic goals for students to develop a full repertoire of communication skills that considers different languages, dialects, communication contexts, linguistic communities, and modes of communication. <sup>e.g., 29, 30</sup>
- Provide educators with robust indicators that facilitate early identification of students requiring speech-language pathology support. <sup>e.g., 31, 32</sup>
- Encourage evidence-based pedagogical practices that support accessing the curriculum and learning an additional language (e.g., crosslinguistic strategies <sup>e.g., 33, 34</sup>, integration of academic content and principles of learning an additional language), differentiated instruction, and inclusion of all forms of diversity in the classroom. <sup>e.g., 35, 36, 37, 38</sup>

- Support educators in partnering with families to encourage multilingual, multiliteracy development. <sup>e.g., 39, 40, 41</sup>
- Help administrators and educators understand that a) multilingual learners with diverse learning needs may require both academic support and instruction to learn the school language, and b) students in dual language programs benefit from academic support in all languages of instruction.

### Pre-service Training and Continuing Education Organizations

- Respond to the evolving needs of speech-language pathologists working in multilingual, multicultural contexts by continually improving education and professional development in ways that prepare clinicians to satisfy the standards of professional regulating bodies, <sup>e.g., 42, 43, 44</sup> and are consistent with governing laws <sup>e.g., 45, 46, 47</sup>
- Use a strength-based, multicultural, multilingual lens in professional communications (e.g., inclusive materials, diversity of perspectives, translated materials).

### Professional Organizations

- Use a strength-based, multicultural, multilingual lens in professional communications (e.g., inclusive materials, diversity of perspectives, Land Acknowledgement practices <sup>e.g., 48</sup>), as well as throughout all committee work and publications.
- Include multicultural, multilingual content, references, and resources for the public (e.g., information posters, fact sheets, Speech and Hearing Month), as well as material translated with cultural sensitivity. <sup>e.g., 49, 50</sup>
- Provide professional development focussing on anti-racism, anti-discrimination, equity, and cultural safety and humility in communication sciences and disorders (e.g., webinars, publications <sup>e.g., 51, 52</sup>, professional interest groups, conference sessions).
- Educate policymakers and stakeholders regarding best practices, clinical requirements, and professional progress regarding school-based speech-language pathology services in multicultural, multilingual contexts, and advocate for improved and ongoing pre-service education and professional development.

## Conclusions

SAC celebrates and commends speech-language pathologists' continual professional development in the provision of culturally and linguistically informed services for students and their families. It is recognized that practicing clinicians are at different stages of professional trajectory regarding this necessity. Clinicians are encouraged to investigate the references and resources in this document to build their skills, knowledge, and practice, as well as to connect with others to support reciprocal learning. SAC recognizes that school speech-language pathologists are well-positioned to play a leadership role in supporting multicultural, multilingual learners, and looks forward to continued advances in the profession.



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