

FACTS and TIPS



Young Dual Language Learners (Birth through 5 years)

Topic 6.1—Supportive Instructional Practices and Strategies

FACT # 1: *Children who are dual language learners need high quality early childhood programming as well as instructional “enhancements” or “adaptations” to achieve parity with native English-speaking children (August & Shanahan, 2008; Castro, et al, 2011; Espinosa, 2010; Nemeth, 2009).* Although instructional research for dual language learners under 5 years of age is still quite limited, there are some basic strategies and techniques that have proven to be effective with ALL young children—especially those who are learning more than one language, have limited language development, or limited preschool experiences (Nemeth, 2009). Strategic use of the home language, sensory and interactive language supports, small group activities, enhanced vocabulary instruction, repetition, and scaffolding of English are all easy and effective ways to help dual language learners access learning activities (Castro, et al, 2011; Espinosa, 2010; Nemeth, 2009; WIDA, 2007). In addition, providing these kinds of supports align with recent recommendations by the National Association for the Education of Young Children (NAEYC) and the Division of Early Childhood (DEC) that early childhood programs provide linguistically and culturally relevant programming for young dual language learners (NAEYC, 2009; DEC, 2010). Practitioners will need to identify and understand where children are in the language acquisition process in order to design appropriate language supports in both English and their home language.

FACT #2: *Frequency and types of language supports and scaffolding will depend in part on the language policies and language goals that programs have developed for children who are dual language learners (Espinosa, 2010).* Often, programs do not have well-articulated language policies or language goals that are inclusive of linguistic and cultural diversity. According to Espinosa (2010), it is difficult for practitioners and therapists to know exactly how to support each child's language development without clearly stated language policies or goals (Espinosa, 2010). For example, does your program value supporting children's home language development as they acquire English? If so, how will you do this given the languages of the children and families in your care, your program's resources, and community resources? Will services and instruction be mostly provided in English? If so, practitioners will need to focus on providing lots of language supports and scaffolding in English while figuring out how to use family and community resources to support children's home language development. If your program's language policy emphasizes that children become fully bilingual, dual language immersion or other types of bilingual programming may be considered. Programs will then need to determine the percentage of time instruction will occur in *both* languages and what supports and scaffolding will be required in each language.

FACT #3: **Special educators and therapists of children with disabilities who are dual language learners are required to consider the children's unique language needs when writing Individualized Educational Plans (IEPs) and delivering services and therapies.** Existing evidence suggests that children who are dual language learners with disabilities (including children with speech/language impairments, cognitive disabilities, and autism) who receive interventions in their home language and English fair as well or better than children who receive services in English alone (Paradis, et al 2011). As Kohnert & Derr (2004) explain, the goal of language therapy for children with speech/language impairments is to *increase their ability to communicate* with important adults and others in their natural environments. For children who are dual language learners, this often means communicating in the home language with their parents and in English in their early childhood program and/or with their speech/language therapist. When designing intervention plans and services, practitioners should consider the languages spoken in the children's natural environments so that *both* languages can be supported during intervention to the greatest extent possible (Kohnert & Derr, 2004; Paradis, et al, 2011).



Instructional Tips

- ❖ High quality early childhood programs always include lots of hands-on learning activities with concrete objects and visuals that are scaffolded for children's optimal learning. For early dual language learners, practitioners will need to provide this high quality programming as well as *extra or enhanced* language adaptations, visuals, gestures, repetition, small group and individual instruction throughout the program day (Castro, et al, 2011; Espinosa, 2010). *Please see FACTS & TIPS # 6.2 for specific tips and ideas for making language more comprehensible for dual language learners.*
- ❖ Depending on your language policy and goals, carefully plan for the strategic use of home language support throughout your program day in order to support children's total language development. How and when home language is incorporated into your daily routine will also depend upon the number of children in each language group as well as the availability of bilingual staff or volunteers. If your program uses English as the principal mode for communication/instruction consider having bilingual assistants, parents, or volunteers use children's home language to: conduct small group activities, preview stories which will be read in English in large group settings, read to children individually in the home language, conduct snack time, sing songs, or converse during unstructured play times. Your program will need to pick and choose how to best support children's home language. The key is to be *consistent and regular!*
- ❖ Bilingual speech/language clinicians might consider interventions which focus on linguistic elements and skills that are shared across children's languages such as overlapping sounds, grammatical structures and cognates as well as metacognitive and metalinguistic strategies that enhance language learning (Kohnert & Derr, 2004; Paradis, et al, 2011). When the clinician does *not* speak the children's home language, programs might use a team approach for delivering language interventions (Kohnert, et al, 2005). A "team approach" could involve speech/language clinicians partnering with bilingual interpreters, assistants, or parents who all work closely together to plan and deliver appropriate linguistic interventions with the children (Kohnert, et al, 2005; Paradis, et al, 2011). Close and frequent communication between team members is critical to ensure appropriate programming and service delivery when using this model.
- ❖ Adapt curriculum and instructional practices to the unique cultural/ linguistic identities and needs of the children and families in your program. Make sure signs and labels reflect *all* of the languages represented in your program. Include props from relevant cultures in learning centers to include cooking ware, clothing, accessories, and pretend food in the dramatic play area; animals, building materials, vehicles, and people in the block area; puzzles, books, games, recorded music, and musical instruments in the quiet area. Choose books for literacy activities that are representative of the children and families in your program. Integrate regular large group discussions regarding how different events or ways of doing things in stories are the same or different for children and families in your program (Derman-Sparks & Edwards, 2010).



Connecting with Families

- ❖ Parents, grandparents, and other extended family members are often eager and very willing to participate in their children's education in meaningful ways. Check with families for help in:
 - ✓ Making or acquiring culturally relevant props for different learning areas. Some family members might enjoy sewing doll clothes or children's clothes for the dramatic play area. Others may have suggestions of where or how to acquire cooking utensils.
 - ✓ Volunteering to talk with children in their home language in your program. Family members might also be interested in showing children how to play traditional instruments, cook traditional foods, or recite/sing traditional rhymes and songs.
 - ✓ Recording stories, songs, and rhymes in children's home languages that children can access independently in the early childhood program.
 - ✓ Creating posters or murals for your program that are representative of the families and cultures in your program. Some family members may have a special talent for drawing or painting and would be delighted to help create artwork for your program. Better yet, ask if they can create artwork with all of the children—maybe using traditional techniques and methods!
 - ✓ Planting or gardening at your center with the children.
- ❖ Enlist parents and other family members to help deliver language interventions! Families are often very eager to do so when they realize that they can use their home language. Give parents specific ideas for incorporating speech and/or language "activities" within their family routine (using targeted sounds or language structures during daily activities such as cooking, doing the laundry, grocery shopping, etc.). Some parents also like the idea of playing games or activities that specifically target their children's language needs such as identifying/labeling targeted pictures, using specific card and board games, using books to ask and answer questions, etc. Therapists will need to explain to parents exactly how and what to look for in their children's pronunciation and language expressions as they incorporate these "language activities" so that children's progress can be tracked and interventions can be adapted accordingly.

Topics #6.1 and #6.2 Supportive Instructional Practices and Strategies

References and Resources

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