The SLP's Quick Guide to

Dynamic Assessment for Culturally and

Linguistically Diverse (CLD) Children

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Standardized Testing?

CLD children's language abilities are commonly underestimated by standardized tests as they contain content bias, linguistic bias, and a disproportionate representation in normative data (DeLamo & Jin, 2011).

Content bias As all standardized tests are norm-referenced from a population of "normal" developing children of the same age, we often assume that all children have endured similar experiences and have comparable knowledge of vocabulary and concepts.

 example: When targeting prepositions, a Kenyan child may be unable to interpret picture stimuli of common household objects because they do not recognize any cooking utensils or food items in the pictures. This may be mistaken as a language deficit.

Linguistic bias → If a child performs poorly on a task, this may be due to a language difference rather than a deficit <u>OR</u> the clinician may overestimate the child's competence, and attribute the child's language errors to their language difference.

Disproportionate representation → A standardized test allows the clinician to

standardized test allows the clinician to compare the child's score to a particular population. If the test has been normed from white, monolingual children, then the CLD children cannot be reliably compared to the sample. CLD children also may not follow the same developmental trajectory as English speaking children.

Tests should NOT be translated, as obvious differences in phonology, syntax, and semantics will result.

What is Dynamic Assessment (DA)?

Dynamic Assessment (DA) is an alternative or supplemental approach to formal assessment that targets culturally and linguistically diverse (CLD) children (Gutierrez-Clellen & Pena, 2001). DA measures a child's potential to learn, as opposed to a child's knowledge base or life experiences. This assessment method stems from Vygotsky's work of the 'zone of proximal development' (ZPD). This theory states a child's cognitive development is dependent on social interactions. The child's optimal development period, or ZPD, occurs when the child is faced with challenges they are unable to perform without assistance. **Scaffolding,** or adult assisted learning, takes place to allow the child to complete this task (DeLamo & Jin, 2011). There are various approaches to DA. Most evidence supports the **test-teach-retest** method. This involves three components:

- **Pretest** Assess the child's current performance.
- **Teach** Incorporate *mediated* learning: Facilitate the child with strategy use, while observing their *modifiability*, or ability to incorporate the newly learned strategy.
- Post Test -> Compare the child's performance to the pretest phase, and evaluate the child's modifiability.

If a child can complete the task with the newly learned strategy, they likely exhibit a **language difference.** If a child required a high amount of examiner effort, was less responsive so input, and did not readily transfer their learning to the task, this may be indicative of a **language disorder**.

"A bilingual speaker is not the sum of two monolinguals, but an individual with a unique, integrated, linguistic profile"

Grosjean, 1989

A CLD child should be assessed in all languages they use within various interaction environments. If possible, involve your bilingual colleagues!

Strengths

- DA is an effective method to identify a developmental language disorder (DLD)
- DA allows a child to be assessed over time.
- DA enables clinicians to modify intervention plans according to the child's learning needs.
- The mediation phase of DA allows a clinician to identify learning strategies that promote the greatest change in which parents or guardians can continue to use at home.
- The mediation phase allows the clinician to predict the child's responsiveness to intervention.

Weaknesses

- The clinician still needs to take the child's cultural background into account before judging the child's responsiveness to intervention (e.g. eye contact or turn-taking may be different due to their culture). DeLamo & Jin (2011) recommend using a sociocultural approach to avoid this issue.
- Reliability and validity of DA is difficult to evaluate.

CONSIDER: The Sociocultural Approach

The sociocultural approach enables the clinician to interpret results in the light of the child's linguistic and cultural background (DeLamo & Jin, 2011). This approach can be time consuming, but research shows it is an effective supplement to DA when identifying a language difference vs. disorder.

Big Idea:

Collect background data to conduct an assessment through the perspective of the child's culture. This involves:

- Observation of the child in multiple settings to understand how the child interacts with others on a daily basis.
- Observation in at least one setting that facilitates motivation to reduce anxiety.
- An interview of family members to learn about cultural differences and family dynamics. This includes asking openended questions like "Tell me about a typical day".
- Engaging with the child to learn more about their interaction style, interests, and conversational strategies.
- Interviewing teachers or classroom support staff to gain further insight of the child's interaction with others.



Refer to this resource for a full protocol: http://bilinguistics.com/wp-content/uploads/2013/09/Dynamic-Assessment-Protocol.pdf

STEP ONE

Begin with a child who is performing poorly relative to his or her peers in a particular language area. Identify the language area where child is not performing well. Standardized Testing may be used here.



ST should be used as a qualitative measure of linguistic competence. Results should not be compared to normative data (DeLamo & Jin, 2011).

STEP TWO

Complete these 5 steps to attempt to teach the skill that the child lacks.

1. INTENTIONALITY → What is the goal?				
"Today we are working on".				
2. MEANING → Why are we doing this?				
"When someone, it's important to"				
3. TRANSCENDENCE → What if we don't have this skill?				
"What if your teacher tells you to, but you Then				
4. APPLICATION → Let's try it together!				
"This time when I, I want you to I'll go first, then you do it."				
5. COMPETENCE What did you learn and why is it important? When will you use it				

References

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"Remember, it's important to ______. Now you tell me why it's important. Think about when you might need to . Then, we will try it 5 more times."

Dynamic Assessment Blog: https://blog.asha.org/2014/05/01/dynamic-assessment-how-does-it-work-in-the-real-world-of-preschool-evaluations/

Dynamic Assessment Protocol: http://bilinguistics.com/wp-content/uploads/2013/09/Dynamic-Assessment-Protocol.pdf

De Lamo White, C., & Jin, L. (2011). Evaluation of speech and language assessment approaches with bilingual children. *International Journal of Language & Communication Disorders*, 46(6), 613-627.

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STEP FOUR

Determine if the child needs intervention and evaluate your goals:



Scenario #1: You teach the child the new skill quickly. This means:

- a. This is not a suitable goal for the child. Readjust your goal and repeat Step 2-4.
- b. The child performs within normal limits after mediated learning, and is not in need of intervention.



Scenario #2: The child improved his/her performance, but needed your help. This is a great goal, and you now have this child's documented level of support to continue through with intervention.



Document your support to determine how much examiner effort was necessary to help the child learn the skill:

ı	Minimum Support	0	Repetition
		0	Rephrasing
		0	Slowed Rate
		0	1-2 Presentations
N	Moderate Support	0	Modeling correct response
		0	Providing a demonstration
		0	Multi-sensory input
		0	3-4 prompts
N	Maximum Support	0	Direct imitation (verbal)
		0	Physically prompted
		0	Reduced content
		0	Performs task for child



incorporate the
sociocultural
approach
if possible

→How do I know how much support to provide?:

Remember, DA is based on Vygotsky's **ZPD**, and our goal is to determine the size of the child's **ZPD**. This means we need to determine the gap between the child's performance on a task without assistance and the child's performance on the same task with adult assistance. To do this, begin with **minimum support**, and add support if needed until the child completes the task successfully.