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„Specific Language Impairment (SLI) in a bilingual
context and its influence on teaching in Austria“

A small-scale study concerning characteristics and the handling of SLI and
other language disorders in the Austrian school system

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William Shakespeare¹

¹ Refer to:

<http://www.write-out-loud.com/thank-you-quotes.html> (Accessed May 2015)

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List of Abbreviations

AFASIC	Association for all speech-impaired children
AHS	Allgemein bildende höhere Schule (one type of secondary school in Austria)
ASHA	American Speech-Language-Hearing Association
BMBF	<i>Bundesministerium für Bildung und Frauen</i> (Federal Ministry for Education and Women)
CELF-4	Clinical Evaluation of Language Fundamentals, 4 th edition
CEFR	Common European Framework for References of Languages
EP	Educational Psychologist
fMRI	functional Magnetic Resonance Imaging
GERS	Gemeinsamer Europäischer Referenzrahmen für Sprachen
L1	first language learned
L2	second language learned
ND	normally developing
NMS	Neue Mittelschule (new type of lower secondary school in Austria)
ÖSZ	Österreichisches Sprachen-Kompetenz-Zentrum (Austrian Language Competence Center)
PET	Positron Emission Tomography
PH	<i>Pädagogische Hochschule</i> (Austrian teacher training college)
SEN	Student with special educational needs
SENCO	Special Educational Needs Coordinator
SLI	Specific Language Impairment
SLT	Speech and Language Therapist
SPECT	Single Photon Emission Computed Tomography
TOLD	Test of Language Development, 4 th edition

1. Introduction

"The limits of my language mean the limits of my world."
Ludwig Wittgenstein²

When someone's production or comprehension of language is restricted, then there are various implications that affect life negatively. In order to avoid long-lasting repercussions that may reduce an overall quality of life, it is indispensable to get to the bottom of language disorders and find ways to handle as well as to reduce them. As impairments in the language often emerge in the early years, when acquiring the first language, it is important to have a closer look at the development of children with regard to language learning, at home as well as in educational settings. Only if there is awareness of an existing speech impediment, measures to facilitate learning and therefore to make interaction easier can be taken.

It is the general aim of this diploma thesis to investigate this mentioned phenomenon of speech impairments and how they have an influence on our literacy as well as social behavior and everything that is connected to the mastering of life. To be precise, this thesis deals with a particular language disorder in first instance: Specific Language Impairment (SLI). This developmental type of speech impairment seems to be well known in English speaking countries but apparently does not play a big role in the German-speaking area. Therefore it is the aim to explore its occurrence in Austria and to analyze the influence of common developmental language disorders, such as SLI, on the second language acquisition of Austrian students. Since most pupils in this country learn English as their L2, it is especially interesting to do some research in this area and explore how the acquisition of the English language is affected when there is a language impairment existent in the first language. However, before dealing with the specific situation in Austria, it is of necessity to compare valuable literature on that topic and thus gain some theoretical knowledge in the field of language disorders and Specific Language Impairment in particular.

² Quote taken from: <http://www.speakingofspeech.com/uploads/SpeechQuotes.pdf> (Accessed July 2014)

The first chapter will deal with the development of language disorders in general as well as in bilingual contexts. In the course of this, language itself and some of its features will shortly be discussed and it will especially be highlighted how language impairments can be diagnosed. In addition to that, the impact of the mother tongue on the acquisition of a second language will be emphasized, with regard to impediments in the field of linguistics.

The thesis' main topic, Specific Language Impairment, will be represented in the second part. This chapter is designed to give the readers the most important characteristics of SLI, after defining the term in detail. Moreover, the symptoms of this particular developmental speech disorder will be precisely analyzed and will therefore be split up into the categories of neurological, linguistic and social characteristics of Specific Language Impairment. By providing descriptive examples of errors made by students who suffer from this disorder, the readers shall get a real impression of how SLI affects speech production and comprehension of disabled learners.

In a further step, part three of the thesis will consist of measures to test as well as to provide help for students suffering from SLI and other language impairments. As a consequence, general testing methods will be discussed and the school setting as an important agent in this respect will be evaluated. Additionally, intervention measures and the professionals involved in such a process will be mentioned and reflected on.

The final part of this thesis makes up the biggest, and also most important, part as it contextualizes the analyzed theories and approaches with regard to the Austrian school system. After providing some information on Austrian policies and the theoretical handling of language disorders there, the implementation of the empirical study will be explained. Subsequently, the outcomes of the study will be analyzed and discussed. Of course, also the impacts of the results will be reviewed in this context. Finally, the overall discussion will sum up the main findings and will hopefully stimulate further thought about the handling of Specific Language Impairments and other language disorders in the Austrian school system.

2. Language impairments in general

Language impairments are very common and can cause severe learning problems when children enter school. Then, a deficit in the mother tongue is not a single problem anymore but multiplies with regard to other subjects at school. The second language taught at school suffers to a great extent, too. In order to understand this phenomenon of language impairment in the second language better, it is of advantage to first define this deficiency among children in general when they acquire language for the first time.

2.1. The development of language impairments

Before dealing with language impairments in the second language that may occur differently than those in the first language, it is worth compiling some information about detriments in the L1 in order to see how language is acquired in general and what types of factors influence this acquisition and usage of communication. Yet, in order to stay within the scope of this chapter and to leave room for the paper's actual topic, Specific Language Impairment in the second language, only a selection of the most important factors will be briefly discussed.

2.1.1. Language and its features

Understanding the term language is obviously essential for defining language impairment. Yet, this term is not as easily described as one would imagine. Kleffner (1973: 14) elucidates language as a „learned code“ or simply a „system of symbols“ that are used to convey meaning. Nevertheless, in order to complete the definition it has to be clarified that this great amount of words can transmit meanings in various ways due to an alteration in their usage. In addition to that, it has to be differentiated between spoken and written interaction as well as nonverbal communication such as gestures and facial expressions. “Not all communication is language” (Kleffner 1973: 15). This has to be considered when dealing with language impairments in greater detail.

However, the term language cannot only be explained in a single paragraph. There are various definitions of language with regard to purpose and means of representation. Only a few of them are interesting when dealing with language disorders in particular. Bloom and Lahey (1978: 4) have determined five

important features of language. The first of them is congruent with Kleffner's definition mentioned above as they remark that language is a code that "is used to represent objects, events" and relationships (Bloom & Lahey 1978: 4). Likewise, in their second facet, they also agree that it is a "system of sounds and symbols" that are used to form words and sentences and thus help to formulate statements and give information (Bloom & Lahey 1978: 7). Items number three and four reveal that language exists in order to represent ideas about the world and furthermore resembles a set of conventions. This implies that people who communicate with each other share certain knowledge and therefore use language to correspond between form and meaning of utterances. It does not really matter whether these articulations happen consciously or unknowingly, people who speak the same language will usually not have severe difficulties understanding the interlocutor (Bloom & Lahey 1978: 5-9). The last, and most obvious, feature of language according to Bloom and Lahey (1978: 10) is that it is used for communication. Yet, this interaction between two or more dialogue partners can sometimes be hampered when one of the interlocutors has difficulties articulating him or herself. Then, a language deficit can be detected.

An interesting question is whether such language impairment emerges within the course of time, during language acquisition, or if a deficiency in a language can usually be diagnosed before? The answer to this thought can be rephrased as the nature-nurture controversy. There are various attempts of scientists to answer the question by referring to theories of psychology. On the one hand, there are the supporters of the Behaviorist Theory, which states that children are being taught how to talk through "conditioning", "stimulus-response" acts as well as "reinforcement strategies", or in other words through the natural surroundings (Carrow-Woolfolk & Lynch 1982: 111). This implies that children are passive language learners who only react and act when they get valuable input and so definitely need to be guided through their stages of language learning. On the other hand, there are Innate Theories that contrast with the Behaviorist Theory (Carrow-Woolfolk & Lynch 1982: 112). Scientists of this area are of the opinion that children develop language naturally as well as automatically and additionally use their experience for acquisition.

Even though there are strong supporters of both theories, the development of language is probably achieved by both approaches. It is said that some part of language is learned whereas the other part is “acquired through inborn principles” (Carrow-Woolfolk & Lynch 1982: 113). In addition to that, Verhoeven and van Balkom (2004: 4) state the process of language acquisition in one incisive sentence:

The child’s development of language and communication is defined as a result of the interaction between his or her biological potential, the health conditions of the child, and the support available from the environment, family, therapeutic setting, and educational facilities.

This shows that, even if children suffer from some innate language deficiencies, they can still progress and achieve success when being supported. But in order to get to this stage, language impairment has to be diagnosed first.

2.1.2. Diagnosing a language impairment in early childhood

Language delays can be discovered among around five percent of all young children but detecting deficiencies in that area at a young age of language acquisition is not easy (Verhoeven & van Balkom 2004: 349). An early diagnosis is still of great advantage since a large number of children who are diagnosed early tend to recover more effectively than those who are diagnosed at a later stage of language learning. However, there are still about 50 % of children whose language impairments are not only present but additionally act negatively on their development in fields of communication and cognition but also in social sectors and early literacy according to Paul & Smith (1993: 592-593 quoted in Verhoeven & van Balkom 2004: 350). Early recognition and intervention can help to minimize further weaknesses and problems.

Several methods for diagnosing language impairment exist although there are differences with regard to the appropriateness of each technique. Screening instruments, often performed in public health centers, are usually used to test early communicative behavior among children who are only in their beginnings of language acquisition. At this stage, it can already be differentiated between normally developing children and those who are at risk of suffering from a language disorder (Verhoeven & van Balkom 2004: 351-352). Interestingly, children are not active test persons in such screening tests as their parents are

those who answer questions about their child's understanding and production of language. The children themselves are most often too young to act as real subjects at that stage.

Moving on to children who already go to school, a language problem can often already be detected after a short observation in class. The behavior during interactions with others, the production of language and the comprehension in class can reveal clear deficits in language. During this phase, communication skills are mostly so delayed that even non-experts would identify a disorder. Then, it is a necessity to decide whether this deficit in language also appears to affect other areas in school, such as problems in reading or learning in general. Cooperation with the school facilitates a correct diagnosis as the checking of school reports can help to recognize whether there are also other learning problems (Bloom & Lahey 1978: 341). After agreement with the child, his or her parents and the school, further support programs such as intervention programs have to be decided on and launched.

2.1.3. Language impairments in the first language

Although language disorders and their impacts have been studied for nearly two centuries now, the term is often "neither clearly nor consistently defined" (Carrow-Woolfolk & Lynch 1982: 201). Clinicians and scientists, who equally use the terms *deviant language*, *language disorder*, *language disability* and *delayed language*, have made several attempts to determine the origins and causes of these developmental language interferences (Bloom & Lahey 1978: 289). Kleffner (1973: 15) has for example described the terminology *language disorder* as a "deficit in linguistic competence relative to existing levels of nonverbal social and intellectual development". In other words, children with a language deficit do not show any other signs of impairment, neither social nor cognitive, as they have merely problems in either the production or the comprehension of language. Yet, although the etiology of such a disorder is often unknown, it is believed that language impairments have neurological backgrounds (Bloom & Lahey 1978: 289). Moyra Smith has, for instance, defined the concept of language disorder in her work *Mental Retardation and Developmental Delay* (2006: 195) as "impaired language development" that "may be the manifestation of mental retardation, autism, hearing loss, cleft palate, or cerebral palsy". So the term *developmental language*

disorder is only an umbrella term for a range of specific impairments like the ones mentioned above. Another defect in this group is Specific Language Impairment which will be discussed in more detail later in this thesis.

To explain the most often discussed types of language disorders, clinicians made the following inferences: Firstly, children who have poor auditory skills are considered hearing impaired. Secondly, those who have subnormal nonverbal intelligence but can hear normally and have no signs of affective disturbance are said to be mentally retarded. Thirdly, youngsters that show lacks in social behavior and seem to be restricted in their communication are considered to be autistic. And in fourth place, which will be of greatest importance to this thesis, children who have normal nonverbal intelligence as well as normal hearing skills and normal social relations but difficulties in speech production and comprehension suffer from Specific Language Impairment (Blanken et al. 1993: 575).

After defining language disorder and its different branches, there is still the important question of how children with a delay in language usually behave. According to Blanken et al. (1993: 578-581), language-disordered children may be divergent in the language itself but their way of learning is most often similar to normally developing children. They only happen to learn patterns more slowly and sometimes at a later stage than children without language deficits do and moreover have just another perception of language in practice. In addition to that problem, language-impaired children somehow “fail to generalize their linguistic knowledge” (Blanken 1993: 578). This means that even if they make progress in therapy or remedial teaching, they cannot apply the linguistic patterns learned outside the secure environment of the lesson. As children act as imitators and therefore may learn the language they hear, also parental speech has been investigated in order to see whether parents speak differently with their linguistically impaired child than they usually do. However, Kleffner (1973: 9) as well as Blanken (1993: 581) have argued that this cannot be the case as those parents tested spoke in rather normal ways with their descendants which implies that the “language environment does not seem to explain their language delay”. It might be assumed that the acquisition of language therefore solely depends on the cognitive development of the learner.

However, as focus is commonly laid on the linguistic competences of the child when defining a language disorder, Carrow-Woolfolk and Lynch (1982: 202-209) have coined six perspectives on the description of language disorders in order to show that there are also other factors that play a fundamental role in this connection. Apart from setting the focal point on the investigation of the disorder, which is seen as one important perspective according to Carrow-Woolfolk & Lynch (1982: 203) as the language performance has to be observed adequately, the most essential of these perspectives is the one of the child. During investigation, scientists often lay their focus on the language competences of the impaired child and as a consequence forget to consider the child itself, its social relations as well as its academic achievements (Carrow-Woolfolk & Lynch 1982: 202-203). So in addition to the closer examination of the child itself,

[t]he characteristics of disordered language, the order of its acquisition, the child's strategies for learning the language, and the condition of the child's language-learning system are the basis for understanding the disorders (Carrow-Woolfolk & Lynch 1982: 204).

The third perspective states that the different dimensions of a disorder clearly have to be taken into account and consequently all components of language acquisition have to be reflected on. It is obviously not enough to only focus on language performance, also cognitive aspects, "processing skills of perception and memory", the communicative environment and language content need to be observed and evaluated (Carrow-Woolfolk & Lynch 1982: 205). Kleffner (1973: 7) has a similar view as he says that it is indispensable to differentiate between linguistic competence and linguistic performance in order to get to a suitable definition of language disorders.

Nevertheless, apart from identifying the dimensions and features of language, it is also essential to understand the relationship and interaction between them. This process helps to "avoid misinterpretation and oversimplification" of a disorder, referring to the fourth perspective stated by Carrow-Woolfolk & Lynch (1982: 206). Moreover, with regard to the last two perspectives, specification and significance, it has to be added that on the one hand, group classifications of language disorders should be avoided in order to guarantee a precise and correct diagnosis. On the other hand, it has to be considered that not all difficulties or

delays in a language are equally language disorders and therefore have to be treated differently. (Carrow-Woolfolk & Lynch 1982: 209; Kleffner 1973: 6).

2.2. Language deficits in a bilingual context

After reading the preceding chapter one can imagine that many studies about language impairments in the first language exist. Unfortunately, there are much less of those with a focus on children who have severe difficulties in the production and comprehension of a second language although a language disorder can affect the second language, learned at school for instance, differently or with different severity. According to Damico et al. (2010: 43) “almost 60% of Europeans have learned a second language” and it is the present case that the majority of people who learn at least two languages do that before reaching puberty (Paradis 2010: 227). Hence, the interest in researching the impacts of language disorders in the second language, particularly among school-aged learners, has increased over the last years. Apparently, some differences between the disorder with regard to first and second language as well as the specific influence of a disorder in the L1 on the acquisition of the L2 can be detected.

2.2.1. Differences between L1 and L2

While the acquisition of the first language, or in other words native language, starts right at beginning of the development of language abilities, there are two ways of learning a second language. It can either be acquired almost simultaneously with the first language, when a child for example has parents with two different mother tongues, or it is learned at a later stage, as a foreign language at school, for instance. This sequential second language learning certainly appears differently than the first type as the amount of input is often less and reaching a certain language level might take longer as a consequence (Paradis 2010: 228; Damico et al 2010: 43). Those children often do not use the second language as frequently or intensively as the ones who grow up bilingually and learn the language right from the very beginning. Yet, the exposure to the language as well as the “social context” in which children learn their languages are vital as they can have great influence, and even valuable positive effects, on an existent language disorder (Paradis 2010: 227).

By focusing on sequential second language learners in this thesis, i.e. those who start acquiring the L2 when entering school, one can detect different stages in terms of linguistic competencies through which they may go at the beginning of second language acquisition. Within the first three months of exposure, the “pre-production stage” takes place in which the main focus solely lies on comprehension as the learners lack vocabulary as well as grammatical structures, which are necessary to produce utterances. Then, in the “early production stage” which happens around three to six months after the first contact with the target language, learners are already able to produce one to three word phrases whereas the main focus is still on comprehension. Actual speech emerges in the third stage in the following months and thus students can utter simple sentences due to an ever-expanding vocabulary, although grammatical errors are still standard. In the last stage, taking place between two to three years after the first exposure to the second language, learners show an “improved comprehension”, “adequate face to face conversational skills” and they have a more elaborate vocabulary; hence this stage is termed “intermediate fluency” (Damico et al. 2010: 44-45).

To sum up, not only the social context during second language acquisition in schools is informative, but the four important factors as input, output, use and proficiency play a relevant role when learning an additional language to the mother tongue (Damico et al. 2010: 44). In other words, the degree of exposure to the target language, the amount of time that is spent on producing utterances in this language as well as the level of proficiency can influence the emergence of a language disorder and may facilitate the alleviation of it. This knowledge is in particular important when contrasting first and second language acquisition, as the learning of a further language requires great concentration and practice, not only in cognitive, but also in linguistic terms. Learners that suffer from a language disorder are vulnerable to mixing features of both languages, which hampers further immersion in the second language.

2.2.2. The particular influence of the L1 on the L2

The first language can act as a massive disturbance factor when acquiring a second language as some students, especially those who are prone to language learning difficulties or even suffer from a language disorder in the first language, tend to mix the two languages and therefore inappropriately use structures of their L1 in

their L2. This may happen as some learners “rely on their prior knowledge” of the mother tongue (Carrow-Woolfolk & Lynch 1982: 431). Being confronted with new linguistic features, grammatical rules and vocabulary can cause an overload of information, which may lead to referring to the language already known in order to avoid greater confusion and effort. It is said that the more linguistic similarities there are between the two languages learned, the more L1 knowledge will be transferred to the learning process of the L2. This process, which can be further described as the “intrusion of the semantic and syntactic forms of the L1 on the L2”, is better known as interference, according to Carrow-Woolfolk & Lynch (1982: 432). Interference of two languages is a phenomenon that can also often be seen among language-impaired children and teenagers at school. Most often, students apply certain grammatical or construction rules of the L1 in the L2 or he or she “overgeneralizes the semantic aspects of forms in the L2 that are similar to those in the L1” (Carrow-Woolfolk & Lynch 1982: 433). This is often apparent among prepositions that are phonetically similar. One example for that would be the following phrase, uttered by a 14-year old girl having German as a mother tongue and learning English as a second language:

(1) * On weekends I stay by my grandma.³

Here, in this citation taken from a student of my own, one can clearly see that the student has assumed that the German preposition *bei* has the same meaning as the English preposition *by* even if they have completely different meanings. It appears that she relied on her German vocabulary knowledge, which interfered with her English utterance. Carrow-Woolfolk & Lynch (1982: 439) are also of the opinion that “L2 learner[s] may use forms, structures, or lexicons from the L1 to “substitute” for forms in the L2 that [they have] not yet learned”. Such influences of German occur rather frequently among language-disabled but also normally developed learners of a second language, especially in the current relevant case of English learners with the mother tongue German.

Apart from such transitional errors or those due to language interference, developmental mistakes in L2 acquisition can also be detected (Carrow-Woolfolk & Lynch 1982: 438). Such developmental errors additionally emerge on the basis of

³ All grammatically or lexically incorrect examples will subsequently be marked with an asterisk.

an already existing language disorder in the mother tongue, are transformed and hence hamper the correct acquisition of the L2. In general terms, bilingual students with disorders are “subject to the same factors that cause language disorders in the monolingual child” (Carrow-Woolfolk & Lynch 1982: 437). Educational settings are optimally appropriate for identifying linguistic difficulties since a second language, as in the present case of learning English at school, is acquired completely differently than the first language. Furthermore, schools, at best, provide educational aids and supportive measures to reduce the interference of German in English language acquisition, whether to reduce disturbances in common language learning or weaknesses in language acquisition of students with deficiencies.

3. Specific Language Impairment

As the core of this thesis, the following chapter will take a closer look at one particular language disorder, Specific Language Impairment (SLI). After defining this linguistic disorder by contrasting approaches and concepts of various scientists and pointing out some general characteristics of students suffering from SLI, the major focus will be on neurological characteristics followed by linguistic characteristics of the impairment. More precisely, the second section will cover semantic, syntactic, and grammatical as well as pragmatic aspects as these areas depict the consequences of the disorder significantly. Since it is the intention to discuss SLI's effects in every aspect, social impacts on students who suffer from Specific Language Impairment will additionally be highlighted. These should evince how the life of SLI students is influenced with regard to peer interaction, the handling of group work and instructions in class and especially general behavior in dealing with other people.

3.1. Definitions and general characteristics of learners with SLI

Specific Language Impairment has often been the subject of investigation throughout the last decades; in fact the interest in studying this particular language disorder has gradually grown. This might be due to the fact that the detection of language disorders has become facilitated as education has developed and better ways to identify and improve learning problems among students have

emerged. According to Leonard (1998: 3), 7% of the population suffer from Specific Language Impairment and males constitute the sex most affected. Clearly noticeable is also the fact that language learning problems can be transmitted from one generation to the next, so it can often be detected that children who suffer from SLI have parents, or at least one parent, who have, or has, a difficult or deviant language learning past.

Although a large number of scientists tried their best to elucidate the definition and the main characteristics of Specific Language Impairment, there is no suitable “classification system” of the disorder. There is only the possibility to define the condition by excluding aspects (Perkins & Howard 2000: 7). So it is apparently not a “homogenous disorder” as sufferers show a variety of patterns, even if all of them have one thing in common – they all experience language problems alongside normal cognitive abilities (Verhoeven & van Balkom 2004: 23). The delay in language development can be seen as the most evident characteristic that results in the fact that children with SLI are late talkers and deviant in language. On this account, the term developmental dysphasia is used synonymously with Specific Language Impairment (Blanken et al. 1993: 574; 580). The precise definition given in almost all the literature on this topic is phrased as follows:

[SLI] is a term applied to children who show significant deficits in language learning ability but age-appropriate scores on non-verbal tests of intelligence, normal hearing, and no clear evidence of neurological impairment (Perkins & Howard 2000: 1).

Blanken et al (1993: 575) and Verhoeven and van Balkom (2004: 23) additionally emphasize that children with autism, and therefore those who have abnormal “social relations” are not included in the disorder. In addition to that, learners with developmental dysphasia have no cognitive impairment and are not disrupted by other factors that inhibit language acquisition. They have normal intelligence, which means that their IQ is usually over 85 (Leonard 1998: 16). The only indication is that they have difficulties in learning a language, which might be due to information processing difficulties (Blanken et al. 1993: 606).

The most highly affected linguistic area detected in learners with SLI is the one of morphosyntax (Bedore & Leonard 1998, quoted in Damico et al. 2010: 210). So those people affected show difficulty in marking tense, forming plural nouns or in using the third person singular correctly by not adding the mandatory “s”. In

general, there is the possibility to classify common errors that are made by children suffering from Specific Language Impairment. Perkins & Howard (2000: 7) provide three different forms of SLI. On the one hand, there is expressive SLI (also referred to as E-SLI) which causes “expressive semantic and syntactic difficulties as well as formulation problems” among sufferers. On the other hand, “Expressive-Receptive Language Impairment” describes specific grammatical problems and additionally comprehension difficulties. The last form of SLI mentioned is “Complex Language Impairment” which is of a pragmatic kind (Perkins & Howard 2000: 7). According to a study carried out by Damico et al. (2010: 213), the distribution of expressive and receptive problems among learners with SLI is more or less balanced. It has been revealed that equally around 35% of sufferers experience rather expressive or both, expressive and receptive, problems. In contrast, only 28 % have receptive difficulties as a cause. Problems of a pragmatic kind are not further specified which gives reason to assume that they are not as common as expressive or receptive difficulties among students with Specific Language Impairment.

Apart from linguistic errors, the language development of such children suffering from SLI “does not follow the usual blueprint” in general, states Leonard (1998: 9). They learn words much more slowly, show slower motor responses and seem to have more difficulties in concentrating and paying attention in class than their typically developed peers. Moreover, they are restricted in producing “conversational speech acts” (Leonard 1998: 30). Leonard, who particularly dealt with the development of language among children with SLI on a large scale, determined five ways on how to differentiate between learners with Specific Language Impairment and those who develop normally concerning language (Leonard 1998: 31-36). The first aspect, which in fact has already been mentioned, is the delay in the affected group. Children start to acquire language at a later stage and furthermore make progress more slowly. Secondly, it is said that learners reach a plateau in language acquisition, which can be described in the way that they may never become experts but have their own limits and are often not able to cross this specific border. In third place, profile difference is named as an important indicator. Learners that are deviant in language learning and those who are not obviously show contrasting characteristics. Children with SLI are usually at

a higher chronological age than their normal developing peers with the same linguistic features. In other words, when for example normally developing children start uttering complex sentences at the age of three or four, children with developmental dysphasia are in the same learning phase a few years later. In addition to that, and fourth, even if impaired children and others may make the same mistakes, affected children commit a higher number of errors, so there is an “abnormal frequency” of those (Leonard 1998: 35). As a last point, Leonard (1998: 35-36) mentions that there is not only the quantity of errors but also the quality that widens the gap between language-impaired learners and those that do not show any severe learning difficulties.

Yet, those problems in language, “limitations in attentional capacity” and experienced difficulties in social interaction can lead to further consequences. “[L]iteracy problems” are supplementary implications of Specific Language Impairment and are in most cases only detected at a later stage in childhood, when children enter school for instance (Blanken 1993: 582; Perkins & Howard 2000: 7). Moreover, it can then be seen that “prelinguistic behavioral aspects such as eye contact, listening attitude, imitation, and symbol development” are also often limited among the target group (Verhoeven and van Balkom 2004: 4). And even if the implicated learners manage to improve their linguistic capacities, other “academic tasks such as reading and mathematics” can be affected (Blanken 1993: 577). This shows that problems in language acquisition often expand taking into account that the older children get, the more they learn and of course the more effort is required. And generally, even though improvement can be seen, weaknesses persist in adulthood (Leonard 1998: 20).

3.2. Neurological characteristics of learners with SLI

It is not the attempt of this thesis to concentrate on neurobiology in detail, as the more practical issues such as linguistics or pragmatic aspects of Specific Language Impairment seem to be of greater importance and provide a more precise picture of the disorder. Nevertheless, it is still of convenience to shortly outline the implications of a language disorder such as Specific Language Impairment on the brain. Common and effective methods for measuring brain structures are “functional magnetic resonance imaging” (fMRI) and “positron emissions tomography” (PET) as well as “single-photon emission computed tomography”

(SPECT) that determine oxygen consumption in the brain (fMRI) or reflect “changes in regional cerebral blood flow” (PET and SPECT) and therefore show what parts of the brain are in use and to what extent (Verhoeven & van Balkom 2004: 105-106). This gains importance when aiming at defining SLI in terms of how the disorder is developed and what areas of the brain are affected when suffering from developmental dysphasia.

By trying to give an answer to the question of how SLI develops, one can say that genes may contribute to the emergence of a language disorder. Blanken et al. (1993: 586) state that cases of SLI “often give evidence of genetic transmission”, so if a child suffers from developmental dysphasia, it is very likely that parents, grandparents or siblings also show signs of the disorder. Yet, the genes are not the only factors that may cause a deficiency but environmental influences are apparent, too (Rice 2004: 208). Evidently, there is a large amount of individual variation, so there are uncountable different degrees of the disorder (Blanken et al. 1993: 607).

When Specific Language Impairment exists, the most affected areas are located in the inner part of the brain, where the temporal lobe, the frontal lobe as well as the parietal lobe adjoin. The following Figure 1⁴ illustrates the profile of a brain, portraying the frontal lobe in blue, the parietal lobe in yellow and red and the temporal lobe in green.

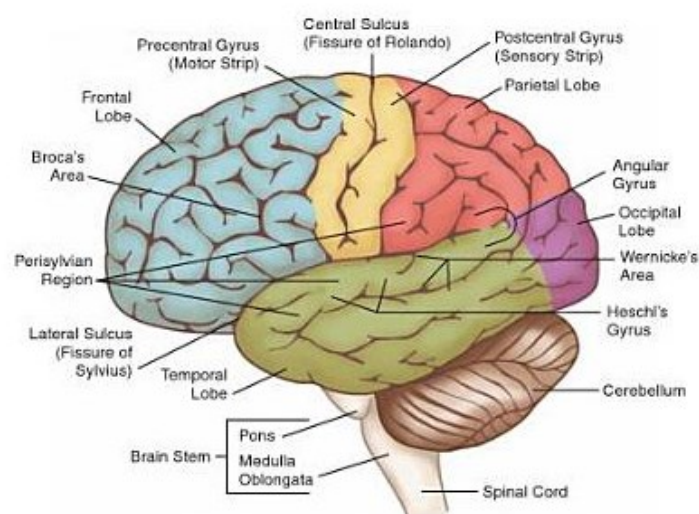


Figure 1: Profile of the brain

⁴ Refer to: <http://www.amyspeechlanguagetherapy.com/aphasia.html> (Accessed February 2015)

On the basis of this figure, the areas affected when suffering from SLI can easily be detected. A considerable number of studies revealed that the most anomalies could be found in the perisylvian region. This part of the brain is characterized by the sylvian fissure, or also called lateral sulcus, which separates the frontal and the parietal lobe from the temporal lobe. Referring to the figure, one can find the perisylvian region between the lower parietal lobe and the upper temporal lobe, at a place where also Wernicke's area is situated (Verhoeven & van Balkom 2004: 104; 120; Leonard 1998: 155). This area is additionally relevant as it is engaged in receptive language and phonological processing and is responsible for speech comprehension and thus may also be harmed in children with SLI (Verhoeven & van Balkom 2004: 100). Therefore, those "posterior perisylvian and temporo-parietal abnormalities could explain comprehension problems in children with receptive SLI", confirm Verhoeven & van Balkom (2004: 108).

Due to studies that have already been conducted in this area, a number of malfunctions and abnormalities concerning sufferers of Specific Language Impairment can be marked. Prominent among these is the detected asymmetry in the prefrontal inferior regions of children with SLI and normally developing children. According to Verhoeven & van Balkom (2004: 100), in the majority of people with normal linguistic functioning the left planum temporale, which is the area called at the surface of the temporal lobe, "is relatively larger than the right planum, whereas in a number of dyslexics, the left planum has been reported to be smaller or of equal size". So the left hemisphere, which contains for instance Wernicke's area and "is responsible for all aspects of language, except perhaps intonation [...] and some higher levels of verbal comprehension, including humor" is said to be diminished among SLI sufferers. This can help to explain the existing weaknesses in using language correctly (Blanken et al. 1993: 586). In addition to that, the left side of the pars triangularis, which is the core of Broca's area, is also reduced in size. Broca's area is responsible for speech production and therefore together with Wernicke's area constitutes the language center in the brain. The reduction of this part consequently leads to problems in grammar and phonology (Verhoeven & van Balkom 2004: 103).

Furthermore, according to another study carried out by Verhoeven & van Balkom (2004: 103), "an extra sulcus was identified in the inferior frontal gyrus in 68% of

19 adults with SLI as compared with 40% of controls”, which resembles a further deviation from the norm. Additionally, “differences in size of [the] corpus callosum”, which is the “fiber tract that connects the two cerebral hemispheres”, as well as “lower blood flow in the middle and superior regions of the right frontal lobe” could have been detected (Verhoeven & van Balkom 2004: 104; 108). The latter phenomenon, less blood flow, which is also called hyperfusion, again happens in the region of Broca’s area, resulting in difficulties concerning expressive language what in turn is “related to attentional problems” (Verhoeven & van Balkom 2004: 109). These studies were often carried out among young people affected; nevertheless, cortical atrophy could have also been detected among adults (Verhoeven & van Balkom 2004: 103). This displays that the brain might not recover over time and abnormalities tend to persist in a person that suffers from Specific Language Impairment.

However, in general it can be stated that there is no clear explanation, apart from genes and environmental impacts, of why or how such abnormalities arise. And in fact, it is worth mentioning that not all sufferers of developmental dysphasia show the same visible abnormalities in the brain. A small amount of those even show a normal pattern, report Verhoeven & van Balkom (2004: 104).

3.3. Linguistic characteristics of learners with SLI

Even though there is no clear clinical picture concerning neurological aspects of Specific Language Impairment, there are said to be various linguistic inconsistencies among learners with SLI. A wide spectrum of these linguistic errors can be perceived, and there is no common theme or universal law that describes when children with SLI show what kind of syntactical, semantically or grammatical errors. As a matter of principle, one can argue that “children with SLI need more time and exemplars of language forms than nondisabled children of the same age to acquire language skills”, so they probably need more input than others to process and expand linguistic knowledge (Restrepo & Kruth 2000: 74). Yet, if there is language input from several languages learned the danger of language interference exists. Then structures of the L1 may be adopted in the L2 and specific difficulties “may be encountered in all aspects of language, including phonology, morphology, syntax, semantics, and pragmatics” (McLaughlin 1987, quoted in Restrepo & Kruth 2000: 67). The area, which is said to be most affected among

learners with SLI is, above all, morphosyntax. However, the aim of this chapter is not only to point out the weaknesses in morphosyntax but also to explain and exemplify the various semantic, syntactic and morphological fields that are harmed or only partly influenced among learners who show signs of Specific Language Impairment. In addition to that, it will also be stated whether, and if, how pragmatics is altered among the affected group of people. It can be regarded as self-evident that only outlines of the errors found in studies, will be given, as the amount of errors and the consistency of those cannot be generalized.

3.3.1. Semantic aspects

Deficits in the semantic fields among children with SLI are primarily characterized by word-finding problems. Several studies have shown that test persons with a specific language deficit make “unusual long pauses in speech, frequent circumlocution, and/or frequent use of nonspecific words such as *it* or *stuff*” (Leonard 1998: 46). This incident is additionally mentioned by Xiao-lei Wang (2015: 356), who defined word retrieval among those SLI sufferers as challenging and further explained this by stating that such affected learners appear to have a “smaller vocabulary size and less lexical diversity, density and complexity”. As a consequence, students with Specific Language Impairment show difficulties in categorizing words into classes (e.g. nouns, verbs or prepositions) or in forming particular categories such as animals or sports. In addition to that, problems in acquiring content-specific vocabulary in other subjects, as for example math or sciences, have also been reported.

Leonard (1998: 47-48), who closely dealt with this topic, mentioned naming errors as a further shortcoming in the field of semantics. In his book, he referred to a study in which children with SLI and their ND (normally developing) counterparts had to name the meanings of a set of pictures. Evidently, those children suffering from SLI needed more time to name the pictures given than their controls. Only with support and therefore facilitated retrieval, they achieved better results. Similarly, they were “slower in making judgments” and drawing conclusions about whether pictures had already been shown or not and were additionally slow in response time when they were asked questions (Leonard 1998: 48). This leads again to the assumption that learners with SLI exhibit language-learning problems due to processing difficulties and a harmed working memory capacity.

3.3.2. Syntactic aspects

In the syntactic area of SLI errors, several different weaknesses can be detected that are cross lingual, when taking the two languages of interest, German and English, as an example. These two languages show many parallels concerning the syntactic fields that represent obstacles for learners with SLI. German speakers suffering from developmental dysphasia, for instance, generally use noun phrases correctly but have their difficulties with the use of determiners and articles since they tend to omit the latter. Simultaneously, they experience problems with “the use of correct gender and number markings” (Clahsen 1989: 903). With regard to the use of noun phrases, the same findings apply to the English language. Subject noun phrases do not seem to be extremely problematic, and, in contrast to the German language, articles do not pose difficulties either, as there is only one definite article compared to German, which features three definite articles due to gender. Yet, object noun phrases and verbs are usually omitted on a frequent basis among English learners with Specific Language Impairment (Leonard 1998: 52).

According to Clahsen (1989: 904), all the tested children speaking German used “simple verbs, prefix verbs, and modals” but auxiliaries and copulas were only used scarcely as can be seen in the following example given by Clahsen (1989: 905):

(2) * ich X ein buch haben
(wants to have a book.)

In this case, the German auxiliary *will* is clearly omitted but interestingly, all children, even those who do not use such auxiliaries, make use of the verbal elements *sein* ‘to be’ and *haben* ‘to have’ (Clahsen 1989: 904). In English, copula *be* forms are also said to be omitted in many cases. Such omissions dominate in the English syntax among SLI sufferers as they also leave out certain prepositions (Leonard 1998: 57). With regard to wh-questions in the English language, it is to say that their usage is similar to that of ND peers: “Questions with *what* and *where* were more likely than *why* questions, with *who* and *when* questions the least frequent” (Leonard 1998: 57). Furthermore, it is significant that children with SLI produce a large number of questions with the auxiliary in the declarative position which can be seen in the subsequent example, stated by Leonard (1998: 57):

(3) * What we can make?

Thus, word order can also represent a hurdle for students with developmental dysphasia, when it comes to learning a language.

The last syntactically influenced aspect mentioned here is the one of argument structure. Affected learners have deficits in “assigning roles such as agent and theme or theme and goal on the basis of syntactic structure alone” (Leonard 1998: 58). In addition to that, they show difficulties in using subordinate clauses, according to Wang (2015: 356), which is the reason why learners with SLI tend to use very simple syntactic structures.

3.3.3. Aspects of grammatical morphology

The area of grammatical morphology is presumably the most limited one among SLI learners as a multitude of errors can be detected in this field. The use as well as the identification of a single grammatical morpheme or an entire set of those seems to be extremely challenging (Rice & Wexler 1996: 1239). In accordance with Xiao-lei Wang (2015: 357) the specific emerging flaws can be summarized in two sentences:

[Children with Specific Language Impairment] may have difficulties in using plural, possessives, third-person singular forms, comparatives, superlatives, irregular forms, and advanced prefixes and suffixes (*-ment, -able, -ness, -ly, un-, re-, dis-*). They also show difficulties in pronoun references, subject-verb-agreement, and verb tense use.

By segmenting and analyzing these different fields of grammatical difficulties, most errors can be categorized and grouped by the concept of finiteness marking of verbal forms. Here, an analogy between German and English speakers with SLI can again be drawn. Usually, finite verbs in the German language are placed in first or second position, yet affected learners often tend to put the infinitive verb at the end of a sentence, as can be seen in the example below (Grimm 1983: 174):

(4) * mama leine bauen

‘M. alone build’ - Infinitive

Hence, the common sentence structure in both languages, German and English, that is subject-verb-object, is often violated and altered to subject-object-verb constructions. In addition to that phenomenon, there are also many agreement mistakes with irregular verbs in the German language as “strong verbs [...] are

categorized [...] as regular verbs”, which can be recognized in the following example (Clahsen 1989: 907-908):

(5) * ich ... einfach geht in Schiff

‘I simply went onto the ship’ (required form: *gegangen*)

In English, the situation is similar to the one in German and the “acquisition of tense morphemes is extraordinarily affected”, states Paradis (2010: 230). Yet, three years earlier, Paradis (2007: 555) had illustrated two theoretical perspectives that “contrast in their predictions for this uneven linguistic profile in bilinguals in SLI”. On the one hand, there is the processing account, which declares “bilingual learners with SLI [...] lag behind monolinguals with SLI in their accuracy with both tense and nontense morphemes in each language because they have reduced exposure to both languages”. On the other hand, the representational account states that bilinguals with SLI do not necessarily have to be delayed “in their accuracy with tense morphemes” in their L2 as the source of the problem might be of an internal nature.

Nevertheless, concentrating on the processing account and therefore assuming that children with SLI even tend to make more omission errors in their L2 than in their L1 is more logical. The reason for that is that the input in their second language is less than in their first language, as a rule, and they therefore commit morphological mistakes more frequently. Consequently, and due to limited input, a great deal of creativity in language use of the L2 can be seen among students diagnosed with SLI (Paradis 2010: 235). Paradis (2010: 230) summarized the specific weaknesses that can be detected as follows:

- the “third person singular [-s] on the habitual present, *he walks*,
- past tense [...], *he walked/he ran*,
- BE (copula and auxiliary), *he is happy/he is walking*, and
- DO (auxiliary), *does he walk to school?/he doesn't walk to school*”

(Paradis 2010: 230)

All of these are “likely to be omitted, but, when they appear, they are likely to be restricted to finite contexts and to show [agreement] [...] when they are used” (Rice & Wexler 1996: 1242). Relating to the first point indicated, Rice, Wexler and

Hershberger (1998: 1414) found that children have difficulties recognizing where finiteness is allowed or prohibited. The following example illustrates the problems:

- (6) a. She liked to walk.
b. * She liked to walks.

Here, the *s* that usually accompanies the verb when the subject is *she* is wrongly used in the position given, as the verb *to like* requires an infinitival complement. Likewise, SLI learners often do not show subject-verb agreement and therefore confuse suffixes or forms of *BE*. Rice et al. (1998: 1414) have stated the following examples:

- (7) a. I walk.
b. * I walks.
(8) a. She is happy.
b. * She are happy.

In (7), the third person *s* is inserted although the first person is used in the subject position whereas example (8) shows the substitution of *is* and *are*, which leads to a straightforward assumption of commission errors on copula and auxiliary *BE*, as mentioned above and described by Leonard (1998: 62). As already mentioned, not only the forms of *BE* but also those of *DO* make up a large part of errors concerning finiteness. This can be seen in two examples below (Rice et al. 1998: 1414):

- (9) a. She does/did not walk.
b. * She does not walks.
(10) a. She is/was walking.
b. * She is walks.

In both examples, the utterances in *b.* are clearly those of learners with developmental dysphasia. The presence of *BE* or *DO* forms does not hinder affected children from using the grammatical morpheme *s* with the verb. In addition to that, *BE* generation can also be seen in the impaired group of people. This happens when learners “insert a *BE* form in a sentence without an appropriate grammatical context for this morpheme” as in the following sentence (Paradis 2010: 235):

- (11) * I want is a this!
(I want this one!)

As this example indicates, BE morphemes are very likely to be chosen as GAP morphemes, used as a gap filler when impaired students do not know the right wording, as they are very frequent in the English language and therefore might be used by learners with SLI in any random context.

Apart from this group of errors, there are also two other categories affected, according to Rice and Wexler (1996: 1242). On the one hand, there is the group of errors that contains a “set of morphemes that do not mark [tense] but also involve grammatical specification of reference”, including determiners and articles in particular. Learners who omit articles are just as likely to omit tense markers. On the other hand, there is the error group that constitutes a set of morphemes that “does not mark [tense] and does not share any other grammatical properties with [tense]” (Rice & Wexler 1996: 1242). Errors in this group include regular plural morphemes with the ending *s*, progressive endings *-ing*, and the prepositions *in* and *on*. One example is specified below.

(11) * There are two cat.

Example (11) shows that children with SLI are very likely to omit the plural inflection *s* when a quantifier precedes the noun (Leonard 1998: 68). The omission of such morphemes simply facilitates their communication.

Last to be mentioned in this subchapter is the use of pronouns among affected learners. Leonard (1998: 68-69) particularly argues that children with SLI are slow in acquiring certain pronominal forms. They show higher percentages of case errors as, for example, when they use the accusative case in nominative positions, which is shown in the sentence beneath (Leonard 1998: 68):

(12) * Him eating popcorn.

In the example, a masculine pronoun is used in the accusative where in fact the nominative *he* should be placed. The omission of the appropriate BE form is again unambiguous. Yet, interestingly, it is said that “case errors involving the third-person feminine pronoun (e.g. *her sleeping*) [are] more common than those involving the masculine (e.g. *him going*)” (Leonard 1998: 68-69).

All in all, the presented errors in the field of grammatical morphology were only some examples from a wide range of mistakes. As already said, one cannot make generalizations about these deficiencies but several studies tried to evince that

children with SLI clearly show difficulties in the use of morphemes, regardless of first or second language. Rice & Wexler (1996: 1243) emphasized that phenomenon by referring to a study in which typically developing peers used morphemes adequately in “90% or more of the required contexts” whereas “children with SLI used them in only 25%-48%”.

3.3.4. Pragmatic aspects

Inconsistencies in the various semantic, syntactic or grammatical fields may also contribute to inhibitions in pragmatics. Yet, even if we can take weaknesses in the area of morphosyntax among children with SLI for granted, the same cannot be said of the field of pragmatics. This is because generalizations are most difficult to be made in speech comprehension and production. Leonard (1998: 84) has found that while some studies demonstrate obvious pragmatic weaknesses among learners with SLI in contrast to normally developing peers, other studies either show no differences between the tested groups or even result in language impaired children achieving better results than their ND peers when it comes to using speech. Nevertheless, if the area of pragmatics is affected, which mostly emerges when entering school, common weak features can be noticed. In general, it can be said that these learners then simply have restricted verbal fluency. Their discourse is usually kept very short and as a matter of fact does not seem to be well elaborated. In addition to that, these interlocutors tend to be “ more hostile, less assertive, less persuasive, less polite and tactful” in the interaction with others (Wang 2015: 357). Paul (2007: 437) adds that these conversational partners are often “less sensitive to their listeners, often give incomplete and inaccurate descriptions, or have trouble adjusting their speech to the age or social status of their audience”. So in other words, learners with SLI have difficulties in selecting appropriate speech and are incapable of taking the perspective of the dialogue partner. This further means that there are “qualitative differences in terms of turn errors, interruptions, interactive attention, responsiveness and turn switch times” according to Blanken (1993: 620). Moreover, Ripley, Barrett and Fleming (2001: 95) list the pragmatic difficulties of SLI students. They experience problems in

- how to initiate a contribution;
- how to turn-take in a conversation;
- how to time interventions;

- how to end a contribution;
- avoiding violations of style in terms of the words they choose, the volume, pitch and rhythms of speech;
- maintaining a social distance which is comfortable to others in the group (proxemics). (Ripley, Barrett and Fleming 2001: 95)

Taking the precise features used in speech acts such as requesting, naming, thanking, warning and congratulating into account, it is said that the first two mentioned, requesting and naming, normally do not show any deviations among learners with Specific Language Impairment with regard to ND peers. The reasons for this might be that these functions do not necessarily require grammar in all cases and affected learners find their ways to still communicate by using gestures for example. A study described by Leonard (1998: 78) showed that SLI learners can even be more advanced in naming than their normally developing peers and could also make requests although their grammar was not as developed as the one of their counterparts. Despite these facts, an eminent weakness to be found in oral communication among students with SLI is that they have problems understanding an utterance such as the following (Nippold & Fey 1983, quoted in Leonard 1998: 79):

(13) My head is an apple without any core.

This suggests that children with Specific Language Impairment have difficulties understanding as well as producing figurative language such as metaphors. The actual message of this utterance is elusive for those people, as they tend to only understand verbatim statements (Wang 2015: 358; Leonard 1998: 79).

With a closer look at conversational participation of SLI learners, it has often been perceived that they are less likely to begin conversations as they are either insecure or simply do not know how to start a conversation. Interestingly, they are more assertive when talking to other children with SLI or younger children, as they probably feel superior then, in contrast to talking with ND same-aged children or adults in general. Furthermore, when talking to more than one child, the “abilities [of the SLI affected speakers] seem to drop off sharply” (Leonard 1998: 80-81). As a matter of fact, they likewise often “fail to enter into multiparty conversations”. The reason for this might again be that such situations, in which more than one

dialogue partner is involved, might represent a conversational hazard for students with developmental dysphasia, as they have the fear of not finding the right words or of misconceiving a message and are therefore intimidated. On this account it is said that these students have problems in “resolving conflicts in a verbal manner” (Leonard 1998: 81).

Although the field of pragmatics can cause problems among the group of people dealt with, lexical and pragmatic skills still belong to those areas that are usually least affected. Morphosyntactic skills, in which grammatical morphology is more affected than morphosyntax, constitute above all the main weaknesses and hence cause the most problems when it comes to linguistic features of learners with Specific Language Impairment.

3.4. Social characteristics of learners with SLI

Children with SLI do not only exhibit errors in linguistic fields but may additionally show deviations or irregularities in social or emotional behavior. For Blanken et al. (1993: 602) “[i]t is clear [...] that there are strong associations between developmental speech and language disorders and a variety of adverse psychosocial sequelae”. Especially when affected children enter school, social restrictions often come to the surface. Then they may feel uncomfortable and unsettled as they are torn out of their familiar environment and have to find their place in a classroom and in doing so have to assert themselves. Besides that, due to their language impairment, teachers or classmates might also perceive them in a specific or abnormal way. Language-impaired students are viewed as ill mannered when they cannot respond to requests, restless because they experience difficulties in being attentive or unmotivated when they do not always remember information that has just been given. Moreover, and what is worse, they can be regarded as stupid due to their unusual speech or are even said to be a liar, as children with SLI sometimes tend to answer questions with a simple yes, although this is not the right answer. They usually act in such a way when they have not understood the question or simply give wrong information in order to avoid further explanation. Because of these accusations, “children may become withdrawn or show anger and frustration about their reduced ability to communicate effectively with other people”, state Ripley, Barrett & Fleming (2001: 84). In addition to that, the “risk of social rejection” is increased due to the

difficulties in communication students with SLI may experience (Rutter & Mawhood 1991: 248).

Apart from how language impaired students are perceived by teachers or classmates, their self perceptions suffer to a great extent, too. As they are often put under pressure, whether by teachers, parents, classmates or even themselves, students with developmental dysphasia are likely to have a low self-esteem. Several factors contribute to the diminution of self-esteem.

On the one hand, school achievement plays a prominent role (Geoff et al. 2002: 127). Weaknesses and mistakes are often constantly apparent, the participation in group work as well as following instructions is difficult and feedback may most often be rather negative than positive. This affects an impaired student's self-confidence in a negative way. The reason is that social acceptance is often linked to success at school, so when SLI students experience scholastic difficulties and therefore receive bad grades, they also see themselves as socially not well accepted (Geoff et al. 2002: 141). The fear of failure is ever present. In addition to that, impaired students sometimes have problems accepting constructive feedback. "Ideas for improvement may be interpreted as a total rejection and the selection of an idea [...] which is not theirs [...] may be a trigger for tears or tantrums" (Ripley, Barrett & Fleming 2001: 95).

On the other hand, children with SLI "might perceive their social skills as lower than those of typically developing peers" and into the bargain, classmates might have a "lower estimation of a child's competence" (Geoff et al. 2002: 128). It can be a challenge to make friends and to maintain friendships as these children may have difficulties to keep up with their peers. "Talking through feelings, discussing relationships and predicting behaviors of others" ranks, for example, among the favorite pastimes of girls, especially in secondary school. Girls suffering from SLI, in contrast, sometimes lack the fluency that is required to take part in such conversations, which is another reason why self-esteem can be lower. Interestingly though, boys generally "rated themselves significantly worse than [...] the girls" with respect to a study conducted by Geoff et al. (2002: 133) that investigated social acceptance.

In direct contact with peers, affected students also often show withdrawal behavior. Since peer interaction mainly goes wrong, they seclude themselves and

are vulnerable and confused. Due to these properties, they might have a “reduced ability to ‘defend’ themselves verbally [...] which may trigger physical aggression or result in them becoming a victim of teasing or more severe bullying” (Ripley, Barrett & Fleming 2001: 91). As a consequence of the pent-up aggression and anger, children with SLI often appear to be impulsive, reactive and hyperactive and therefore are frequently “misidentified as having Attention Deficit Hyperactivity Disorder (AS/HD)” (Ripley, Barrett & Fleming 2001: 88).

Gerber et al. (2012: 236) summarize the social implications of Specific Language Impairment for students as the following:

- high levels of withdrawal
- few friends
- low self-esteem
- high rates of victimization

Nevertheless, it should always be kept in mind that no generalizations can be made and there are for sure also affected students with language disorders who do not show any signs of restrictions in social or emotional behavior.

4. Testing Specific Language Impairment

“There are no standardized procedures or ready-made tests or batteries of tests which will provide a complete description of a child’s language” stated Kleffner (1973: 5) some decades ago. Yet, science has developed and nowadays there are various kinds of assessment that aim at classifying children’s language in order to have the possibility to determine a language deficit. Therefore, it is necessary to test children who show any signs of language impairment to evaluate whether there is a language disorder present, how severe the stage of a possible language deficit is and thus, what kind of intervention or special care is appropriate and required. There are two opportunities to detect potential indications for Specific Language Impairment or other language impairments. On the one hand, tests can be carried out by clinicians or speech and language therapists, which most often happens at an early stage of language acquisition when parents, for example, recognize abnormalities in their child’s speech or comprehension and want to intervene as early as possible. On the other hand, in many cases, language problems are only discovered when children enter school, as difficulties in producing or comprehending speech come to the surface more easily due to the participation in particular language courses where teachers have an eye on their students’ performances. Both scenes of language testing will be considered more precisely in the following two subchapters.

4.1. General testing methods

As no child is ever the same, differential assessment methods are obligatory in order to focus on the particular nature of the disorder and thus on the learner’s needs. The strengths and weaknesses of the tested person have to be identified with the help of testing methods, but not only ready to hand data should be analyzed but also any environmental factors that affect the language of a child (Carrow-Woolfolk & Lynch 1982: 230). The diagnosis of language impairments was traditionally confirmed by the inclusion and exclusion of information. As stated in chapter 3.1., criteria of inclusion are, for instance, a rather normal nonverbal IQ and “more than two standard deviations below the mean on a standardized test of language” (O’Toole & Hickey 2012: 92). Exclusion in this sense describes the fact that other impairments such as hearing impairments or autism

can be ruled out. Nowadays, a more descriptive view is preferred when testing children in terms of a language deficit (O'Toole & Hickey 2012: 92). So clinicians and speech therapists pay special attention to the definite outcome of such tests instead of hypothesizing what the outcomes and therefore the signs of language impairments could be.

As a matter of course, diagnostic procedures have made great progress within the last decades. While mainly standardized tests or naturalistic descriptions were used to determine a language deficit back in the 1960s, test methods have moved into another direction in the 21st century. Clinicians recognized that naturalistic responses often seem random and meaningless and additionally lack external structure that make outcomes expedient (Carrow-Woolfolk & Lynch 1982: 235-236). So standardized tests have been ameliorated and the use of informal testing has become of great importance. Of course, both testing methods show advantages as well as disadvantages. While informal testing can be very informative as communicative behavior can be observed, whether during interactions with the family or peers or during free play, it is rather time-consuming which may cause avoidance by some clinicians due to time management problems (Kleffner 1973: 29; O'Toole & Hickey 2012: 99). Nevertheless, informal testing goes beyond standardized tests as it does not only collect linguistic data but requires the tester to "establish a valid, communicative relationship with the child" which facilitates the extraction of valuable outcomes (Kleffner 1973: 28). Standardized tests may cause problems as they tend to "primarily assess vocabulary and grammar" and due to this fact, children having pragmatic language problems may be missed (Damico et al. 2010: 212). Yet, the main condition of testing children with regard to language impairments is still the time factor which may make standardized tests seem extremely beneficial as they are quick and easy to administer (O'Toole & Hickey 2012: 99).

Verhoeven and van Balkom (2004: 4) have structured such an assessment procedure into four phases. Firstly, initial data is collected with the help of "questionnaires, an educational report, available dossiers, and screening instruments" as used in standardized tests. Then, usually a hypothesis is formulated on the basis of the findings. As a third step, the actual assessment "on the basis of previously determined standardized measuring instruments" is

performed and last, a decision is made whether the tested person needs special educational care or not. Such diagnostic techniques “should cover the following linguistic aspects: speech production, speech perception, morpho-syntactic knowledge, lexical/semantic knowledge, and pragmatic skills” (Verhoeven & van Balkom 2004: 11). Moreover, two essential terms are coined and should be complied with in these standardized tests: sensitivity and specificity. Sensitivity implies the “correct identification of children with SLI” whereas specificity points at the “correct identification of typically developing peers” (Gillam et al. 2013: 1813). Only then, when clinicians have sufficient evidence for an existent language disorder, can it be differentiated between learners with SLI and those without specific language impairment.

While there does not exist a norm-referenced test in the German language area (there are only subtests which have to be adapted), there is an almost uncountable number of standardized tests in the English language (Schlesiger 2001: 75).

Common examples for norm-referenced tests are the Test of Language Development (TOLD), which tests spoken language among children⁵, as well as the Clinical Evaluation of Language Fundamentals -4 (CELF-4) (Damico et al. 2010: 212). The second one “assesses four aspects of language (morphology and syntax, semantics, pragmatics, and phonological awareness) and can be administered in 30-60 minutes”⁶. It is a test designed for students between 5 and 21 years old. The assessment process is hereby divided into four levels as can be seen in the figure below.

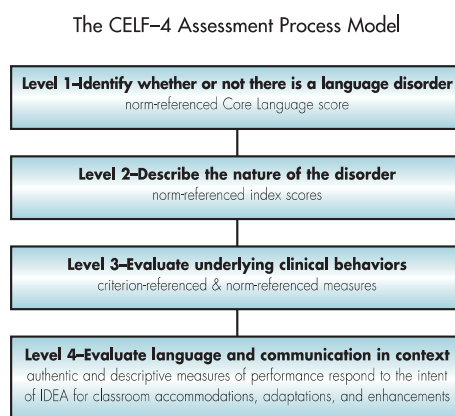


Figure 2: The four levels of the CELF-4 Assessment Process Model

⁵ Refer to: <http://www.proedinc.com/Customer/ProductView.aspx?ID=4233> (Accessed March 2015)

⁶ Refer to: http://images.pearsonassessments.com/images/tmrs/tmrs_rg/CELF_4_Tech_Report.pdf?WT.mc_id=TMRS_CELF_4_Technical_Report (Accessed March 2015)

After identifying the language disorder, the nature of it, including strengths, weaknesses and other implications of the impaired student, are determined. This standardized test then investigates clinical behaviors such as working memory or phonological awareness in order to exclude possible neurological restrictions. Thus it can be argued that the method of exclusion is still in use, albeit not by itself but only in combination with other methods. In the last stage, it is evaluated how the language disability affects the student in his or her communication.

As many standardized tests also provide subtests, the CELF-4 offers 19 specific subtests, too⁷.

Subtest	Subtest Task	Composite Score Formed	
		Ages 5–8	Ages 9–21
Concepts and Following Directions	The student points to pictured objects in response to oral directions	Core	9–12 Core
Word Structure	The student completes sentences using the targeted structure(s)	Core	
Recalling Sentences	The student imitates sentences presented by the examiner	Core	Core
Formulated Sentences	The student formulates a sentence about visual stimuli using a targeted word or phrase	Core	Core
Word Classes 1 and 2	The student chooses two related word and describes their relationship	Receptive/Content	Core
Sentence Structure	The student points to a picture that illustrates the given sentence	Receptive/Structure	
Expressive Vocabulary*	The student identifies a pictured object, person, or activity	Content	Content
Word Definitions*	The student defines a word that is presented and used in a sentence		Core/Content
Understanding Spoken Paragraphs	The student responds to questions about orally presented paragraphs; questions target main idea, details, sequence, inferential, and predictive information	Supplemental	Content/Receptive
Sentence Assembly	The student produces two semantically/ grammatically correct sentences from visually and orally presented words/ groups of words		Content
Semantic Relationships	The student listens to a sentence and selects the two choices that answer a target question		Receptive/ Language Memory
Number Repetition* 1 and 2	The student repeats a series of numbers forward, then backwards	Working Memory	Working Memory
Familiar Sequences* 1 and 2	The student names days of the week, counts backward, orders other information while being timed	Working Memory	Working Memory
Rapid Automatic Naming	The student names colors, shapes, and color-shape combinations while being timed	Supplemental	Supplemental
Word Associations	The student names words in specific categories while being timed	Supplemental	Supplemental
Phonological Awareness*	The student rhymes, segments, blends, identifies sounds and syllables in words and sentences	Supplemental	Supplemental
Pragmatics Profile*	The examiner elicits information from a parent or teacher about the student's social language skills.	Supplemental	Supplemental
Observational Rating Scales	Parent, teacher, and student each rate the student's classroom interaction and communication skills.	Supplemental	Supplemental

* = New Subtest

Core = Core Language Score

Receptive = Receptive Language index

Expressive = Expressive Language index

Content = Language Content index

Structure = Language Structure index

Language Memory = Language Memory index

Working Memory = Working Memory index

Supplemental = Supplemental subtest

Table 1: Subtests of the CELF-4

⁷ Refer to:

http://images.pearsonassessments.com/images/tmrs/tmrs_rg/CELF_4_Tech_Report.pdf?WT.mc_id=TMRS_CELF_4_Technical_Report (Accessed March 2015)

Here, a list of all subtests provided by the CELF-4, as well as the target group of learners these tests are devised for, either the ages 5-8 or 9-21, can be seen. In addition to that, it is clearly arranged what the respective tests focus on, whether it is the core language, receptive or expressive skills, content, structure or whether it addresses clinical issues such as language memory or working memory. As the English language hosts the probably greatest number of standardized tests in contrast to other languages, the process of finding the appropriate test for children is clearly facilitated with the offer of such subtests.

Yet, caution should be exercised when dealing with bilingual language impaired children in specific. As it is very difficult to “differentiate between bilingual children with true SLI and children who make language errors that are a consequence of being in the early stages of second-language learning”, over-identification of specific language disorder can pose a problem (Gillam et al. 2013: 1818). Therefore, many researchers have warned against the sole use of standardized tests. As a consequence, different types of assessment should be provided in order to avoid any overgeneralizations or premature conclusions about a language deficit. On this account, the school environment plays a leading role when it comes to identifying a language deficit among students.

4.2. The school environment as a place of testing

Children above the age of 6 years spend a lot of time at school and the older they are the more important the school environment becomes for them as most of the day takes place there. Hence, teachers play a crucial role in identifying a language disorder among their students as they accompany them in their learning processes. According to Deirdre (2000: 31) there is a wide

“range of procedures for collecting information about speech, language and communication which teachers draw on, such as observation, curriculum-based assessments, reading tests, collecting background information and information from important others”.

Nevertheless, not only teachers contribute to the identification and assessment of language problems in schools, there are also SENCO's (Special Educational Needs Coordinators), educational psychologists and speech and language therapists who regularly, or on request, visit schools and “possibly provid[e] information from different perspectives and theoretical models” (Ripley et al. 2001: 18). The saying

‘Too many cooks spoil the broth’ is definitely not applicable here – the more professionals look at a child’s language the better, as each and every one of them sees the students in a different light and can therefore contribute valuable suggestions for improvement. As a matter of course, every language-problem-identifying protagonist also acts in a different way and focuses on different aspects of the student that is part of their observation.

The class teacher is clearly the one who spends the most time of the given professionals in the classroom. He or she has the chance to regularly watch and observe the student in their natural surrounding. The “classroom setting is [...] ideal for observing” as not only the student’s linguistic features but also pragmatic ones are in the spotlight (Ripley et al. 2001: 19). The teacher receives an impression of the receptive and expressive language of the pupil and additionally sees how he or she interacts with others. The information, a teacher gets with this method is versatile. He or she can collect data in the following areas (Deirdre 2000: 32):

- “developmental information;
- rate and pace of progress over the school year;
- areas of specific skill or difficulty;
- consistency in skills and difficulties;
- comparative information between pupils (interpersonal);
- comparative information within each pupil’s progress (intrapersonal).”

However, there are controversial approaches on when to start with a planned observation of the test person. While Deidre (2000: 32), for instance, recommends to already start regular observations at the beginning of the school year, Gillam et al. (2013: 1814) are more in favor of the ‘wait and watch’ approach. This approach suggests that the teacher does not observe the student for the first months, or even the first year, which can have a positive influence, especially when talking about learning a second language. According to Gillam et al. (2013: 1814), “[t]he time of language assessment relative to the second-language-learning process is likely to affect the diagnostic utility of tests administered in either L1 or L2”. So it is advised to wait and see whether the acquisition of the second language seems to be without problems before an observation is initiated.

When the teacher then finally opts for an observation of a particular child, he or she has three opportunities to do so: the diary method, an observation chart or audio tape recording (Deirdre 2000: 35). In the diary method, the teacher writes down notes about the assumedly language impaired student. By doing that, the professional can record utterances or other possible anomalies, made or shown by the test person. The observation chart provides a popular method to identify a student's behavior and the behavior of the classmates who interact with the student, over a certain time span. In doing so, the teacher acts as a passive observer and makes notes of every worth action he or she sees. Questions, gathered beforehand, can facilitate the process of observation. A possible collection of questions can be seen in the following example, given by Deirdre (2000: 37):

Name of child, age, today's date

1. Is (name) attending/listening to the talk directed to her/him?
2. Does s/he turn to her/his name being called: always, sometimes, never?
3. How many times do the other children talk to her/him?
4. Some examples of what they say to her/him.
5. How many times does she/he respond?
6. Some examples of interactions.
7. How many times does she/he start to talk to someone?
8. Some examples of what she/he says.
9. How many utterances are appropriate/relevant to the situation?
10. What does she/he say that seems inappropriate/irrelevant?

It is obvious that the focus of an observation with these questions given is on pragmatics, in other words on the interaction and interplay of a language impaired child and its peers.

The tape recording might be a more elaborate technique because it is more time-consuming as the tape needs to be transcribed but a benefit is that the teacher can also analyze and reflect on his or her own behavior, handling of classroom situations and interaction with the language impaired student (Deirdre 2000: 37).

If the teacher needs help with observing one or several pupils, the SENCO (Special Educational Needs Coordinator) comes into play. While teachers prepare tests on reading, writing and spelling, the SENCO is most often responsible for other formal tests that check "speech sounds, vocabulary, grammar, and cognitive tasks for auditory and visual skills" (Deirdre 2000: 33). In addition to that, he or she should

not only observe the pupils but also the teacher and his/her behavior when interacting with the students and should therefore provide feedback for the pedagogue (Ripley et al. 2001: 19). The SENCO, or other professionals, also often make use of the AFASIC (Association for all speech-impaired children⁸) checklist, which is a speech and language screening test for school, administered for 6 to 10 year-olds and offering a great method to take note of the child's weaknesses and strengths. An example of the checklist will be provided in the Appendix of this thesis.⁹

A speech and language therapist is consulted when closer inspection of a student is desired or when there is a particular cause for concern. The aims of this professional are, besides evaluating the strengths and weaknesses of the language impaired child, deciding on some kind of intervention, in case there is the need for it, as well as determining “the severity of the problem” and “enabl[ing] the management plans to be made” (Ripley et al. 2001: 20). There is usually an orderly sequence of the assessment process, to be seen in the figure below:

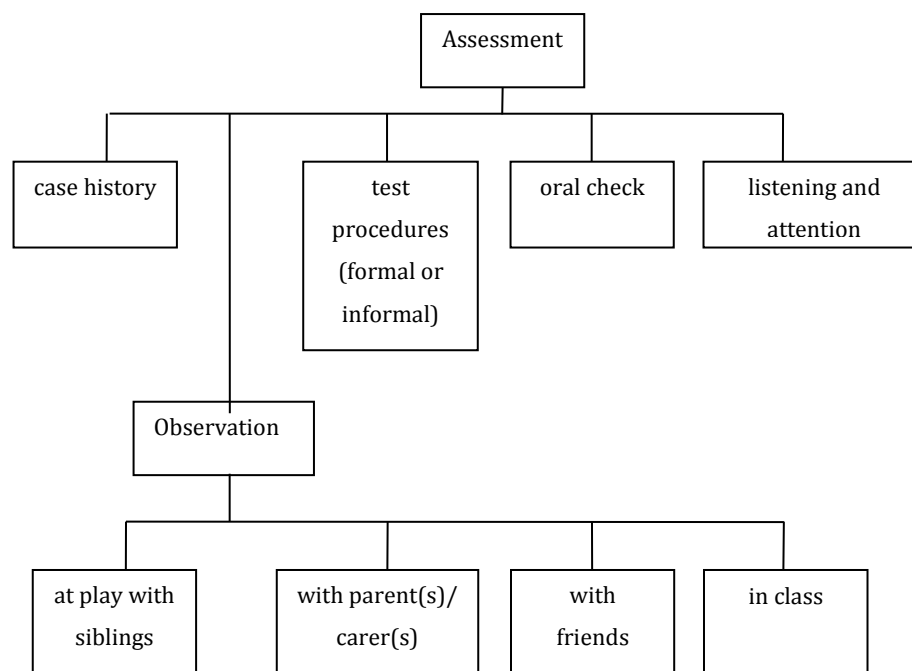


Figure 3: Assessment procedure of a SLT (Ripley et al. 2001: 21)

⁸ Refer to: <http://www.encyclopedia.com/doc/1025-AFASIC.html> (Accessed March 2015)

⁹ Refer to:

<http://webcache.googleusercontent.com/search?q=cache:jjm8N6Fv7k0J:moodle.flintshire.gov.uk/la/mod/resource/view.php%3Fid%3D1368+&cd=2&hl=de&ct=clnk&gl=at&client=safari> (Accessed March 2015)

After the speech and language therapist got acquainted with the case history of the examined student, meaning that he or she collected information about the student's parents, health history, educational progress and so forth, the person responsible carries out some tests that can either be formal such as standardized tests or informal as, for instance, interviews as well as oral checks. As a next step, he or she concentrates on listening and attention to determine whether the student has any severe deficits in these areas. The primary focus, however, is on the observation in different contexts, so the expert can observe the child at home and in the school environment (Ripley et al. 2001: 21-23).

Last, the fourth professional that can carry out an assessment is the educational psychologist. He or she might be the first real 'outside agency' that becomes involved in evaluating a student's language impairment in school (Ripley et al. 2001: 24). The focus in his or her investigation should lie in the educational environment and whether it establishes an appropriate learning environment where the language impaired student can develop best. Further, the expert should work closely with all the people involved (teachers, parents, speech and language therapists) in order to assess and identify any implications for learning or for social and emotional behavior (Ripley et al. 2001: 24).

When all these professionals work together and manage to identify the specific weaknesses of a language-impaired student, a huge step towards support and remediation can be made. Or as Kleffner (1973: 6) phrases it: „Careful and comprehensive study of children with language disorders often will demonstrate a need for some combination of language instruction and speech therapy“. In real school life, though, such a type of cooperation seems to be difficult and rather unrealistic at most times. However, how special support to facilitate learning and help students with Specific Language Impairment to make progress in language can be implemented will be discussed in the following chapter.

5. Specific Language Impairment – Is there a ‘cure’?

When the starting position for remediation is made clear through properly performed assessment methods, measures for intervention in the hampered process of language acquisition can be initialized. Treatment of a language disorder such as SLI in early years is of great importance since a deficit in communication can have implications up to adulthood. These problems in social communication, when not eliminated during the school years, can influence independence, interpersonal relationships and the “overall quality of life” later on (Damico et al. 2010: 133). Asikainen (2008: 185) emphasizes in addition to Damico et al. that “even slight deficiencies in language ability may affect daily life”. Consequences of not managing a language disorder can, for instance, lead to difficulties in finding a suitable job (due to communication problems), maintaining friendships or in general, in interacting with others. Fortunately, however, most students who are diagnosed with a language disorder receive support accompanying the common school curriculum, which gives reason to exclude any lasting implications in adulthood with a high probability. Still, as it has so often been the case, there is no secret formula to minimize language weaknesses or to even get rid of communicational deficiencies. Yet, the “ultimate goal of intervention is to increase a child’s success in using language to communicate his or her intent, respond to the intent of others, and participate in reciprocal interactions” (Prelock, Hutchins & Glascoe 2008: 136). There is not only one but there are rather several approaches to support children and teenagers with SLI or other linguistic deficits to get a grip on their impediment.

5.1. General wisdoms with regard to intervention

„Intervention that targets specific aspects of language is generally effective”, state Damico et al. (2010: 220). The meaningful statement of this quotation is that intervention cannot and should not be generalized. As a matter of fact, if supporting measures are conducted, they should focus on one aspect to be treated at a time in order to attain positive effects. In addition to this unwritten rule, certain requirements must be met to ensure a good environment of learning and progress. Firstly, the student has to be motivated and ready for change. If he or she is not willing to contribute actively in any remediation, it will not be possible to

reach the goal of becoming more fluent in a language. Secondly, the professional who provides support should “select targets that are likely to be within the individual’s reach” in order not to lose motivation (Damico et al. 2010: 138). Every language-impaired child has its own limits, which can hardly be known by the supporter. Therefore it is important not to predict any limitations but to let the learner him or herself decide on the learning pace to a certain extent. Thirdly, as the “primary context for many life events is the home setting”, and students do not solely have problems in school but also in interacting with family members and friends or have difficulties with communication in society in general, work does not only have to be done in the school setting (Damico et al. 2010: 134). Guidance has to be given in any situation in which the language appears to be a hindrance to communication. Fourth, intervention needs a lot of time (Damico et al. 2010: 146). One simply cannot consider a speech-impaired learner as cured after some sessions of remediation or small progresses perceived. In fact, the term ‘cured’ can never be used since some aspects of a language disorder seem to be apparent always, albeit in a weakened form. Fifth, and maybe most worth mentioning, is the aim for authenticity (Damico et al. 2010: 139). Exercise in authentic communication, as this is what is really needed, has to be done in order to increase self-confidence. This will be particularly applicable if the clinician runs into danger to miss the wood for the trees when observing the child, when there are too many linguistic aspects that require taking action, for example. Then, the focus on authenticity, and thus the limitation to essentials, is rather helpful.

When these requirements have been taken into account, supporters have to decide between language therapy outside the school environment, in special institutions, which mostly happens individually, or remedial teaching inside the school building. This division is not only supported by researchers but also stated in the “WHO Classification of Diseases and Impairments (ICIDH-2)” (Asikainen 2008: 185). Both options certainly have advantages as well as disadvantages. While individual therapy means that “instruction can be suited more exactly to the child’s abilities and special problems”, language classes where several children are supervised offer a much wider variety of activities to support and facilitate learning in contrast to individual therapy (Kleffner 1973: 47). Moreover, language classes give students the opportunity to participate in communicative interactions

and additionally have the benefit that focus on language can be maintained longer than thirty minutes or an hour, as it is often the case in individual therapy due to concentration problems. Yet, language classes, of course, also have downsides, taken the “heterogeneity of children with language disorder” as the main example (Kleffner 1973: 48). As a matter of fact, it is difficult to teach and support children who all show different types of language disorder and consequently, different weaknesses in the certain linguistic fields.

Nevertheless, if language classes in educational settings are favored as a means of intervention, the school is confronted with the choice of integration or inclusion of the language-impaired student. Whereas integration aims at the child adapting to its peers and therefore gives the impaired student the chance to receive as much attention, and also the same amount of workload, as normally developed students, inclusion requires teaching and learning processes to be revised in order to “respond to the needs of *all* pupils” (Ripley et al. 2001: 99). According to Lindsay & Dockrell (2002: 94), “the development of inclusive education must address the child holistically and ensure that efficacy of education is a primary focus”. Irrespective of that, pedagogues mostly have to fall back on professionals outside the school setting to get help in meeting the students’ needs.

5.1.1. The consultative model

Since most children with speech and language deficits are „educated within the framework of mainstream education“, teachers ask for professional guidance and often have the need to give the responsibility of support programs to specially trained people (Ripley et al. 2001: 98). On this account, the consultation model by Law et al. (2002: 146) is in everyday use as it is “a more holistic or ecological model of intervention with an emphasis placed on working within the classroom and working via others who have regular direct contact with the child”. Based on this, intervention can be provided in the following ways according to Law et al. (2002: 147):

- directly by the speech and language therapist (SLTs) or indirectly by the teacher or learning assistant;
- within or outside the classroom;
- in groups or individually;

- intensively or at regular intervals;
- for a limited or extended duration.

Referring back to the question whether individual therapy or remediation via language classes is more preferable, it has to be mentioned that most SLT's prefer the work in clinics more than in schools (Law et al. 2002: 151). The reason for this is simply that in clinical settings, more children can be treated a day, in contrast to schools where remediation has to yield for normal classes throughout the day. One argument that speaks against the consultation model is that it might not be effective "if there is not enough time allocated for the process" (Law et al. 2002: 152). Nevertheless, this model offers room for variety as not everybody wants to follow the mainstream, and in order to achieve good results in facilitating learning for language-impaired students, it is worth trying every method that looks promising. Or as Law et al. (2002: 160) put it:

For some [the consultation model] is synonymous with exclusively providing indirect intervention through learning support staff (speech and language therapy or teaching assistants). For others it is a much more flexible service, which incorporates direct and indirect work, classroom focus and withdrawal.

5.1.2. The efficacy of cooperation

Most important, also with regard to the consultative model, is cooperation between the different professionals. All those involved in the process of remediation, whether they are teachers, language assistants, speech and language therapists, educational psychologists (EPs) or SENCOs, they have to arrange themselves and work together. Each and every one has a different training in the field of language disorders and can contribute diverse knowledge and therefore strategies of support (Forbes 2008: 145).

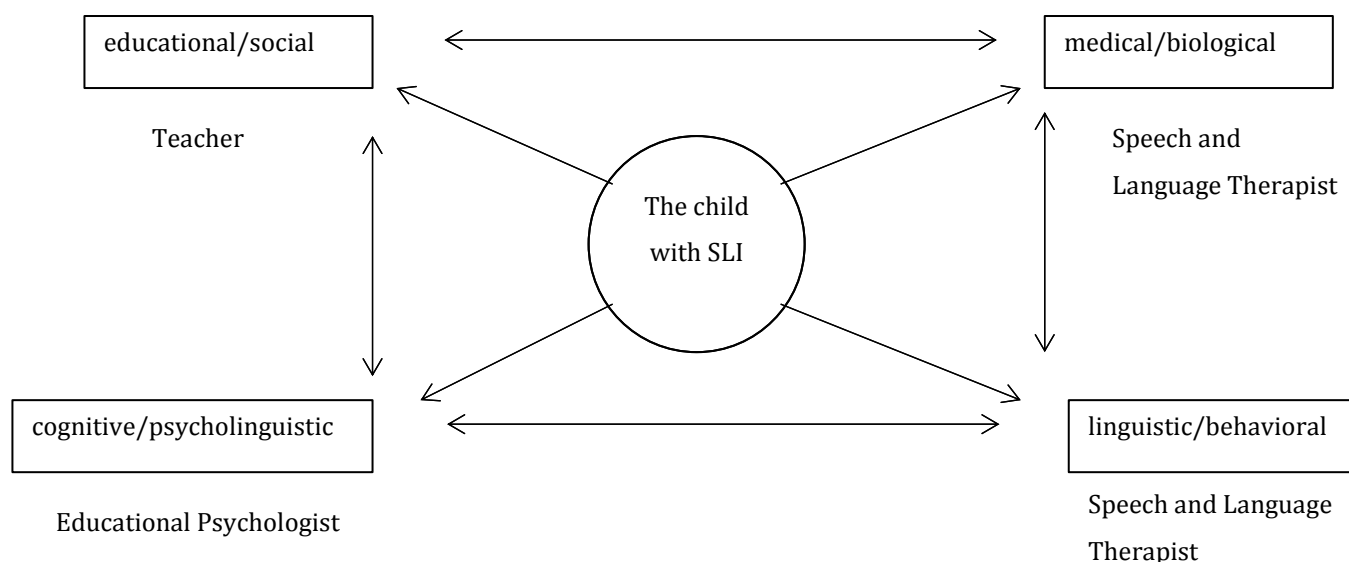


Figure 4: Model of disciplinary knowledges (Forbes 2008: 145)

Figure 4 demonstrates in what areas the different team members of intervention show expertise and how they interact with each other. While the teacher concentrates on educational and social matters, the educational psychologist is an expert in the field of psycholinguistics and the SLT on the one hand focuses on the medical and biological factors of a language disorder and on the other hand supports the language-impaired child in terms of linguistics and their behaviorism. In the best instance, teaching activities and remediation plans are shared in special meetings and team teaching is carried out (Deirdre 2000: 56).

In general, there are two ways of working together as a group: liaison and collaboration. The liaison requires regular contact in order to check on progresses, give updates and advice, if desired. In contrast, collaboration means sharing work and therefore also working together more intensely and having a “much closer professional relationship than liaison” (Deirdre 2000: 61). In addition to that, collaboration involves the sharing of responsibility, a limitation on autonomy and thus “effective joint working” (Lindsay & Dockrell 2002: 95). Again, the interaction between the student, parents, school and professionals must be given and also within the classroom there have to be arrangements between the SLT and the teacher, for example (Lindsay & Dockrell 2002: 96). Of course, it can be seen as an advantage to hand over some responsibility and share the workload but as a consequence, the professional might not have the freedom to make decisions, that concern the intervention of a particular language-impaired student, on his or her

own. This fact then again suggests that collaboration might be more labor-intensive than working individually, even if it offers great benefits.

However, although cooperation between the parties involved is extremely valuable, it is still the teacher that usually spends most of the time with the language-hampered child and therefore is preferably the first reference person in an educational setting for those students. This person clearly has a great influence on the improvements in language and communication, the encouraged student is willing to make.

5.2. Teachers can move mountains

As teachers tend to know their students very well, especially when they teach their pupils in different subjects, they are also most often best aware of a possible language deficit that exists among one or several students. They particularly have the power to take action in order to support their impaired learners in many ways. Researchers such as Deirdre (2000), Ripley et al. (2001) and Asikainen (2008) offer several suggestions to implement this. Of capital importance is the fact that teachers should implement differentiated learning as not every student learns in the same way and therefore needs separate strategies available to acquire certain material. As part of that, they have to be taught some study skills or tips for organizing themselves in a better way in order to have the best conditions for studying. Moreover, “praise is particularly important for learners with language and communication difficulties” (Deirdre 2000: 43). In order to get or to stay motivated, pupils need to hear what they are doing right, even if it is just a minor feature. In general, there are various issues in a classroom that teachers can concentrate on in order to support children with language needs.

As already mentioned, children with SLI are often restless and have problems in being attentive listeners. So what teachers can do to support those students with SLI is to focus on listening and attention. One suggestion for doing that, by Ripley et al. (2001: 64) is to “give children a written list of short questions, with picture support for some children” before they start a verbal explanation of a task in class. Then, the students have some information in advance and can therefore concentrate better on listening to the teacher. In addition to such a procedure, the pedagogue should “ensure a quiet environment” for learning, organize the

classroom in a useful way and should consider seating the language-impaired child close to the teacher's desk (Ripley et al. 2001: 64; Deirdre 2000: 33). This can facilitate active participation and overall communication in class as the distance between the teacher and the student is minimized and thus can lead to better understanding. According to Asikainen (2008: 187), "one important aspect affecting the children's learning and functional ability in daily life is noise and poor acoustics in [...] classrooms". This has to be taken into account when working with students who show signs of a language deficit and doing, for example, some group works that usually increase the noise level. Moreover, in order to maintain concentration, teachers should organize time carefully and give enough breaks in which students can recover from being attentive (Ripley et al. 2001: 64).

A further aspect is that teachers can foster remembering. This can be done in experimental learning by encouraging students to try out things on their own, to watch how others do certain things and to participate in activities. Special equipment for teachers, such as visual cue cards, can help in this process (Ripley et al. 2001: 64). Pupils with a language disorder often need more material for acquiring a topic area than their normally developed peers. And also using several communication channels can be of advantage, for example showing pictures and giving oral instructions at the same time or letting the students highlight key words in a text while listening to it. Likewise, memory games can accomplish positive effects, in particular for younger students and visual aids such as mind maps, highlighting key words in texts and collecting remembered information after reading or listening to a text could function as aids for older students (Ripley et al. 2001: 66).

When it comes to vocabulary learning, teachers should "[b]e realistic about the amount of vocabulary the child can be expected to learn" (Ripley et al. 2001: 67). If the workload is too much, students will simply 'switch off' and will not be willing to take any further action. To avoid such a situation, teachers should provide special methods or activities for structuring and revising vocabulary. A common recommended method for doing so is to categorize words into certain topics with the help of word trees, brainstorming or word wheels, for instance (Ripley et al. 2001: 67-70). Furthermore, students should learn the semantic, grammatical and phonological information of words step by step. Yet most importantly here is that

one linguistic feature is taught at a time in order not to overstrain the learners (Ripley et al. 2001: 71). A 'category dictionary' would be a classical method to collect all the linguistic information learned and thus to always have the chance to check on one's knowledge (Ripley et al. 2001: 72).

These tips and suggestions for support and intervention constitute only a short extract of possibilities and measures that can be undertaken by teachers and professionals in the whole. The most important message is, though, that there is always the opportunity to intervene when a language or communication disorder, such as Specific Language Impairment, is diagnosed. No matter what technique of intervention is applied, it is only of importance that the language-impaired learner gets help by professionals in order to have the potentiality for a facilitated life in the future, a life without the fear of communication and thereby without social and/or behavioral restrictions.

To this point, this thesis has tried the best possible to give information about Specific Language Impairment and its main characteristics. Not only neurological characteristics, but also semantic, syntactic, grammatical as well as social implications have been discussed. Additionally, some methods of testing as well as intervening common language disorders, such as SLI, have also been mentioned. In the empirical part of this thesis, it is the aim to contextualize the previous findings in Austria. As there is not much information to be found about the existence of SLI in Austrian schools, it is even more important to do some research in this field and thus reveal some interesting findings.

6. Contextualization in Austria - The Austrian school system and its handling of bilingual language impairment

In the empirical part of this diploma thesis, the information and findings of the research conducted on Specific Language Impairment and language disorders will be applied to the current situation in Austrian schools. There is hardly any, almost no, literature that deals with Specific Language Impairment in Austria. That is why this language disorder is also often not known among Austrian pedagogues. It is for this reason that the second part of this thesis first aims at investigating the current situation and whether there are any policies in Austria with regard to this issue. In addition to that, the Austrian curriculum will be analyzed to see whether there are any regulations embedded concerning the handling of speech disorders. After that short excursion, one should have sufficient background information about the situation in Austria and whether students with Specific Language Impairment get the deserved and appropriate support concerning their needs.

6.1. Current policies concerning SLI or other linguistic disorders in Austria

The term Specific Language Impairment or in German *Spezifische Sprachentwicklungsstörung* can hardly be found in the German-speaking area of Austria, Germany and Switzerland. Often, other speech disorders such as pronunciation deficits, stuttering or reading and writing disabilities such as dyslexia seem to be in the foreground. Yet, the *Österreichische Gesellschaft für Sprachheilpädagogik* (the Austrian Association for Speech-Orthopedagogy) offers an apparently correct definition of the developmental language disorder SLI:

Unter einer Sprachentwicklungsverzögerung versteht man eine ausbleibende, eine verspätet einsetzende, eine verlangsamte oder verzögerte, auch unterbrochene oder teilweise stagnierende oder rückfällige und eine fehlerhaft gestörte, von der Norm abweichende Sprachentwicklung. Man geht dabei davon aus, dass sich das Kind ansonsten normal entwickelt. Dabei können eine oder mehrere sprachliche Leistungen oder eine oder mehrere Sprachebenen betroffen sein, wie Sprachverständnis und Sprachproduktion. [...] Eine Sprachentwicklungsverzögerung hat in den meisten Fällen negative Auswirkungen auf den Lese-Schreiblernprozess des Kindes. (Österreichische Gesellschaft für Sprachheilpädagogik)¹⁰

So the German ‘counterpart’ of SLI explains the same conditions of the disorder as the English version does, to be looked up rather at the beginning of this thesis. In both languages, the speech development is delayed although the child itself is normally developed with regard to other areas than language. Language is the only domain that is inhibited but some parts of language, such as comprehension or the production of language can be affected to a different extent. It is additionally mentioned that there can be implications on other aspects of language acquisition, such as learning to read or to write.

Nevertheless, the actual question is whether, and if yes how, students with a specific language disorder are dealt with in the Austrian school system. According to Krammer et al. (2014: 32), the Austrian school system has gradually moved “towards an inclusive system during the last three decades”. This means, as mentioned in the previous chapter, that all children, with or without special educational needs, are taught together in one class. The trend for this development seems to be clear as students with language disorders can clearly benefit from their peers during language learning and therefore it is essential for them to have the opportunity for interaction and also social contacts with normally developed peers. Otherwise, if students with linguistic problems were taught with the ‘General Special Education Curriculum’, meaning that they attended schools especially designed for students with special needs, there would be the possibility for those pupils to withdraw, to give away the chance of progress and perhaps to fall back into old patterns of linguistic behavior. There is quite a number of researchers who support this development, as Law et al. (2002: 146) additionally state that “[e]ducational contexts offer a logical starting point by ensuring that

¹⁰ Refer to:
<http://www.sprachheilpaedagogik.at/verzoeigerung.php> (Accessed April 2015)

those with disabilities access the educational curriculum alongside their peers". In terms of figures, "about 52% of all students with special educational needs (SEN) are educated in inclusive settings within regular schools" in Austria, at the 2012 level (Krammer et al. 2014: 32). Yet, the inclusion rates differ between the federal regions of Austria. While the inclusion rate was about 80% in Styria, Lower Austria only registered an inclusion rate of around 30% in 2012 (Krammer et a. 2014: 32). The reason for this is unclear and apparently would have to be analyzed on a larger scale than this thesis provides. It can be assumed, though, that many schools, for instance in Lower Austria, lack essential resources to teach and support students with special language needs effectively. Therefore inclusion can be seen as an unattainable goal for some educational institutions.

Yet, if the method of inclusion is actually used, it is obvious that the teacher cannot function as educator and remedial teacher simultaneously and for the whole class. As a result, another professional has to be placed at their disposal. In Austria, this role is often undertaken by a speech therapist. The speech therapist, inter alia, can help in cases of speech defects, dysphonia, dysphagia and other disorders related to speech and language production.¹¹ Treatment by a speech therapist is usually carried out outside of the school environment and thus outside a typical school day period. In most cases, language-impaired students are attended to individually but group therapies are sometimes also performed, especially when the students need to make progress in the interaction with others.

Even though there is no common method to handle Specific Language Impairment in particular in the Austrian school system, there is definitely some effort to facilitate learning for generally language-impaired children. Nevertheless, referring to the actual purpose of this thesis, it is important to ask whether these students with speech deficits are also supported in learning their second language in Austria, which is English in most cases. As a matter of course, when a language disability is diagnosed, supporting measures for strengthening the first language should be the primary focus. Yet, as has already been discussed, language difficulties in the L1 can also be transferred to the acquisition of the L2 and consequently also to other languages learned. Therefore support must also be given in English classes, concerning Austrian schools. The ÖSZ (*das Österreichische*

¹¹ Refer to: <http://www.gesund.at/f/logopaedie> (Accessed April 2015)

Sprachen-Kompetenz-Zentrum), the Austrian Language Competence Center, makes great attempts to closing gaps in the English classroom¹². It is a project on behalf of the bmukk (Bundesministerium für Unterricht, Kunst und Kultur – Federal Ministry for education, arts and culture) that deals with promoting language learning as well as language teaching. Together with experts of science and practice, the ÖSZ develops teaching materials, teaching aids and specialist concepts. This material is easily accessible for all teachers who then have resources to practice certain skills with their students.¹³ These resources especially have an auxiliary function as they are classified in the educational standards and are additionally marked in terms of the GERS (*Gemeinsamer europäischer Referenzrahmen für Sprachen*), which is better known as the CEFR (Common European Framework of References for Languages) in the English Language. The framework helps to indicate the language level the students are at or are supposed to be at a certain stage of second language acquisition. The language levels most materials are targeted on are those of the beginning stages of language learning, respectively A1 and A2 towards B1 in some cases.¹⁴ Of course, the Austrian Language Competence Center does not exclusively address students with language deficits but offers exercises for all students that want to progress and further expand their speaking, reading, listening or writing skills.

So, the ÖSZ provides one possible pack of material for Austrian teachers but it would be worthwhile to know whether there are also other options to support language-impaired children in Austrian classrooms. In order to analyze the Austrian school system in detail and to see whether any further regulations concerning the handling of speech and communication disorders in the foreign language classroom can be detected, it is of interest to have a look at the curriculum, in particular the implementation of English lessons.

¹² Refer to: <https://www.bmbf.gv.at/schulen/schubf/se/sprachenkompetenzzentrum.html> (Accessed April 2015)

¹³ For further information see

http://www.oesz.at/OESZNEU/main_01.php?page=0112&open=7&open2=8 (Accessed April 2015)

¹⁴ For further information see http://www.coe.int/t/dg4/linguistic/Source/Framework_EN.pdf (Accessed April 2015)

6.2. The Austrian curriculum in lower secondary education

The Austrian school system includes several stages as children first enter elementary school after attending kindergarten and then already have to choose between two different forms of lower secondary – either the ‘Neue Mittelschule’ (NMS) or the ‘Allgemeinbildende Höhere Schule’ (AHS). Then, in upper secondary, students have to decide between even more options of education, including again AHS, specific vocational schools or attending a prevocational year and then opting for an apprenticeship, just to name a few. Nevertheless, in this thesis, focus is laid on grades 5 to 8, so the two Austrian school forms of NMS and AHS since it is normally in the 5th grade when English as the second language gains importance. Then, children usually have to face the first challenges of second language acquisition and therefore linguistic difficulties often appear for the first time.

The ‘Neue Mittelschule’ is very new in the Austrian school type as it has only been a legally consolidated regular school since 2012. The process of the development from the former ‘Hauptschule’ to NMS is not yet finalized.¹⁵ Nevertheless, it already plays a great role and offers another option of lower secondary education besides the AHS. Both curricula, the one of the ‘AHS Unterstufe’ (lower secondary) and the one of the NMS, prescribe the education sectors of language and communication, man and society, nature and technology, creativity and design and health and physical activity.¹⁶ In addition to that, both curricula emphasize the importance of fostering by differentiation and individualization although it appears that the curriculum of the ‘Neue Mittelschule’ stresses this issue even more:

Aufgabe der Schule ist es, durch Individualisierung, Personalisierung und Differenzierung den Schülerinnen und Schülern die jeweils passenden Zugangsmöglichkeiten zu eröffnen, damit sie aktiv und zunehmend eigenständig ihre individuellen Leistungspotenziale und besonderen Begabungen entfalten können. Leistungsfähigkeit ist dabei kontinuierlich zu fördern und herauszufordern. (Curriculum NMS 2012: 9)¹⁷

This citation describes the fact that it is the school’s responsibility to open doors to new possibilities through individualization, personalization and differentiation.

¹⁵ Refer to: <https://www.bmbf.gv.at/schulen/bw/nms/index.html> (Accessed April 2015)

¹⁶ Refer to: https://www.bmbf.gv.at/schulen/unterricht/ba/ahs1_775.pdf?4dzgm2 and https://www.bmbf.gv.at/schulen/recht/erk/bgbla_2012_ii_185_anl1_22513.pdf?4dzi3h (both accessed April 2015)

¹⁷ Refer to: https://www.bmbf.gv.at/schulen/recht/erk/bgbla_2012_ii_185_anl1_22513.pdf?4dzi3h (Accessed April 2015)

Achievement potential should be consistently supported and challenged that students can develop well. On top of that, the NMS moreover puts focus on diversity, inclusion and equal opportunities (Curriculum NMS 2012: 7) and therefore strives to reduce hurdles to second language acquisition in lower secondary.¹⁸

Unfortunately, there is no information to be found in the Austrian regulation of assessment (*Leistungsbeurteilungsverordnung*) that provides any indications of a differentiated assessment of students with a deficit in language learning and those without a known language disability. As a result, these impaired students often have to meet the same requirements as their ND peers.¹⁹ Nevertheless, the NMS makes some attempt at differentiated learning and assessing. Here, work performance of 7th or 8th grade students happens either in form of a fundamental approach or a deepened one. If the performance meets the fundamental requirements and is assessed with not less than a *'Gut'*, the assessment can happen in terms of the requirements of the deepened approach, where there are only the grades 1 to 4. So the fundamental concept only allows the grades 3,4 and 5, which are marked with a *'G'* that stands for *'grundlegend'* (fundamental).²⁰ The students taught within the fundamental approach also get additional material during classwork and special support by their teachers who take time to explain certain topics and sections more precisely and with more patience. Thus, much is done to motivate and encourage disadvantaged students. This concept of fundamental teaching is therefore very appealing and beneficial for students with Specific Language Impairment or any other developmental language disability.

In general though, the Austrian school system seems to be not very well armed for the education and support of students with language deficits. Nevertheless, there are for sure thoughtful efforts to facilitate second language acquisition for young learners.

¹⁸ Refer to:

https://www.bmbf.gv.at/schulen/recht/erk/bgblla_2012_ii_185_anl1_22513.pdf?4dzi3h (Accessed April 2015)

¹⁹ Refer to:

<https://www.ris.bka.gv.at/GeltendeFassung.wxe?Abfrage=Bundesnormen&Gesetzesnummer=10009375> (Accessed April 2015)

²⁰ Refer to §14a:

<https://www.ris.bka.gv.at/GeltendeFassung.wxe?Abfrage=Bundesnormen&Gesetzesnummer=10009375> (Accessed April 2015)

However, as there are often immense differences between theory and practice in reality, it was my aim to consult teachers regarding their experience with the handling of language disorders within Austrian lower secondary schools. This leads to the following chapter in which the implementation of the study will be explained before the discussion of the actual analysis of the outcomes takes place.

7. The empirical part - Implementation of the study

The practical part, and thus the contextualization of the researched topic of language disorders, demands some findings that either underline or disprove the theory of the topic dealt with in the previous chapters, and additionally highlights how a language disorder is handled in the Austrian school environment. The most effective and easiest way to do so is probably to ask teachers about their experience with language-impaired students and how they perceive the amount of available resources as well as the support provided by the *Bundesministerium für Unterricht, Kunst und Kultur (bmukk)* (Federal Ministry for education, arts and culture). After stating the definite aims of this study, the research design and its advantages as well as possible disadvantages will be described. Before the data will be analyzed, the sample will be explained and the item catalogue of questions asked in the study will be provided in order to give the readers an overview of the items discussed.

7.1. Aims of the study

The concrete aims of the empirical part of this thesis are diverse. On the one hand, it is my intention to learn more about Austrian teachers' knowledge about the topic of language disorders and their awareness of a disability's existence among their students. Typical experiences with speech-impaired children and teenagers shall contribute to an overall impression on how teaching children with language deficits is implemented in Austria. Additionally, the evaluation of the actual mistakes done, and thus weaknesses of disadvantaged students is hoped to provide valuable information. On the other hand, it is of great importance and advantage to determine how Austrian teachers rate the support given by the *bmukk*, as for instance teaching material provided for assisting language-impaired pupils or teacher training dealing with this issue, offered. Moreover, the willingness of Austrian teachers to attend further education on the topic of language disorders shall be illustrated. The general aim of this study is, though, to determine the actual interplay between education policy, schools, teachers and the language-impaired students as the main actors.

7.2. Research design and methodology

There are various methods to attain findings and outcomes in a certain field of interest. However, in order to facilitate the collection of results and furthermore to get the actual outputs wanted, the suitability of each technique has to be examined. In this thesis, the chosen research design to attain valuable findings is an online questionnaire, which is “one of the most popular research instruments applied in the social sciences” (Dörnyei 2007: 101). It is not without cause that this method of linguistic research is that favored among researchers as it offers a wide range of advantages. Firstly, a questionnaire is rather easy to construct and extremely versatile as it can be sent to a wide range of people and can cover diverse topics. Secondly, it is very efficient in terms of time the researcher has to invest, effort the researcher has to make as well as financial resources. A questionnaire can be created in a short time and it is either for free or only costs a small amount of money. In addition to that, data can be processed very fast with the help of tables, figures and charts. And thirdly, a vast amount of information can be collected when sending out online questionnaires (Dörnyei & Taguchi 2010: 6).

Nevertheless, using questionnaires as a means of research does not only have benefits but also quite a number of drawbacks, as I have been privileged to experience. There is the necessity to compose simple and sometimes also superficial questions in order to be understood by all participants of the survey (Dörnyei & Taguchi 2010: 7). However, this is not always as easy as it sounds since every researcher has some questions in mind that he or she wants to ask and it might not always be possible to find a clear and brief wording for these questions. In order to entice a greater number of people to participate in my survey, I therefore decided to pose the questions in the German language. All participants were able to speak the German language and thus I assumed that German questions would be more appealing than English ones and that as a consequence, they would be more willing to carry out the study. Unfortunately, there is also the danger of “unreliable and unmotivated respondents”, which affected my survey (Dörnyei & Taguchi 2010: 7). Filling out forms and taking part in studies are often associated with annoying and time-consuming activities. In addition to that, people often do not see a reason in participating as they simply do not enjoy it and have no benefit from it. This is very true, as I myself could discover such a phenomenon.

Even though I paid attention to all the instructions, provided by many researchers such as Borg (2013), that one should follow when constructing a questionnaire, the number of participants was not very high. As suggested, I attached importance to user-friendliness of the questionnaire and additionally took four considerations into account. The first one, mentioned by Borg (2013: 44), falls into the group of “substantive considerations” which includes the question of the clear purpose. The purpose of my study, stated in chapter 7.1., was clearly formulated before I started to compose the questionnaire. Moreover, I checked whether the instructions I gave at the beginning of the questionnaire were intelligible and whether I had a good range and variety of items. These concerns belong to Borg’s (2013: 44) category of “technical considerations”. Subsequently, the “logistical considerations” were the central point as I fixed the time in which the survey should be finished and decided on the mechanisms of delivery, which was via e-mail. Last but not least, the “user considerations” were in the foreground (Borg 2013: 44). I tried to make the questionnaire as appealing and easy to follow as possible. Therefore I categorized the questions into several subgroups and split the survey up into seven pages of question items. This method should contribute significantly to the reader-friendliness of the study. Added to that, I was of the opinion that the topic of research was very interesting to the target group of participants and thus hoped, that it would attract them due to their profession.

The tool used for constructing the online questionnaire was the homepage www.de.surveymonkey.com.²¹ It is a website that offers a very easy, convenient and cost-effective way to collect data via online questionnaires. Twenty questions, including personal details, were developed as it was preferred to have a great variety of question items. The reason for that is that interest and focus on the survey can possibly be maintained when there is some alternation in the types of question items. Most of the questions, such as multiple-choice items or true-false items, were typically quantitative but in addition to these two item formats I also used the popular “Likert scales” to achieve some meaningful outcomes (Dörnyei 2007: 105). These scales comprise a characteristic statement and “respondents are asked to indicate the extent to which they ‘agree’ or ‘disagree’ with it” (Dörnyei 2007: 105). With this method, one can get a lot of information with only one

²¹ For further information see: www.de.surveymonkey.com (Accessed March 2015)

question item. Three times, twice inbetween und one time at the end of the study, I included “open-ended question” which give room for some qualitative outcomes (Dörnyei 2007: 107). According to Dörnyei (2007: 107), “open-format items can provide a far greater richness than fully quantitative data” as they allow greater freedom of expression. These questions gave the participants of the study the opportunity to share some of their experiences with language-disabled children or to make further comments and suggestions to this topic at the end of the survey. The results are striking and thought-provoking but more details will be revealed in the part of analysis. Yet, before we move on to the actual analysis of the individual question items, the sample has to be characterized and explained.

7.3. Sample

To receive valuable findings concerning the awareness of SLI and the handling of language disorders in general, a number of teachers who pursue their profession in lower secondary schools in Lower Austria were chosen. By means of the random principle, 98 ‘*Neue Mittelschulen*’ and 37 ‘*Allgemein bildende höhere Schulen*’ were contacted and the online questionnaire sent. There were two reasons why I chose to include more NMS than AHS. On the one hand, it is assumed that students of NMS, former ‘*Hauptschulen*’, are more significantly affected by language disorders (Lentner & Bacher 2014: 4)²². For that reason, I hoped to achieve more significant data with regard to the handling of language disorders of teachers of ‘*Neue Mittelschulen*’. On the other hand, there are simply fewer AHS than NMS in Austria.²³ Therefore it is quite logical and obvious to send the questionnaire to almost three times as many NMS than AHS. Yet, it has to be said that ‘*Neue Mittelschulen*’ are often situated on the countryside and frequently record a smaller number of students than an ‘*Allgemein bildende höhere Schule*’. Consequently, I assumed that there were also more English teachers in each AHS who received my questionnaire.

The participants had three weeks to carry out the survey. Unfortunately, the willingness to participate in the survey was very low although I tried my best to

²² Refer to: http://www.statistik.at/web_de/suchergebnisse/index.html (Accessed April 2015)

²³ For further information on the list of NMS and AHS see: <http://www.neuemittelschule.at/nms-standorte/#links-nieder> and <http://www.gymnasium-noe.at/online/liste.php> (Accessed March 2015)

offer a user-friendly and not time-consuming questionnaire as mentioned above. The recipients had the information that the survey would only take ten minutes of their time the most, but only 99 teachers completed the online questionnaire. This was slightly discouraging since 135 schools in total must have received the questionnaire and one can expect that there is more than one English teacher in every school. The actual cause for this modest willingness is rather unclear although there are two possibilities: The questionnaire was either not conveyed by the school principal to the school's English teachers or the English teachers indeed received the e-mail including the link to the questionnaire but forgot to do it or simply decided to ignore it. Dörnyei (2007: 53) also addresses the problem of a low participation in the study and even speaks of "[p]articipant mortality and attrition" as a threat to research validity since "subject dropout is always a serious concern".

Nevertheless, even if the dropout rate was very high and some participants of the study skipped some questions inbetween, the actual number of people taking part in the questionnaire was 99. Out of these 99 teachers, the majority (80,61% in total) was female, which corresponds to the data of the 'Statistik Austria' where it is recorded that around three quarters of all Austrian teachers are female.²⁴ As a consequence it was evident that more women filled in the questionnaire.

Moreover, the age of the teachers was of interest as it can, but does not have to, say much about teaching experience and thus also experience with language-disabled students.

Antwortmöglichkeiten	Beantwortungen
<30 Jahre alt	13,13% 13
31-40 Jahre alt	13,13% 13
41-50 Jahre alt	21,21% 21
51-60 Jahre alt	49,49% 49
61 Jahre oder älter	3,03% 3
Gesamt	99

Table 2: Q2 Age of the participants

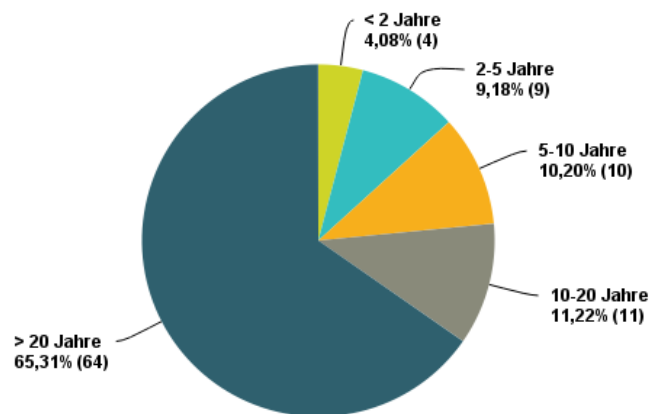
²⁴ Refer to:

http://www.statistik.at/web_de/statistiken/bildung_und_kultur/formales_bildungswesen/lehrpersonen/ (Accessed April 2015)

As can be seen in Table 2 above, most participants, namely 49, were aged between 51 and 60 years old, which again is consistent with the findings of the 'Statistik Austria' in 2013 that says that the most teachers in Austria are between 50 and 59 years.²⁵ The second large group of participants were those between 41 and 50 years, followed by the teachers in the youngest age groups with 13,13 % participation rate each. Only three teachers older than 61 participated in the online questionnaire, which means that they must be about to retire soon. As a result of the subjects' age, their teaching experience and thus the time they have spent with students was probably similar.

Q4 Wie lange sind Sie bereits im Lehrberuf tätig?

Beantwortet: 98 Übersprungen: 1



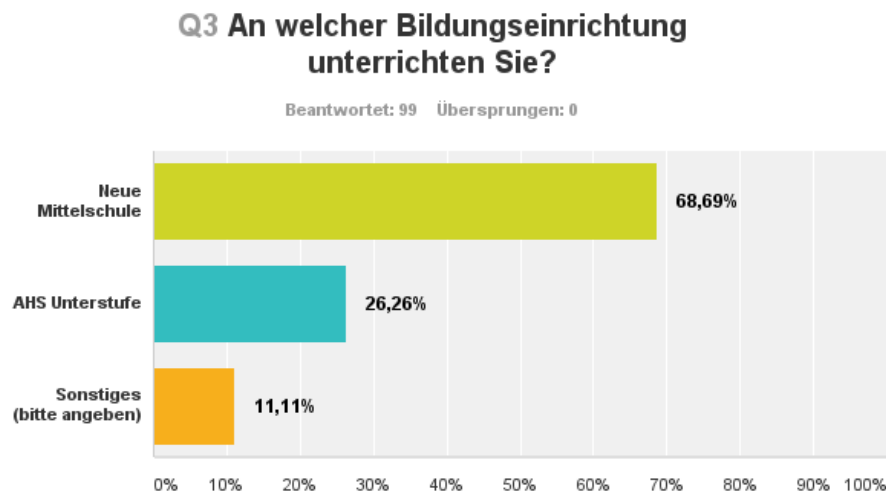
Data Panel 1: Q4 The teaching experience of the participants

With reference to the teachers' age, most participants, 64 in numbers, could show at least 20 years of teaching experience, which is highly beneficial for further outcomes concerning their methods of handling language disorders among students. One teacher even highlighted that he or she has been teaching for 37 years already. Almost the same number of teachers, 10 and 11 respectively, had either 5 to 10 or 10 to 20 years of teaching experience. Four of the pedagogues taking part in the survey claimed that they had two years or less of teaching experience, which suggests that they might not have experience with teaching

²⁵ Refer to:
 lehrerinnen_und_lehrer_im_schuljahr_201213_ohne_karenzierte_nach_dem_alter_034418.pdf
 (Accessed April 2015)

students with a language deficit. Unfortunately, one study's participant skipped this detail for whatever reason.

As indicated above, the questionnaire was sent to more NMS than AHS, which can also be seen in the following chart.



Data Panel 2: Q3 Distribution of the school type

As Data Panel 2 demonstrates, almost 69% of the pedagogues teach in ‚*Neue Mittelschulen*‘, which implies that most of the findings regarding characteristics of learners with language disorders and their behavior are based on NMS in Lower Austria. Only a bit more than a quarter of all participants teach in an AHS, although the percentage should be higher as all teachers who marked the rubric “other”, stated that they teach in an AHS, just in both forms of AHS, lower as well as upper secondary. For the record, the questionnaire was actually only intended for teachers of lower secondary but some teachers of lower and upper secondary presumably did not want to withhold the fact that they teach in both forms.

Before analyzing the questions answered by the 99 teachers, a presentation of the item catalogue is advantageous to have a good overview of the items asked.

7.4. Item catalogue

In the process of designing the online questionnaire, it was my intention to receive information about the general view of Austrian teachers concerning the handling of language disorders in the Austrian school system. Since there is hardly any literature on Specific Language Impairment in German-speaking countries, it was my primary goal to ask teachers about the term SLI and what they associate with it. Yet, as I assumed that Austrian teachers did not have much experience with Specific Language Impairment, all other questions focused on language disorders in general and on how their occurrence among Austrian students is perceived.

As pedagogues have to be very sensitive when it comes to recognizing their students' language levels and progresses they make, I aimed at evaluating the general awareness of language disorders. In doing so, I asked teachers whether they thought that the number of language disorders has risen in the last decades and additionally wanted to find out about possible factors that influence the emergence of speech deficits, according to the participants of the survey. Only when there is awareness about language impairments, better outcomes can be ensured, which is why I tried to evaluate the current awareness level of the different language deficits.²⁶ Furthermore, the teachers' experiences with language disabilities were of great importance as they may contribute to a better understanding of the speech-impaired student and thus may foster an appropriate method of support. In order to categorize language disorders and determine their symptoms, the pedagogues had to rate the students' social as well as linguistic behaviors and performances. The answers to these questions, items 9 and 10, were expected to confirm the findings of the hypotheses in chapters 3.3 and 3.4. of this thesis.

Last, relating to chapter 5, which deals with intervention and the support of students with language disabilities, it was my aim to assess the general availability of support on the basis of teaching material and information provided by the Austrian curriculum. Moreover, since collaboration between the various educators is essential to ensure optimal support and therefore continuous training of

²⁶ Refer to:

<http://www.esrc.ac.uk/news-and-events/press-releases/15599/teachers-need-greater-awareness-of-language-disorders.aspx> (Accessed May 2015)

pedagogues is inevitable, I asked questions about teacher training that has already been attended or is desired to be attended in future, to be seen in items 17 to 19.

The entire list of questions is provided in the table below.

Item	Question
Q3	An welcher Bildungseinrichtung unterrichten Sie? (Do you teach at a „ <i>Neue Mittelschule</i> “ or <i>AHS</i> ?)
Q4	Wie lange sind Sie bereits im Lehrberuf tätig? (How long have you been teaching?)
Q6	In wie weit denken Sie, dass sich die Zahl der Sprachstörungen in den letzten Jahren verändert hat? (In how far do you personally think that the number of children who suffer from language deficits/disorders has increased over the last decades?)
Q7	Welche Faktoren beeinflussen Ihrer Meinung nach das Aufkommen von Sprachstörungen? (What factors influence the emergence of language disorders, in your opinion?)
Q8	Haben Sie jemals Schüler/innen mit einer diagnostizierten Sprachstörung unterrichtet? (Have you ever taught children/teenagers with a diagnosed language deficit?)
Q9	Falls Sie bereits Schüler/innen mit Sprachstörung unterrichtet haben, wie haben sich diese im Durchschnitt verhalten in Bezug auf Motivation, Konzentration, Mitarbeit im Unterricht, sozialer Umgang mit Mitschüler/innen, sozialer Umgang mit Erwachsenen (Lehrer/innen, Mitarbeiter/innen der Schule, ...)? (If you have already had a student with a language disorder, how did he/she behave or act in terms of motivation, concentration, participation in class, social contacts (with other students), social contacts with adults (teachers, school staff, ...)?
Q10	Falls Sie bereits Schüler/innen mit Sprachstörung unterrichtet haben, konnten Sie etwaige Abweichungen in den folgenden linguistischen Bereichen identifizieren? (Aussprache, Verwendung der Pronomen, korrekte Verwendung der Zeitformen, Verwendung des “s” in der 3. Person Singular, Verwendung von passenden Pluralformen, korrekter Syntaxgebrauch, Semantik) (If you have already had a student with a language disorder, could you see any abnormalities in the following linguistic areas: pronunciation, use of pronouns, use of correct tense forms, use of the 3rd person singular „s“, use of appropriate plural forms, use of correct syntax (word order, use of determiners – articles,...), semantics (classifying words, learning vocabulary,...)?)
Q11	Falls Sie bereits SchülerInnen mit Anzeichen einer Sprachstörung in Englisch unterrichtet haben, waren diese Probleme ebenfalls in anderen Schulfächern präsent? (zB.: Defizite in Deutsch oder anderen Sprachen) (If you have already had a student that showed signs of a linguistic disability in

	English, was there any indication that the problems were interdisciplinary (e.g. also deficits in German or other languages)?)
Q12	Haben Sie jemals von der Sprachstörung "SLI - Specific Language Impairment (Spezifische Sprachentwicklungsstörung)" gehört? (Have you ever heard of the language deficit called SLI (Specific Language Impairment)?)
Q13	Falls ja, was assoziieren Sie mit dieser besonderen Form von Sprachentwicklungsstörung? (If yes, what do you associate with it?)
Q14	Gibt es, Ihrer Meinung nach, genügend Informationen für Lehrer/innen zu dem Thema wie man Schüler/innen mit Sprachstörungen unterstützen und fördern kann? (Is there enough information for teachers on how to support children with SLI?)
Q15	Gibt es, Ihrer Meinung nach, genügend Unterrichtsmaterial um Schüler/innen mit Sprachstörungen in den folgenden Bereichen zu fördern? (Leseverständnis, Hörverständnis, Grammatik, Schreibproduktion, Sprechverhalten) (Is there enough teaching material to support children with specific language deficits to improve in reading, listening, grammar, writing, oral production?)
Q16	Bietet der österreichische Lehrplan genügend Informationen bezüglich Beurteilung und Förderung von Schüler/innen mit Sprachdefiziten? (Does the Austrian curriculum provide enough information on how to assess and support children with a language deficit?)
Q17	Haben Sie bereits Seminare in Bezug auf Förderung und Unterstützung von Schüler/innen mit einer Sprachstörung besucht? (Have you attended any seminars concerning language deficits among students and how to deal with them in the classroom?)
Q18	Wie wichtig wäre Ihnen (mehr) Information und Fortbildungen zu diesem Thema (das Unterrichten, Beurteilen und Fördern von Schüler/innen mit Sprachstörungen)? (How important would it be for you to get (more) information as well as training/instruction in teaching and supporting children with SLI?)
Q19	Würden Sie persönlich in Erwägung ziehen eine oder mehrere Fortbildungen zu diesem Thema (Sprachstörungen) zu besuchen? (Would you personally take into consideration to attend further training on this topic? (Children with language learning problems and how to support them))
Q20	Falls Sie weitere Kommentare und/oder Anregungen zu dem Thema der Sprachstörungen bei Schüler/innen haben, bitte notieren Sie diese in dem Bereich unterhalb... (If you have any further comments to make, please do so in the provided space below...)

8. The handling of language disorders in Austrian lower secondary schools - Findings and Outcomes

With regard to reader-friendliness and organization, I grouped the different items of the questionnaire into six categories. First, the teachers' awareness of language disorders will be shortly analyzed. By doing that I want to illustrate whether the respondents are able to assess the prevalence of language disorders in Austria and additionally how they rate factors that influence the emergence of speech impairment. Then, individual experiences of Austrian teachers with language-impaired students will be elucidated and discussed. A further step will be to identify the pedagogues' familiarity with Specific Language Impairment, in German *Spezifische Sprachentwicklungsstörung*, to see whether this special case of language disorder is actually known by Austrian teachers. The next two parts will deal with the availability as well as the demand of teacher training and support with regard to the teaching of language-disabled students, as this is a very revelatory issue. Labeled as "food for thought", the final open question through which I tried to encourage the participants to make further comments will be interpreted. Ten teachers contributed valuable remarks concerning their thoughts and feelings about the handling of specific language disorders in schools and discussing these will provide an informative, revealing and appropriate ending to the analysis of the online questionnaire.

8.1. Awareness of language disorders

Language disorders exist in most schools, but whether they are revealed often depends on the awareness of the language teacher, in cooperation with experts. Of course, it is not an easy process to detect specific language deficits among students but certain indications are often obvious. Therefore, it was my intention to get some information about what Austrian teachers think about the current situation of language disorders in society and whether the emergence of these has changed within the last decades. In addition to that, it was interesting to see which factors influence the emergence of language deficits, according to the survey's participants. Unfortunately, a few teachers skipped the following questions but the outcomes of the other participants' answers are explicit and self-explanatory.

By asking the participants whether they think that the number of language disorders has changed within the last decades, they could choose between six options to tick. These ranged from *stark angestiegen*, *leicht angestiegen*, *konstant geblieben* to *leicht gesunken*, *stark gesunken* and *kann ich nicht beurteilen*. In other words, the teachers were supposed to rate whether they thought that there was a sharp or modest increase, whether the emergence of language disorders remained stable or whether it decreased slightly or sharply. Of course, as this estimation is not easy, I also offered the option to tick “I cannot assess that”, shown rightmost in the data panel beneath.



Data Panel 3: Q6 Awareness of the participants regarding the change in amount of language disorders

Data Panel 3 shows that the majority of teachers, 43,48 % to be precise, believe in a slight increase of language disorders in Austria during the last decades. More than a quarter of the respondents felt that the number of students who suffer from a language deficit has remained stable and, interestingly, only 1,09 % were of the opinion that this number has fallen sharply. 15 teachers, 16,30 % respectively, honestly indicated that they could not assess the prevalence of language disorders. Yet, it can be seen that the left part of the data panel shows greater percentages delivering the result that most participants of the survey either saw a rise in language disorders or at least considered the number to be stable.

Even if it is assumed that language disorders are due to neurological reasons, there is a multitude of environmental factors that can influence and contribute to the emergence of a developmental language deficit such as Specific Language

Impairment (Bloom & Lahey 1978: 289). In order to see what factors teachers blame for the development of a language disorder, they were asked to rate the following causes in view of whether they affect a language deficit very strongly, rather strongly, rather little, very little or have a neutral effect on a language impaired student:

1. genetic factors/inheritance
2. medical causes
3. social background
4. school environment
5. family or personal problems
6. mental injury
7. deficient linguistic input by birth
8. lack of devotion and support during school years

The average value of all answers given by the respondents, and therefore the overall tendency, has been calculated in order to facilitate understanding and make the table more representative. This number can be seen in the column at the far right and is presented in numbers from 1 (strong influence) to 5 (low influence).

	sehr stark	eher stark	neutral	eher gering	sehr gering	Mittelwert
(1) Genetische Faktoren/Vererbung	12,50% (11)	32,95% (29)	29,55% (26)	18,18% (16)	6,82% (6)	2,74
(2) Medizinische Ursachen	32,95% (29)	32,95% (29)	17,05% (15)	13,64% (12)	3,41% (3)	2,22
(3) Soziale Herkunft	19,10% (17)	49,44% (44)	21,35% (19)	7,87% (7)	2,25% (2)	2,25
(4) schulisches Umfeld	2,25% (2)	24,72% (2)	48,31% (43)	17,98% (16)	6,74% (6)	3,02
(5) Familiäre oder persönliche Probleme	17,78% (16)	54,44% (49)	17,78% (16)	8,89% (8)	1,11% (1)	2,21
(6) Psychische Schädigung	20,22% (18)	59,55% (53)	12,36% (11)	7,87% (7)	0,00% (0)	2,08
(7) Mangelnde sprachliche Anregung von Geburt an	43,33% (39)	52,22% (47)	3,33% (3)	1,11% (1)	0,00% (0)	1,62
(8) Fehlende Zuwendung und Unterstützung im Schulalter	19,32% (17)	55,68% (49)	11,36% (10)	13,64% (12)	0,00% (0)	2,19

Table 3: Q7 Possible factors that influence the emergence of speech and language disorders

The results show that deficient linguistic input from birth on is regarded to be most influential as nearly all participants indicated that it either has a strong influence (43,33%) or a rather strong influence (52,22%) on the language development, and thus the possible emergence of a language disorder, of a child. In addition to that, genetic factors and thus the inheritance of language impairments are highly ranked as well, with an average value of 2,74. Medical causes, social background, family or personal problems and a lack of devotion and support all scored similar values between 2,19 and 2,25 in average. Many teachers, in fact more than the half of them, are also of the opinion that mental deficiency is rather often a cause for a language impairment with 59,55%. In contrast to that, most teachers think that the school environment is not, or only in rare cases, a cause for such occurrences as 43 teachers think that the school's influence is rather neutral.

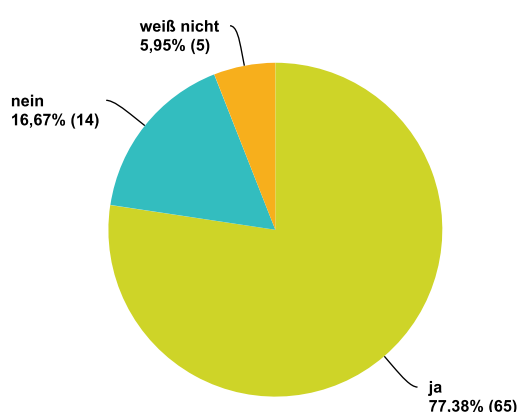
8.2. Teachers' experiences with speech impaired students

As most survey participants had more than twenty years of teaching experience at the time of the inquiry, it was highly interesting to investigate whether they could also offer some insights into teaching speech impaired students. If this was the case, I was curious about how those teachers rated the behavior of such children with speech and language difficulties in class. Furthermore, it was my goal to find out what the teachers noticed in relation to language production and definite language weaknesses. As some researchers like Blanken et al. (1993) repeatedly stated the impact of language disorders on other subjects in school, it was also my intention to explore what Austrian lower secondary teachers think about this phenomenon and whether they also see any links between a language deficit and the performance in other subjects.

Again, not all pedagogues participating in the study had the incentive to answer the questions and therefore skipped some items. Yet, the total number of responses still lay between 70 and 84.

Q8 Haben Sie jemals Schüler/innen mit einer diagnostizierten Sprachstörung unterrichtet? (zb.: Legasthenie, Sprachentwicklungsstörung, ...)

Beantwortet: 84 Übersprungen: 15



Data Panel 4: Q8 The number of teachers that have already taught a pupil with a diagnosed language disorder

The majority of the respondents, 77,38% in total, stated that they had already taught at least one student that suffered from a diagnosed language deficiency. Only five teachers could not remember whether they had accompanied such a

hampered pupil in their career as a teacher and 16,67% of all participants negated the experience with a speech and language impaired child or teenager. Of course, this outcome cannot be regarded as extremely instructive since it does not reveal any information about the type of language disorder the students had. In fact, most students in Austria who suffer from some kind of language disorder show signs of reading and writing disorders and not overall developmental language disorders, such as Specific Language Impairment where every part of language can be affected. On this account, it is not possible to designate the severity of the speech deficits the teachers had experience with, but it is still feasible to ascertain a change in behavior the affected students might show.

The following table shows how the test participants ranked the behavior, in the sub-categories motivation (1), concentration (2), participation in class (3), social interaction with peers (4) and social interaction with adults (5) with regard to the language-impaired students they had already taught. By doing that, they had to choose between six options to tick: very good, good, neutral, rather bad, bad and also had the opportunity to tick “no idea”, marked as “k.A”. Again, the average value of all responses, shown in the rightmost column, elucidates the overall opinion of all teachers summed up. This value ranges from 1 (very good behavior in a certain field) to 5 (bad behavior in a certain field).

	sehr gut	gut	neutral	eher schlecht	schlecht	k. A.	Mittelw.
1 Motivation	7,04% (5)	26,76% (19)	36,62% (26)	21,13% (15)	2,82% (2)	5,63% (4)	2,85
2 Konzentration	1,41% (1)	9,86% (7)	29,58% (21)	46,48% (33)	7,04% (5)	5,63% (4)	3,51
3 Mitarbeit im Unterricht	4,23% (3)	14,08% (10)	49,30% (35)	23,94% (17)	2,82% (2)	5,63% (4)	3,07
4 Sozialer Umgang mit Mitschüler/innen	11,27% (8)	21,13% (15)	43,66% (31)	16,90% (12)	1,41% (1)	5,63% (4)	2,75
5 Sozialer Umgang mit Erwachsenen	8,45% (6)	19,72% (14)	47,89% (34)	15,49% (11)	2,82% (2)	5,63% (4)	2,84

Table 4: Q9 The social behavior of language impaired students

Table 3 uncovers that a language disorder is assumed to have most influence on the concentration of a learner as most teachers (46,48%) regard this point to be rather weak. In contrast to that, social interaction with peers does not seem to be harmed, having the lowest average value with 2,75. 31 teachers indicated that the behavior in this field usually remains stable and neutral. Similarly, the social interaction with adults does not show any severe deviations, as most test participants think that the students' behavior in this area stays neutral, followed by 14 and 11 teachers who assume that this behavior is either good or rather bad. Likewise, motivation and participation in class of the affected learners seem to be neutral according to most respondents. However, there are still almost 27% of teachers who are of the opinion that some hampered learners are well motivated. In general it can be said that the focus is in the golden mean, saying that only few teachers saw drastic behavior patterns with regard to the given factors.

Clearly, although the behavior of language-impaired students is often regarded to show abnormalities and therefore plays an important role when dealing with students with speech and language deficits, the performance in the language itself is still most essential and most instructive. I chose seven language areas that often seem to be affected according to many researchers such as Restrepo & Kruth

(2000) and Leonard (1998). Thus, I asked the survey participants to rate those linguistic fields according to whether they believe in no noticeable deviation (++), hardly any deviation (+), negative deviation (-) as well as strongly negative deviation (--). Of course, the tested people also had the opportunity to be noncommittal when they thought they could not assess the occurrences and therefore could tick “no idea”. As presented in the previous tables, the average value of all responses is again to be seen in the rightmost column, ranging from 1 (no noticeable deviation) to 5 (strongly negative deviation).

	++	+	-	--	k. A.	Mittelw.
1 Pronunciation	7,14% (5)	28,57% (20)	35,71% (25)	20,00% (14)	8,57% (6)	3,36
2 Use of pronouns	12,86% (9)	41,43% (29)	24,29% (17)	11,43% (8)	10,00% (7)	2,78
3 Use of correct tense forms	10,14% (7)	40,58% (28)	30,43% (21)	10,14% (7)	8,70% (6)	2,89
4 Use of 3rd person singular ,s’	10,14% (7)	27,54% (19)	34,78% (24)	15,94% (11)	11,59% (8)	3,21
5 Use of appropriate plural forms	11,59% (8)	31,88% (22)	36,23% (25)	8,70% (6)	11,59% (8)	2,98
6 Use of correct syntax	10,00% (7)	18,57% (13)	41,43% (29)	21,43% (15)	8,57% (6)	3,50
7 Semantics	7,25% (5)	20,29% (14)	37,68% (26)	27,54% (19)	7,25% (5)	3,63

Table 5: Q10 Linguistic performance of language-impaired students

By taking the average value into consideration, the field of semantics seems to be most affected when it comes to restricted language learning. With 26 teachers seeing some negative deviation and 19 of them assuming a strongly negative deviation, more than 65% of all test participants think that this field is generally weak among learners suffering from a language deficit such as SLI. The area that is considered to be least affected is obviously the one of pronoun usage. 41,43% of all teachers asked believe that there is hardly any deviation in the use of pronouns.

Yet, there are still also almost 25% who think that there are some weaknesses to be seen in this area. Interestingly, pronunciation as well as the use of correct syntax is also regarded to be rather weak among language-disabled students. In sum, 55,71% of respondents see more weaknesses in pronunciation among language-impaired pupils than among normally developed ones and almost the same number, 62,86%, is of the same opinion with regard to the use of syntax. One very surprising fact is that the use of the 3rd person singular “s” does not seem to cause severe difficulties as almost 28 % of test participants feel that there is hardly any deviation to ND students. The reason for this is probably the fact that most students, no matter if language-impaired or not, have difficulties with the 3rd person singular “s”, so weaknesses in this area are often regarded as not unexpected at all.

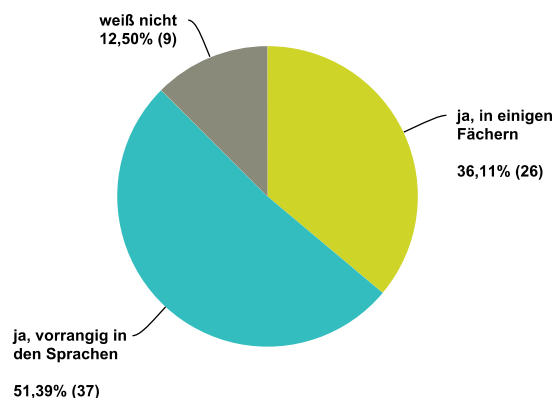
The teachers’ answers to the use of correct plural forms are somehow ambiguous. Almost 32% think that there are hardly any deviations to normally developed learners whereas a bit more than 36% think the contrary, that there is indeed some negative divergence. Similar balanced are the teachers’ beliefs concerning the use of correct tense forms. While 28 pedagogues think that speech impaired students do quite well in this linguistic area, or better said do not show any differences in performances compared to students with no diagnosed language deficit, 21 teachers are of the opposite opinion, claiming that there is some negative deviation to be seen.

Overall, it can be concluded that there are no significantly positive or strongly negative associations, with the exception of the use of syntax and semantics where there is an obvious tendency for negative to strongly negative deviation. In the other areas, though, most respondents emphasize the neutrality or slight negative differences in performances in comparison with normally developed learners of the English language. As a result, it gives reason to assume that, as already implied in the literature, generalizations of linguistic weaknesses cannot be made. Every language-impaired student shows specific abnormalities in different fields of language and therefore might also display rather inconspicuous behavior in some areas of language.

However, even if the difficulties in the language itself are not always congruent, it is said that language impairments often also have negative impacts on other subjects at school as the learning process in general can be hampered and thus hinders the acquirement of study matter (Blanken et al. 1993: 600-601). So I asked my test participants about their impression with regard to this phenomenon. Unfortunately, 27 teachers did not answer this item, so there were only 72 responses in total.

**Q11 Falls Sie bereits
SchülerInnen mit Anzeichen einer
Sprachstörung in Englisch unterrichtet
haben, waren diese Probleme ebenfalls in
anderen Schulfächer präsent? (zB.: Defizite
in Deutsch oder anderen Sprachen)**

Beantwortet: 72 Übersprungen: 27



Data Panel 5: Q11 The impact of a language disorder on other school subjects

To a great extent, the results of the survey accord with the findings in different literature, such as Blanken et al. (1993). The majority of the people consulted, 51,39% in numbers, stated that language-impaired students also have difficulties in other subjects, but in language classes primarily. So if an Austrian pupil experiences difficulties in the mother tongue, it is likely that he or she also has problems in acquiring a second language, which is English in most cases, and also in other foreign languages taught at school. 36,11% of participants in the survey indicated that students with a linguistic deficit show similar weaknesses in several subjects and 12,50% felt that they could not assess this incidence. Interesting is the fact that no single person was of the opinion that language disorders only exist in one subject such as English. It is generally assumed that there is always some kind of interference with other subjects. Consequently, children and teenagers with

speech impairments often have an overall bad school achievement due to their handicap.

8.3. Familiarity with SLI

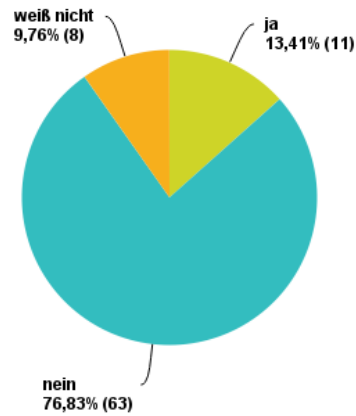
Since this thesis' topic is not merely language disorders in general, but Specific Language Impairment in particular, it was of course of great interest to ascertain what the participating teachers know about this specific type of developmental language disorders. While dealing with the topic, I got the impression that SLI is more known and more common in English-speaking countries. One reason for that assumption is simply the fact that you find more information with regard to definitions, symptoms and treatment measures of SLI, on American, British and Scottish sites when browsing the Internet than on Austrian or German sites when entering the German translation *Spezifische Sprachentwicklungsstörung*.²⁷ On this account, I was curious to find out how well known this specific term is among Austrian pedagogues in lower secondary education.

In item 12 I asked whether the test participants have already heard about the term Specific Language Impairment, in German *Spezifische Sprachentwicklungsstörung*. If they could relate to this type of language disorder, I asked them to shortly describe what they associate with this linguistic disability in item 13. Interestingly, nine teachers had associations with this term and could also explain it appropriately.

²⁷ For further information see the following Scottish, British and American websites:
<http://www.afasicScotland.org.uk/information/resources-and-downloads/picci/> (Accessed March 2015)
<http://www.afasic.org.uk> (Accessed March 2015)
<http://www.asha.org/public/speech/disorders/LBLD.htm> (Accessed March 2015)

Q12 Haben Sie jemals von der Sprachstörung "SLI - Specific Language Impairment (Spezifische Sprachentwicklungsstörung)" gehört?

Beantwortet: 82 Übersprungen: 17



Data Panel 6: Q12 The teachers' familiarity with Specific Language Impairment

As expected, the majority of Austrian teachers taking part in the survey, 76,83%, have not heard of the term SLI (Specific Language Impairment) before and therefore could not draw any connections to other language disorders. 8 teachers could not say whether they know this type of disorder or not and yet, 13,41% were familiar with SLI. These respondents took the opportunity to impart their knowledge in question 13. The table beneath shows the given answers.

Q13 Falls ja, was assoziieren Sie mit dieser besonderen Form von Sprachentwicklungsstörung?

Beantwortet: 9 Übersprungen: 90

#	Beantwortungen	Datum
1	Verspätete Sprachentwicklung, Schwierigkeiten bei den Fällen etc.	22.03.2015 20:56
2	besondere Schwierigkeiten mit der Rechtschreibung und sinnerfassendem Lesen	21.03.2015 19:53
3	Sprachdefizite in der Muttersprache, die sich in anderen Fächern auch auswirken	16.03.2015 20:16
4	Resignation beim Sprachlernen	13.03.2015 10:03
5	Langsamkeit, mühsames Erlernen von Strukturen, die für andere problemlos nachvollziehbar sind	11.03.2015 21:30
6	Kinder tun sich schwer im Erlernen der Sprache/n	10.03.2015 23:24
7	Störung im Gehirn	10.03.2015 19:32
8	Sprachverzögerung entwicklungsbedingt	10.03.2015 12:47
9	ev. soziale Vernachlässigung	10.03.2015 12:43

Table 6: Q13 Individual answers of test participants (definitions of SLI)

The answers of the respondents were all very similar. Some of them associated delayed speech and language development or slower and more arduous acquisition of a language. Others stated that SLI occurs along with social neglect

and others again think that Specific Language Impairment emerges due to a malfunction in the brain. In addition to that, one person associates difficulties in acquiring writing and reading skills with SLI, which cannot be considered as correct and somehow shows the general view of Austrian teachers who seem to have more experience with dyslexic students than with those suffering from Specific Language Impairment. That is to say when it comes to language disorders, some teachers might think of reading or writing problems in connection to hampered speech acquisition and might therefore neglect other linguistic areas. Another teacher specified his/her thoughts and stated that Specific Language Impairment describes language deficits in the mother tongue that affect other languages as well.

So altogether, Specific Language Impairment is not very well known among Austrian pedagogues, which might be due to the fact that this speech disorder is not often diagnosed in the German-speaking area. Nevertheless, those who have already been confronted with it most often know what it is and how it acts on young learners.

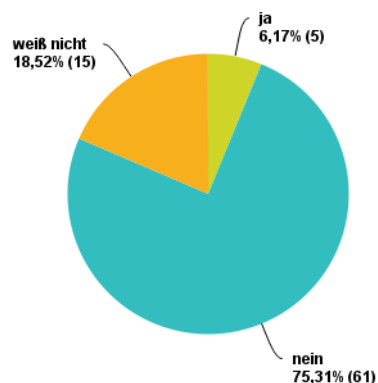
8.4. Perceptions about the availability of support

When pedagogues get to teach students that show signs of linguistic disorders, it is essential to provide the best support these learners can get. As indicated at a previous stage, the majority of the teachers that took part in this survey have already had experience with language-impaired pupils, but the question is whether they also know how to offer support for them and thus help them to achieve better performances at school. Therefore, the fourth part of the survey consisted of three items dealing with questions such as “Is there enough information about language disorders for teachers?” or “Is there enough material provided for students?”.

Sadly, the dropout rate was already very high at that point of the survey, although everyone would have been able to answer the questions, even those test participants who had no experience with language disorders at all. Still, the outcomes are unambiguous and instructive.

Q14 Gibt es, Ihrer Meinung nach, genügend Informationen für Lehrer/innen zu dem Thema wie man Schüler/innen mit Sprachstörungen unterstützen und fördern kann?

Beantwortet: 81 Übersprungen: 18



Data Panel 7: Q14 The amount of information with regard to support for teachers

The answer to the question whether teachers think that there is enough information about how to support and encourage learners with a language deficit has been negated by 75,31% of all test participants. This number is remarkable since incentive measures cannot take place if there is not enough information on how to carry these out. Only 6,17% think that there is plenty of information available and 15 teachers cannot tell whether there is enough information available on how to teach and support language-impaired students. In fact, there is no Austrian literature or website to be found that deals with the teaching, assessing or supporting of students with Specific Language Impairment. Of course, there are some guidelines provided on how to deal with learners who show signs of reading or writing difficulties but this information is restricted.

As it was my aim to get to know more about the available teaching material for language-impaired children and teenagers, I asked the test participants to rank the amount of materials at hand. I grouped these materials in accordance with the main language skills that have to be acquired when learning a foreign language such as English. These are reading comprehension (1), listening comprehension (2), grammar (3), writing skills (4) and speaking skills (5). The pedagogues were asked to assess whether materials in the given rubric were available to a great extent (++), whether there were some good materials on-hand (+), a sufficient

number useable (~), whether there was hardly any material (-) or no material at all (--). 82 teachers provided interesting opinions and answers to that item.

	++	+	~	-	--	k.A.	Mittelw.
1 Leseverständnis	7,41% (6)	20,99% (17)	12,35% (10)	22,22% (18)	11,11% (9)	25,93% (21)	3,12
2 Hörverständnis	4,94% (4)	13,58% (11)	12,35% (10)	32,10% (26)	12,35% (10)	24,69% (20)	3,44
3 Grammatik	9,76% (8)	12,20% (10)	17,07% (14)	21,95% (18)	10,98% (9)	28,05% (23)	3,17
4 Schreibproduktion	1,22% (1)	13,41% (11)	21,95% (18)	24,39% (20)	9,76% (8)	29,27% (24)	3,40
5 Sprechverhalten	0,00% (0)	7,32% (6)	13,41% (11)	40,24% (33)	10,98% (9)	28,05% (23)	3,76

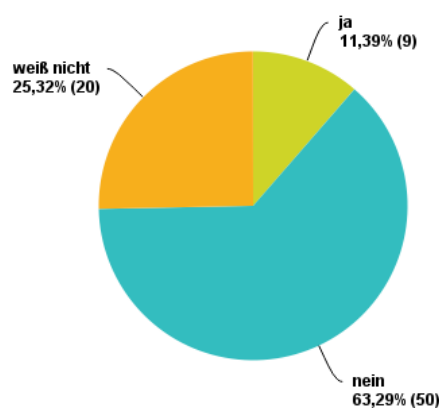
Table 7: Q15 The amount of supporting teaching materials in the different competences

Material to improve speaking skills achieved the highest average value with 3,76, meaning that material to train students in this language category seems to be rare, according to Austrian teachers. No single test person indicated that there was great material on hand but 40,24% felt that the amount, and maybe also quality, of teaching material for speaking purposes was improvable. In contrast to that, the availability of reading material was estimated to be higher than exercises for the other skills. In total, 23 teachers were positive about its scope, as 6 of them believed in a big amount of available material and 17 pedagogues felt that there are some good exercises for reading. Concerning the three other skills writing, listening and grammar, the availability of material was ranked rather weak. While almost 22% of teachers were of the opinion that a sufficient amount of writing material is useable to support language-impaired students, 34,15% in total have negative associations with it. The case is very similar with grammar where nearly 22% of pedagogues regard teaching material as rare and almost 11% think that there is none of it in circulation. And last, the survey revealed that also in the field of listening skills, improvements are desired as the majority think that there is not enough material at hand for Austrian teachers of lower secondary education. Surprisingly, many participants of the study could or did not want to provide a response to that question as between 24,69% and 29,27% made no entry.

After dealing with the amount and quality of teaching material provided in the Austrian school system to support students with language deficits, it was my intention to ask the test participants what the Austrian curriculum in particular contributes to this issue and, if it provides enough information with regard to assessment and aid for students with developmental language disorders. The answers of the 79 teachers were unambiguous.

Q16 Bietet der österreichische Lehrplan genügend Informationen bezüglich Beurteilung und Förderung von Schüler/innen mit Sprachdefiziten?

Beantwortet: 79 Übersprungen: 20



Data Panel 8: Q16 The teachers' answers whether the Austrian curriculum provides enough information on how to assess and support students with a language disorder

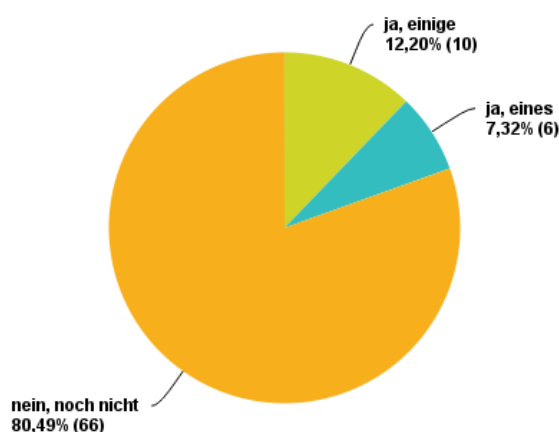
The majority of all teachers, 63,29% in numbers, felt that the Austrian curriculum does not provide enough information on how to teach students with language disorders. However, 9 of the teachers, 11,39%, believe that the curriculum does a very good job and provides all relevant information pedagogues need to practice their profession adequately. More than a quarter of the respondents did not feel able to assess the situation. The outcome clearly shows that a lack of information as well as material is present. I myself could not find any appropriate information on how to deal with students whose developmental language disorder affects second language acquisition in Austrian schools, or the English language in the present example.

8.5. Demand for teacher training with regard to language impaired students

As the offer of information and material is limited, it is interesting to evaluate the demand for teacher training concerning the teaching of students with language deficits. Therefore I used the last three question items to ask the test participants about their experience with training courses regarding that topic and whether they would be willing to attend some courses on how to teach, assess and support students with hampered language learning skills in the future. As such seminars and courses are usually not well attended, in my opinion, this last rubric of answers and thus the outcomes were of utmost interest and importance for this diploma thesis. Maybe the results offer an incentive to more personal initiative and engagement with language-impaired students and their support.

Q17 Haben Sie bereits Seminare in Bezug auf Förderung und Unterstützung von Schüler/innen mit einer Sprachstörung besucht?

Beantwortet: 82 Übersprungen: 17

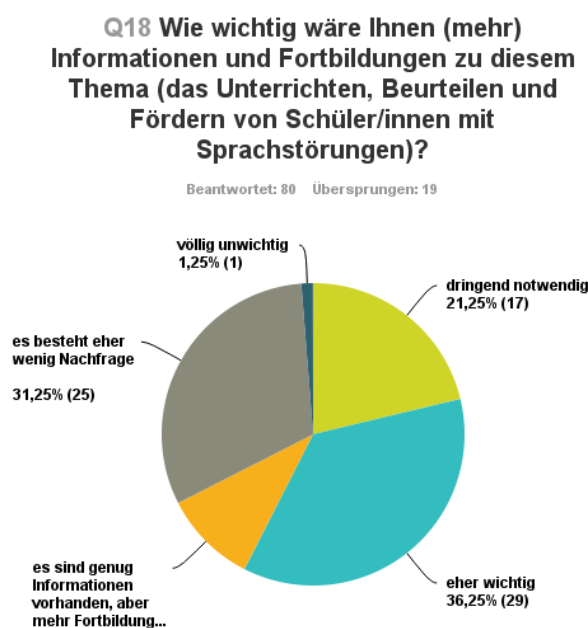


Data Panel 9: Q17 The amount of teachers that have already attended seminars with regard to support of students with language disorders

According to the survey, 80,49% of teachers have sadly not attended a single seminar or course on how to deal with language-impaired students. This number is extremely shocking since many of the respondents have had experience with such learners but apparently taught, assessed and supported them without or with hardly any real prior knowledge on that issue provided by experts. Yet, there is still a number of pedagogues that has gained some expertise in that field as 7,32%

of the respondents indicated that they have already attended one seminar and 12,20% even stated that they took part in more than one course or seminar dealing with the handling of language-disordered students.

Of course, there must be some reason why most interviewed Austrian teachers have no experience with seminars on that topic. Looking at the training offer of the *Pädagogische Hochschulen* in Krems an der Donau (Lower Austria) and Vienna, one can see that there is no or hardly any offer concerning the handling of speech impairments among students.²⁸ The only attempt into the right direction offered by the PH Krems, for the summer term 2015, are courses on speech-orthopedagogy but the PH Vienna does not seem to offer any courses on English language teaching in general or the handling of SLI in English classes at all. These findings are surprising and appalling and in the following data panel, one can detect what the participating teachers think about the importance of such training seminars.



Data Panel 10: Q18 The importance of information and teacher training on that topic (the teaching, assessing and support of students with language disorders)

²⁸ For further details see:

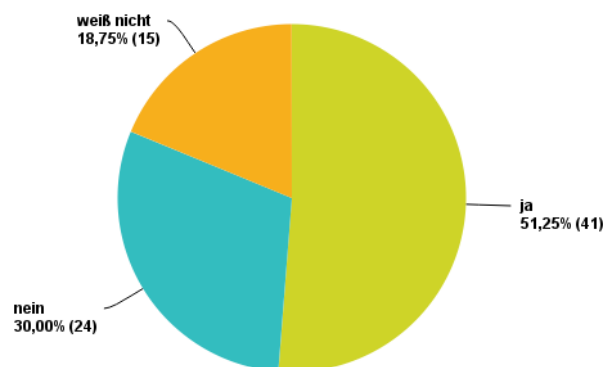
http://www.kphvie.ac.at/fileadmin/Dateien_KPH/Fortbildung_NOE/2014-15/50_programm_p_i_sose_15.pdf (Accessed April 2015)

http://www.p1-ftp.kphvie.ac.at/AHS_Journal_2015_verlinkt/HTML/#5 (Accessed April 2015)

Data panel 10 shows that the tendencies of the teachers are not very clear-cut. While 21,25% feel that there is urgent need for some further teacher training on the handling of students with language impairments as it is essential and indispensable, 31,25% say that there is rather little demand for such courses. One test person even indicated that it is completely unimportant to offer seminars in this field of research. Moreover, 10% of the pedagogues, portrayed in orange, think that there is enough information on that topic but more training in that direction would be beneficial. On the whole, the majority of all respondents are of the opinion that there should definitely be more offer on teacher training with regard to the handling of students with special language needs. As a matter of fact, 29 teachers consider it as rather important and 17 teachers think that it is of paramount importance. Now the question remains whether those who think that more training offer is essential would also take into consideration to attend one or several teacher trainings on that issue in the future.

Q19 Würden Sie persönlich in Erwägung ziehen eine oder mehrere Fortbildungen zu diesem Thema (Sprachstörungen) zu besuchen?

Beantwortet: 80 Übersprungen: 19



Data Panel 11: Q19 The teachers' willingness to attend teacher training on that topic in future

Fortunately, the majority of lower secondary teachers asked, 51,25% in numbers, would like to attend useful seminars or courses on the handling of language-impaired students. In contrast to that, a mournful 30% of pedagogues seem to be strictly against it and are not willing to take part in any further teacher training concerning the present issue. The rest of the respondents, 18,75% dither and thus cannot tell whether they would enroll in a seminar or not.

8.6. Food for thought

The last item of the survey was an open question, as I wanted to give the test participants the opportunity to express their personal feelings about the topic and thus wanted to encourage them to make comments and final statements. As has already been mentioned in chapter 7.2., “open-format items can provide a far greater richness than fully quantitative data” since they permit a greater freedom of expression (Dörnyei 2007: 107). 10 of the teachers taking part in the survey let their thoughts run free. The results were so striking that I did not want to withhold them from the readers of this diploma thesis, and so I will pick some of the most informative comments given and shortly discuss them. The content of the different statements ranged from personal stories and experiences with language-disabled children to personal assessments of the Austrian school system. The first comment, made on March 11th, 2015, deals with the latter issue:

„Das Thema Sprachstörungen hat sehr wenig Platz in der Ausbildung der Lehrpersonen. Selbst Deutschlehrer haben meiner Wahrnehmung nach geringe Basiskenntnisse über Symptomatik, Diagnostik und Intervention. Die veröffentlichten Handreichungen und Erlässe werden zu wenig ernsthaft zur Kenntnis genommen.“ (Anonymous)

The first statement made by a teacher deals with a problem of teachers' education in general. He or she complains that there is often no room for speech disorders in the curricula of teachers' education. Even German teachers, who teach the mother tongue of the majority of Austrian students, only have low basic skills in the areas of symptoms, diagnosis and intervention of language impairments. In addition to that, the teacher states that there are some handouts and decrees, but they are simply often not taken seriously by Austrian teachers. A second teacher adds another comment with a similar point of view:

„Im Vergleich zu anderen Ländern (USA, GB,...) ist die Ausbildung und Weiterbildung der Lehrer was z. B.: Dyslexie aber auch Dyskalkulie betrifft extrem mangelhaft!!!!“ (Anonymous)

He or she states that the Austrian teacher education as well as further education is, with regard to dyslexia and dyscalculia, extremely inadequate when being compared to the education in other countries such as the United States of America or Great Britain. This connects to the concerns I expressed at an earlier stage of this thesis, mentioning that there is definitely a lack of information and training in

comparison to English-speaking countries. As also mentioned earlier, the language disorder in Austria that is more common than SLI is presumably the one of dyslexia. Here, there is probably more information and material available than for other speech impairments. This, and also the problem that accompanies it, was voiced by another teacher:

*„Informationen bezüglich Legasthenie sind vorhanden, wobei dies sicher die Art von Sprachstörung ist, mit denen man an der AHS am ehesten konfrontiert ist. Problematisch in Hinblick auf Legasthenie ist, dass der Trend dahingeht, wenn Schüler/innen ein Negativerlebnis bei Vokabelwiederholungen, Schularbeiten, etc. haben, dann kommen oft die Eltern und meinen, dass ihr Kind ja Legasthenie hat und man Verständnis haben muss. Wenn man sich ein wenig mit dieser Sprachstörung auseinandersetzt, merkt man es, meiner Meinung nach, als Sprachlehrer/in selber, ob das so ist. Und ich meine damit nicht nur anhand ein paar vertauschter oder vergessener Buchstaben in Wörtern. Legasthenie hat viele Facetten. In manchen Klassen ist es fast ein "Sport", dass die Eltern sagen, ihre Kinder hätten Legasthenie. Wenn man sie jedoch um eine Attestierung bittet, die ja auch regelmäßig gemacht werden muss (ich glaube jährlich) oder ein Legasthenietraining, dann hört die Sprachstörung bei den vielen Kindern meist plötzlich auf.“
(Anonymous)*

This teacher concurs with my opinion about the amount of information on dyslexia available. He or she also states that this speech disorder is more common in Austria. In addition to that, this person refers to another problem that is often caused. Very often, parents apologize for their child being dyslexic as it has achieved bad results in the last English test, for instance. In many of these cases, though, there is no diagnosed language disorder present and the student, or the parents, tries, or try, to explain difficulties in a language with the help of an imaginary speech deficit. Usually, after calling in a doctor's certificate, there is surprisingly no language disorder present anymore. It is well known that learning a second language is not easy but since most people tend to seek causes for an abnormal behavior, a possible language disorder often comes in handy. Then, the expertise of the teachers is required, again. Yet, another teacher, and mother of three, doubts this expertise, or better said the help provided:

„Ich bin Mutter dreier legasthener Kinder. (mehrfach diagnostiziert) Obwohl ich selber Lehrer bin, hätten meine Kinder ohne zusätzliche, intensivste fachkundige Lernhilfe die Matura im ersten Anlauf mit Sicherheit nicht geschafft. (Jetzt studieren sie problemlos an der Uni) Da sich in jeder Klasse Kinder mit ähnlichen Problemen befinden, halte ich es für dringendst notwendig, Lehrer und Eltern genügend zu

informieren und entsprechende Hilfe anzubieten und zu leisten. Leider wurden, obwohl an unserer Schule eine ausgebildete Lehrkraft vorhanden wäre, alle Legastheniestunden gestrichen. Entsprechende Information und Verständnis gibt es, meiner Meinung nach, viel zu wenig, besser: nicht.“ (Anonymous)

She emphasizes the need for information and elucidation of special language disorders in order to provide appropriate support for disabled students. In fact, she mentions that not only teachers need some more training and information on that topic, but also the parents themselves have to be made aware of risks, symptoms and how to facilitate learning processes. The *Bildungsbericht* (educational report) of the year 2012, provided by the BMBF, also emphasizes that there is an urgent need for educational work concerning the parents, as there are big information and knowledge gaps.²⁹ Additionally, the teacher criticizes that some, or most, schools lack budget and therefore have to cancel essential classes for students, such as special dyslexia classes for example. This concern is also mentioned by a further teacher:

„Bei einem knapp bemessenen Schulbudget kommen Randgruppen leider immer schlecht weg“ (Anonymous)

Education costs a lot of money and therefore, the school budget often seems to be a problem. Increasingly often, schools unfortunately have to cancel additional courses, free subjects and support measures. This often leads to disapproval and causes annoyance among teachers and parents. But it is not solely the topic of financial issues, also the workload that teachers have to face when they need to support language-impaired children besides their normal teaching causes resentment:

„... wissen wir jetzt schon nicht mehr, was wir nicht noch alles in den Unterricht einbinden sollen! Jeder Lehrer bräuchte drei Köpfe und sechs Hände, um allen Anforderungen wirklich gerecht werden zu können.“ (Anonymmous)

The demands of teachers are extremely high, especially nowadays. Teachers do not merely have to function as educators; they also often seem to be speech therapists, psychologists, organizers, managers, arbiters and many more. This leads to an

²⁹ For further detail see:

https://www.bifie.at/system/files/buch/pdf/NBB2012_Band2_Kapitel07_0.pdf (Accessed April 2015)

overload and many teachers cannot often deal with the pressure at their workplace.

As a consequence, not only the amount of information and teacher training has to improve but teachers also have to be supported and guided in their doing. Only then, if all parties work together, optimal education, also for those students who suffer from a specific language impairment, can be guaranteed.

9. Discussion

The survey has been carried out in order to gain knowledge about the handling of language disorders in Austrian schools. The outcomes are varied and often very instructive. Yet, after getting confronted with prominent results, teachers “may [often] say: “That’s interesting ... but what does it mean for me in the classroom? How does it relate to the learners I’m teaching? What am I supposed to do about it in my situation?” (Freeman 1996: 88). Well, answers to these questions can be found when we have a closer look at the results of the online questionnaire and draw conclusions.

The first, and probably most crucial conclusion we can draw, with regard to this thesis’ topic, is that the language disorder Specific Language Impairment, or in German *Spezifische Sprachentwicklungsstörung*, is not very well known among Austrian teachers. The majority of pedagogues have not heard this term in their teaching career at all. When Austrian teachers talk about language disorders, they normally refer to reading and writing disabilities such as dyslexia. Yet, language disorders in general and problems in reading or writing do not necessarily mean the same. According to an American study by Patchell & Hand (1993: 2), “there are some 20 – 40% who have reading/writing problems who do not have language disorders”. So many Austrian teachers seem to run into danger classifying certain language problems as a specific language impairment that they are actually not.

A further conclusion we can draw is the fact that most educators of lower secondary schools in Austria seem to have some experience with language-disabled students in general, disregarding the type of speech impairment. This again corresponds with the findings of Patchell & Hand (1993: 3) who calculated that one high school teacher in the United States of America has “two or three students with language disorders” on average in every class. So those pedagogues who have been teaching for a longer time must have taught several pupils with a speech deficit in their career and therefore should also know appropriate measures on how to deal with them, assess them and support them in their learning processes. Yet this is not always the case. Unfortunately, Austrian teachers are often not very well informed by higher authority when it comes to expertise on how to handle disabled children and teenagers in language classes. Information on

how to assess speech-impaired students in their school achievement is not well implemented in the curriculum. Further, teacher training such as seminars and courses on how to deal with this matter are not common and definitely need to be reinforced. It is for this reason that many of the asked pedagogues would be willing to attend courses that deal with language disorders or the support of students in language acquisition in general. As a result, the offer of teacher training has to be increased. Teachers need to be informed about every detail that is essential for teaching disadvantaged students as their understanding and know-how of “dealing with problems of student learning is central to the work of a classroom” (Patchell & Hand 1993: 3). Involvement, inclusion and cooperation of all participants in the learning process can therefore be regarded as essential. Not only the student him or herself has to work on his or her weaknesses, also the parents need to be informed well in order to facilitate learning at home and last, the educators at school need to do their best to get the best out of their pupils. As the saying goes,

| *“When was ever honey made with one bee in a hive?”³⁰* |

³⁰ For further information see:

<http://www.soccerwidow.com/enlightenment/quotes-quotations/business-quotes/50-cooperation-winning-teams-teamwork-quotes/> (Accessed May 2015)

10. Conclusion

The present thesis has attempted to provide valuable findings with regard to the emergence and handling of Specific Language Impairment and other common language disorders in the Austrian school system. After intensively dealing with various types of literature on that topic, it was possible to draw reasonable conclusions and subsequently contextualize the findings and outcomes in the example of language-disabled students learning English as a second language in Austrian schools. The results, gathered with the help of 99 lower secondary teachers of Lower Austria, were largely instructive and offer incentive for further reflection and discussion.

The individual answers of all participants of the online questionnaire can be regarded as highly expedient since they give information about the actual situation in Austrian educational settings when it comes to language disabilities. There is now the knowledge and awareness that Specific Language Impairment does not play a prominent role in areas where German is the mother tongue. However, other language disorders such as dyslexia play a role in Austrian society and raise concerns. Many teachers are convinced that the main problem in insufficient intervention of language disorders is due to financial reasons, as most schools lack money for remedial teaching or suitable resources that facilitate language acquisition. In addition to that, the offer of teacher-training in forms of seminars that deal with the handling of speech-impaired students in class is limited. In general, information for teachers, as well as parents, about common language disorders is rare and leads to the conclusion that the elucidation about that topic has to be ameliorated.

Young people are the future of tomorrow and if we do not start to act and support them in their struggle with a language disorder now, their disability to express themselves will persist and they, as a consequence, will be hindered in their ongoing development.

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12. Appendix

12.1. Master Copies

Checklist 6—10

A

The Afasic Checklist

Speech and language screening test for 6- to 10-year-olds

Child's name _____

School _____

Age _____ years _____ months

Boy

☐
☐

First language _____

Checklist completed by _____ Date _____

Read each statement and decide whether or not it applies to the child. If it does, tick the box. If you are in any doubt, leave the box empty. At the end of each subsection add up the ticked boxes and enter the number as the subtotal.

.....

Summary

When you have completed all three sections, enter the totals for each section here. Add the section totals to calculate the total score.

	SECTION TOTAL	Referral
criteria cut-off		
1 Response to sound	_____	
2 Movement and motor skills	_____	
3 Cognitive processes	_____	
4 Errors in sound	_____	
5 Communication	_____	
6 Play and recreation	_____	
7 Vocabulary	_____	
8 Grammar	_____	
TOTAL SCORE	_____	(10 or less)

REFERRAL / RECOMMENDATION

Checklist 6—10

A

The Afasic Checklist

1 Response to sound

a) Shows confusion between vowels, consonants, and consonant clusters,
leading too difficulty in learning phonics and word-attack skills

☐

b) Cannot imitate a simple handclap rhythm

.....

☐

c) Has difficulty in recognizing simple tunes

.....

☐

d) Has difficulty in discriminating pitch

.....

☐

e) Has difficulty in screening out irrelevant sounds and attending to verbal
information e.g. when the teacher is talking

.....

☐

SECTION TOTAL _____

2 Movement and motor skills

a) Finds judging speed and distance difficult
e.g. when catching a ball

.....

☐

b) Has not established a preference for the right or left hand or the right or left
foot

.....

☐

c) Has poorly developed self-help skills

e.g. has problems with dressing, eating, washing

☐

d) Has poor pencil control

.....

☐

- e) Has poor co-ordination e.g. finds it difficult to use alternate feet when walking downstairs, to hop on one foot or to kick a ball

.....

SECTION TOTAL _____

3 Cognitive processes

- a) Has difficulty in understanding the language of sequencing
e.g. **before**, **after**

.....

- b) Has difficulty in ordering a sequence of activities required to complete a task
e.g. cooking

.....

- c) Has difficulty in learning the order of days of the week, months, seasons

.....
.....

- d) Has difficulty recalling three or more items in short-term memory

.....
.....

- e) Has poor verbal long-term memory for single words

.....
.....

SECTION TOTAL _____

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Checklist 6—10

A

The Afasic Checklist

4 Errors in sound

- a) Omits the beginnings and endings of words
e.g. 'pretending' becomes 'tending'

- b) Reduces multi-syllabic words
e.g. 'potato' becomes 'tato'

.....

c) Speaks less intelligibly when excited

.....
.....

d) Speaks less intelligibly when attempting a lengthy utterance

.....
.....

e) Shows persistent confusion between voiced and unvoiced sounds
e.g. **p/b, f/v, t/d, k/g**

.....

SECTION TOTAL _____

5 Communication

a) Has delayed understanding of question words
e.g. **what, who**

.....

b) Does not follow instructions without prompting

.....

c) Offers limited verbal comments on own activities

.....
.....

d) Gives unexpected responses to questions

.....
.....

e) Uses inappropriate intonation and volume when speaking

.....
.....

SECTION TOTAL _____

6 Play and recreation

a) Has difficulty following a story without many visual cues

.....
.....

b) Has no play involving sounds, rhymes or words

.....

c) Is slow to learn rules of group games and positions in sports

.....
.....

☐

d) Enjoys the visual content of television programmes but finds it hard to follow stories and plots

.....

☐

e) Humour tends towards visual and slapstick with poor appreciation of verbal jokes and puns

.....

☐

SECTION TOTAL _____

The Afasic Checklists © Afasic 1991

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Checklist 6—10

A

The Afasic Checklist

7 Vocabulary

a) Has difficulty with words relating to time
e.g. **afternoon**

.....

☐

b) Has difficulty with prepositions and adverbs

.....

☐

c) Has difficulty with words that change their reference in different circumstances
e.g. **sister, daughter, here, there**

.....

☐

d) Has frequent 'tip of the tongue' moments

i.e. is unable to recall words previously known

☐

e) Tends towards literal interpretation of idiom
e.g. 'pull your socks up'

.....

☐

SECTION TOTAL _____

8 Grammar

a) Omits auxiliary verbs
e.g. 'I been shopping' (omitting **have**)

.....

☐

b) Omits the verb **to be**
e.g. 'David naughty' (omitting **is**)

.....

☐

c) Does not change word order to form questions
e.g. 'He is going?' instead of 'Is he going?'

.....

☐

d) Omits word endings
e.g. in plurals or possessives

.....

☐

e) Omits whole words
e.g. 'Where book?' (omitting **is the**)

.....

☐

SECTION TOTAL _____

12.2. The online questionnaire

Specific Language Impairment in a bilingual context and its influence on teaching in Austria

Sehr geehrte Lehrer und Lehrerinnen! Geschätzte Kollegen und Kolleginnen!

Ich, Christine Reschl (Unterrichtende an der HLM HLW Krems sowie der NMS Fels/Wagram und Studentin der Universität Wien), beschäftige mich momentan intensiv mit dem Thema von Sprachstörungen bei Kindern bzw. Jugendlichen um meine Diplomarbeit "Specific Language Impairment (SLI) in a bilingual context and its influence on teaching in Austria" zu vervollständigen. Um hierbei einen Praxisbezug herzustellen und dabei aufzuzeigen, wie Sprachstörungen in niederösterreichischen Neuen Mittelschulen sowie AHS Unterstufen gehandhabt werden, appelliere ich nun an Sie und bitte Sie deshalb sich 10 Minuten Zeit zu nehmen um diese Umfrage durchzuführen!
Alle Angaben sind natürlich anonym und werden vertraulich behandelt!

Ich danke Ihnen bereits jetzt im Voraus! Sie leisten mit der Beantwortung der folgenden Fragen einen wichtigen Beitrag zu meiner Diplomarbeit!

Bei weiteren Fragen, Wünsche, Anregungen kontaktieren Sie mich bitte unter a0900540@unet.univie.ac.at!

Weiter

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Specific Language Impairment in a bilingual context and its influence on teaching in Austria

Informationen zu Person

1. Was ist Ihr Geschlecht?

- ☐ weiblich
☐ männlich

2. Wie alt sind Sie?

- ☐ <30 Jahre alt
☐ 31-40 Jahre alt
☐ 41-50 Jahre alt
☐ 51-60 Jahre alt
☐ 61 Jahre oder älter

3. An welcher Bildungseinrichtung unterrichten Sie?

- ☐ Neue Mittelschule
☐ AHS Unterstufe
☐ Sonstiges (bitte angeben)

4. Wie lange sind Sie bereits im Lehrberuf tätig?

- ☐ < 2 Jahre
☐ 2-5 Jahre
☐ 5-10 Jahre
☐ 10-20 Jahre
☐ > 20 Jahre

5. Falls sie Berufserfahrung zusätzlich zum Lehrberuf haben, bitte notieren sie diese hier:

Zurück

Weiter

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Specific Language Impairment in a bilingual context and its influence on teaching in Austria

6. In wie weit denken Sie, dass sich die Zahl der Sprachstörungen in den letzten Jahrzehnten verändert hat?

- ☐ stark gestiegen
☐ leicht gestiegen
☐ konstant geblieben
☐ leicht gesunken
☐ stark gesunken
☐ kann ich nicht beurteilen

7. Welche Faktoren beeinflussen Ihrer Meinung nach das Aufkommen von Sprachstörungen?

	sehr stark	eher stark	neutral	eher gering	sehr gering
genetische Faktoren/Vererbung	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
medizinische Ursachen (zB.: Gehörlosigkeit, Autismus, geistige Behinderung)	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
soziale Herkunft	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
schulisches Umfeld	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
familiäre oder persönliche Probleme	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
psychische Schädigung (aufgrund negativer Erlebnisse)	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
mangelnde sprachliche Anregung von Geburt an	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
fehlende Zuwendung und Unterstützung im Schulalter	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

Zurück Weiter

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Specific Language Impairment in a bilingual context and its influence on teaching in Austria

8. Haben Sie jemals Schüler/innen mit einer diagnostizierten Sprachstörung unterrichtet? (zB.: Legasthenie, Sprachentwicklungsstörung, ...)

- ☐ ja
☐ nein
☐ weiß nicht

9. Falls Sie bereits Schüler/innen mit Sprachstörung unterrichtet haben, wie haben sich diese im Durchschnitt verhalten in Bezug auf

	sehr gut	gut	neutral/keine Auffälligkeiten	eher schlecht	schlecht/ sehr auffällig	k. A.
Motivation	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Konzentration	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Mitarbeit im Unterricht	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
sozialer Umgang mit Mitschüler/innen	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
sozialer Umgang mit Erwachsenen (Lehrer/innen, Mitarbeiter/innen der Schule,...)	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

10. Falls Sie bereits Schüler/innen mit einer Sprachstörung unterrichtet haben, konnten Sie etwaige Abweichungen in den folgenden linguistischen Bereichen identifizieren?

	keine auffällige Abweichung	kaum auffällige Abweichung	negative Abweichung	starke negative Abweichung	k. A.
Aussprache/Pronunciation	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Verwendung der Pronomen/use of pronouns	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
korrekte Verwendung der Zeitformen/use of correct tense forms	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Verwendung des "s" in der 3.Person Singular/use of 3rd person singular "s"	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Verwendung von passenden Pluralformen/use of appropriate plural forms	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
korrekter Syntaxgebrauch/ use of correct syntax (word order, use of determiners - articles,...)	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Semantik/semantics (classifying words, learning vocabulary,...)	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

11. Falls Sie bereits Schüler/innen mit Anzeichen einer Sprachstörung in Englisch unterrichtet haben, waren diese Probleme ebenfalls in anderen Schulfächern präsent? (zB.: Defizite in Deutsch oder anderen Sprachen)

- ☐ ja, in einigen Fächern
☐ ja, vorrangig in den Sprachen
☐ nein, nur in Englisch
☐ weiß nicht

Specific Language Impairment in a bilingual context and its influence on teaching in Austria

12. Haben Sie jemals von der Sprachstörung "SLI - Specific Language Impairment (Spezifische Sprachentwicklungsstörung)" gehört?

- ☐ ja
☐ nein
☐ weiß nicht

Sonstiges (bitte angeben)

13. Falls ja, was assoziieren Sie mit dieser besonderen Form von Sprachentwicklungsstörung?

Specific Language Impairment (Spezifische Sprachentwicklungsstörung) beschreibt die verlangsamte Entwicklung linguistischer Fähigkeiten eines Kindes, in Abwesenheit von jeglichen kognitiven oder physischen Einschränkungen. Somit zeigen Kinder, die mit dieser spezifischen Sprachentwicklungsstörung diagnostiziert wurden, völlig normale Fähigkeiten in allen Bereichen, außer bei dem Spracherwerb, der deutlich verzögert ist.

Zurück

Weiter

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Specific Language Impairment in a bilingual context and its influence on teaching in Austria

14. Gibt es, Ihrer Meinung nach, genügend Informationen für Lehrer/innen zu dem Thema wie man Schüler/innen mit Sprachstörungen unterstützen und fördern kann?

- ☐ ja
☐ nein
☐ weiß nicht

Sonstiges (bitte angeben)

15. Gibt es, Ihrer Meinung nach, genügend Unterrichtsmaterial um Schüler/innen mit Sprachstörungen in den folgenden Bereichen zu fördern?

	große Anzahl von sehr guten Materialien verfügbar	einige gute Materialien verfügbar	ausreichend Materialien verfügbar	kaum Materialien verfügbar	keinerlei Materialien verfügbar	k. A.
Leseverständnis	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Hörverständnis	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Grammatik	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Schreibproduktion	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Sprechverhalten	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

16. Bietet der österreichische Lehrplan genügend Informationen bezüglich Beurteilung und Förderung von Schüler/innen mit Sprachdefiziten?

- ☐ ja
☐ nein
☐ weiß nicht

Sonstiges (bitte angeben)

Zurück

Weiter

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Specific Language Impairment in a bilingual context and its influence on teaching in Austria

17. Haben Sie bereits Seminare in Bezug auf Förderung und Unterstützung von Schüler/innen mit einer Sprachstörung besucht?

- ☐ ja, einige
☐ ja, eines
☐ nein, noch nicht
☐ weiß nicht

Sonstiges (bitte angeben)

18. Wie wichtig wäre Ihnen (mehr) Informationen und Fortbildungen zu diesem Thema (das Unterrichten, Beurteilen und Fördern von Schüler/innen mit Sprachstörungen)?

- ☐ dringend notwendig
☐ eher wichtig
☐ es sind genug Informationen vorhanden, aber mehr Fortbildungen wären hilfreich
☐ es besteht eher wenig Nachfrage
☐ völlig unwichtig

Sonstiges (bitte angeben)

19. Würden Sie persönlich in Erwägung ziehen eine oder mehrere Fortbildungen zu diesem Thema (Sprachstörungen) zu besuchen?

- ☐ ja
☐ nein
☐ weiß nicht

Sonstiges (bitte angeben)

20. Falls Sie weitere Kommentare und/oder Anregungen zu dem Thema der Sprachstörungen bei Schüler/innen haben, bitte notieren Sie diese in dem Bereich unterhalb...

Ich danke Ihnen vielmals, dass Sie sich Zeit genommen haben, die gestellten Fragen zu beantworten! Sie leisteten somit einen wichtigen Beitrag zu meiner Diplomarbeit mit dem Thema "Specific Language Impairment in a bilingual context and its influence on teaching in Austria"!

DANKE!

12.3. Abstract

This thesis explores one particular language disorder named Specific Language Impairment (SLI), provides valuable information about its characteristics and additionally deals with several ways of assessing and supporting students diagnosed with SLI. In detail, various information and hypotheses provided by researchers such as Verhoeven & van Balkom (2004) and Carrow-Woolfolk & Lynch (1982) are compared and adapted to the more precise issue of learning English as a second language when suffering from language impairment. In order to gain knowledge about the handling of Specific Language Impairment and other language disorders in the Austrian school system, an online survey has been conducted to examine Austrian teachers' awareness of the occurrences as well as characteristics and support measures of language disorders in Austrian schools. The results show that there is teachers' awareness of language disorders, such as dyslexia, but the speech disorder SLI is not well known among Austrian pedagogues. Various findings contribute to the recognition that there is the need and demand for more information on how to handle language impairments in classrooms as well as for more teacher training on that topic in Austria.

12.4. Zusammenfassung

Diese Arbeit erforscht eine bestimmte Sprachstörung namens Spezifische Sprachentwicklungsstörung (SLI), bietet Informationen über ihre Besonderheiten und erläutert zusätzlich mehrere Möglichkeiten um SchülerInnen mit einer diagnostizierten Sprachentwicklungsstörung zu testen und zu fördern. Unterschiedliche Informationen und Hypothesen von Wissenschaftlern wie Verhoeven & van Balkom (2004) und Carrow-Woolfolk & Lynch (1982) werden verglichen und an das eigentliche Thema vom eingeschränkten Erwerb von Englisch als Zweitsprache angepasst. Um Erkenntnis über die Handhabung von Spezifischen Sprachentwicklungsstörungen im österreichischem Schulsystem zu erlangen wurde eine Onlineumfrage erstellt. Diese dient dazu die Wahrnehmung von österreichischen LehrerInnen hinsichtlich des Aufkommens, als auch der Merkmale und Fördermaßnahmen von Sprachstörungen in österreichischen Schulen zu deuten. Die Ergebnisse zeigen, dass es eine Kenntnis von Sprachstörungen, wie zum Beispiel Legasthenie, seitens der PädagogInnen gibt. Die Sprachstörung SLI ist jedoch im deutschen Sprachraum nicht weit verbreitet. Mehrere Resultate tragen außerdem zu der Erkenntnis bei, dass es einen Bedarf nach mehr Informationen über die Handhabung von Sprachstörungen im Klassenzimmer sowie nach mehr LehrerInnenfortbildungen zu diesem Thema in Österreich gibt.

12.5. Curriculum Vitae

Persönliche Angaben

Name: Christine Reschl
Geburtsdatum, -ort: 5. Juli 1988, St.Pölten
Staatsangehörigkeit: Österreich

Ausbildung

2009 – dato Universität Wien
Lehramtstudium Englisch, Psychologie & Philosophie
2008 – 2009 Fachhochschule St.Pölten
Bachelorstudium “Media- und
Kommunikationsberatung” (2 Semester)
2002 – 2008 HLW Krems, Schwerpunkt: Gesundheit & Soziales
2005 5-monatiger USA Aufenthalt
Besuch einer High School in Hailey, Idaho, USA
1998 – 2002 BURG St.Pölten (Bundesunterstufenrealgymnasium)
1994 – 1998 Volksschule Harland

Berufserfahrung

Februar 2011 – dato Lehrerin an der HLM HLW Krems
(Englisch, Psychologie & Philosophie)
2010 – 2012 diverse Promotionstätigkeiten für die ÖBB
2010 – 2011 Angestellte des BFI
Abhaltung von Maturavorbereitungskursen Englisch
für Erwachsene
2009 – 2011 Verkäuferin im Einzelhandel – Modebereich
(geringfügig)
2007 – 2009 Verkäuferin im Einzelhandel – Lebensmittelbereich
(geringfügig)
Juni 2005 – Juli 2005 Servicefachkraft im Zuge des verpflichtenden
Schulpraktikums an der HLW Krems