

Systems–Based Approaches to Speech–Language Pathology Service Delivery for School Age Children

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EXECUTIVE SUMMARY

This chapter will provide readers with an overview of how a systems-based approach can be used to understand the relationship between culture, environment, language, and disability. It will identify a useful model of ecology, culture, and development that can and should be considered in conjunction with the WHO-ICF framework to guide service delivery in school-based settings. This chapter will also provide an overview of systems-based approaches that can be used when working with children from traditionally marginalized backgrounds. Finally, a case study example will be used to provide guidance on the application of systems-based approaches to service delivery for children in school-based settings.

INTRODUCTION

The Need for Systems Based Approach in SLP Service Delivery to Children of Color

The goal of this chapter is to provide school based practitioners with a (w)holistic approach to communication development that will enable them to deliver culturally responsive speech-language pathology (SLP) services to children from traditionally marginalized backgrounds. This terminology is used intentionally to acknowledge that 1) cultural and linguistic diversity are identity markers that shape communication development that may or may not marginalize an individual (Matthew, Rodriguez, & Reeves, 2016) ; 2) marginalization is a systemic and structural process tied to social stratification based on identity markers such as race, ethnicity, socioeconomic status, and language (Adair, 2015); and 3)

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there are historical, current, and accumulated inequities faced by certain groups of students in U.S. schools (Bowman, Comer, & Johns, 2018; Schneider, Martinez, & Owens, 2007).

Research indicates that cultural and linguistic differences have the potential to result in different norms and expectations for communication, cognitive, and reading development (Bedore et al., 2018; Whiteside-Mansell, Bradley, & McKelvey, 2009). These differences can impact how speech-language pathologists assess and treat disabilities. IDEA (2004) outlines a number of regulations regarding the evaluation and determination of disability. In particular, section 300.304 establishes that evaluation procedures should include a diversity of assessment tools and strategies. Evaluation procedures and the selection of assessment tools and strategies need to be “non-discriminatory” and administered in the child’s native language. Furthermore, for any disability category, eligibility decisions made by the team must demonstrate that determinations are not based on “lack of appropriate instruction or “limited English proficiency” (§300.306b).

Tangentially, there is also a growing body of research indicating that a number of systemic and structural factors play a significant role in communication, cognitive, and reading outcomes (Feliciano, 2018; Gonzalez, Stein, Kiang, & Cupito, 2014; Quintana & Mahgoub, 2016). Furthermore, IDEA (2004) outlines additional exclusionary criteria for the category of specific learning disability (§300.8). Speech-language pathologists may be primary or related service providers for children with learning disabilities given the category’s emphasis on oral and written expression, listening comprehension, and reading comprehension. Special education teams must demonstrate that a child’s difficulties are not the result of another disability, cultural factors, language proficiency, or environmental/socio-economic disadvantage (§300.309). However, there has been very little discussion of the latter in regard to assessment and intervention approaches. School based practitioners represent more than half of our profession who serve pediatric populations. These SLPs should be aware of the type of socio-cultural and socio-political factors that have the potential to impact speech, language, and communication behaviors necessary for learning. Consider the following scenario:

Jeff is 5-year-old boy from Jamaica. Jeff’s family migrated to Tampa, FL last year. Jeff and his 10-year-old sister speak English but their mother usually speaks to them using English or her native Jamaican Patois. Jeff’s father is not in the US. The family has a few extended family members in the area that they are living with until the Mother is able to find permanent employment and housing. At this time, Jeff’s kindergarten class has been staffed by three long-term substitutes and one parent volunteer. The parent volunteer is concerned that Jeff does not play with other peers and cannot do his work. She is also concerned that when she has observed him making requests and attempting to communicate that she is never sure of what he is saying. The current teacher indicates that Jeff does not talk very much but that he seems to understand classroom directions “just fine.” The first quarter of the school year has ended. Jeff’s attendance records indicate that he missed at least two days per week and arrived tardy on more than 50% of those days in attendance. You are the full time speech-language pathologist at Jeff’s school. Your LEA representative and the MTSS coordinator would like to meet with you to discuss a plan of action for trying to determine if Jeff has any significant communication issues that are impacting his learning.

Speech-language pathologists working in school-based settings are presented with similar scenarios in the day-to-day management of caseloads that are far too large and complex. There are a number of socio-cultural and environmental variables that will need to be taken into consideration as the SLP and her team begins to think about the screening and assessment process for Jeff. Inadequate planning can

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