

**Question: I only speak English. How can I serve my children who don't speak English?**

ASHA's position is that intervention of speech and language disorders of limited English proficient speakers should be conducted in the student's primary language. Should the primary language be one other than English, there are several options that can be implemented by a monolingual SLP when providing speech therapy services. (**Resource:** American Speech-Language-Hearing Association, 1985 June). Clinical Management of Communicatively Handicapped Minority Language Populations. *ASHA*, 27 (6). ) Using the services of a bilingual speech pathologist is recommended when the SLP speaks only English. A bilingual speech pathologist may be itinerant and work with only the bilingual students or monolingual and bilingual SLP share the delivery to bilingual students. (**Resource:** Assessment & Intervention Resource for Hispanic Children. Dr. H. Kayser, Singular Publishing Group, Inc., 1998 pp.105-108.)

Should a bilingual SLP not be available, therapy can be conducted with the assistance of a trained interpreter working with a monolingual SLP. The interpreter must be trained to work with the SLP. (**Resource:** Interpreters and Translators in Communication Disorders - A Practitioner's Handbook, Henriette W. Langdon, Thinking Publications, 2002.)

If an interpreter cannot be found, and the student's language of instruction is English, then the monolingual SLP can provide services teaching to the child's strengths as identified during the assessment and using a visual, auditory, and hands-on approach. Remember, students must be assessed in the native language. (**Resource:** Hispanic Children and Adults with Communication Disorders: Assessment and Intervention. H. Langdon & Li-Rong Lilly Cheng, An Aspen Publication pp.272-325. Cultural and Linguistic Diversity Resource Guide for Speech-Language Pathologists, Brian Goldstein, Singular Resource Guide pp.104-107.) Use culturally appropriate materials at all times.