1989

A Multicultural-Multidisciplinary Approach to Speech/Language Intervention with Black Children

Ruby Burgess

Nola T. Burl Radford
University of Tennessee Health Science Center, nradford@uthsc.edu

Ralph Calhoun

Follow this and additional works at: http://trace.tennessee.edu/utk_audipubs

DOCUMENT RESUME

ED 333 968   PS 019 528

AUTHOR   Burgess, Ruby; And Others
TITLE   A Multicultural-Multidisciplinary Approach to
              Speech/Language Intervention with Black Children.
PUB DATE   Sep 89
NOTE   34p.; Paper presented at tle Annual Conference of the
              National Black Child Development Institute
              (Washington, DC, September 28-30, 1989).
PUB TYPE   Speeches/Conference Papers (150)

EDRS PRICE   MF01/PC02 Plus Postage.
DESCRIPTORS   Allied Health Personnel; *Black Dialects; *Black
              Youth; *Educational Practices; Elementary Secondary
              Education; *Interdisciplinary Approach; Intervention;
              Language Acquisition; *Language of Instruction;
              *Multicultural Education; Racial Bias; School Health
              Services; Special Education; Speech Pathology;
              Teacher Role
IDENTIFIERS   *African Americans

ABSTRACT
              There is no better way to teach African-American
children than through their dialect. Yet, American schools generally
respond to the language needs of black youth inappropriately. This
conference presentation focuses on appropriate educational practices
that support the language and cognitive development of
African-American children, and the ways in which special education,
speech, and language professionals can work with teachers to alter
black children's school environments. The introduction, Part I (Ruby
Burgess), emphasizes the influence of cultural differences on
students' success or failure in school. Part II (Nola Burl)
delineates characteristics of the multidisciplinary team approach and
implications for language intervention with black children.
Discussion concerns the present implementation of the approach and
the role of the speech-language pathologist as a multidisciplinary
team member in establishing practices that support black children's
language acquisition. The section concludes with an overview of
current perspectives on language that are consistent with a
multicultural perspective. Part III (Ralph Calhoun) explores the role
of the special educator as it relates to language instruction and
advocacy for African-American children. Concluding comments summarize
goals and directions for multicultural education and list critical
actions that need to be taken in implementing nonracist practices.
There are 31 citations. (RH)

A MULTICULTURAL-MULTIDISCIPLINARY APPROACH TO SPEECH/LANGUAGE INTERVENTION WITH BLACK CHILDREN

A PRESENTATION FOR THE NBCDI 1989 CONVENTION

Ruby Burgess
Coppin State Coppin

Nola T. Burl

Ralph Calhoun
University of Central Arkansas

PART I

Overview

Ruby Burgess

It has become more and more clear during the past 25 to 30 years that American school systems are inadequately equipped with personnel, knowledge, materials, resources and/or just plain know how to educate African American children. Recent years have demonstrated the system's overwhelming lack of success in performing this task. Theories and assumptions have been set forth by educators, sociologists, psychologists and other professionals, each commenting on the causes for this phenomenon. Many, in turn, draw the conclusion that the problem lies within the children and their families. Accompanying their conclusions are a new series of negative terms with which to describe the children, their personal life and their families. These terms are added to the already extensive list present in the literature.

Much of this work was and still is done from what is referred to as the deviant, deficient or deprivation model. A consequence of research done using these frames of reference is

2

that the children who have been victimized by an inadequate school system, administrators and teachers are blamed for their failures. Educators, social and behavioral scientists spend inordinate amounts of time, money and "intellectual talent" searching to find the main reason(s) for African American children's poor school performance within the children, their homes and or immediate communities. While to negate the importance of the home and community in children's learning processes would be a misjudgment, it does seem odd that many researchers are unable to look beyond these factors to examine other aspects of the education process when looking at African American children. This inability is likely associated with more insidious and harmful causes and agendas that are directly related to school systems' inability to educate African American children. Therefore, the problem continues to flourish from the top--those who give thought to the profession--to the bottom--those who act out the thoughts.

Often, intervention programs are designed and implemented with African American children and their families based upon the findings of this one-sided research. Because of the narrow-mindedness of researchers and the biased slant of the programs resulting from their research, the effects are at best useless and at worst damaging to the African American children and families for whom they were designed.

When the deprivation model is discounted as a means for discovering why African American children perform poorly in

2

school and why they exhibit apathy and a lack of excitement toward school and its activities, other factors must be examined. In order to assess what really does contribute to successful and/or unsuccessful school experiences for African American children, many complex factors must be closely and honestly investigated.

Schooling in America has been characterized by values of conformity, extreme competition and getting high grades even at the cost of social, emotional, and character development. (Get good grades no matter the cost or the method is the general rule of thumb.) These values often intervene and prevent many children from actualizing their individual potential. Horton (1977) pointed out that one of education's primary functions is to socialize. Schools are expected to instill this set of "normative" values to support, not challenge, the prevailing school order. Horton (1977) further states that: "These values and interpretations of success as set forth by American schools are not necessarily the normalcy baseline for cognitive growth and development in many children." Horton's assertion becomes understandable and is sharpened when one looks at current statistics on: (a) drop out rates, (b) African American children assigned to special classes and (c) the academic tracks from which the majority matriculate.

The normalcy baseline for cognitive growth and development in children is not established by the school or research; rather, it is established by the child's culture.

3

4

Cultural difference has been cited by some researchers as one factor in a myriad of very complex factors which lead to school success or lack thereof. Culture is the shared patterns of thinking, feeling and believing on which human beings rely to give meaning to their behaviors. It gives a group of people the avenue through which its members see the world. A natural result is different ways of learning, interacting and using language. Much has been said about culture and its impact on children's learning/cognitive styles. (Hale, Hilliard, Arbar, McAdoo and Boykins to cite a few.) Out of this research grew efforts to multiculturalize education.

However, many of the early reformers again viewed difference as deficient and failed to address other pertinent issues in their reform movement. Phillips (1988) illustrates their view thusly:

> "The inability of culturally different families
> to benefit from the opportunities for social
> equity in this country, and thus the inability
> of their children to benefit from school experiences
> is in part due to their culture."

The general feeling among educators was and is that the families have alien habits which cause their children to come to school with behaviors which set them apart. This causes both the children and their families to have poor self-concepts. Poor self-concepts lead to apathy and self-defeating practices which result in school failure.

The early multicultural movement attempted to address the problem by helping students learn to appreciate their culture and

4

5

thereby themselves. Although "noble" in intent, still, the
weight of a national problem is placed squarely on the backs of
the victims of the system--that is--to learn more about their own
culture so they will appreciate themselves and consequently do
well in the school as it is presently structured. This effort
has primarily been aimed at changing the content within schools
to include special days celebrated by different cultural groups.

We believe that the problem is much more complex than this
simplistic view. Phillips (1988) raises these questions: "Is
culture the problem? Is ignorance about culture at the root of
social, political, and economic power in the society? Will the
study of culture and the appreciation of cultural differences
enable our children and families to overcome their struggles for
power over their own quality of life?" In raising these
questions, Phillips compels us to examine broader issues that
impact the lives of children in school.

We believe that culture is not the main reason for
inequality in the school. Rather, it is the lack of acceptance of
difference that is the problem. That ever-present value of
conformity overrides the ability to accept and value difference.
That value creates negative and oppressive, attitudes about,
responses to and environments for children who look, speak and
act differently.

Today our presentation centers around children who speak
differently. Time constraints prevent us from discussing all
aspects of the school curricula. We have, therefore, targeted

5

6

language for the focus of our discussion. The response of the school to African American children's language impacts them negatively and becomes one of the major vehicles through which our children are assigned to special classes, lower groups and tracks, and, ultimately, speech/language therapy.

One of the major achievements of early childhood is the acquisiti n of language. However, language is not learned in a vacuum. The manner in which a child uses language is determined by his/her culture. Language is not simply a means of communicating in the narrow sense that schools recognize. Language is a primary source of cultural identity. Children who use different languages or dialects also employ different frames for understanding different events and behaviors. When these differences meet in the classroom it becomes difficult for the teacher to help the children process their thoughts and consequently further develop their language ability. When the difference is met with hostility and non-acceptance, not only is language learning impaired, but all learning virtually comes to a halt.

We believe that some of the problems our children face in school can be addressed through a multidisciplinary team of professionals who respect, accept and welcome difference. This session will examine how special education and speech/language professionals can work with the classroom teacher to alter, to some extent, the environments our children have to live in as they journey through the American School.

7

Our next speaker, Ms. Burl, will discuss the characteristics of a multidisciplinary team and the implication for speech language intervention while Mr. Calhoun will discuss the special educators role. Afterwards I will briefly give some concluding comments and then we will entertain questions from the audience. Ms. Burl.

7

8

PART II

Characteristics Of The Multidisciplinary Team: Implications
for Language Intervention With Black Children

Nola Burl

The theme of the conference "Realizing The Dream: The Future
of Black Children," reminds African Americans of the power of
dreams.   An important means for assisting African American
children in realizing their dreams is to change the manner in
which we approach language issues within the school and clinical
setting.   Language is central to human experience and crucial to
all social and educational functioning (Bernstein, 1985).
Professionals rely heavily upon measures of language as clues to
children's cognitive, motor, and communication skills.
Therefore, teachers, supported by speech-language pathologists,
special educators, and others must monitor carefully the manner
in which language is used for educational placement and
intervention.   The language needs of African American children
are often handled inappropriately.

    This situation can only be altered by promoting
multicultural, multidisciplinary approaches to language education
and intervention.   My purpose is to describe the characteristics
of the multidisciplinary approach.   In so doing, I will provide
information regarding how the approach is presently implemented,

drawing examples from my own experiences as a clinician. I will
also describe the role of the speech-language pathologist as a
multidisciplinary team member. To conclude, I will share with
you current perspectives on language that are consistent with a
multicultural perspective.

The Multidisciplinary Team Approach

The use of the multidisciplinary approach has been promoted
by such legislation as PL 94-1442. Although the multi-
disciplinary approach has been the method of choice for some
time, it may be practiced with differing amounts of
effectiveness. Some of the difficulty in implementing the
multidisciplinary approach may be the result of conflicting
values within the society. These conflicting values lead to
misunderstandings and promote behaviors inconsistent with a
team approach. For example, one basic value held by the larger
society is individualism. When practiced to the extreme,
individualism leads to a great deal of competitiveness and
undermines group functioning. A group orientation--practiced to
the extreme--could also be counterproductive. But extremes of
individualism are more common in American society than are
extremes of the group orientation (e.g., see Bronfenbrenner,
1970). If not taken to the extreme, a group orientation enhances
the likelihood of successful multidisciplinary action because
such an orientation prepares one for a high degree of
collaboration, conformity to the decisions of the group, and
cooperative action. The multidisciplinary approach is ideally

9

characterized by: (a) active individual participation of all members, (b) equality of members, (c) respect for the contributions of others, (d) freedom of members to define their roles, (e) organization, and (f) a common understanding of purpose (Bailey & Wolery, 1989).

To this point, I have alluded several times to illustrate that the multidisciplinary approach is often implemented poorly. I have also explained how values may influence implementation of the approach. Numerous other factors include team members' professional knowledge, cultural knowledge, experience, and working conditions. The scenario that follows reflect what various professionals all basically know about the multi-disciplinary approach when factors such as values, professional preparation, and working conditions serve to undermine the multidisciplinary approach.

Imagine a school located in either an urban or rural setting. Imagine a multidisciplinary team at the school, consisting of a regular classroom teacher, special educator, and an itinerant speech-language pathologist. The regular teacher and special educator also share the frustration of having to adjust to a new clinician on the average of one clinician every two years. This happens to be a year when a new clinician is hired for the school.

Neither the teachers, special educators, or speech/language clinician at this school have been formally trained regarding the development of Black children. But all three professionals have

had wide exposure to European-based models of normal and abnormal development. The teachers have an unvoiced opinion that all this new research about Black children--is only a poorly disguised excuse for "them," Black children, not learning. Both teachers and special educators also share the unvoiced belief that the Black children can not learn because they can not speak English appropriately. Therefore, teachers consistently refer Black children for therapy. The young clinician has given no thought to issues of language variation. The clinician does plan to concentrate on articulation--the children's motor skills--as articulation was stressed in her/his undergraduate program. Furthermore, articulation training appears more concrete to the young clinician and easier to change.

The teachers, clinician, and special educators have dramatically different experiences and beliefs regarding children. In order to avoid conflict, these professionals will learn by trail-and-error which topics to avoid at referral and follow-up conferences for special services. When they meet they limit their activities to: (a) discussing who gets John at what time, (b) signing the appropriate forms, and (c) talking to parents.

The example I provide is, of cours*, exaggerated to some extent, but highlights some of the current problems that face the multidisciplinary team. Most glaring is the young speech-language pathologists' weak knowledge base in light of the demanding job with which s/he is faced. It is generally under-

11

12

stood that the entry-level requirement for speech-language pathologists should be the Master's Degree. However, given limited funds and limited foresight regarding speech-language pathology, some school districts continue to take shortcuts, one of which may be the hiring of Bachelor's level clinicians to circumvent demands on an already tight operating budget.

A second problem revealed by the story is the lack of a common conceptual base among the teacher, clinician, and speech-language pathologists. Various disciplines, including education and speech pathology, differ in terminology and methodology regarding language (Lund & Duchan, 1983). Moreover, professionals vary in there knowledge of and sensitivity to Black children in spite of the increased rhetoric regarding multi-cultural education. Both limited cultural knowledge and diverse language methodologies disrupt professional collaboration.

A third problem illustrated by the scenario is poor role exploration. Extreme time demands tend to dampen professional motivation in applying the team approach and limit foresight regarding creative application of the approach. The team approach is sometimes mistakenly viewed as one of the significant factors in increasing time demands. However, the multi-disciplinary approach can be very efficient and powerful if implemented appropriately (Bailey & Wolery, 1989). The approach functions best if role definition precedes any task assignments.

At the very hear of the approach--but often overlooked--is the necessity for flexibility in role assignment. In the

12

multidisciplinary approach, no rigid rules should exist regarding the roles of each team member. Ideally, team members should discuss their own particular areas of expertise in order to decide how each member may best serve the team. For example, in the previous illustration, the clinician had limited knowledge of broad language issues. In this case, s/he should seek the assistance of other professionals with demonstrated expertise in dealing with the language of Black children.

In order to improve implementation of the multidisciplinary approach, training institutions must begin to offer advanced practicums in which multidisciplinary teams engage in educational planning. Although the focus of this discussion is practical application, research establishes the knowledge base for professional training. I would be remiss if I did not acknowledge that the multidisciplinary approach should be used more extensively in research. Multidisciplinary language research teams might provide a safeguard against the narrow focus and insensitivity to cultural issues that have plagued past studies. This type of research could also be more cost-efficient and breed less competitiveness.

With this background regarding the multidisciplinary approach, the critical need for role exploration, and changes in training and research, allow me to share with you some background about speech language pathology.

13

14

The Role Of The Speech-language Pathologist

The public-at-large often perceives the speech-language pathologist as the "speech correctionist"--the teacher who fixes the sound system. This perception is accurate in many instances due, in part, to the late involvement of speech-language pathologists in the assessment and remediation of language (Lund and Duchan, 1983). Attention to language issues did not begin until the 1950s. It was much later before clinicians addressed language differences. It was not until the 1960s with the lobbying of a Black caucus within the American Speech-Language-Hearing Association (ASHA) that a distinction was made between linguistic differences and disorders (Michel, 1969; Taylor, 1969). The caucus set the stage for the development of the Office Of Minority Concerns.

The Office Of Minority Affairs is responsible for provision of technical assistance to ASHA members, affirmative action employers, academic institutions, other professional organizations, and the general public on issues regarding minority professionals and minorities with communications disorders (Cole & Terrell, in press). From 1985-1987 the Office Of Minority Concerns, recognizing the critical shortage of multiculturally literate speech-language pathologists, developed the Institutes on Communication Disorders in Multicultural Populations that were held throughout the country (Shewan, 1988). By 1989, the Office Of Minority Concerns will publish Concerns

14

15

for Multicultural Populations which rewrites the entire profession from a multicultural viewpoint.

The national Association has taken significant strides in improving the ability of clinicians to meet the needs of black children. In spite of these efforts, there is a breakdown in the dissemination of information from the national to local level via colleges, universities, and state speech-language-hearing associations. For example, The Arkansas Speech-Language-Hearing Association (ArKSHA) lacked a standing committee to address minority issues until last year. Because the Black membership was not organized, the membership-at-large was less attentive to the necessity of seeking the input of the Minority Concerns office in developing sound regulations and procedures that are culturally appropriate. The need exists and the burden falls upon Black professionals to bring about broader recognition of cultural issues at the state-level.

Nationwide, the majority of speech-language pathologists who are certified members of the American-Speech-Language Hearing Association (ASHA) report no professional education addressing normal and abnormal development in culturally diverse populations (Shewan, 1988). New standards have been developed by ASHA which will be implemented in 1991. These standards require coursework to promote multicultural literacy among speech-language pathologists. A continuing need is to promote coursework that prepares clinicians to counsel African American clients more appropriately.

15

Part of the reason for increased attention to counseling is recognition that the prevention of school failure resulting from the school's unwillingness to make adjustments for communication differences should be of utmost concern to clinicians (Costlow, Garcia, & Westby, 1987). The primary tools of prevention include education and counseling (Marge, 1984). I can provide some personal examples to illustrate how counseling applies.

As a speech-language pathologist, I recognize that in order to support children, one must attempt to strengthen the family's abilities to meet the child's needs. Black families can only be empowered when they are capable of making informed decisions that allow them to use the educational system to their best advantage. Therefore, I educate parents regarding normal language development in Black children. I allow the parents as many opportunities as possible to observe, question, and understand my function as a speech-language pathologist. In this way, I establish myself as the criterion against which the parents can compare other clinicians who may eventually serve their children. I also attempt to help free Black parents from the negative attitudes and shame they may feel toward their own particular language skills, as well as myths they may harbor regarding language. Yes, I am referring to Black Language, or if you will--Ebonics, Black Dialect, or Black English. I also alert the parents to language assessment procedures that may be inappropriate for African American children in general and their child in particular.

16

17

In working with teachers, I encourage the same observation, questioning, and understanding of my function as I do with parents. In this way, I work to decrease inappropriate referrals for my services and to provide the teacher some strategies for supporting language development within the regular class. I also work to increase appropriate referrals for language services.

The examples illustrate that I not only accept the traditional role of remediator, I also accept the additional roles of advocate, educator, and counselor. The multi-disciplinary team approach provides the context for my adoption of these additional roles. The leadership of my Black colleagues in The Office Of Minority Concerns and in other arenas, such as The National Black Child Development Institute, support my successful implementation of these roles.

As well as affecting the context in which I serve, my colleagues also influence the content of what I teach. I will briefly describe language from a multicultural-multidisciplinary perspective as generally accepted by a number of Black professionals and other professionals who are sensitive to cultural issues (Cole & Terrell, in press; De Frantz, 1989; Lahey, 1989; Seymour, 1984; Stockman, 1982; Taylor, 1986; Westby, in press). I will restrict my discussion to a basic definition of language, appropriate assessment, and language intervention.

A Multicultural-Multidisciplinary View Of Language

A Definition. Numerous speech language pathology programs introduce student clinicians to the following definition of

17

language: "Language is a code whereby ideas about the world are expressed through a conventional system of arbitrary signals for communication" (Lahey, 1989, p. 2). Key words within the definition are communication, ideas, code, system, and conventional. Language is a primary means for intentional communication or the exchange of meaning. Language is used by individuals to share the ideas they posses about events in the world. "Language is a code," refers to the fact that language is a means for representing one thing by another. Language is representational. We represent objects in the world with words and sentences. "The code is a system" means that the manner in which sounds combine to form larger units for speech is systematic. "The code is conventional" implies that language represents a type of knowledge shared by a particular community. The community influences the sound system, vocabulary, grammar, and style of the language. This latter description reflects the fact that language is a cultural product (Nobles, in press). The multicultural viewpoint suggests that heredity and environment contribute equally to language. Thus, both biology and culture contribute to language development in African American children and all children (Westby, in press).

Children learn the language produced by their community. A multicultural view of language is consistent with a Social Reality Model of Language that recognizes that the English language is comprised of many varieties of languages, including Black English (Cole, in press). This model (See Appendix A) was

18

developed by Patricia Cole, current Director of the Office of
Minority Concerns. Black English is not considered disordered
language but one of many dialects. All speakers of English
speak some dialect of English. However, Black English is
devalued by the larger society because the producers of Black
English are devalued. This devaluation contributes to the
inappropriate referral of Black children for speech/language
services. Recall that the rules of language are arbitrary
Different communities determine the language conventions.
But all societies are similar in promoting an idealized language
type while devaluing other types. These are difficult concepts
to comprehend. Professionals often overlook their own strong
emotional reactions to language variation--an emotion that may be
evoked by the unconscious belief that language is unchanging or
should be so. Given the fact that language variation is a common
characteristic of all languages, how should language be assessed?

Assessment. Educators are most often concerned with what
language reflects about a child's potential to learn. Yet, it is
difficult to adequately assess the language abilities of Black
children as we lack: (a) developmental studies of Black children,
and (b) appropriate assessments based upon developmental trends
in Black children. This situation is changing as researchers
such as Anita DeFrantz, Ida Stockman, Lorain Cole, Orlando
Taylor, and others examine language development in young Black
children and provide models for assessment and intervention. I

19

refer you to the references for additional information regarding assessment and intervention.

One way to immediately improve assessment is to be cautious regarding the questions posed by the assessment. Certain test procedures are more appropriate for certain questions. If clinicians use the majority of available standard assessments to examine the language of Black children, they are able to address this question: Has this child mastered certain standard English skills? If clinicians use naturalistic sampling that involves observing the child using language in a variety of settings and then analyzing the spontaneous language, clinicians are asking: Has the child mastered the language to which s/he was exposed? A related question is: Given the language to which the child was exposed, does this child demonstrate a normal pattern of language development?

Education and Intervention. Because nonstandard language use is not disordered language, speech-language services to change the language are not generally recommended. However, counseling with the child and the family are recommended to assist them in recognizing their choices and developing a greater appreciation for the complexities of language. If a child demonstrates adequate mastery of Black English, a reasonable assumption is that the child is capable of learning any variety of language--given the appropriate circumstances.

What would constitute appropriate circumstances?

1. Numerous opportunities to experiment with language.

20

21

2. Access to a variety of adult models.

3. Early focus on the development of social strategies rather than isolated skills. A skill is an isolated behavior that a child can only implement with the assistance of the teacher. A strategy is a plan of action the child is able to employ independently (Wiig, 1988).

Given this background regarding the multidisciplinary team, the role of the speech/language pathologist, and culturally sensitive perspectives of language, our third panelist will provide some insights regarding the role of the special educator as it relates to language instruction and advocacy for African American children. Mr. Calhoun.

PART III

The Special Educator's Role

Ralph C. Calhoun

Numerous school reforms have been implemented in the past 20 years in American Schools. These reforms have taken the form of compensatory programs, such as, the gifted and talented, and bilingual and multicultural programs. These reforms have also included increased testing and specialty personnel. Yet, the age-old problem of inequity in educational outcomes for specific groups of people still exists and is now escalating.

A major reason these attempts at educational reform have been unsuccessful is that the relationship between teacher and students and between schools and communities has remained essentially unchanged (Cummins, 1986). Consequently, we find an over-representation of African American children in special education classes in every category, but especially in the catego.y of learning disabled.

Teachers within the field of special education have received on local levels some degree of praise for their ability to educate those viewed as learning disabled. This process-- supposedly--delivers desir.d outcomes, be they academic, vocational, or social. However, recent research indicates that students assigned to special education and/or resources classes never attain on-level performance in the areas for which they

22

were assigned (National Black Child Development Institute (NBCDI), 1989). Further, these classrooms have become the dumping ground for culturally different children.

Educators often spout the axiom of beginning instruction "where the child is." Unfortunately, more often than not, this translates in actual practice to remediation--particularly when children differ culturally and linguistically. Troike (1977) suggests that implementation of this viewpoint often involves finding the lowest common denominator among students, teachers, and available instructional materials, and considering that level as appropriate for instruction.

All children enter school with the ability to understand and express themselves in the linguistic code of their families. Teachers' failure to utilize and build upon the children's own knowledge and skills is not beginning instruction "where the child is." Rather, it is a message to the children that their accomplishments are less than nothing and a handicap to further education. This attitude is exhibited in the ase of Arkansas where in 1987-88, African American students made up nearly one-third or 30.4% of the 44,487 special education students. On the other hand, African American students made up only 23.8% of the general population (Arkansas Gazette, 198'). Oritz and Yates (1!37), through a survey cited 31 reasons for special education referrals; of which, language was ranked fifth.

Many educators are not prepared to deal with the language systems of African Americans. Instead of educating African

23

24

American children within their own language system, we attempt to turn them away from their culture by suggesting through the curriculum that there is another and better way. For example, Bereiter and Englemann (1966) argued that Black children generally suffer from a general language deprivation linked to inadequate cognitive socialization. This view has had and continues to have a devastating impact on approaches to language training with Black children. Refusals to acknowledge the experiences, culture and language of African American children lead the children to develop a sense of incompetence.

There is no better way to teach African American children than through their existing dialect. Presenting alternative language forms as a "better way" merely demonstrates our lack of knowledge concerning cultural dialectal variations and our apathy toward acquiring skills necessary to provide appropriate language training.

Special educators should adjust themselves to the child's language before infusing the mandated language skill upon them. As professionals in the field, we should use the children's own storehouse of words to build vocabularies, provide experiences, snare meaning and feelings, and to produce a more academically minded student. Oral language usage should be infused into the curriculum; thus, leading to a better understanding of a child's unique language system and bettering the opportunities to offer assistance in acquiring all necessary language skills which will provide academic success.

24

African American children do not need, nor will they accept, any methodology which will attempt to change a language system which suits their cognitive and affective structure. Millender (1988), states that African American children are easily bored by superficial and phony ideas. We must give them something real, something to use in order to get the skills necessary for survival in society.

Along with an increased awareness of African American children's culture and language patterns comes the need for accountability. Who should be held accountable for the problems of our children? Special education teachers must be willing to accept responsibility for inappropriate curriculums and methodologies. Special educators must be willing to express a dissenting voice when African American children are inappropriately placed based upon language tests.

In conclusion we know that language is the heart of culture and cognition. We also realize that students must also posses self and group esteem as well as personal security before they can be successful in the academic setting.

If we affirm these ideas then we must ask ourselves if special education is always the most appropriate placement for African American children. Are we performing a disservice to the children? The answers can be found within an examination of the education system. There must be an investment in multiculturally literate regular classroom teachers, speech/language pathologists, and special education teachers. There is also a

25

26

need for enhancing parental trust through communication and action. Most of all, we must nurture, strengthen, and safeguard African American children's desire to achieve success. It is then that we can help them realize their dream.

27

PART IV

Concluding Comments

Ruby Burgess

Although we believe these measures will help alleviate some of the problems African American children face when they enter American schools, we also believe that i is necessary for educators and researchers to examine and address the broader issues that prevail throughout the American School System.

The stated goals of multicultural education, in some part, address these broader issues (Bennett, 1986). They include:

1. Increasing historical perspectives and cultural consciousness;

2. Building intercultural competence;

3. Strengthening social action skills; and

4. Reducing racial and ethnic prejudice and discrimination.

Phillips (1988) clarifies the issues when she says multicultural education must teach people:

1. How to recognize when cultural and racially different groups are being victimized by the racist and biased attitudes of the larger society,

2. How these behaviors are institutionalized in the policies and procedures of agencies and programs,

3. How these practices of excluding people are so
    mystified that well-meaning advocates for change fail
    to see them operating, and

4. How to act against the prevailing forces that perpetuate
    racism.

She goes on to say, and we concur, that action needs to be
added to the content of multicultural education. The four most
critical actions will be summarized for you. First, there is a
need for an examination of institutional racism and how it
operates. Second, there is a need for an examination of how we
as individuals participate in our own oppression and the
oppression of others by unconscious mirroring of the oppressive
relations of the larger society. Third, we must engage in the
struggle to truly understand what culture means to a group of
people, to understand how culture is a source of group power and
strength, and to examine how to allow groups to retain their
cultural integrity while they gain the skills to function in the
larger society. Fourth, we must learn how to act on behalf of
the oppressed. We must use whatever power we have to change the
oppressive systems that exist in our society.

References

Akbar, N. (1985) Our destiny: Authors of scientific revolution.
   McAdoc, P. & McAdoo, J. (Eds.),
   Black Children: Social, educational, and
   parental environments. Beverly Hills, Calif:
   Sage Publications, Inc.

Arkansas State Department of Education. (1989).
   (Data on certified speech pathologists).
   Unpublished raw data.

Bailey, P., & Wolery, M. (1989). Assessing infants and
   preschoolers with handicaps. Columbus, OH:
   Merrill Publishing Co.

Bereiter, C., & Englemann, S. (1966). Teaching disadvantaged
   children in the preschool. Englewood Cliffs, NJ:
   Prentice-Hall.

Bernstein, D. K. (1985). The nature of language and its
   disorders. In D. K. Bernstein and E. Tiegermann (Eds.),
   Language and communication disorders in children.
   Columbus: Charles E. Merrill Publishing Co.

Bronfenbrenner, U. (1970). Two worlds of childhood:
   U.S. and U. S. S. R. New York: Simon & Schuster.

Cole, L., & Terrell, S. L. (in press). Philosopnical and
   practical approaches to second dialect instruction.
   In L. Cole and V. Deal (Eds.), Concerns for multicultural
   populations. Rockville, Maryland: American Speech-Language-
   Hearing Association.

Costlow, L., Garcia, C., & Westby, C. (1987). Empowering
   families of language learning disabled minority students.
   A presentation form the American Speech-Language-Hearing
   Convention, New Orleans, La.

Cummins, J. (1986). Empowering minority students: A framework
   for intervention. Harvard Educational Review, 56, 18-36.

Davies, David. (1989, 2, 27). Figures show apparent bias in
   special education. Arkansas Gazette, p. 1A.

De Frantz, A. (1989). Our ethnolinguistic heritage: Strategies
   for parents, teachers, business persons, and advocates to use
   to foster appropriate educational experience. A presentation
   from the Nineteenth Annual Conference of the National Black
   Child Development Institute. Washington, D. C.

29

Hcrnes, C.M., Maddux, C.D., & Green, C. (1986). Minority
    students and special education: is over representation
    possible? NASSP Bulletin 70, 492, 89-93.

Lahey, M. (1989). Language disorders and language development.
    New York: MacMillan Publishing Co.

Lund, N. J., & Duchan, J.F. (1983). Assessing children's
    language in naturalistic contexts. Englewood Cliffs,
    New Jersey: Prentice-Hall, Inc.

Marge, M. (1984). The prevention of communication disorders.
    American-Speech-Language-Hearing Association, 26, 33.

Michel, J.F. (1969). The role of ASHA in social, political, and
    moral activities, American Speech And Hearing Association, 11,
    219-220.

Millender, Naomi. (1980). They're Okay: are you?
    Black Child Journal, 1, 2, 46-51.

Mins, Howard A. (1988). Teaching Star lard English: Who, What,
    & Why? Paper presented at the Annual Convention. American
    Speech-Language-Hearing Association, Boston, Massachusetts.

National Black Child Development Institute. (1989). Special
    Report: The status of Black children. Washington, D.C.: Author

Nobles, W., & Nobles, V. (in press). Culture, assimilation, and
    language. In L. Cole and V. Deal (Eds.), Concerns for
    multicultural populations. Rockville, Maryland: American
    Speech-Language-Hearing Association.

Drtiz, A.A. & Yates, J.R., (1988). Characteristics of Learning
    Disabled, Mentally Retarded, and Speech-Language Handicapped
    Hispanic Students at Initial Evaluation and Reevaluation.
    Paper presented at the Ethnic and Multicultural Symposian.
    Dallas, Texas.

Phillips, C.B. (1988). Nurturing diversity for today's children
    and tomorrow's leaders. Young Children, 42-47.

Reschly, D.J. (1988). Minority MMR over representation and
    special eduction reform. Exceptional Children, 54, 4, 316-323.

Saville-Troike, M. (1977). Language instruction and
    multicultural education. In C. A. Grant (Ed.), Multicultural
    education: Commitments, issues, and applications.
    Washington, D. C.: ASCD.

Seymour, H.R., (1986). Alternative strategies for the teaching of language to minority individuals. In F.H. Bass, B.S. Clark, and H.R. Mitchell (Eds.), Concerns for minority groups in communication disorders, ASHA Reports, 16, Rockville, Maryland: American Speech-Language-Hearing Association.

Shewan, C.M. (1988). 1988 Ominibus Survey: Adaptation and progress in times of change. American-Speech-Language-Hearing Association, 30, 27-30.

Stockman, I.J. (1982. A developmental study of Black English-- phase 1, final report. Washington, D.C.: Center for Applied Linguistics. (ERIC Document Reproduction Service No. Ed 245 555)

Taylor, O. (1969). Social and political involvement of the American Speech And Hearing Association. American Speech And Hearing Association, 11, 216-218.

Taylor, O. (1986). Treatment of communication disorders in culturally and linguistically diverse populations. San Diego, California: College-Hill Press.

Westby, C. (1985). Cultural differences affecting communicative development. In L. Cole and V. Deal (Eds.), Concerns for multicultural populations. Rockville, Maryland: American Speech-Language-Hearing Association.

Wiig, E. (1989). Assessment of language disorders in the learning disabled child. A presentation for the Sixth Annual Conference on Communication Disorders sponsored by the Student Speech-Language-Hearing Association of the University of Central Arkansas. Little Rock, AR.

The Social Reality Model Of Language
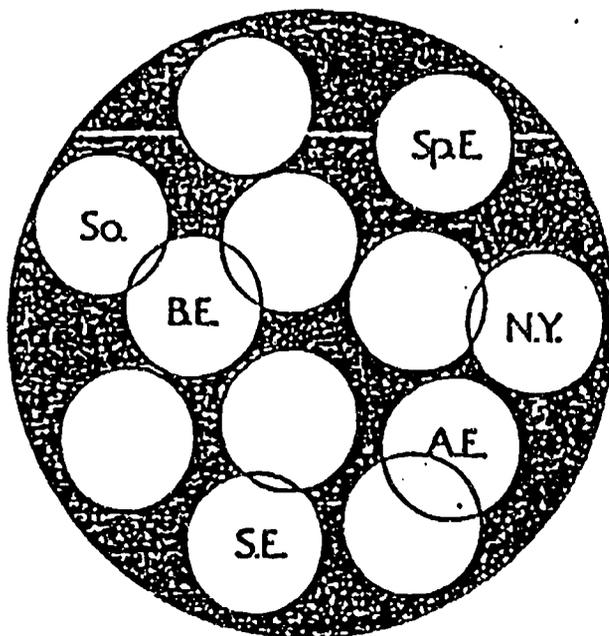
ENGLISH LANGUAGE

Resource:

Office Of Minority Concerns
American Speech-Language-Hearing Association
10801 Rockville Pike
Rockville, Maryland   20852

Suggested References

Banks, J. A., & Banks, C. A. (Eds.) (1989). Multicultural
   education: Issues and perpectives. Needham Heights, MA:
   Allyn and Bacon.

Stockman, I. J. (1986). Language acquisition in culturally
   diverse populations: The black child as a case study.
   In O. Taylor (Ed.). The nature of communication disorders
   in culturally and linguistically diverse populations.
   San Diego, CA: College-Hill Press.

Goals Of The Multicultural Approach
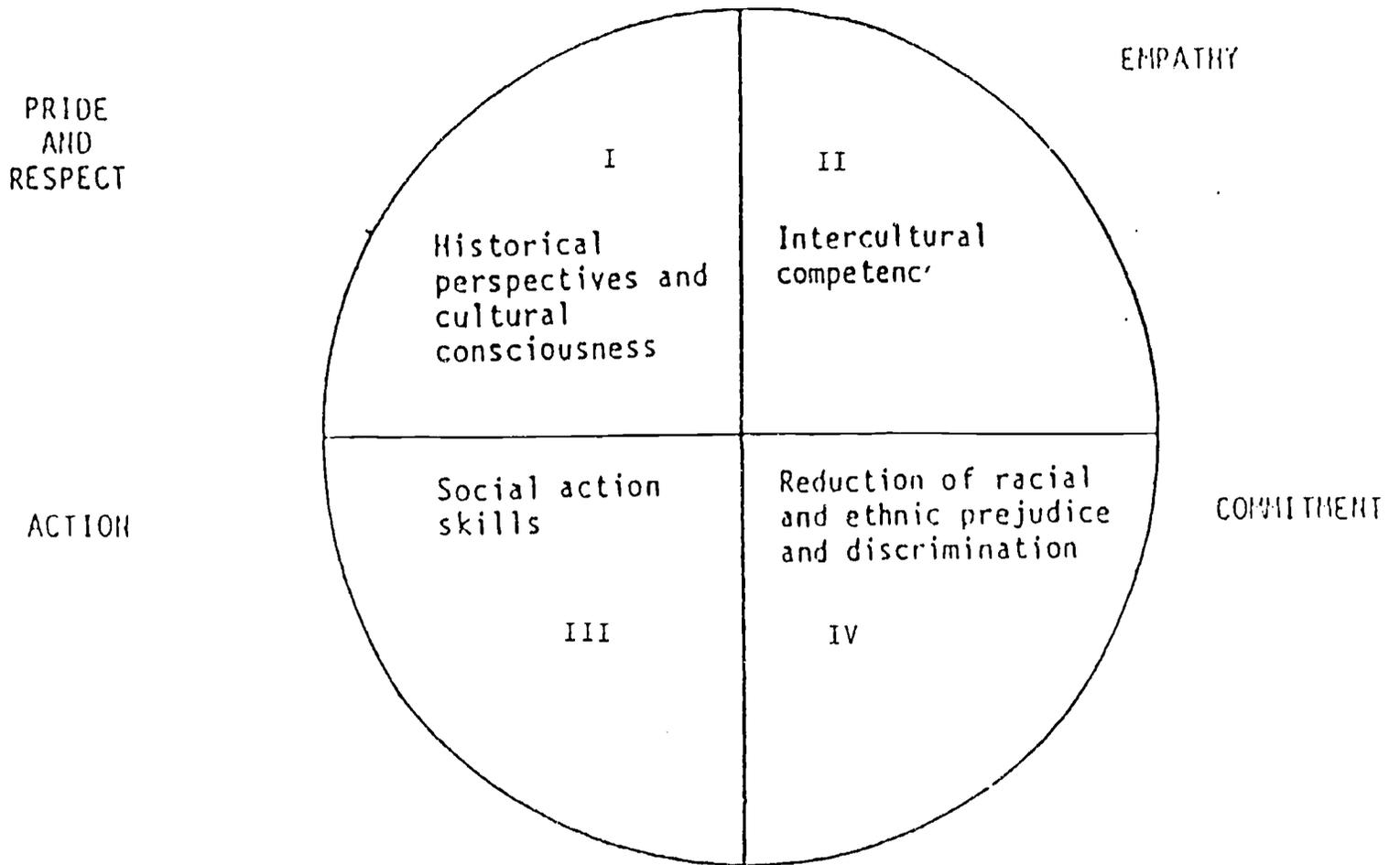
EMPATHY

I

Historical
perspectives and
cultural
consciousness

II

Intercultural
competenc'

Social action
skills

III

Reduction of racial
and ethnic prejudice
and discrimination

IV

ACTION

COMMITMENT

1. Increasing historical perspectives and cultural consciousness;

2. Building intercultural competence;

3. Strengthening social action skills; and

4. Reducing racial and ethnic prejudice and discrimination.

Reference

Bennett, Christine; Comprehensive Multicultural Education, Boston: Allyn & Bacon, Inc. 1986.