Provision of Speech and Language Therapy Services to Multilingual and Migrant Children in Bremen

Results from the MeKi-SES Project

Introduction
More than every third child in Germany has a migrant background. In parts of the city of Bremen, this figure is even higher. In addition, there is an unknown number of irregular or undocumented migrants, that means that the size of the migrant population may be considerably higher. The availability of data on the access and provision of speech pathology services is still inadequate in Germany. This accounts even more for multilingual children. Speech, language and communication needs are particularly common amongst children including multilingual and migrant children. However, health-monitoring programs report that migrants like children from socio-economically disadvantaged families differ in many health-related aspects from the majority population in Germany, i.e. that they are more likely to experience barriers in accessing health care. However, poor socioeconomic status (SES) may itself be a result of migrant status, and even more is negatively associated with disparities in communication and language development.

Aim
This study was designed as a first, regional examination of speech pathology services for multilingual and/or migrant children with suspected language impairment (LI) in the city of Bremen.

Method
Information was obtained from speech language therapists (SLT) representing 30 practices in different districts across Bremen, a city affected by socio-spatial polarization. Data was collected between July and September 2016 by means of a questionnaire. Data was analyzed using descriptive statistics and SPSS. Practices were clustered according to the proportion of minor migrants and minor welfare recipients of the district. The survey addressed i.e. consultation number and proportion of multilingual children, age of child by time of referral, physician vs. SLT diagnosis, used assessment materials, intervention goals, information of practicing SLT.

Results
→ Multilingual children experience later referral compared to monolingual peers SLTs (>3 months)
→ Percentage of multilingual children in SLT practices varies but corresponds according to districts
→ Connection between proportion of multilingual children needing language tuition and minor welfare recipients of the district (need for language promotion and poverty)
→ SLT experience determination of accurate differential diagnosis between communication disorders and typical linguistic variations still challenging if not participated further education and training essential to effectively deliver service to the multilingual and multicultural clientele
→ SLT using diverse methods in combination feel more confident to diagnose in 3-5 hours
→ Two thirds of SLTs are aged 46-50 years – looming lack of qualified SLTs expected from 2030 on

Implications
→ Need for increased multiprofessional awareness and professional knowledge to help multilingual children with LI access needed services earlier
→ Need for future research to explain late referral: indication of trust in SLT assessment skills, of medical misdiagnosis or due to limited access to prescribing medical doctor?
→ Need for future research to provide data on prevalence and incidence rates

Percentage of the migrant population aged 18 and younger in the city of Bremen
Total: 53,3%

There is an increased risk of misdiagnosis, increasing shortage of qualified staff, and need to improve qualifications.

References