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What's BEST for bilingual children?
A home language approach to DLD

North West Speech and Language Practitioner
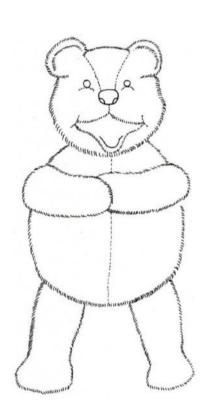Network Day 2025
Friday 27th June 2025
Ewood Park, Blackburn, UK

What is BEST?

- is a **language intervention** for children aged who find it difficult to understand and/or produce sentences with 2, 3 and 4 clause elements
    - E.g., 'the boy is giving a banana to a baby' *or equivalent in the home language*
- uses **symbolic toy play**, **shared attention** and **language input** to help children to map language
- **Evidence-based**: shown to be effective in improving children's expressive language skills, comprehension and generalise to untaught utterances (McKean et al., 2025)

What is BEST?

Low dosage – highly effective.

Suitable for children with difficulties **understanding** and **using** spoken language.

No need to teach understanding or **vocabulary** before moving onto expression.

No need to establish one level before moving onto a more challenging level.

Children join in when they are ready.

Designed for groups.

Eligibility for BEST

- **Children must be**:
  - Aged 3-6
  - Have typical hearing ability
  - Have sufficient play and attention skills
  - Have difficulties producing sentences containing multiple clause elements

- Children with a Language Other Than English **must receive BEST in their home language**, as an English-only approach will result in rapid language loss

- Therapists and services cannot provide **an English only BEST offer**, and exclude LOTE children as this is direct discrimination and therefore illegal

LOTE and Bilingual Speakers in Research

- Often excluded and only monolingual English speakers included in research to keep costs down and avoid questions about the effects of other languages

- Leads to unrealistic recommendations, as most SLTs have bilingual children on their case load

- Encourages an inappropriate English-only approach which leads to language loss

LOTE inclusion in BEST development

- LOTE inclusion was planned from the start
- Presenting challenges:
  - Interpreters often have limited experience of working directly with speech and language therapists
  - Interpreters may have limited experience of working directly with children
  - Speech and language therapists may need to change interaction style
  - Assessment must consider pragmatics, such as the child perceiving the nursery/Early Years Setting/School as an English-only environment
  - Misperception of an 'English dominant' child

LOTE versions of BEST

- Languages Other Than English (LOTE) are available:
  - **https://research.ncl.ac.uk/best/bilingual-best/**
  - **Pakistani heritage languages**
    - **Mirpuri**
    - **Punjabi**
    - **Urdu**
  - **Bangladeshi heritage languages**
    - **Sylheti**
    - **Standard Bangla**
  - **Polish**
  - **Italian – Coming soon**

Cost of BEST

- **All documentation is FREE to download**, from **https://research.ncl.ac.uk/best/** including:
  - Manual
  - Eligibility Assessment
  - Therapy booklet
  - Homework packs for each session
  - Fidelity checklist
- You will need to put together a **toy box** (equipment is listed on the website)
- **BEST accredited training** is available via Course Beetle
  - https://coursebeetle.co.uk/courses/best/

Working alongside interpreters

"Too many languages"

"Not practical"

"He needs English for school"

"It's too expensive"

"We want to boost the whole class language and vocabulary"

All of these views are discriminatory and/or illegal

- See:
- RCSLT Clinical Guidance (2018)
- HCPC Standards of Proficiency (2024)
- Equality Act 2010
- United Nations and Human Rights (2020)
- And this morning's slides!
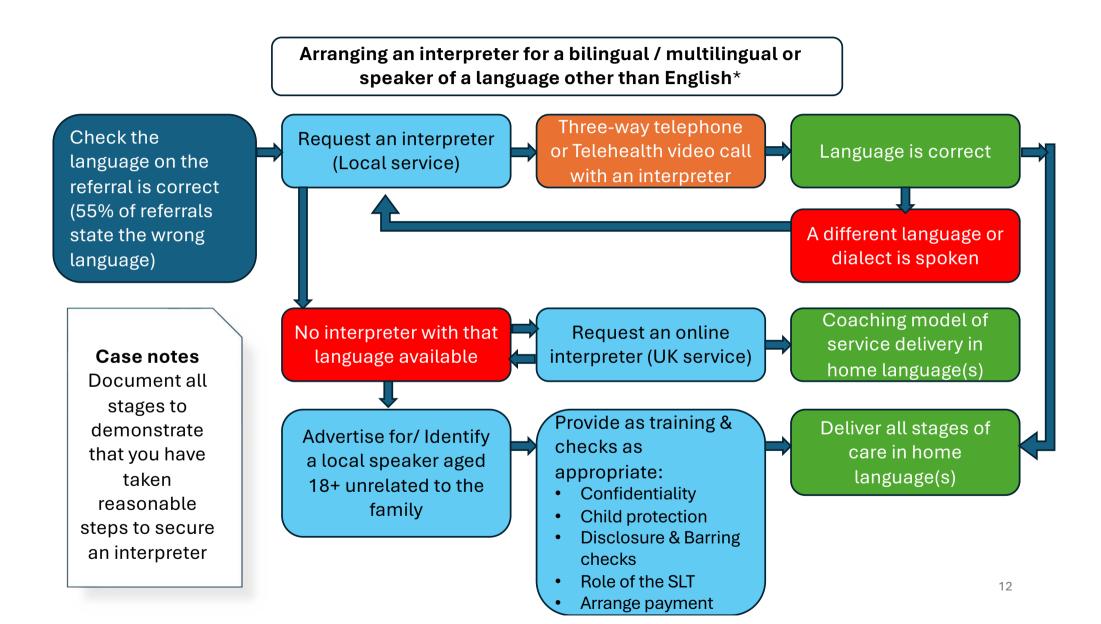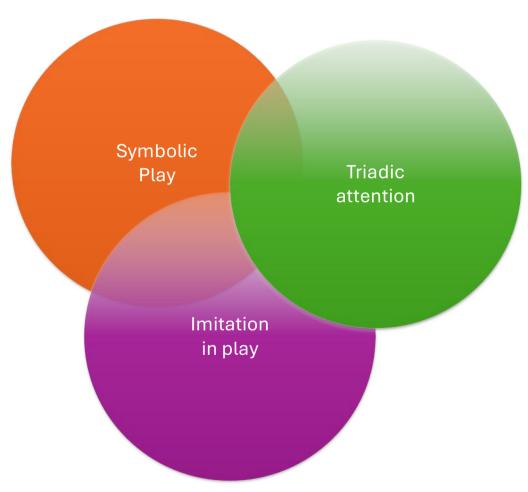
Practical delivery of BEST in LOTE

- **Small groups** are more enjoyable and practical as the pragmatics of playing with other children is a helpful driver of language usage

- Children can receive **one-to-one** as an alterative if not enough children are from the same speech community

- **Bilingual classroom assistants** and **Early Years workers** may be trained to deliver BEST

- **Recruit and train** local adult speakers as assistants

Arranging an interpreter for a bilingual / multilingual or speaker of a language other than English*

Check the language on the referral is correct (55% of referrals state the wrong language)

Request an interpreter (Local service)

Three-way telephone or Telehealth video call with an interpreter

Language is correct

A different language or dialect is spoken

No interpreter with that language available

Request an online interpreter (UK service)

Coaching model of service delivery in home language(s)

Advertise for/ Identify a local speaker aged 18+ unrelated to the family

Provide as training & checks as appropriate:
- Confidentiality
- Child protection
- Disclosure & Barring checks
- Role of the SLT
- Arrange payment

Deliver all stages of care in home language(s)

Case notes
Document all stages to demonstrate that you have taken reasonable steps to secure an interpreter
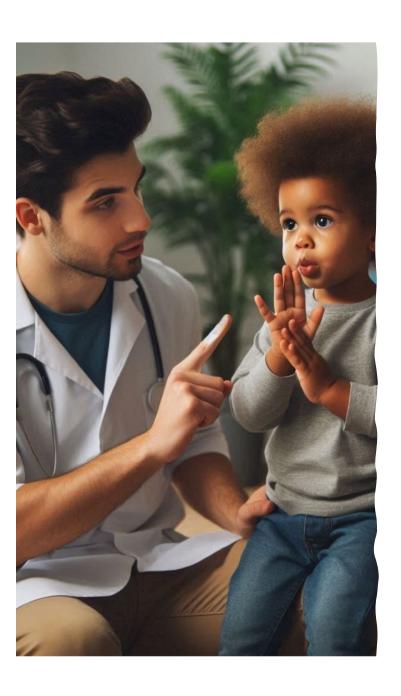
Key components of the BEST approach

Eligibility

- Has the three areas, as demonstrated by the *Eligibility Criteria*
- No recognisable words (in either / any language)
- Single words heard in clinic or reported as home or setting
- 2–3-word utterances with a maximum of 2 clause elements
  - AGENT + ACTION / Subject + Verb, OR
  - ACTION + PATIENT / Verb + Object
- For LOTE children, this may be:
  - In **home language**
  - In **English/ Additional Language**
  - **Across both/all languages** during code switched utterances, which are bilingual children's longest and most complex utterances (Pert & Letts, 2006)

Eligibility

- LOTE children with 3-4+ phrase utterances in home language are not eligible

- They have acquired their home language ('cracked the code') and so have the cognitive and linguistic machinery to acquire any additional language, given sufficient exposure and pragmatic need

- Bilingual Children who have satisfactory home language skills *cannot* have a Language Difficulty or Developmental Language Disorder (DLD) *in English only*

- **Language difficulties and DLD will be observed in both/all languages** (RCSLT, 2018)

- **Not being able to speak English is not a language disorder**
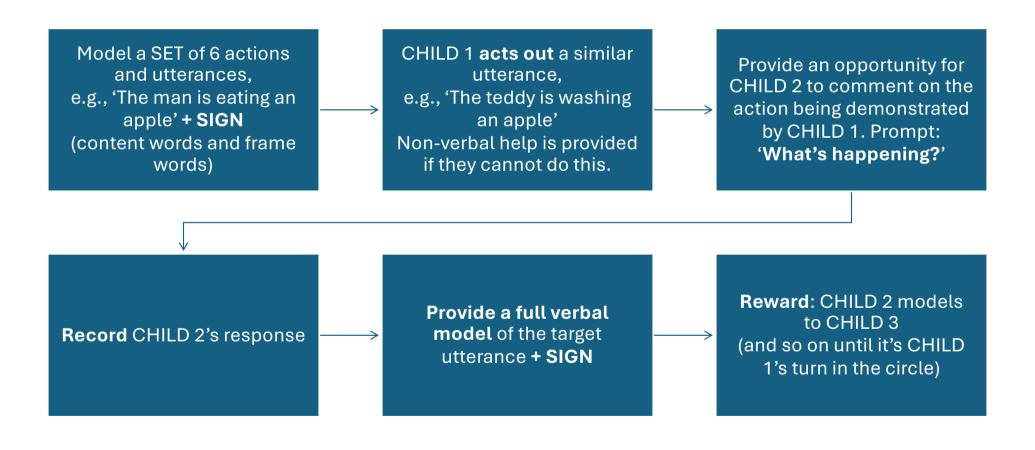
Pragmatic driver of language acquisition

- The need to communicate with others

- Situations where communication is necessary or motivating

- Children use intention-reading:

- What does this adult want me to pay attention to? – in order to help map language

  - (Ambridge & Lieven, 2011, pp. 18-19)

Zone of Proximal Development (ZPD)

- "… that children can achieve more and perform at higher levels when provided with help than on their own" (Miller, 2011, p. 120)

- Therapy must therefore help, rather than test the child

- BEST achieves this by providing a **verbal** and **sign model** of each utterance, remodelling every time a child produces an incomplete utterance

- This is why **no reinforcer games are required** – the toys are in the ZPD

- This is why **praise gets in the way** – it adds superfluous language, *interfering* with the language mapping process

Essential therapy steps in BEST

Model a SET of 6 actions and utterances, e.g., 'The man is eating an apple' **+ SIGN** (content words and frame words)

→

CHILD 1 **acts out** a similar utterance, e.g., 'The teddy is washing an apple' Non-verbal help is provided if they cannot do this.

→

Provide an opportunity for CHILD 2 to comment on the action being demonstrated by CHILD 1. Prompt: **'What's happening?'**

Record CHILD 2's response

→

Provide a full verbal model of the target utterance **+ SIGN**

→

Reward: CHILD 2 models to CHILD 3 (and so on until it's CHILD 1's turn in the circle)

Signing

- Shown to be a key 'active ingredient' for language therapy:

  "There was a significant effect of BEST with Sign at outcome...and at follow-up when compared with TAU (Treatment As Usual)"

  (Trebacz et al., 2024, p.10)

Signing: a self-cue and bridge to spoken language

- Parents were occasionally concerned that their child would learn sig instead of using spoken language.

- These findings show that children used sign as a bridge or indicator of the presence of a word or morpheme to self-cue, quickly dropping sign in favour of spoken language on mastery of the utterances.

- Paget Gorman Signed Speech (PGSS) was originally selected due to the simple morpheme signs

- MAKATON is also suitable, with signs available on the BEST website and on the Course Beetle resources.
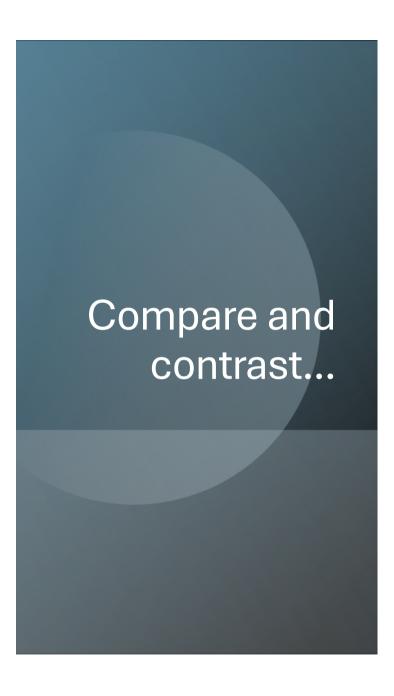
Content Words Signs (Makaton):

Vocabulary

- Children with no demonstrable comprehension of the vocabulary used in the programme had acquired the vocabulary by the end of the programme

- Learning items in context allowed mapping of their function in relation to Thematic roles

- Vocabulary items are named for the child if they don't spontaneously name then when taking the toys out of the cloth drawstring bags (**INPUT**)

- Mapping of '**AGENT**' or the effect of the '**ACTION**' on the object as a '**PATIENT**' led to acquisition without specific vocabulary teaching or pre-work
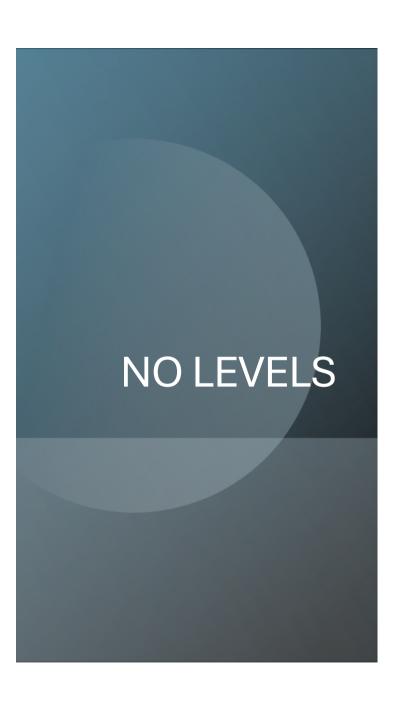
Compare and contrast...

- In each set, an AGENT, ACTION or PATIENT is compared or contrasted

- This helps children to map the language they hear, and the signs they see onto the correct object or action

- **INPUT STAGE** or *listen and look*: The X is jumping
    - The **baby** is jumping
    - The **woman/lady** is jumping
    - The **boy** is jumping
    - The **girl** is jumping
    - The **teddy** is jumping
    - The **man** is jumping

Compare and contrast...

- **OUTPUT STAGE**: Opportunity to describe the toys:
- For example, The X is walking:
  - The **man** is walking
  - The **woman/lady** is walking
  - The **boy** is walking
  - The **girl** is walking
  - The **teddy** is walking
- NO REQUIREMENT FOR SPEECH
- NEVER REQUIRE IMITATION/COPYING
- NO FORCED ALTERNATIVES, OR 'YOU SAY IT!'
- THE CHILD JOINS IN WHEN THEY ARE READY – THEY CONSTRUCT THEIR OWN UTTERANCES
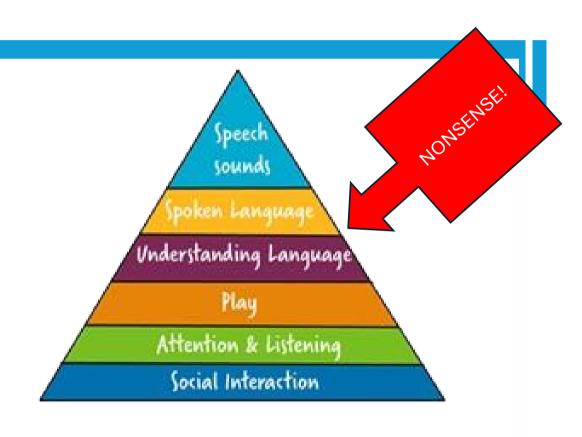
NO LEVELS

- Children will often attempt an utterance because it's motivating, fun or different

- Concepts of 'difficulty' are in the mind of the adult, based on ICWs and are a DEVELOPMENTAL APPROACH

- For example, a child who could not construct:
  - 'The girl is hugging the horse' was able to say
  - 'He's pouring the juice into the shoe'

- This strongly suggests that language 'stages' are not as defined as thought, that comprehension does not precede expression, and that **we do not have to establish comprehension prior to working on expression**

NO LEVELS: Not evidence-based

- BEST includes **NO COMPREHENSION** work, only **INPUT**

- BEST includes **NO TESTING** during therapy sessions

- BEST does **NOT require prior vocabulary,** or comprehension level prior to working on expression

- BEST does **NOT** require the child to speak **UNTIL THEY ARE READY –** **Spontaneous utterances ONLY**

- **Pyramid models** are still promoted and yet **have been** **debunked** **(Morgan & Dipper, 2018)**

NONSENSE!

Speech sounds
Spoken Language
Understanding Language
Play
Attention & Listening
Social Interaction

How can BEST achieve similar results in LOTE?

The surface language is not important (other than the child needs to hear an adult, complete model)

It is the mapping of the universal underlying Thematic roles of AGENT, PATIENT and ACTIONS onto the situation that is crucial

The child then projects a **syntactic and grammatical frame**

Content words are then inserted into that frame

Thematic roles

- The cat is ALWAYS the 'chaser' or 'doer'

- The mouse is ALWAYS the 'chased' or affected

- BUT with SVO models:

- The cat chased the mouse';
CAT = Subject

- 'The mouse was chased by the cat';
MOUSE = Subject

(Cariyon, 2025)

Linguistic concepts underpinning BEST: Terminology
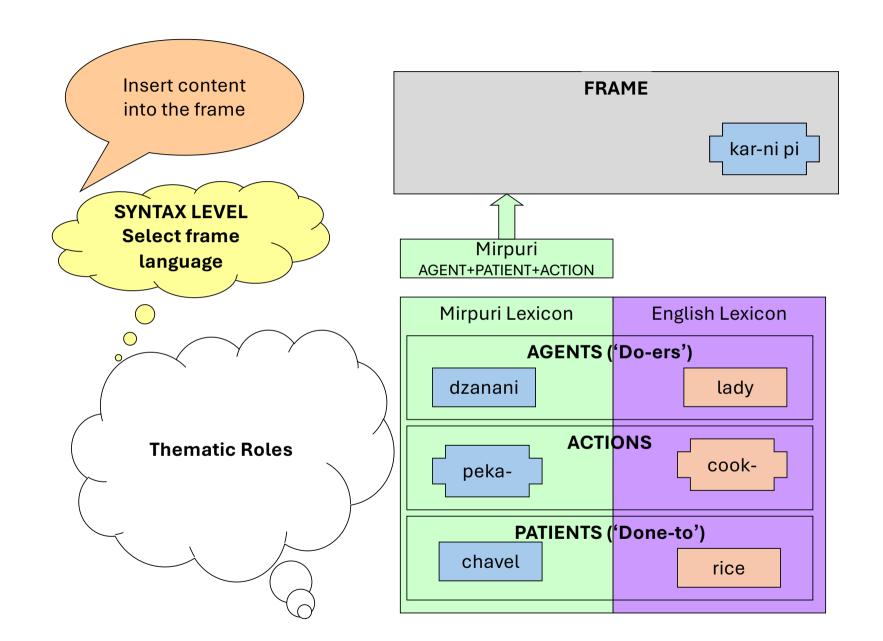
Thematic roles

Semantic categories:
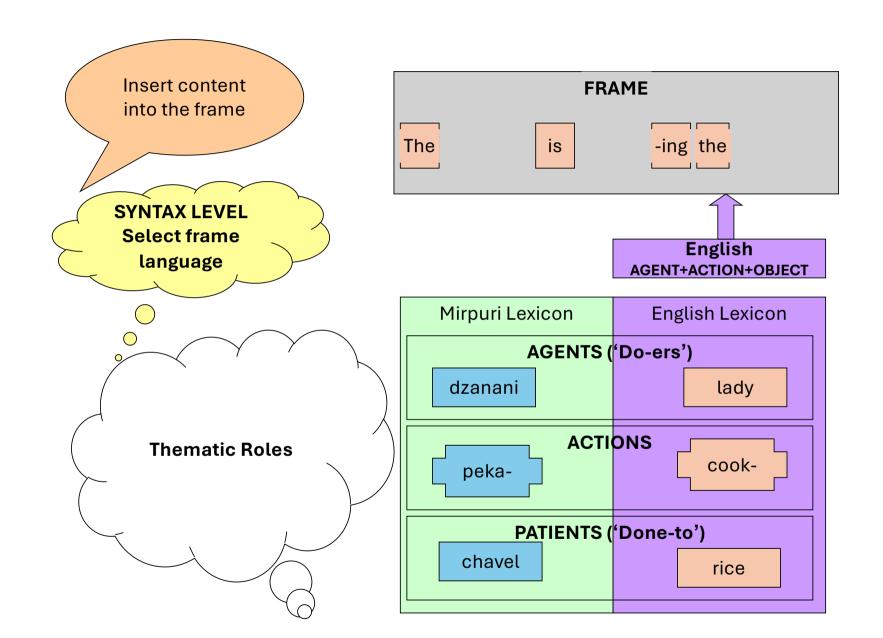
- Agent, Action and Patient – this is why we use toys and real objects, not just pictures
- Locative

Frame / slot

The girl is being chased by the sheep – roles don't change but the surface structure does.

More complex is not necessarily 'harder' for the children – introduces analogy

Insert content into the frame

SYNTAX LEVEL
Select frame language

Thematic Roles

FRAME

kar-ni pi

Mirpuri
AGENT+PATIENT+ACTION

Mirpuri Lexicon	English Lexicon
AGENTS ('Do-ers')	
dzanani	lady
ACTIONS	
peka-	cook-
PATIENTS ('Done-to')	
chavel	rice

29

Content and Frame: Which is more important?

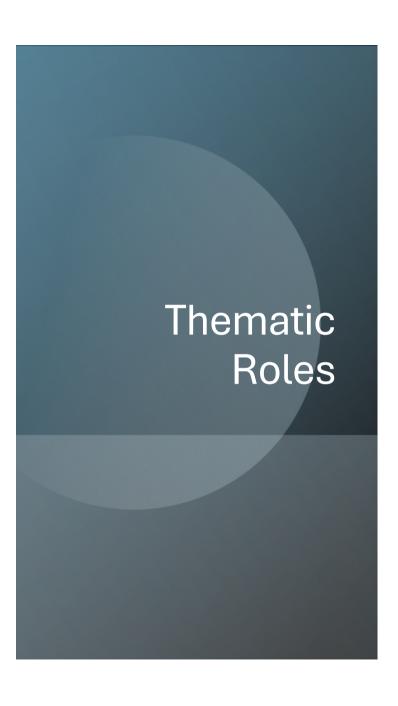BEST highlights the frame to the child using a variety of strategies

BEST employs signing to highlight function words

BEST does not require the child to know all the content words as hearing the words on the frame will help the child to learn the content words

Thematic Roles

AGENT: the initiator of some action, capable of acting with volition:

- Man, Lady/Woman, Boy, Girl, Baby, Teddy

ACTION

PATIENT

LOCATIVE/LOCATION

BENEFACTIVE/BENEFICIARY

(Adapted from Saeed, 2003)

Thematic Roles

AGENT

ACTION: the verb which may require:

- an AGENT only – intransitive;
  e.g. The man is sitting
- An AGENT and a PATIENT – monotranisitve;
  e.g. The man is eating a banana
- An AGENT, PATIENT and LOCATIVE;
  e.g. The man is putting a cup on the table
- An AGENT, PATIENT and BENEFACTIVE – ditransitive;
  e.g. The boy is throwing the banana to the man

PATIENT

LOCATIVE/LOCATION

BENEFACTIVE/BENEFICIARY

Thematic Roles

AGENT

ACTION

PATIENT:

the entity undergoing the effect of some action, often undergoing some change in state: These could be people or objects.

LOCATIVE/LOCATION

BENEFACTIVE/BENEFICIARY

Thematic Roles

AGENT

ACTION

PATIENT

LOCATIVE/LOCATION:

The place in which something is situated or takes place, preposition and place, e.g. 'on the table'
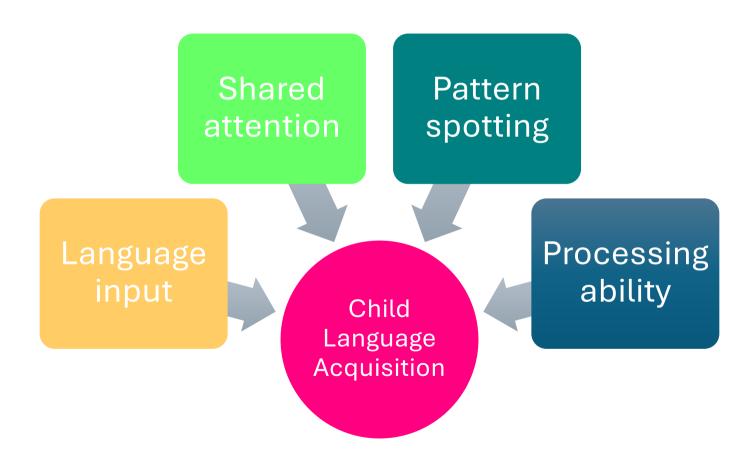
BENEFACTIVE/BENEFICIARY

Thematic Roles

AGENT

ACTION

PATIENT

LOCATIVE/LOCATION
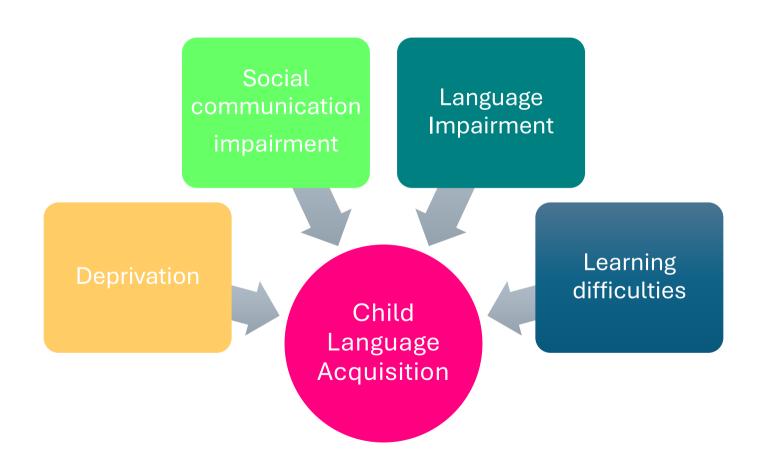
BENEFACTIVE/BENEFICIARY:

the entity for whose benefit the action was performed, e.g. The girl is giving the banana to the baby (Saeed, 2003: 148-180)
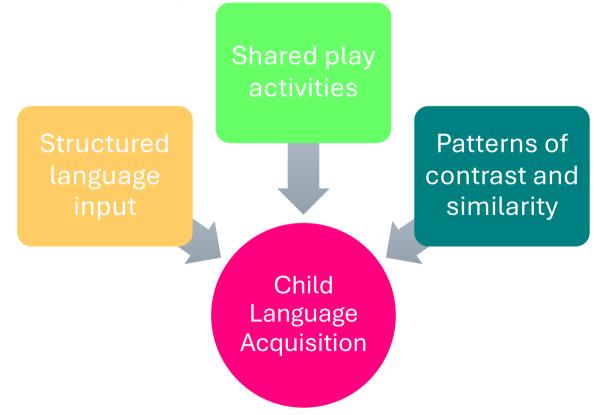
What are the necessary components of language learning?

What factors may disrupt language learning?

How does BEST facilitate language learning?

Shared play activities

Structured language input

Patterns of contrast and similarity

Child Language Acquisition

Why group delivery?

- Pragmatics
- Peer modelling
- Naturalistic play
- No need for 'Good looking', 'Good sitting' or 'Good listening'

Microsoft Co-Pilot (2025)
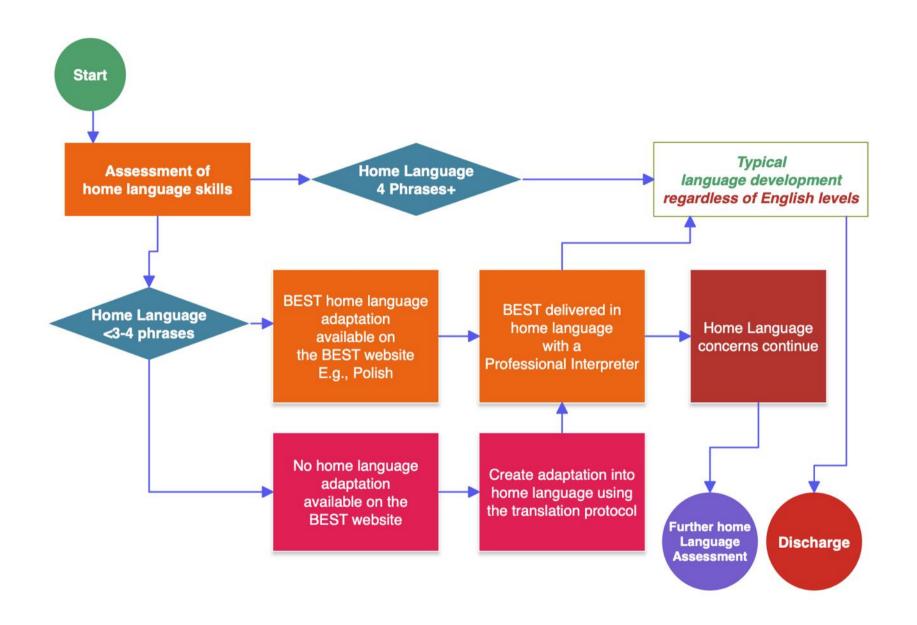
Providing therapy for LOTE children

When setting up BEST groups in English, you **must** provide an equivalent service in home language involving professional interpreters, regardless of cost (and to omit this is direct discrimination)

You **must not** place children who speak LOTE into an English BEST group (as this will risk their home language skills)

Home language adaptations are currently available for LOTE languages commonly spoken in the UK

Adaptations for other languages **may be created** using the Translation Protocol (2003)

```
Start
  │
  ▼
┌─────────────────┐                                    ┌──────────────────┐      ┌────────────────────────────┐
│ Assessment of   │ ────────────▶  ◆ Home Language ◆ ──────────────────────▶ │ Typical                    │
│ home language   │                 4 Phrases+                                │ language development       │
│ skills          │                                                          │ regardless of English levels│
└─────────────────┘                                                          └────────────────────────────┘
  │
  ▼
◆ Home Language ◆ ──▶ ┌──────────────┐     ┌──────────────┐     ┌──────────────┐
  <3-4 phrases         │ BEST home    │ ──▶ │ BEST         │ ──▶ │ Home Language│
                       │ language     │     │ delivered in │     │ concerns     │
                       │ adaptation   │     │ home language│     │ continue     │
                       │ available on │     │ with a       │     └──────────────┘
                       │ the BEST     │     │ Professional │
                       │ website      │     │ Interpreter  │
                       │ E.g., Polish │     └──────────────┘
                       └──────────────┘
                       ┌──────────────┐     ┌──────────────┐
                       │ No home      │ ──▶ │ Create       │
                       │ language     │     │ adaptation   │
                       │ adaptation   │     │ into home    │
                       │ available on │     │ language using│
                       │ the BEST     │     │ the translation│
                       │ website      │     │ protocol     │
                       └──────────────┘     └──────────────┘

                       Further home          Discharge
                       Language
                       Assessment
```
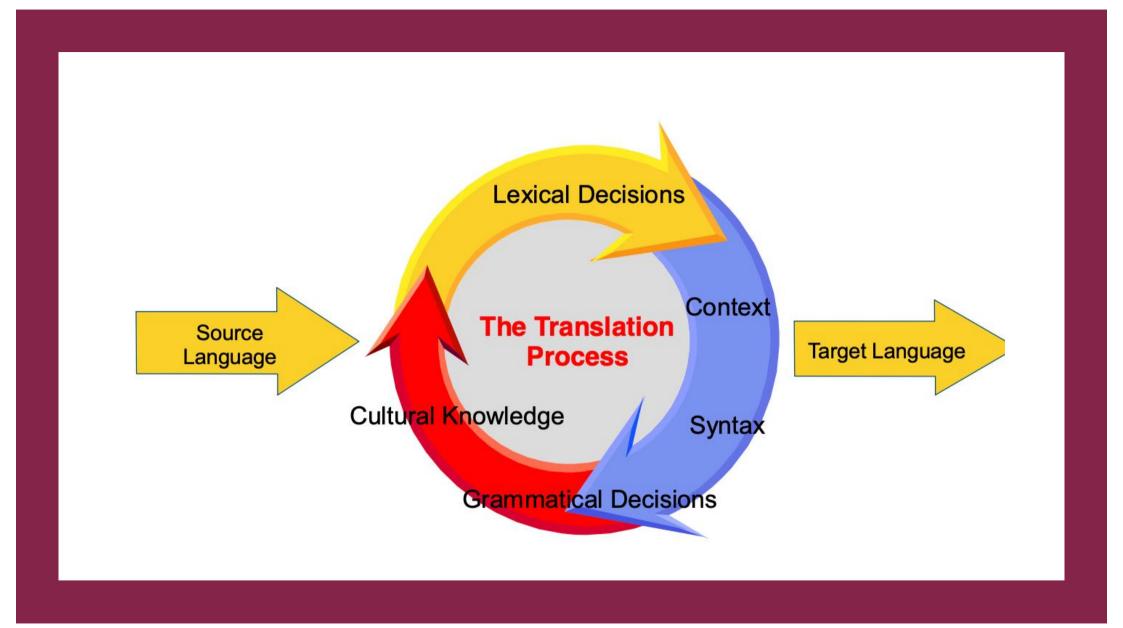
How did we develop BEST LOTE versions (and can you do the same?)

Translation Protocol (Pert & Stow, 2003)

Contrasting languages

Example: Mirpuri BEST adaptation

	Mirpuri	English
Morphology	Gender agreements on: – Present progressive – Auxiliary verbs – No determiners	– No gender agreement – Pronouns – Determiners
Syntax: Phrase order	Subject + Object + Verb (SOV)	Subject + Verb + Object (SVO)
Thematic roles	AGENT PATIENT ACTION	AGENT ACTION PATIENT

Example: Mirpuri BEST adaptation

- Mirpuri is a pre-literate language and so has **no agreed script** (Stow & Dodd, 2003)
- Target utterances are **transliterated** using standard English orthography (not IPA) so it is accessible by both the SLT, and Interpreter.
- There may be minor variations in how speakers choose to transliterate, but we found that most people are able to read the script without difficulty

Example: Mirpuri BEST adaptation

Therapy session 1 - SET C: Agent + Action + Patient

INPUT	Set C1 - Say the following set for the children
1.	The man is eating an apple
	Jana seb kar-na pi-ja
	man apple eat-ing+male is+male
2.	The man is eating an orange
	Jana malta kar-na pi-ja
	man orange eat-ing+male is+male
3.	The man is eating a banana
	Jana kela kar-na pi-ja
	man banana eat-ing+male is+male
4.	The man is eating a carrot
	Jana gajar kar-na pi-ja
	man carrot eat-ing+male is+male
5.	The man is eating a lolly
	Jana lolly kar-na pi-ja
	man lolly eat-ing+male is+male
6.	The teddy is eating a banana
	Guda kela kar-na pi-ja
	teddy banana eat-ing+male is+male

Accredited training on BEST

- Training for Speech and Language Therapists who plan to implement BEST in their therapy and/or supervise delivery in Early Years settings and schools

- Training for Early Years staff

- https://coursebeetle.co.uk/courses/best/

Feedback

- **Feedback on training**:
  - Average **9.36**/10
  - Range 8-10
  - N=25 (Last group where feedback is available)

Bilingualism is an advantage!

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