

## **Background**

Pupil X is a British born Chinese boy. He is 10 years old and is currently attending primary 4 in an unit for autism. Before moving to the unit, Pupil X had spent his first year of primary education in an MLD establishment. He was transferred as he was considered to be far more cognitively able than the main group of children in his class.

Pupil X first received the diagnosis of Autism in his pre-school year. At that stage, pupil X had considerable delay in his first language; he had some basic receptive understanding of Mandarin and expressive language in one or two word phrases but did not always use language to indicate his needs. When spoken to, pupil X would demonstrate echolalia speech. He would commentate on everything he did.

Pupil X social communication was considerably impaired; he had difficulty in using non-verbal communication in the nursery. His interaction with his peers was non-existent, even though he would tolerate them being around him. Play in the nursery for pupil X was mostly solitary, repetitive and rigid. He also displayed some sensory issues; he was unable to cope with loud noise and had a tendency to touch and feel objects within his reach.

## **Language profile**

### **Mandarin**

Pupil X is bilingual in Chinese/Mandarin and English. His English language level is Early Acquisition. He has also been attending Chinese Community School since the age of 6. He has acquired literacy skills in Chinese and performed consistently well in his yearly exams to achieve top marks.

At home, both parents are fluent Mandarin speakers and this is the language used amongst family members. Pupil X will respond to verbal instruction in Mandarin. He can follow instructions within familiar situations. He can now use more simultaneous language in his speech. He is able to recount recent news without prompts and offer reasoning to certain questions. With more abstract language, he can still rely on situational clues. Pupil X has excellent visual and auditory memory. He has been able to utilise these skills effectively when acquiring new vocabulary and terminology in Chinese. He can copy adult modelled language and retain and recall learned phrases appropriately in context. Despite the progress in his receptive and expressive language, pupil X still has difficulty in initiating communication or play with other native speakers. Play can still be restricted and immature therefore, other children are reluctant to include him.

## **English**

In English, Pupil X has developed excellent labelling vocabulary and language concepts. He tends to be passive in class and does not cope well in group discussion or participation. With the introduction of new concepts, he requires the support of pictorial prompts and teaching of associated keywords in order to follow the teaching input. Pupil demonstrates unusual ability in decoding English text since the start of primary one; he has been able to read texts without the knowledge of phonics. Despite his decoding ability, he lacks comprehension of text and inability to extract inferential meaning from it. EAL teacher has been able to capitalise his first language skills to support the development of his understanding of English. He has responded well and benefited from the additional input.

Recently, the Educational Psychologist collaborated with the EAL teacher to assess pupil X's progress and language development, and it was agreed that he is appropriately placed and his main barrier to curriculum is still his ability to simulate language due to his ASD profile.

### **Main barriers to language acquisition:**

- Limited English support at home;
- Lack of confidence and ability to initiate interaction with other children to further develop social communication skills;
- Limited life experience due to family isolation and lack of extended family support;
- Difficulty in the comprehension of inferential language;

Overall, pupil X has made considerable progress in his language acquisition in both Mandarin and English. However, his language development is beginning to show signs of levelling out which seems to be typical of most EAL pupils with ASD.