



TECHNICAL REPORT

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Overview

The *Diagnostic Evaluation of Language Variation™* (DELV™) family of assessments is unique because it is the only language assessment series that accounts for the diversity in American English *and* identifies children who are at risk for or show signs of a speech or language disorder. DELV™ has been designed to reduce the over-inclusion of children in special education due to linguistic and cultural differences rather than actual speech and language disorders.

- The DELV™ *Screening Test* consists of two parts: Part I identifies children who speak Mainstream American English (MAE) and those who speak a variation from MAE. Part II screens children to determine their risk for a language disorder.
- The DELV™ *Criterion Referenced* edition is the only comprehensive language test with items that neutralize the effect that variations from MAE may have on a child's test performance.

DELV™ Screening Test

The DELV™ *Screening Test* is an individually administered test that can be used to identify children who are speaking a variation from Mainstream American English (MAE) and children who are at risk for a language disorder. Administration time is 15 to 20 minutes.

Scores Reported

The DELV™ *Screening Test* provides two types of criterion referenced scores: Degree of Language Variation and Degree of Risk for a Language Disorder.

Part I Language Variation Status (Age Range: 4.0-12.11 years)

The pattern of the child's responses classifies the child as speaking a Strong Variation from Mainstream American English, Some Variation From Mainstream American English, or Mainstream American English.

Knowledge of the child's language variation status enables you to:

1. Select the most appropriate diagnostic tests to administer to the child.

2. Identify whether responses on other tests are appropriate for the variety of American English spoken by the child.
3. Select the most appropriate treatment goals for the child who is identified on a diagnostic test as needing clinical intervention.
4. Determine if there is a match or mismatch between the child's primary variety of American English and MAE.

Part II Diagnostic Risk Status (Age Range: 4.0-9.11 years)

The Diagnostic Risk Status section distinguishes children who are developing language normally from those who are at risk for a language disorder.

Diagnostic Risk Status and Interpretation

Diagnostic Risk Status	Interpretation
Lowest risk for a language disorder	No follow-up is necessary
Low to medium risk for a language disorder	Clinician needs to use clinical judgment regarding further testing
Medium to high risk for a language disorder	Administer the DELV™ <i>Criterion Referenced</i> edition or Norm Referenced edition (title tentative, available 2005)
High risk for a language disorder	Administer the DELV™ <i>Criterion Referenced</i> edition or Norm Referenced edition (title tentative, available 2005)

Standardization Sample

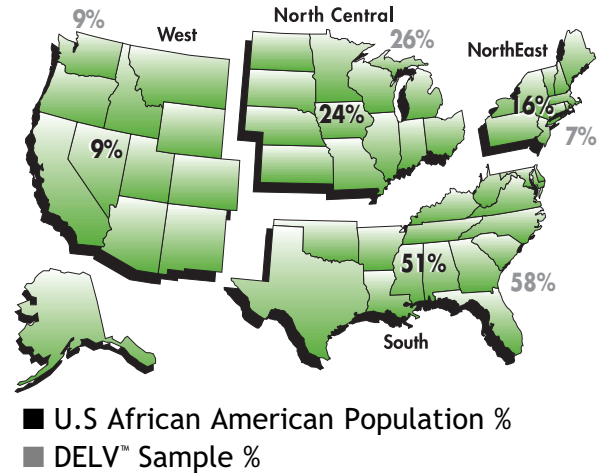
The DELV™ *Screening Test* standardization sample included 1,258 children (51% male and 49% female) in non-clinical (typically developing) and clinical (language disordered) groups. Since the variety of American English of most interest to the researchers was African American English (AAE), the non-clinical sample was stratified by region to represent as closely as possible the general African American population of the United States. The stratification was based on the 2000 U.S. Census Current Population Survey for children ages 4-12 years. As the density of AAE linguistic features is greatest at lower socioeconomic levels (Stockman, 1999; Washington and Craig, 1998) ¹, this population was over-sampled to ensure the most representative sample of AAE speakers. The race/ethnicity of the MAE speakers included all races and ethnicities.

Data from an additional sample of 80 children were also collected. These children spoke other varieties of American English, including Appalachian English, Cajun English, Southern English, and Spanish Influenced English. Their responses were generally similar to the larger non-clinical AAE and MAE samples, with the exception of the Spanish Influenced English-speaking group (i.e., some responses corresponded to those given by the larger non-clinical group and some did not).

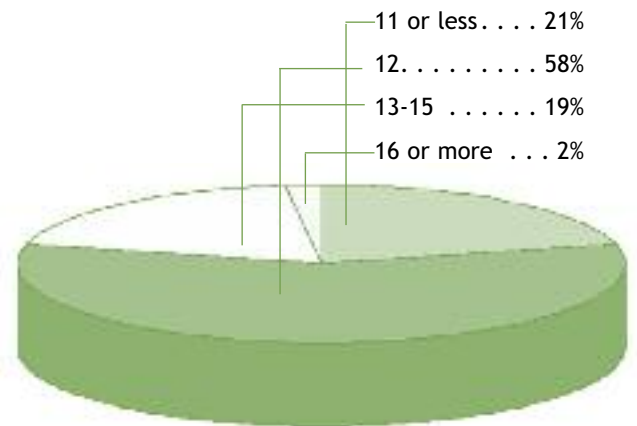
Race/Ethnicity Breakout

African American	White	Hispanic	Other
65%	27%	7%	1%

Region Demographics



Parent Years of Education



DELV™ Criterion Referenced

The DELV™ *Criterion Referenced* edition is an individually administered test for determining whether a child ages 4 through 9 years has a language disorder or delay. Administration time is approximately 45 to 50 minutes.

Unique Features

DELV™ *Criterion Referenced* is appropriate for use with any child who speaks English as his or her first and primary language, no matter which variety, or dialect, of English is spoken. DELV™ assesses aspects of language that are considered to be *universal* or *non-contrastive*. These non-contrastive features are those that overlap with or are shared by different varieties of American English.

DELV™ *Criterion Referenced* is one of only a few tests that include an entire domain of actual pragmatics test items. Unlike traditional language tests, DELV™ includes picture stimuli and elicitation techniques that are effective at gathering relevant information about the child's pragmatic language skills.

Domains

DELV™ *Criterion Referenced* assesses four areas (domains) of language: syntax, pragmatics, semantics, and phonology.

Items	Areas Assessed
Syntax <ul style="list-style-type: none"> • <i>Wh</i>-Questions • Passive Sentences • Articles 	<ul style="list-style-type: none"> • understanding of <i>wh</i>-movement (rearranging word order [i.e., subject-verb-object] to answer <i>wh</i>-questions) • understanding of passive sentence construction, including movement of linguistic elements (e.g., subject, object) and hidden/implied properties in passive sentence construction • expressive use of articles
Pragmatics <ul style="list-style-type: none"> • Communicative Role-Taking • Short Narratives • Question Asking 	<ul style="list-style-type: none"> • ability to take another person's perspective in different situations • ability to tell stories with linguistic devices (cohesion) to link sentences together • ability to ask the right questions using "theory of mind" explanations of a character's actions in the picture
Semantics <ul style="list-style-type: none"> • Verb Contrast • Preposition Contrast • Fast Mapping 	<ul style="list-style-type: none"> • lexical organization and retrieval of verbs • lexical organization and retrieval of prepositions • ability to learn new words
Phonology	<ul style="list-style-type: none"> • ability to produce consonant blends that are common to most varieties of English spoken as a first language

Scores Reported

DELV™ *Criterion Referenced* provides scores for each domain that can be compared to age-based criterion referenced cut scores. These cut scores place the child's performance in one of the following categories: Weakness, Low Average, Average, or Strength.

Interpreting Overall Domains

- Intervention for a language disorder is recommended if there is a
 - **Weakness** in any two or more of the four domains; or a

- **Weakness** in any one of the four domains plus **Low Average** in any two or more domains.

- Intervention for a phonological/articulation disorder is recommended if there is a **Weakness** in the Phonology Domain;
- Otherwise, no disorder exists or the results are inconclusive.

Standardization Sample

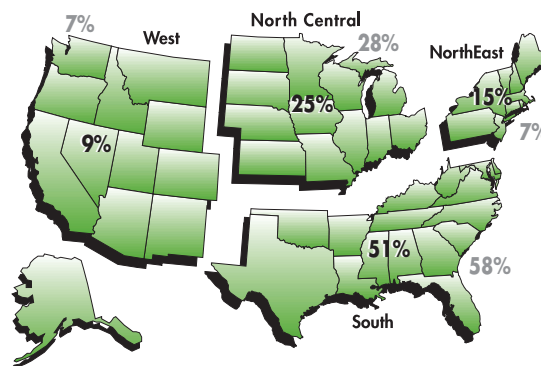
The DELV™ *Criterion Referenced* was standardized on 1,014 (50% male and 50% female) children in non-clinical and clinical (language disordered) groups. Similar to the DELV™ *Screening Test* standardization sample, the Criterion Referenced non-clinical sample was stratified by region to represent as closely as possible the general African American population of the United States, based on the 2000 U.S. Census Current Population Survey for children ages 4-9 years. The race/ ethnicity of the MAE speakers included African American, Caucasian, Hispanic, Asian, and Native American children.

The DELV™ *Criterion Referenced* was also administered to the same sample of 80 children speaking other varieties of American English that was described in the DELV™ *Screening Test* standardization sample section. The responses of the Appalachian, Cajun, and Southern English-speaking groups were similar to those of the larger non-clinical AAE and MAE samples. The responses obtained from the Spanish Influenced English-speaking group were inconsistent, suggesting that the DELV™ *Criterion Referenced* may not be appropriate for this population.

Race/Ethnicity Breakout

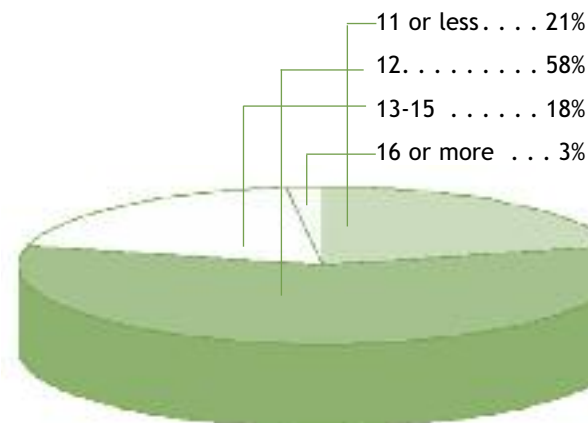
African American	White	Hispanic	Other
65%	28%	6%	1%

Region Demographics



- U.S African American Population %
- DELV™ Sample %

Parent Years of Education



Summary

The DELV™ Assessment series has been designed to reduce the over-inclusion of children in special education due to linguistic and cultural differences rather than actual speech and language disorders.

The DELV™ Screening Test

- Is effective in distinguishing normal language development from language disorders or delay in all children whose primary (first) language is English, and

- Can identify children who speak Mainstream American English or variations from Mainstream American English.

The DELV™ *Criterion Referenced* is a comprehensive assessment of children's language development that is appropriate for all children who speak English as their first language, regardless of the dialect of English they speak.

¹Stockman, I.J. (1999). *Semantic development of African American children*. In O.L. Taylor & L.B. Leonard (Eds.), *Language acquisition across North America: Cross-cultural and cross-linguistic perspectives*. San Diego, CA: Singular Press; Washington, J.A., & Craig, H.K. (1988). *Socioeconomic status and gender influences on children's dialectal variations*. *Journal of Speech, Language, and Hearing Research*, 41, 618-626.

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