Strategies two - three year olds acquiring Sinhala use to achieve communicative functions

The developmental norms for communication are defined by statistically valid data gathered from studying typically developing children speaking a specific language. These norms define the baseline for diagnosing atypical development. A literature review reveals that Sinhala has very few studies on child language. This gap in the knowledge base has negative implications in providing an equitable speech and language therapy service for Sinhala speaking children. This study is of a preliminary nature, exploring themes of communication development in children acquiring Sinhala.

The objective was to explore the linguistic and non-linguistic strategies 2-3 year children acquiring Sinhala use to achieve communicative functions. The focus of the study is the production of language, not comprehension. The influences of gender, age, region, bilingual and monolingual environments were considered.

The participants in this case study were 8 children with typical communication development (2-3 year age range) acquiring Sinhala, and their parents. The children were matched for age, gender, region and lingual environment. Each child was visited at three intervals over a 4-6 ½ month period. The data was collected through the observation of children in naturalistic settings, parent questionnaires and focus group discussions. The data was recorded using written notes, audio and video recording.

The data identified 9 communicative functions used by this age range. Both linguistic and non-linguistic strategies used by the 8 children were identified. The influence of regional dialects, topography, cultural beliefs and political environments were identified. The children exposed to a bilingual environment displayed use of English vocabulary with Sinhala patterns of syntax.

Age dependant variations were also observed. No evidence was obtained that differences in gender, urban, rural settings, bilingual and monolingual environments affected the rate of acquisition. Implications for an equitable therapy service provision and the directions for future research are discussed.