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Children with Autism in the Somali Population: Exploring the inter-relatedness of the Somali immigrant and refugee experience navigating Speech-Language Pathology resources

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I. Introduction


In a study conducted by the Minnesota Department of Health in 2008, the most common services needed by Somali families was first housing, followed by speech therapy second (Minnesota Department of Health, 2014).

This literature review brings together information from 9 impact areas to create a better understanding of overlapping impacts on Somali children. For the purposes of this study, the term "children" refers to individuals under the age of 18 years old. The clinical implications of these findings help to build an inclusive assessment tool that documents all the factors that need to be taken into consideration in determining the need for language intervention in Somali refugee/immigrant school aged children. The RIOT, also known as review records, interview all involved parties, observe the child in several settings, and test the child, was created by Dr. Li-Rong Lilly Cheng. The RIOT is used to structure these findings. Dr. Cheng is a world-renowned Speech Language Pathologist whose area of expertise is multicultural/multilingual language assessment and intervention (Cheng, L.L., 2007).

II. Methods

This literature review brings together information from 9 impact areas to create a better understanding of overlapping impacts on Somali children. For the purposes of this study, the term "children" refers to individuals under the age of 18 years old. The clinical implications of these findings help to build an inclusive assessment tool that documents all the factors that need to be taken into consideration in determining the need for language intervention in Somali refugee/immigrant school aged children. The RIOT, also known as review records, interview all involved parties, observe the child in several settings, and test the child, was created by Dr. Li-Rong Lilly Cheng. The RIOT is used to structure these findings. Dr. Cheng is a world-renowned Speech Language Pathologist whose area of expertise is multicultural/multilingual language assessment and intervention (Cheng, L.L., 2007).

III. Results

"Somali children with ASD were significantly more likely to have an intellectual disability than children with ASD in all other racial and ethnic groups" (Hewitt, A., Gulaid, A., Hamre, K., Esler, A., Punkyo, J, Reichle, J., & Reiff, M., 2013). Despite the heightened awareness and growing concern surrounding early diagnosis there is still not sufficient literature and research.

There are no studies that exist examining the Somali Immigrant and Refugee Population and their assimilation to AAC Speech Technology for Autism Spectrum Disorder. It is recommended that future research be dedicated to this and to the Minnesota population specifically.

The data shows that "Somali children with ASD were significantly more likely to have an intellectual disability than children with ASD in all other racial and ethnic groups" (Hewitt, A., Gulaid, A., Hamre, K., Esler, A., Punkyo, J, Reichle, J., & Reiff, M., 2013). Despite the heightened awareness and growing concern surrounding early diagnosis there is still not sufficient literature and research.

The national average is one child in 88 are on the autism spectrum according to the C.D.C.’s Center on Birth Defects and Developmental Disabilities (McNeil, 2013). Despite the heightened awareness and growing concern surrounding early diagnosis, there is still not sufficient literature and research.

IV. Conclusions

There are no studies that exist examining the Somali Immigrant and Refugee Population and their assimilation to AAC Speech Technology for Autism Spectrum Disorder. It is recommended that future research be dedicated to this and to the Minnesota population specifically. Mental health services, maternal services, nutrition programs in schools, and family therapy can alleviate lots of the symptoms the Somali population is experiencing.

These community services can help target areas that the population is most concerned about. Unfortunately, deprivations in refugee camp is a difficult factor to control since it often happened before they arrive in the United States. Language interference and language acquisition can be targeted through Speech Therapy Services.

Figure 1 – Dr. Li-Rong Lilly Cheng’s Riot Model of 9 impact areas to create a better understanding of overlapping impacts on Somali children

RIOT Model

Mental Health Issues

Familial conflict

Deprivations in refugee camp

Culture shock

Poor nutrition and maternal health

Language interference learning second language

Language acquisition

Differing views on beliefs and health practices

A combination of two or more factors