

**International Clinical Phonetics and Linguistics Association  
2016 Abstract Proposal**

**ABSTRACT FOR INCLUSION IN THE FOLLOWING PANEL**

**Panel name: Internationalization of the Intelligibility in Context Scale**

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**Application of the Intelligibility in Context Scale to multilingual children in Fiji**

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**Background:** The Intelligibility in Context Scale (ICS) is a seven-item caregiver report questionnaire for screening children's speech intelligibility. Originally developed in English, the ICS has been translated into more than 60 languages including the two main community languages of Fiji (Standard Fijian and Fiji Hindi). Fiji is a multilingual nation with limited services and assessment tools for people with communication disability. This paper will describe the application of the ICS to typically developing multilingual Fiji children to determine whether the ICS is a valid screening tool of speech intelligibility for children living in Fiji.

**Method:** The caregivers of seventy-five children in years 1 and 4 attending a mainstream urban Fiji primary school participated. The 75 children included 48 males and 27 females. The children ranged in age from 63 to 125 months (5;3–10;5 years). The children were multilingual and spoke an average of 2.9 languages (range=1-5). The majority of students spoke 3 languages ( $n=40$ , 54.1%). The main language spoken by the students in the home was Standard Fijian ( $n=32$ , 42.7%), English ( $n=16$ , 21.3%), Fiji Hindi ( $n=15$ , 20.0%), and Fijian dialect ( $n=12$ , 16.0%).

The ICS was included in a caregiver survey as part of a study to describe Fiji children's multilingual speech, language, and literacy skills. The ICS was presented twice. Firstly, caregivers were asked to complete the scale with reference to their child's speech intelligibility in English (ICS-E), and secondly with reference to their child's home language (ICS-HL). In both scales the caregivers rated their child's intelligibility on a five-point scale (*always, usually, sometimes, rarely, never*) across seven conversational partners. Sixty-five caregivers completed the ICS-E (86.7% response rate) and 55 the ICS-HL (93.2% response rate). In addition, 52 caregivers completed both the ICS-E and ICS-HL (94.5% response rate).

**Results:** Consistent with findings from other countries, Fiji caregivers were more likely to report that they *always* understand their child (English: 92.3%, HL: 92.7%) compared with other groups: immediate family (English: 69.2%, HL: 81.8%), extended family (English: 56.9%; HL: 76.4%), the child's friends (English: 72.3%, HL: 74.5%), acquaintances (English: 49.2%, HL: 63.6%), the child's teacher (English: 64.6%, HL: 61.8%), and strangers (English: 49.2%, HL: 60.0%). The ICS-E had a mean score of 4.5 ( $n=65$ ,  $Md=4.6$ ,  $SD=0.5$ ), whilst the ICS-HL was 4.6 ( $n=55$ ,  $Md=4.9$ ,  $SD=0.6$ ). There was no significant difference between scores for year 1 and year 4 on the ICS-E (Y1:  $Md=4.6$ , Y4:  $Md=4.6$ ) or the ICS-HL (Y1:  $Md=4.9$ , Y4:  $Md=4.8$ ). For the 52 caregivers who completed both the ICS-E and ICS-HL, Wilcoxon Signed Ranks Test revealed a statistically significant difference between the median scores ( $n=52$ , ICS-E:  $Md=4.6$ , ICS-HL:  $Md=4.9$ ). Both the ICS-E and ICS-HL had similar and good internal consistency.

**Conclusion:** The Fiji application of the ICS revealed good internal consistency. The Fiji ICS appears to be a useful tool with comparative results to other international studies despite showing higher scores due to the older age of children in this study.