



**ASSESSMENT OF BILINGUALISM IN SPEECH THERAPY PRACTICE:
DIAGNOSTIC TECHNIQUES, LIMITATIONS AND PROFESSIONAL READINESS
OF SPEECH THERAPISTS IN BOSNIA AND HERZEGOVINA**

**PROCJENA BILINGVIZMA U LOGOPEDSKOJ PRAKSI: DIJAGNOSTIČKE
TEHNIKE, OGRANIČENJA I PROFESIONALNA SPREMNOST LOGOPEDA U
BOSNI I HERCEGOVINI**

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Original Scientific Article

Received: 20/10/2025

Accepted: 12/12/2025

ABSTRACT

The aim of this research was to examine the current state of speech therapy work in the context of bilingualism in Bosnia and Herzegovina, with a special emphasis on diagnostic techniques, assessment measures for bilingual speakers, and the preparedness of speech therapists for such assessments. The research was conducted through a survey entitled "The State of Speech Therapy Practice in the Context of Bilingualism in Bosnia and Herzegovina", which was answered by 61 speech therapists from Bosnia and Herzegovina. The results show that speech therapists most often rely on interviews with family members to collect information about the language abilities of bilingual individuals, while informal assessment of both languages is the dominant assessment measure. The most common problem in working with bilingual speakers is the lack of developmental norms and standardized assessment measures for other languages. The results obtained indicate the need for further professional development of speech therapists, as well as the necessity of improving diagnostic approaches and treatments in order to characterize speech therapy practice in this specific context.

Key words: bilingualism, diagnostic techniques, professional readiness, speech therapists.

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SAŽETAK

Cilj ovog istraživanja bio je ispitati trenutno stanje logopedskog rada u kontekstu bilingvizma u Bosni i Hercegovini, s posebnim naglaskom na dijagnostične tehnike, mjere procjene dvojezičnih govornika te pripremljenost logopeda za takve procjene. Istraživanje je provedeno putem ankete pod nazivom „Stanje logopedске prakse u kontekstu bilingvizma na području Bosne i Hercegovine“ na koju je odgovorio 61 logoped iz Bosne i Hercegovine. Rezultati pokazuju da se logopedi najčešće oslanjaju na intervju s članovima porodice kako bi prikupili informacije o jezičkim sposobnostima dvojezičnih pojedinaca, dok je neformalna procjena oba jezika dominantna mjera procjene. Kao najčešći problem u radu sa dvojezičnim govornicima istaknut je nedostatak razvojnih normi i standardiziranih mjera procjene za druge jezike. Dobiveni rezultati ukazuju na potrebu daljnjeg stručnog usavršavanja logopeda, kao i na nužnost unapređenja dijagnostičkih pristupa i tretmana s ciljem oznaživanja logopedске prakse u ovom specifičnom kontekstu.

Ključne riječi: bilingvizam, dijagnostičke tehnike, profesionalna spremnost, logopedi

INTRODUCTION

Bilingualism is defined as the use of at least two languages, either at the individual level or within a particular speech community (Moradi, 2014), and it most commonly develops during early childhood under the influence of various cultural and social factors (Pichler, Lee & Lillo-Martin, 2014). Grosjean (2010) states that bilingual individuals are “those who need and use two or more languages (or dialects) in their everyday lives.” Research indicates that the majority of the global population uses two or more languages (Marian & Shook, 2012). Wei (2000) notes that it is possible that one in three people is bilingual or multilingual. Modern trends in migration, both temporary and permanent, have led to increased linguistic diversity. In this context, it is estimated that half of the world's population, if not more, is bilingual (Grosjean, 2010; as cited in Detić & Kovačević, 2020). When considering the classification of bilingual individuals, it is crucial to categorize them based on linguistic, cognitive, developmental, and social aspects (Moradi, 2014). The number of bilingual children in the world has been significantly increasing (Gagarina, Klop, Tsimpli, & Walter, 2016). A child can be a simultaneous or sequential speaker of two languages (D’haeseleer, Daelman, Altinkamis, Smet, Rccckaert, & Van Lierde, 2021). Simultaneous bilingualism refers to individuals who acquire two languages at the same time, i.e., learn both from birth (Lew-Williams & Fernald, 2007, 2010; as cited in Byers-Heinlein & Lew-Williams, 2013). On the other hand, early sequential bilingualism refers to situations where a child first masters one language and then, usually before entering kindergarten or school, begins acquiring the second language (D’haeseleer et al., 2021). In this context, it is extremely important to assess language abilities in both languages spoken by the child to reduce the risk of misdiagnosing a language disorder. Assessing language in bilingual children poses a particular challenge, as the number of standardized diagnostic tools is very limited, and for many languages, such instruments do not exist at all. Due to structural differences between languages, assessment

results are not always comparable, and language disorders may manifest differently in each language used by the child (Gagarina et al., 2016). The aim of this research is to examine the current state of speech therapy practice in the context of bilingualism in Bosnia and Herzegovina. In line with the main research goal, the following sub-objectives were defined:

1. To identify diagnostic techniques and measures in the assessment of bilingual speakers
2. To determine the preparedness of speech therapists in the assessment and the limitations they face when assessing bilingual speakers

Based on the research objectives, the following hypotheses were formulated:

H1: When assessing the language status of bilingual speakers, speech therapists most frequently use a combination of formal and informal assessment measures.

H2: Speech therapists with a negative perception of their preparedness encounter a greater number of difficulties during the assessment of bilingual speakers.

MATERIALS AND METHODS

Participants

The study included speech therapists (N=61) from Bosnia and Herzegovina. Participants were from both entities of Bosnia and Herzegovina. A total of 67.2% of participants had up to 5 years of work experience, 6.6% had between 6 and 10 years, 21.3% had between 11 and 20 years, and 4.9% had more than 20 years of experience. In terms of workplace, the majority of speech therapists participating in the study were employed in schools (36.1%), followed by healthcare (21.3%), and private practice (16.4%). In the social protection system, 13.1% of speech therapists were employed, while 8.2% worked in preschool education. Another 4.9% reported working in a different sector.

Material

The research was conducted via an online questionnaire titled "*The State of Speech Therapy Practice in the Context of Bilingualism in Bosnia and Herzegovina.*" The questionnaire was tailored to the BaH context and based on instruments previously used by Kritikos (2003) and Detić & Kovačević (2018). Respondents answered using "yes"/"no" options, multiple-choice questions, and Likert scales.

Data Analysis

Statistical analysis was performed using IBM SPSS 21.0, applying descriptive and non-parametric statistical methods. Statistical significance was considered at $p < 0.05$.

RESULTS AND DISCUSSION

Diagnostic Techniques and Measures in the Assessment of Bilingual Speakers

Out of 61 respondents, 42 (68.9%) indicated that they had encountered bilingual speakers during their professional careers. The remaining 19 respondents (31.1%) stated that they had not yet had the opportunity to work with bilingual speakers.

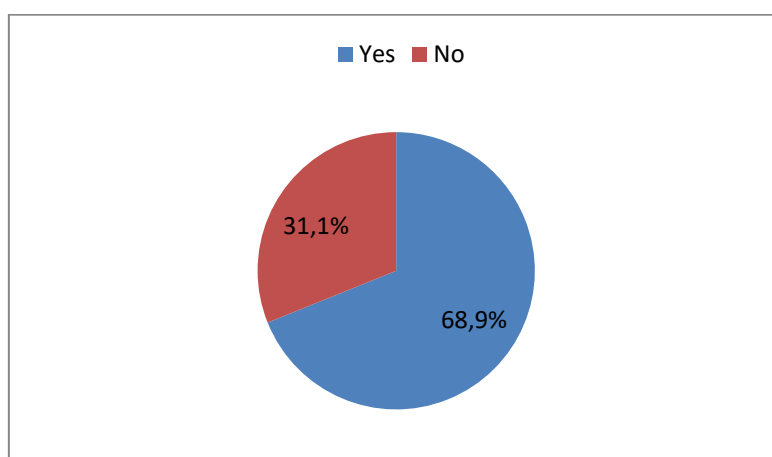


Figure 1. Distribution of Respondents Based on Experience Working with Bilingual Speakers

Regarding the frequency of conducting speech-language assessments with bilingual speakers, 35 speech therapists (57.4%) reported performing such assessments rarely. 20 speech therapists (32.8%) stated that they do not conduct them at all, while 5 respondents (8.2%) said they perform assessments occasionally. Only 1 respondent (1.6%) indicated that they frequently conduct assessments of bilingual speakers.

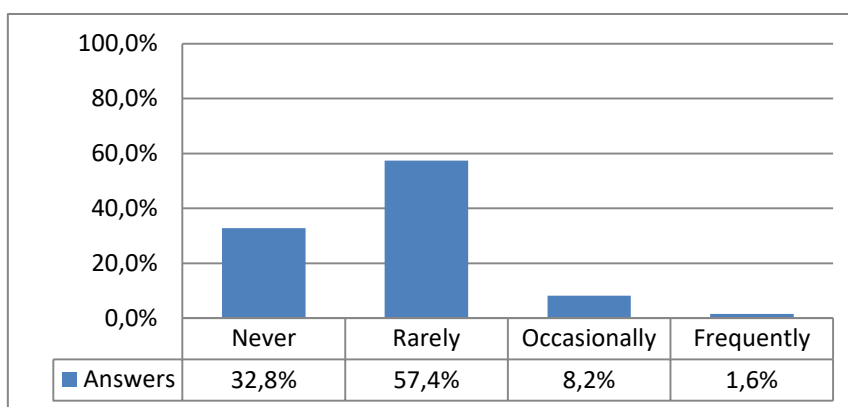


Figure 2. Frequency of Speech-Language Assessments Conducted with Bilingual Speakers

Table 1. demonstrates the distribution of respondents based on techniques used in language assessment of bilingual speakers. Respondents could select more than one answer to this question. The most commonly used technique was interviewing family members about the

child's language abilities, cited by 34 respondents (55.7%). Information gathering from preschool teachers or classroom teachers was used by 31 speech therapists (50.8%). Observing the child in a preschool group or school classroom was reported by 19 respondents (31.1%), while 18 (29.5%) stated they conduct a comprehensive assessment in both of the child's languages. 10 speech therapists (16.4%) use interviews focused on cultural characteristics of the individual, and the same number observe the child in their everyday environment (e.g., at home). Assessment techniques focused more on measuring language processing than language knowledge in Bosnian/Croatian/Serbian were used by 5 respondents (8.2%). The least used technique was involving an interpreter in the assessment process, selected by only 3 speech therapists (4.9%).

Table 1. Distribution of Respondents Based on Techniques Used in Language Assessment of Bilingual Speakers

Variable	N	%
Interviewing the individual's family about their language abilities	34	55,7
Collecting information from preschool or school teachers	31	50,8
Observing the child in a preschool group or classroom	19	31,1
Comprehensive assessment in both languages	18	29,5
Interview on individual's cultural characteristics	10	16,4
Observation in everyday environments	10	16,4
Focus on language processing more than language knowledge in B/C/S	5	8,2
Use of interpreter assistance	3	4,9

Table 2. demonstrates number of techniques used by speech therapists in the assessment of bilingual speakers. 1 therapist (1.6%) reported using six different techniques, while 4 therapists (6.5%) reported using five techniques. 4 techniques were used by 11 therapists (18%), 3 techniques by 9 therapists (14.8%), which is the same number as those who used two techniques. The largest group of therapists, 13 (21.3%), reported using only one technique. 14 respondents (23%) did not answer this question, which may suggest that they use alternative methods or do not assess bilingual individuals in their professional work.

Table 2. Number of Techniques Used by Speech Therapists in the Assessment of Bilingual Speakers

Number of Techniques	N	%
Six techniques	1	1,6
Five techniques	4	6,5
Four techniques	11	18
Three techniques	9	14,8
Two techniques	9	14,8
One technique	13	21,3
No response	14	23

Table 3. demonstrates distribution of respondents based on assessment measures used in evaluating bilingual speakers. Multiple responses were allowed. The most common measure was informal assessment of both languages, used by 26 speech therapists (42.5%). A combination of formal and informal measures was used by 20 respondents (32.8%). Standardized assessment of only Bosnian/Croatian/Serbian language was used by 16 respondents (26.2%). 14 speech therapists (23%) reported collecting and analyzing language samples from both languages. Standardized assessments of both languages and informal assessments of Bosnian/Croatian/Serbian were used by 9 respondents (14.8%) each. Language samples collected and analyzed in only the mother tongue were used by 6 therapists (9.8%). Less commonly used measures include informal assessment in only the mother tongue and samples in only Bosnian/Croatian/Serbian, both used by 5 respondents (8.2%). The least used was dynamic assessment combined with standardized instruments, used by only one respondent (1.6%).

Table 3. Distribution of Respondents Based on Assessment Measures Used in Evaluating Bilingual Speakers

Variable	N	%
Informal assessment of both languages	26	42,5
Combination of formal and informal assessment	20	32,8
Standardized assessment of B/C/S only	16	26,2
Language samples (collection & analysis) of both languages	14	23
Informal assessment of B/C/S only	9	14,8
Standardized assessment of both languages	9	14,8
Informal assessment of mother tongue only	5	8,2
Language samples (collection & analysis) of mother tongue only	6	9,8
Language samples (collection & analysis) of B/C/S only	5	8,2
Dynamic assessment combined with standardized measures	1	1,6

B - Bosnian; C - Croatian; S - Serbian

Table 4. demonstrates number of assessment measures used by speech therapists in assessing bilingual clients. The results show that only 1 respondent (1.6%) uses all ten assessment measures listed in the questionnaire. 2 speech therapists (3.2%) reported using five different measures, while four measures were used by 8 speech therapists (13.1%). 10 therapists (16.3%) use three measures, and 16 therapists (26.2%) use two measures. 11 therapists (18%) reported using only one assessment measure. 13 respondents (21.3%) did not answer this question.

Table 4. Number of Assessment Measures Used by Speech Therapists in Assessing Bilingual Clients

Reponses	N	%
Ten measures used	1	1,6
Five measures used	2	3,2
Four measures used	8	13,1
Three measures used	10	16,3
Two measures used	16	26,2
One measure used	11	18
No measures used	13	21,3

Table 5. demonstrates distribution of respondents based on the tests most frequently used by speech therapists in assessing bilingual speakers. Participants were offered a list of standardized tests and could select multiple options used in their practice. The most commonly used test was the Articulation Test (Salihović & Junuzović-Žunić, 2009), selected by 38 respondents (62.3%). The Dyslexia Assessment Test (Duranović & Mrkonjić, 2013) was used by 23 (37.7%). The Peabody Picture Vocabulary Test – PPVT-III-HR was cited by 16 therapists (26.2%), and the Test for Reception of Grammar – TROG-2:HR by 12 (19.7%). The Pre-literacy Skills Assessment Test – predČiP was used by 11 respondents (18%). 10 therapists (16.4%) used the Communication Development Scales – Koralje and the Reynell Developmental Language Scales – RLJG. In the “Other” category, 3 therapists (4.9%) indicated using tests such as the PLS-5 Preschool Language Scales 5th Edition and the Diagnostic Kit (Speech, Language, predČiP) by Ilona Poshokova.

Table 5. Distribution of Respondents Based on the Tests Most Frequently Used by Speech Therapists in Assessing Bilingual Speakers

Variable	N	%
Articulation Test (Salihović & Junuzović-Žunić, 2009)	38	62,3
Dyslexia Assessment (Duranović & Mrkonjić, 2013)	23	37,7
Peabody Picture Vocabulary Test – PPVT-III-HR	16	26,2
Test for Reception of Grammar – TROG-2:HR	12	19,7
Pre-literacy Assessment – predČiP	11	18
Reynell Developmental Language Scales – RLJG	10	16,4
Communication Development Scales – Koralje	10	16,4
Other	3	4,9

Table 6. demonstrates number of tests used by speech therapists in assessing bilingual clients. 2 therapists (3.2%) selected seven tests, and another 2 (3.2%) selected five tests used for assessing bilingual speakers. 11 therapists (18%) use four tests, 8 (13.1%) use three, and 15 therapists (24.5%) use two tests. 9 therapists (14.7%) reported using just one test. 14 therapists (23%) did not select any tests, which could indicate that they either do not assess bilingual clients in practice or rely on alternative evaluation methods.

Table 6. Number of Tests Used by Speech Therapists in Assessing Bilingual Clients

Number of tests used	N	%
Seven tests	2	3,2
Five tests	2	3,2
Four tests	11	18
Three tests	8	13,1
Two tests	15	24,5
One test	9	14,7
No response	14	23

Preparedness of Speech Therapists and Limitations in Assessing Bilingual Speakers

With regard to the academic year of graduation in speech therapy, 33 respondents (54.1%) graduated between 2016 and 2020. Twelve (19.7%) completed their studies between 2006 and 2010. 6 respondents (9.8%) graduated between 2001 and 2005, and another 6 (9.8%) between 2011 and 2015. 2 respondents (3.3%) graduated between 1995 and 2000, and 2 (3.3%) graduated in 2021 or later. Detailed data are presented in Table 7.

Table 7. Distribution of Respondents Based on the Year of Graduation

Variable	N	%
Between 2016. and 2020.	33	54,1
Between 2006. and 2010.	12	19,7
Between 2011. and 2015.	6	9,8
Between 2001. and 2005.	6	9,8
Between 1995. and 2000.	2	3,3
In 2021. or later	2	3,3
Total	61	100

Table 8. shows the distribution of respondents based on whether they received education on bilingualism during their studies. A total of 53 respondents (86.9%) reported having attended lectures and courses on bilingualism, while the remaining 8 respondents (13.1%) stated that they had not received such education.

Table 8. Distribution of Respondents Regarding Education on Bilingualism During Studies

Variable	N	%
Yes	53	86,9
No	8	13,1
Total	61	100

Table 9. presents the distribution of respondents based on participation in lectures or workshops on bilingualism after graduation. In response to whether they had participated in such training, 9 respondents (14.8%) answered yes, while 52 (85.2%) reported not having taken part in such forms of professional development.

Table 9. Participation in Lectures or Workshops on Bilingualism After Graduation

Variable	N	%
Yes	9	14,8
No	52	85,2
Total	61	100

Table 10. shows the distribution of respondents based on their self-reported preparedness to assess the language status of individuals whose language they do not speak, with interpreter support. 28 respondents (45.9%) stated they feel partially prepared, 18 (29.5%) said they feel unprepared, and 15 respondents (24.6%) reported feeling prepared for such assessments.

Table 10. Distribution of Respondents Based on Preparedness to Assess a Person's Language Status When They Do Not Speak the Language, With the Help of an Interpreter

Variable	N	%
Partially prepared	28	45,9
Unprepared	18	29,5
Prepared	15	24,6
Total	61	100

Table 11. demonstrates distribution of respondents in relation to the presence of specific problems in the assessment of bilingual speakers. This question allowed multiple answer options. Among the listed challenges, the largest number of speech therapists, 41 (67.2%), identified the lack of developmental norms and standardized assessment measures for other languages as a problem. The second most commonly reported problem was difficulty accessing bilingual speech therapists who speak the target language, experienced by 37 speech therapists (60.7%). Distinguishing between language difficulties and language differences was also highlighted as a problem, reported by 33 speech therapists (54.1%). Insufficient knowledge about the process of second language acquisition was identified by 31 speech therapists (50.8%) as an obstacle in the assessment process. Difficulties in accessing interpreters who speak the individual's language were noted by 21 speech therapists (34.4%), while 18 speech therapists (29.5%) cited a lack of knowledge about the individual's culture as a problem. Three speech therapists (4.9%) identified lack of time for conducting the assessment, scoring, and interpretation as a problem.

Table 11. Distribution of Respondents Based on Problems Encountered in the Assessment of Bilingual Speakers

Variable	N	%
Lack of norms and standardized tools for other languages	41	67,2
Difficulty accessing bilingual speech therapists	37	60,7
Lack of knowledge about second language acquisition	31	50,8
Distinguishing between language difficulties and language differences	33	54,1
Interpreter availability issues	21	34,4
Lack of knowledge about individual's culture	18	29,5
Lack of time for assessment/scoring and interpretation	3	4,9

Table 12. demonstrates number of problems speech therapists encounter when assessing bilingual clients. Only one respondent (1.6%) reported experiencing all seven listed problems. 5 therapists (8.2%) reported six problems, and 8 (13.1%) reported five. Four problems were cited by 11 respondents (18%), while three problems were reported by 13 respondents (21.3%). 9 respondents (14.7%) encountered two problems, and the largest number – 14 therapists (23%) – reported experiencing just one problem in practice when assessing bilingual speakers.

Table 12. Number of Problems Speech Therapists Encounter When Assessing Bilingual Clients

Number of problems	N	%
Seven problems encountered	1	1,6
Six problems encountered	5	8,2
Five problems encountered	8	13,1
Four problems encountered	11	18
Three problems encountered	13	21,3
Two problems encountered	9	14,7
One problem encountered	14	23

Table 13. shows the correlation between the preparedness of speech therapists who participated in the survey to assess bilingual speakers with the help of an interpreter, and the number of problems they face during assessment. The analysis showed a correlation coefficient of 0.154, suggesting that there is no statistically significant relationship between the two variables.

Table 13. Correlation between the preparedness of speech therapists and the number of problems they encounter

		Preparedness of speech therapists	Number of problems
Preparedness of speech therapists	Spearman's correlation	1	,133
	Significance		,154
Number of problems	Spearman's correlation	,133	1
	Significance	,154	

Table 14. demonstrates distribution of respondents in relation to opinions on who should conduct the assessment of bilingual speakers. 26 speech therapists (42.6%) expressed the opinion that such assessments should be conducted by speech therapists who speak the target language. 21 (34.4%) believed that the assessment should be the result of collaboration among various professionals, while 14 respondents (23%) believed that speech therapists should conduct assessments of bilingual clients regardless of their own language proficiency.

Table 14. Distribution of respondents in relation to opinions on who should conduct the assessment of bilingual speakers

Variable	N	%
Speech therapists who speak the target language	26	42,6
Professionals should collaborate	21	34,4
Speech therapists	14	23
Total	61	100,0

The results of this study indicate that speech therapists in Bosnia and Herzegovina most frequently highlight the lack of developmental norms and standardized assessment tools for other languages (67.2%) as the main issue when assessing bilingual speakers. This observation is not unique; similar challenges have been recognized in other contexts as well. In a study conducted in Croatia, Detić (2018) reports that speech therapists struggle to find appropriate tools for assessing bilingual speakers; specifically, 83% of speech therapists believe that the biggest problem is the lack of developmental norms and standardized assessment tools for other languages. In a study conducted in the United States, when asked what most prevents them from performing dynamic assessment of bilingual clients, the majority of speech therapists responded that it was lack of time (36%), followed by unfamiliarity with assessment procedures (19%), insufficient training (22%), while one-third said they had no difficulties. In another similar study conducted in the U.S. by Guiberson and Atkins (2012), the most frequently cited issue was not speaking the child's language (81% of respondents), followed by a lack of knowledge about developmental norms for that language (75%), and a lack of adequate assessment instruments (74%). The findings from both Guiberson and Atkins (2012) and Detić (2018) suggest that speech therapists in both the Balkans and the U.S. face similar problems when working with bilingual clients. This again highlights the opportunity for international training and collaboration that could help speech therapists from different countries address nearly identical issues in their practice. Regarding

the techniques used in the assessment of bilingual speakers, results indicate that most speech therapists in BiH apply methods involving collaboration with the child's immediate environment. Specifically, 55.7% of surveyed therapists reported using family interviews as a method for assessing language abilities, while 50.8% collect information from preschool or school teachers, and 31.3% rely on direct observation of the child in preschool or school settings. Similar patterns have been recorded in the Republic of Croatia, where 58% of speech therapists use family interviews as the primary assessment technique, and 52.7% gather information from educational staff (Detić, 2018). This comparison suggests a shared approach in both countries, which can be explained by the similar level of education in bilingualism and the use of comparable educational materials during speech therapy training. These findings are further supported by international research. According to a study by Arias and Friberg (2017) in the U.S., 89% of speech therapists gather information from teachers, 87% focus on assessing general language abilities rather than just English proficiency, 74% conduct parent interviews, and 87% combine information from both teachers and caregivers. Research conducted in Bremen, Germany, by Scharff-Rethfeldt (2019) showed that 92.8% of speech therapists include caregiver input regarding sociocultural factors and language use, while 50% rely on data collected by third parties such as preschool teachers. Based on these results, clear parallels can be drawn between the assessment techniques used by speech therapists in BiH and those applied internationally, including in the U.S. and Germany. An interesting insight is provided by data on the frequency of interpreter use in working with bilingual clients. In BiH, only 4.9% of speech therapists report using interpreters during assessment, while in Croatia, 9.5% of speech therapists report relying on interpreter assistance. Research by Arias and Friberg (2017) shows that 33% of speech therapists in the United States use interpreter services. Even higher rates were recorded in the U.S. state of Colorado, where, according to Guiberson and Atkins (2012), as many as 60% of speech therapists use interpreter services when working with bilingual clients. A study conducted in Bremen, Germany, found that 35.7% of speech therapists used interpreters in bilingual assessments (Scharff-Rethfeldt, 2019). Considering that speech therapists in BiH work with fewer bilingual clients overall, this low number is not surprising. The study also analyzed the problems faced by speech therapists when assessing bilingual clients, particularly in the context of using interpreters during assessments. The correlation analysis results showed no statistically significant relationship between speech therapists' negative perception of their preparedness and the number of problems they encounter when assessing bilingual speakers. Based on these findings, hypothesis (H₂), which predicted a significant correlation between these variables, is rejected. In BiH, the most commonly used assessment measure is informal evaluation of both languages, employed by 42.5% of speech therapists. This is followed by the combination of formal and informal measures (32.8%), while 26.2% of respondents use only standardized assessment in Bosnian/Croatian/Serbian. Based on the obtained results, it can be concluded that speech therapists in Bosnia and Herzegovina most frequently use informal assessment of both languages when evaluating the language status of bilingual speakers. Consequently, hypothesis (H₁), that speech therapists most commonly use a combination of formal and informal measures, is not accepted. According to Detić (2018), in Croatia the most commonly used measures are combined assessments (64.9%) and standardized evaluation in the mother

tongue (56.8%). In the U.S., Arias and Friberg (2017) found that 58% of speech therapists conduct informal assessments in both languages, while 49% use standardized tools in both the mother tongue and English. Additionally, 41% of speech therapists stated they never assess using only the child's mother tongue, and the same percentage said they never assess using only English. In a study from Bremen (Scharff-Rethfeldt, 2019), 35.7% of speech therapists use informal measures, the same percentage use combined methods, while 28.6% rely on monolingual standardized tests. In BiH, the most commonly used standardized test in assessing bilingual speakers is the Articulation Test (Salihović & Junuzović-Žunić, 2009), while language assessment tools are used less frequently. In contrast, speech therapists in Croatia rely on a significantly wider range of standardized instruments, including the Peabody Picture Vocabulary Test (74.6%), Test for Reception of Grammar (63.5%), Reynell Developmental Language Scales (41.3%), and the Communication Development Scales (36.5%). This difference is evident and likely due to the limited availability of standardized tests in Bosnia and Herzegovina compared to Croatia, where such materials are more accessible. In the U.S., Arias and Friberg (2017) report that the most commonly used procedures include language sample collection, the Clinical Evaluation of Language Fundamentals IV, the Preschool Language Scale, and various interview forms. These differences clearly indicate a significant lack of options in terms of standardized tests and their availability in BiH.

CONCLUSION

In the time of ubiquitous digitalization and accelerated social change, the upbringing and education of children are undergoing transformations, with increasing exposure to foreign languages from an early age resulting in an increase in the number of bilingual individuals. This poses new challenges and needs for the speech therapy sector in Bosnia and Herzegovina in working with bilingual clients. The results of the research provide insight into the current state of speech therapy practice in this area, including assessment methods and primary difficulties that professionals encounter. The lack of standardized measures and developmental norms for assessing language abilities in other languages is particularly emphasized, which significantly complicates the diagnostic and therapeutic process. The research confirms the need for continuous professional development of speech therapists, as well as for improving diagnostic tools and working methods in the context of bilingualism. Lifelong learning and the application of modern, scientifically based guidelines will enable professionals to provide adequate and high-quality support to an increasing number of bilingual users. This contributes not only to their linguistic and cognitive development, but also to their overall integration and success within the educational, social and academic context.

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