

Parents of bilingual children with such problems should not attribute them to bilingualism. Sometimes, well-meaning professionals suggest this diagnosis, when definite causes remain unknown. Raising children bilingually is sometimes believed to cause language delay, though evidence does not support this position. Raising children bilingually neither increases nor reduces the chance of language disorder or delay.

A key consideration for parents is whether removal of one language will improve, worsen, or have no effect upon language development. Since the cause of the problem may be unknown, intuition and guesswork are often substituted for 'science'. Research in this area is still in its infancy. Confronted with the suggestion of concentrating on one language only, if there is a major diagnosed language delay, parents, teachers and professionals run the risk of accenting the perceived importance of the majority language. In the United States, the advice is often to supply a steady diet of English, the language of school and employment. All too frequently, the majority language replaces the home, minority language, with painful outcomes for the child.

When someone has loved, cared for and played with the child in one language, and then suddenly only uses another tongue, the child's emotional well being may be hurt. The language used to express love and caring disappears. Simultaneously, and by association, the child may feel the love and care also are not as before. Such a language change is often drastic, with negative after-effects and consequences.

Even when parents and professionals accept that bilingualism does not cause a child's problem, some see monolingualism as a remedy. They reason that removing the 'extra demands' of bilingualism will lighten the child's burden. If the child has a language delay problem, simplifying language demands may solve or reduce the problem. The apparent complexity of a bilingual life is relieved. Is this right?

There are many cases where changing from bilingualism to monolingualism will have no effect on the problem. If the child is slow to speak, without an obvious cause, or seems low in self-esteem, dropping one language is unlikely to help. On the contrary, the sudden change in family life may exacerbate the problem, since the stability of language life is disrupted. In most cases, this move is inappropriate. However, it is dangerous to make this advice absolute and unequivocal.

To advise only 'stick with bilingualism' is simplistic and unwise. With language delay, for example, there will be a few family situations where maximal experience in one language is preferable. Where one language is much more secure and better developed than the other, it may be sensible to concentrate on developing the stronger language. If the child only hears one language from one parent, and that parent is often absent, a short-term concentration on the stronger language may help in a language delay period.

This does not mean losing the chance of bilingualism forever. If, or when, language delay disappears, the other language can be reintroduced. If a child with emotional problems really detests using a particular language, the family may sensibly decide to accede to the child's preference. Again, once problems have been