



TOOLS for SCHOOLS



BILINGUAL FAMILY INTERVIEW (BIFI)

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Examiner to Parents: Please understand that the use of a non-English language is not, in and of itself, a contraindication for implantation. However, it is critical that your educational team have a full and honest view of your child's home language environment. This will allow us to better serve your family.

Instructions: Complete the information below.

1. Understanding ability (not speaking) of _____ (second language) for all persons who live in your home.

Relationship	Name	No ability	Understands words or phrases	Understands some conversation with errors	Understands most conversation	Full comprehension
Mother						
Father						
(Other)						
(Other)						

2. Speaking ability in _____ (second language) for all persons who live in your home.

Relationship	Name	No ability	Speaks words or phrases	Speaks in conversation with errors	Converses with few errors	Native speaker
Mother						
Father						
(Other)						
(Other)						

3. English understanding ability (not speaking) for all persons who live in your home.

Relationship	Name	No ability	Understands words or phrases	Understands some conversation with errors	Understands most conversation	Full comprehension
Mother						
Father						
(Other)						
(Other)						



4. Speaking ability in English for all persons who live in your home.

Relationship	Name	No ability	Speaks words or phrases	Speaks in conversation with errors	Converses with few errors	Native speaker
Mother						
Father						
(Other)						
(Other)						

5. How many social, cultural, or religious opportunities does your child have, outside his/her home, to hear or speak:

English:	None <input type="checkbox"/>	Few <input type="checkbox"/>	Some <input type="checkbox"/>	Many <input type="checkbox"/>	Daily <input type="checkbox"/>
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Second Language:	None <input type="checkbox"/>	Few <input type="checkbox"/>	Some <input type="checkbox"/>	Many <input type="checkbox"/>	Daily <input type="checkbox"/>
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6. Please describe these social, cultural, or religious opportunities:

7. List the person in your home who is able to read and write:

In dominant language:		In English:	
Names	Relationship to child	Names	Relationship to child

8. Our team wishes to be sensitive to any cultural traditions that may affect communication (e.g., eye contact, loudness of voice, touching or other physical contact, head or face covering, etc.). Please share these with us:

For a more in depth look at Bilingualism and Cochlear Implants refer to *Loud & Clear*, Issue 1, 2007 or visit www.AdvancedBionics.com