Routledge
Taylor & Francis Group

Journal of Multilingual and Multicultural Development

ISSN: (Print) (Online) Journal homepage: https://www.tandfonline.com/loi/rmmm20

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To cite this article: Victoria Van Oss, Esli Struys, Piet Van Avermaet & Wendelien Vantieghem (2021): What prompts early childhood professionals to proffer advice to multilingual families? Investigating the association between language policy and perceived self-efficacy, Journal of Multilingual and Multicultural Development, DOI: 10.1080/01434632.2021.1960358

To link to this article: https://doi.org/10.1080/01434632.2021.1960358

Published online: 31 Jul 2021.

JOURNAL OF MULTILINGUAL AND MULTICULTURAL DEVELOPMENT
https://doi.org/10.1080/01434632.2021.1960358

What prompts early childhood professionals to proffer advice to multilingual families? Investigating the association between language policy and perceived self-efficacy

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ABSTRACT

Early childhood professionals can act as catalysts in encouraging home language maintenance in multilingual families. However, there is a dearth of research on whether these professionals advise parents to speak their home language(s) to their offspring, and furthermore, little is known about what prompts professionals to proffer language advice. To respond to these queries, we relied on two theoretical frameworks: Spolsky's language policy model and Bandura's perceived self-efficacy theory. We gathered data from professionals ($N = 305$) employed at infant welfare clinics in Belgium and examined whether a high sense of multilingual confidence (i.e. a form of perceived self-efficacy), together with positive multilingual beliefs and multilingual practices, would induce professionals to offer multilingual advice (i.e. a form of language management). Our logistic regression results revealed that multilingual practices and multilingual confidence were positively associated with multilingual advice. Additionally, multilingual training was found to be strongly related to advice-giving. Multilingual beliefs, however, were only connected with multilingual advice when they were considered without the inclusion of multilingual confidence, as multilingual beliefs seemed to operate via multilingual confidence. We, therefore, suggest an enrichment of Spolsky's model by taking into account multilingual confidence when investigating individuals' language policy dynamics.

ARTICLE HISTORY
Received 6 May 2021
Accepted 19 July 2021

KEYWORDS
Language policy; self-efficacy; early childhood; language advice; home languages

Introduction

The world's linguistic opulence, reflected in more than 7,000 languages, inheres in every nook and cranny of contemporary society. Not only that, it has been estimated that the majority of the world population speaks more than one language (Fabbro 2001; Grosjean and Miller 1994), and with the rapid rise in human mobility due to migration and globalisation, this number will only keep growing (Ansaldo et al. 2008). The resulting expansion of multilingual families (Soler and Roberts 2019; Wei 2012) may prompt questions from parents on how to best foster children's multilingual development (Grosjean 2009). In their quest for answers, some parents seek advice from Early Childhood Care and Education (ECCE) professionals (DeCapua and Lingshan 2015), as they are often the first external party families are confronted with. Research shows that often-heard preoccupations among parents are that a hodgepodge of different languages at home will cause children to mix languages higgledy-piggledy (Baker 2014), or that speaking the minority language at home will go at the expense of acquiring the dominant language of their speech community (Puig 2010).

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These concerns are particularly salient in the early years – the cornerstone of children's language development. Alongside parents, early childhood professionals hold an enormous potential to foster language acquisition in children (Buschmann and Sachse 2018; Cunningham, Zibulsky, and Callahan 2009; Salem et al. 2020) and encourage home language maintenance (Verdon, McLeod, and Winsler 2014). The latter is of cardinal importance, because home language development will provide children with fundamental academic and socioemotional benefits, and foster intergenerational language transmission among families (De Houwer 2017; Eisenchlas, Schalley, and Guillemin 2013). Whereas early childhood professionals could be a valuable resource of information for multilingual parents with queries about children's language acquisition, little is known about what and under which conditions professionals offer language recommendations to families.

The delivery of language advice, according to Spolsky (2004), is a language managerial act. However, to grasp language management – or language advice giving – requires attention to the three language policy components (Spolsky 2019, 335). We, therefore, rely on his conceptualisation of language policy (LP) as the synthesis of three independently describable and interconnected constructs: language practices, beliefs and management (cf. Van Oss et al. (2021) for an empirical validation of this model). Language practices relate to people's language behaviour. Language beliefs involve what people think is 'appropriate or desirable' language use and language management refers to people's attempts to modify the practices or beliefs of members of a speech community or family (Spolsky 2017). Spolsky's model elucidates the complex interplay between beliefs, practices and management. Nevertheless, social science research has shown that, while beliefs are an essential motivator of behaviour (which includes both practices and management), beliefs are not easily translated into overt behaviour (LaPiere 1934). That is, research has indicated a crevice between beliefs and behaviour (Wicker 1969), where circumstances and lack of abilities, for instance, often form a barrier which may hinder individuals from translating what they believe to be important into actual behaviour (Ajzen and Fishbein 1969). Social psychologists have examined diverse 'third-variable' clarifications (Armitage and Christian 2003, 188), and one of the concepts which has proven instrumental in bridging this gap is the concept of perceived self-efficacy (PSE) (Bandura 1997), which we believe might provide an interesting addition to the burgeoning field of language policy. In short, this study does not only investigate how two components of the LP model (i.e. language beliefs and practices) may explain early childhood professionals' delivery of multilingual advice to parents (i.e. language management). Additionally, we explore whether professionals' perceived self-efficacy about multilingualism would enable an even better estimation of advice giving by examining how the concept relates to the LP components.

Background and theoretical frameworks

Advice giving as a language managerial act

For the current paper, the object of enquiry is the delivery of language advice, which is a concrete manifestation of language management (Van Oss et al. 2021). Language management occurs when someone with (or claiming) authority over other individuals attempts to modify some extent of their language practices or language beliefs (Spolsky 2006). Furthermore, pursuant to Spolsky's LP model (2004), language management is not a social phenomenon in isolation, in lieu, it is inextricably intertwined with an individual, family or speech community's language practices and language beliefs.

Despite the eminence of Spolsky's framework (2004), he did not coin the term 'language management' (Nekvapil 2012). As a matter of fact, Jernudd and Neustupný (1987) were the first to systematically employ the concept (Nekvapil and Sherman 2015). According to the Czech linguists, language management – defined as the deliberate regulation of linguistic behaviour (Nekvapil 2012) – is two-tiered: either simple or organised (Nekvapil 2016). Simple management materialises in interpersonal interactions, for instance, an individual's self-correction when erroneously

pronouncing a specific word. Whereas organised management transcends individual communicative acts for it requires the involvement of more than one person or even institutions, such as families or schools, and it is ideologically tinted (Neustupný and Nekvapil 2003; Sherman 2012). Spolsky's modified and enriched theory of language policy (2019), also makes a management distinction, as he differentiates between managers with authority (e.g. legislators) and advocates without power (e.g. writers). However, it is not easy to apply this distinction to early childhood professionals. Because, whilst ECCE practitioners may hold a position of authority, they wield no absolute power over parents, for the latter can choose to accept – or reject – the proffered advice.

To date, LP research in ECCE – as scarce as it may be (Caporal-Ebersold 2018) – has focused principally on early childhood professionals' language beliefs and practices. Whereas language management is invariably considered at the institutional or national level, it is seldom discussed at the individual level (e.g. in the form of advice giving). Van Gorp and Moons (2014) conducted a study in Flanders (Belgium) in which they explored childcare givers' language beliefs, language practices and perceived language management of the childcare facility and connected it to the development and implementation of Flanders' ECCE language policy. Language management was investigated at the institutional and national level, but not at the individual level. Alstad and Tkachenko (2018) analysed early childhood educators' practices and beliefs about teaching a foreign language in Norwegian kindergartens. Once again, language management was only explored at the national level, via a description of the ECCE policy framework in Norway, whereas any mention of individual language management was absent. Kirsch et al. (2020) investigated the effect of professional development on early education practitioners' beliefs regarding multilingual practices as well as their actual linguistic practices in childcare facilities in Luxembourg. Whereas their findings show that the professional development initiatives boosted the participants' multilingual practices and fostered positive multilingual beliefs, they did not consider possible changes in professionals' management acts. Caporal-Ebersold (2018) investigated the LP dynamics in a bilingual crèche in Strasbourg (France). She analysed the connection between ECCE educators' language beliefs and practices on the one hand, and the crèche's official language management on the other, yet language management was not examined at the individual level. One study on partnership in Swedish-medium ECCE units in Finland by Bergroth and Palviainen (2016), however, did examine practitioner (and parental) discourses on the three LP components at the individual level. Their interviews uncovered early childhood educators' language choices in partnerships with parents (i.e. practices), and established that practitioners adapted themselves to the language chosen by the parents. With respect to beliefs, they found that practitioners' support for Swedish was at the expense of Finnish; and their advice to parents on children's bilingual development (i.e. management) was to read and talk in Swedish (i.e. the minority language) at home.

This succinct overview of the literature shows that, firstly, ECCE research consistently focuses on early childhood educators, and not, on other early childhood professionals such as health care practitioners; and secondly, that there has hitherto been hardly any research on language management at the individual level in ECCE contexts – two significant gaps this study aims to address. However, 'one simply cannot investigate management without considering beliefs and practices, and vice versa' (Van Oss et al. 2021, 14), because the trinity of these ingredients shape LP (Spolsky 2004). Moreover, language policy is no monolithic process, because it takes place in byzantine and ever-changing contexts, which is precisely why the alteration of any LP component may be associated with changes in any other component (Spolsky 2004). But before we delve into these dynamics, we first elaborate on Bandura's concept of perceived self-efficacy (1977).

Perceived self-efficacy

Perceived self-efficacy (PSE), one of the main constructs of Bandura's Social Cognitive Theory (1989), refers to an individual's beliefs in their own capabilities to exhibit certain behaviour required to accomplish given attainments. PSE has little to do with a fixed set of skills one possesses,

but rather, with the flexibility one has to deploy these skills under a plethora of different conditions. Therefore, individuals with comparable competences may perform dissimilarly contingent on variations in their self-efficacy beliefs (Bandura 1997).

The theory states that judgements of self-efficacy are predicated on four information sources: vicarious experience, verbal persuasion, mastery experiences and emotional states (Bandura 1977). These disparate modes of information, according to Bandura (1982), are employed to judge our levels of PSE and thus alter our behaviour. *Vicarious experience* entails the observation of other individuals successfully performing an activity (Bandura 1977). For example, by observing your peer chit-chatting uninhibitedly with a Mexican colleague in the Spanish language class, you cannot only learn from her, but her confidence and fluency when speaking Spanish can thereafter serve as a point of reference when striking up a conversation yourself. *Verbal persuasion* involves how people's PSE beliefs are shaped by the opinions of others (Bandura 1982). *Emotional states* generate information about emotional arousal in circumstances in which the skill in the pertaining domain is displayed. Stressful situations, for instance, may have an adverse influence on PSE beliefs. And *mastery experiences* relate to one's past and effective experiences, where successes augment and failures dwindle our sense of PSE. Or, to return to our Spanish language class example, where having a heart-to-heart talk with a Spanish native speaker during which you successfully express your thoughts in Spanish, will enhance your sense of PSE as regards that activity. Mastery experiences are considered the most powerful source of influence on PSE in any given domain, because it is founded on 'authentic' experiences (Bandura 1977, 1982).

PSE is not a general disposition and can thus not be measured with a one-size-fits-all approach. In other words, a high level of PSE in one specific sphere does not necessarily go hand in hand with a high sense of PSE in other domains of functioning (Bandura 1997, 42). Hence, when gauging PSE, one should invariably tailor it to the activity domain in question. It seems however that no research has ever examined PSE in relation to multilingualism, and especially not in the domain of ECCE. This study does not only strive to fill this vacuum, but it takes it a step further by connecting PSE about multilingualism to the giving of multilingual advice. In the following section, we shed light on the setting where this study was carried out.

Research context

The Flemish community: a microcosm of the world's linguistic kaleidoscope

The Flemish Community – one of the three communities of Belgium – contains the citizenry from the officially monolingual Flemish Region as well as the Dutch-speaking inhabitants of the officially bilingual (Dutch-French) Brussels-Capital Region. The official language of the Flemish Community is Dutch and its institutions tend to pursue a strict monolingual policy. This Dutch determination can be clarified by, inter alia, the fight for the recognition of Dutch (against French) as an official language in Flanders and Brussels in the past two centuries. This struggle provoked the prevailing perception that Dutch is in peril and that, consequently, it has to be safeguarded as the majority language in Flanders and one of the two official languages of Brussels (Mettewie and Mensel 2020). Despite the lack of embrace of other languages than Dutch, the Flemish Community's linguistic reality is incredibly diverse. In the officially monolingual Flemish Region, in 30% of the children born in 2019, the language use between mother and child was not Dutch. The most commonly used other languages in family contexts are French, Arabic, Turkish, Romanian, Polish and Berber (Kind en Gezin 2019).

Flemish infant welfare clinics

This research was conducted in Flemish infant welfare clinics. These facilities are under the auspices of 'Child & Family' (Dutch = Kind en Gezin), an agency of the Flemish government, and they furnish medical, psychosocial and educational prevention to parents with newborns and toddlers. A visit to the clinic is on a voluntary basis where any support is provided at the request of the parents.

In other words, the agency is not an inspection body and the clinics' staff will not intervene when advice is not being followed, unless if it puts the child's health at risk. Therefore, parents maintain much freedom and can accept or reject the proffered advice. Furthermore, as the provided family support is free of charge, the outreach of the facilities is extremely broad; that is, of all babies born in Flanders in 2018, no less than 90% paid a visit to the infant welfare clinic ('Child and Family' n.d.). Each clinic is run by a team of nurses, physicians, family support workers and volunteers. *Nurses* provide preventive medical support to children and proffer parenting advice to parents, the latter may also include advice on multilingual parenting to multilingual families. *Physicians* monitor children's social, physical and psychological development. *Family support workers* connect vulnerable families with the clinics on the basis of their own experience and expertise. They also offer minority language assistance, such as Turkish or Berber, to the medical contingent of the clinics' staff when they have to communicate with parents who do not speak Dutch, French or English. *Volunteers,* however, are not part of the regular staff, as these are people who do this in their leisure time and hence, are not remunerated. They are responsible for the reception of parents and their children at the infant welfare clinic. More concretely, volunteers support the medical workforce (i.e. nurses and physicians) by keeping track of attendance, informing parents about practical activities, measuring and weighing the children.

As regards communication with non-Dutch-speaking parents, this calls for a brief description of the language policy of the infant welfare clinics. While Child & Family is an agency of the Flemish government, and thus adheres to the Flemish language policies, in practice the clinics' workforce form an exception as their provision of health care to vulnerable families justifies their use of other languages than Dutch with non-Dutch-speaking parents (Van Gorp and Moons 2014). In addition, the Child & Family agency (2012) issued a language policy paper promulgating a positive stance towards multilingual practices in ECCE and highlighting the significance of home language development for young children.

This study

Our literature review has shown that there is a dearth of research on whether early childhood professionals advise parents to speak their home language(s) to their offspring, and furthermore, little is known about what prompts professionals to proffer language advice in the first place. Consequently, we aim to investigate the advice that professionals offer multilingual families and given the Flemish context – marked by a monolingual (Dutch) ideology – we focus on advice fostering home language maintenance. Contingent on the discussed theories appertaining to this study, we hypothesise early childhood professionals who speak other languages than the official language with multilingual families (i.e. *multilingual practices*) and who are convinced of the value of multilingualism and home language maintenance (i.e. *multilingual beliefs*), to be more inclined to offer multilingual advice to multilingual families (i.e. *multilingual management*) (Hypothesis 1, H1). H1 is founded on Spolsky's model which elucidates the interaction between language beliefs, practices and management. Nevertheless, social science research has shown that, while beliefs are a powerful stimulus of behaviour (which includes both practices and management), beliefs are not easily translated into overt behaviour (Wicker 1969). That is, context and lack of skills, for example, often form obstacles which may prevent individuals from translating what they believe to be important into actual behaviour (Ajzen and Fishbein 1969). One of the concepts which has proven instrumental in bridging this gap is the concept of perceived self-efficacy. Therefore, our second hypothesis (H2), based on Bandura's theory (1977), examines whether professionals with a high sense of PSE regarding multilingualism – operationalised in this study as 'multilingual confidence' – would be more likely to offer advice on multilingual parenting. And if we go one step further, the fusion of Spolsky's and Bandura's frameworks would generate the assumption that professionals with great multilingual confidence – in tandem with positive multilingual beliefs and the adoption of multilingual practices – would be more inclined to proffer multilingual advice to parents. We enrich our analysis by

adding three forms of mastery experiences – as this information source generates the strongest efficacy expectations (Bandura 1977) – these include two domain-specific variables, being *multilingual upbringing* and *multilingual training*, and one more general variable: *work experience*. We also include *profession*, as we expect that one's specific occupation in ECCE may induce the delivery (or lack) of multilingual advice.

Methodology

Sample and participants

The data under investigation are part of 'Pro-M', a Flemish research project that examines early multilingualism in childhood and childcare. Data were gathered by virtue of a stratified two-stage sampling method. With the aim of obtaining sufficient multilingual families in the dataset, in the first sampling stage we selected 19 municipalities in Flanders and Brussels based on a high prevalence of mothers who do not speak the dominant language (i.e. Dutch) to their child. In the second stage, one to two institutions were selected per municipality (depending on the population size) via a random sample selection, resulting in a sample of 34 institutions. The latter's staff were then invited to participate in our survey. Five teams declined and 29 facilities (including 337 professionals) consented. The 29 participating facilities represent 10% of the 302 Flemish infant welfare clinics in Belgium. Professionals with a coordinating function (32 of the 337 respondents) completed a survey containing only questions pertaining to management and logistics of the clinics. These questionnaires were excluded from the dataset. Our final sample ($N = 305$) consists of 74 nurses (24.3%), 73 doctors (23.9%), 21 family supporters (6.9%) and 137 volunteers (44.9%). Regarding gender, we have one male family supporter and 12 male physicians (5.4% of all professionals), but only female nurses and volunteers.

Measures

The descriptive statistics of the following measures are displayed in Table 1.

Multilingual management was measured using an index of four items (Van Oss et al. 2021) tapping whether multilingual advice was offered. Each item had the response choices of 'yes' (1) or 'no' (0). The number of 'yes' responses for the four items were summed. Due to the variable's bimodal distribution, we created a dichotomous variable distinguishing between respondents who agreed with all four items (1) versus those who did not (0). The rationale behind this distinction is twofold. First, this way the scale captures not only the stimulation of home language maintenance but also considers the individuality of each multilingual family, which is necessary for multilingual management to be effective without being a one-size-fits-all advice (descriptive statistics for separate scale items are displayed in Appendix 1). Secondly, in doing so, we also unequivocally differentiate between those who *strongly* adhere to giving multilingual advice versus those who do this only haphazardly or not at all. Cronbach's alpha for this index was 0.86.

Multilingual practices was measured using a scale comprising five items tapping the extent to which the respondent uses multiple languages at work (Van Oss et al. 2021) (descriptive statistics for separate scale items are displayed in Appendix 2). Answer categories were in Likert-style format, ranging from never (1) to very often (5). The variable was measured by calculating the mean of the scores. Cronbach's alpha for this scale was 0.81.

Multilingual beliefs was measured using an index of five items to assess whether a respondent held positive beliefs about multilingualism in ECCE (Van Oss et al. 2021). The scale captures *professional* beliefs as each item pertains to the professional context and the service giving from the professional towards the parent (Ruitenberg 2011) (descriptive statistics for separate scale items are displayed in Appendix 3). Items had the response choices of 'yes' (1) or 'no' (0). The variable

Table 1. Sample characteristics. Frequencies (%), means, standard deviations (SD), Cronbach's alphas (*α*) and *N*.

	Total sample					Nurses			Physicians			Family supporters			Volunteers		
Variables	Range	%	Mean (SD)	*α*	*N*	%	Mean (SD)	*N*	%	Mean (SD)	*N*	%	Mean (SD)	*N*	%	Mean (SD)	*N*
Multilingual management	No	57			151	14.1		10	41.1		23	42.2		8	92.4		110
	Yes	43			114	85.9		61	58.9		33	57.9		11	7.6		9
Multilingual beliefs	0–5		2.14 (1.45)	0.64	270		2.48 (1.33)	71		2.30 (1.51)	60		2.95 (1.47)	19		1.73 (1.37)	120
Multilingual practices	1–5		2.51 (0.82)	0.81	274		2.66 (0.82)	71		2.57 (0.70)	60		3.15 (0.78)	19		2.30 (0.82)	124
Multilingual confidence	1–5		3.51 (0.58)	0.66	249		3.64 (0.38)	66		3.73 (0.47)	52		3.84 (0.48)	17		3.29 (0.65)	114
Multilingual upbringing	No	84.5			202	92.4		61	92.0		46	35.3		6	84.0		89
	Yes	15.5			37	7.6		5	8.0		4	64.7		11	16.0		17
Multilingual training	No	71.5			176	54.5		36	64.7		33	64.7		11	85.7		96
	Yes	28.5			70	45.5		30	35.3		18	35.3		6	14.3		16
Profession																	
Volunteers		44.9			137												
Nurses		24.3			74												
Family supporters		6.9			21												
Physicians		23.9			73												
Work experience	0–5 yrs	31.7			76	26.2		17	42.0		21	16.6		3	32.4		35
	6–50 yrs	68.3			164	73.8		48	58.0		29	82.4		14	67.6		73

displayed a normal distribution so the number of 'yes' responses for the five items were summed. Cronbach's alpha for this index was 0.64.

Multilingual confidence was measured using a five-item scale which tapped the extent to which respondents felt confident in approaching the multilingual reality at work. The scale includes items such as: *I have enough knowledge and experience to know how to cope with multilingualism,* or, *If I come across a problem concerning multilingualism, I try to learn about it myself by looking for information.* The composite measure is a five-point Likert scale ranging from absolutely disagree (1) to completely agree (5) and was measured by computing the mean of the scores. Cronbach's alpha for this scale was 0.66.

Multilingual upbringing was measured by inquiring professionals whether they had been raised multilingually. Respondents could indicate 'yes' (1) or 'no' (0).

Multilingual training was measured by asking professionals whether they had ever received any support in the form of a training, a course, or pedagogical guidance apropos of multilingualism. Respondents could indicate 'yes' (1) or 'no' (0).

Work experience was measured by the number of years that the respondent had been employed at the infant welfare clinic at the time of the survey and ranged from 0 to 50 years ($M = 12.89$, $SD = 10.93$). Given the variable's skewed distribution, the initial variable was dichotomised into two categories: (0) zero to five years of work experience and (1) six to 50 years of work experience – in order to make a clear-cut distinction between new employees, and employees with at least six years of work experience.

Profession was measured by inviting respondents to tick the box with the profession that applied to them by administering four options: nurses, family support workers, physicians and volunteers. To enable a regression analysis, the variable was recoded into three dummy variables and volunteers acted as the reference category. The rationale behind this decision was that volunteers are recruited through an external organising committee – and not via the Child and Family agency like the other professionals – and thus constitute a slightly different contingent of the clinics' workforce.

Design

Firstly, we examined the bivariate associations among the continuous variables (i.e. multilingual beliefs, multilingual practices and multilingual confidence) by computing Pearson correlation coefficients (see Table 2). Secondly, we conducted regression analyses to investigate in a detailed and multivariate way the relationship between the variables. Our outcome variable – multilingual management – is a binary measure and requires the use of logistic regression, which we performed in SPSS Statistics (V26.0). Spolsky's (2004) – prima facie, ostensibly oxymoronic – definition of LP as the triad of independent but interconnected concepts: language beliefs, practices and management, was quantitatively corroborated by Van Oss et al. (2021) – whose study forms the starting point for this analysis. Therefore, we first introduced the two components that are inextricably associated with language management: multilingual beliefs and multilingual practices (Table 3, Model 1). Subsequently, we included the variable 'multilingual confidence' to determine whether the concept PSE would add any explanatory power above and beyond the LP model (Table 3, Model 2). In the third model, we introduced three forms of mastery experiences: multilingual upbringing, multilingual training and work experience. In addition to these measures we inserted

Table 2. Associations between multilingual beliefs, practices and confidence.

Variables	1	2	3
1. Multilingual beliefs	1.000		
2. Multilingual practices	0.532***	1.000	
3. Multilingual confidence	0.309***	0.277***	1.000

Note: Pearson correlations. *** $p < 0.001$ (two-tailed).

Table 3. Results of logistic regression on multilingual management.

Variables	Model 1				Model 2				Model 3			
			95% C.I. for OR				95% C.I. for OR				95% C.I. for OR	
	b (*SE*)	OR	Lower	Upper	*b* (*SE*)	OR	Lower	Upper	*b* (*SE*)	OR	Lower	Upper
Intercept	−2.223*** (0.505)	0.816			−5.926*** (1.251)	0.756			−9.640*** (2.107)	0.030		
Multilingual Beliefs	0.275* (0.121)	1.489	1.056	2.098	0.221° (0.124)	1.377	0.968	1.957	0.143 (0.176)	1.231	0.746	2.030
Multilingual Practices	0.570** (0.216)	1.598	1.129	2.263	0.446* (0.224)	1.443	1.006	2.069	0.904** (0.335)	2.103	1.225	3.608
Multilingual Confidence					1.154*** (0.336)	1.947	1.330	2.848	1.010* (0.480)	1.792	1.043	3.076
Multilingual Upbringing (0 = No)									−1.256° (0.707)	0.285	0.071	1.137
Multilingual Training (0 = No)									1.802*** (0.500)	6.063	2.275	16.161
Work experience (0 = < 6 years)									0.488 (0.474)	1.629	0.644	4.124
Profession (0 = volunteers)												
Nurse									4.348*** (0.648)	77.315	21.699	275.479
Family support worker									2.438** (0.884)	11.451	2.023	64.825
Physician									3.048*** (0.612)	21.082	6.355	69.936
Nagelkerke *R* Square	0.151***				0.220***				0.672***			

Note: ° $p < 0.1$ * $p < 0.05$ ** $p < 0.01$ *** $p \leq 0.001$. *b* = Unstandardised coefficients. *SE* = Standards Errors. OR = Odds Ratios. C.I. = Confidence Intervals.

the control variable 'profession'. We would like to point out that in Table 3 we report the unstandardised coefficients (b) as well as the Odds Ratios (OR) and their confidence intervals (C.I.). For ease of interpretation and comparison, continuous variables have been standardised before calculating the ORs (Field 2009; Grace-Martin n.d.).

Results

The results for the bivariate analyses (which are displayed in Table 2) reveal significant and positive correlations among the three composite measures. In line with Spolsky's model, there are moderate to large correlations between the LP components, whereas the correlations between the LP components (i.e. beliefs and practices) and multilingual confidence are small to moderate. Nevertheless, the results from the logistic regression analyses shed more light on these dynamics. In our first model (see Table 3), we inserted the two components, which, in concert with language management, shape LP; and found that multilingual beliefs ($b = 0.275$, $p < 0.05$) and multilingual practices ($b = 0.570$, $p < 0.01$) are positively and significantly associated with multilingual management, demonstrating that the more positive the beliefs on multilingualism and the more frequent the adoption of multilingual practices, the higher the odds that respondents will take on multilingual management, or, in other words, to offer multilingual advice to parents. In the following step, we verified the effect of multilingual confidence, and found that the measure is a strong estimator ($b = 1.154$, $p = 0.001$) of our outcome variable, meaning that professionals who exhibit higher levels of multilingual confidence are more likely to take on multilingual management. Furthermore, the inclusion of multilingual confidence to our model dispels the effect of multilingual beliefs ($b = 0.221$, $p < 0.1$), whereas the influence of multilingual practices ($b = 0.446$, $p < 0.05$) remains (Table 3, Model 2). In our third model, we introduced four variables, and found that the associations of multilingual practices ($b = 0.904$, $p < 0.01$) and multilingual confidence ($b = 1.010$, $p < 0.05$) with multilingual management persist, whereas the relationship between multilingual beliefs and multilingual management remained insignificant. Multilingual training appears to be a strong estimator of multilingual management, as professionals who reportedly received some kind of multilingual training in their professional career are more likely ($b = 1.802$, $p < 0.001$) to offer multilingual advice than professionals who did not receive any multilingual training. We controlled for the profession by adding three dummy variables to our model and found that their contribution is far from marginal. Nurses in particular ($b = 4.348$, $p < 0.001$), but also family support workers ($b = 2.438$, $p < 0.01$) and physicians ($b = 3.048$, $p < 0.001$), are much more inclined to offer multilingual advice than volunteers. Alternatively, no relationship was found between respondents' work experience or their multilingual upbringing on the one hand and multilingual management on the other.

Discussion

Whereas early childhood professionals could be a valuable resource of information for multilingual parents with queries about children's language development, little is known about what prompts professionals to proffer advice to multilingual families. To fill this gap, we relied on the fusion of two theoretical frameworks: Spolsky's (2004) language policy (LP) model and Bandura's (1977) perceived self-efficacy (PSE) theory. As regards the former, the delivery of language advice is considered a manifestation of language management, which, in concert with one's language beliefs and practices, shape LP. Consequently, early childhood professionals with positive multilingual beliefs and who adopt multilingual practices at work would be more inclined to proffer multilingual advice (i.e. a language managerial act) (H1). As regards Bandura's theory, we expected professionals with a high sense of multilingual confidence (i.e. a specific form of PSE), in tandem with positive multilingual beliefs and multilingual practices, to be more likely to take on language management (i.e. in the form of language advice giving) (H2). To verify these hypotheses we gathered data from early childhood professionals employed at Flemish infant welfare clinics.

First and foremost, our results demonstrate that professionals who engage in multilingual practices and have multilingual confidence (i.e. PSE) are more likely to proffer multilingual advice to families (i.e. multilingual management). Surprisingly, the inclusion of multilingual confidence into our model dispelled the effect of language beliefs on language management. This does not mean that professionals' multilingual beliefs are not connected with multilingual management, for the model which included solely the language policy components revealed a significant and positive relationship between both variables. It seems, however, that multilingual beliefs operate *via* multilingual confidence when the latter variable is included in our model. The relationship between multilingual beliefs and multilingual management can thus be illuminated by the observation that professionals with positive multilingual beliefs tend to be more confident about their ability to approach the multilingual reality at work and consequently, they are more inclined to offer multilingual advice. It seems that professionals' multilingual beliefs are coloured by their multilingual confidence, where the perception of one's capabilities with regard to multilingualism is perhaps *more decisive* than one's beliefs about multilingualism. While future research should explore how multilingual beliefs and PSE are causally linked, we might hypothesise that negative beliefs could stem from a lack of multilingual confidence. Multilingual beliefs can thus not be separated from one's multilingual confidence, and therefore, the added value of multilingual confidence lies in the necessary addition of the concept to our understanding of the language policy model, for our results show that multilingual confidence seems to be inextricably linked to LP dynamics. We began this exploratory journey with the supposition that an addition to the LP model might be necessary to explain multilingual management behaviour. Our findings confirm that the inclusion of insights from social science research enabled us to better gauge language management and thus bolster the explanatory power of Spolsky's model. This discovery does not only establish that we have accomplished the primary objective of this article, but by doing so, that we have made a substantial contribution to the field by empirically validating the connection between two theories that so far have only been investigated in isolation.

Furthermore, our results show that professionals who received training on the topic of multilingualism were much more likely to offer advice on multilingual parenting than professionals who had not, and this effect remained strong even when considering the effects of beliefs, practices or confidence. One possible explanation could be that multilingual training does not only provide an opportunity for mastery experience, but it is also an occasion for vicarious experience (i.e. by watching and learning from peers) and for verbal persuasion – as professionals may use feedback from their trainer or supervisor to improve their performances (Pfitzner-Eden 2016). In contrast, whether professionals had been raised multilingually themselves, or their amount of work experience, did not produce a significant effect on the delivery of multilingual advice. Concerning multilingual upbringing, our findings are in line with those reported by Strobbe et al. (2017) who did not find either that teachers' tolerant practices towards multilingualism were predicted by their multilingual upbringing or by living in a multilingual home environment. Conversely, a study by Dewaele and Wei (2014) showed that adult language users who had been raised in multilingual environments reported much more positive beliefs about codeswitching in daily life and accordingly, the authors deduced that 'linguistic practices picked up in childhood resonate for life' (247). While we expected a similar outcome, our results did not reveal a significant effect. Future research could therefore explore whether the impact of multilingual upbringing on language behaviour or beliefs would be greater in the day-to-day interactions of language users than in professional settings. Another possible clarification for the absence of a significant relationship between multilingual upbringing and multilingual advice giving, is that multilingual upbringing was used as a proxy indicator for 'mastery experiences', which is one of the four information sources of PSE – in this study operationalised as 'multilingual confidence'. However, according to Bandura (1997), successful experiences *enhance* feelings of PSE, whereas failures *curtail* PSE. In other words, if respondents were not convinced that their multilingual upbringing was a positive or successful experience, and that it did not result in the mastery of multiple languages in later life, then

respondents would probably be *less likely* to offer multilingual advice to parents. By the same token, if respondents had many years of work experience, but had not necessarily had many successful experiences with advice giving, then they would be less likely to offer multilingual advice. The findings by Van Der Wildt, Van Avermaet, and Van Houtte (2017) are in line with ours, for in their study, work experience did not significantly predict teachers' tolerant practices towards pupils' home languages. It could also be that while work experience was used as a proxy for mastery experiences in this study, it is possible that the variable might have been too general to have an effect on multilingual advice giving, for PSE beliefs should be tailored to the activity domain in question (Bandura 1997). Furthermore, we recognise that the information sources actually illuminated little of PSE, as is clear from the limited reduction in the effect size of PSE when comparing model 3 to 2. Therefore, there are evidently many aspects of PSE about multilingualism, or 'multilingual confidence' which require further investigation. Whilst our study demonstrated that multilingual confidence can indeed be a worthwhile predictor for linguistic research, the exact mechanisms behind this close interaction is still unexplored territory awaiting discovery.

Besides the interconnections between PSE and the LP components, our study also unveiled some noteworthy differences within the group of ECCE professionals. That is, our results show a stark contrast between volunteers and the rest of the staff. Less than 10% of volunteers reported to offer multilingual advice, compared to 85.9% of nurses, 58.9% of physicians and 57.9% of family support workers. This finding could be clarified by the fact that volunteers did not only receive little training on multilingualism, but they hold less positive multilingual beliefs, they engage less in multilingual practices with families and they feel less confident in approaching the multilingual reality at work – compared to the other professions. This group seems to be characterised by a few traits that, in conjunction, make them less inclined to give multilingual advice to parents. Another explanation may be that the group of volunteers – being mostly retired women – is significantly older than the rest of the professionals and that this older generation may have more conservative notions about multilingualism. This speculation is based on a study by Agirdag, Loobuyck, and Van Houtte (2012) whose results showed that older teachers exhibited less positive attitudes towards pupil diversity. Nevertheless, pupil diversity is not the same as language diversity, which makes it tricky to draw a direct comparison. Moreover, age seems to have an unpredictable relationship with one's language attitudes. A study by Dewaele and Wei (2014) which included multilinguals from 204 different nationalities, established that younger language users held *less positive* attitudes towards codeswitching than older language users. Contrarily, Van Compernolle (2016) analysed data from participants from 45 different nationalities, and found no relationship at all between participants' ages and their attitudes toward linguistic variation.

It goes without saying that it is not because professionals offer multilingual parenting advice, that they actually exert an impact on parents' family language policies, because parents are anything but noncritical recipients of advice. Moreover, King and Fogle (2006) highlight that guidance from parents' intimate circle of friends and family members, as well as parents' personal experiences with language learning is more instrumental in FLP decision making than expert advice. Whereas the essence of advice delivery spawns an asymmetric power relationship between the actors involved (Schaerer et al. 2018), this does not impede the potentiality of reciprocity between parent and professional (Vandenbroeck 2015). Indeed, parents, as partners of professionals, are not only connoisseurs of the traditions and values of their home languages (Schwartz 2018), some parents have been raised multilingually themselves and with their experience they can, in turn, influence professionals' LP dynamics. Professionals' purported influence should thus not be overestimated. Nevertheless, some parents look for additional information on the mechanisms underlying multilingual childrearing (King and Fogle 2006), and ECCE professionals could play a pivotal supporting role in providing evidence-based information. We, therefore, urge early childhood institutions to invest in their people by offering training on multilingualism, as this study demonstrated that professional development initiatives can not only bolster feelings of PSE, but also professionals' language practices and management. In the Flemish context, volunteers seem to be overlooked

in this regard as they are considered to be 'outside of the organisation'. While internationally, ECCE consists of context-specific organisations that differ per country, our findings do point to the necessity of involving all staff in such training initiatives.

Limitations and suggestions for further research

This remains a survey-based study which is inevitably subject to the issues associated with self-reporting. One concern regards the extent to which respondents' answers reflect their actual beliefs and behaviour, as responses may be influenced by both social desirability and self-assessment bias. With regard to multilingual confidence, for instance, it is possible that respondents overestimated themselves in the evaluation of their abilities – in casu: their ability to approach the multilingual reality at work – a phenomenon otherwise known as the Dunning-Kruger effect (Kruger and Dunning 1999). This entails that respondents with deficient knowledge or expertise about multilingualism would be unlikely in recognising their incompetence (Dunning 2011), and consequently, this may have biased their evaluation of their multilingual confidence. Therefore, further observational research could bear out to what extent this overestimation occurs.

Furthermore, one cannot unequivocally extrapolate our findings to *all* early childhood professionals, for our participants have some unique characteristics. That is, at infant welfare clinics, advice giving is part of nurses' and physicians' job descriptions. While this does not explain why the majority of these health care providers offer *multilingual* advice as such, it does explain why they are more likely to offer language advice in general than, for instance, early childhood educators working in childcare facilities, whose job description does not explicitly include offering advice to parents.

Another limitation of this study pertains to the way that the multilingual beliefs and management scales have been operationalised. It could be argued that dichotomised measures portray a simplistic black and white story rather than a continuous depiction of individuals who to a greater or lesser extent agree with certain statements. However, we believe that there are two distinct advantages to administering a binary answer format over Likert style items. Firstly, they trigger less response style bias (Dolnicar et al. 2011), which is a consistent inclination of respondents to answer to an assortment of questions independent of their content, such as selecting the most extreme option due to time pressure (Paulhus 1991). Likert items essentially capture *direction* (positive or negative) and to a smaller extent *intensity* (degree of agreement or disagreement) (Peabody 1962), whereas binary response formats force respondents to make an explicit and clear choice. Additionally, considering the health workers' busy schedules, binary answer formats offer the advantage of being faster to complete, which consequently, would result in more reliable answers for long surveys where fatigue can occur among respondents (Dolnicar and Grün 2007). Furthermore, whereas our study applied statistical techniques to map language policy that have not been used in the field before, further improvements are perpetually called for. Hence, in future research, other methods, such as the use of latent class analysis (LCA) could be used to contrast our 'variable-centred' approach which provided insight into how the different constructs are interrelated and influence behaviour. LCA, on the other hand, is a more 'person-centred' approach that sheds light on how certain behaviour occurs *within* groups of individuals with similar characteristics (Nylund-Gibson and Choi 2018).

On a final note, given the Belgian context with its citizens with a migration background, the focal point of '*multilingual* management' was the stimulation of home language maintenance. However, it is worth mentioning that the multilingual advice considered in this study does not explicitly capture 'the use of multiple languages' in the broader sense of the word. The rationale behind this decision is that in the Flemish Community – a society marked by monolingual ideology, where minority languages are perpetually in jeopardy of not being acquired (De Houwer 2007) – families' home languages are inevitably integrated into a milieu where Dutch is the dominant, majority

language, and therefore, encouraging home language development among young children is of profound importance.

Conclusion

This study explored whether early childhood professionals proffer advice on multilingual parenting to families and if so, what prompts them to give language advice in the first place. To this end, we relied on the fusion of two influential frameworks: Spolsky's (2004) LP model and Bandura's (1977) perceived self-efficacy theory. On the basis of their theories, we hypothesised that professionals with a high sense of multilingual confidence (i.e. a specific form of PSE) – in tandem with positive multilingual beliefs and the adoption of multilingual practices – would be more inclined to proffer multilingual advice to parents (i.e. a language managerial act). The findings from our logistic regression analyses demonstrate that both frameworks were instrumental in estimating professionals' (N = 305) reported multilingual advice. We found that professionals' multilingual practices and multilingual confidence were significantly and positively associated with multilingual advice. Multilingual beliefs, however, were only significantly associated with multilingual advice when they were considered *without* the inclusion of an even more important predictor of multilingual management, which is multilingual confidence. We, therefore, suggest an enrichment of the language policy model by taking into account individuals' confidence in engaging with the multilingual reality at work alongside one's language beliefs. Furthermore, we discovered that multilingual training was a strong estimator of the delivery of multilingual advice. The unique contribution of this paper is twofold. Firstly, this is the first study to successfully combine these two disparate frameworks in an investigation into the predictors of language management in professionals and secondly, we revealed a glimpse of what kind of early childhood professionals are more inclined to proffer multilingual advice to parents and what induced them to do this.

Disclosure statement

No potential conflict of interest was reported by the author(s).

Funding

This work was supported by Fonds Wetenschappelijk Onderzoek [grant number S006518N].

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Appendices

Appendix 1. Descriptive statistics for separate scale items measuring multilingual management

Item	Agree	Disagree
I advise multilingual parents to read in their home language to their child	58.9%	41.1%
I give multilingual parents tailored advice on language and multilingual parenting	65.4%	34.6%
I spontaneously give multilingual parents advice on language and multilingual parenting and indicate what is best	59.2%	40.8%
I advise multilingual parents to speak the language they know best with their child	64.9%	35.1%

Appendix 2. Descriptive statistics for separate scale items measuring multilingual practices

Item	Mean	Range
I greet multilingual children in their home language	2.56	1.00–5.00
In one-on-one situations with a multilingual child, I consciously use a few words from the child's home language	2.49	1.00–5.00
I greet multilingual parents in their home language	2.68	1.00–5.00
I speak to multilingual parents in their home language	2.63	1.00–5.00
I only speak Dutch with the children ®	2.23	1.00–5.00

Note: Range: 1 (never) to 5 (always). ® = reversed coding.

Appendix 3. Descriptive statistics for separate scale items measuring multilingual beliefs

Item	Agree	Disagree
At the infant welfare clinic, a multilingual child is best addressed in the language in which he or she feels safe	69.6%	30.4%
Infant welfare clinics should reflect the different realities of multilingual children	57.2%	42.8%
I find it important that multilingual parents can be assisted in their home language at the infant welfare clinic	50.6%	49.4%
At the infant welfare clinic, a multilingual child is best addressed in their home language	18.1%	81.9%
At the infant welfare clinic, a multilingual child is best addressed in Dutch ®	23.5%	76.5%

Note: ® = reversed coding.