ABCs OF ASSESSMENT

From:

Schools committed to the success of all children must have an array of activities designed to address barriers to learning. No one is certain of the exact number of students who require assistance in dealing with such barriers. There is consensus, however, that significant barriers are encountered by a majority of students (see Exhibit).

Each day school staff are confronted with many students who are doing poorly in school as a result of health and psychosocial problems. Increasingly, education reform and restructuring are changing the whole fabric of schools and calling upon all personnel to expand their roles and functions.

As a result, school staff need to acquire new ways of thinking about how schools should assess these barriers in order to plan effective ways to address them.

Assessment Defined

Assessment is a broad-based concept. The term has been adopted to encompass narrower, medically related processes such as diagnosis, screening, and diagnostic testing.

In practice, the overall aim of assessment is to describe and make judgments as an aid to decision making. The judgments may represent a conclusion about the past (such as what caused a problem), a statement about the present (such as how severe a problem is), or a prediction about the future (such as how much the problem will improve as a result of intervention).

Formally defined, assessment is the process by which attributes of phenomena are described and judged. Descriptions take the form of data gathered by formal and informal measures, such as tests and observations of behavior or settings. Judgments take the form of interpretive conclusions about the meaning of data, such as whether a phenomenon is good or bad, above or below standard, pathological or not. Choices about what data to gather and exclude are guided by judgments and decisions to be made (diagnostic classification, placement, remediation).

Controversy surrounds prevailing approaches to assessment. Although some of the controversy is about the deficiencies and limitations of specific procedures, broader concerns and criticism have been directed at the way assessment is used to shape research and practice and related policy decisions. Even when relatively objective assessment data are used, subsequent decisions often are extremely subjective. This is not surprising, given that most decisions involve considerations that go well
Exhibit

Barriers to Learning, Parenting, and Teaching
(beyond medical/dental needs)

A. Deficiencies in basic living resources and opportunities for development
   - dearth of food in the home
   - inadequate clothing - substandard housing (incl. being homeless)
   - lack of transportation
   - income at or below the poverty level (e.g., due to unemployment or welfare status)
   - immigrant-related concerns (e.g., limited English proficiency, legal status)

B. Observable problems
   - school adjustment problems (incl. prevention of truancy, pregnancy, dropouts)
   - relationship difficulties (incl. dysfunctional family situations, insensitivity to others)
   - language difficulties - abuse by others (physical and sexual)
   - substance abuse
   - emotional upset - delinquency (incl. gang-related problems and community violence)
   - psycho-social concerns stemming from sexual activity (e.g., prevention of and reactions to pregnancy or STD’s) - psychopathology

C. General stressors and underlying psychological problems associated with them
   - external stressors (objective and perceived) and deficits in support systems
   - competence deficits (low self-efficacy/self-esteem, skill deficits)
   - threats to self-determination/autonomy/control
   - feeling unrelated to others or perceiving threats to valued relationships
   - psychopathology

D. Crises and emergencies
   - personal/familial (incl. home violence)
   - subgroup (e.g., death of classmate or colleague)
   - school-wide (e.g., earthquake, floods, shooting on campus)

E. Difficult transitions
   - associated with stages of schooling (e.g., entry, leaving)
   - associated with stages of life (e.g., puberty, job and career concerns)
   - associated with changes in life circumstances (e.g., moving, death in the family)
beyond the availability of valid data. More often than not, complex social-political-economic value questions are involved. Indeed, in some cases seemingly relevant data are ignored in order to arrive at a decision that the decision makers see as viable and beneficial.

Assessment does not have to be restricted to persons; environments and person-environment transactions can be assessed as well. With learning problems, however, assessment continues to be viewed in terms of screening and diagnosis and is shaped primarily by the presumption that problems stem from and belong to targeted individuals.

Assessment does not have to be restricted to problems; strengths and interests can also be identified and may be important in correcting problems. Prevailing practices, however, continue to de-emphasize assessment of such positive attributes.

What should be clear is that assessment is a complex matter. Despite the importance of assessment, prevailing assessment procedures can have detrimental limitations and consequences:

- Assessment procedures do not have sufficient validity to warrant large-scale programs for early identification
- Assessment procedures are not capable of producing appropriate differential diagnoses and placements
- These procedures often lead to misprescription of remediation and deemphasis of the importance of a person’s strengths and interests, and they narrow the focus of school curricula
- These procedures can inappropriately shape evaluation and eventually redefine and limit objectives.

Furthermore, overemphasis on assessment practices that focus on persons hinders development of procedures for assessing the role of the environment. As a result of the bias toward localizing problems within persons, interventions tend to be person-centered. Almost by presumption environmental variables are exonerated as causal factors and as focal point of intervention.

In spite of the deficiencies of prevailing practices, each day professionals are called upon to assess and make decisions about individuals. Unfortunately, for now they must do so using a relatively weak knowledge base.
The need for improved practices is evident. Fortunately, recent research has pointed to promising approaches that go beyond conventional procedures. There may be major concerns about the state of the art, but there can be no doubt that persons with problems can and must be helped.

Functions

As seen in the accompanying figure, the major purposes of assessment can be grouped into four categories of function. These four functions represent the types of decisions for which such assessment may be useful.

1. Identification. Data are used to help find and label phenomena of interest. The focus may be on a person, the environment, or both, and may or may not be on problems.

2. Selection. Data are used to help make decisions about general changes in status. These usually are discussed as placement decisions, but they also encompass decisions about changes in environments. Specifically, these are decisions about the general nature and form of needed intervention (for example, educational, psychological, or medically oriented treatments; placement in a special setting; changes in the organization of a classroom or school).

3. Planning for specific change. Data are used to decide about immediate and short-term objectives and procedures for accomplishing long-term goals. Examples are specific plans or prescriptions for any given day’s intervention.

4. Evaluation of Intervention. Data are used to decide intervention effectiveness based on positive and negative outcomes. Decisions are made with respect to the impact on (a) particular persons or environments or both, (b) all experiencing a specific intervention, or (c) society as a whole.

An example may help clarify the preceding points. Achievement tests are often used to assess reading performance in a given school. The number of right and wrong answers provides a description of performance on a given set of items at a given time. Based on these descriptive data, a variety of judgments are likely to be made. They will be based on available norms and prevailing standards.

Different judgments will be made about individuals with identical scores who differ in age. Different judgments may be made about groups living in economically advantaged and disadvantaged communities.

Decisions can be made about whether to assign diagnostic labels to individuals and programs judged as performing poorly. That is, an individual might be labeled as having a learning disability; a School could be labeled as failing to do its job.

Decisions can be made as to whether to help some individuals and schools, and if so, specific plans may be formulated. At a later date, achievement test data again can be used to evaluate performance.
Assessment
The process by which attributes of phenomena are described and judged

**Description**
Measures are used to gather data on
- Intended or actual antecedents
- Procedures and settings
- Performance and outcomes
These data are analyzed and summarized without interpretation

**Judgements**
Interpretations of data (e.g., conclusions about causes, current and future status, impact, relationships)

**Processes**

- **Identification**
  Data are used to help find and label a person, environment, or both (e.g., to find and label problems)

- **Selection**
  Data are used to make decisions about general changes in status of person, environment, or both (e.g., placement in a special setting)

- **Planning specific changes**
  Data are used to decide about particular objectives and procedures to change a person, environment or both (e.g., specific plans and procedures)

- **Evaluations of Interventions**
  Data are used to decide about intervention efficacy (i.e., positive benefits and negative effects) for
  - Particular persona, environments, or both
  - All participants experiencing a specific type of intervention, or
  - Society as a whole

**Possible byproducts**

- **Classification / categorization (e.g., diagnosis)**

**New intervention decisions**
- Different focal point for change or type of intervention
- Different objectives or procedures
- Reevaluation of efficacy

**Figure  Assessment Processes and Purposes**
Other Factors Shaping Assessment

In addition to having four major purposes, activity related to assessment occurs in phases, and differs in terms of focus and types of procedures used. There are a variety of options in deciding what and how to assess.

For example, stimulus-and-response conditions may differ in terms of the number of variables assessed, their complexity, and whether they are simulated or natural. Variations also occur with respect to (a) how ambiguous and subjective the stimuli are, (b) how well standardized the administration procedures are, (c) how obtrusive the procedures are, and (d) how much they cause unintended reactions. There are also important considerations about similarities and differences between the assessor and the assessed (for example, in terms of race, cultural background, socioeconomic status, and gender).

Although such variations in practice influence both the form of assessment activity and the findings, there is little agreement and considerable concern about their impact.

New Directions

New opportunities are emerging as schools attempt to reduce fragmentation through various reform strategies. Assessments focused on individual students and on evaluating instructional effectiveness are being linked in thoughtful new ways. On the following pages are some excerpts from a digest published by the ERIC clearinghouse on Counseling and Student Services that illustrates these changes*.

For more information on this topic, check out our Quick Find on Assessment & Screening at http://smhp.psych.ucla.edu. From here you can obtain a downloadable copy of our introductory packet on Assessing to Address Barriers to Learning.

*Created by ERIC, the educational resources information center. For more information about ERIC, contact ACCESS ERIC 1800-LET-ERIC. Edward D. Roeber is Director of Student Assessment Programs, Council of Chief State School Officers in Washington, D.C. ERIC Digests are in the public domain and may be freely reproduced and disseminated. This publication was funded by the U.S. Department of Education, Office of Educational Research and Improvement, Contract No. RR93002004. Opinions expressed in this report do not necessarily reflect the positions of the U.S. Department of Education, OERI, or ERIC/CASS.