

Course: Introduction and Assessment of Mentally Retarded Children-I

SEMESTER: AUTUMN, 2018

(3603)

ASSIGNMENT# 2



Q. 1 Explain the difference in assessment and evaluation? Compare the formal and informal strategies of assessment

ANS: Assessment vs Evaluation: what's the difference?

Assessment and evaluation are not the same. But what are the differences between assessment and evaluation in education. This article will give you description of both of these terms and will eventually tell you the differences between them.

What is an assessment?

What's the definition of assessment in education? Assessment is the systematic process of documenting and using empirical data on the knowledge, skills, attitudes and beliefs. By taking the assessment, teachers try to improve student learning. This is a short definition of assessment.

What is evaluation?

What's the definition of evaluation in education? Evaluation focuses on grades and may reflect classroom components other than course content and mastery level. Evaluation is a final review on your instruction to gauge the quality. It's product-oriented. This means that the main question is: "What's been learned?". Finally, evaluation is judgmental.

Example:

You're gifted a flower.

Evaluation: "The flower is purple and is too short with not enough leaves."

Evaluation is judgmental

Assessment: "I'll give the flower some water to improve its growth."

Assessment increases the quality

Relationship between Assessment and Evaluation

Besides the differences, there are also some similarities between assessment and evaluation. The both require criteria, use measures and are evidence-driven.

So, what's the difference?

Assessment	Evaluation
Is ongoing	Provides closure
Improves quality	Judges quality
Individualized	Applied against standards
Not graded	Graded
Provides feedback	Shows shortfalls
Process-oriented	Product-oriented

There are two general categories of assessments: formal and informal.

Formal assessments have data which support the conclusions made from the test. We usually refer to these types of tests as standardized measures. These tests have been tried before on students and have statistics which support the conclusion such as the student is reading below average for his age. The data is mathematically computed and summarized. Scores such as percentiles, stanines, or standard scores are mostly commonly given from this type of assessment.

Informal assessments are not data driven but rather content and performance driven. For example, running records are informal assessments because they indicate how well a student is reading a specific book. Scores such as 10 correct out of 15, percent of words read correctly, and most rubric scores are given from this type of assessment.

The assessment used needs to match the purpose of assessing. Formal or standardized measures should be used to assess overall achievement, to compare a student's performance with others at their age or grade, or to identify comparable strengths and weaknesses with peers. Informal assessments sometimes referred to as criterion referenced measures or performance based measures, should be used to inform instruction.

The most effective teaching is based on identifying performance objectives, instructing according to these objectives, and then assessing these performance objectives. Moreover, for any objectives not attained, intervention activities to re-teach these objectives are necessary.

Assessing Learning and Evaluating Progress

In this chapter, we explore issues related to assessing learning and evaluating progress in inclusive high schools. In addition to answering the question, "Why test?" we describe authentic ways to evaluate your students' progress and, thus, the effectiveness of your instruction. We also discuss issues related to grading students with disabilities and their participation in state- and district wide assessments. After reading this chapter, you will

- Begin to formulate your rationale for evaluating learning and instruction in your classroom
- Recognize issues of fairness in evaluation
- Describe ways to integrate instruction and assessment
- Identify ways to measure student progress and learning
- Identify accommodations and modifications useful in testing situations
- Recognize issues related to grading in inclusive settings
- Describe issues related to state- or district wide proficiency testing and students with disabilities

Why test? A rationale for evaluating learning and instruction

The teacher contributors for this chapter described several reasons for testing and evaluation:

- It is important for students to have to articulate about classwork and how it applies to their life; then, when the rubber hits the road, they can do it. (Sister Kristin Matthes, religion teacher)
- There are things students need to know, principles of which they must be aware; some things are not opinion but are reality. (Kathy Heekin)
- Frequent assessment provides students with ways to accumulate points as a basis of grades; quizzes aren't so much a measure of what they've mastered, but a measure of whether they're with me. (Christine Bredestege, math teacher)
- Students need to keep track of their learning and show how they've learned and changed. They should use their knowledge to produce something- (Jason Haap)
- Students need to reflect on their learning and classroom activities. (Margaret Jenkins, consumer and family science teacher)
- Testing is a learning experience for students - a way to help them think about and organize information. (Karen Willig, language arts and resource teacher)

Testing is my way of knowing where the students are; it also gives them closure - a review of what we've done. (Cliff Pope, religion teacher)

Cullen and Pratt (1992) suggested that in inclusive environments, assessment can help determine if objectives were achieved and assist in the development and implementation of individualized education programs (IEPs). In addition, through evaluation, teachers can determine the direction of future instruction and develop a basis for extra help where needed.

The overriding purpose for all assessment is to gather information to facilitate decision making (Witt, Elliott, Kramer, & Gresham, 1998). These may be global decisions, such as how well the student does when compared with the rest of his or her class, or local decisions, such as the material that the individual student has mastered and the material that he or she needs to review. If we think about assessment as assessment for intervention, the basic purpose is to identify changes that are needed in behaviors or environments and to decide how to accomplish the goals of the needed changes (Barnett et al., 1997). In this chapter we consider both global and general assessment.

Q. 2 What type of standardized commercially available tests are available to the professionals dealing with intellectually challenged children?

ANS: The diagnosis of mental retardation in young children is frequently missed. The three most common errors made by clinicians who overlook the possibility of mental retardation are (1) concluding that a child does not “look” retarded, (2) assuming that a child who is ambulatory is unlikely to be retarded and, (3) if retardation is actually considered, concluding that it is not possible to test young children

Prevalence

Mental retardation is present in about 2 to 3 percent of the population. It can be defined as cognitive ability that is markedly below average level and a decreased ability to adapt to one's environment. The onset of the condition occurs during the developmental period, i.e., gestation through age 18 years.

Diagnosis

The physician must have a high index of suspicion to consider the diagnosis of mental retardation in any child. Some helpful clues include delayed speech, dysmorphic features (minor anomalies), hypotonia generally or of the extremities, general inability to do things for self and, not least, expressed concern by the parents.

The first and most important step in the diagnosis of mental retardation is to obtain a comprehensive patient and family history. Previous gynecologic and obstetric history may reveal infertility or fetal loss. Assessment of maternal health status during pregnancy with the involved child should include questions regarding use of tobacco, alcohol and drugs (prescribed and illicit); lifestyle or other risks for sexually transmitted diseases; weight gain or loss; signs of infection; serious illness or injury; and surgery or hospitalization.

To establish a knowledgeable baseline history of the child, the physician should obtain information regarding length of pregnancy, premature onset of labor or rupture of the membranes, duration and course of labor, type of delivery and any complications. Apgar scores at one and (especially) five minutes should be reviewed, and birth weight, length and head circumference measurements obtained and plotted on appropriate growth charts. The parents should be asked about any illnesses, feeding or sleeping difficulties in the newborn period and problems with sucking or swallowing, as well as the baby's general disposition. Extremes in infant temperament are often the first clue to an atypical course in child development.

The systems review of the child should be complete, with special attention to growth problems, history of seizures, lethargy and episodic vomiting. A developmental screen should be used at all well-child visits to obtain information about the timing of the child's developmental milestones, any concerns by parents or caregivers and comparison of the child's developmental rate and pattern with those of siblings. Specific questions about the child's current developmental abilities should be asked at each visit.

The Revised Denver Prescreening Developmental Questionnaire is a useful screening tool that parents can readily complete to help determine the need for further evaluation with the time-honored Denver Developmental Screening Test. Another practical and reliable tool with which to monitor development in infants is the Kansas Infant Development Screen. The findings can be recorded and plotted just as with somatic growth charts and shared with parents. Other developmental screening tests are also available.

Delays in speech development are common and may become more obvious when contrasted with the speech development of a sibling. Inquiry should be made regarding concerns about hearing and vision. One cannot

overemphasize the importance of addressing concerns voiced by a parent about a child's development, behavior and learning, because these expressed concerns accurately target the majority of children with developmental problems.

Information should be obtained about the family unit, parents' occupations and educational achievements, educational and developmental status of siblings, role of the patient in the family, discipline of the children and identity of the child's caregiver when the parents are not home. Family history of fetal loss, mental retardation, severe learning problems, congenital abnormalities and unexplained childhood deaths, as well as other serious illnesses in first- and second-degree family members, should be elicited.

A complete physical examination can begin with a review of growth curves since birth, if these are available. The head circumference should continue to be plotted. The examination should be thorough, with special attention to physical findings that are compatible with any risk factors obtained from the history.

The child should be examined closely for dysmorphic features or minor abnormalities, such as unusual eyebrow pattern, eyes that are widely or closely spaced, low-set ears or abnormal palmar crease patterns. Minor abnormalities are defined as defects that have unusual morphologic features without serious medical implications or untoward cosmetic appearance. Most minor abnormalities involve the face, ears, hands or feet, and are readily recognized even on cursory examination. The presence of three or more minor abnormalities in newborns is correlated with a 90 percent frequency of coexistent major abnormalities, suggesting close association with morphogenesis in utero. Thus, minor abnormalities may provide clues to developmental problems of possible prenatal origin.

Common Syndromes Associated with Mental Retardation

<i>DIAGNOSIS</i>	<i>INCIDENCE</i>	<i>ETIOLOGY, INCLUDING INHERITANCE</i>	<i>CLINICAL MANIFESTATIONS AND EARLY RECOGNITION</i>	<i>ASSOCIATED CONDITIONS</i>	<i>DIAGNOSTIC EVALUATION</i>
Down syndrome	1 in 600 to 800 births	Results from extra copy of chromosome 21, usually a sporadic event; 2% of cases may be inherited from a balanced translocation carrier parent	Hypotonia; flat facial profile; upslanting palpebral fissures; small ears; in-curving fifth fingers; single transverse palmar creases	Slow growth; congenital heart defect; thyroid dysfunction; developmental delay, especially speech	Chromosome analysis in all patients; chromosome analysis of parents if translocation is found; pediatric cardiology evaluation with echocardiogram by 6 weeks of age
Fetal alcohol syndrome	0.05 to 3 in 1,000 children diagnosed annually in United States	Alcohol consumption by mother during pregnancy	Diagnosis can be made at birth, based on history, baby's facial features (medial epicanthal folds, wide nasal bridge, small	May include retardation, behavior problems, ADHD, seizures, autism	Good history and physical examination imperative; history of maternal

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			upturned nose, long philtrum, narrow or wide upper lip), low birth measurements		drinking, pre- and postnatal growth retardation, dysmorphic facial features, CNS involvement; no laboratory tests available
Fragile X syndrome	1 in 2,000 to 3,000 male live births; females may also be affected	Abnormality in FMR-1 gene located on X chromosome; inherited in X-linked manner so males are more severely affected	Macrocephaly; large ears; enlarged testicles after puberty; hyperextensible fingers	Autism/autistic-like behaviors; developmental delay, especially speech; clumsiness; mitral valve prolapse	DNA testing for fragile X mutation (chromosome testing for fragile X misses up to 7% of cases); mothers of affected boys are obligate carriers of the gene
[corrected] Velocardiofacial syndrome	1 in 700 live births	Deletion of chromosome 22; usually de novo but may be inherited in an autosomal dominant manner	Cleft palate; congenital heart defect; speech delay; elongated face with almond-shaped eyes; wide nose with hypoplastic alae nasi; small ears; slender, hyperextensible fingers	Learning disabilities ± mild MR; psychiatric disorder in 10%	High-resolution chromosome analysis with chromosome painting (FISH) to detect chromosome 22 deletion; parents should also be tested
Unknown cause of MR	30 to 50% of all cases of MR	Variable; diagnosis may evolve over time, so repeated evaluations may be helpful	Nonspecific cluster of minor malformations; delayed milestones, especially language development	Behavioral phenotype may also aid diagnosis as course evolves	Cytogenetic studies; brain imaging; metabolic studies

Evaluation and Referrals

Findings from the history and physical examination of the child will help determine which diagnostic tests and referrals are appropriate for further assessment. The physician needs to explain to the parents what these

findings are and the reasons for further evaluation. The laboratory and radiographic assessment of individual children should be based on clinical presentation (*Table 3*).

TABLE 3.

Suggested Indications for Tests When Mental Retardation Is Unexplained

Magnetic resonance imaging of the brain

Cerebral palsy or motor asymmetry

Abnormal head size or shape

Craniofacial malformation

Loss or plateau of developmental skills

Multiple somatic anomalies

Neurocutaneous findings

Seizures

IQ < 50

Cytogenetic studies

Microcephaly

Multiple (even minor) somatic anomalies

Family history of mental retardation

Family history of fetal loss

IQ < 50

Skin pigment anomalies (mosaicism)

Suspected contiguous gene syndromes (e.g., Prader-Willi, Angelman, Smith-Magenis)

Metabolic studies

Episodic vomiting or lethargy

Poor growth

Seizures

Unusual body odors

Somatic evidence of storage disease

Loss or plateau of developmental skills

Movement disorder(choreoathetosis, dystonia, ataxia)

Sensory loss (especially retinal abnormality)

Acquired cutaneous disorders

IQ = intelligence quotient.

Adapted with permission from Palmer FB, Capute AJ. Mental retardation. Pediatr Rev 1994;15:476.

This initial sharing of information with parents is an extremely important step and will probably set the stage for the future physician-family-patient relationship. Ample time should be scheduled to discuss the findings and to allow for questions, which will be numerous. The family should be encouraged to write a list of questions for further communication with the physician. The clinician should clarify the term “developmental delay,” because parents frequently misinterpret this as meaning the child has the ability to catch up.

It is best to seek other opinions as soon as mental retardation is suspected rather than adopting a “wait-and-see” approach. The Individuals with Disabilities Education Act (1997) provides for developmental assessment of children older than three years in every school district. For children younger than three, similar infant-toddler assessment and early intervention resources are available, usually through local health departments, school districts or regional assessment centers. (The responsible agency varies in each state.)

Referral may be made to a tertiary-level child development unit that can provide interdisciplinary evaluations (developmental pediatrics, genetics, neurology, ophthalmology) as well as functional assessments (occupational and physical therapy, speech/language pathology, audiology, psychology). Families will usually welcome such a referral and comprehensive evaluation, especially if the mental retardation is unexplained. Evaluations by a nutritionist and a child psychiatrist may also be appropriate for some patients.

The family physician should expect complete information on the findings from this type of team evaluation. The family should expect to be referred back to their local community for ongoing primary care and, in some instances, subspecialty care. Information about early intervention resources in the local community should be shared with the family, and appropriate support services should be identified.

If the child with mental retardation has a head circumference that falls below the 5th percentile (microcephaly) or above the 95th percentile (macrocephaly), a magnetic resonance imaging scan of the brain should be considered. This is usually preferable to computed tomographic scanning because of the enhanced visualization of developmental abnormalities of the cerebral cortex, such as pachygyria, polymicrogyria and schizencephaly. These disorders reflect an abnormality during the first 25 weeks of gestation in the early migration of the neurons into the normally six-layered cortex.

A consultation with a medical geneticist/dysmorphologist is invaluable. This would include a review of a three-generation pedigree and records of pertinent relatives, evaluation for subtle dysmorphic features and assessment for a pattern to the patient's presenting characteristics.

Most mentally retarded patients who visit a genetics office undergo chromosome analysis. While this testing could be done by the referring physician, there are different levels of test quality, and it is usually best performed by a good cytogenetics laboratory associated with a university hospital or children's hospital. This

allows for ease in interpretation of the results to the patient's family in the event an abnormality is found. DNA testing for fragile X syndrome should be done instead of cytogenetic testing, which can miss up to 7 percent of those who are affected.¹⁸ Metabolic testing in the absence of a history suggestive of metabolic disease is probably of little value.⁴

Diagnosis may require several periodic visits to a geneticist, because a phenotype may evolve slowly, and new syndromes are constantly being reported. The importance of making a diagnosis in a child with mental retardation cannot be overemphasized. An accurate diagnosis allows for anticipatory guidance for the patient, recurrence risk information and genetic counseling for the parents, and opportunities for the family to become involved in specific support groups. An uncertain diagnosis should be conveyed as such; no diagnosis is preferable to an incorrect one.

Within a given family, the risk of recurrence of mental retardation in future siblings or other relatives of the patient depends on the specific diagnosis. The recurrence risk for mental retardation cannot be given to the family until a diagnosis has been made, although a general discussion with a geneticist may be of benefit. The family physician is a valuable resource in periodically reviewing the recurrence risk for the family.

Q. 3 How assessment and evaluation affects the decision making process of stakeholders of children with intellectual disability?

ANS: Assessing Learning and Evaluating Progress

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How can I integrate instruction and assessment?

Teaching in an inclusive learning environment has made our teacher contributors attentive to the relationship of instruction and assessment. Assessment is seen as part of the learning process (Margaret Jenkins) and is in itself a learning experience (Karen Willig). Assessing learning is grounded in learning. Cullen and Pratt (1992) contended that continual evaluation of student learning is an integral part of the teaching and learning process, and forms the basis for immediate action.

To ground assessment in student learning, we need to describe the relationship between learning and assessment. Herman, Aschbacher, and Winters (1992) used cognitive learning theory as a basis for a discussion of instruction and assessment. If we recognize the role of learning theory, traditional tests such as true and false, multiple choice, and fill in the blank have to be evaluated. For example, cognitive learning theory tells us that knowledge is constructed, and that when we learn we create personal meaning from new information and prior knowledge. This implies that discussion of new ideas and encouragement of divergent thinking with multiple correct responses must be emphasized. Critical thinking skills of analysis, comparisons, generalization, prediction, and formation of hypotheses must be used to relate new information to personal experience. All information should be applied to a new situation. Table 9.1 shows additional implications of cognitive learning theory for aligning instruction and assessment.

One way to look at the relationship between instruction and assessment is described by Herman (1998) who uses the acronym WYTIWYG: What you test is what you get. Rudner (1991) contended that testing has traditionally focused on whether students get the right answers; how they arrive at their answers has been considered only during the development of the test. Yet, two primary reasons for testing are discovering how students think or determining where they are having problems (Ascher, 1990). Tests administered to groups emphasize the acquisition of simple facts, low-level skills, superficial memorization, and isolated evidence of achievement (Meisels, 1993).

To show the integration of instruction and assessment, we use an example from one of our teacher collaborators. During senior year, all students participate in a class called life philosophy, in which Siddhartha by Hermann Hesse is read. Although this is a complex book, multiple supports are provided for all students, and the theme of searching is one that resonates with the seniors (Sister Kristin Matthes). To begin the unit, the teacher presents background information on Hermann Hesse. Some students take notes; some listen and receive copies of the overheard transparencies later; and some follow along, highlighting copies of the overhead transparencies depending on their needs and learning style (see Figure 9.1).

Table 9.1. Implications of cognitive learning theory for assessment

If cognitive learning theory contends that...	Then, assessment should
Knowledge is constructive, and learning that occurs as personal meaning is created from new information and prior knowledge	Encourage divergent thinking and multiple correct responses Encourage various ways of self-expression Emphasize critical thinking
Learning is not a linear progression of discrete skills	Engage students in problem solving and critical thinking

Students vary in learning style, attention span, memory, learning rate, and strengths	Provide choices in tasks Provide choices in how to show mastery Provide opportunities to reflect, revise, and rethink Include concrete experiences
Students learn better when the goal and criteria for evaluation are clear	Engage students in defining goals Provide a range of models for students Provide students with opportunities for self evaluation and peer review, with input on criteria
Students should know how and when to use knowledge, adapt it, and manage their own learning	Provide real world opportunities Engage students in self evaluation
Motivation, effort, and self esteem affect learning	Encourage students to see the connection between effort and results
Learning has social components	Provide group work in heterogeneous groups. Consider group products and processes

As the students begin their study of the book, several supports are provided. Audiotaped recordings of the book are available. In addition to the reading of the book, these audiotapes contain explanations interjected in the reading. At the conclusion of the chapters, the tapes provide supports for the students to complete the group work related to the chapter. In addition, students with disabilities (and those who need additional help) have the option to work in a small group with the teacher. In the small group, the teacher reads chapter by chapter with the student and completes a study chart with them (see Table 9.2). As the small group continues its work, the teacher relies more on the students to complete the chart according to the model or earlier chapters.

What are ways to measure student learning and progress?

Salvia and Ysseldyke (1998) described four basic approaches used to gather information about students. The first is observation, which can provide highly accurate, detailed, and verifiable information. Observation may be systematic, in which the observer gathers data on one or more precisely defined behaviors, or nonsystematic, in which the observer watches an individual in his or her environment and takes notes on the behaviors, characteristics, and personal interactions that seem significant. As one of our contributors stated, "I watch their interactions with each other and what they do in class, as well as my interactions with them" (Kathy Heekin). Another teacher uses dry-erase boards in mathematics class to observe the students working through the problems. The second approach Salvia and Ysseldyke described is recollection via interview or rating scales. In recollection, people familiar with a student can be asked to recall observations and interpretations of behavior and events and complete an interview or Likert format rating scale. A third approach includes record review. In record review, information can be gathered from school cumulative records, school databases, student products accumulated in portfolios, anecdotal records, and nonschool records. Finally, testing - the most common approach - is the process of measuring student competencies, attitudes, and behaviors by presenting a challenge or problem and having the student generate a response.

Although it is used most often in high schools, fixed-response testing cannot gain access to the student's ability to function as a competent participant in society. As Nickell (1993) indicated, if we really expect students to be able to examine an issue, make a decision, research an idea and synthesize that research to make a presentation, initiate a project and see it through, or even evaluate an idea, we must use assessment instruments. Because of the need to assess students on these more complex skills, alternative forms of evaluating student progress are changing testing (Nickell, 1993). The familiar multiple-choice test is giving way to expanded generative formats in which students are called upon to demonstrate what they know. Traditional fixed-response testing does not provide a clear or accurate picture of what students can do with their knowledge. These tests only show that students can recall; comprehend; or in some cases, interpret, but they do not measure students' ability to use knowledge (Nickell, 1993).

Although she wrote about social studies, Nickell (1993) provided insight into the potential impact of ways to assess students. First, the curriculum will need to be re-examined and re-organized to ensure mastery of knowledge, ways of thinking, and specific behaviors. Instruction also must change; learning must change to doing when activities connect classroom-based learning with the real world. A significant implication also is the integration of assessment with instruction. Expected outcomes should be specified and the criteria for judging success must be clear.

The direct examination of student performance on real world tasks is referred to as authentic assessment.

Authentic assessments do the following (Wiggins, 1989):

- Require students to be effective performers with the acquired knowledge
- Present students with the full array of tasks found in the best instructional activities, including conducting research; writing, revising and discussing papers; providing an engaging oral analysis; and collaborating with others
- Attend to whether students can craft polished, thorough, and justifiable answers, performances, or products
- Emphasize and standardize the criteria for scoring such varied products
- Involve challenges and roles that help students rehearse for the complex ambiguities of life

Authentic assessments often take the form of performance-based assessments. Performance assessments were defined by the U.S. Congress, Office of Technology Assessment (1992) as testing methods that require students to create an answer or product that demonstrates their knowledge and skills. Performance assessments share three common features: 1) students construct rather than select a response, 2) students are observed completing tasks that resemble those in the real world, and 3) students reveal their learning and thinking processes along with their answers (U.S. Congress, Office of Technology Assessment, 1992). Elliott (1994) suggested that two terms are key to performance assessment. First, it is a performance. The student actively generates a response that is directly or indirectly observable through a product. Second, it is authentic. The nature of the task and context in which the assessment occurs is relevant and represents real world problems or issues. A key feature of performance assessments is that students are active participants (Rudner, 1991). Rather than choosing from presented options, as in traditional multiple-choice tests, students are responsible for creating or constructing their responses.

Performance assessment has several advantages. Students are assessed in real and complex situations, considering both process and product (Maker, 1993). In addition, the gap between testing and instruction is reduced (Frechtling, 1991). There is a concern, however, that performance-based assessment relies on the teacher's observations or judgments, increasing subjectivity over other measurement strategies (Frechtling, 1991). In performance assessment, judgments are made about student knowledge and skills based on observation of student behavior or examination of student products (Lam, 1995). Although the instructional advantages of performance assessment when teachers focus on higher-order thinking skills are obvious, there is no evidence that assessment bias vanishes with performance assessment (Linn, Baker, & Dunbar, 1991). Performance assessment may generate its own potential sources of bias, including students' ability to use higher-order thinking skills; metacognitive skills; cultural problem-solving patterns; shyness; inadequate communication skills in presenting, discussing, arguing, or debating; inadequate or undue help; lack of resources inside and outside of school; incompatibility in language and culture between assessors and students; and subjectivity in rating (Lam, 1995).

In performance assessment, items directly reflect intended outcomes. They have the potential for measuring skills that traditionally have not been measured in large groups of students such as integrating knowledge across disciplines, contributing to the work of a group, and developing a plan of action when confronted with a novel situation (Rudner, 1991).

One aspect of a performance assessment is making an assessment of a curriculum event. In this way, the assessment is a series of theoretically and practically coherent learning activities structured in a way that they lead to a single predetermined end (Elliott, 1994). When planning a performance assessment as a curriculum event, teachers should consider

- The content of the instrument
- The length of activities required to complete the assessment

- The type of activities required to complete the assessment
- The number of items in the assessment instrument
- The scoring rubric

An example of a performance assessment that is in itself a curriculum event is provided by one of our teacher contributors (Margaret Jenkins). In her parenting class, the students participate in a simulation using a 5-pound bag of flour as a "baby." Each day's activities are described, providing a format for the simulation, including work to be completed in and out of class, and the evaluation of these activities. As they learn about parenting and child development, each student completes a baby book that includes a birth certificate that they generate, a description of their baby's daily schedule, and reflective journal entries. In addition, students are evaluated on their participation in the simulation. The materials used in this performance assessment are provided in Figures 9.2 and 9.3.

Performance assessments can take other forms as well. Ascher (1990), for example, described station activities as one way to employ performance assessment. In station activities, students proceed through a series of discrete tasks, either individually or in teams, in a given amount of time. Ascher gave the example of a science laboratory in which a variety of tasks, such as inferring the characteristics of objects sealed in boxes, measuring electrical currents, and sorting seeds are set in various places around the lab. Students may participate in individual or group projects, which serve as comprehensive demonstrations of skills or knowledge. Interviews or oral presentations allow students to verbalize their knowledge (Rudner, 1991).

More traditional formats also can serve as performance assessments. For example, Rudner (1991) required students to produce their own answers rather than select from an array of possible answers. Assessment questions can vary from filling in a blank or writing a short answer to drawing a graph or diagram or writing all the steps of a geometry proof. Essays have long been used by teachers so that students employ critical thinking, analysis, and synthesis. Experiments test how well a student understands scientific concepts and can carry out scientific processes.

Portfolios

A portfolio is a purposeful collection of student work that tells the story of achievement or growth (Arter, Spandel, & Culham, 1995). Portfolios benefit instruction by developing student skills in self-reflection, critical thinking, responsibility for learning, and content area skills and knowledge (Arter et al., 1995). They benefit assessment because collecting multiple samples of student work over time enables educators to 1) develop an in-depth look at what students know and can do, 2) base assessment on authentic work, 3) supplement standardized tests, and 4) communicate student progress (Arter et al., 1995). For example, portfolios are used in California as a certification of competence to demonstrate student mastery in science (California State Department of Education, 1994). They can track growth over time, presenting a chronological collection that shows how students have changed by contrasting early work to later work. Arter and associates (1995) cautioned, however, that the use of portfolios for assessment is not without controversy. They posed a series of questions that elucidate these issues:

- To what extent does the portfolio process, content, and performance criteria need to be standardized so that results are comparable?
- Is the use of portfolios feasible and affordable?
- Will teachers cooperate?
- Will the conclusions drawn from portfolios be valid?

What accommodations and modifications are useful in testing situations?

CRESST (National Center for Research on Evaluation, Standards, and Student Testing, 1999) defined accommodations and adaptations as modifications in the way assessments are designed or administered so that students with disabilities and students with limited English proficiency can be included in the assessment. The Center for Innovations in Special Education (1998) stated that the purpose of an accommodation is to help each student show what he or she knows and can do and to remove the impact of the disability. The intent is to provide equal footing. Accommodations do not change what the test is evaluating. Typical accommodations include modifications in

- Time or schedule of the assessment

- Test directions
- Presentation of questions
- Student response to questions
- Test setting

The Assessment Accommodation Checklist (Elliott, Kratochwill, & Gilbertson, 1998) was developed with input from general and special educators. This instrument was designed to help maintain consistent documentation and implementation of testing accommodations for students with disabilities. The Assessment Accommodations Checklist contains 74 accommodations in these domains: 1) motivation, 2) assistance prior to administration of the test, 3) scheduling, and 4) setting, assessment directions, assistance during assessment, use of equipment or adaptive technology, and changes in format (see Table 9.3).

Our teacher contributors described several accommodations related to testing. All of the teachers mentioned extra time, change in setting, the use of a reader, and the use of a scribe. In addition, they described several format considerations. In mathematics, after teachers provided some of the students with their tests written on graph paper to help them align their figures, the students asked if all tests could be written on graph paper. Thus, an accommodation for students with special needs became a way of helping all students succeed. In other subjects, formats originally provided for students with disabilities also became part of standard test format. For example, teachers put sections of tests in boxes, to delineate parts of the test. Typically, no more than five questions were in each of the boxes, and if matching was involved the words were provided in the box. Students were not required to use separate answer sheets. Abbreviated tests also were used, with additional modifications in language and complexity. A comparison of items is presented in Table 9.4.

Sister Kristin Matthes utilizes tests as an additional way to force students to reflect on and organize the material from the class. She will issue a blank note card and students may write down any and all of the information they choose on the card. Students must organize the material, determine what is most important, and reflect on ways to map the material. In addition, she will tell students that they only need to respond to a certain number of questions. For example, she may tell the students, "Answer 10 of these 20 questions." The students reflect on each of the questions, weigh their knowledge regarding that question, and choose whether to respond.

Table 9.3. Accommodations in the eight areas of the assessment accommodations checklist

Area	Accommodation
Motivating	Working toward a reward for continued effort throughout the assessment
Assisting prior to administering test	Teaching test-taking skills
Scheduling	Additional time; breaking the sessions into several shorter sessions
Setting	Distraction-free space; individual administration
Directing	Paraphrase directions; reread directions
Providing assistance during assessment	Record responses for the student
Using aids	Electronic reader
Changing test form and content	Braille or large print; audiotaped questions

What are issues related to grading in inclusive environments?

Grading students with disabilities changed rapidly in the latter part of the 1990's. Valdes, Williamson, and Wagner (1990) reported that 64.2% of secondary students with disabilities in general education were graded on the same standards as their peers without disabilities. More recent findings show that things have changed for students with disabilities in general education settings.

Bursuck, Bolloway, Plante, and Epstein (1996) completed a national survey of elementary and secondary general education teachers to determine the classroom grading practices of general education teachers, including grading adaptations for students with disabilities. They found that many teachers are willing to modify their grading criteria for students with disabilities. About 50% responded that they use the same adaptations for students without disabilities. On the whole, teachers were more receptive to passing students who made an effort. Because teachers use homework, tests, and quizzes for most of the students' grades, 1) students need strategies for taking tests and organizing their assignments, 2) homework and tests should be adapted, and 3) general education teachers need to be trained to develop valid classroom tests.

Teachers wanted grading adaptations to be considered for all students, regardless of whether they had a diagnosed disability.

Grades are not meaningful unless the criteria behind them are explicit (Bradley & Calvin, 1998). Grading modified assignments provides a significant challenge to teachers. Bradley and Calvin (1998) suggested that any grading system should provide frequent assessment; incorporate product, progress, and process evaluation; accurately report achievement to the parent and student; and provide useful feedback to help the student improve. Bradley and Calvin provided a critique of various grading practices:

- Letter and number grades, which are the most common grading-practices, can be used frequently and can analyze product, progress, and process. However, letter and number grades cannot convey feedback to the student or provide insight to parents about how much the student has learned.
- Progress checklists containing criterion-related goals provide clear feedback to students and parents, and can analyze product, progress, and process. However, checklists maybe time-consuming and tedious to administer and may not provide frequent assessment.
- Contracts, which establish predetermined learning goals, also assess product, progress and product. However, they do not provide feedback when the student is unsuccessful in meeting goals.
- Work samples can display progress and product but may not be effective in showing precise growth.
- Curriculum-based assessments may not depict process because many curriculum-based assessments are designed to test skills rather than concepts.
- Mastery level assessment divides the content into subcomponents with pretests and posttests. However, many content areas go beyond learning that can be demonstrated on pretests and posttests.
- Multiple grading is used to provide feedback on various aspects of the learning criteria, with separate grades for effort, product, progress, and process.
- Portfolios provide rationales, goals, contents, standards, and judgments of the contents. In addition, they are self-reflective in nature, providing feedback to the student and parent in product, process, and products
- Rubrics provide criteria for individual standards. They delineate the exact criteria before the project is undertaken.
- Bradley and Calvin (1998) made the following suggestions to "level the playing field" in evaluating the modified assignments of students with disabilities:
 - Use points and percentages to grade differentiated assignments, rather than letter grades.
 - Avoid using a traditional grading scale with most students and changing the grading scale for other students. Rather, set expectations and make adjustments before grades are given.
 - Avoid posting grades and scores.
 - Attend to the student's IEP goals and objectives.
 - Provide students with opportunities to grade themselves and one another, especially in group activities.
 - Use rubrics and share them with students and parents when introducing assignments.
 - Use a variety of grading approaches to obtain grades.
 - Avoiding grading students strictly on effort or learning behaviors.

Our contributing teachers, by virtue of the school system's report card, are locked into reporting percentage grades for each of their students. They have, however, employed modifications to account for students with disabilities. For example, the mathematics teacher awards points for making an effort on assignments and accuracy. She utilizes daily quizzes on the material from the previous day, administering them immediately after reviewing the material. The use of frequent assessment allows the students to gain more points as well as providing the teacher with information as to whether the students are understanding the material.

The use of rubrics also is pervasive among our contributing teachers. Yet, they talked about the adaptation of these rubrics-requiring greater depth and length for students who are able to produce and reducing those expectations for other students. The use of rubrics is so frequent that one of the teachers devised a blank, write-in rubric form that she would complete as she and the students collaboratively developed criteria. She duplicates it and uses it as a means for evaluation

What Are Issues Related To State- Or Districtwide Proficiency Testing and Students With Disabilities?

Accountability is a system of informing those inside and outside of the educational arena about the direction in which schools are moving (Westat, Inc., 1994). One of the ways that school districts and states feel they can address the issue of accountability is through statewide or districtwide proficiency tests.

The Individuals with Disabilities Education Act (IDEA) Amendments of 1997 (PL 105-17) require that students with disabilities are included in general state- and districtwide assessment, with appropriate accommodations. States and school districts must develop guidelines for the participation of students with disabilities in alternative assessments when they cannot participate in state- and districtwide assessment programs. Special education students have three alternatives for participation in state- or districtwide testing programs:

- Standard testing administration offered to all other students
 - The use of approved accommodations
 - The use of alternative assessment designed to measure the progress of students who cannot meaningfully participate in the standard assessment program (Erickson, Ysseldyke, Turlow, & Elliott, 1998)
- The state needs to report the number of students participating in alternative assessments, and gather and analyze these data. Ysseldyke and Olsen (1999) suggested that a set of assumptions about alternative assessments for students with disabilities are emerging:
- Alternative assessments can be used in place of typical procedures when students cannot participate even with accommodations. Clear guidelines and criteria for making decisions about who participates in alternative assessments, then, must be developed.
 - Alternative assessment should be relevant to the curriculum, and the focus of the curriculum for students who participate in an alternative assessment differs from the typical curriculum.
 - Performance on alternative assessments can serve as a substitute for information obtained through typical methods.

In a focus group of teachers, Ysseldyke and Olsen (1999) reported that several important considerations for alternative assessments emerged. First, the focus should be on authentic skills and on assessment experiences in community and real-life environments. Second, school personnel should measure integrated skills across domains. Third, in order to be accurate, assessment methods should involve multiple measures over time. Fourth, the extent to which the school system provides the needed assistive devices, people, and other supports should be studied. Finally, the purpose of alternative assessments should be to improve results for students. The extent to which alternative assessments provide information that leads to instructional and policy decisions to improve decisions should be evaluated and used to inform decisions regarding testing programs.

The IEP represents an educational accountability system that outlines learner expectations, assessment strategies, and performance standards established through consensus among various stakeholders. It focuses on individual students, however, whereas system accountability focuses on districtwide or statewide student populations (Erickson et al., 1998). In its 1994 survey of state assessment practices for students with disabilities, the National Center on Educational Outcomes found that state special education directors could estimate participation rates for students with disabilities for only 49 of the 133 statewide tests being used during that year (Erickson, Thurlow, & Thor, 1995). Ysseldyke, Thurlow, McGrew, and Shriener (1994) suggested that large

numbers of excluded students could possibly participate in state and national assessments, especially if provided with accommodations. However, a small group of students exists (usually students with severe cognitive deficits or multiple disabilities) for whom standard large-scale testing practices and accommodations remain inappropriate. IDEA '97 includes a requirement that states have aggregate data on the educational progress and accomplishments of students who are typically included (Ysseldyke & Olsen, 1999).

Most states recognize the importance of the IEP and the IEP team in making decisions about individual student accommodations. However, Elliott, Thurlow, Ysseldyke, and Erickson (1997) reported that little space if any is provided on the IEP for making accommodation plans, and IEPs rarely provide a list of possible accommodations. Twenty-four of the states reported that accommodations during assessment are linked to those used during instruction. Although most states will not allow accommodations unless the student's IEP lists them, only four states require written documentation about assessment accommodations beyond the IEP. Elliott and associates (1997) grouped common assessment accommodations into four areas - timing, setting, presentation, and response. In the area of timing, accommodations may include extending time for test completion, changing the time of day during which the test is administered, administering the test in several sessions over the course of one or several days, and allowing frequent breaks. Setting accommodations include administering the assessment in a small group, in an individual study carrel, in a hospital, in isolation, or in a home. Presentation of the test may include using an audiocassette, reading the test aloud, providing a large print version, repeating directions, interpreting with sign language, providing braille versions of the test, or using magnification devices. Responses may include dictating to a scribe, interpreting with sign language, using braille writers, recording answers, using a word processor, or transferring answers from the booklet to the answer sheet.

Q. 4 Why and how a teacher's queries about the probable cause of mental retardation can help him/her while grouping of individuals and deciding upon educational programs?

ANS: Teacher Response to Learning Disability: A Test of Attributional Principles

Attribution research has identified student ability and effort expended as causes of achievement outcomes that result in differing teacher affect, evaluative feedback, and expectation of future performance. Ninety-seven elementary-school general education teachers (84 women and 13 men) rated their responses to the test failures of hypothetical boys with and without learning disabilities. In most cases, greater reward and less punishment, less anger and more pity, and higher expectations of future failure followed the negative outcomes of the boys with learning disabilities, when compared with their nondisabled ability and effort matches, indicating that learning disability acts as a cause of achievement outcomes in the same way as ability and effort. This pattern of teacher affect and response can send negative messages that are often interpreted as low-ability cues, thus affecting students' self-esteem, sense of competence as learners, and motivation to achieve.

As the movement toward more inclusive settings for children with disabilities gains strength, it becomes increasingly important to understand how general education teachers perceive the academic outcomes of these children. The largest group of children with disabilities in special education programs are those with learning disabilities: Currently, 51% of all students served in special education, or over 4.3 million students, are identified as having a specific learning disability (U.S. Department of Education, 1994). This represents 3.9% of all schoolchildren in the United States. Many of these children are placed in the general education classroom for the majority of their instructional day, often with ancillary support services from special education personnel. Thus, the way in which general education teachers perceive the achievement of children with learning disabilities in comparison to that of their nondisabled peers is of great significance.

Research on the relationship between teachers' perceptions of children's school performance and their subsequent responses to high- and low-achieving students may offer the basis for predicting how elementary-school teachers will respond to the instructional outcomes of their students with learning disabilities. This work has as its foundation the attributional approach to achievement motivation (Weiner, 1979, 1985, 1986). Before examining how attribution theory might shed light on how teachers perceive children with learning disabilities, a brief review of the principles of the theory is presented.

An attributional approach to achievement outcomes

Attribution theory (Graham, 1990, 1991; Weiner, 1979, 1985, 1986) offers a useful framework for exploring teachers' responses to children's academic outcomes, such as success or failure, in the general education classroom. Although the attributional process was initially presented as a theoretical one, a body of empirical research now exists that supports its principles. Attribution researchers (e.g., Frieze, 1976; Frieze & Snyder, 1980; Weiner, 1985) have identified ability and effort as the principle perceived causes of individual success or failure. In its most adaptive state, success is seen as the result of personal competence, whereas failure can be overcome by effort. Ability, in an academic context, can be characterized as consisting of aptitude and learned skills, whereas effort is the level of exertion applied to a situation, either temporarily or over time (Weiner, 1979). Attributional principles can be applied in contexts that are either self-directed, as when we attempt to understand our own behavior, or other-directed, such as when a teacher attempts to analyze a student's classroom performance in order to increase his or her academic success (Graham, 1990, 1991; Weiner, 1979, 1986).

Negative or unexpected student outcomes, such as test failure, commonly result in an attributional search by classroom teachers. Teachers may use causal attributions to answer the question, "Why did my student fail?" (Graham, 1990). A teacher reviews his or her prior knowledge about a student to determine the cause for failure (Kelley & Michaela, 1980). Among these causes can be the student's ability, effort expended, or mood, or the task's difficulty (Burger, Cooper, & Good, 1982; Cooper & Burger, 1980). In most cases, teachers view a student's level of ability and effort expended as the most powerful of these causes (Graham, 1990, 1991). Empirical research has identified three properties, or dimensions, of causes that are influential in determining their impact (Wimer & Kelley, 1982). These dichotomous dimensions- locus of causality (internal/ external), stability (stable/unstable), and controllability (controllable / uncontrollable)-- combine to provide the perceiver with information regarding an individual's competence. Controllability is further seen to influence the way in which the perceiver assigns personal responsibility for outcomes: When an individual is seen as being in control of an outcome, he or she is viewed as responsible, whereas an outcome outside the control of the individual is seen as one for which he or she is not responsible (Weiner, 1986). Ability is, conceptualized as internal, stable, and uncontrollable, whereas effort is internal, unstable, and controllable. Thus, when failure is ascribed to low ability, it is seen as a resulting from a fixed characteristic over which the individual does not have volitional control, whereas failure due to lack of effort is viewed as more changeable and thereby under the individual's volitional control: Teachers' perceptions of the causal properties of their students' academic outcomes result in emotions, such as anger and pity (Graham & Weiner, 1986; Weiner, 1986), which in turn lead to action. A number of specific responses by teachers, and the causal properties that lead to them, have been identified by attribution researchers.

Teacher responses to student outcomes

The work of Graham and Weiner (1986) established a linkage between anger/pity and rewards/ punishment. They found that anger or pity are often teachers' first responses following a negative classroom outcome; consequently, teachers are influenced by the degree to which they perceive the student as able to control particular events. Graham and Weiner concluded that classroom teachers may feel anger toward a child whom they perceive as having failed an important test due to a lack of effort, particularly if the child is of high ability, yet they feel pity toward a child who has failed because of his or her low ability. In the case of the child expending low effort, the teacher views the child as being in control of the outcome, and thus feels anger, whereas the teacher perceives the child of low ability as being unable to control the outcome and thus feels pity. Consequently, the teacher will punish the low-effort child more and reward him or her less, but they will reward the low-ability child more and punish him or her less.

Weiner and Kukla (1970) studied the way in which psychology students, assuming the role of teachers, distributed evaluative feedback to hypothetical students completing a test. College and high school student participants were provided with information about a series of hypothetical students' ability (high or low), effort (termed *motivation*; high or low), and degree of success or failure on a classroom test, then were asked to assign reward or punishment appropriate to each student's outcome. In this context, ability and effort act as determinants of success or failure, with outcomes the result of an interaction between the two. Overall, Weiner

and Kukla found, participants were more inclined to reward than to punish, with both effort and ability affecting appraisal of achievement behavior. Two distinct patterns emerged from the data. First, low-ability students expending low effort received less punishment than high-ability, low-effort students. Second, and of particular importance to this discussion, low-ability, high-effort (motivation) students received more reward than high-ability, high-effort students. Weiner and Kukla attributed this finding to a "cultural belief...that the individual who is able to overcome personal handicaps and avoid failure is particularly worthy of praise" (p. 3).

The stability of a cause is highly influential in determining teachers' expectations that an outcome will recur (Weiner, 1985, 1986). Failure due to causes that are viewed as stable, such as low ability, will result in a high expectation that failure will recur, whereas failure due to unstable causes, such as effort or task difficulty, will result in a low expectation of repeated failure. Further, this relationship is somewhat circular in nature: teachers' prior expectations influence their determination of the cause of an outcome, thereby affecting future expectations (Graham, 1991; Weiner, 1985, 1986). The role of student motivation, or effort, is pivotal in determining how teachers set their levels of expectancy for student achievement. Tollefson, Melvin, and Thippavajjala (1990) found that teachers see low motivation (effort) as the principal reason for academic difficulty, with acquired characteristics, such as poor attitude and poor skills, also acting as significant contributors. Tollefson et al. suggested that perhaps teachers view effort in low achievers as relatively stable as compared to that in high achievers. Equally important to our understanding of how teachers respond to the academic outcomes of their students is how students interpret the attributional feedback they receive from their teachers. These attributional messages are powerful sources of information upon which children base their perceptions of their competence as students. (Graham, 1990).

Attributional messages and student performance

Schoolchildren gain information about personal competence, in part, from classroom cues. Often, they base their attributions for success and failure on those cues. Among the most potent of these sources of attributional information is the classroom teacher (Graham, 1990). In a series of developmental studies, Weiner, Graham, Stern, and Lawson (1982) found that teachers' interactions with students can affect the students' perceptions of personal control over success and failure. Students perceive two causal antecedents that originate with teachers as indicators of their level of ability: pity versus anger (emotion) and reward versus punishment (action). Weiner, Graham, Stern, and Lawson proposed the following sequence in response to these findings: A teacher may experience the emotions of anger or pity following student outcomes that are based on his or her expectancies for individual children. These emotions are conveyed to individual children, who may then interpret anger, which implies that the teacher views the child as being in control of the outcome, as a high-ability cue and pity, which implies a child has no control over an outcome, as a low-ability cue. Similarly, students interpret rewards in the face of failure as a low ability cue, because a reward following failure implies that the teacher believes that the child can do no better and should not expect to improve. Punishment following failure is viewed as an indicator of high ability, with the child perceiving the teacher's punishment as an indication that he or she can control such outcomes and thereby is expected to improve them. Weiner, Graham, Stern, and Lawson concluded that this feedback, whether or direct, serves to reinforce students' perceptions of themselves as competent learners when the feedback is positive, or, when it is negative, as learners who cannot be successful. What, then, does this attributional process tell us about how classroom teachers might perceive learning disability and thereby respond to it? To date, no empirical work has examined the causal properties of learning disability as perceived by classroom teachers, nor teachers' responses to learning disability as a cause of achievement outcomes. However, evidence from both the attribution and the learning disability literature may shed some light on how these attributional processes take place in the classroom.

Learning disability as a cause for failure

Consideration of the definition of learning disability in light of Weiner's (1993) discussion of "sin versus sickness" (p. 957) may offer some clues as to how teachers conceptualize learning disability. Weiner identified certain causes of outcomes in life, such as disability, as being sicknesses and others, such as drug abuse, as sins. Sicknesses are conceptualized by most individuals as internal to the individual, generally stable, and outside the control of the individual; therefore, they are seen as worthy of high levels of pity and low levels of anger. Outcomes resulting from these causes are rewarded at high levels and punished at low levels. Conversely, sins

are viewed as unstable and under the control of the individual, and thus they elicit more anger and less pity (Weiner, Graham, & Chandler, 1982); they are viewed as worthy of little reward but deserving of great punishment.

Learning disability is rooted in the traditional medical model of disability, that is, it can be seen as a condition, needing diagnosis, that is centered within the child rather than in the educational environment (Doris, 1993). The current federal definition of learning disability (Federal Register, 1977) and its within-child orientation further supports this view. Although some have begun to challenge this conceptualization (Speece, 1993, 1994), it remains the dominant model for identifying and remediating specific learning disabilities in the classroom (Wang, Reynolds, & Walberg, 1987). It seems reasonable, then, to propose that most teachers will conceptualize specific learning disability as internal to the child, stable, and uncontrollable.

The purpose of the present study was to test basic attributional principles as applied to children with learning disabilities. The author sought to explore to what degree teachers' knowledge of the presence or absence of a learning disability would influence (a) the level of reward or punishment they gave a hypothetical boy based on his ability and effort expended, (b) the pity and anger the teachers felt, and (c) the expectations the teachers held for the child's future failure. Given the previously proposed causal properties of learning disability, teachers can be expected to assign low levels of personal responsibility to children with learning disabilities and thus will hold low expectancies for them. It then can be hypothesized that teachers' anger toward children with learning disabilities will be lower and pity higher than it will be for their nondisabled peers. Further, teachers will reward students with learning disabilities more highly than nondisabled children for success, a contention supported by Weiner and Chuckle's (1970) proposition that higher levels of reward accompany the overcoming of personal handicap. Similarly, it can be hypothesized that less punishment will be assigned to children with learning disabilities who fail in the face of low ability than to nondisabled children; the external, stable, and uncontrollable nature of learning disability may, in fact, invoke a level of pity in teachers that will influence their reward and punishment behavior. Finally, it is hypothesized that teachers will hold higher expectations for future failure by the children with learning disabilities than by their nondisabled peers.

Method

Participants

Ninety-seven general education classroom teachers from public elementary schools in Los Angeles and San Bernardino Counties, California, participated in this study. The participants constituted the faculties of five schools, teaching Grades Kindergarten through 6 (13 men and 84 women; mean years of teaching experience = 13.0, range = 1-40 years). All participants held, at the minimum, a credential to teach at the elementary-school level and a baccalaureate degree. In addition, 30% held at least one postbaccalaureate degree and 10% held one or more additional teaching credentials. Intact faculty groups, rather than a random sampling of teachers within a school district, were used because of individual school district policies requiring study participation be limited to such groups.

Vignettes

Eight vignettes were created, each describing a hypothetical boy who had just taken a typical classroom test and failed. Three types of information were provided in each vignette in the instrument: a statement of student ability, the typical pattern of effort expended by the student in the classroom, and additional information on academic performance identifying four of the boys as learning disabled and four as nondisabled. The boys were matched on ability (high or low), on typical effort (high or low), and on presence/absence of a learning disability (LD /NLD), creating eight Ability x Effort x LD/NLD cells. It should be noted that the vignettes did not specify the reason for the hypothetical boys' failures, so as to stimulate causal thinking on the part of the participants. The low-ability, high-effort, LD vignette read as follows (see the Appendix for the complete text of all the vignettes):

Andrew is a student in your class. He is considered to have lower aptitude for academic tasks than most children in the class. He works slowly, but hard, in class, generally finishing shortened class assignments. His family works with him at home, where he finishes his homework and prepares for school. To help him be successful in language arts and math, he receives services from the Resource Specialist.

The vignettes did not specifically use the terms *high ability* or *low ability*, *high effort* or *low effort*, or *learning disability*, but used language that teachers might be expected to encounter in the school setting to describe the hypothetical boys. Thus, the boys with learning disabilities were identified by describing their participation in the Resource Specialist Program (RSP). In California, RSP is a resource room program, the majority of whose students are children with learning disabilities, and California teachers typically associate RSP with learning disabilities. However, in order to ensure that participants interpreted the vignettes in this way, they were socially validated prior to the study.

Pilot testing

The instrument was reviewed and pilot tested in two stages prior to the study, in order to refine the instrument and socially validate the vignettes. Prior to the pilot study, a group of eight graduate students conducting attribution research in both general and special education contexts reviewed the vignette to validate the level of ability and effort exhibited by each hypothesized boy and to identify which of the boys had learning disabilities. Although they generally concurred, some revisions were made in order to address discrepancies and clarify the vignettes more fully; the students fully concurred on the students' characteristics in the revised vignettes. Following this review, two schools in the Los Angeles area participated in the pilot study, with 29 elementary-school general education teachers completing the instrument. During the pilot, participants were asked to comment on the clarity of the vignettes, any problems they encountered, and changes they would make. They were invited to include any thoughts or ideas that they believed were helpful. Following completion of the instrument, participants were asked to identify what types of children were addressed by the vignettes. Oral and written comments indicated that all the participants perceived the four boys who were served by the Resource Specialist Program as having learning disabilities, with no evidence of confusion with other areas of disability. The instrument was revised in response to the participants' comments.

Dependent measures

Following each vignette, teachers were presented with four questions that asked them to (a) provide evaluative feedback, (b) rate their anger, (c) rate their pity, and (d) rate their expectations following each hypothetical boy's failure. Responses to the four measures were made on Likert scales. Following data collection, a fifth question, asking teachers to predict which of four possible choices -- ability, effort, task difficulty, or luck was the cause of each boy's failure, was dropped prior to data analysis when examination of written comments by participants indicated confusion between the task difficulty and effort selections. In response to the question, "What feedback would you give this child?," teachers provided positive or negative feedback to each student using a single scale running from +5 through +1 (*positive feedback* or *reward*) to -1 through -5 (*negative feedback* or *punishment*). It should be noted that the absence of a zero at the midpoint of the scale forced teachers to provide either negative or positive feedback. To assist teachers in making their ratings, positive points were equated with gold stars given to the child and the negative points with red stars, an analogy used by Weiner and Kukla (1970). On the second measure, teachers rated how much anger they felt toward the student, and on the third measure how much pity they felt for the student. Each measure used a scale ranging from 1 (*very little*) to 7 (*very much*). The fourth measure asked teachers to predict how likely it was that each boy would fail on future tests on a scale running from 1 (*very unlikely*) to 7 (*very likely*). A brief Teacher Data Survey gathered descriptive data regarding age, gender, teaching assignment, education, and experience for each participant. This measure was completed after participants responded to the vignettes, and these data were used to describe the study participants.

Procedure

Data were collected during a faculty meeting in one 1-hour session for four of the participating schools (Schools 1 through 4). Prior to beginning the instrument, participants were briefed on the purpose of the study but not informed of the specific hypotheses. During the briefing, participants were told that the purpose of the study was to study their responses to a group of boys who had just failed a test, and that the study would examine their feedback, affective responses, and expectations based on the information provided by the vignettes. The vignettes were described as containing information on student ability based on typical school indicators, classroom effort, and other relevant information. Written directions for completing the instrument were

provided to each teacher. Directions included a brief overview of the study, a statement of its purpose, and procedures for completing the instrument.

Participants were invited to add any written comments to the instrument they might wish to. While participants completed the instrument, the investigator circulated, answering any questions that arose. A debriefing of participants was conducted immediately following completion of the instrument and data survey. The independent variables, including the hypothesized results, were discussed fully and any questions answered at this time. After all participants completed the instrument, they provided brief information about themselves on the Teacher Data Survey. The directions for the Teacher Data Survey included a guarantee of anonymity and confidentiality.

At the fifth site (School 5), district policy required that the instrument, which included the Teacher Data Survey and the written directions provided to Schools 1 through 4, be distributed to faculty members by the principal and returned to him later; the response rate was 45% ($n = 13$ respondents). Because of the required change in the method of data collection at School 5, the investigator was not present during administration of the instrument. The administrator at the site was briefed as to the purpose of the study prior to the distribution of the instrument to the faculty; however, because the examiner could not be present following data collection, it was not possible to debrief faculty members. Examination of the mean responses to each of the items on the instrument showed only small differences (.2 or less) between Schools 1 through 4 and School 5.

Results

A 2 (Ability) \times 2 (Effort) \times 2 (Disability Status) analysis of variance with repeated measures was conducted for each dependent measure (reward/ punishment, anger, pity, and expectancy of future failure). Means and standard deviations for each measure are presented in Table 1. Of particular interest were the differences between the responses' to the four boys with learning disabilities and those to their nondisabled counterparts on each dependent measure. Planned comparisons using paired tests were performed to assess these differences. An alpha level of .05 was used for all statistical tests.

Reward/punishment

Main effects for ability $F(1,96) = 44.58$, $p < .0001$, were found for reward/punishment. Greater reward and less punishment were given to low-ability boys expending high effort, and to boys with learning disabilities. Of interest were two interaction effects. Although teacher considered both a boy's level of ability and his disability status, $F(1, 96) = 24.17$, $p < .0001$, when giving reward or punishment, the effort expended by the child and his disability status appeared to most strongly influence actual rewards or punishment given, $F(1,96) = 88.25$, $p < .0001$. Thus, reward and punishment for test failure were governed by both the boys' level of ability and the amount of effort they expended, with teachers' knowledge of a child's disability status having a mediating influence on both types of feedback.

As seen in Figure 1, teacher's knowledge of a child's learning disability can be seen to influence both the decision to reward or punish as well as the *amount* of reward given, with the boys with learning disabilities receiving moderate levels of reward in all cases. Two of the four boys with learning disabilities received significantly greater reward: the high-ability/low-effort boy, $t(96) = -11.76$, $p < .0001$, and the low-ability/high-effort boys, the nondisabled boy received slightly more reward, $t(96) = 2.71$, $p < .01$. Further, the greatest reward was given to the low-ability/ high-effort nondisabled boy, whereas the greatest punishment was assigned to the high-ability/low-effort nondisabled boy.

Anger

Significant main effects for ability, $F(1, 96) = 10.20$, $p = .0006$, effort, $F(1, 96) = 273.87$, $p < .00001$, and disability status, $F(1, 96) = 87.78$, $p < .0001$, were found for teacher anger. Anger was greatest when boys were of high ability, when they expended low effort, and when they were nondisabled. Two interaction effects were found. Teachers were particularly angry at non-disabled boys putting forth low effort, $F(1, 96) = 43.55$, $p < .0001$. Similarly, an interaction between ability and disability status was found, with anger being rated highest for high-ability nondisabled boys, $F(1, 96) = 6.46$, $p < .01$. In sum, teachers rated their anger with the boys with learning disabilities as lower than they did for their nondisabled peers. The level of ability of a boy with learning disabilities' can have some influence on a teacher's anger toward him, with teachers rating their anger somewhat lower for the low-ability than the high-ability boys. Effort expended is highly influential (see Figure

2); boys expending high effort elicited far less anger than their low-effort peers. Rated anger indicated that boys with learning disabilities, in most cases, elicited less anger than did their nondisabled peers, when matched by ability and effort: high-ability /high-effort boys, $t(96) = 2.92, p < .01$; high-ability /low-effort boys, $t(96) = 8.63, p < .0001$; and low-ability / low-effort boys, $t(96) = 6.54, p < .0001$.

Pity

As with anger, significant main effects were found for ability, $F(1, 96) = 77.98, p < .0001$; effort, $F(1, 96) = 68.17, p < .0001$; and disability status, $F(1, 96) = 35.90, p < .0001$. Pity was greater toward low-ability boys, toward boys expending high effort, and toward boys with learning disabilities. A three-way interaction shows that ability, effort expended, and learning disability influenced the pity teachers felt toward a boy who had failed, $F(1, 96) = 14.25, p = .0003$. Boys with learning disabilities generally elicited more pity than their nondisabled peers when they failed a test.

As shown in Figure 3, only the low-ability /high-effort boys received the same amounts of pity, regardless of their disability status. Pity was rated as greater for the boy with learning disabilities in all the other pairs, with the high-ability /high-effort boys, $t(96) = -4.93, p < .0001$; high-ability /low-effort boys, $t(96) = -2.47, p < .02$; and low-ability / low-effort boys, $t(96) = -5.31, p < .0001$, eliciting greater pity when the boys had learning disabilities than when they were nondisabled.

Expectancy of future failure

Significant main effects for ability, $F(1, 96) = 156.06, p < .0001$; effort, $F(1, 96) = 140.34, p < .0001$; and disability status, $F(1, 96) = 115.98, p < .0001$, were found. Teachers held higher expectations that boys with learning disabilities, particularly those of low-ability or expending low effort, would fail again. Similarly, nondisabled boys of low ability or expending low effort were considered more likely to fail in the future. As with pity, a three-way interaction for ability, effort, and a child's learning disability showed that each of these factors plays a role in shaping a teacher's expectations of a child's future failure, $F(1, 96) = 49.14, p < .0001$. Thus, teachers believed that the high-ability, high-effort nondisabled boy was least likely to fail, and the low-ability, low-effort boy with learning disabilities most likely to fail, in the future.

As shown in Figure 4, teachers rated the boy with learning disabilities as more likely to fail in three of four instances: the high-ability / high-effort pair, $t = -11.35, p < .0001$; low- ability / high-effort pair, $t = -4.90, p < .0001$; and low-ability /low-effort pair, $t = -2.50, p < .01$.

Q. 5 Write short note on the following:

Observations

ANS:

Observation, as the name implies, is a way of collecting data through observing. Observation data collection method is classified as a participatory study, because the researcher has to immerse herself in the setting where her respondents are, while taking notes and/or recording.

Observation as a data collection method can be structured or unstructured. In structured or systematic observation, data collection is conducted using specific variables and according to a pre-defined schedule. Unstructured observation, on the other hand, is conducted in an open and free manner in a sense that there would be no pre-determined variables or objectives.

Advantages of observation data collection method include direct access to research phenomena, high levels of flexibility in terms of application and generating a permanent record of phenomena to be referred to later. At the same time, observation method is disadvantaged with longer time requirements, high levels of observer bias, and impact of observer on primary data, in a way that presence of observer may influence the behaviour of sample group elements.

It is important to note that observation data collection method may be associated with certain ethical issues. Fully informed consent of research participant(s) is one of the basic ethical considerations to be adhered to by researchers. At the same time, the behaviour of sample group members may change with negative implications on the level of research validity if they are notified about the presence of the observer.

- **Portfolio assessment**

ANS: *Portfolio assessment* is a term with many meanings, and it is a process that can serve a variety of purposes. A portfolio is a collection of student work that can exhibit a student's efforts, progress, and achievements in various areas of the curriculum. A portfolio assessment can be an examination of student-selected samples of work experiences and documents related to outcomes being assessed, and it can address and support progress toward achieving academic goals, including student efficacy. Portfolio assessments have been used for large-scale assessment and accountability purposes (e.g., the Vermont and Kentucky statewide assessment systems), for purposes of school-to-work transitions, and for purposes of certification. For example, portfolio assessments are used as part of the National Board for Professional Teaching Standards assessment of expert teachers.

The Development of Portfolio Assessment

Portfolio assessments grew in popularity in the United States in the 1990s as part of a widespread interest in alternative assessment. Because of high-stakes accountability, the 1980s saw an increase in norm-referenced, multiple-choice tests designed to measure academic achievement. By the end of the decade, however, there were increased criticisms over the reliance on these tests, which opponents believed assessed only a very limited range of knowledge and encouraged a "drill and kill" multiple-choice curriculum. Advocates of alternative assessment argued that teachers and schools modeled their curriculum to match the limited norm-referenced tests to try to assure that their students did well, "teaching to the test" rather than teaching content relevant to the subject matter. Therefore, it was important that assessments were worth teaching to and modeled the types of significant teaching and learning activities that were worthwhile educational experiences and would prepare students for future, real-world success.

Involving a wide variety of learning products and artifacts, such assessments would also enable teachers and researchers to examine the wide array of complex thinking and problem-solving skills required for subject-matter accomplishment. More likely than traditional assessments to be multidimensional, these assessments also could reveal various aspects of the learning process, including the development of cognitive skills, strategies, and decision-making processes. By providing feedback to schools and districts about the strengths and weaknesses of their performance, and influencing what and how teachers teach, it was thought portfolio assessment could support the goals of school reform. By engaging students more deeply in the instructional and assessment process, furthermore, portfolios could also benefit student learning.

Types of Portfolios

While portfolios have broad potential and can be useful for the assessments of students' performance for a variety of purposes in core curriculum areas, the contents and criteria used to assess portfolios must be designed to serve those purposes. For example, *showcase portfolios* exhibit the best of student performance, while *working portfolios* may contain drafts that students and teachers use to reflect on process. *Progress portfolios* contain multiple examples of the same type of work done over time and are used to assess progress. If cognitive processes are intended for assessment, content and rubrics must be designed to capture those processes.

Portfolio assessments can provide both formative and summative opportunities for monitoring progress toward reaching identified outcomes. By setting criteria for content and outcomes, portfolios can communicate concrete information about what is expected of students in terms of the content and quality of performance in specific curriculum areas, while also providing a way of assessing their progress along the way. Depending on content and criteria, portfolios can provide teachers and researchers with information relevant to the cognitive processes that students use to achieve academic outcomes.

Uses of Portfolios

Much of the literature on portfolio assessment has focused on portfolios as a way to integrate assessment and instruction and to promote meaningful classroom learning. Many advocates of this function believe that a successful portfolio assessment program requires the ongoing involvement of students in the creation and assessment process. Portfolio design should provide students with the opportunities to become more reflective about their own work, while demonstrating their abilities to learn and achieve in academics.

For example, some feel it is important for teachers and students to work together to prioritize the criteria that will be used as a basis for assessing and evaluating student progress. During the instructional process, students

and teachers work together to identify significant pieces of work and the processes required for the portfolio. As students develop their portfolio, they are able to receive feedback from peers and teachers about their work. Because of the greater amount of time required for portfolio projects, there is a greater opportunity for introspection and collaborative reflection. This allows students to reflect and report about their own thinking processes as they monitor their own comprehension and observe their emerging understanding of subjects and skills. The portfolio process is dynamic and is affected by the interaction between students and teachers.

Task analysis

ANS; Definition: Task analysis is a business methodology of analyzing employee tasks to improve the way core business processes are being run within a company, helping organizations to become more efficient. Task Analysis enables the effective management of employee's tasks using accurate working time recording, monitoring and analysis.

Only through analysis of the data that you can begin to understand employee behavior, identify working trends and discover where work can be made more efficient.

Together these enable to accurately model and predict future employee behavior and lay a foundation for improving business performance.

Task Analysis Lifecycle

Task analysis activities are grouped into five categories: time recording, prioritization, monitoring, analysis and optimization:

Time Recording is where the actual time for each of the activities is recorded.

Time can be recorded by the employees themselves or by automatic time data collection.

Precise account of working time according to definable rules, recorded in real-time.

Prioritization is where the strategic decisions are carried out.

Priorities are refined based on importance and urgency.

Employee resource planning and task scheduling is set across all employee activities.

Monitoring measures task-related performance using key performance indicators to monitor how the strategy is performing.

Monitoring uses three main parameters; Time, Priority and Cost.

Understanding where the inefficiencies in the process are key for future improvement.

Analysis is the most critical to lifecycle success.

The aim of this stage is to analyze the records gathered through monitoring and to compare them with an a priori time plan.

Analysis enables to detect discrepancies between the time plan execution and the a priori model, as well as to analyze bottlenecks.

Optimization is where strategic decisions and priorities are refined based on the the analysis.

Employee resource planning and task scheduling is revised and integrated across all employee activities.

This cycle is then looped for continuous task analysis improvement.

Task Analysis Methodology

Track and record employee tasks and time

Search for repetitive tasks rework and churn

Locate bottlenecks, risks and prioritization issues

Task analysis combines the methodologies of task management, risk management and time management

BPM - Business Process Management

CRM - Customer Relationship Management

ERP - Enterprise Resource Planning

BI - Business Intelligence

Task Management Strategies

Task management strategies define the ordering the employee tasks to improve employee performance.

The decisions focus on deciding on order of task completion. Completing the top difficult tasks earlier enables an easier and less stressful effort to complete the rest of the tasks:

Cycling Downhill - Completing the most difficult task first, then the next most difficult task following in the

list, and so on.

Prioritizing by Importance - Completing the most important task first, then the next most important task following in the list, etc.

Prioritizing by Urgency - Completing the most urgent task first, then the next most urgent task following in the list, etc.

Eisenhower Method - Completing tasks in order of importance from the bottom upward.

Task Analysis - Goals

Task analysis makes it possible to understand:

- What your business goals are
- What employees do to reach those goals
- What encounters Employees bring to the table
- How environment factors influences getting tasks completed
- A breakdown of the workflow that is being followed

When to execute a Task Analysis

It's essential to perform a task analysis in the very beginning of your developmental process, in particular before design work. Task analysis helps support several other characteristics of the user-focused design procedure, including:

- Information gathering
- Business construction and your content strategy
- Wire framing and Prototyping
- Performing usability testing

The best way to complete a Task Analysis

Your task analysis could have several degrees of issues question, from general to quite specific. With internet metrics evaluation, competitive analysis, and market research, you will be able to identify top priority goals through various research techniques.

Breaking down the process for decomposing a high-level task, the next steps are:

- Identify the task to be assessed.
- Break this high-level job down into 4 to 8 subtasks.
- Draw a layered task diagram of each jobs ensuring it is not incomplete
- Create a written account together with the decomposition diagram.
- Present the analysis to another person who has not been associated with the decomposition but who understands the tasks well enough to assess for consistency.

Task analysis is a fundamental methodology in the assessment and reduction of human error. There are a large variety of distinct Task and it impracticable to describe all these techniques here. Instead, the intention would be to describe methodologies that are representative appropriate to different types of jobs.

The term task analysis (TA) can be applied quite broadly to encompass a wide variety of individual techniques. Nearly all task analysis techniques provide at a minimum, a description of the observable behavior in detail, with few other indicators of how the task is arranged.

Techniques focus in the mental processes which underlie observable behavior, e.g. decision making and problem solving. These will be referred to as cognitive strategies. TA procedures can be used to get rid of the preconditions before they happen, that give rise to mistakes. They are sometimes used as an aid in the design period of a brand new system, or the modification of an existing system. They may also function within an audit of a current system. Task analysis could also be utilized in a retrospective mode throughout the detailed investigation of important incidents. The starting point of this kind of investigation should function as the methodical description of the events. Where the incident was really carried out and when the incident happened.

Benefits of Task Analysis

While it might seem obvious to some, long-term investigation and analysis into each and every aspect of a business should be commonplace throughout any industry. Regardless of what you offer or sell, there is always something that can be improved, and more of the market that can be taken in and controlled.

Task analysis allows a definition of what the expected outcome of any given situation is, and allows for staff to know what they should be aiming for more regularly - and what they should not be doing, also.

Cutting Out Errors

It helps cut out mistakes and common procedural errors that can be made, totally unaware of their consequences. One of the most powerful aspects of task analysis, though, is the massive amount of time that it allows people for to actually get to grips with modern working reality.

Many of us steam headlong into tasks without any real depth of knowledge or understanding of what we are doing - this is not good news! When analysis is used, though, we can save huge amounts of time by coming to the right conclusion at the first time of asking.

Task Analysis Approach

Task analysis represents the way of analyzing the accomplishment of a task, and it includes a detailed description of manual and mental activities. Additionally, it also includes information about the duration of the task, its frequency, its complexity, the environmental conditions, and many other factors that are important for this process. There are several purposes of this process, and among them we can mention personnel selection and training.

If you are working into a company and you have several employees, it is advisable to perform task analysis in order to see their performance. In this way you will be able to help them develop, and additionally you might find several problems that should be fixed. If you do this, you will be able to increase the success of a company. It is not easy to be a manager, especially because you have a lot of responsibility, and therefore you will have to do your best in order to obtain the best results. Since you have many employees, it might be difficult to know them all, and additionally it is hard to know their weaknesses and strengths. If you want to make sure that everyone is working properly, using their best resources, you should spend more time analyzing their behavior. However, this might be difficult to do, especially because you do not have too much time.

On the other hand, if you gather groups of people, you can start using task analysis in order to see their performances in different kind of situation. For better results, you should film the entire exercise. In this way you can see the way they communicate and related to each other, the way they dress, and the way they solve problems. According to the results, you can make suggestions, you can analyze them individually if necessary, and you can also get to know them in a better way, learning what they like and dislike.

There are many managers who have succeeded to increase the success of their companies thanks to task analysis, and right now you have the possibility to do the same thing, and therefore you should not be afraid to try it. After all, you can easily establish a new and improved connection with people working at the same company. In this way you will have a better understanding of their personalities, and therefore you will be able to assign tasks according to this. You will see that it is only a matter of time until you see results.

As you can see, task analysis has many benefits that should be taken into account, and therefore you should start trying it on your own. After all, this is not a difficult process, and it can be performed in a simple manner by anyone. In this way you will help your employers to develop, and therefore the company will also develop.

Now that you have all this information you should go for it, and therefore you might be able to change something.

When it comes to trying to manage a business and find the solutions to weaknesses or problems, one of the most common issues is time. Patience is something that not many businesses are willing to have when competition could be eating up the market - but when time is taken, the right decisions are made and there can be a significant improvement to performance.

- **Post referral assessment**

ANS: Because of the federal laws and regulations that govern the education of students with disabilities, a process has evolved over time that governs the special education referral process. The purpose of this module is to provide an overview to the “Special Education Process” so that the learner may understand the global procedures for providing a student with disabilities a free and appropriate education (FAPE).

PHASE ONE: Recognition

All students begin their educational careers with needs. For many, it is the need for guidance by a professional educator who can expand their knowledge and understanding of the world around them. While each student brings a different level of knowledge and skills to his or her first class, the individual’s needs are typically met by a highly-qualified educator. However, there are children who have unique needs that are atypical for children of their age and may not be within the expertise of the general education classroom teacher. It is during this time that the teacher (or parent, administrator, or counselor) recognizes a consistent need or problem exhibited by the student. The recognition of a discrepancy in the student’s academic, social/emotional, behavioral, and/or physical ability and his or her age may signal the need for additional academic or behavioral supports.

During this phase, *it is important to call a meeting with the parents or guardians*. The teacher should provide examples of the student’s work and/or anecdotal classroom notes regarding the student’s needs. In the meeting, the teacher and the parent/guardian should explore the following:

- Is the issue a recurrent problem or new? The parents will be best able to present invaluable insight into the knowledge, skills, and needs of their child. The teacher should document when they recognized an issue.
- Is the issue constant? All children may exhibit unique needs or problems at some point but it may only be an isolated episode for that day. The teacher should document any issue that is constant, providing dates and information about the behavior of concern or skill deficit exhibited by the student.
- Is the issue appropriate for children of this age? How many kindergarten students have been seen crying the first days of school? This behavior is a typical occurrence and should not be confused with an atypical behavior. The teacher should have a strong understanding of the cognitive, behavioral, and physical development levels of typical students they teach.

It is possible that the problems that are being exhibited by the student may be “solved” with the careful execution of a cooperative plan of action between the teacher and the parents. The teacher and the parent should document their plan of action, strategies utilized with the student, and progress. The teacher should continue to collect student work samples and keep assessment data relevant to the student’s unique needs. It is critically important that the teacher document all actions and strategies used in the classroom and the impact on the student.

The student’s *parents/guardians should be kept informed of any changes in the student’s progress*. If the teacher, after a period of time, determines the problem cannot be controlled with simple classroom interventions, then the teacher should notify the parents/guardians that they will be asking for outside help from a school-based pre-referral team.

PHASE TWO: Pre-referral

The pre-referral step in the special education process is more formal than providing simple and temporary accommodations for students. Pre-referral intervention is to identify, develop, and implement alternative education strategies for students who have recognized problems in the classroom before the student is referred to special education. Pre-referral intervention is typically conducted by a Student Centered Team (also called early intervention team, intervention assistance team, student support team, teacher assistance team, or instructional support team). The pre-referral team usually consists of the teacher, the parents/guardians, an administrator, other general education teachers, nurse, guidance counselor, and any other adult involved in the education of the student. The general education teacher provides background information regarding the problem exhibited by the student and the team works together to develop possible solutions.

Because of changes to IDEA in 2004, many states and independent school districts have begun using a more formal and systematic pre-referral process called **response to intervention (RTI)**.

“RTI is a model designed to address the needs of all children through a continuum of services, which include:

- High-quality instruction and tiered evidence-based or practice-based intervention strategies aligned with individual student needs;

- Frequent monitoring of progress to make results-based academic or behavioral decisions; and
- Application of child response data to important educational decisions (such as those regarding placement, intervention, curriculum, and instructional goals and methodologies)” (TEA, 2007).

RTI provides three levels of intervention for students who are experiencing problems. Generally, the first level (sometimes referred to as Tier 1) is focused on utilizing high-quality general education instruction in the core curriculum with all students. RTI theorizes that around 80% of all students will respond positively to core curriculum and behavior systems. The second level (or Tier 2) provides targeted group instruction or some form of group remediation to improve performance. The RTI model believes that second level services will improve performance for approximately 15% of all students. If performance does not improve in the second level, then students are moved to the third level which consists of intensive, individualized interventions.

Whether the school uses pre-referral teams or the more formal RTI process, the intent is to provide interventions that will help the student achieve success without entering special education. However, if these interventions do not improve the student’s performance, then the student will be referred for an assessment to determine possible eligibility for special education services.

PHASE THREE: Referral for Special Education Evaluation

If, after interventions in the general education classroom, the student continues to experience difficulty, school personnel may refer the child for a special education evaluation. Referrals for determination of eligibility for special education services may be initiated by:

- School personnel (including general education teachers, special education teachers, counselors, administrators, etc.);
- Child’s parent(s) or legal guardian(s);
- Any other person involved in the education or care of the child.

The official referral begins the formal process of determining eligibility for special education services. Once a referral is provided, the school must obtain consent from the parent(s) or legal guardian(s) to begin the evaluation phase of the referral process.

PHASE FOUR: Special Education Evaluation

IDEA requires that students referred for special education services receive a nondiscriminatory multi-factored evaluation. The school district is required to complete the evaluation within 60 days of the referral date. The evaluation is to be conducted by a multidisciplinary team that will consist of individuals who can bring different perspectives and expertise to the evaluation. Some examples of team members include:

- Educational Diagnostician (also called Psychometrist) or School Psychologist: These professionals are qualified to conduct all types of educational assessments including intelligence (IQ), achievement, behavior, etc.
 - Special Educators: These individuals are qualified to conduct some types of achievement and behavior evaluations as well as informal observations.
 - General Educators: These individuals provide documentation of the problems of the specific student.
 - Parent(s) or Legal Guardian(s): The parents or legal guardians provide valuable insight into the student’s behavior and personality in other environments.*
 - Related Service Providers (Physical Therapist, Occupational Therapist, Audiologist, Orientation and Mobility Specialist, etc.): These specialists provide information pertaining to specific areas of concern that have been assessed.
 - Medical Doctors (including psychiatrists, ophthalmologists, and optometrists): Depending on the disability of the student, medical records can also be used in the determination of eligibility for special education services.
- * Parents of students with developmental disabilities must decide whether to complete the legal process to become the legal guardian once their child reaches 18 years old, the age of majority. According to Texas state law, this process is separate from the required school transition planning process.

The evaluation must be comprehensive and use evaluation tools and strategies that are technically sound and accepted. Most students receive a battery of formal evaluations that measure:

- Intelligence
- Achievement
- Behavioral

- Disability-specific issues
- Medical

However, informal observations and documentation of the student's past work should also be used during the eligibility determination meetings. Assessments may not be biased in regard to race, culture, language, or disability. The materials and procedures must be administered in the language and form most likely to provide accurate information on what the child knows and can do.

PHASE FIVE: Eligibility (FAPE)

IDEA states that each child is entitled to a Free Appropriate Public Education (FAPE.) Special education services are one way to accomplish that requirement for some students with disabilities. Within 30 days of the completion of the evaluation, the individuals that took part in the process thus far will meet to determine eligibility. In simple terms, a student is considered eligible for special education services if (1) the child has a disability as defined by IDEA which negatively impacts his/her educational performance, and (2) the child needs special education services in order to benefit from education.

Not all students are determined to be eligible for special education services. There are multiple reasons why a student may not qualify for special education services including not having a disability that negatively impacts his or her education. However, these students may need help to access the academic curricula. In these situations, the school will need to work out a plan to provide other services for the student.

If the team determines that the student is eligible for special education services, then a formal Individualized Education Program (IEP) team will be formed to develop a plan of special education services for the student.

PHASE SIX: IEP Meeting (IEP and LRE)

The Individualized Education Program (IEP) is a *legal contract between the parents and the school district* that describes the special education services to be provided by the local education agency which is the local school district. While IEP documents vary, the basic parts of an IEP include:

- A student profile that provides background information about the student. The profile will include strengths and weaknesses of the student, information regarding performance in the classroom and on formal assessments, and the reason he or she is receiving special education services.
- IEP initiation and duration dates: the goals expressly stated in an IEP begin on the date, stated in the IEP meeting, and are in effect until the date stated in the IEP. These IEP goals are reviewed, monitored and updated based on student progress. For most students, IEP goals are in place for one academic year.
- A statement of "special instructional factors" (such as the need for assistive technology, braille, or transition services). If the student requires any of the special instructional factors, they should be addressed in the IEP.
- A statement of special transportation needs;
- A statement of opportunities to participate in nonacademic and extracurricular activities with their non-disabled peers
- A statement of the frequency and method of reports of goal attainment for parents or guardians.
- Benchmark pages are included and focus on specific areas that need special education services (such as reading, math, PE, etc.). The benchmark pages include: Present Levels of Academic Achievement and Functional Performance (PLAAPF) statements,
- Measurable Annual Goals,
- Evaluations used to measure annual goals,
- Benchmarks to be achieved to meet the annual goals,
- Special education and related services needed to achieve the annual goal (includes frequency of services, amount of time, location, and responsible agencies).
- A Behavior Intervention Plan (BIP) if the student's behavior is a concern and a functional behavioral assessment has been done or needs to be conducted,
- For students 16 years and older; the plans and activities for the student's transition from high school will be addressed
- The signature page which provides a statement of least restrictive environment (LRE) and has the signatures of all members present at the meeting.

The benchmark pages are the “meat” of most IEPs and can be developed by any member of the team. Typically, these pages are developed by the special education teachers in collaboration with the parents, general education teachers, related service providers, and behavioral specialists.

In some school districts, the IEP meeting may be referred to as the ARD meeting. ARD stands for Admission, Review, and Dismissal. The IEP team (also called IEP committee or ARD committee) is formed for the purpose of 1) developing the IEP, the formal plan of special education services; 2) overseeing the implementation of the plan, 3) evaluating the effectiveness of the plan annually, and 4) developing future plans as needed. The IEP team can also meet as needed when unique issues present themselves during the academic year (such as with behavior issues).

The IEP team is composed of the following:

- The **parent(s) or legal guardian(s)** of the student with a disability;
- At least **one general education teacher** of the student if the student is or may be participating in the regular education environment for any classes;
- At least **one special education teacher** of the student or a special education provider of the student;
- **A representative of the local educational agency (LEA)** who is (1) qualified to supervise the needs of the student, (2) is knowledgeable of the general curriculum, (3) is knowledgeable about the availability of resources of the public agency, and (4) has the authority to commit agency resources; This person is frequently a principal or assistant principal of the student's campus.
- **An individual who can interpret the instructional implications of evaluations** (typically an educational diagnostician, school psychologist, or specially-trained special education teacher);
- **The student**, when appropriate; and
- **Other individuals asked to attend at the discretion of the school or the parent** who have knowledge or special expertise regarding the student (such as related service providers and/or family members or family friends maintaining a close relationship with the student). Parents also have the right to invite an advocate if they so desire.

Depending on the age of the student, other individuals may be included in the meeting including rehabilitation or transition service providers or early intervention representatives.

PHASE SEVEN: IEP Implementation

Once the IEP is developed and signed by members of the IEP team it is the responsibility of the entire IEP team to ensure that the IEP is implemented. The IEP team may meet as frequently as needed to discuss the implementation of the IEP. School personnel are required to provide documentation of the mastery of benchmarks and annual goals. The IEP document is a “living” document and can be altered during the school term if needed. The IEP goals and benchmarks provide the objectives for the education of the student and prescribe what services will be provided by the local school district and school campus to achieve those objectives. However, it must be understood that school agencies are not required to meet all the goals within the school term, but they must provide evidence of a “good faith effort” toward achieving the goals.

PHASE EIGHT: Reevaluation

Each year, the IEP team is required to meet for the dual purpose of evaluating the implementation of the current IEP and to develop the next annual IEP. During these annual meetings, the IEP team should discuss the positive and negative elements of the special education services provided and determine, based on any new assessment data, what services should be provided in the upcoming school year.

While the IEP is redeveloped each year, the IEP team does not have to conduct the battery of assessments each year. At a minimum, the IEP team is to determine if formal evaluation is required every three years. However, the IEP team can ask that formal evaluations be conducted more frequently if needed.

There are times when, after the reevaluation takes place, it is determined that the student does not need special education services. One example of this might be young children who are provided speech and language services and have developed the ability to speak without problems. In this case, the IEP team will need to file appropriate documentation to support the fact that the student no longer is eligible for services and the IEP team will disband for this student.