Maria is a quiet 4-year-old who smiles a lot. She has severe hearing loss in both ears, no vision in her left eye, limited vision in her right eye, and significant developmental delays. Maria can walk with minimal assistance but needs physical guidance to interact with other people and participate in the world around her.

Accurate assessment of the educational abilities and needs of children like Maria, who have complex disabilities that include hearing and vision loss, is essential in order to provide educational programs that match their abilities and learning styles. This publication describes a comprehensive approach to assessment known as authentic assessment, which can be used with children who are deaf-blind or have multiple disabilities.

Authentic assessment involves obtaining information about children in their everyday environments during normal activities. It provides a way to learn what children know and can do, as well as the types of situations and settings that encourage them to learn. It emphasizes identifying a child’s strengths, which serve as building blocks for further development and skill acquisition.

This issue of Practice Perspectives is adapted from a manual called Assessing Communication and Learning in Young Children Who Are Deafblind or Who Have Multiple Disabilities (Rowland, 2009). The manual is available for free online at www.ohsu.edu/oidd/d2l/com_pro/DeafBlindAssessmentGuide.pdf.

Assessing communication and learning in children who are deaf-blind can be challenging even for experienced professionals. Combined vision and hearing loss and, for many children, additional disabilities limit the range of communication methods available to them. Many express themselves in subtle ways that are easily overlooked. Assessment of children who are deaf-blind must consider each child as an individual, rather than focus on the extent to which a child differs from the "norm."

There are so many issues involved in assessing children who are deaf-blind that the task is best approached as a process of discovery—discovering the competencies of children whose abilities and limitations are truly unique. This type of assessment takes considerable time, planning, and effort, but is essential for each child’s educational and personal success.

Key Points

- Assessment is the starting point of a child’s education.
- Family involvement in the assessment process is essential.
- Information should be gathered using a combination of techniques including interviews with people who know a child well, informal and structured observations, and evaluations by specialists.
- Assessment of children who are deaf-blind must go far beyond the use of assessment instruments.
- Standardized tests may be necessary to qualify a child for services but are inappropriate as tools to guide educational planning.
Adopting an authentic assessment approach means understanding that children’s abilities, interests, preferences, and surroundings influence how they learn. During an assessment, information gathered about a child should include:

- communication, social, and motor skills;
- type and severity of vision and hearing loss;
- likes and dislikes;
- temperament;
- cognitive development;
- activities, places, people, and times of day in which a child functions best; and
- situations that present difficulties for a child.

The following describes important steps involved in using an authentic assessment process to gather this information.

**Identify the Assessment Team**
The assessment process involves many people working together as a team including family members, teachers, related service professionals, deaf-blind specialists, psychologists, and other professionals as appropriate for an individual child. Team members have varied areas of expertise and bring different concerns, questions, and insights to the assessment process.

**Arrange for Family Involvement**
Family input and participation is essential. Each child is part of a unique family system and family members have valuable information about their child. Sharing this information will lead to more accurate assessments and to educational strategies that promote learning and development at home and at school.

**Conduct Informal Observations in Multiple Settings**
A great deal can be learned by observing children in a variety of settings as they interact with people they know well and are engaged in familiar tasks. For example, a child’s greeting behaviors may be easily observed at home when big sister returns from school. At snack time, you might watch to see how a child rejects something by offering a food that he or she dislikes. Observations should focus on specific areas of interest such as social interactions with peers, participation in classroom learning activities, the ability to express needs and interests, and exploration skills.

**Conduct Structured Observations**
Structured observations are useful in evaluating skills that a child may not perform in typical settings. For example, if a child has a one-to-one assistant who is typically close by, it may not be clear whether the child...
can gain the attention of someone at a distance. It might be necessary to set up a situation where the assistant withholds attention and is far enough away from the child that the child must make an effort to gain the assistant’s attention. You may discover that a child has skills you didn’t know about when the environment is engineered to make it necessary and worthwhile to use them.

Select Appropriate Assessment Tools
Although standardized tests for typically developing children have limited value for children with deaf-blindness, there are assessment tools that have been specifically designed for children who are deaf-blind or have other disabilities. These tools cannot replace strategies such as family interviews and informal and structured observations, but they may be helpful for organizing data-gathering efforts and summarizing a child’s skills, interests, and challenges. The manual Assessing Communication and Learning in Young Children Who Are Deafblind or Who Have Multiple Disabilities, describes a number of these tools and provides advice about how to evaluate the appropriateness of an assessment tool for a particular child.

Request Evaluations by Specialists
Children who are deaf-blind have varying degrees of hearing and vision loss, but most have some hearing and/or vision available. The choice of communication methods depends to a large degree on a child’s vision and hearing capabilities, cognitive abilities, and motor skills. Speech-language pathologists who specialize in augmentative and alternative communication, experts in vision and hearing, and occupational and physical therapists will often be able to contribute crucial information to the assessment process.

Problems with Standardized Tests
Standardized tests measure how a child’s skills compare to typically developing children. They are sometimes required by state and local regulations and may serve a useful role in determining eligibility for special services. However, they are often inadequate as tools to guide educational planning for children who are deaf-blind. If a child tests below the first percentile for a skill on a standardized test, it only means that the child is below nearly all typically developing children on that skill. This is not surprising, given the complexity and severity of deaf-blindness.

The most important assessment goal is to gain an understanding of a child’s real-life skills and understanding of concepts. It is less critical to obtain scores such as age equivalencies or IQs. Saying that an 8-year-old child is “functioning on a 12-month level” minimizes the skills and progress that the child has achieved over 8 years and promotes the wrong assumption that the child experiences the social and physical world as an infant does.

Putting It All Together
Once all of the assessment information has been gathered, the pieces must be put together in order to understand the child and how he or she learns. Assessment information is used to:

♦ develop an educational program that fits a child’s strengths, needs, and learning style;
♦ design interventions that enhance learning; and
♦ document a child’s progress over time.

The wealth of information collected should also provide insight into factors that profoundly affect learning for children with vision and hearing loss. This includes the way a child is positioned during activities and environmental factors that may either enhance or inhibit learning, such as lighting, background noise, and distractions. See the manual for an example of how Maria’s assessment results were analyzed and used to develop her educational program.
Assessment Research Project

This issue of Practice Perspectives was adapted from the following manual:

The manual is free online (www.ohsu.edu/oidd/d2l/com_pro/DeafBlindAssessmentGuide.pdf) or by contacting NCDB (see contact information below). It contains detailed information about conducting assessments with children who are deaf-blind.

The manual was an outcome of a 5-year research project called “Validation of Evidence-based Assessment Strategies to Promote Achievement in Children who are Deafblind,” funded by the U. S. Department of Education (Grant #H324D030001). For more information on this project, go to www.ohsu.edu/oidd/d2l/com_pro/db_assess_ab.cfm. The project researchers were Deborah Chen, Ph.D., California State University-Northridge; Harvey Mar, Ph.D., Columbia University; Charity Rowland, Ph.D., Oregon Health & Science University; Robert Stillman, Ph.D., University of Texas at Dallas; and the National Family Association for Deaf-Blind.

Other Resources


For additional resources, visit the NCDB website (www.nationaldb.org) and view the Selected Topic: “Assessment-Overview,” or contact DB-LINK Information Services at NCDB (see NCDB contact information to the left).

This publication was prepared by Peggy Malloy (NCDB). Design and layout by Betsy Martin-Richardson (NCDB). The second photo on page 2 and the first photo on page 3 are courtesy of Brad Carlson.

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