

**Being a perceptive
reflective detective: a multi-
sensory approach to
assessment & learning**

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“These new insights of neuroscience are exciting beyond measure, but there is always a certain danger that the simple art of observation may be lost, that clinical description may become perfunctory, and the richness of the human context ignored”

Oliver Sacks “Musicophilia” (2007) Preface

Proposition 3

That a successful & appropriate educational program begins, and depends upon, skilled assessment which is flexible, on-going, and sensitive. Every child with deafblindness can be assessed successfully provided the people doing the assessment know what they are doing.

Types of Assessment Questions

Will she be able to get a job/ drive a car/ live independently?

Can he stack 3 one-inch blocks, sort shapes & colors?

What do you do?

**Why do people assess
children with
deafblindness?**

Typical purposes of assessment

- To determine need, or eligibility, for services.
- To provide a baseline of current skills, knowledge, and perhaps experiences.
- To identify supports & services needed by the child.
- To provide a guide for intervention and instructional techniques to help the child develop more skills and knowledge.
- To measure the child’s growth and skills based upon normative standardized groups or results.
- To evaluate effectiveness of educational program.
- To present the child to other people.

David Brown (2014) *“What does ‘Follow the Child’ mean?”*. California Deafblind Services reSources, Volume 19, No. 1. Spring, 2014.

Julie Maier (2014). *Capacity or deficit? The lens we use to view students does a make a difference*. California Deafblind Services reSources, Volume 19, No. 1. Spring 2014.

“Assessing Communication and Learning in Young Children Who are Deafblind or Who Have Multiple Disabilities”

Edited by Charity Rowland, Ph.D.
and published in 2009 by Design to Learn Projects
of Oregon Health & Science University.

<https://www.designtolearn.com/uploaded/pdf/DeafBlindAssessmentGuide.pdf>

Challenges to the Assessment Process

- Deafblindness presents a very diverse and complex population of learners
- Deafblindness presents a wide variety of idiosyncratic behaviors
- People doing assessments usually only know one type of assessment process
- There are limited resources and assessment tools available
- People doing the assessment often forget “The reason why” of assessment

What might be going wrong with an assessment? (1)

- A focus on deficits rather than abilities
- Ignoring the child’s motivators
- The pacing is inappropriate for the child, their health, their alertness level, the time of day, the place, the activity, the people present, & the materials used
- The task is too complicated and too challenging
- Too serious – where’s the play?
- The expectation that the child will ‘Pass or Fail’

What might be going wrong with an assessment? (2)

- Inappropriate assessment tools
- Mimicry of standardized clinical assessment procedures (timing, positioning, materials, expected outcomes)
- Lack of a whole-child perspective
- The assessor is wearing blinders (“This is what I want to see, now!”)
- The assessor is assessing the wrong things
- What is a response?

Hypothetical children

- Flapping the hands
- Understanding spoken English yet preferring to sign rather than speaking
- Often getting flat on the back on the floor
- Walking on tip-toe more and more as the school day progresses
- Adopting extreme and unusual positions
- Always removing hearing aids in the bathroom

Why is all this so important, and why should we be observing for it?

- To understand the child's challenges
- To gain a more accurate idea of the child's needs
- To appreciate the child's adaptive behaviors
- To be able to introduce the essential child to other people

A capacity building approach

- Still build a learning profile of the child.
- Highlight current skills, interests, and knowledge, and experiences.
- Focus on the individual, not normative standards.
- Still identify needs, but focus is on identification of supports needed to help the child progress.
- Expect, look for, and accentuate the child's intelligence, adaptive skills, and potential.

A capacity building approach

- Using a capacity building model allows you to look for and recognize the unique characteristics, skills, talents, and interests of a person.
- It is a way of understanding an individual that assumes their competence and values their contribution and participation
- It allows you to recognize potential and possibilities.
- It is individualized.

Why use a capacity-building framework?

1. It actively re-positions the child
2. It removes "problems" from children and shifts them to the educational team
3. It leads to more meaningful and child-focused educational decision-making and learning opportunities

My view of assessment (1).....

- Is unusual!
- Is positive
- Looks at positive skills & achievements
- Identifies learning styles
- Looks at preferences & interests
- Considers the whole child
- Credits the child with intelligence

My view of assessment (2).....

- Seeks to improve my understanding of the child
- Seeks to help me to build a positive relationship with the child
- Seeks to help me to know what to teach and how best to teach it
- Seeks to give me a clear focus for measuring progress

Jan van Dijk (1966)

“In the educational atmosphere I describe, the child holds the central position, the teacher ‘follows’ the child and, when the child responds, the teacher is present to answer the child’s request”

Van Dijk & Nelson
“Principles of Assessment” (2001)

- Make the child at ease
- Determine the child’s bio-behavioral state
- Determine the child’s interest
- Follow the child’s interest

The Van Dijk Approach to Assessment

- Child-guided
- Fluid
- Looks at the processes children with multiple disabilities, including sensory impairments, use to learn & to develop
- Assessment is summarized in terms of strengths and next steps for intervention

Areas of the Van Dijk Assessment Framework

- Ability to maintain & modulate state
- Preferred learning channels
- Ability to learn, remember & anticipate routines
- Accommodation of new experiences with existing schemes
- Problem solving approaches
- Ability to form social attachments and interact
- Communication modes

The Van Dijk Approach - Evaluation challenges

- No prescribed protocol
- No specific implementation order
- No set of testing materials
- Each assessment is unique
- No set interpretation scale

The Van Dijk Approach - Quality indicators

- *Respecting* the caregiver
- *Respecting* the child
- *Following* the child’s lead
- *Communicating* with the child
- Utilizing *turn-taking* routines
- Creating of *enjoyable* routines

The Van Dijk Approach - Fidelity

- Utilization of stop-start structure within routines (conversational approach)
- Introducing a mismatch with the child's expectations
- Returning to established routines in order to examine memory
- Creating situations that allow for problem-solving
- Utilizing varying sensory channels

Two useful webcasts by Jan Van Dijk

<http://www.perkinselearning.org/videos/webcast/child-guided-assessment>

<http://www.perkinselearning.org/videos/webcast/role-emotional-brain>

Robbie Blaha's article "*Thoughts on the Assessment of the Student with the Most Profound Disabilities*" can be found at:

<http://www.tsbvi.edu/seehear/archive/thoughts.htm>

Robbie Blaha: *Thoughts on the Assessment of the Student with the Most Profound Disabilities* (1996)

- What range of bio-behavioral states is exhibited?
- What are the most common states?
- Can the child reach the quiet alert or active alert states?
- Is the child able to maintain these?
- Are there problems shifting states?
- What variables affect state?

Blaha (1996) Continued

- Which are the most effective sensory channels for gaining attention?
- Which are the best sensory channels for conveying reliable information to the child?
- How much sensory information, delivered at what pace, helps the child to attend?
- What channels are associated with orienting reflexes?

Blaha (1996) Continued

- What did the child used to notice but doesn't any more?
- Does the child stop responding after 2-3 times?
- Does the child seem to associate things, events, people together?
- Does the child show anticipation?
- Does the child show surprise at changes in a familiar routine?
- Does the child know familiar from unfamiliar people?

Blaha (1996) *Continued*

- What specific voluntary movements does the child exhibit (and in what positions)?
- How do different positions affect the child's level of arousal or bio-behavioral states?
- Does transition from one position to another cause significant change in the child's bio-behavioral state?

Assessment Questions D Brown, "Follow the Child" (2001)

- How do you feel?
- What do you like?
- What do you want?
- What do you do?

One of the most important
early assessment questions
we can ask the child is:
"What do you do?".

"What can you do?" comes
later.

D Brown 'Follow the Child' (2001)

- Consult those who know the child better than you do
- Identify the child's motivators
- It's okay to match different sensory inputs
- Relax/arouse the child
- Position the child to facilitate functional skills
- Allow the TIME necessary for the loop of sensory perception, interpretation, and response

Extracts from 3 different deficit assessments

- *Refuses to look at faces
- *Dislikes her hands being touched
- *Does not speak or sign
- *Fed by G-tube
- *Low muscle tone and refuses to sit up
- *Sucks her fingers most of the time
- *Refuses to watch other people so cannot imitate
- *Shows no awareness of bowel movements
- *Rocks side-to-side a lot

Same student - Extracts from one successful, appropriate, and useful assessment (1)

- *Likes to be flat on her back
- *Enjoys looking at lights
- *Often kicks her heels hard on the floor
- *Often pats or rubs her hands on her head
- *Grinds her teeth
- *Likes rocking & bouncing
- *Holds objects very close to her eyes for visual scrutiny

Same student - Extracts from one successful, appropriate, and useful assessment (2)

*Enjoys deep pressure on legs, feet, arms, and chest

*Moves by back scooting and rolling

*Travels around familiar areas, but usually returns to the rug next to her mother's chair

*Loves the family dog

*Vocalizes more in a smaller room, or when in an enclosed space eg. underneath a chair or a table

Arousal/ bio-behavioral state

The 9 levels of arousal
(Carolina Record of Individual Behavior)

- Uncontrollable agitation
- Mild agitation
- Fussy awake
- Active awake
- Quiet awake
- Drowsy
- Active sleep
- Quiet sleep
- Deep sleep

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1. Where are you on the ladder of arousal?
2. Where do you need to be?
3. How can you get there?

Using the ladder

- ❖ Fewer steps
- ❖ Individualized vocabulary
- ❖ Words/ symbols/ pictures
- ❖ Re-visiting/ social stories
- ❖ Role play
- ❖ What do you like/need?

Self-Regulation

Can we help the individual to recognize and deal with excessive levels of over-arousal or under-arousal, in socially acceptable ways? If self-regulation is difficult, can the individual learn ways of asking for help?

Jobs for us

- “Reading” (ie. observing & interpreting)
- Making connections
- Helping the individual “feel” their body
- Providing an increasingly precise vocabulary of emotions/states
- Directing the individual’s attention
- Reminding the individual of strategies
- Matching/sharing experiences & feelings

Creating Vocational Portfolios for Adolescents with Significant Disabilities

<http://www.perkinselearning.org/videos/webcast/creating-vocational-portfolios-adolescents-significant-disabilities>

Resources on the topic of *Assessment* from the National Center on Deaf-Blindness

<https://www.nationaldb.org/info-center/educational-practices/#assessment>

Home Talk: A Family Assessment of Children who are Deafblind

<https://www.designtolearn.com/uploaded/pdf/HomeTalk.pdf>

The Communication Matrix

<https://www.communicationmatrix.org>

Wiley D. (ed) 1997. [IEP Quality Indicators for Students with deafblindness](http://www.tsbvi.edu/attachments/1800_IEP_Indicators.pdf). TSBVI.

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Taylor E. Stremel K., Steele N. 2006. [Classroom Observation Instrument](https://documents.nationaldb.org/products/coi-2006.pdf).

<https://documents.nationaldb.org/products/coi-2006.pdf>

Assessment is best regarded as a process not a product

- ◆ Trial and Error (child-guided, fluid)
- ◆ Always a work in progress
- ◆ Questions not answers
- ◆ The reason why?

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Why is all this so important, and why should we be observing for it? (2)

- To be aware of the fundamentally important things which often get overlooked or forgotten
- To remember that everything the child does takes more time, more planning, more energy, more concentration, and more attention, than it does for other children
- To realize that things that look crazy might really be functional and clever adaptations