

Oakland, Thomas. "Assessment, Special Education." *Encyclopedia of Applied Developmental Science*. 2004. SAGE Publications.

ASSESSMENT, SPECIAL EDUCATION

The Individuals with Disabilities Education Act (IDEA) has affected educational policy at both state and local levels. Policies governing assessment and evaluation appear prominently in this act. This entry reviews sections of IDEA that provide guidance as to the manner in which assessment data should be acquired and used.

In the United States, 53,400,000 students are enrolled in elementary and secondary schools (U.S. Bureau of the Census, 2003). Approximately 14% receive special education services, most under the Individuals with Disabilities Education Act of 1997 (see 20 U.S.C. 1414, for provisions that affect evaluations, eligibility, individual education plans, and placement; 20 U.S.C. 1415, for provisions that affect procedural safeguards; and 20 U.S.C. 1431, for provisions that affect infants and toddlers with disabilities).

INDIVIDUALS WITH DISABILITIES EDUCATION ACT (IDEA)

The initial federal legislation affecting special education, the Education of All Handicapped Children Act of 1975, held state and local education agencies responsible for providing free appropriate public education to children aged 3 through 21 who have disabilities. The law was reauthorized in 1990 and renamed the Individuals with Disabilities Education Act (IDEA). Its reauthorization in 1997 identified regulations governing the education and assessment of all children with disabilities, including those for infants and toddlers with disabilities.

Psychologists, psychiatrists, and other mental health service providers often rely on the fourth edition of the *Diagnostic and Statistical Manual of Mental Disorders (DSM-IV)* (American Psychiatric Association, 1994) for guidance when conducting assessments and making diagnoses. Although the *DSM-IV* is somewhat relevant to special education assessment practice, the legal status of IDEA and thus its

overarching influence require psychologists and other mental health service providers to know and follow the act's regulations when conducting special education assessments. Thus, these regulations are emphasized in this entry.

Professionals are encouraged to obtain a copy of state board of education rules governing special education services from their state education agency, as these rules may differ somewhat from IDEA federal regulations. In addition, those interested in professional methods for conducting special education assessments are advised to consult Sattler (1998, 2001a, 2001b) and other authoritative sources.

CHILD WITH A DISABILITY

IDEA defines a *child with a disability* as one with autism, hearing impairments, mental retardation, orthopedic impairments, other health impairments, serious emotional disturbance, specific learning disabilities, speech or language impairments, visual impairments, or traumatic brain injury who, due to the disability, needs special education and *related services* (emphasis added). Children with attention deficit disorders, with or without hyperactivity, generally are served under the category of "other health impaired." Services for children with learning disabilities are the most common.

SPECIAL EDUCATION

Thus, to be eligible for special education, a child must be diagnosed as displaying qualities associated with one or more of the above-named categories and found to need special education and related services. Special education consists of specially designed instruction reasonably calculated to provide meaningful educational benefit that meets the unique needs of children with disabilities and is provided at no cost to parents. Instruction may be provided in classrooms, homes, hospitals, institutions, and other settings.

RELATED SERVICES

The term *related services* references supportive services in speech-language, audiology, counseling, medicine, physical and occupational therapy, psychology, social work, and recreation as may be required to assist a child with a disability to benefit from special education.

ASSESSMENT, INITIAL EVALUATIONS, AND REEVALUATIONS

Assessment and evaluation initially may assist in locating as early as possible all children who may have disabilities and may continue until their successful transition from school to work. IDEA requires a full and individual initial evaluation before initially providing special education and related services to determine two issues: whether the child has a disability, and the educational needs of the child. The child is assessed in all suspected areas of disability, including, if appropriate, academic performance, communicative status, general intelligence, health, hearing, motor abilities, social and emotional status, and vision. Evaluation methods require the use of various technically sound assessment tools and strategies that assess cognitive, behavioral, physical, or developmental qualities so as to obtain relevant functional and developmental information, including information from parents, that may assist in determining whether the child has a disability and the content of the child's individualized education program. There is an emphasis on the use of standardized tests tailored to assess specific areas of educational need, not merely those designed to provide a single general intelligence quotient, validated for the specific purpose for which they are used, and administered by trained and knowledgeable personnel consistent with instructions for their use. No one assessment procedure should be used as the sole criterion for determining eligibility for services. When assessing children with impaired sensory, manual, or speaking skills, tests are selected and administered to ensure the results provide accurate information of the child's aptitude, achievement, and other qualities being assessed rather than the child's impairment. If an assessment is not conducted under standardized conditions, a description of the extent to which it varies from standard conditions must be included in the report.

Reevaluations may occur when warranted or if the parents or educators request an evaluation. A reevaluation must occur at least once every 3 years and before a child with a disability is removed from special education.

ISSUES OF BIAS AND OVERREPRESENTATION OF MINORITY STUDENTS

Congress expressed concern about the disproportionate number of minority children in special

education, especially African Americans and Hispanic Americans, as well as the negative impact labeling, especially mislabeling, may have on their lives. Thus, IDEA requires that testing and evaluation materials and procedures be selected and administered so as not to be racially or culturally discriminatory. If feasible, these materials and procedures are to be administered in the child's native language or mode of communication. Assessment methods used with children with limited English proficiency are selected and administered to ensure they assess the extent to which the child has a disability and needs special education, not merely the child's English language skills.

THE CHILD STUDY TEAM

A child study team consisting of qualified professionals and the child's parents form a committee, often called the individual education plan (IEP) committee, responsible for determining whether the child has a disability and, if so, the nature of the child's individualized education program.

DETERMINING AND CHANGING ELIGIBILITY

After completing the assessment, an IEP committee reviews existing documents, including independent evaluations and other information provided by parents, classroom assessments, and observations, as well as teacher and other service provider information. This review is used as a basis for making decisions as to whether the child has a disability (or in the case of a reevaluation, whether the child continues to have a disability), the child's present level of performance and educational needs, whether the child needs special education and related services, and whether additions or modifications to special education and related services are needed to enable the child to meet the measurable annual goals set forth in the child's IEP.

PARENTAL RIGHTS

Parents have considerable legal rights under IDEA that pertain to assessment activities. Parents must be notified as to the evaluation procedures to be used, and their permission must be obtained prior to the initial and subsequent evaluations. However, should the parents object to an evaluation and the local education agency believes one is in the child's best interests, the agency may pursue an evaluation through mediation and due

process procedures. Parents have the right to obtain an independent evaluation and to present this evidence to the child study team. On occasion, they may obtain this evaluation at the expense of the local education agency. As members of the child study team, parents are involved in formative evaluation methods that examine the effectiveness of the child's program and may propose changes to it. Should disagreements arise that warrant possible litigation, the parents have the right to an attorney, to present evidence, to present witnesses and cross-examine those testifying on behalf of the educational agency, and to appeal a decision rendered by an impartial hearing officer.

CONCLUSIONS

Assessments play a central role in special education. Their impact is seen initially in locating children with special needs and extends through children exiting special education. Their use in diagnostic decision making is paramount. Further efforts that encourage their use to influence educational interventions are needed. In addition, decision-making practices in special education that rely heavily on test scores while minimizing clinical observations foster an assessment system that is overly legalistic, mechanical, and procedural.

—Thomas Oakland

REFERENCES AND FURTHER READINGS

- American Psychiatric Association. (1994). *Diagnostic and statistical manual of mental disorders* (4th ed.). Washington, DC: Author.
- Individuals with Disabilities Education Act of 1997, 20 U.S.C. 1400 et seq. (*Federal Register*, 64, 1999).
- Sattler, J. M. (1998). *Clinical and forensic interviewing of children and families*. San Diego: Author.
- Sattler, J. M. (2001a). *Assessment of children: Behavior and clinical applications* (4th ed.). San Diego: Author.
- Sattler, J. M. (2001b). *Assessment of children: Cognitive applications* (4th ed.). San Diego: Author.
- U.S. Bureau of the Census. (2003). *2000 census*. Available at www.census.gov, 9.