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ACTNOW Fact Sheet 12



PSYCHOEDUCATIONAL PROFILE – THIRD EDITION (PEP-3)

(Authors: Schopler, Lansing, Reichler and Marcus)

by Dr Avril Breerton

Background and Uses of the PEP-3

The PEP-3 (2004) was developed from the PEP-R (1990) and PEP (1979). Consistent with earlier versions, the PEP-3 is a standardised observational assessment based on a developmental approach.

Autistic children have often been regarded as un-testable in the past, but this was primarily due to problems with types of assessments that were used. The PEP-3 assesses the developmental level of young children with autism, who may be non-

verbal, have limited attention skills and poor concentration, and who are not used to a formal testing situation. The PEP-3 provides norm referenced comparisons for children between 2 and 7 ½ years of age. It also provides developmental age equivalents for children functioning between 6 months and 7 years. For low functioning children older than 7 ½ years, examiners can use the developmental ages or informally assess children's performance on the individual items. The profile resulting for the PEP-3 graphically charts uneven and idiosyncratic learning development, emerging skills and autistic behavioural characteristics.

The PEP-3 was primarily designed for planning an educational programme based on a child's identified developmental profile and behaviour. PEP-3 test information is drawn from two complementary sources. The first is a standardised norm-referenced scale designed to assess the development of Communication and Motor skills and the presence of Maladaptive behaviours of children suspected of having autism and other pervasive developmental disorders (PDDs). The second source is a Parent/Carer Report form, which is completed prior to the assessment of the child and asks the parent/carer to estimate the age at which their child is functioning in key developmental areas of communication, motor and social, adaptive behaviour functioning and thinking.

The items on the Maladaptive Composite score (completed by the examiner during the assessment) and the Problem Behaviours and Adaptive Behaviour subtests (caregiver reported) parallel the criterion domains for autism of the DSM-IV-TR, and support the inclusion of parents in the child's assessment and educational programming.

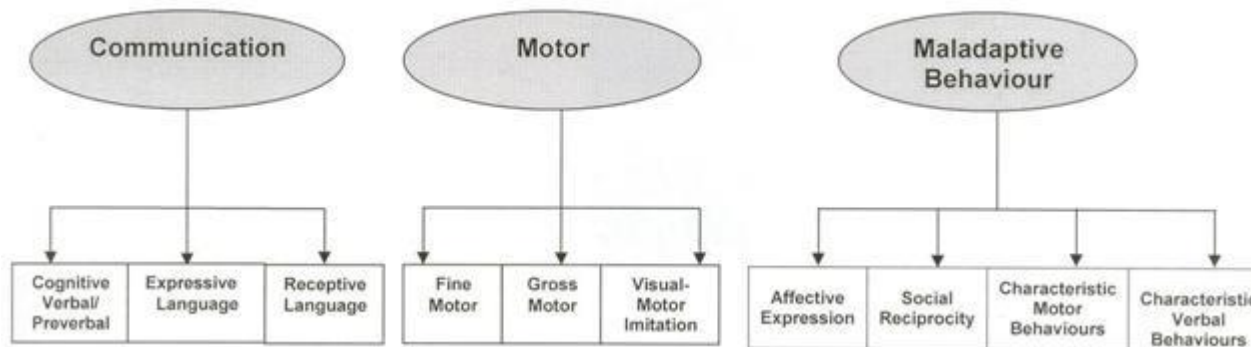
In addition to identifying the child's special learning strengths and teachable skills, the PEP-3 also provides information describing the severity of a child's autism symptoms (formally assessed and caregiver reported). This information may be useful for understanding and reporting on the child's current developmental skills in light of the child's current autism symptoms. This information may also be passed onto a knowledgeable examiner in order to clarify diagnosis for a child with autism or other pervasive developmental disorder. This test alone should not be used as a diagnostic tool.

The PEP-3s positive features for assessing children with developmental delays include attractive and motivating materials and no time pressure to complete tasks. It was also specifically designed to minimise the amount of language required to communicate directions to the child. The amount of language needed by the child to respond to the majority of items is also minimal.

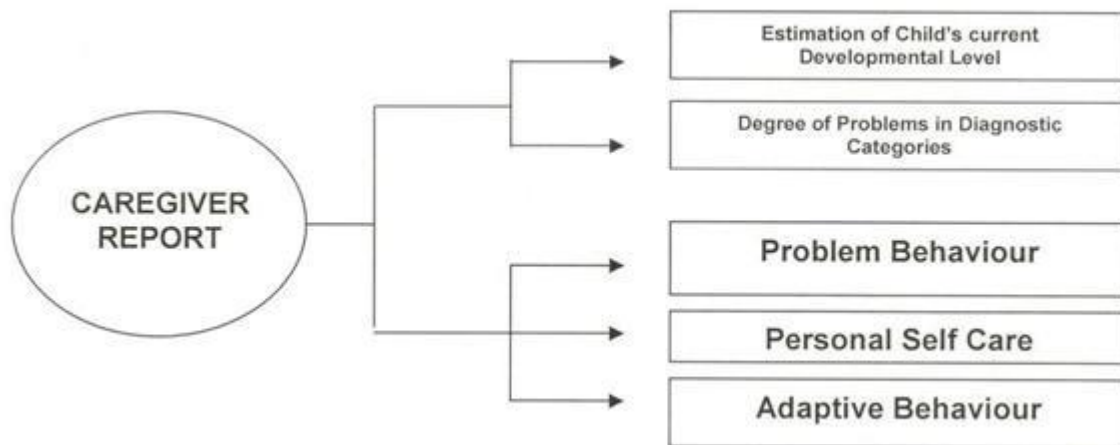
Structure of the PEP-3

The PEP-3 has two major parts: Performance and a Caregiver Report. The Performance section is made up of 10 subtests: 6 that measure developmental abilities and 4 that measure maladaptive behaviours. These subtests are combined to form 3 Composites: Communication, Motor and Maladaptive Behaviours.

Performance Scale



The Parent/Carer report comprises 2 clinical sections in which the caregiver estimates the child's developmental level in several areas and the degree of problems in different diagnostic categories. It also comprises 3 subtests that measure parent and carer observations of the child's Problem Behaviours, Personal Self-Care skills and Adaptive Abilities. The information obtained from these two complementary sources can be used to assist the examiner in making clinical decisions about the child, by comparing the child's test performance with what they are able to do in another setting. This information can also assist in establishing if parents think the assessment has accurately reflected their child's ability or whether in other situations they could have done more.



Test Administration

The PEP-3 can be administered by those with formal training in assessment. They should be familiar with general testing, scoring and interpreting procedures and should have experience working with and testing young children. It is recommended that new examiners administer the PEP-3 a minimum of three times under the direct supervision of

an experienced user.

The PEP-3 is administered in a one-on-one environment that has minimal distractions. The examiner can select an appropriate starting point based on the child's abilities and interests, although following a standardized numerical order is encouraged.

It can be helpful to have a parent/carer(s) in the testing room, particularly if the child is anxious about separating from them. Consider bringing some tangible rewards.

Materials

The PEP-3 contains a test kit consisting of attractive toys and learning materials presented to the child within the context of structured play activities. The examiner records, observes and evaluates the child's responses and behaviour during these play activities.

Scoring

The PEP-3 contains current normative data both from a large representative sample of 407 individuals with autism or other pervasive developmental disorders (PDDs) as well as from a comparison group of 148 typically developing children. The benefit of having normative data is that it allows examiners to make within-group comparisons to children with autism as well as to children without autism.

Test items on the Performance Scale are scored as Passing (2 points), Emerging (1 point) and Failing (0 points) depending on specific scoring criteria prescribed in the administration guidelines (p.10). The total raw score for all test items is converted into *developmental ages* (based on a typically developing sample), *percentile ranks* (based on an autism comparison sample) and *developmental / adaptive levels* ranging from Adequate to Severe (based on the child's percentile rank). Three subtests on the Parent/Carer Report can be scored for normative purposes: Problem Behaviours, Personal Self-Care and Adaptive Behaviour.

References

Schopler, Lansing, Reichler & Marcus (2004). Psychoeducational Profile Third Edition (PEP-3), Pro-Ed, USA.

Manuals and PEP-3 Kits can be purchased from:

[Co-ordinates](#)

[Pro-Ed Australia](#)

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