LEARNING DISABILITIES



Courtesy Herman Zielinski.

IQ assessment: K-ABC II



Kaufman Assessment Battery for Children- II

Ages: 3 – 18

Time to administer: depends

on model

K-ABC II (Kaufman & Kaufman, 2004)

Luria Model

- Mental Processing Index (MPI)
- Excludes verbal ability

Cattell/Horn/Carroll Model

- Fluid-crystallised Index (FCI)
- Children from mainstream cultural and language background

Subtests used are the same- interpretation tables are different

Pros

Reduces cultural biases:

- * minimising verbal instructions and responses
- question: advantageous to disabled?
- Minimal cultural content
- Performance of children from lower SES are less affected compared to other standardised tests

Core Optional

READING DISABILITY



- Reading difficulty not consistent with regular performance in schoolwork and in traditional intelligence assessments.
- Usually due to a neurological condition
- Developmental dyslexia
- Alexia
- Hyperlexia



Hyperlexia

- Average or above average intelligence
- Precocious ability to read: well above given age
- Excellent ability at decoding language
- Poor comprehension ability (not on par with reading ability)
- Struggle with: Who? What? Where? Why? and How?



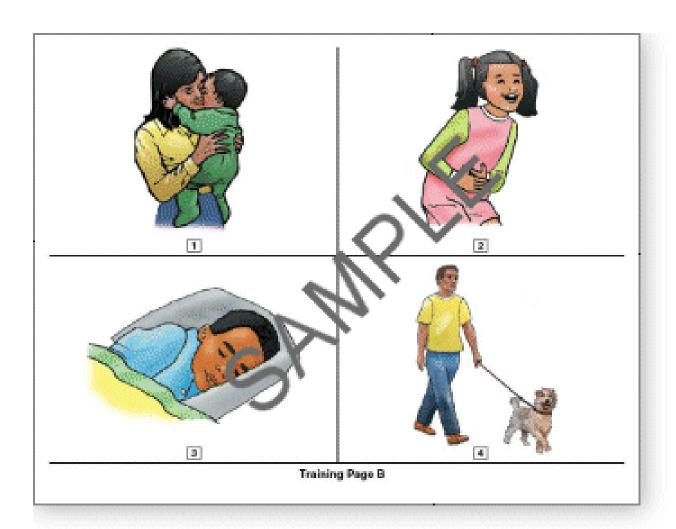
LANGUAGE ASSESSMENT

Peabody Picture Vocabulary Test - III

Receptive language test



- Nonverbal, multi-choice test
- To evaluate hearing vocabulary or receptive knowledge of vocabulary
- Presented in increasing levels of difficulty
- NOT a screening test for measuring IQ
- Should not be used in isolation to gauge child's language skill (Only one referent word is presented)



Expressive Vocabulary Test -2



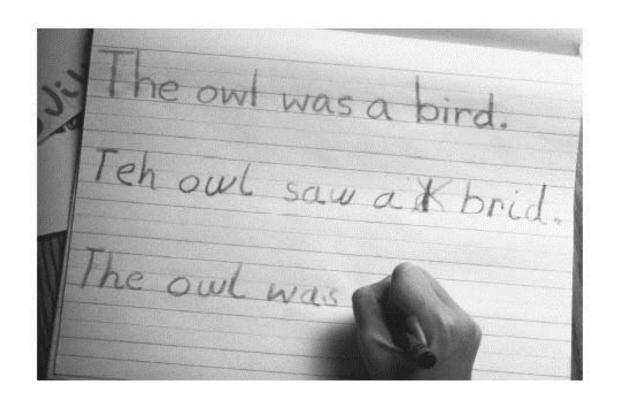


Reading disability



It contains information concerning the development, description, administration, and scoring of the test, tables of norms, guidance for interpreting the test data, and research studies illustrating how the Neale Analysis has been used

DYSLEXIA



Dyslexia

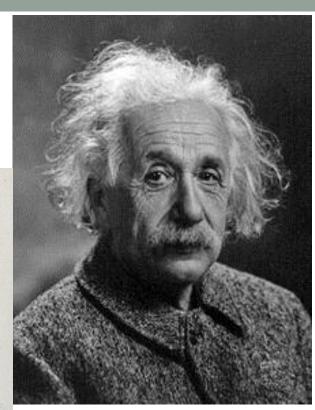
- word decoding, reading comprehension and/or reading fluency
- Not due to vision or hearing problems or environmental deprivation
- Auditory
- Visual
- Attentional
- NOT related to IQ



Dyslexia







Spelling
1. Cannot name the letters of the alphabet in sequence
2. Cannot count in sequence to twenty or higher
3. Mixes up letter order in words: "pasghetti" with "spaghetti"; "ciminon" with "cinnamon"
4. Misspells words
5. Reverses letters "b" for "d" or "p" for "q", even whole words
6. Reverses the last letter of a word with the first letter
7. Cannot spell simple words correctly
8. Fails to recognize the same word twice or later on the same page
9. Spells a word several different ways
10. Cannot do a spelling test correctly if the words in the original list are dictated in a mixed order

•	Reading
	1. Confuses verb tenses may mix up: see, saw, seeing.
	2. Reads slowly and below grade level
	3. Continues having many reading problems as they move through the grades.
	4. Does not seem to understand what he or she has read.
	5. Has difficulty hearing and repeating words of another language
	6. Has problems understanding and spelling abstract words, especially those about time and place
	7. Mispronounces or misreads many words
	8. Decodes words too slowly while reading and loses comprehension

Behavioural issues

Functional Analysis of Behaviour

Benefits of functional analysis of behaviour

- Provides a picture of spontaneous behaviour in everyday life settings
- Provides information about interpersonal behaviour and learning style
- Provides systematic record of both child's behaviour and behaviour of others that can be used for evaluation and intervention
- Allows for verification of accuracy of parental and teacher reports
- Useful in study of young children and developmentally disabled children who may not be easily evaluated by other procedures.

- To be a skilled observer, you need the ability to understand behavioural codes,
- To distinguish one behaviour from another
- Sustain attention
- To be attentive to fine detail
- React quickly
- Summarise behavioural samples verbally

Table 17-2
Comparison of Behavioral Descriptive Statements and
Behavioral Inferential Statements

Behavioral descriptive statements

He slams his book on the desk.

She hit Helen three times with a stick.

He achieved 100 percent accuracy on his mathematics test.

She says mostly positive things about herself.

Source: Adapted from Alessi (1980).

Table 17-5 Some Observational Coding Systems

Authors	Observational system
Achenbach & Edelbrock (1981)	Child Behavior Checklist - Direct Observation Form: A 96-item observation form that parallels the parent and teacher versions of the Child Behavior Checklist.
Conger (1984)	Social Interaction Scoring System: A group of seven different coding systems emphasiz ing different aspects of social interactions, including exchanges within families. Codes are for six types of interactions, seven types of emotional affects, and five types of persons.
Dunn, Barker, & Wahler (1981)	Standardized Observation Codes: A 29-category coding system (a revision of the Wahler House, & Stambaugh, 1976, coding system) designed to sample interchanges between a child and the child's adult and peer associates.
Fagot (1984)	Interactive Behavior Code: A 51-category behavioral observation code designed to assess a child's play preferences.
Furey & Forehand (1983)	Daily Child Behavior Checklist: A 65-item checklist of pleasing and displeasing behaviors that may have occurred in the preceding 24 hours. Parent completes checklist.
Jay & Elliott (1981)	Observation Scale of Behavioral Distress: An 11-category observational code for record- ing anxiety or pain in children undergoing painful medical procedures.
Kirschenbaum, Steffen, & D'Orta (1978)	Social Competence Classroom Behavioral Observation System: An 11-category behavioral observation system, including 5 categories of task-irrelevant behavior, 3 categories of task-relevant behavior, and 3 categories of prosocial behavior.
Mash, Terdal, & Anderson (1973)	Response-Class Matrix: An observational coding system for recording mother-child interactions, with 7 categories for the mother and 7 categories for the child.
Reid (1978)	Behavioral Observation Code Used with Families: A 29-category observational code for recording family interactions.
Roberts, Milich, & Loney (1984)	Structured Observation of Academic and Play Settings: A 7-category structured play- room observation procedure for evaluating hyperactivity.

Note. The observational code systems for Furey and Forehand (1983); Kirshenbaum, Steffen, and D'Orta (1978); Mash, Terdal, and Anderson (1973); and Reid (1978) are available in the publications (see the reference section at the end of this text). The other observational systems can be obtained directly from the authors. Their addresses are as follows: Thomas M. Achenbach, University of Vermont, Burlington, VT 05405; Rand D. Conger, College of Home Economics, Iowa State University, Ames. IO 50011; Elizabeth S. Dunn, Child Behavior Institute, University of Tennessee, Knoxville, TN 37996; Beverly I. Fagot, Department of Psychology, University of Oregon, Eugene, OR 97405; Susan M. Jay, Psychosocial Program, Division of Hematology-Oncology, Children's Hospital of Los Angeles, 4650 Sunset Boulevard, Los Angeles, CA 90027; and Mary Ann Roberts, Department of Psychology, University of Iowa, Iowa City, IO 52242.



What do you think is responsible for the problem

21 What is worse see stion to in concept?

behavior?

Table 16-15 Example of a Semi-Structured Interview with Teacher of the Referred Child

Precede the questions below with an introductory comment such as the following: "I would like to talk with you about [child's name] and his [her] behaviors that bother you most. I'd like to discuss these behaviors, when they occur, how often they occur, and what occurs in your classroom that might influence the behaviors. I also would like to discuss some other matters related to Ichild's

name] that will help us to develop useful interventions."	A.S. I also would like to discuss some other marters related to jerning
Teacher's Perception of Problem Behavior	23. Does have many friends?
Please describe exactly what does that causes you	24. Do the children include in their games and
concern.	activities?
2. Which behaviors bother you most?	25. How do other children contribute to's problem?
3. Which of these behaviors are most pressing to you now?	What do they do when engages in the problem
4. Which behaviors, in order of most to least pressing, would	behavior?
you like to work on now?	27. How do other children help to reduce the problem?
Let's look into the first problem in more detail.	28. How do other children react to in general?
6. How serious is the problem?	29. (If relevant) How do other teachers perceive and react to
7. How long has the problem been going on?	?
8. When does the problem occur?	And the de Professiona
9. What classroom activity is generally occurring at the time	Academic Performance
the problem occurs (for example, a lecture, unstructured	30. How does perform in school?
play, independent work, interaction with you, interaction	31. Does complete assignments on time?
with other children)?	32. Does have difficulty staying on task?
10. How long does the problem behavior last?	33. What are's best subjects?
11. How of ten does the problem occur?	34. What are's poorest subjects?
12. How many other children in the class also have this	35. Does perform differently with different teachers?
problem?	Child's Strengths
13. How does the child's problem behavior compare with that	36. What are's strengths?
of other children in the class who show the same	37. In what situations does display these strengths?
behavior?	38. How can these strengths be used in helping?
14. What happens just before the problem begins?	50. How can steel strengths be used in helping
15. What happens just after the problem appears?	View of Child's Family
16. What makes the problem worse?	How much contact have you had with's family?
17. What makes the problem better?	40. How do you feel about's family?
Reactions to Problem Behavior	Teacher's Expectations and Suggestions
18. What do you do when the problem occurs?	41. What does like best to do that you find acceptable
19. What attempts have been partially successful?	42. What do you consider to be an acceptable level of
20. What do you think is responsible for the problem	frequency for the problem behavior?

43. What expectations do you have for _____?

44. What suggestions do you have for remedying the problem?

Functional Analysis for teachers

If there is a specific problem behaviour in class, the teacher could also be given a fABC form to fill in and the psychologist will try to ascertain what is either

triggering or maintainingthe problem behaviour.

Interviewing teachers

The goals of the initial clinical assessment interview with parents can be summarized as follows (cf. Mash & Terdal, 1981):

- I . to gather information about parental concerns and goals;
- 2. to assess parental perceptions of the child's problems and strengths:
- 3. to obtain a case history;
- 4. to identify problem areas and related antecedent and consequent events;
- 5. to identify reinforcing events for both child and parents;
- 6. to assess parents' motivation and resources for change;
- 7. to obtain informed consent;
- 8. to discuss assessment procedures and follow-up contacts.