What is an evaluation?

Evaluation is the process for determining whether a child has a disability and qualifies for special education and related services. It’s the first step in developing an educational program that will help the child learn. Evaluation involves gathering information from a variety of sources about a child’s functioning and development including information provided by the parent. The evaluation may look at cognitive, behavioral, physical, and developmental factors, as well as other areas. All this information is used to determine the child’s educational needs.

Why have an evaluation?

A full and individual educational evaluation serves many important purposes:

1. **Identification.** It can identify children who have delays or learning problems and may need special education and related services as a result.
2. **Eligibility.** It can determine whether your child is a child with a disability under and qualifies for special education and related services.
3. **Planning an Individualized Education Program (IEP).** It provides information that can help you and the school develop an appropriate IEP for your child.
4. **Instructional strategies.** It can help determine what strategies may be most effective in helping your child learn.
5. **Measuring progress.** It establishes a baseline for measuring your child’s educational progress. The evaluation process establishes a foundation for developing an appropriate educational program.

What measures are used to evaluate a child?

No single test may be used as the sole measure for determining whether a child has a disability or for determining an appropriate educational program for your child. Both formal and informal tests and other evaluation measures are important in determining the special education and related services your child needs.

Testing measures a child’s ability or performance by scoring the child’s responses to a set of questions or tasks. It provides a snapshot of a child and the child’s performance on a particular day. Formal test data is useful in predicting how well a child might be expected to perform in school. It also provides information about unique learning needs. Other measures of a child’s growth and development, such as observation or interviews with parents and others who know the child, provide vital information on how the child functions in different settings and circumstances.

The school must conduct a full and individual evaluation that uses information from diverse sources, including formal and informal data. Tests are important, but evaluation also includes other types of information such as:

- medical information
- comparisons of the child’s progress to typical expectations of child development
- observations of how the child functions in school, at home, or in the community
- interviews with parents and school staff
As a parent, you have a wealth of information about the development and needs of your child. When combined with the results of tests and other evaluation materials, this information can be used to make decisions about your child's appropriate educational program.

**Psycho-educational Assessment**
As part of the evaluation, your child may undergo a psycho-education assessment. Psycho-educational assessment refers to the psychological tests used to analyze the mental processes underlying your child’s educational performance. Numerous tests exist. Some are better than others. As your child's advocate, it is important to learn as much as you can about the assessment process before it begins. It is also important for your child to be as comfortable as possible with this process. The assessment is usually conducted over several days as it can be tiring for the child and should be conducted in the child's first language, in a setting that he finds comfortable.

The assessment will likely include:

- an initial interview with you (with or without your child) to gather birth history, early childhood experiences, and general information on his difficulties. This is a good opportunity to ask questions about what tests will be done and why. Bring your questions written down so that you won't forget something really important. Invite the child to voice his questions too.
- an interview with the child’s teacher. The assessor may observe the child in the classroom and in the playground.
- a review of your child’s academic records to get a framework for academic performance prior to testing.
- a battery of tests.

The aim of these tests is to discover three things: the child's learning aptitude, level of achievement, and ability to process information:

Learning aptitude is commonly called "IQ". The tests will establish the overall ability to learn, and will also indicate how this individual learns best: by reading, by hearing information, or perhaps by handling actual objects.

Achievement tests discover what the individual has actually learned so far in school subjects such as reading, spelling, arithmetic, and general knowledge.

Information processing: the results of the aptitude and achievements tests may lead the psychologist to administer further tests, such as test of visual or auditory perception, or tests of long or short-term memory, which reveal the strengths and weaknesses in the way this child processes the information received through the senses.

**How are evaluation results used?**
When all the various tests and assessment are completed, your child’s evaluation results will be reviewed. You’ll meet with a group of qualified professionals to discuss the results and determine whether your child is eligible for special education and related services. The school must provide you with a copy of the evaluation report and a written determination of eligibility. The next step is to develop an IEP to meet your child’s needs.

The goals and objectives the IEP team develops relate directly to the strengths and needs that were identified through the evaluation process. It’s important for you to understand the results of your child’s evaluation before beginning to develop an IEP. Parents should ask to have the evaluation results explained to them in plain language by a qualified professional and request the evaluation summary report before meeting with other members of the IEP team to develop the IEP. Reviewing the results in a comfortable environment before developing the IEP can reduce stress for parents and provide time to consider whether the results fit their own observations and experiences with their child.
Preparing your child for a Psycho-educational assessment

What Is Psycho-educational Assessment?
As part of the evaluation, your child may undergo a psycho-education assessment. Psychology is the study of mental processes and behavior. **Psycho-educational assessment** refers to the psychological tests used to analyze the mental processes underlying your child’s educational performance. The assessment is a piece of the evaluation process and should provide answers as to why your child is experiencing difficulties, how best your child learns and what can be done to help.

Preparing Your Child for Testing
It’s important for your child to be as comfortable as possible with this process. The assessment is usually conducted over several days as it can be tiring for the child and should be conducted in the child's first language, in a setting that he finds comfortable. (If they are conducted at school, he may not feel quite so nervous.)

The assessment will likely include:
- an initial interview with you (with or without your child) to gather birth history, early childhood experiences, and general information on his difficulties. This is a good opportunity to ask questions about what tests will be done and why. Bring your questions written down so that you won't forget something really important. Invite the child to voice his questions too.
- an interview with the child's teacher. The assessor may observe the child in the classroom and in the playground.
- a review of your child's academic records to get a framework for academic performance prior to testing.
- a battery of tests.

Preparing your child for psycho-educational assessment can reduce anxiety and encourage cooperation through the upcoming battery of tests. One practice is to introduce the discussion by the number of days as the child is old; if the child is eight years old, discuss the evaluation at least eight days in advance of the testing. Reassure your child that the reason for testing is to understand why school is a struggle despite hard work and attempts to do well. Explain that the tests will contain a variety of questions, puzzles, drawings, stories, and games; and that the tests are neither painful nor about whether the child is stupid. Most importantly, offer the child hope in that the evaluation should show adults how best to help. Be open and honest as much as possible.

The psychologist doing the testing should have been trained in managing children with a history of academic failure. Test administrators try to make children comfortable. Do not expect your child to be aware of his or her actual test performance; correct answers are not supposed to be given out in order to maintain the professional integrity of the test. What really matters is whether the child is putting his or her best effort into each test administered.
Some tips:

- **Schedule the test sessions** (there will be many) **during the time of day when your child usually functions best.** Try to retain your child’s favorite classes or activities so that testing will not be a negative experience. Ensure that the child is well rested and not hungry. Take something along to do while you wait; stay in the area during the testing. My son felt better knowing that someone familiar was nearby whenever he was being tested even if he was familiar with the proceedings.

- **Your child will want to know about what will happen.** Students should understand the roles of the professionals conducting the testing and the reason(s) for the assessment. If possible, visit the test site with your child before the first day of testing. When scheduling the assessment, you should be able to find out about the expected types of questions, testing methods, and the length of each session. The test administrator should explain all that the child needs to know in order to do the test. Your role is to get the child to the test site on time and in a condition to do the best work possible.

- **For many tests, observations of the student’s behaviors are important.** The test administrator will note the situations causing fatigue, inattention, frustration, or delayed responses. This is all part of the diagnostic process. Tell the child to do his or her best and not to be discouraged. The child should remain calm and collected during testing. The test administrator should permit breaks as needed.

**Waiting for the Assessment**

One of your greatest stressors during this period is dealing with your child who is discouraged about school or perhaps even unable to attend. If possible, have him explain his fears about school. Seek help from professionals who have credentials for dealing with the child who is school-phobic or depressed (e.g., child psychiatrist, pediatrician, family doctor, social worker).

Make an even greater effort to catch him doing smart things around the house, no matter how small they seem (e.g., You were right about what Daddy wanted for his birthday. He just loves that T-shirt! The baby always eats his dinner when you feed him. What's your secret?) Let him overhear you telling a friend how great you think he is (e.g., I'm having the best day. John helped me unload the groceries and now he's making a card for Grandma's birthday). Tell him you love him and that he makes you happy. Assure him that you are working with him to get him the help he needs.

Likely you will experience a wide range of emotions as you begin the process of having your child assessed in order to develop his academic and/or psychological profile. For example, some parents report feeling relieved that at long last their child is "in the system", others say they are fearful of the results of the assessment and the impact an assessment will have on their family. What if the assessment shows that their child has one or more learning disabilities? What if he is in the wrong program? What if the tests show he has psychological problems? What do these outcomes say about me as a parent and how will I handle the diagnosis?

During the period while you are waiting for the assessment, find out all you can about the process and what the expected outcomes may mean. Talk to other parents; visit the public library; contact your local Learning Disabilities Association (LDA) chapter or provincial/territorial office.
Questions to Ask Specialists Who Evaluate for Learning Disabilities

In order to get the most benefit from your initial conversation with an assessment specialist, you’ll want to have a good basic understanding about why and how assessments for learning disabilities are conducted – and how to understand the results. We highly recommend that you review any documents from your School District regarding Special Education Evaluation, policies, and criteria before you start your search for an appropriate professional. At the same time, review who is qualified in your province/territory to conduct assessments of learning disabilities. It varies in many provinces and territories.

Psychological assessments are the way that learning disabilities are diagnosed. Assessments can also provide a lot of useful information about your child’s profile of abilities (strengths as well as weak areas) and about ways of helping (strategies and accommodations).

**Before: Questions to Ask Yourself**

- Check your coverage under the Extended Medical Coverage from your Employment Health Insurance Plan before starting the assessment to find out how much of the assessment is covered.
- In what areas do I suspect that my child may have a learning disability?
  - What behaviors have I observed that I have questions or concerns about?
- What information about my child do I have that might be helpful to the professional?
  - What observations can I offer about his strengths, weaknesses, personality or temperament, academic likes and dislikes, or other traits.
- What do I want to learn from the assessment?
  - What are the specific academic skill areas in which his school performance is low relative to his peers?
  - What underlying processing problems—such as short-term memory problems or persistent anxiety—do I suspect may be affecting his performance?
- How do I hope to use this information?
**During: Questions to Ask a Prospective Evaluation Specialist**

- What is the complete cost of the assessment and report?
- Is there a sliding scale fee?
- What are your credentials/training in educational testing?
- What experience have you had with testing students my child’s age?
- How long have you been doing assessments? Are you familiar with evaluation practices/personnel at local public schools?
- What information will you want me to provide?
- Will you contact my child's school for information and records? Will you interview school staff?
- Will you observe my child in the classroom?
- Will you interview me? How will you interview my child?
- Will the assessment include any of the tests generally given in the public schools? (This may help you avoid paying for private testing that the school can do or has already done.)
- Will a translator or an interpreter be available if my child needs one? Testing must be done in a child’s native language or sign language if needed.
- What types of tests will you use? Will you evaluate his social, emotional, and/or psychological status? How will the information be used to plan my child’s education?
- Is the person responsible for conducting the test familiar with my child’s culture?
- Will test scores be based on my child’s grade or age? If my child was retained, how will that be considered in evaluating the test results?
- How should I prepare my child for the assessment process?
- What will be done to help my child feel comfortable during the testing session?
- Will your final report integrate all of the individual tests done so that I have an overall picture of my child’s strengths and needs?
- How soon can I expect to receive the assessment results? When will you review the results with me?

**After: Review and Follow-Up Questions about the Evaluation Report**

- Was the report on the assessment results clear? If not, was the evaluator able to answer all of my questions? If not, write down any unanswered questions so that you can follow up by telephone or in person to get information that you can understand.
- Do I understand what the professional is recommending for my child based on the test results?
- What action should I now take? What’s my plan for getting several recommended actions completed?
Glossary of LD Terms

This glossary is a compilation of terms and definitions of some of the most common terms, adapted from a number of sources.

**Accommodation**: modifications in the curriculum or learning environment so that students with learning disabilities can demonstrate the true level of the learning without compromising academic standards.

**Achievement Test**: a test that measure what a person has already learned at school.

**Advocacy**: speaking or acting on behalf of a person or group in order to promote their rights and needs.

**Aptitude Test**: a test that measures a person’s capacity or talent for learning a skill.

**Assessment**: a battery of psychological tests to determine the presence of a learning disability(s).

**Assistive Technology**: tools that allow a person to complete tasks with greater ease and effectiveness (e.g. word processor, tape recorder, spell checker, calculator).

**Audiologist**: a professional who assesses hearing and provides services for auditory training.

**Auditory Discrimination**: the ability to hear the differences and similarities among and between sounds.

**Auditory Memory**: the process of remembering what is heard.

**Auditory Perception**: ability to receive, organize and interpret sensory data received through the ears.

**Behavioural Modification**: a technique of changing human behaviour by manipulating the environment to reinforce a desired response thereby bringing about the desired change in behaviour.

**Brain Injury**: an impairment of the brain either before, during or after birth.

**Central Nervous System**: refers to the brain and spinal cord.

**Cognitive Ability**: a person’s ability to think and reason fluidly.

**Decoding**: being able to understand the meaning of something through listening or reading.

**Discrepancy**: is the difference between an individual’s potential ability and actual level of achievement.

**Dyscalculia**: Problems with basic math skills; trouble calculating

**Dysnomia**: Difficulty remembering names of recalling specific words; word finding problems
**Dyslexia**: A language based learning disability. In addition to reading problems, dyslexia can also involve difficulty with writing, spelling, listening, and speaking.

**Dyspraxia**: Difficulty performing and sequencing fine motor movements, such as buttoning a shirt.

**Educational Psychologist**: a professional who administers and interprets psychological and educational tests.

**Educational Therapist**: a professional who runs and develops programs for behavioural and learning problems.

**Encoding**: the ability to translate ideas into words or symbols.

**Evaluation**: the process of gathering information about an individual.

**Individual Education Plan (IEP) also know as IPP**: a child-centered plan drawn up by the school with the input from classroom and resource teachers, guidance counsellors, school psychologist, parents, social worker and sometimes even the child, which outlines in detail (how/what/who) the child’s education plans. It should be revisited and adjusted at least every year.

**Inclusion**: the integration of students with disabilities into a regular classroom with peers in order to receive the same education.

**Intelligence Quotient (IQ)**: a composite of verbal and performance based tests that indicate general cognitive ability. Average range of intelligence, which includes 84 per cent of the population, is 85 to 115.

**Learning Disability**: a dysfunction in the central nervous system that interferes with the brain’s ability to take in, process and retrieve information in individuals with potentially average, average, and above average intelligence and may affect such areas as attention, coordination, memory, math, reading, spelling, social competence and writing.

**Occupational Therapist**: an individual who helps improve motor and sensory function in order to perform daily tasks.

**Phonological Awareness**: a person’s ability to recognize units of sound in their language.

**Phonology**: the study of sound production from written and oral language.

**Psychiatrist**: a medical doctor who specializes in the diagnosis and treatment of behavioural and emotional disorders.

**Remediation**: the process in which specialized instruction is given in order to strengthen specific areas of need such as reading, writing, etc.

**Resource Program**: a program that supports learning through the use of specialized instruments outside the regular classroom, usually on a one on one setting.

**Self-advocacy**: speaking out for one's personal needs and rights.

**Self-concept**: a person’s view of their strengths and areas of need.

**Speech Pathologist**: a speech-language professional who helps with speech and/or language difficulties.

**Tests**: Examples are IQ test-Weschsler Intelligence Scale; academic-Wechsler Individual Achievement Test, The Wide Range Achievement Test-3, Woodcock-Johnson Test of Achievement-Revised, etc to determine a person’s intelligence, academic, social, and behavioural strengths or areas of need.
Professionals Who Can Help

There are a good number of organizations and professionals who can help with any of the issues related to LDs and ADHD. If you are new to the idea, or the diagnosis of learning disabilities, we recommend that you connect with other people, whether it be professionals, a support group, or an online community. Having other perspectives is valuable, and a support organization can make all the difference for you and your loved ones. Here are some of the sorts of professionals you may meet, and what they do.

Teachers:
Classroom teachers will likely be the first professionals to notice a student’s learning issues. They can offer accommodations to students in terms of how lessons are taught and tests are administered, and teach students strategies they can use to compensate for weaknesses. Teachers may raise a student’s learning difficulties with other school professionals, request various forms of help, and begin the IEP and IPRC processes.

Special Education/Resource Teachers:
Teachers with special education training may teach special education classes, teach small groups of students on a withdrawal basis, and/or consult to regular classroom teachers. In high school, they help coordinate the accommodations provided by subject teachers.

Educational (Teacher’s) Assistants:
EAs work with students under the direction of a special education teacher, either in a special education class or in a regular classroom.

Principals:
It is the responsibility of the school principal to make sure an IEP is developed and delivered. The principal can initiate the IPRC process, on request of the parent or after consulting the parent. The principal deals with school discipline issues and can make the final decision on grade retention or promotion.

Psychologists/Psychological Associates:
Psychology professionals do psychological assessments, consult to teachers on teaching approaches and accommodations, and provide counselling to students.

Pediatricians/Psychiatrists:
These are medical doctors who may assess for developmental, behavioural and/or mental health issues. Medical aspects of treatment for ADHD are often provided by one of these health professionals.
Speech/Language Pathologists:
S/P pathologists can provide consultation, assessment and treatment services for both speech problems and language processing difficulties.

Occupational Therapists:
OTs can do assessment and/or treatment of motor and sensory-motor skills, including handwriting. Some OTs have expertise with nonverbal LDs.

Counsellors:
There are many different kinds of counsellors, from guidance counsellors and youth counsellors in schools to mental health counsellors and career counsellors. Their roles include informing, advising and problem-solving around a specific area of concern. The help they provide is usually more of a practical nature than psychotherapy.

Therapists:
These can include counsellors of all sorts as well as psychological therapists, art therapists and others. A therapist will generally help with the psychological/emotional aspects of LDs and ADHD, which can often have great impact on self-esteem and mood.

Coaches:
Recent years have seen the growth of another kind of helping professional - the Coach. Coaches are not therapists, but rather help with the realization of goals, whether personal, career or academic.

Advocates
An advocate can help you navigate the various educational and medical systems you may need to access in order to get what you need in school. These can be a distinct profession, or an aspect of the services offered by our local chapters.

Other Organizations
There is a Learning Disabilities Association in each province and territory and local chapters in 55 communities across the country. These are a fantastic place to start. And all offer valuable programs and services. To learn more please visit www.ldac-acta.ca
About Labels and Labelling

There are a lot of labels and labelling issues in the field of learning disabilities. There are questions about the word "disability", there are questions about the specific names of specific LDs, and to make things even more complicated, the terms mean different things in different places. Here are some of our thoughts about the issues, the terms, and ways of thinking about them.

"Learning Disabilities?"

Right off the top, many people wonder whether "learning disabilities" is the best label to use. Some say "disability" is not an accurate label, since people with LDs are not unable to learn - they learn just fine, when they're taught appropriately. Many people prefer the phrase "learning differences" instead.

We acknowledge that the term "learning disabilities" is not perfect. We use it as an organization because using one label makes it easier to communicate with other people when we're talking about LDs, and because the term is recognized in the Canadian Human Rights Act.

However you choose to label your LDs, we suggest you get at least a little comfortable with the term "learning disabilities", because it's the term used in medical, employment and educational settings.

Specific Labels

Underneath the umbrella of LDs, there are many more labels - and arguments about them. Some specific types of learning disabilities are given very specific names, and those names are not always agreed upon: dyslexia, dyscalculia, dysgraphia and central auditory processing disorder each refer to specific types of LDs. Each of the specific names introduces more controversy for some people and clarity for others.

For example, it might really help a young girl to know that her issues with learning math are called dyscalculia. But for another person, the questions about which types of mathematical learning issues are included in the label might be problematic, limiting or distracting.

At LDAC, we tend to use broad descriptions - like "language-based LD", or "LD that affects reading" - when talking about categories of LD. When we talk about specifics, it's often useful to simply describe the way a particular person learns.
Why Don't the Labels Just Stay the Same?
Historically, the labels we use do not tend to stay the same. This change happens in all areas of life, but seems to happen most in new fields, like the field of LDs (only about 40 years old). As our understanding of things change, the labels we use change to reflect new knowledge. As we learn more, the labels we use probably will reflect this change.

Here's an unrelated example - The planet Pluto is no longer called a planet! Pluto itself didn't change. What changed was our knowledge: When astronomers discovered hundreds more Pluto-sized objects in our solar system, they had to decide whether we should include all of them and hugely increase the number of "planets" we have, or change the label of tiny Pluto.

The Bottom Line
The important thing to keep in mind is that labels are constructs: we humans make them. That means that they can change, and evolve, depending on how we need to use them. It also means that the labels shouldn't determine how we understand people, and that labels given to groups of people shouldn't be used to predict how those individuals will be. My LD and your LD may be very different. Calling them both LDs is useful for studying and talking, but that doesn't change how unique we both are.

Source: LDA ON website www.ldao.ca