

Early Screening Is Essential for Educational Accountability: Response to Salzer and to Shepard and Smith

Screening instruments have limitations, but they provide educators information critical to children's successful learning.

Use of the diagnostic-prescriptive model by schools was expanded by passage of P.L. 94-142 and related legislation. By calling for the identification of educationally handicapped children and the provision of remedial education and related services for them, these laws created the need for physical, sensory, and developmental screening. A cost-effective system was needed that could inform educators about the children's range of development so that appropriate programs could be planned and implemented if needed.

Having to categorize children into special groups prompted a closer look at the predictive validity of several screening instruments. Critics of screening have often cited the lack of precise evaluation measures; but, in statistical terms, there is bound to be a large standard error of measurement when working with young children, whose changing physical, mental, and emotional conditions tend to produce widely discrepant results for the same test given at different times.

Many early childhood educators fear that the new emphasis on testing may preclude the assessment of children's developmental stages of growth and maturation, which affect their aca-

demie success. For example, young children with common middle-ear infections may be unable to discriminate similar letter sounds required to decode words. Farsightedness in young children is often ignored by curriculum tasks that ask them to focus on small print placed within 16 inches of their noses.

On the other hand, a screening battery that includes health and modality evaluation may enable a child whose cognitive development is ahead of his physical development to avoid possible failure. Moreover, a screening battery provides information about a child's areas of strength as well as weaknesses. This information can be extremely valuable for the teacher who realizes that underdeveloped modalities are best developed through concrete activities that incorporate the child's areas of strength.

The ultimate test of a screening battery or test is the usefulness of the information it provides. Thus, curriculum should dictate the type of screening instrument used. However, research has not provided a completed picture of the relationship of selected types of screening to the curriculum. Shepard and Smith (p. 78) suggest, for example, that the Metropolitan Read-

iness Tests have better predictive validity than other screening tools. They fail to discuss the type of curriculum implied in such an assessment and whether the segmented, skill-drill program related to these tests meets the developmental needs of young children. Early childhood educators who believe in developing basic visual, auditory, and motor skills prefer a screening battery that includes these foundation skills in its evaluation even though (because these channels of learning are difficult to isolate) statistical proof of their importance has not been demonstrated.

Improving Screening

The following components critical to successful screening are based on the research and practice of the Early Prevention of School Failure Program.

1. *Staff development and training are an essential part of the screening process.* Each staff member must understand the goals and objectives of screening and their relationship to child development, the purpose of each test in a battery, and the interrelationship of the tests. Early childhood professionals with a test background can assist less experienced personnel

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to understand test constructs and administrative validity. With effective formal and informal training, staff members can understand how the results of the battery can benefit a child's education.

2. *The screening battery results should correlate with the type of program to be provided.* If a strong phonics program is to be taught, the screening should evaluate auditory discrimination. If children are going to be expected to sit at a desk for long periods of time completing worksheets, then their attention span and eye-hand coordination will be the best predictors of success. The value of screening relates directly to how the results will be used. The screening should serve as a needs assessment that will direct the planning and implementation of the educational program.

3. *Parents will support screening and correlated programs if they understand their premise.* An awareness session can answer questions parents

ask: Why is my child being screened? What kinds of information will be obtained? Who will use the information? Parents should be given test results so that both the home and the school can develop realistic goals based on documented stages of child growth.

Prevention is more effective and economical than repair. The long-term consequences of screening include significant savings to society in terms of services that will not be required, increased educational productivity, and the enhanced self-concept of children who otherwise might have experienced academic failure before assistance could be provided. Certainly, additional research on screening can improve the process, but current models provide valuable information for teachers and parents that can enhance the educational future for many young children. □

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