**Reasons for Observing and Assessing**

**INDIVIDUAL CHILDREN**   
Observation forms the very foundation of all developmentally appropriate practices (Copple & Bredekamp, 2009). Observing and assessing is especially important when children can become lost in large group settings like childcare centers or public school classrooms. Specific reasons for observing and assessing an individual child are:

1. *To identify the child’s interests* –

What does s/he like and dislike?   
What motivates her/him?    
What is special about this particular child?

1. *To understand the child’s individual style*—

What is her/his temperament?    
What are her/his strongest multiple intelligences?  
How does s/he handle problem solving and conflict?    
How does her/his family communicate and what are their values?

1. *To measure the child’s development & progress*—

Are the child’s skills age-appropriate?    
What are her/his areas of strengths and weakness?  
Is development even in all domains?

1. *To identify concerns and special needs of the child--*

Does this child have any special health or other issues?  
Do you have a specific concern about her/him?   
Does s/he need further assessment and/or focused interventions?

1. *To discover what the child needs from the curriculum and teachers—*

What is this child learning?    
How can instruction and curriculum meet her/his needs?    
What guidance approach works best?

1. *To provide information to share with parents and staff—*

What do you want this child’s family to know about him/her?    
What is the best way to communicate with this family?  
How can the family participate in the assessment process?   
How will you document and share assessment findings?

**PROGRAM EVALUATION**  
Observing can also inform us about our own teaching practices, as well as the curriculum and environment. Many programs now are required to do program-wide assessments regularly. Some of the reasons to do program evaluation are:

1. *To analyze teaching* –

Is the teacher usually positive? Consistent? Fair? Effective?  
How can individual professional growth be supported?  
In what areas do the staff generally excel? Where do they need more training?

1. *To examine the learning environment*--

How is the room arranged?    
How do the children use it?    
What could be added, removed, or changed?   
How does it meet (or not meet) the needs of children?

1. *To understand the group dynamics*--

How cohesive is the group?   
What is the overall level of ability and cooperation?  
How do the children play together?

1. *To adapt the program to meet the needs of a group of children*—

Is the program really meeting stated objectives and goals?   
Have skills and needs of the children changed?  
What are the needs of this particular group?  
Are children truly engaged and learning?

1. *To investigate specific problems*-- Problems will emerge in every program or class, regardless of quality.

         Are there always difficulties in one room area or at a certain time?  
          Do certain children always have conflict? Or are they always in cahoots?

1. *To measure the effectiveness of specific approaches--* These include curriculum, routines, scheduling, guidance and discipline policies.

Are children achieving and developing to their potential?  
Are approaches working?    
Are changes needed? If so, what, where, and how?

1. *To reach highest quality possible*--  Early childhood educators and administrators want to provide the highest quality care and education possible. Regular observation and assessment of the program is a necessary component of quality care.

**Keyword Search**

* Development Assessment
* Formal Observation
* NAEYC’s Assessment Recommendations
* Child-rearing Approaches
* American with Disabilities Act
* Limits & Biases for Observation and Assessment
* Observation Guidelines
* Narrative Records for Observation and Assessment
* Event Sampling for Observation and Assessment
* Rubric for Observation and Assessment
* The Zone of Proximal Development
* Child-Focused Assessment
* Children with Disabilities Observation and Assessment
* ~~APGAR test~~

**Other Observers**

There are many people other than the teacher who can provide information and participate in the observation, assessment and program planning for pre-primer children. More voices provide more “windows” to look through and will enrich your assessment, making results more valid and reliable. Potential observers/assessors include:  
  
\****Other staff*** working with a child, even part-time assistants, “floaters,” or playground aides.  Each staff member may have an important piece of the puzzle—one that is needed to fit it all together authentically.

\****Specialists and other professionals*** who work with the child, such as those in heath care, therapists, and/or staff from other programs the child attends. Be sure to have a written Release of Information from parents so you have legal permission to discuss their child with other professionals.

\****Parents and family members*** should be more than permission slip signers and passive recipients of observation information. Family participation can enrich the process, since no one knows a young child better than the people who raise her/him. The child’s family can actively participate in their child’s assessment in many ways—as sources of information, observers, and more.  Provide parents with questionnaires, recording forms, and/or interviews so they can share their insights, opinions, and goals for their child.  
  
There are other benefits for children when families are involved in early learning assessments; “the very process of completing scales can inform parents about the kinds of behaviors and milestones that are important in young children’s development” (Epstein, Schweinhart, & DeBruin-Parecki, 2004).  Early parental participation also leads to family's involvement in their child’s future education.

***The children*** can (and should) participate in their own assessments.  Their right to be involved is spelled out in Article 12 of The United Nations Convention on the Rights of the Child (1989), which states that any child “who is capable of forming his or her own views (has) the right to express those views freely in all matters affecting the child, the views of the child being given due weight in accordance with the age and maturity of the child.”  Ways that children can be involved include the following:

* \*Children can provide work samples, artwork, photographs, and quotes to be included in their assessment or portfolios. For example, teachers can interview and record their words by taking dictation or taping.
* \*Older children can explain or critique their own work and help set future learning goals.  We can even involve toddlers—by showing them photos and samples that will be included in their assessments.  As they grow, they will be able to help choose portfolio inclusions.

# ****Concluding****

Once you have all your observations and other assessment data gathered and organized, the next step is to draw conclusions.  For your interpretations to be valid, they should be as objective as possible.  Below are recommendations that may help.

**Development is a continuum**.  When assessing data, remember young children’s development is typically uneven, and continuously evolving. While developmental milestones are important indicators, development is individual. The progression and sequence of children’s growth and learning are most important.  An example of sequence is how children learn to use scissors, first holding correctly, then snipping, then cutting a straight line, and so on.  If a child is not progressing in skill development, further screening and referral are needed.  When you are unsure about whether your expectations are age appropriate, check with child development texts or other resources.

**Assess for patterns.** Looking for trends can be helpful in reaching conclusions about children’s behavior and/or program issues.  Is this new behavior, or part of a pattern observed in the past?  Have there been any significant changes for the child? Ongoing observation recordings enable you to see the bigger picture over time.

**Use details.**The more information your observations contain, the easier it is to reach legitimate conclusions.  Looking beyond quantitative data at children’s expressions, reactions, gestures, and contextual detail helps with interpretation validity. Details can also help program evaluations result in positive changes when environments, curriculum, interactions, and more are assessed.

**Look to theories.**When deciding on meaning, consider developmental theories or approaches that may help explain development or behavior.  For example, looking at behaviorism could show that a child’s misbehavior is continuing because of reinforcement from teacher attention.  Considering where the child is on Maslow’s Hierarchy of Needs may help you recognize the reason for a behavior.

**Consider socio-cultural context.**It isessential to be sensitive to diversity issues when evaluating and assessing.  Self-knowledge about your personal prejudices is important, as is the instrument’s appropriateness for a particular child.  For example, testing a non- English speaker in English can’t accurately measure ability.  Research clearly shows multiple negative effects of inappropriate assessment practices for children of linguistically or cultural diverse families.  When interpreting data, always consider cultural explanations for behavior.  For example, lack of eye contact is usually a red flag, but may not be if the child is from a culture that discourages looking elders in the eye. There are several useful guides and websites, such as the Early Childhood Institute on Culturally and Linguistically Appropriate Services (CLAS). The best source of information is the child’s family—yet another reason for a strong school-home partnership.

**Seek help.** Be sure that you have multiple sources of information and ask for help.  Observational information can be difficult to interpret, and other perspectives may offer insight. When conclusions are not clear-cut, consult parents, other staff, managers, and specialists who may add clarity.  Including other viewpoints or “windows” increases assessment accuracy and utility.

**Conference Tips**

If the mere idea of conferencing makes you anxious, these tips may help increase your confidence.

* + **Be prepared**.  Before the conference, plan how you will organize and present information.  Decide on a couple of major points or goals you want to share and select samples or data that will support them.  If you don’t think well on your feet, make notes to help you.  Don’t try to cover everything, but instead narrow it down to the important facts.
  + **Be specific and clear**.  Avoid meaningless generalizations, such as “She has trouble in…” or “He’s doing great…” without providing particular examples and other evidence.
  + **Put it in writing.** Even though you are looking at evidence while discussing a child, be sure that parents are given a written summary or report to take with them for their records.  Any action agreements reached should also be recorded and copied for parents and providers.
  + **Avoid jargon.**Be sure that you are communicating in a clear and simple manner.  Sometimes it’s easy to slip into professional jargon with terms like “developmental domain” or “sensory integration.”  Think about how you feel when a doctor or other medical worker talks to you in terms you cannot understand — I know it makes me feel frustrated and ignorant!
  + **Be ready to ask and answer questions.**  Encourage parents to be active participants in the conference.  Ask questions that you would in an interview.  Examples are, “What do you see at home?”  “Has this been your experience too?”  “How do you handle \_\_\_?” “What are your concerns or questions?”  Parents also may come with questions of their own.  Be ready to explain your program’s goals and policies, and to answer questions about development and learning.   Remember that you don’t have to know everything — it’s okay to say that you are not sure about the answer and will get back to them.  Just be sure to follow through by researching the questions and communicating your findings.
  + **Be sensitive**.  Pay attention to the family’s socio-cultural background and comfort level.  For example, many parents had negative school experiences of their own that may make them very uneasy in school settings and/or when conferencing.  If talking is awkward, it may also be because parents come from cultures with communication styles that are very different from your own, so do not take it personally if conversations are uncomfortable.
  + **Be supportive.** Many teachers tend to blame parents for whatever appears to be “wrong” with their child, or expect teachers to solve issues they can’t.  For example, which way would you want to be asked about your child’s behavior: “I’m concerned about Clarence’s behavior—what’s going on at home lately?” or “I’ve been noticing some new behavior in Clarence lately and am wondering if you have seen the same things at home.”  Do your best to support parents by being positive, offering resources, and respecting the intensity of their feelings for their child.  I believe that to really care about children, we must care about their families too — especially the parents that are hardest to like.
  + **Be honest**!  Being sensitive and supportive does not mean that you should minimize or gloss over your concerns.  One of your responsibilities as a teacher is to recognize atypical behavior and delayed development.  Talking with parents when you believe their child needs to be referred can be very difficult and require great sensitivity.  The following recommendations should help.
    - Plan exactly what you will say and how you will say it; take along notes to guide you.  It’s helpful to have at least your opener, an outline, and your recommendations written beforehand.  Brainstorm with colleagues if you need help.
    - Never diagnose -- even when you are sure a child is autistic or has hearing problems, for example.  Your job is to screen and refer, so be professional and don’t guess or assume. This conversation is about the need for further assessment.
    - Use effective communication skills, such as “I” statements, active listening, and positive body language.  Remember that you are the professional, so you are responsible for setting a collaborative and supportive tone.  I use certain phrases repeatedly that seem to work;   “I’m wondering …” or “It seems like…” are good openers.  Other are, “You and I both want what’s best for Gracie, so…” and “The assessment will help me know what she really needs.”  Do a lot of reflective listening: “So, you’re saying…”or “It seems to you that….”) so that parents feel heard and you understand what they are really expressing.  These suggestions might not work for you, but find some that feel natural to you.
    - Practice what you will say with a colleague by role-playing.  This is especially helpful if you are new to conferencing or anticipate a particularly complicated or difficult meeting (such as referring parents for further assessment or services).
    - Show that you also see the child’s strengths and gifts. Any parent will be overwhelmed with a laundry list of their child’s deficits so say positive things too. Families hear better when they believe you like their child too.
    - Expect parents to be defensive, since most will go through the grief cycle usually associated with death (Kubler-Ross, 1969) when they learn that they have a child with special needs.  The grieving cycle includes the following phases, and people move back and forth among them.

(1) Shock and denial (“Not my baby, you’re wrong”)  
(2) Anger (“Why him?  It’s not fair”)   
(3) Bargaining (“Maybe she’ll get better if we just…”)  
(4) Depression (“Poor us…”)  
(5) Testing and acceptance (“Realistically, it may help if we…”)

No matter how gently you put it, you are saying that you suspect something is “wrong” with their child.  Some parents need to hear the same concerns from many people over time before they are able to listen. How well families cope with the grieving process depends on many factors, including parents’ backgrounds and level of social support.  Most will revisit these emotions whenever their child faces a milestone, such as going to kindergarten.  Others may become stuck in a certain stage and need professional help.

* + **Plan for the future.** Together with the parents, create goals and a plan for home and school that supports the child’s learning and growth.  Narrow it down to just a few strategies and be sure to record the agreement or plans made.  If a referral is necessary, come to the conference prepared with resources and contact information.