Understanding the Psychoeducational Evaluation

Evaluations, and their results, generate feelings of both relief and confusion in parents. These rigorous tests are the process by which a determination is finally made after months -- or sometimes even years -- of frustration, worry, fear, and sometimes shame. Parents who have watched and worried over a child where something didn’t seem “quite right” take an important step when they decide to have an evaluation, and then receive the findings. While at times intimidating, the psychoeducational evaluation report details a great deal about their child’s strengths, weaknesses, and neurological development.

Aside from determining if their child has been “diagnosed” with a learning issue, most parents really don’t understand what the psychoeducational evaluation communicates about their children. This is unfortunate because a comprehensive testing battery provides so much more than a label -- if parents are able to understand the results.

Test findings often detail important information about a child’s natural learning style, detailed by specific strengths and weaknesses. The psychologist can explain that “the testing showed us that you are very smart. You just have a problem with your memory.” After so much frustration, possible self-blame, or self-loathing, it is very powerful for a child to hear a specialist reinforce that they are smart and capable, and back it up with evidence. There may actually be a neurological basis for challenges that are mistakenly construed as “lack of motivation” or “just lazy.”

The most important thing to remember when talking about the psychoeducational evaluation is that it is the process of testing that provides the results. No single test can be used to diagnose. No single score can stand alone to indicate a specific strength or weakness. It is critical to remember that the specialist looks for a pattern of strengths and weaknesses that emerges across several tests.

When Should You Consider an Evaluation?

Parents decide to have their children tested in a variety of ways. In some cases, the school counselor or a teacher has suggested it. In other cases, the parents themselves suspect that their child needs to be evaluated. Parents often report that they just “know” that their child is brighter than their schoolwork demonstrates, or that something just “doesn’t add up.” Oftentimes, what parents and/or teachers have determined is that something is affecting the child’s ability to perform in school, that the challenge is not simply a lack of effort on the child’s part. Similarly, there may be a suspicion that “acting out” behavior stems from frustration that the student is experiencing.

While there is no hard and fast rule, typically, learning issues do not appear suddenly and they do not impact just one area. Learning issues can often be traced back several years. If you suspect that your child may have learning issues, it is important to document the problems you see in order to help determine whether there is a pattern of difficulty. It is important to recognize that not all students who are struggling academically need to be tested. Prior to having a child undergo a formal evaluation, parents should work with their child’s teacher to try alternative learning strategies. The child’s response to these interventions can provide clues about whether further assessment needs to be done. Most frequently, students who are having a hard time in a subject are able to work through the issue with extra help or with non-traditional approaches. When a child continues to struggle despite the additional help, this can be an indication that there is a neurologically-based learning disability that requires a formal evaluation.
Common academic issues include:

- Early speech and language delays
- Poor performance in one specific area or subject
- Poor reading comprehension
- Difficulty remembering basic math facts
- Difficulty putting their thoughts into writing
- Poor spelling
- Difficulty remembering what he or she has studied
- Poor performance on tests despite the fact that they have studied
- Difficulty finishing work or tests in the allotted time
- Difficulty identifying what information is important when they read or study material
- Difficulty with long-term projects or follow-through
- Poor organization
- Poor attention in class/excessive daydreaming

Parents may have reservations about having their child evaluated. Common concerns include: fears of having their child labeled, concern that they will be pressured to put their child on medication, and anxiety about the stigma attached to certain diagnoses. There are times when parents may just need additional time to process the idea that their child may have a learning issue. The possibility of finding out that there is something “wrong” with your child can be a scary one.

On the other hand, the benefits of having your child tested are enormous. Over time, children with some type of learning challenge frequently come to believe that they are “dumb” or that they just CAN’T learn. This can impact self-esteem, coping behaviors, and their relationships with friends and family. Many of these issues can be resolved if an assessment is conducted and an appropriate course of action is identified.

**Finding a Specialist for Testing**

If you have decided that your child would benefit from testing, it is worthwhile to do some research before you choose a psychologist. Children can be tested through the school system or they can be tested by an independent psychologist. The learning resource specialist or administrator at your child’s school can often give you guidance about how to pursue testing through the school system.

**Deciding between school testing and an independent psychologist:**

1. **One of the most accepted definitions of a learning disability is a “severe discrepancy between the child's cognitive ability and their academic achievement.”** School assessments tend to successfully identify students with learning problems when the students are older and the academic failure is more pronounced. By design however, a school-based evaluation may miss subtle learning problems, particularly in bright children or younger children.
2. Time can also be a key concern when opting school-based evaluations. Despite the best of intentions, most often the school process takes longer than an independent specialist.
3. Testing independently can be costly -- and insurance may not cover the expense.
**Recommended questions when evaluating a specialist:**
- How much time will be spent evaluating my child? Testing can take four hours to several days.
- The timeliness of the completed report: 3 weeks or 3 months to finish the report?
- What kinds of testing will be included? A comprehensive assessment should include a wide range of tests that can provide a multi-layered picture of your child’s strengths and weaknesses. A typical evaluation will look at your child’s cognitive ability, their academic achievement, and a number of more specific skills such as their attention or executive functioning. A good evaluation will pull apart the numbers and help you understand exactly what skills are contributing to their academic problems and how to strengthen them.
- Will I receive a written report? Will the report offer recommendations to assist with the issues that prompted the need for the evaluation? A good evaluation report will do more than give you a superficial picture of your child based on a few scores. This should include suggestions and recommendations as well as diagnostic impressions.

**THE TESTING PROCESS**

After you’ve decided to have your child evaluated, what should you be looking for? And what do the test findings actually say about your child? A typical evaluation will look at your child’s cognitive ability, academic achievement and a number of specific skills related to the learning process.

**Cognitive testing**

The two tests of cognitive ability that are most typically used are the Wechsler Intelligence Scale for Children IV Edition (WISC-IV) and the Stanford-Binet Test of Cognitive Ability. These tests determine a child’s “IQ.”

For example, Jane’s overall cognitive abilities on the WISC-IV fell in the High Average Range and exceeded those of approximately 84% of her peers (Full Scale IQ = 115; 95% Confidence Interval= 110 -119)

What does this information actually mean? This statement says that Jane’s Full Scale IQ of 115 places her in the 84th percentile. The 84th percentile is considered to be within the High Average range. On the WISC-IV, a standard score of 100 falls in the 50th percentile, or you did better than half the kids and not as well as half the kids.

**The Full Scale IQ is comprised of a number of subtests, grouped into four basic areas:**

1. **Visual Comprehension Index (VCI):** The VCI reflects the ability to use verbal skills gained through formal and informal education/exposure. It includes the ability to reason with words, to learn verbal material and to process verbal information. Children who have strong verbal skills typically have an easier time in our academic system, than those who have weaker verbal skills.
2. **Perceptual Reasoning Index (PRI):** The PRI reflects the ability to reason with non-verbal information using skills such as fluid reasoning, non-verbal concept formation, visual perception & organization, and visual motor coordination. These skills help an individual to recognize patterns and to form mental pictures — critical in areas such as solving math word problems. Children who are strong in this area may be thought of as more “intuitive” because they can solve problems, but cannot always tell you how they did it.
3. **Working Memory Index (WMI):** The WMI is the ability to pay attention to, and hold information in, your mind long enough to do something with it. Memory is an extremely complex concept and many things can impact one’s ability to “remember” things, including verbal abilities, attention, organizational skills and retrieval skills—is the material getting in, and can you find it again once it’s in there?
4. **Processing Speed Index (PSI):** PSI refers to the ability to mentally process routine information quickly and efficiently, without making errors. These are tasks that we assume are automatic and do not require a lot of mental energy to perform, such as recalling basic math facts, etc. Many people are extremely “smart” but they work slowly.
Once your child’s cognitive abilities have been determined, the assessment will focus on broad academic skills such as reading, writing and arithmetic, as well as other areas that contribute to the learning process.

**Academic and Processing Issues**

There are a number of test batteries that are used to assess academic functioning. Currently, one of the most commonly accepted practices in Baltimore County and Baltimore City for diagnosing a learning disability is the “discrepancy model.” The finding that there is a “significant” discrepancy between the child’s cognitive ability and their academic performance, in one or more areas. This refers to the finding that there is a “significant” discrepancy between the child’s cognitive ability and their academic performance in one or more areas. Often, in order to receive services at school, students need to be more than one year below grade level in one of the broad areas of academic functioning. In reality, there are many underlying skills that contribute to reading or math success. A thorough evaluation should help you uncover the specific skills where your child is struggling, or can benefit from intervention. **It is critical to determine why a student is having problems in a given academic area.**

**Basic Skill Areas to Evaluate:**

**PHONETIC AWARENESS AND DECODING** refers to the ability to associate a specific letter with the sound it makes. For example, remembering that the letter *b* makes a /b/ sound or the letters *ch* make the /ch/ sound. This is one of the primary areas of difficulty in children who have reading disorders. Some children have difficulty remembering the associations and therefore can’t sound out an unfamiliar word when they see it (decoding) while others have a hard time distinguishing one sound from another (phonemic awareness).

**READING COMPREHENSION** refers to the ability to understand, process and recall information that has been read. One of the best ways to determine the underlying causes of poor reading comprehension is to administer a test that requires the child to read aloud. When the difficulty in comprehension reflects a weakness in the ability to decode words, children may read slowly, stumble over words or substitute words that look similar. Poor comprehension can also indicate that the child fails to process and store what they are reading. Sometimes this is related to “inattention.” When children have ADHD, they still may not be able to answer questions about what they’ve read because they have not processed the material in a way that allows them to remember and recall it.

**ATTENTION** is term that incorporates a number of skills. There are also a variety of ways to assess attention: formal tests given by the evaluator, parent and teacher checklists, some computerized tests, and a standardized developmental history. Frequently, parents will report that their child “doesn’t seem to be listening” or is “easily distractible.” It is critical to keep in mind, however, that many things can interfere with attention. **It is also important to recognize that almost every learning and emotional issue disrupts attention.** For example, a student who is anxious often presents as inattentive. They may be “paying attention” to their own thoughts and worries, rather than the world around them. A range of other emotional issues can interfere with a child’s ability to pay attention to their work. Children with ADHD will have problems across a number of issues, in addition to a weakness in attention.

**FLUENCY** refers to the speed with which a student can accurately perform tasks that should be automatic. These are tasks that we assume do not use a great deal of mental energy (such as recalling single-digit math facts or reading short sentences). Some students have the academic skills necessary to perform the tasks but they do so at an unusually slow pace. These are the students who never seem to complete their work in the allotted time. One accommodation that has become popular for these students is to give them extended time on tests. Students with reading disorders truly work slowly and need additional time to complete their work. Students with ADHD have difficulty with time management so they often fail to keep track of the passage of time as they work and, as a result, run out of time. These students may need additional time, but typically it is necessary to impose some external structure on their time such as more frequent cues.
**WORKING MEMORY** refers to the ability to remember information long enough to do something with it. In order to understand memory challenges, it is best to review the basics of how an individual remembers. **Encoding** refers to the initial perception and registration of information. **Storage** is the retention of encoded information over time. **Retrieval** refers to the processes involved in using stored information. Whenever people successfully recall a prior experience, they must have encoded, stored, and retrieved information about the experience. Conversely, memory failure—for example, forgetting an important fact—reflects a breakdown in one of these stages of memory.

Working memory is different than long-term memory. Long-term memory refers to information that you have learned, or acquired over time. Working memory refers to information that you “juggle” in your mind as you try to do something with it (e.g., remember a phone number long enough to dial, remember what the teacher has said long enough to write it down). **Memory is one of the most complex areas of functioning and can be impacted by a number of processing disorders.**

**EXECUTIVE FUNCTIONING** refers to the ability to organize information in a way that enables someone to achieve a future goal. There are a number of skills that come under the general umbrella of executive functioning: planning and organization, time management, working memory, emotional regulation, self-monitoring and the ability to inhibit one’s impulses. These skills are dependent on maturation in specific areas of the brain. This means that until those areas develop, it is beyond the child’s ability to perform skills that require strong executive functioning. The brain continues to develop through one’s 20s. Children who have ADHD show slower development in the areas of the brain related to executive functioning—some experts suggest that their brain development is about 30% slower than their peers (so a 10-year-old with ADHD may really be functioning at the level of a typical 7-year-old). As a result of this, executive functioning is one of the key deficits for children who have ADHD. In many cases, children are able to compensate for their ADHD in elementary school but they start to stumble in middle school when the demands on executive functioning increase significantly.

**AFTER THE DIAGNOSIS**

Given that the results can be complicated, parents often need time to read through the evaluation more than once, and digest the information. Some parents enter a period of “grief” when they receive information they were afraid to be true, or information they weren’t expecting. While this is normal, it is also important to remember that for the child, the diagnosis may actually bring far more relief than grief.

The diagnosis of a learning challenge ends speculation for parents, and can pave the way for different strategies to more effectively support their child. The basic recommendations for any parent receiving news that their child has a learning disability is to learn about the disorder, share the news with others who can offer support, and build a strong network of support for your child.

**RE-EVALUATION**

*It is recommended to be re-evaluated every three years.* Current report findings are needed to determine whether a student can continue to be eligible for services, can be eligible for accommodation on the SAT, or receive accommodations in college.
SOME OF THE MOST COMMON QUESTIONS ASKED BY PARENTS:

My child got scores on reading-related tests that are within the average range but they are not nearly as strong as her cognitive abilities. Is this a learning disability?

There is debate in the professional community about whether a learning disability can be defined as 1) a significant discrepancy between one’s cognitive abilities and one’s reading skills or 2) if specific reading skills must be significantly below average. Although many of the schools use a discrepancy model; there must also be evidence that the weakness is causing impairment in the child’s school functioning. It is not sufficient to show that the child is not working at a level that is consistent with their potential. In the case of the second definition, a significant discrepancy would reflect a weakness if a child’s skills were within the average range, but it would not necessarily indicate that there was a reading disability such as dyslexia. Unfortunately, there is no definitive answer to this question. Most professionals would agree, however, that a child with a learning disability would demonstrate difficulty across several language-based tests and it would cause impairment in school functioning.

What now? What do I do with the results of my child’s evaluation?

Typically, the evaluation should be shared with the school during a “team meeting.” This meeting may include a range of professionals from the school but minimally it should include the student’s teacher, the special educator, a school psychologist and the parents. At that meeting, they will review the evaluation and determine how the child’s weaknesses are causing impairment in their learning. A number of accommodations can be implemented and/or support services provided, based on the test findings and the recommendations of the psychologist who did the evaluation.

Will my child always have this problem?

Because the brain continues to develop through early adulthood, it difficult to forecast whether your child can “outgrow” certain issues or whether tutoring or coaching will help remediate weaknesses. In most cases, however, there will be some residual effects that would continue to be evident should your child be tested as an adult. For children with reading disorders, in most cases they learn to read well enough to meet life’s demands. They may always read more slowly and typically, they remain poor spellers. Children with ADHD tend to outgrow hyperactivity and, as their brain develops, they are likely to acquire the ability to perform various executive functions. However, they are also likely to continue to need to work harder than someone else might in order to stay organized and manage their time effectively. We know that there are a number of areas that continue to present challenges in adults with ADHD.