

Infant/Toddler Assessment

One Program's Experience

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Assessment of infants and toddlers in a center-based or home visiting program can be a challenging task. However, if educators are to make valid interpretations and good decisions about what to teach and how to teach it, they must assess all the children they teach, even the infants and toddlers.

This article explores developmentally appropriate assessment for infants and toddlers, recognizing the challenges involved in this endeavor and outlining the benefits that can be realized from systematic, ongoing observation and assessment. Both the challenges and the benefits are illustrated by one program's implementation of a functional assessment, The Ounce Scale (Meisels et al. 2003), a new approach that focuses on the purposes of children's behavior.

The challenges of assessing infants and toddlers

Although assessment holds great potential to help caregivers understand the children they care for, it can be challenging to assess infants and toddlers, especially if one views assessment as a one-on-one testing interaction. Babies have short attention spans, particularly if what they are being asked to do does not interest them, and they express strong feelings if a toy they are happily playing with is removed. They are strongly affected by contextual factors. If the baby is hot, cold, tired, hungry, afraid, or not interested, it is unlikely that you will get a valid assessment of his development.

In addition, a child's developmental level and cultural background can affect how she approaches assessment tasks. For example, during



periods of stranger anxiety, it will be difficult for an infant to interact easily with an unfamiliar adult. Moreover, infants' and toddlers' limited language skills do not allow them to tell you what they know; instead adults must decipher nonverbal cues, vocalizations, and body language.

Even when educators use less formal types of assessment, observing and assessing infants and toddlers in centers or on home visits can be a challenge. Infants and toddlers cannot be left to play independently, and simply finding time to observe and take notes requires a high degree of professional commitment, as well as efficient time management skills. Very young children require ongoing attention and assistance, which means that caregivers cannot observe "out of the action" but must observe while they are interacting with the children. Moreover, because caregivers often carry infants and toddlers, taking notes is not always an option. In the complex and ever changing environment of an infant/toddler program, it can be daunting to find the time and energy to make assessment an integral part of teaching.

Why assess infants and toddlers?

Despite the myriad challenges posed by the developmental characteristics of infants and toddlers and the busy nature of infant-toddler programs, assessment of very young children is an essential part of quality care. Careful observation of infants and toddlers on an ongoing basis, followed by sensitive interpretation of their behavior within a developmental continuum, offers many benefits to infants, toddlers, and their caregivers.

Understanding and connecting with children

Assessing infants and toddlers helps caregivers build relationships with the children (Jablon, Dombro, & Dichtel-miller 1999). The better you understand a child and take actions based

on those understandings, the stronger your relationship with that child. Studying children, which is the heart of assessment, helps teachers discern why children do what they do, what makes them smile and laugh, and what tasks are difficult for them. Caregivers gain respect for the children's strengths and challenges, feel connected to them, and come to appreciate each child's individuality. These social relationships provide the foundation for learning (Vygotsky 1978).

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Monitoring progress

Effective assessment also allows educators to describe and track children's development over time to ensure that children are growing and developing as expected. Typically infants and toddlers grow and change at a rapid pace. If careful observational assessment reveals that a child is not progressing, the caregiver can seek further evaluation. When programs keep track of children's developmental progress, families can be reassured that their child is developing normally. If families have concerns about their child's development, they can share these concerns with a caregiver who has carefully monitored the child's progress.

Guiding and individualizing planning

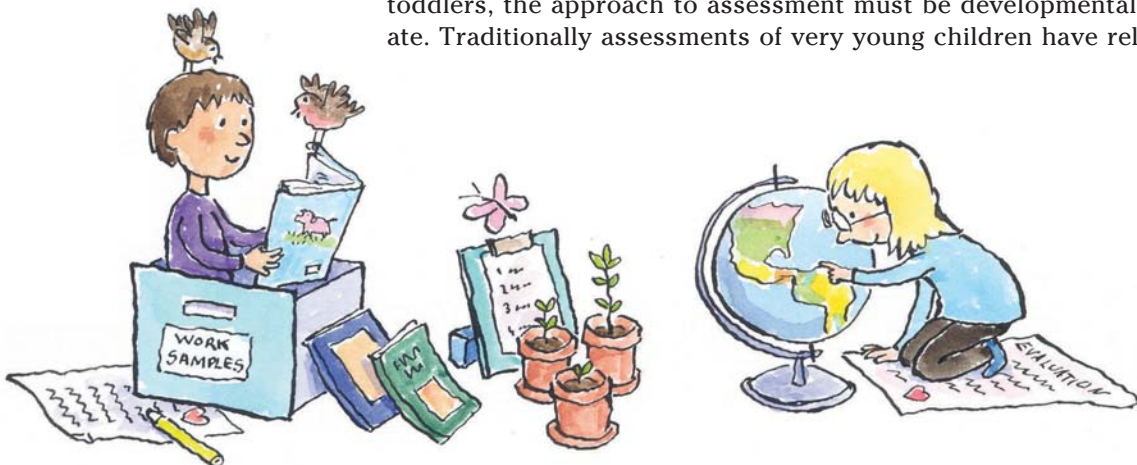
A major reason for regularly assessing infants and toddlers is to translate the assessment information into individualized plans for children. Too often assessment is seen as ancillary to the caregiver's primary role, and assessment information sits unused in file drawers. Uncovering infants' strengths and areas of difficulty allows the caregiver to tailor interactions, routines, materials, and activities to each child's individual needs and interests. If, for example, an eight-month-old is just beginning to move around by crawling, perhaps some large, lightweight balls should be introduced so he can crawl after them. Assessing infants and toddlers can guide the processes of setting goals and planning curriculum.

Strengthening relationships and empowering families

Assessing infants and toddlers can strengthen the relationship between the home and the program and can empower families. The caregiver who regularly shares information with families and listens appreciatively to each family's stories and comments is forging a relationship of equality with the families. Partnering with families to learn about children's development acknowledges that families have unique information to share and that their perspective is valued. When family members feel that they have something valuable to share with the program, they are more likely to become involved in a meaningful way.

Task-based versus functional assessment

To realize the full benefits associated with assessment of infants and toddlers, the approach to assessment must be developmentally appropriate. Traditionally assessments of very young children have relied on a task-



based or milestone approach in which infants work in a one-on-one situation with an examiner. They are presented with materials and encouraged to do certain activities. For example, a toddler may be asked to find the eyes, nose and mouth on a doll. After this interaction the doll is removed and another toy presented. Naturally many infants and toddlers react negatively to this process; the resulting information may not be reliable or valid.

Functional assessment (Greenspan 1996; Bagnato, Neisworth, & Munson 1997; Meisels 2001) uses a different approach. Rather than trying to elicit

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predetermined behaviors through specific tasks, caregivers look for each child's individual way of accomplishing certain functions or purposes. For example, a caregiver might observe a child at a center or during a home visit in order to discover how the child shows trust in others, communicates, or moves around his environment.

Children accomplish these functions in many different ways, all of which are valid. Instead of looking for narrowly defined skills such as putting a cube in a cup or drawing a vertical line, the caregiver comes to appreciate the wide variety of ways that infants and toddlers show us what they know and can do. For

example, one six-month-old might show her trusting relationship with her mother or caregiver by reaching out whenever that person is near; another six-month-old might smile whenever he catches the caregiver's eye; still another might make sounds to attract the caregiver's attention. All these behaviors show the existence of a trusting relationship; each behavior reflects an individual's expression influenced by development, experience, culture, and personality.

To provide developmentally appropriate assessment that benefits infants and toddlers, we need a new vision of assessment: a vision of caregivers studying infants and toddlers to learn how they accomplish certain important functions—moving around, forming relationships, manipulating objects, solving problems and communicating with others. It was this new vision that motivated an Early Head Start program to adopt a particular functional assessment, The Ounce Scale.

The Visiting Nurse Service of New York (VNSNY) operates an Early Head Start program that serves 75 pregnant and parenting teenagers and their infants and toddlers in the Rockaway region of Queens. The program provides comprehensive, integrated home- and center-based health and development services designed to (1) increase the growth and development of infants/toddlers and families; (2) enhance parent-child attachment; (3) empower parents and strengthen families through education, employment, and decision-making opportunities; and (4) strengthen relationships with community agencies to foster a safe, nurturing community environment conducive to children's development. The program's two primary methods of service delivery are a full-day, full-year, center-based program and a home visiting program. Staff members



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include infant/toddler teachers and home visitors, social workers, and public health nurses.

Laura Ensler, the program director, recognized a need for a systematic way to keep track of children's development that took into account the context of each child's life. In her search for a tool, she rejected task-based assessments because they relied on minimal observation of the child and often resulted in labeling very young children. After participating in the field test of The Ounce Scale, the VNSNY Early Head Start program adopted the assessment for use in its home visiting and center-based programs.

The Ounce Scale

The Ounce Scale is an observational, functional assessment created to assess children from birth through 42 months. It was designed to be used in Early Head Start programs, child care centers, Even Start programs, home visiting programs, and family child care homes. It can be used effectively with children living in poverty, children at risk or with disabilities, and children growing and developing typically.

The Ounce Scale is organized around eight age levels and six areas of development:

- Personal Connections—How children show trust
- Feelings about Self—How children express who they are
- Relationships with Other Children—How children act around other children
- Understanding and Communicating—How children understand and communicate
- Exploration and Problem Solving—How children explore and figure things out
- Movement and Coordination—How children move their bodies and use their hands

These areas of development provide the framework for the caregiver's and family's observations of the child.

The Ounce Scale has three parts: the Observation Record, the Family Album, and the Developmental Profile and Standards. The Observation Record is an age-level booklet that serves as the caregiver's observation tool (Marsden, Dombro, & Dichtelmiller 2003). Questions and brief descriptions in each area of development focus the observations. Caregivers or home visitors answer each

observation question by observing and recording what they see as they watch children in a variety of natural situations at home or at a center.

The Family Album is a small, brightly colored booklet, similar to a scrapbook or baby book. The album serves as the family's observational tool in which they can write notes and stories, keep photographs, and save drawings that illustrate the baby's growth and development. It also includes suggested home activities. Because the Family Albums are organized around the same observation questions as the Observation Record, families and caregivers can focus on the same questions at the same time.

The Developmental Profile and Standards is the third element of the scale. The Developmental Profile is a rating scale that evaluates children's



Courtesy, Beginner's Nature Program staff

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behavior in four areas: social and emotional, communication and language, cognitive development and physical development. At the end of each age level, the caregiver reviews the data from the Observation Record and Family Album and compares them to descriptions of expected behavior from the Developmental Profile in order to evaluate the children's development.

One program's experience

Teachers and home visitors at the VNSNY Early Head Start program found the Observation Record easy to use. Like other checklists, it provided an outline of the types of behaviors to observe. According to one teacher, this structure "empowers me as an observer and makes me feel competent about what I'm observing." Another teacher pointed to the rationales in the Observation Record as "refreshers for understanding developmental domains. The examples coax me into remembering more and thinking of more examples that I've seen."

Having access to recorded observations, organized for easy retrieval, enables teachers to feel more confident about making early intervention referrals. "[Referrals are] no longer based on a feeling or a brief screening but on actual observations collected over time." Several teachers said that using the Observation Record enhanced their observation skills and helped them see children as individuals.

The Family Album provided the family with an observational tool that acknowledged the family's unique knowledge about their child. As one caregiver said, "If we do the Family Album together with parents as partners, our relationship grows and we are able to establish trust. Doing it together removes us from the role of expert and empowers parents to become the experts about their own children."

Although the Family Album fits easily into the routine of a home visit, center-based caregivers found it to be the most challenging part of The Ounce Scale to implement. Limited time with families made it difficult to integrate the Family Album into classroom life.

The VNSNY Early Head Start program developed several strategies to increase families' use of the album in center-based classrooms. They enlisted the help of "Ounce mentors," parents who have used the Family Album successfully, and asked them to show their Family Albums, introduce the album to new families, and help these families start their own albums. Classroom teachers invited parents into the classroom to observe their child's activities and make notes for the Family Album. They also created an Ounce Family Bulletin Board in each classroom to display pages from Family Albums and explanatory information related to a particular area of development.

The VNSNY Early Head Start caregivers and home visitors found the Developmental Profile easy to understand and use. It gave them a chance to summarize what they knew about a child and make plans for the future. As one staff member said, "When I complete the Developmental Profile with the family, I also update the Family Partnership Agreement and review the parent's goals for the child. It pulls it all together." Home visitors noted that families are more comfortable with Needs Development ratings because they have been involved in the assessment process and observed the same behaviors as the home visitor.

Home visitors and center-based caregivers agreed that using an ongoing, functional assessment provided them with a more complete picture of each child based on their own observations, as well as the family's observations over time. Some commented that observing over several months is a

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much different experience than administering a one-on-one task-based assessment.

"The Ounce allows you to see progress over time. You don't feel locked into making evaluations of a child each day or after a short assessment. It's a way to see a child in context and over time." Caregivers translated the assessment data into curriculum planning. For example, one caregiver noted that when several of her children demonstrated a newfound love of language, she decided to introduce a new, longer, and more interesting song during circle time.

The comments from the VNSNY caregivers clearly demonstrate the benefits of using functional assessment. Not only does it more accurately measure a very young child's performance in the context of daily routines, it also empowers the family to participate in the assessment process. Because the assessment information is gathered in the child's everyday environment, it is easily translated into curriculum plans. This program's experiences show that whatever the challenges of using a functional assessment, there are significant positive impacts on the children, families, caregivers, and program.

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