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— by Karen L. Schiltz, Ph.D.

## What Are The Different Types of Evaluations To Consider

If Your Child Is Experiencing Learning and Social Challenges At School?

*“I knew something was not ‘quite right’ when Tatum was in the third grade. She was having trouble reading quickly and could not grasp the meaning of what she was reading. Tatum would get very tired because she would reread the chapters over and over again. On top of that, she had problems keeping a friend. Tatum is a kid who only wants to talk about what she is interested in. The only thing she wants to do is play the Sims game. The problem is most of the girls are not interested in that game. She clearly wants friends but has trouble going back and forth in a conversation. I think Tatum is becoming very sad and anxious now that she is in the fourth grade. She does not have a best friend.”*

Tatum’s mother, Pat, knew something was *not quite right*. In fact, she worried about her daughter being victimized at school because of her difficulty understanding her peers and navigating amongst all of the groups. It seemed as if the girls in Tatum’s class were neglecting her. On the other hand, Tatum had struck a friendship with one girl, Dana, who was also really into video games. Dana also had difficulties with reading and they were in the same reading group at school.

Tatum’s mother decided to get help because she thought her daughter’s problems were severe and occurred every day

“Pat needed a **roadmap** of her daughter’s functioning because her daughter’s teacher told her it was key to understanding what Tatum’s specific weaknesses and strengths were.”

at school and at home. Tatum’s reading problems did not seem evident when she was younger because she could read words well. However, she could not finish a timed test because of the slowness with which she read. Tatum’s problems socially were also not evident at a younger age because most of the chil-

dren liked the video games and did not mind following Tatum’s lead. However, it appeared the social demands escalated fairly quickly when Tatum entered the third grade. Problems socializing occurred at school and also during extracurricular activities such as swimming practice. Pat feels badly because she chose not to pay attention to the warning signs at that time. It was too painful for her to acknowledge that her daughter had problems. However, Tatum was now becoming sad, anxious, and frustrated. This was not acceptable anymore. It was time to find out what was really going on.

Pat needed a *roadmap* of her daughter’s functioning because her daughter’s teacher told her it was key to understanding what Tatum’s specific weaknesses and strengths were. She decided to consult with Tatum’s pediatrician, Dr. Julia Abrams. Dr. Abrams conducted a physical examination and told Pat the examination did not reveal any problems with her vision and hearing. The pediatrician recommended evaluations from two specialists because of Tatum’s problems with



reading and social skills. Dr. Abrams explained one specialist could not do everything that Tatum needed.

### Neuropsychological assessment:

The neuropsychologist will typically assess many areas of thinking and behavior. The assessment measures attention and concentration, language, motor skills, learning and recall of verbal and visual information, planning and organizational skills, abstract reasoning skills, verbal and visual reasoning skills, working memory skills, speed of processing, achievement, social-emotional, social communication, and daily living skills. The neuropsychologist incorporates a *multidimensional* view of the child. Teachers and parents complete surveys in order to get a picture of the child's behaviors in the school and home environments. The assessment also leads to a thorough roadmap for effective intervention and in planning goals and objectives. In addition, accommodations are typically suggested in the neuropsychological report such as additional time for tests.

### Speech and language evaluation:

A speech-language therapist will conduct formal testing in the areas of auditory processing, receptive and expressive language, phonological processing, articulation, fluency, and social communication skills—for example, your child's ability to understand facial expressions and emotions. A referral to a speech-language therapist is also necessary for the child when there are problems with oral-motor coordination affecting speech.

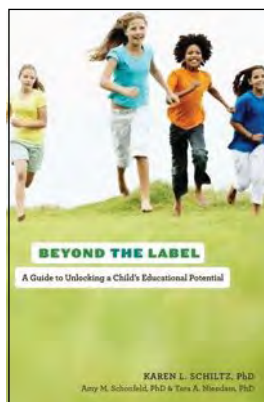
A school psychologist from the school district was also involved in the process. She considered the neuropsychological and speech and language evaluations because the parents were wondering whether their daughter would benefit from special education and a social skills group at school.

Each type of assessment in Tatum's case served a different purpose in understanding her strengths and weaknesses. Although each assessment took time, Pat was grateful for the expertise from each of the evaluators. She now had a *roadmap* of her daughter's strengths and weaknesses so evidence-based (treat-

ments that work) interventions could be chosen to help her daughter.

*"My daughter received the help she needed. We were told from the evaluators Tatum needed speech-language therapy, a reading specialist, and accommodations in school. It is one year later. Tatum now has several friends. She looks her peers in the eye now instead of looking away when they are talking. My daughter is also able to talk about topics that her friends are interested in and not just her own interests. Our phone is ringing for play dates most of the week and Tatum is beaming. Tatum was also involved in a reading program, which helped her with critical thinking skills. My daughter learned strategies to help her understand what she was reading. I was told her troubles with social communication were due, in part, to her problems with inferential reasoning. The school district also determined she would benefit from 50% additional time on tests. I learned from the neuropsychologist Tatum has problems with attention and now she is allowed to take tests in a private room so she is not distracted. I'm relieved. Tatum and I realize this is a process and we are truly grateful for the expertise from our team."*

**Karen L. Schiltz, Ph.D.** is a California licensed clinical psychologist with a private practice in Neuropsychology. She also holds a volunteer position as Associate Clinical Professor at the Medical Psychology Assessment Center of the Semel Institute for Neuroscience and Human Behavior



of the Department of Psychiatry and Biobehavioral Sciences at David Geffen School of Medicine at UCLA. She is also a co-author of the book *"Beyond The Label: A Guide to Unlocking a Child's Educational Potential"* (Oxford University Press, September 2011) which encourages parents to ignore stigmatizing labels and focus on their child's specific strengths and weaknesses, first by getting a proper evaluation and assessment — the earlier, the better.

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