

A Resource Paper for Practitioners: Assessment Considerations for Emotional Disturbance (ED)

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Since March, many students and families have experienced multiple stressors from the global pandemic requiring shelter in place, school closures, significant economic struggles, as well as more recent widespread social unrest. What might assessment teams consider when confronted with assessments related to possible ED eligibility? This paper addresses this question and offers guidance on determining whether an ED evaluation is necessary under the current legal and pandemic circumstances.

Legal Expectations: As of July 2020, the federal government has not waived the federal requirements under the IDEA [which includes Child Find 20 US Code 1412]. The CDE and State Board of Education (SBE) are working with the US Department of Education (USDOE) to determine what flexibilities or waivers may be issued in light of the extraordinary circumstances. At this time, Congress has not passed any additional waiver authority concerning the FAPE and Least Restrictive Environment (LRE) requirements of IDEA, reiterating that learning must continue for all students during the COVID-19 national emergency. USDOE continues to provide updates and Special Education guidance for COVID-19 on their website: <https://sites.ed.gov/idea/topic-areas/#COVID-19> and <https://sites.ed.gov/idea/statute-chapter-33/subchapter-ii/1414>

Impact of Current Circumstances: With any ED assessment during this time, it will be prudent to pause to determine if the symptoms and behaviors that student is currently demonstrating is a true condition or a common response to the continuing uncommon circumstances noted above. The NASP PREPaRE model indicates that initially crisis responders should avoid classifying crisis reactions as mental illness and identify that some reactions would be considered “common reactions to uncommon circumstances.” (Brock, S.E., Nickerson, A. B, Louvar Reeves, M.A., Connolly, C.N. Jimerson, S.R., Pesce R. C. & Lazaaro, B.R. (2016)). Furthermore, it is recommended that classification of crisis reaction as being possible indicators of psychopathology should not begin until a week or more after objective crisis threats have terminated (Brock et.al 2016). We are all still in crisis, and as people are impacted differently, some students may be impacted more than others.

If an assessment team determined the need to conduct an assessment, the following are data collection considerations for assessment teams. First and foremost, the student’s functioning in EACH area of the criteria PRIOR to the pandemic must be carefully reviewed and documented.

Eligibility Criteria	Assessment Considerations
An inability to learn that cannot be explained by intellectual, sensory, or health factors.	First, verify the student’s health status. Then, consider: (1) any documentation of the student’s previous learning abilities and compare with the student’s current behaviors and symptoms. (2) student’s instructional opportunities, participation rate, progress from teacher(s) in distance learning; and from family about any additional instructional opportunities during the summer.
An inability to build or maintain satisfactory interpersonal relationships with peers and teachers.	Due to shelter in place, there may be less opportunities for students to demonstrate interpersonal relationships with peers. During distance learning, it may also be harder to have a meaningful “relationship” with peers or teachers. For some students, the pandemic may have created more anxieties that impede relationship building., For other students, being at home may provide a more calming and less pressured environment that helps the student’s ability to form relationships.

Inappropriate types of behavior or feelings under <i>normal circumstances</i> .	Given the current circumstances of the pandemic, inappropriate behavior may be difficult to determine. Consider comparing the student's behavior with similar age siblings, if any, and interview family members to ascertain if a student's behaviors are unusual or extreme.
A general pervasive mood of unhappiness or depression.	Again, given current circumstances, a pervasive mood of unhappiness and depression may be a common occurrence under the current circumstances. Assessment team may want to use other students at the school as a comparison in terms of a mood of unhappiness or depression. Historical data about student functioning prior to the pandemic is also critical.
A tendency to develop physical symptoms or fears associated with personal or school problems.	Many of the current circumstances have led to students developing symptoms or fears and a comparison with other students at the schools for these symptoms will help to know if student's symptoms are atypical. Historical data about student functioning prior to the pandemic will also help determine the answer to this criterion.
Behavior exhibited to a marked degree across multiple settings.	Students may not necessarily have the opportunity to be in other settings other than home. As stated above, for some students, the pandemic may increase anxiety and negative behaviors due to family hardships and/or loss. For other students, being at home may provide a more calming environment such that this helps the student perform better. Behaviors could go up or down. Seeking parent/caretaker feedback will be vital. Additionally, if a student is participating in distance learning, teacher interviews and observation should be considered.
For a long period of time	Review information from before the pandemic and current information to see if there is a pattern and/or if behaviors have evolved in conjunction with the crisis. Assessment teams must try to differentiate between common responses to pandemic circumstances or a true disability. In some cases, teams may not have enough data or have so much disparity in information collected, that it is best to defer making any judgments about a Special Education placement.

As noted at the preface of the table, carefully documenting the student's functioning prior to the pandemic is a crucial aspect of current assessment. And given continuation of distance learning, in-person testing may not be valid and therefore assessment must rely more on qualitative data sources including structured interviews with parents/caretakers/teachers/student along with virtual observations, if possible. Moreover, monitoring student progress in tiers 1 & 2 to identify intervention effectiveness could be used as evidence to either support or refute the presence of a disability. Per the NASP PREPaRE model, Tier 2 interventions may be offered to those who were moderately to severely traumatized and following a highly traumatic crisis "can include an entire school." (Brock et.al). Progress data from both Tier 1 and Tier 2 interventions may become the cornerstone of an assessment to either support or refute the existence of a disability. If after reviewing the findings the team believes that the data still does not support a clear educational diagnosis of ED, consider not making that decision until such time when conditions allow for clearer assessment data collection, and indicate such in your report. Additional monitoring will be warranted and a recommendation to reconvene at a later time is prudent.

References

Brock, S.E., Nickerson, A. B, Louvar Reeves, M.A., Connolly, C.N. Jimerson, S.R., Pesce R. C. & Lazaaro, B.R. (2016) School Crisis Prevention and Intervention: The PREPaRe Model, 2n Edition. National Association of School Psychologists

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