Let’s Communicate  Section 2

ASSESSMENT

A handbook for people working with children with communication difficulties

United Nations Children's Fund
New York

Rehabilitation Unit
World Health Organization
Geneva

Rehabilitation Unit
Ministry of Health, Zimbabwe
In the last section we looked at the
- background to communication
- normal development of communication skills
- early identification of communication disorders in children
- causes of communication disorders in children.

In this section we are going to look at the assessment of children with communication difficulties.

By the end of this section you should be able to
- identify children who need to have their communication assessed
- recognise children who are not appropriate for assessment
- create an appropriate assessment situation
- carry out a thorough assessment of a child’s communication skills
- identify a child’s strengths and needs.
ASSESSMENT

Now we are going to look in general terms at all areas concerning the assessment of children under 6 years of age who have communication difficulties. In later sections we will look at specific assessment ideas related to the different disabilities.

**Why is it important to assess a child’s communication?**

If we really want to help a child who has a communication difficulty, we need to get a clear and detailed picture of his abilities.

An assessment of a child’s ability to communicate will help us to:

- pinpoint what the child can do and identify which areas he has difficulty with
- draw up an appropriate goal plan which will meet the child’s needs and will help him to progress
- make a record of the child’s progress.

**Which children are appropriate for communication assessment?**

Well, in theory, any child who has a communication difficulty is appropriate for assessment. But in practice, in many places the situation isn’t that straightforward. Often there are many, many children with communication difficulties but not enough staff to see everyone of them. So we have to decide which children will benefit most from our services, and then concentrate on them.

Any child who is under 6 years of age and who has a communication difficulty is appropriate for assessment.

If you have to decide how to divide your time between children, concentrate your efforts on these young children. It is they who can really benefit from your help.
Which setting is best for assessing a child's communication?

We don't need a special place to assess a child's communication but we do need to create the right atmosphere for assessment....

To create the right setting for assessment these are the things we must consider:

- Either the mother or the father of the child should be involved in the assessment.
- The situation should be relaxed and informal, so that the child and parents feel at ease and able to communicate freely with you.
- Make sure you have enough time to complete the communication assessment without interruptions. 1-2 hours is usually enough.
- Try to be sure that the child is alert and happy when you are assessing her. Do not attempt an assessment when the child is tired, hungry or sick.
- Think carefully about the toys you will need for the assessment. Only use toys that the parents will have in their home. Do not use too many toys, or toys that are too advanced or too simple for the child.
- Make sure that there are not too many distractions for you, or for the child.

As well as the above points, we must remember to use our communication skills well - In this way we play an essential part in making the assessment a success!

We should:

- position ourselves at the same level as the parent and child, and at a comfortable distance from them.
- be enthusiastic and show interest and concern for the parent and child we are working with.
- encourage the parent to be actively involved with the child and with you during the assessment.
- try to build up a relationship with the child by interacting with her.
- always follow the child’s interest — never force her to play with something she is not interested in.
What equipment will we need?

As well as creating the right situation for an assessment, we need to be sure that we have the right equipment. By this, we do not mean that we need highly technical machines and expensive toys. Look at the list below - it gives the essentials needed for a communication assessment!

To assess a child’s communication you will need:

- an assessment form
- a ball point pen
- a clipboard, or something to rest on
- toys — cooking pot, spoon, dish, cup, doll
  — wooden blocks or tins for building
  — variety of different containers
  — bottle tops
  — homemade ‘trumpet’ for making sounds
  — car
  — ball
  — everyday objects
  — a piece of cloth
  — simple pictures of objects
  — pencil and paper

Just look at all these toys! Notice how none of them costs money. They are nearly all things that people have in their homes or that can easily be made. These are often the best toys!
What do we want to find out in an assessment?

In an assessment we need to gather as much information as possible about the child

- her family background and home situation
- her developmental history, including any disabilities
- any previous contact with rehabilitation services
- educational status, i.e. attending pre-school, school, special school.

We then need to add to this general information, specific details about the child’s communication skills.

The areas we need to look at are:

- **speech** — the ability to make sounds and to put them together to form words and later, sentences.

- **understanding** — the ability to make sense of people, situations and language.

- **gesture** — the ability to use body movements, signs and facial expressions to communicate a message.

- **play** — it is through play that a child develops her ideas about the world and learns essential skills for communication.

- **attention** — the ability to concentrate on people and things around her.

- **listening** — the ability to listen carefully to sounds and to people talking.

- **turntaking and imitation** — the ability to take turns in games and to copy other people’s actions, sounds or words.

- **activities of daily living (ADL)** — the ability to be independent in eating, dressing, bathing and toileting.

- **gross motor** — the ability to control large movements of the body
The assessment form

To gather all the information we need about a child, we need to use an assessment form.

On the next pages we will be looking at an assessment form in detail.

The form consists of 4 pages:
- **page 1** — background information
- **page 2** — additional areas to consider
- **page 3** — checklist of communication skills
- **page 4** — summary and goal plan.

Step by step guide to filling out an assessment form

**page 1** — This is fairly straightforward to complete. Just fill in the details required.

**page 2** — This part of the form is also straightforward. Again, fill in the details as required.

**page 3** — This part of the assessment needs more explanation. Here is a step by step guide to help you. *From your observations, from asking the parent, and from interacting with the child* complete the checklist as follows:

1. Mark at the top of the page the child’s actual age.
2. Starting with the first row, Speech, work from left to right, marking what the child can do (✔), and what the child cannot do (✘). Write down any extra comments in the spaces. If it is clear that the child will not be able to do more of the activities in that row, do not continue with them. Move on to the next row, Understanding.
3. Continue as above, working through each row from left to right, until the checklist is complete. You now have a picture of what the child can and cannot do.
4. The areas in which the (✔) are nearest to the child’s actual age are his strengths. Write these at the bottom of the page.
5. The areas in which the (✔) are furthest from the child’s actual age are his needs. Write these at the bottom of the page.

**page 4** — This page deals with goal planning. It is an essential part of the assessment form and we will be looking at it in detail in the next section.

To make this more clear, let’s now fill out pages 1, 2 and 3 of an actual assessment form. In the following pages you will notice that the pages on the left hand side - pages 6, 8 and 10 - give notes to guide you in completing the form. The pages on the right hand side - pages 7, 9 and 11 - are completed for a child.
Explanation of Assessment Form

Assessment of communication skills in children

Province/district: In which area does the child stay most of the time?

Date of assessment: Today's date.

Name: Child's full name.  Date of birth: Day, month and year of birth.

Address: Full postal address.  Age: Present age of child.

Family history: Are parents together? Are either of them employed? How many brothers/sisters? Position of child in family?

Is there anyone else in the family with a similar problem? Is there any history of speech and/or hearing problems on either side of the family? If so, give details.

Birth history: Were there any problems during pregnancy? Was the child full term? Was it a normal delivery? Did the child cry and suck well after birth? Were there any complications? If so, give details.

Childhood illness: Has the child suffered from any major illness? Give details. Look at the child's outpatient cards and Road to Health card for any further information.

Developmental milestones: When did the child start to:
- sit
- crawl
- stand
- walk
- talk
Did the child suck well?
Did she take solid foods and chew at the same time as the other children?

Past treatment for speech, if any: Have the parents received any advice or treatment for the child's communication difficulty before? If so, give details.

When? When was the advice given?

Where? Where was the child taken for advice?

What? What treatment was given or suggested?

1. This form has been adapted from the “Assessment of Communication Skills in Children” form, used at the Children's Rehabilitation Unit, Harare Central Hospital, Zimbabwe.
Assessment of John Muponda

Assessment of communication skills in children

Province/district: Ruangwe, Manicaland.

Date of assessment: 24th September 1991.

Name: John Muponda. Date of birth: 12/2/89

Address: Box 985, Nyanga. Age: 2½ years.

Family history: Parents stay together. Small scale farmers.
Last born of 8 children.

Is there anyone else in the family with a similar problem?
No.

Birth history: No problems during pregnancy.
Born premature, at 7 months.
Did not cry or suck well after birth.
In hospital for 3 months after birth.

Childhood illness:
None.

Developmental milestones:
- Sat - 12 months.
- Crawled - 17 months.
- Stood - 20 months.
- Walked - 24 months.
- Not yet talking.
- Unable to chew solid foods.

Past treatment for speech, if any: Yes.

When? At 17 months.

Where? Traditional healer.

What? Cutting underneath tongue.
Explanation of Assessment Form

From your observations answer the following questions:
Observe the child and think about these questions. If you are sure of the answers now, circle yes or no appropriately. If you are not sure, continue with the assessment and come back to these questions once you have completed the checklist.

<table>
<thead>
<tr>
<th>Question</th>
<th>Answer</th>
</tr>
</thead>
<tbody>
<tr>
<td>Is talking the only problem for this child?</td>
<td>Yes/No</td>
</tr>
<tr>
<td>If no, answer these questions:</td>
<td></td>
</tr>
<tr>
<td>Does child have a physical impairment?</td>
<td>Yes/No</td>
</tr>
<tr>
<td>Does child have a mental impairment?</td>
<td>Yes/No</td>
</tr>
<tr>
<td>Does child have a visual impairment?</td>
<td>Yes/No</td>
</tr>
<tr>
<td>Does child have a behaviour problem?</td>
<td>Yes/No</td>
</tr>
<tr>
<td>Is child developmentally delayed?</td>
<td>Yes/No</td>
</tr>
<tr>
<td>Does child have any other difficulties?</td>
<td>Yes/No</td>
</tr>
<tr>
<td>For example, does the child have</td>
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<td>• convulsions.</td>
<td></td>
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<tr>
<td>• feeding difficulties or drooling.</td>
<td></td>
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<tr>
<td>• any known condition, e.g. Down's syndrome</td>
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<tr>
<td>• abnormal head size.</td>
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</tr>
</tbody>
</table>

Does child attend creche/school? Yes/No
If no, give reasons.
- If the child is of creche/school going age, ask this question.
- If the child is obviously too young, do not ask this question.

Hearing

Does child hear well? Yes/No
Describe.
- Do the parents think that their child has good hearing?
  - Circle the answer and describe the reasons.

Does child have ear infections? Yes/No
Describe.
- Has the child had pus coming from the ears?
- Has she had pain in the ears?
  - Circle the answer and describe.

Has child’s hearing been tested? Yes/No
If “Yes” - when?
- where?
- what results?
Assessment of John Muponda

From your observations answer the following questions:

Is talking the only problem for this child? Yes/No

If no, answer these questions:
Does child have a physical impairment? Yes/No
Does child have a mental impairment? Yes/No
Does child have a visual impairment? Yes/No
Does child have a behaviour problem? Yes/No
Is child developmentally delayed? Yes/No
Does child have any other difficulties?

* Has convulsions - on medication.

Does child attend creche/school? Yes/No
If no, give reasons. N/A - Child too young.

Hearing
Does child hear well? Yes/No
Describe. Turns to all sounds, even quiet ones.

Does child have ear infections? Yes/No
Describe.

Has child’s hearing been tested? Yes/No
If “Yes” – when?
- where?
- what results?
<table>
<thead>
<tr>
<th>STAGE</th>
<th>1</th>
<th>2</th>
<th>3</th>
<th>4</th>
<th>5</th>
</tr>
</thead>
<tbody>
<tr>
<td>AGE</td>
<td>0-6 months</td>
<td>6-12 months</td>
<td>12-18 months</td>
<td>1½ - 3 years</td>
<td>3-5 years</td>
</tr>
<tr>
<td>SPEECH</td>
<td>Does child make cooing and babbbling sounds?</td>
<td>Does child repeat sounds and babble tunefully?</td>
<td>Does child use sounds with meaning and some recognisable words?</td>
<td>Does child use single words and sometimes put 2 words together?</td>
<td>Does child put words together to make sentences?</td>
</tr>
<tr>
<td>UNDERSTANDING</td>
<td>Does child understand how basic needs will be met, e.g. crying if hungry or wet?</td>
<td>Does child understand simple instructions when gestures are used?</td>
<td>Does child follow instructions when gestures are not used, e.g. shows parts of his body?</td>
<td>Does child understand simple language like other children of her age?</td>
<td>Can child follow and take part in conversations?</td>
</tr>
<tr>
<td>GESTURE</td>
<td>Does child smile, frown, laugh? Does child reach hand out towards objects?</td>
<td>Does child point to objects or people that she is interested in?</td>
<td>Does child link gestures with a situation, e.g. waves “bye bye”, claps “thank you”?</td>
<td>Does child use gesture to get other people to do things for her, e.g. points to cup when she wants a drink?</td>
<td>Does child use gesture to get her messages across?</td>
</tr>
<tr>
<td>ATTENTION</td>
<td>Does child look at mother/carer when she speaks?</td>
<td>Does child look towards new sounds or things?</td>
<td>Can child attend to simple tasks and not be distracted by new sounds or things?</td>
<td>Does child attend for longer periods to more difficult tasks, e.g. building bricks, pretend play?</td>
<td>Can child listen and speak to people while she is doing a task?</td>
</tr>
<tr>
<td>LISTENING</td>
<td>Does child respond to sound and look to where it is coming from?</td>
<td>Does child recognise differences in sounds and their meanings, e.g. dog barking, bus arriving?</td>
<td>Does child listen when mother/carer speaks to her?</td>
<td>Does child listen more carefully to speech? Does she try to imitate words?</td>
<td>In a noisy place can child ignore background noise and listen to mother/carer?</td>
</tr>
<tr>
<td>TURNTAKING &amp; IMITATION</td>
<td>Does child take turns in making sounds with mother/carer, i.e. if mother copies child's sounds will she repeat them?</td>
<td>Does child repeat her own sounds in a playful way?</td>
<td>Does child imitate adult's actions and sounds?</td>
<td>Does child try to copy words she hears?</td>
<td>Can child take turns in a conversation?</td>
</tr>
<tr>
<td>ACTIVITIES OF DAILY LIVING</td>
<td>Can child close lips on a spoon? Does she take food to her mouth?</td>
<td>Does child chew food and drink from a cup? Does child cooperate in dressing?</td>
<td>Does child feed herself? Can she take off simple clothes? Is she starting toilet training?</td>
<td>Does she wash her own face and hands? Can she put on simple clothes? Is she almost toilet trained?</td>
<td>Can she wash and dry herself? Can she dress herself? Can she see to own toilet needs?</td>
</tr>
</tbody>
</table>

**Strengths:** Write down the areas the child is best in (i.e. closest to her age).

**Needs:** Write down the areas she has more difficulty in (i.e. furthest from her age).
# Checklist of John Muponda

<table>
<thead>
<tr>
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<td>Can child follow instructions when gestures are not used, e.g. shows parts of her body?</td>
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<td>Does child use gesture to get other people to do things for her, e.g., points to cup when she wants a drink?</td>
<td>Does child use gesture to get her messages across?</td>
</tr>
<tr>
<td>PLAY</td>
<td>Is child interested in people and objects?</td>
<td>Does child explore objects?</td>
<td>Does child like simple pretend play, e.g., putting spoon in cup, pretending to feed herself?</td>
<td>Does child build with blocks?</td>
<td>Does child enjoy games with rules?</td>
</tr>
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<td>ATTENTION</td>
<td>Does child look at mother/carer when she speaks?</td>
<td>Does child look towards new sounds or things?</td>
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<td>Does child respond to sound and look to where it is coming from?</td>
<td>Does child identify differences in sounds and their meanings, e.g., dog bark, bus arriving?</td>
<td>Does child listen when mother/carer speaks to her?</td>
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<td>Can she put on simple clothes?</td>
<td>Can she wash and dry herself?</td>
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<tr>
<td>GROSS MOTOR</td>
<td>Does child bring hands to mouth?</td>
<td>Does child cooperate in dressing?</td>
<td>Is she almost toilet trained?</td>
<td>Can she jump with both feet together?</td>
<td>Can child hop?</td>
</tr>
</tbody>
</table>

**Strengths:** Speech, Turntaking and imitation, Gross motor.

**Needs:** Attention, Listening, Play, Understanding, Gesture, ADL
Now we've completed pages 1, 2 and 3 of John Muponda's assessment form.

From your observations answer the following questions:

Is the only problem for this child?

If no, answer these questions:

Does child have a physical handicap?

Does child have a mental handicap?

Does child have a visual handicap?

Is child developmentally delayed?

Does child have any other difficulties?

Does child attend creche/school? If no, give reasons.

Hearing

Does child hear well?

Describe.

Does child have ear infections?

Describe.

Facial expression

Has child's hearing been?

If "Yes" — when?

Describe.

In listening

Can child hear 

Describes.

In understanding

Can child understand 

Describes.

In actions

Can child do 

Describes.

In daily living

Can child do 

Describes.

In play

Can child play 

Describes.

In communication

Can child communicate 

Describes.

In conveying feelings

Can child show 

Describes.

In gestures

Can child use 

Describes.

In socialization

Can child socialize

Describes.

In self help

Can child help

Describes.

In self care

Can child care

Describes.

In eating

Can child eat

Describes.

In dressing

Can child dress

Describes.

In personal hygiene

Can child keep clean

Describes.

In self control

Can child control 

Describes.

In money handling

Can child handle money 

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Describes.

In personal hygiene

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Describes.

In daily living

Can child do 

Describes.
After you have assessed a child.....

- Have I got all the information that I need so far?
- Has most of my information come from the child's mother or from my own interaction and observation of the child?
- Does the mother feel happy that I have seen her child as she truly is?
- Did I try my best to interact with the child?
- Did the child co-operate with me?
- Do I feel satisfied that my assessment gives me an accurate picture of the child's strengths and needs?
- Do I need to refer this child to see anyone else?

...Well done! You can feel pleased that you have successfully got this far in your assessment. Now read on...
In sections 4, 5, 6, 7 and 8 of this handbook we will be looking at assessing the communication of children with different disabilities. With each disability the communication skills will be affected to varying degrees. The table below summarises this...

<table>
<thead>
<tr>
<th>(Section 4)</th>
<th>(Section 4)</th>
<th>(Section 5)</th>
<th>(Section 6)</th>
<th>(Section 7)</th>
<th>(Section 8)</th>
</tr>
</thead>
<tbody>
<tr>
<td>SPEECH</td>
<td>Mildly - severely affected</td>
<td>Mildly delayed</td>
<td>Mildly - severely affected depending on degree of physical and/or mental handicap</td>
<td>May use sounds but often severe difficulty with speech</td>
<td>Severely affected</td>
</tr>
<tr>
<td>UNDERSTANDING</td>
<td>Mildly - severely affected</td>
<td>Mildly delayed</td>
<td>No difficulty unless associated with mental handicap</td>
<td>Severe difficulty understanding spoken language, but understands situations and gestures</td>
<td>Severely affected</td>
</tr>
<tr>
<td>GESTURE</td>
<td>Easier than speech</td>
<td>Mildly delayed</td>
<td>May be easier than speech</td>
<td>Uses gesture for expression</td>
<td>Severely affected</td>
</tr>
<tr>
<td>PLAY</td>
<td>Like that of a younger child</td>
<td>Mildly delayed</td>
<td>May be affected because of physical and/or mental handicap</td>
<td>Like other children of same age</td>
<td>Severely affected</td>
</tr>
<tr>
<td>ATTENTION</td>
<td>Often severely affected</td>
<td>Mildly delayed</td>
<td>Often affected</td>
<td>Like other children of same age</td>
<td>Severely affected</td>
</tr>
<tr>
<td>LISTENING</td>
<td>Affected because of difficulties with attention</td>
<td>Mildly delayed</td>
<td>Often affected</td>
<td>Often severe difficulty depending on level of hearing</td>
<td>Severely affected</td>
</tr>
<tr>
<td>TURN-TAKING &amp; IMITATION</td>
<td>Often affected</td>
<td>Mildly delayed</td>
<td>May be affected because of physical and/or mental handicap</td>
<td>Like other children of same age, but difficulty imitating sounds/words</td>
<td>Severely affected</td>
</tr>
<tr>
<td>ACTIVITIES OF DAILY LIVING</td>
<td>Slower to learn everyday skills</td>
<td>Mildly delayed</td>
<td>Mildly - severely affected depending on degree of physical and/or mental handicap</td>
<td>Like other children of same age</td>
<td>Severely affected</td>
</tr>
<tr>
<td>GROSS MOTOR</td>
<td>Mildly - severely affected</td>
<td>Mildly delayed</td>
<td>Mildly - severely affected</td>
<td>Like other children of same age</td>
<td>Severely affected</td>
</tr>
</tbody>
</table>

When you have done your assessment, compare the child's checklist profile with the summarised profiles in the table. This may give you an idea of the child's disability. You will see parts of this table again in later sections - look out for it!
Important points
to remember about assessment

• A good assessment is more likely to lead to a
good goal plan. This is essential if the child is
to make progress.
• Assessment and treatment are closely linked
and both should be ongoing. We must be
prepared to reassess what a child can and
cannot do, as treatment progresses. This
means altering our assessment findings and
goal plans as time goes on.
• Measuring a child’s progress against his initial
assessment can be a source of encouragement
for both the parent and ourselves.
• There are many areas that make up a child’s
development. It is important that we do not
see communication in isolation but that we
consider other areas that need assessment and
make the necessary referrals.
• Within communication alone, there are many
skills that we need to assess — speech is only
one of them.
• It is worth taking time over an assessment to
ensure that it is accurate.
• Establishing a relationship with the child and
parent through interaction is the basis for any
good assessment.
• It is vitally important to involve the parents in
an assessment.
• Our own communication skills are as important
as those of the child.
• Assessments do not always run smoothly, we
must be prepared to be flexible and to adapt to
any situation in which we might find ourselves.