Are early identification procedures in learning disabilities workable?

Linda Baldus
ARE EARLY IDENTIFICATION PROCEDURES IN LEARNING DISABILITIES WORKABLE?

by

Linda Baldus

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CHAPTER I

INTRODUCTION

"Early identification refers to the practice of screening infants and preschool children in an attempt to predict those likely to experience school problems" (Mercer, Algozzine, and Trifilette, 1979, p. 52).

The above definition of early identification of learning problems covers a wide area of concerns. The definition rests on the assumption that by predicting learning problems early treatment may be introduced and prove beneficial. The proponents of early identification argue that children at a younger age are more responsive to positive change and early identification is important to later progress.

Some special educators are cautious of early identification of learning problems. They fear that the wrong diagnosis may result in inappropriate labels being placed on nonhandicapped children. The opponents of early identification are concerned with tests used by schools for early identification which lack reliability and validity. In addition, opponents are concerned with the effects of labeling on very young children and their families.
Regardless of the ongoing struggle, early identification of learning problems has the support of Public Law 94:142. The basic concept of Public Law 94:142 provides for free and appropriate education for the handicapped. Attached to this law was an amendment dealing with preschool children that created "... the Preschool Incentive Grant Program for which states may apply for additional funds to initiate, improve, and expand services to preschoolers" (Cohen, Semmes, and Guralnick, 1979, p. 279).

One such service that has appeared is Child Find. This service employs people to assist concerned parents in finding the appropriate assistance for their children who may be in need of special services (Slack, 1976).

The present emphasis on early identification was brought about by: (1) the need to establish the importance of early identification; (2) recognition that the reliability and validity of many of the diagnostic instruments used in early identification have not been proven; (3) proposals concerning the handling of early identification; (4) laws governing early identification of learning problems. All of these areas will be expanded upon within this paper.
CHAPTER II

REVIEW OF THE LITERATURE

More and more emphasis is now being placed on early identification of those children who need additional planning and resources in order to learn. This emphasis is obvious from the numerous readiness tests that have appeared and are used for screening of learning disabilities. Preschool scales are gaining increasing acceptance as regular and special educators enter into the task of early identification and prevention of learning problems (Levine, Elzey, and Lewis, 1974).

Some special educators see weaknesses in screening programs for early identification of learning problems. It is felt by some that the scores obtained from screening tests are not relevant for classroom teachers. Particularly, the needs of kindergarten teachers are not being met. Special educators feel the need for a standard procedure to be used in the early identification of learning problems. It is felt that more consistency is needed in tests used for placing preschool children into special education classes at such an early age. The standard procedure should include assessment of several areas such as sensory capacity, motor skills, affective behaviors, social skills, conceptual skills, and language development (Mardell and Goldenberg, 1975).
Special educators must face many questions concerning early identification of learning problems, such as: "(1) how valid are the identifying or predictive measures? (2) what are the implications of diagnostic data for remediation or educational intervention? (3) do benefits of early identification outweigh possible damaging or negative effects of such recognition? (4) what tests used in the preschool years may be relied upon as valid indicators of future school success or failure?" (Keogh and Becker, 1973, p. 6). These questions are important in the discussion of early identification of learning problems. Because of disagreement among educators, these questions may be difficult to answer.

At the preschool level, it is not possible for academic achievement to be a factor in determining a learning problem. Generally, if there is a discrepancy between mental capacity and achievement, the child is suspected of having a learning problem. In the cases of early identification of learning problems in preschool children, academics have not entered into the framework of identification (Kirk and Elkins, 1975). Special educators, because of the lack of academic information, have increasingly turned to parental appraisal in connection with early identification of learning problems. Many special educators feel parental involvement is an important part of an early identification program. Because the child in most cases, is a preschooler, it is necessary to teach parents
specific techniques to use in assisting the educator trying to identify early learning problems (Abbott & Sabatino, 1975). Special educators feel that the family situation itself dictates where, when, and how identification of learning problems is begun. In some cases this may be the family's first experience with early identification and it may be up to the educators to convince the parents that this is necessary (Bricker & Casuso, 1979).

Some special educators view early identification as a way of helping or furthering individual growth and achievement. Others feel it is a way to impose limits on expectancies and to develop atmospheres which reinforce problems. There is agreement that most serious learning problems do not develop suddenly (Keogh, 1970). Regardless of feeling, pro or con, the need for early identification screening programs is mandated (Bersoff, 1977).

The Law and Early Identification

Public Law 94:142 provides for free and appropriate education for all handicapped children. This includes education in the least restrictive environment, due process, nondiscriminatory testing, prompt Individual Educational Programs, and parental involvement. Amendments were attached to PL-94:142 concerning the education of pre-school children. One of these amendments created the Incentive Grant. Through this grant states were allowed additional money for services provided to preschool children.
In 1958, the Handicapped Children's Early Education Assistance Act was established. This act was designed to assist developers of experimental programs that could serve as models for state and local educational agencies (Bersoff, 1977).

Public Law 93:380, established in 1974, introduced new requirements supportive of preschool education for handicapped children. States were required to establish and maintain systematic efforts to find all handicapped children from birth through age twenty-one. In 1974, the State Implementation Grant was established to encourage and support the implementation of comprehensive early childhood plans.

All the laws mentioned above encouraged and supported early childhood programs. In order to have early childhood programs, early identification programs needed to be established. State and local school systems, in implementing laws dealing with early childhood education, must see to it that early identification programs established are accurate in their diagnosis (Asbed, 1977).

The Importance of Early Identification

De Hirsch states: "... in Sweden, France and Belgium, studies indicate that early identification and development of remedial programs has led to significant reduction in reading failure" (Brooks, 1974, p. 43).
The goal of early identification, as implied, by De Hirsch, should be an increase in the number of children who are able to succeed in a regular school setting.

Special educators, challenged by Public Law 94:142 to serve students ages three through twenty-one, must use caution when setting up programs for early identification and treatment. The enthusiasm for early identification of handicapped children has resulted in a variety of programs for differing handicaps which are difficult to evaluate and compare by a common standard. (Simeonsson and Wiegertink, 1975). There is no standard procedure for early identification. Consequently, a variety of programs are in effect. Because of confusion about procedures, the importance of early identification is often forgotten. Special educators must remember that the importance of early identification lies in helping the child. This importance should be stressed to the public and to the families of handicapped children. The point is that early detection and intervention may be crucial in preempting or managing difficulties that might hinder later educational efforts (Kurtz, Neisworth, and Laub, 1977).

Early identification is here to stay because of Public Law 94:142. It is the responsibility of special educators to comply with this law as best they can. Due
to this responsibility, special educators are concerned with several variables involved in early identification. One is the fact that often parents are unwilling to come forward with their children. It is important for special educators to convey the importance of early identification of learning problems to these parents. The other variable is informing the community about early identification programs in the area. The community becomes important in early identification because socioeconomic and demographic factors affect early identification of learning problems in preschool children. There are several reasons for stressing the importance of the community in matters involving handicapped children. First, attitudes of people living in the area may place a stigma on any attempts towards early identification of learning problems. If attitudes are not favorable, parents may be reluctant to step forward with their children. Second, attitudes are often transmitted from one generation to the next. Handicapped students may find themselves cut off from the community for many, many years. Third, the community, as mandated by law, must provide the handicapped student with access within the area. This could be access to employment, housing, and/or transportation, as in the case of the physically handicapped. The community must accept this responsibility.
The reasoning behind early identification of learning problems is that the sooner treatment is begun, the greater the likelihood of the impact of the treatment. Early treatment of learning problems may prevent other handicapping conditions. In other words, early identification is important if it helps the child, the family, and the community (Schleifer, 1978). If the child is given treatment for the learning problem immediately, then early identification is important. If the family is relieved of some of the pressure placed on it because it did not know how to deal with the problem, then early identification is important. If the community receives citizens who can contribute in their own special way, then early identification is important.

Early diagnosis is desirable when it leads to prevention, early treatment, or constructive counseling; it is irrelevant if it is purely academic and does not change the course of events. It is harmful if, in balance, the child or family realizes more disadvantages than benefits." (Keogh and Becker, 1973, p.5)

Studies Concerning Early Identification

Over several years, since more public recognition of learning disabilities has occurred, there have been many efforts to measure, predict, and define readiness for school achievement. Since screening techniques could not include academic factors when dealing with preschool
children, perceptual-motor, language, and cognitive factors were included along with observations by parents and nursery school and kindergarten teachers. There is a need for one standard procedure which incorporates all the essential elements found separately in the many screening devices available (Mardell and Goldenberg, 1975). Many screening devices have been tried. Some screening methods are workable and others are not. Some methods need to be used in conjunction with other techniques.

In 1966, Eaves, Kendall, and Crichton analyzed a group of tests published by Pate and Webb that were reported to identify young children with potential learning problems. They found that the screening tests identified 84% of the children who failed in the primary grades. In 1968, Eaves, Kendall, and Crichton summarized some work completed by Rogolsky in screening for learning disabilities and concluded that language and perceptual-motor factors are reliable predictors for school success, whereas gross motor skill was not a reliable predictor.

Another study done by Eaves, Kendall, and Crichton (1974) attempted to identify early those children who might show signs of minimal brain dysfunction. This study used a variety of screening devices such as the Illinois Test of Psycholinguistic Ability, Developmental Test of Visual-Motor Integration, Wechsler Preschool Primary Scale of Intelligence Wepman Test of Auditory Discrimination, Stanford Achievement Test, and teacher and parent checklists.
The tests were given to 228 kindergarten children. The study continued to track 163 of these children through the second grade.

The results showed that if the entire battery of tests are given in June of the kindergarten year it can predict, with some reliability, how children will perform on word analysis and listening skills, but less well on how they will score on reading tests.

In addition, it was found that diagnostic labels had little practical significance for the regular classroom teacher. The label did not imply a specific prescription or a set form of therapy to be used. It may possibly interfere with the educational process.

In recent years there has been an intensive search for the critical factors which influence growth and development in disadvantaged and handicapped preschool children (Guralnick, 1975). In line with this search for an assessment tool to analyze growth and development in preschool children, two alternative models were developed for identifying kindergarten children with a high risk of becoming reading failures. The two models place emphasis on assessing readiness, since reading failure is closely intertwined with learning disabilities. One model placed the emphasis on psychometric test procedures which assessed linguistic and perceptual-motor skills related
to reading readiness. The other model was based on the kindergarten teacher's evaluation of the child's skills and behaviors. Particular emphasis was focused on the discrepancies between a child's specific competencies and those required for success in a first grade classroom (Feshbach, Adelman, and Fuller, 1974). The subjects assessed by these two models were 888 kindergarten children from an urban, middle class school setting. The first model, based on psychometric testing, included the Otis-Lennon, Wechsler Preschool Primary Scale of Intelligence, and the De Hirsch Predictive Index of Reading Failure. During the testing period, teachers rated their pupils on observation checklists developed from the Kohn Social Competency Scale which listed specific behaviors and skills to be observed. This formed the basis for the second model. At the end of an eight week period the two models were compared.

The results showed that teacher ratings of kindergarten children can predict first grade achievement at least as efficiently as a psychometric battery.

Observation

Teacher observation has been used extensively in predicting learning problems. Many checklists have been developed. One of these is the Kindergarten Teacher's Checklist (KTC). This is a screening technique for identifying kindergarten children who will experience academic
difficulties and/or learning disability related problems in the first grade (Satz & Friel, 1978).

Satz and Friel (1978) studied the Kindergarten Teacher's Checklist screening technique with 111 middle-class kindergarten children, ages five years six months through six years five months. Teachers completed the Kindergarten Teacher's Checklist three times over the one year period; two months before the end of the year, at the end of the kindergarten year, and at the end of the first grade. In addition to the checklist, the children were given the Iowa Test of Basic Skills in the first grade. The results showed that teachers using the Kindergarten Teacher's Checklist could favorably predict first grade achievement. However, the value of the Kindergarten Teacher's Checklist alone, as a general screening device for identifying learning disabilities, is questionable. The reasons are that the checklist depends on the subjective judgment of the teacher who is administering the items. Teacher techniques differ and the differences could affect the results of the checklist. A long term result may possibly be misdiagnosis. In addition, another problem exists in that the items of the checklist were constructed from end of the year reports developed by the teachers. These items were more concerned with behavior than specific learning skills. In order to develop a successful early intervention program for children with
learning problems, the early identification screening should be concerned with specific learning skills.

Forness and Esveldt (1975) hypothesized that if observable differences in classroom behavior appear to be representative of school-problem children, then such differences, as they emerge early in kindergarten, should also serve to predict which children are headed for difficulty. Previous research on classroom observation had demonstrated that a significant difference existed in observable behavior between atypical children and their peers (Forness and Esveldt, 1975). Differences were observed in areas such as attending to task, peer interaction and disruptive behavior. The purpose of Forness and Esveldt's study was to determine whether children identified as "high-risk" on the basis of their behavior in class at the beginning of their kindergarten year were also the same children whom teachers saw as having problems later in the school year.

Four kindergarten classes were observed in a large metropolitan district, at the beginning of the year and at the end of the school year. Four areas were observed:

1. Verbal-Positive—the pupil makes an effort to produce a verbal response during the time observed;
2. Attending—the pupil makes an effort to look at the teacher or materials presented;
3. Not Attending—the pupil is not paying attention;
(4) Disruptive—the pupil interrupts task activities. (Forness & Esveldt, 1975, p. 376)

The results indicated that a certain type of classroom behavior characterized by impulsive overactivity in both on-task and off-task situations might be an area for closer scrutiny. Observation was found to be a useful predictive procedure which could serve to clarify the nature of the problem. However, direct observation was found to have disadvantages. One disadvantage is in using direct observation by itself. Other data must be gathered to support observational comments and to prepare an adequate educational plan for the child involved.

**Screening Batteries**

Observation alone is not always a successful predictor of early learning problems. Special educators have found it necessary to investigate a variety of screening batteries for early identification of learning problems.

Brooks (1974) studied a screening battery for kindergarten children which included the Metropolitan Readiness Test, the Bender-Gestalt Test, and the Slosson Intelligence Test as predictors of learning problems. The study involved 725 kindergarten children in the Syca­more School District of Cincinnati, Ohio. All socio-economic levels, racial groups, and religious denominations were included. The children were followed through the
second grade level. The results showed that the predictive index used effectively identified, at the kindergarten level, the majority of children who experienced learning difficulties in the first and second years of school.

This study points to the difficulty of accurately studying a good screening battery for early identification of learning problems. It is often not known for several years if the screening battery chosen for use in early identification will be successful. The importance of a variety of screening batteries, thoroughly studied, is self-evident.

In 1974, some questions were raised by special educators about the early identification screening practices of some school systems. Because of the greater emphasis placed on early identification, many school systems have had to face pressure to establish some type of screening device. Consequently, many school systems used tests or screening devices which lacked norms, sampling data, reliability, and validity information.

These concerns prompted Maitland and Nadeau (1974) to conduct a study to discover whether school systems were using tests that lacked important data and to discover the prevalence of school screening practices. They sampled 980 school districts through a questionnaire. The questions investigated what type of screening the
school district conducted and the months in which the screening occurred, asked for explanatory comments if no screening took place, and asked for a description of the types of measures used.

The results indicated that the following measures were used most frequently: the Metropolitan Readiness Test; A. B. C. Inventory; Gesell Developmental Tests of School Readiness; Cooperative Preschool Inventory; and tests developed by particular school districts. The test results school districts acquired were used most often to determine first grade placement and to individualize instruction in special cases. School districts indicated that screening tests contributed the most information when given early in the child's schooling.

The results also supported a few commonly held beliefs on screening for early identification. Many school districts have felt that the Metropolitan Readiness Test was the best available device for screening early learning problems. In addition, it was emphasized that the earlier the screening is begun, the sooner an intervention program can be established.

Special education teachers felt that the family is a very important locus of early identification of learning problems. A parental involvement program is an integral part of an early identification and intervention
program for preschool children. Information about the family and how the child functions in the home and community environment is an important part of learning problem identification in preschool and kindergarten children (Strain & Shores, 1977).

Weiss and Johnston (1976) concluded from a report entitled "Preschoolers at Risk" that for early identification of learning problems to be successful, information needed to be gathered in five areas. The first area of information needed is diagnostic impressions of the major problem area. The second area is information concerning the socioeconomic, demographic, and family environments. Third, an assessment needs to be taken concerning speech and language development. The fourth area of information should concern itself with the child's attendance and participation in any preschool program. The fifth area deals with the intellectual functioning of the child. The academic concerns are limited to one-fifth of the total picture needed for early identification of learning problems.

**Specific Tests Used in the Early Identification**

Many states and local agencies are developing their own screening devices for early identification of learning problems. It is necessary to look carefully over these and decide which fit into the specific plans and needs of a particular school district.
The Rhode Island Pupil Identification Scale was studied in 1973 by Novack, Bonaventura, and Merenda. It is a behavior observation scale. The main function of this scale is to help the classroom teacher in identifying children with learning problems and to pinpoint specific problems.

The scale was tested on 851 kindergarten children from three school districts in Rhode Island. The results of the investigation indicated that this particular observation scale was beneficial as a preliminary signal to alert kindergarten teachers to potential learning problems. Follow-up tests and observations were recommended.

In 1975, Zehrbach developed the Comprehensive Identification Program. The purpose of the Comprehensive Identification Program was to develop a comprehensive process for locating, screening, and evaluating young handicapped children. Locating referred to finding a child who was eligible for screening, the second step in determining if a child was developing according to normal patterns of learning. If the impression was that normal patterns were not developing then the third step, evaluation or diagnosis, completed the study of the child.

The premise behind the Comprehensive Identification Program was that the process of identification must be directed toward a practical goal. The goal was to be early identification and remediation of learning problems. It was felt that early identification was crucial if
problems were to be minimized or prevented. It has been stressed by many special educators that any comprehensive identification process should be directed toward treatment rather than early identification only. "... identification of handicapped children is useless unless appropriate treatment is immediately available" (Zehrbach, 1971, p. 77).

The Comprehensive Identification Program, in addition, stressed that the process of identification should be multi-dimensional to ensure that all aspects of the child are taken into consideration. These aspects include the physical, social, intellectual, and emotional makeup of the child. The program allows for revision and flexibility of the early identification process.

The Preprimary Profile (Proger, 1971) was designed for children in nursery school, kindergarten, and early childhood classes. In addition to language, the profile covers many other developmental areas such as self-care, classroom management, skill development, previous experience, and additional comments. The parents and classroom teachers complete a rating scale with the results reported in terms of age. The weakness of this profile, if any, may be that many areas are covered at one time. If a particular area appears to have a weakness, further assessment should be done.
Some evaluation instruments, such as the Preprimary Profile previously discussed, assess the developmental aspects of young children for early identification of learning problems. Another of these instruments is the Early Detection Inventory (Proger, 1971). This inventory may be given to preschool and kindergarten children. It assesses four areas: (1) social-emotional behavior; (2) school readiness; (3) motor performance; and (4) personal history. Most of the areas mentioned are directly assessed through a checklist. Again, if a weakness is indicated, follow-up testing may be necessary. The advantage of the Early Detection Inventory is that it can be used individually or in a small group situation.

An assessment instrument called Developmental Indicators for the Assessment of Learning (Mardell and Goldenberg, 1975) was developed to condense essential elements from other screening devices. This screening tool was developed for prekindergarten students and covers six areas. The areas include: sensory capacity; motor skills; affective behaviors; social skills; conceptual skills; and language development. The Developmental Indicators for the Assessment of Learning device assesses the level of progression within each of the specific areas mentioned. In addition, DIAL is set up in such a way that good communication can be established between the special educator and the parents of children identified as having learning problems.
The developers of DIAL suggested that in addition to regular screening instruments other procedures were needed (Nardell and Goldenberg, 1975). One recommendation was that all children going through the early identification process also be given screening tests for vision and hearing. It was suggested that vision and hearing tests be the first step in the process. Information obtained through these tests may obviate further screening.

Some performances by the child in the classroom or other social settings, and on tests were to be observed, recorded, and plotted. Special educators involved in the assessment were encouraged to share the information with the parents and other faculty members who may have contact with the child. Developers of DIAL felt that if learning problems were detected at an early age, treatment should begin immediately. Another important aspect of DIAL was its requirement that early identification cases be reviewed on an annual basis to ensure proper placement. The authors stressed that early identification programs should analyze and use any assets the child may have along with discovering the child's liabilities. These assessments, then, need the immediate support of early treatment programs. This is in keeping with requirements of P.L.-94:142, which stresses education in the least restrictive environments.
Another program developed for early identification of learning problems was the Minnesota Child Development Inventory (Ullman and Kausch, 1979). This instrument was used to investigate developmental strengths and weaknesses in preschool children.

The procedure used by the Minnesota Child Development Inventory is a rating system based on observed behavior. The inventory was given to sixty nursery school children and sixty Head Start children in Minnesota in 1978-1979 (Ullman and Kausch, 1979). The results showed that the Minnesota Child Development Inventory identified more potential learning problems in a high risk Head Start group than in a comparable nursery school group. The developers of the inventory felt it showed some promise as a useful developmental screening instrument for lower socioeconomic status preschool-age children.

The advantages of the Minnesota Child Development Inventory were that the test involved minimal professional time and expense and parents were able to become involved with the inventory. Because of a 10% cutoff, chances of failure were reduced. This meant that if a child failed 10% of one level, the examiner proceeded to the next task. The disadvantage, as with other inventories, may involve teacher observational bias.

The Basic School Skills Inventory reviewed by Gacka (1978), is another screening instrument of developmental skills. The Basic School Skills Inventory is a long-term
observational system. The classroom teacher who uses this inventory has a viable, commercially available alternative to a group readiness test and one that shows comparable validity, while providing behaviorally-oriented performance data (Gacka, 1978). The inventory is similar to a guide the classroom teacher may use to observe the behavior of specific children in the class who may be in need of special education.

**Language Tests**

Language is a specific area that requires assessment in an early identification program. Since children under five years of age may not be able to answer for themselves, language assessment is done more in terms of an observation than a test. An inventory is often completed from comments obtained from the parents. Some language scales are discussed here.

A review of a language test completed by Proger in 1971 shows that this particular test, the Receptive-Expressive Emergent Language Scale, concentrates on language-based behavior. The test can be given to children from birth to three years old and covers the areas of expressive and receptive language. Scores are expressed in terms of a developmental age. The test is given by interviewing the parents. Care must be taken when reporting interview data obtained from parents. The scale previously discussed and other scales often rely on information obtained from parents in order to make
recommendations involving the children. Parents tend to be biased towards their own children. Questions and responses should be worded so there is no confusion as to the meaning of the information presented. Although it is important to analyze all areas of development in early identification, care must be taken not to test too many processes at one time. The Receptive-Expressive Emergent Language Scale, for example, does not allow motor behavior to cloud the assessment of language.

The Preschool Language Scale (Proger, 1971), another language test, covers ages one through eight. Three areas are evaluated by this scale: auditory comprehension; verbal ability; and articulation. Scores are expressed in terms of age. Care must be taken not to rely solely on this instrument because there is no technical information available on its reliability and validity.

Socialization

Socialization skills are important for a child's development in the school setting. A test of socialization skills could be used as another identification instrument for learning problems. The California Preschool Social Competency Scale was designed for that purpose (Proger, 1974). It was designed to measure the adequacy of preschool children's interpersonal behavior and the degree to which they assume social responsibility. Implicit in this definition is the concept of independence (Proger, 1974).
The California Preschool Social Competency Scale is a checklist that contains thirty items. Each item has four choices and deals primarily with the frequency of negative behavior. The reliability and validity of the scale were determined in three studies. After the studies were completed, the C.P.S.C.S. was found to have many disadvantages. First, there were few guidelines for interpretation of the results. The examiner is left with only a percentile rank. The guidelines provided are not adequate for identifying socially deviant children. Second, many unanswered questions arose. For example, it was not known how well the C.P.S.C.S. scores obtained during preschool years could predict later academic and social success or failure (Proger, 1974). Other disadvantages included the fact that the examiner is often unfamiliar with the child. Children of preschool age are not ready for school-like, formally structured tasks and it may be wrong to rely on them for identification of learning problems. The examiner cannot be sure that the problems exhibited will persist into later school years.

Agencies Involved in Early Identification

Several agencies, independent of school systems, have appeared around the country as watchdogs over schools and their early identification programs. Some of these
agencies have been established to foster the idea of a set procedure for early identification. One of these agencies is HCEEPP—Handicapped Children's Early Education Program. HCEEPP provides services to preschool age handicapped children and their families. The goal of HCEEPP was to increase the number of children who were able to succeed in a regular school setting (DeWeerd and Cole, 1976). HCEEPP did this by supporting projects and experimental approaches concerned with early identification of learning problems. HCEEPP helped state departments of education in planning for early childhood education and other state agencies in dealing with early identification.

In the 1960's, Head Start Programs were established around the country. These programs were aimed at the low socioeconomic status groups of preschool children in large, metropolitan areas. Head Start was concerned with identifying those children who might have academic problems in later school years and in developing an intervention program for them (Nazzaro, 1974).

Proposals for Early Identification of Learning Problems

As was stated previously, learning problems do not develop suddenly. Serious learning problems may show up very early in preschool children. In recent years there
has been an intensive search for the critical factors which influence growth and development in disadvantaged and handicapped preschool children (Guralnick, 1975).

Early identification programs, now and in the future, must pay attention to individual differences in preschool children, precise planning for intervention, inservice education for teachers, parental involvement, and continuous program evaluation. These are important considerations in any preschool identification and intervention program for handicapped children.

The early identification program should include the following characteristics:

1. Direction and structure
2. An evaluation system
3. Individualization of the program
4. Teacher training in the use of identification methods
5. Accountability
6. Adaptability
7. Feasibility
8. Research (Guralnick, 1975, p. 30)
CHAPTER III

SUMMARY

The studies reviewed in this paper indicate that early identification programs for learning disabilities are in force and are creating a process of change for handicapped children in a preschool setting. Early identification programs have brought about more extensive use of individualized instruction in preschool programs concerned with remediation of learning problems.

There is still disagreement as to what particular procedure is suitable for use in early identification of learning problems. It has been indicated, in the various studies, that academic information obtained cannot be relied upon solely in identifying learning problems in preschool children. Other areas, such as perceptual-motor, language and conceptual development, and socialization must also be looked into in determining learning disabilities in preschool children. Screening devices should cover all the above-mentioned areas thoroughly in order to avoid diagnostic mistakes at this early period in the lives of preschool children (Logan, 1975).

Early identification procedures are very important for preschool children and the school system's special
education program. Therefore, early identification procedures should be and must be accurate and complete. Studies have indicated the importance of acquiring information concerning the socioeconomic, demographic, and familial variables in the environment of the preschool child. The importance of gathering information about the developmental areas such as speech, perceptual-motor, conceptual, and academic, if possible, was also stressed.

Studies have also indicated that single tests do not give a complete picture of the learning disability. Test batteries and observational reports from teachers and parents are needed to give an accurate picture of any learning problems the child may have.

Equally important in any early identification program is the follow-up treatment plan for the child diagnosed as having a learning problem. Early identification programs are useless if early intervention plans are not adequate enough to serve preschool children.

It has been concluded from various studies that screening batteries along with other variables such as socioeconomic, demographic, and family information, speech, and motor development information, attendance and preschool participation must be investigated as a total unit for early identification of learning problems. Using one part of this unit without the others may result in an incomplete picture of educational needs in preschool and kindergarten children.
Review by Guthrie and Hall (1976) of a study done by Keogh, Tchir, and Windegurth implies that one variable cannot stand alone. .. teachers have been known to perceive educational risk, in some cases, more in terms of problem classroom behavior than in terms of academic performance (Guthrie and Hall, 1976, p. 46). To rely solely on teacher perceptions without adequate back-up information may hinder the establishment of an intervention program. The opposite is equally as true; that is, to rely solely on test information, without any observational data, may hinder the process.

In an article concerned with physical-motor factors, Jones (1970) stated that, though motor and physical development problems may contribute to the identification of the child with learning disabilities, they cannot stand alone, and must be evaluated in light of emotional and other parameters of the child's development.

The implied conclusion is that single tests, test batteries, teacher perceptions, and environmental information must be used together. Teacher perceptions and skills analysis can be efficient and useful in predicting school problems. Analysis of skill development can function as a strong predictor of learning problems if there is a positive relationship between the prediction index and the criterion instrument. Special educators feel that physical indices, developmental histories, and
socioeconomic status during infancy seem to be strong preschool predictive measures. In addition, they are cautious in selecting criterion measures that adequately represent expected performance levels and that have direct relevance to predictive measures (Jones, 1970).
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