Uses and Misuses of Data on Outcomes for Young Children with Disabilities

DRAFT

Kathleen Hebbeler Early Childhood Outcomes Center



Demonstrating Results for Infants, Toddlers and Preschoolers with Disabilities and Their Families

IDEAs thatWork U.S. Office of Special Education Programs ****

The Early Childhood Outcomes (ECO) Center for Infants, Toddlers, and Preschoolers with Disabilities is a project being conducted by SRI International under cooperative agreement H324L030002 with the Office of Special Education Programs (OSEP) of the U.S. Department of Education. The Center is a collaborative effort of SRI International, the Frank Porter Graham Child Development Institute at the University of North Carolina Chapel Hill, the Juniper Gardens Children's Project at the University of Kansas, the University of Connecticut, and the National Association of State Directors of Special Education. The contents of this report were developed under the auspices of this cooperative agreement. However, the contents do not necessarily represent the policy of the Department of Education, and their endorsement by the federal government should not be assumed.

Project Staff

SRI International

Kathleen Hebbeler, Project Director Donna Spiker, Associate Director Sangeeta Mallik

Frank Porter Graham Child Development Institute, University of North Carolina, Chapel Hill

Donald Bailey Michelle deFosset Lynne Kahn

Juniper Gardens Children's Project, University of Kansas

Judith Carta Charles Greenwood Dale Walker

University of Connecticut

Mary Beth Bruder

National Association of State Directors of Special Education (NASDSE) Joy Markowitz

All products of the Center, including this one, have been reviewed by other members of the Center team, who have made both significant substantive and stylistic contributions. We are grateful for their contributions.

The Center would also like to acknowledge the contribution of the project's technical monitor in the Department of Education, Jennifer Tschantz, whose ongoing guidance has been invaluable in advancing the Center's work. We also would like to thank our Advisory Board and the members of the Center's work groups who have contributed their time and wisdom to many discussions about outcomes. We hope we have made good use of their insights.

For more information about the ECO Center, including other products, see www.the-eco-center.org.

First version, July 2004

Early Childhood Outcomes Center 333 Ravenswood Avenue SRI International, Menlo Park, California 94025 The word "outcomes" generates numerous reactions—not all of them positive. It also can generate considerable confusion because "outcomes" can take on different meanings depending on the context. The occupational therapist who talks about outcomes for the 3-year-old with whom she is working almost certainly has a different concept of how to use outcome information than does the federal Office of Management and Budget (OMB). The ECO Center has prepared this paper to make explicit some the diverse ways in which data on outcomes can be used effectively as well as misused. The paper provides background information for stakeholders who are involved in developing outcome measurement systems for young children with disabilities. We hope that the information will assist these stakeholders in:

Identifying the purposes that an outcomes measurement system can address. Understanding distinctions among the many different purposes. Understanding what will be gained by having outcome data for a particular purpose or lost by not having those data. Alerting them to the possible misuses of outcome data.

From the highest levels of public administration, through service provision, to individual children and families, recognition is increasing of the importance of looking at the outcomes children are attaining. Although the early childhood community remained wary of the outcomes movement for some time, professionals in this field now acknowledge the need to look at appropriate outcomes for young children with disabilities. Not so long ago, some maintained that we should not look at outcomes for these children. Reasons cited included that, because this population is so diverse and goals so individualized, a general outcome framework could not apply; and that Part C is a program to support families in caring for their child with a disability, not one about child outcomes. For some, measuring outcomes is closely linked to assessment, and note that the valid assessment of young children can be challenging. Some worry that the job is too difficult. Moreover, in some instances outcome data have been misused, most notably when assessment results have been used to children's detriment rather than to their benefit. Although some may still believe that data on child outcomes cannot or should not be collected for children with disabilities, from our work with the ECO Center we conclude that ever-increasing numbers of policy-makers, administrators, service providers, and families are recognizing the importance of good outcome data for this population.

The ECO Center's mission is to provide leadership and support that will ultimately produce national outcome data on young children with disabilities up to age 5. Not surprisingly, we thoroughly endorse the development and use of outcome measurement systems to improve programs for young children with disabilities. We also recognize the rational trepidation with which many approach the idea of collecting outcome data on young children. Our hope is that by working closely with stakeholder groups as they move forward in developing outcome measurement systems, the resulting systems will achieve their intended purposes in a credible and valid way.

We prepared this paper to serve as an overview of how outcome data can be used at different levels. We identify different purposes for outcome data collection at the following levels:

Federal/national State Local (communities, school districts) Program/school Child/family.

Even within the same level, outcome data can address different purposes. A state agency, for example, could use outcome data to demonstrate for the state legislature that programs for young children with disabilities are effective, or it could use data to identify regions within the state where more support is needed to improve programs. Accordingly, designers of an outcome measurement system need to be clear about the system's purpose(s) because that purpose has implications for data collection. The kind of data that a speech therapist needs to monitor the acquisition of communication skills differ from the data a state agency needs for monitoring to determine whether or not local programs are effectively supporting children's communication development. Some purposes can be addressed with sampling; others cannot. Some purposes require a relatively detailed level of information; others can be addressed with more general outcome data. One implication of so many potential uses for outcome data is that one set of outcome measures is unlikely to be able to address all of the various levels and purposes. The implications of each of the different purposes for the development of outcome measurement systems will be addressed in forthcoming documents issued by the ECO Center.

Table 1 presents possible purposes for uses of outcome data, organized by the level of the user. For each purpose, we list the level of the data (e.g., aggregated across states) and the potential users (e.g., program directors). For each purpose, the table also addresses hypothetical situations related to outcome data: what could happen if the data show good outcomes, what could happen if the data show poor outcomes, and what could happen if the data are not collected, as well as possible misuses of the data. Although support is widespread for the collection of outcome data, the history of good outcome data in any field is so limited that it is difficult to anticipate what will happen once valid data are available. Nevertheless, we believe it is important to anticipate and reflect on some of the likely scenarios as part of the planning process. We hope that by identifying possible misuses of outcome data we can advance the discussions to help stakeholders distinguish between good and bad uses of the data. That outcome data can be misused is not a reason to avoid generating these data, but it is a reason to build safeguards into the systems. We hope that by identifying potential misuses before systems are developed, those misuses can be avoided or minimized.

Realistically, we have no guarantees that outcome data will be used appropriately. Those who fear misuse of the data are thus advised to remain vigilant. A thorough reading of Table 1 at every level suggests to us, however, that at all levels, the potential benefits of having good outcome data outweigh the alternative of not having the data. It is possible that all services currently being provided to young children with disabilities and their families are maximally effective and that all children are achieving the best possible outcomes. It is possible that public dollars will continue to be spent on programs for which no evidence exists that they are producing their intended benefits. Although possible, these scenarios are not likely, and therefore the development of good systems for producing outcome data is a necessity. Even though different levels have different purposes, all of them are ultimately serving the same goal: ensuring that every one of more than 900,000 young children with disabilities who are receiving services annually through the Individuals with Disabilities Education Act (IDEA) achieves good outcomes.

We hope that you find much food for thought in the table; at the same time we acknowledge that many additional uses, misuses, and other scenarios are also possible. We welcome your comments, and we look forward to revising the paper on the basis of the input we receive. Please send comments to staff@the-eco-center.org.

Table 1Possible Uses and Misuses of Child Outcome Data at Different Levels

Level: National/Federal

| | | What happens if | | | |
|---|--------------------------------------|--|---|--|---|
| | | Data show good | | | Misuses |
| Level of Data | Used by | outcomes | Data show poor outcomes | Data are not collected | of the data |
| Purpose: To de | emonstrate the effect | iveness of Part C and Section | on 619; used to meet the GPRA | and PART requirements and | l other needs for outcome data |
| Aggregated across all states and territories | OSEP OMB Congress Advocates | Funding for program is sustained or increased. | Resources are directed toward improving outcomes. Technical assistance (TA) and guidance increase; IDEA or regulations change. Funding for programs is eliminated or reduced. | Funding for programs is reduced or eliminated. | Making decisions before the data are shown to be valid and reliable Focusing on a narrow set of outcomes or only those outcomes for which data are available Using the data to hold OSEP and states accountable for more than they can reasonably be expected to deal with Misinterpreting the data (e.g., expecting all children with disabilities to function like typically developing children) |
| | | | ng Part C and Section 619; used ection 619 (e.g., OSEP reviews | | on from other sources to determine |
| Aggregated across all states and territories | OSEP Advocates | OSEP is given additional resources. OSEP develops new programs. OSEP is given additional autonomy or responsibility. | OSEP adapts existing strategies or adopts new strategies for how it supports states in implementing Part C and 619 (e.g., new funding priorities, changes in provision of TA, personnel preparation). | Decisions about future investments and strategies are made without knowing whether and where strategies are contributing to good outcomes for children. Effective programs and policies go unrecognized. Ineffective programs and policies continue. | Making decisions before the data are shown to be valid and reliable Making decisions about outcome data alone, in isolation from other information Focusing on a narrow set of outcomes or only those outcomes for which data are available Failing to explore why poor outcomes are occurring |

| | | What happens if | | | |
|---|-------------------|---|--|--|--|
| Level of Data | Used by | Data show good outcomes | Data show poor outcomes | Data not collected | Misuses of the data |
| Purpose: To | monitor how sta | ites are implementing Par | t C and Section 619 | | |
| Data for each state and territory | OSEP Advocates | States with effective programs can be nationally recognized. Proven practices in effective states can be documented and disseminated. Effective states can serve as models for other states Ultimately, outcomes for children with disabilities in all states can improve. | Low-performing states receive focused intervention, develop corrective action plans, or receive sanctions. State improvement strategies are developed and implemented to produce better outcomes. Advocates push for improvements. | OSEP continues to monitor process, rather than results. States achieving good outcomes remain unidentified, as do states achieving poor outcomes. Programs in ineffective states do not improve | Making decisions before the data are shown to bevalid or reliable Making decisions on the basis of outcome data alone, in isolation from other information Focusing on a narrow set of outcomes or only those outcomes for which data are available Holding states accountable for more than they can reasonably be expected to deal with Failing to explore why poor outcomes are occurring |
| | | | Advocates and federal agencies explore underlying causes for poor outcomes (e.g., poverty, child abuse, lack of insurance). Funding increases to improve the health and well-being of young children with disabilities. New legislation, new programs, and better coordination across federal and state programs are implemented. | | young children with disabilities are hildren) Failing to recognize the multiple underlying causes for poor outcomes (e.g., trying to hold one program or funding stream accountable) Failing to act on the information |

Level: State

| Level of Data | Used by | Data show good outcomes | Data show poor outcomes | Data not collected | Misuses of the data |
|--|--|---|--|--|---|
| Purpose: To and state bud | | gree of effectiveness of Part | C and Section 619 in response to | o requests/demands for data fr | om legislatures, governors' offices, |
| Aggregated across all localities in the state | Part C lead agency SEA Advocates | State funding is sustained or increased. | The state designs strategies to improve the effectiveness of programs. Program funding is eliminated or reduced. The state withdraws from Part C. | State funding for programs is eliminated or reduced. The state withdraws from Part C. | Making decisions before data are shown to be valid or reliable Focusing on a narrow set of outcomes or only on those outcomes for which data are available Holding the program responsible for more than it can reasonably be expected to deal with Misinterpreting the data (e.g., expecting all children with disabilities to function like typically developing children) |
| | | | ering Parts C or 619; used in com ency reviews its own policies and | | other sources to determine if the |
| Aggregated across all localities in state | Part C lead agency ICC SEA Advocates | The state agency receives recognition for good work. Funding to the agency is sustained or increased. The agency is given more authority or autonomy. | The state agency adapts existing strategies or adopts new strategies for how it supports local entities in implementing Part C and 619 (e.g., new funding priorities, changes in provision of TA, CSPD). | Decisions about future strategies are made without knowing whether current state strategies and investments are effective. Effective practices and policies go unrecognized. Ineffective programs and policies continue. | Making decisions before the data are shown to be valid and reliable Focusing on a narrow set of outcomes or only on those outcomes for which data are available Making decisions on the basis of outcome data alone, in isolation from other information Failing to explore why poor outcomes are occurring |

Level: State (Continued)

| | | - 1 | What happens if | | |
|---|--|--|---|---|--|
| Level of Data | Used by | Data show good outcomes | Data show poor outcomes | Data not collected | Misuses of the data |
| Purpose: To m | nonitor how local er | ntities are implementing Part | C or 619 | | |
| Data for each locality | Part C agency SEA advocates | Funding to local entities with good outcomes is sustained or increased. Local programs are recognized as model systems. Effective practices are documented and disseminated. | The state develops general strategies to produce better outcomes. The state takes action to improve programs in localities that show poor outcomes. Advocates push for changes. | The state continues to monitor process rather than results. Communities achieving good outcomes remain unidentified, as do communities achieving poor outcomes. Programs in ineffective communities do not improve. | Making decisions before the data are shown to be valid or reliable Making decisions on the basis of outcome data alone, in isolation from other information Focusing on a narrow set of outcomes or only those outcomes for which data are available Holding local agencies accountable for more than they can reasonably be expected to deal with Failing to explore why poor outcomes are occurring |
| | | | ren with disabilities in the state b n typically developing children) | y determining how these child | ren are faring in regard to multiple |
| Aggregated across local jurisdictions or by locality | Advocates All state agencies concerned with young children with disabilities | Funding for current programs is sustained or increased. Changes in future years can be tracked to ensure that good outcomes are maintained year after year. | Advocates and state agencies explore underlying causes for poor outcomes (e.g., poverty, child abuse, lack of insurance). New legislation, new programs, better coordination, and more funding to improve the health and well-being of young children with disabilities result. | No one knows that children with disabilities are faring poorly. Ineffective policies and programs continue. Policies continue to be set in the absence of information. | Failing to recognize the multiple underlying causes for poor outcomes (e.g., trying to hold one program or funding stream accountable) Failing to act on the information |

Level: Local (Communities, LEAs, etc.)

| | | | What happens if | | |
|--|---|---|---|---|--|
| Level of Data | Used by | Data show good outcomes | Data show poor outcomes | Data not collected | Misuses of the data |
| | ces to determine i | | | | ; used in combination with information services (i.e., the local agency reviews i |
| Aggregated across all programs/ schools | Local administra- tors LICC Advocates Families | The local agency receives recognition for good work. The local agency knows to continue current policies and practices. | The local agency adapts existing strategies or adopts new strategies for supporting programs in providing Part C and 619 (e.g., in-service training, new program options, coordination with other programs or agencies). | Decisions about future directions are made without knowing whether and where programs are effective. | Making decisions before the data are shown to be valid and reliable Making decisions on the basis of outcome data alone, in isolation from other information Focusing on a narrow set of outcomes or only those outcomes for which data are available Failing to explore why poor outcomes are occurring |
| Purpose: To m Data for each | onitor how effectiv | vely programs/schools are pro | oviding early intervention or pres | school special education | Making decisions before the data |
| program/ school | administra- tors LICC Advocates Families | with good outcomes is sustained or increased. Programs are recognized as model systems. Effective practices are documented and disseminated. | develops strategies to produce better outcomes in programs with poor outcomes. Advocates push for changes. | to monitor programs in regard to process rather than results or do not ask questions about effectiveness. | are shown to be valid or reliable; Making decisions on the basis of outcome data alone, in isolation from other information Holding programs accountable for more than they can reasonably be expected to deal with Failing to explore why poor outcomes are occurring Adjusting strategies on the basis of invalid data |

Level: Local (Communities, LEAs, etc.) (Continued)

| | | What happens if | | | | | |
|---|--|---|--|---|---|--|--|
| Level of Data | Used by | Data show good outcomes | Data show poor outcomes | Data not collected | Possible misuses of the data | | |
| | Purpose: To monitor the health and well-being of young children with disabilities in the locality by determining how these children are faring in regard to multiple indicators of health and well-being (probably as compared with typically developing children) | | | | | | |
| Data for the locality (LEA, county) | Advocates Local agencies concerned with young children with disabilities | Funding for current programs is sustained or increased. Changes in future years can be tracked to ensure that good outcomes are maintained year after year. | Advocates and agencies explore underlying causes for poor outcomes (e.g., poverty, child abuse, lack of insurance). New programs, better coordination, and targeted funding to improve the health and well-being of young children with disabilities result. | No one knows that children with disabilities are faring poorly. Ineffective policies and programs continue; policies continue to be set in the absence of information. | Failing to recognize the multiple underlying causes for poor outcomes (e.g., trying to hold one program or funding stream accountable) Failing to act on the information | | |

Level: Program/School Uses

| | | | What happens if | | |
|---|--|--|---|---|--|
| Level of Data | Used by | Data show good outcomes | Data show poor outcomes | Data not collected | Possible misuses of the data |
| | | | oviding early intervention or pre- ffective job of providing early in | | in combination with information from cial education services |
| Data for all children participating in the program | Program director Policy board Program staff | Public and families have evidence that the program is doing a good job. The program knows to continue current practices. | The program adjusts current practices or adopts new practices for early intervention or preschool special education (e.g., in- service training, new program options, coordination with other programs or agencies). | Decisions about the future directions are made without knowing whether and where current practices are effective. | Making decisions before the data are shown to be valid and reliable Making decisions on the basis of outcome data alone, in isolation from other information Failing to explore why poor outcomes are occurring; Adjusting strategies on the basis of invalid data |
| | | | he program is less effective thar all of the children/families it is se | | ion with other sources to determine |
| Data for each child/family participating in the program | Program director Staff | The program knows to continue current practices with some, most, or all children and families. | Program staff discuss alternative approaches that might be more effective. The program convenes an IFSP or IEP meeting to explore alternatives for those with poor outcomes. New interventions are tried. New resources are explored. | Current practices continue or decisions about changes are made in the absence of data on the effectiveness of what is currently being provided. | Making decisions on the basis of invalid or unreliable data Making decisions on the basis of a single assessment Blaming the family for poor outcomes Failing to alter an approach that is not producing good outcomes |

Level: Child/Family

| | | | What happens if | | |
|---|---|----------------------------|---|--|---|
| Level of Data | Used by | Data show good outcomes | Data show poor outcomes | Data not collected | Possible misuses of the data |
| | examine the effective as much progress | | vention being provided by exam | ining data on child progress fre | equently to determine whether or not the |
| Data for an individual child/family | Service providers working with the child and family Family | Intervention continues. | Intervention is altered in some way. New intervention is tried. | Current practices continue. Decisions about changes in intervention approach are made in the absence of data about the effectiveness of what is currently being provided. | Using data to lower expectations for child performance Using assessment data in isolation from other information Using data to exclude children from opportunities, rather than modifying activities so they can be included |
| | | | | | NOTE: All invalid practices associated with using assessment data for individual children apply here |