Steps towards improving quality: Early educators' use and perceptions of authentic assessment

Building and studying cultures of quality improvement and innovation in early care and education programs

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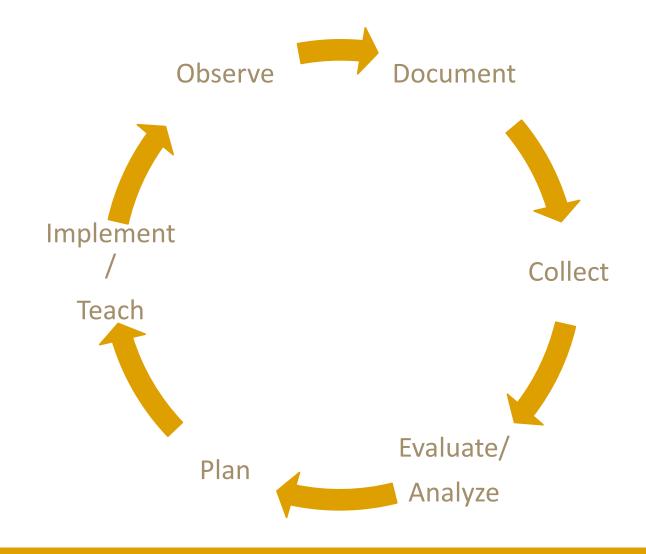
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Definition of Authentic Assessment

 "The systematic recording of developmental observations over time about the naturally occurring behaviors and functional competencies of young children in daily routines by familiar and knowledgeable caregivers in the child's life" (Bagnato & Yeh Ho, 2006, p. 29)

Authentic Assessment Cycle



Authentic assessment can improve quality

Analyze children's behavior for patterns and themes

Use data to make decisions about individual children's curricular, instructional, or intervention needs

Cooperative, collaborative, ongoing process

Report data to key stakeholders (parents, other program staff)

Early Childhood Assessment Project

Project Goal: To promote and support the use of authentic assessment in early care and education home and centerbased settings

- Survey and interviews
- Creation of 11 modules
- Evaluate implementation of the trainings

Online Early Educator Survey:

- Purpose: Identify the gaps in knowledge and skills experienced by early educators across the early care and education field
 - How do early educators use authentic assessment practices in their teaching and caregiving?
 - What do they perceive as the successes and barriers to fully implementing authentic assessment in their setting?

Method

Sample: Early educators working with children ages 0-5 in community-based centers, school-based settings (including early childhood special educators and family educators), Head Start and home-based care (HBC)

Recruitment: Survey distributed by statewide stakeholder groups

- N=599
 - N=226 HBC
 - N=169 center-based providers
 - N=146 school-based teachers
 - N=58 Head Start teachers



Demographics

Virtually all female, 94% White, 3% Black/African-American

Age range between 20-76; 58% between 30-50, 32% over 50

45% had a BA, 23% a postgraduate degree

 School-based providers had the highest levels of education, followed by Head Start and center-based providers. HBC had the lowest levels.

38% were FCC, 28% center-based, 24% school-based, 10% Head Start

Selected Survey Questions

What authentic assessment practices are used by early educators?

How confident do early educators feel about their knowledge and use of assessment practices?

What gaps in assessment knowledge and practices exist? What challenges and barriers affect implementation of authentic assessment?

What kind(s) of assessment support do early educators desire?

Use of authentic assessment varied.

- Overall, 43% reported not using an assessment tool at the time of the survey.
 - The majority of those respondents (58%) were HBC providers who stated that they were not required to conduct authentic assessment.
 - Of those who were using an authentic assessment tool, TS-Gold and Creative Curriculum were used most often by center-based providers, Head Start, and HBC providers. Work sampling was used most often by school-based staff.

Regular implementation of authentic assessment practices was limited.

• The vast majority of early educators spent either 1-2 or zero hours per week in each of the stages of the authentic assessment cycle: gathering data/observation; documenting/inputting data; analyzing the data; and using assessment data in programming.

Beliefs about authentic assessment practices were positive.

- 81% strongly agreed or agreed that they are competent conducting authentic assessment and that they incorporate assessment into daily practice.
- 60% felt competent assessing children from culturally-diverse backgrounds or children with disabilities or who were English-language learners.

Beliefs about authentic assessment practices differed by type of early educator.

- HBC providers more likely than center-based, Head Start, or school-based staff to perceive themselves as competent at authentic assessment and as regularly incorporating assessment into their daily practice.
- HBC were also more likely to believe that the challenges of assessment prevent its implementation compared to center-based or Head Start staff, and they were less likely to seek assistance than Head Start, school-based, and center-based staff.
- HBC were also more likely to perceive themselves as competent at assessing children from culturally-diverse backgrounds, children with disabilities, or English-language learners than center-based and Head Start staff.

Early educators made requests for support.

- Embedding assessment into daily routines (24%)
- Using data to inform practice (19%)
- Onsite support in the form of mentoring/coaching (18%)
- Least likely to want support for general principles of assessment (11%)
- Head Start staff were more likely to request support than HBC and center-based providers, but not more than school-based staff.

Education had a significant impact on beliefs and practices.

 As education levels increased, perceptions of competency and reports of regular implementation decreased, while perceptions of barriers to regular implementation increased.



Conclusions

Use of authentic assessment practices are limited in some early care and education settings, particularly HBC.

There are differences in how various early educators perceive and implement authentic assessment practices in their teaching and caregiving.

- HBC exhibit greater inconsistencies in their understanding and practices related to authentic assessment than other early educators.
- Level of education affects perceptions and practices.

Implications for CQI

How to foster a CQI approach?

- Important to understand the knowledge and use of quality improvement practices
- Differ by group

Which quality improvement practices lend themselves to a CQI approach? Or, how to incorporate typical professional development strategies into a CQI approach?