

Preparing a Child for an Assessment: Tips for Families

During our family interviews at The Monarch Diagnostic Clinic, many parents express the concern that assessment results will not or cannot capture a proper snapshot of their child's optimal functioning. While knowing what a child is capable of producing with support under highly individualized and idealized conditions can be of great value in terms of considering a child's potential, some of our most valuable data for treatment planning stems from breakdowns in a child's ability to demonstrate what they can do. When a child encounters difficulty in expressing the extent of their knowledge and abilities, meaningful information about their information processing, behavioral output, emotional response style, and social relatedness is often revealed. From this perspective, it can be more valuable for us as clinicians to see the "real child" – the child who presented with functional challenges that led to the referral for the assessment.

With these points in mind, there are ways that families can help set the stage for a more positive assessment experience for both child and parents. In reviewing the following points, we would ask that you fully consider the individual needs of your child in determining a preparation plan that will best support your child in producing a more optimal performance.

- Preview talking with your child about where you are going, whom you will be seeing, and what you will be doing during the assessment can go a long way toward alleviating anxiety for many children (but certainly not all children). You as a parent are likely aware of whether previewing is helpful to your child. If your assessment will take place in our Clinic, you can access our website and look at pictures of the faculty who will be involved in your child's assessment, for example. Pictures can often be helpful even if a child does not have much receptive or expressive language, making it easier to preview children with these challenges. The words "testing" and "assessment" may be aversive or meaningless for many children we recommend use of statements such as "you will be doing lots of different things together, kind of like games." Let your child know that the people will be friendly, the setting will be comfortable, and that he or she can take breaks if they need to while they are here.
- Be physically and emotionally prepared think about what works to support your child's sleep patterns and use that knowledge to insure your child will be well-rested on the day of the evaluation. Use your typical time frames for going to bed and arising, and work to keep other aspects of the pre-assessment evening and morning as typical as possible. Encourage your child to eat a solid breakfast on the morning of the evaluation. Avoid planning non-routine events on the evening prior to the assessment if possible. If there are visitors in your home, you have just moved, or there are other major influences on family routines that are unavoidable, make sure that your clinician is aware of these factors and can consider them in interpreting assessment data.
- Outline positive expectations it is easy to fall into the trap of outlining what we do NOT want from a child when working to prepare them for an upcoming event, such that many children arrive for assessment with a list of anxiety-producing "don'ts" in mind. When balanced against one or two vaguely-stated positive expectations such as "work as hard as you can," a child may become much more focused on having to inhibit behaviors than on producing expected ones. If there is a way to restate a "don't" into a "do," find it be creative!

Relax and let the process unfold – We know, we know, easier said than done. Many children are hyper-attuned to the emotional states of their parents and will show signs of anxiety if parents give out those signals. Knowing that your clinicians expect your child to encounter challenges and produce unexpected actions can go a long way toward helping you feel more comfortable with the process. Try to let go of any desire you may have to see your child produce a performance that is not truly characteristic of them in day-to-day living. Your clinicians will be happy to fully consider and report comments from you about or other evidence of how your child may perform on certain tasks under other, more supportive conditions.

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