

## Session 3E: Including All Students in IADA

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Dr. Karvonen started the session by explaining that of the 8,800 comments ED received during the RFI on IADA, many were from advocacy groups with concerns about the inclusion of all students, an indication that a session is needed to further explore the topic. Dr. Lazarus added that inclusion is the right thing to do and noted how much better No Child Left Behind would have been if inclusion had been addressed at the start. IADA is a wonderful opportunity to know things that work well, to know the limitations of summative assessments, and to do something different. It's an opportunity to include all students and get data on all kids, including more challenging students and struggling learners.

*[Session 3E Including All Students in IADA slides 5–12]*

Dr. Lazarus covered the federal requirements for IDEA regulations (34 CFR § 300.160). A state must ensure that all children with disabilities are included in all general state and districtwide assessment programs, including assessments described under Section 1111 of ESEA, with appropriate accommodations and alternate assessments, if necessary, as indicated in their respective IEPs. Dr. Lazarus stated that ESSA also requires inclusion of all students in assessments used for accountability. For English learners, participation requirements have been reinforced by several civil rights laws and court cases (e.g., Title IV of the Civil Rights Act of 1964 and *Lau v. Nichols*, 414 U.S. 563 [1974]).

IADA requires states pursuing authority to provide for the participation of all students, including children with disabilities and English learners. The assessment must be accessible to all students by incorporating the principles of the UDL, to the extent practicable, as well as providing appropriate accommodations. IADA must generate an annual summative determination of achievement, using the annual data from the innovative assessment, for each student in a participating school in the demonstration authority. All students need to be held to the same challenging state academic standards—except for students with the most significant cognitive disabilities, who may be assessed with alternate assessments aligned with alternate academic achievement standards.

Regarding consultation, Dr. Lazarus explained that an SEA or a consortium in IADA must collaborate with experts in the planning, development, implementation, and evaluation of an innovative assessment system, which may include external partners and affected stakeholders in the state or in each state in the consortium, including those representing the interests of children with disabilities, English learners, and other subgroups of students.

Dr. Lazarus then addressed the implications of excluding some students. If some students are excluded, data are not representative of all students, meaning the data may be less useful for many purposes (e.g., measuring progress, instructional decision-making, and accountability).

Students with disabilities and English learners may be disproportionately denied access to classes or courses that use such assessments to determine eligibility for enrollment.

It is important to think about developing assessments in ways that allow all students to meaningfully show what they know and can do, such as students with disabilities, including those with sensory disabilities and English learners with disabilities. A wide range of accessibility features and accommodations—including accommodations for students with sensory disabilities (e.g., Braille, graphic organizers, and sign language interpretation) and English learners with disabilities (e.g., glossaries and translations)—are needed. Dr. Karvonen noted that she did not find any information about or questions asked around inclusion or subgroups in the 2023 IES report on IADA implementation evaluation. Inclusion may have been beyond the scope of the report, but it indicates that more questions about inclusion could be asked.

*[Session 3E Including All Students in IADA slides 13–24]*

Dr. Karvonen continued that inclusion needs to be thought about throughout the assessment system. By the time we get to thinking about assessment design, the content standards are usually already there. If we do a good job of addressing inclusion at each stage, fairness issues that could interfere with comparability should be proactively addressed. Dr. Karvonen offered the opinion that innovative assessments must meet the same standards of quality as the existing operational summative assessments, and she said “same-quality standards” may require different methods, depending on the innovation.

On test design, Dr. Karvonen encouraged innovators to stop and ask themselves whether all students are given equitable opportunity for the potential uses of test scores. Regarding domain modeling, do all the domains make sense? Are they reportable and actionable? What is baked into the way we think about domains? Are people paying attention to and thinking about all the learners who will take the assessment? For example, students who are hearing-impaired can develop rhyming skills later than other students. With thoughtful design, construct-irrelevant sources and barriers should be removed.

Dr. Karvonen expanded on test design, saying that the COVID-19 pandemic shone a light on the premise of opportunity to learn, which had previously gone unexamined for too long. Post-pandemic, we can't go back to business as usual and assume that instruction is still happening. If innovative assessments are supposed to be driving change in the way we think about instruction, has that been happening, and how are we evaluating it? There may be variability in how we measure opportunity to learn. Additionally, we don't have a lot of good data on those in the examinee population and who they are as learners and how those characteristics intersect with the context of what we are trying to do through innovation. If we don't have good understanding of that, we aren't in a good position to know whether we've done a good job; we continue to work with our unintended stereotypes. When working with item types, how can they be designed without introducing construct-irrelevant accessibility barriers or linguistic challenges? Dr. Karvonen offered her personal opinion that a fixed-form multiple-choice test as an alternative to the newly adopted approach is not an accessibility solution—and there is a

fundamental question of fairness. On standardization, Dr. Karvonen encouraged people to look for flexibility within the constructs themselves and the resulting effects.

Addressing test development, Dr. Karvonen said strong experts and people from the community should be included to better understand students and improve testing. For moving from a summative test to something more innovative, proactive education on assessment literacy is needed, as is thinking about what shifts in accessibility support are needed in the context of the construct being measured and the way that it is being measured. As you learn about appropriateness of supports over time, assumptions that there should be consistency in data across windows may need to be reexamined.

For focus groups on score interpretation and use, it can be difficult to access parents of students from marginalized groups, even within the disability community. Dr. Karvonen explained that parents often have to rely on advocates, who are a step removed from whom they want to talk to about score interpretation, what are meaningful data, and the need for corrections. Ideally, this is another chance to help parents understand score reports, help parents understand what's new, and leverage innovations in dynamic reporting to help parents better use information from assessments.

Regarding accountability, Dr. Karvonen offered that we cannot assume that all students are benefiting equally. We need to look at scores in different ways. Surveying school districts about program evaluation probably isn't going to be enough. When running two tests concurrently and combining them in a way that ensures accountability, if we think about how things such as features of the assessment and accessibility interact with the construct, there may be different options. You don't need to expect parallel supports within the two systems; they just need to have coherence and be upholding comparable interpretations of the construct that back using those scores in an accountability system.

Dr. Karvonen provided a few reminders on technical reporting. Technical analyses and evidence of innovative assessments should meet standards that are equivalent to those of the traditional operational assessment in terms of validity, reliability, and fairness. However, "equivalent standards" does not mean "identical methods."

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Dr. Peasley commented that in 2020, Indiana proposed an IADA alternate assessment. When asked why it was rejected, Dr. Peasley replied that Indiana chose not to provide additional information requested in the review process.

Dr. Karvonen covered alternate assessment requirements. As required by IDEA and ESSA, alternate assessments are needed for students with the most significant cognitive disabilities. Each assessment must be aligned with the state's challenging academic content standards for the grade in which a student is enrolled, promote access to the general education curriculum, and be aligned to ensure that a student who meets the alternate academic achievement

standards is on track to pursue postsecondary education or competitive integrated employment.

Dr. Karvonen proceeded to address common misperceptions about alternate assessments, which include that they need to cover the same content standards as the general assessment, conform to the same design as the general assessment, and have the same number of performance levels and same policy PLDs as the general assessment. In correcting the misperceptions, Dr. Karvonen explained that alternate assessments must be aligned with grade-level academic content standards but may differ in depth and complexity compared with general assessment blueprints. Adjustments will most likely need to be made on how much is covered; it just has to be aligned.

Regarding alternate assessment design, Dr. Karvonen explained that the AA-AAAS design should be different because it is meeting the needs of students for whom the general assessment does not produce valid scores. Dr. Karvonen's point of view is that all decisions about AA-AAAS (from design to score reporting) must be based on an understanding of the assessed population and ensure the alternate academic achievement standards meet several criteria.

Dr. Karvonen shared CE 6.3 (Challenging and Aligned Academic Achievement Standards) and discussed alternate academic achievement standards. These standards must be aligned with the content standards for the grade level, promote access to the general curriculum, reflect the professional judgment of the highest possible achievement, be designated in the IEP, and be aligned to ensure that a student who meets the achievement standards is on track to pursue postsecondary education or competitive integrated employment. Dr. Karvonen reported that there does not need to be the same number of achievement levels as there are on the general assessment; there needs to be at least three achievement levels. Policy PLDs could be the same or different but need to support appropriate interpretations for both assessments.

Dr. Karvonen encouraged attendees to think about why they are contemplating or pursuing IADA for the general population of students and to consider whether they could meet similar goals for their students with significant cognitive disabilities through an alternate assessment. Does the current AA-AAAS meet the goals? Is a new AA-AAAS needed to meet the goals? An innovative AA-AAAS should have standards of technical quality that are similar to the standards of the operational AA-AAAS.

### **State Panel Discussion**

Panelists were asked to answer at least one of three questions:

*1. How can states approach the topic of inclusion as they begin to develop innovative assessments, and how, at a high level, does inclusion run through the steps of assessment development? What is different from (or the same as) the approach to inclusion for current summative assessments?*

Mr. Lambert replied that Louisiana prides itself on having a very inclusive assessment, which follows the UDL. One difference with the innovative assessment is that the background knowledge gap no longer exists because of “teaching to the test” in a positive way. The innovative assessment tests students on hot, warm, and cold reads that seek to determine whether students are absorbing the background knowledge that they have been taught and whether they have gained skills. Mr. Lambert emphasized that it is important to think about how items will be translated, converted, or used by students with different disabilities. An example is an item that wouldn’t translate to Braille well; it would have to be changed to give all students access to the item. He added that if one is doing a through-course model, one cannot tweak it over the course of the year because of the time needed to address accommodations. Regarding test administration, Mr. Lambert said that a student’s need for accommodations can change over the course of the year and may be different in different testing windows. Mr. Lambert also recommended staying aware of differences among and changes to testing platforms and making sure accessibility remains intact.

*2. Pick one of the high-level categories (test design, test development, administration, score interpretation and use, and technical reporting) we shared in this session and share how the work can be approached at the state level. How should/can inclusion be considered? Which stakeholders should be engaged? What challenges should states be prepared to address?*

Dr. Mbella reflected on how colleagues advocate the inclusion of everyone. In designing the assessment, North Carolina ensures that every item is accessible to everyone. Every item goes through review to ensure accessibility. North Carolina works to ensure accessibility throughout the assessment process. From the development process to the inclusion of items to form-building to reporting, there is access for everyone.

*3. If you had the ability to go back to the early days of thinking about the innovative assessment and not have the barriers and constraints that have been in place, what would you do differently around inclusion? Or if you were giving advice to another state that is just starting to think about an innovative assessment, what would you suggest that it do about inclusion?*

Dr. Timberlake offered that Georgia stands as an example of what not to do. Georgia was in a unique situation; state law put local school systems or consortia in a position to design, develop, and implement an assessment system with no guidance from the Georgia Department of Education until the state joined IADA. Inclusion was not a key consideration before Georgia withdrew from IADA. The assumption was made that items for inclusion in the state assessment could be used in the innovative assessment, which is one approach to access but is really the baseline. An opportunity was missed on the innovative assessment to plan, engage with communities, and learn. Dr. Timberlake encouraged attendees to think about practical aspects of inclusion, how inclusion affects populations of students, and whether it better enables students or creates more barriers. Dr. Timberlake added that from work on its ELA, Georgia has found that new technology provides new opportunities to engage earlier with students in special education.

Mr. Lambert shared two thoughts on inclusion. (1) Partnership work is hard. Pay for work; it's better to rely on work from a vendor whom you have paid than it is to rely on the kindness of strangers. (2) Think about silos. Louisiana started with a strong focus on curriculum, and the assessment team was not engaged in early phases. When Mr. Lambert arrived several years into the process, he recommended getting psychometric and assessment teams involved. Once that happened, a new silo was created, and the curriculum team felt left out. It's important that all sides talk with one another. Rubber hits the road in the classroom. All items must be tied together well.

## Questions and Comments

Dr. Karvonen asked whether there was any advice the panel would like to offer about communication and consultation versus collaboration. Dr. Mbella replied that in North Carolina, people working on various aspects of education (e.g., psychometrics, assessment, and curricula) have the same director, which helps to remove silos. Mr. Lambert said that a TOA and a set of aligned values are very important and help with decision-making and the way people feel about decisions.

Dr. Karvonen asked the panelists about what needs to be figured out for universal design to better fit or work with IADA. Dr. Mbella said that North Carolina can adapt to universal design, but it becomes difficult to measure some constructs after measures to meet some unique needs have been applied. North Carolina is exploring having text to speech for everyone because Braille isn't accessible to all visually impaired students. When it comes to peer review, it is difficult to document all of the accommodation features in relation to the construct. Dr. Timberlake replied that there were benefits to the grassroots involvement in district-led development, but there was also a challenge with the lack of people's experience in writing statewide assessment items. Although you can offer available accommodations to most English learners, there will always be unique cases that require adjustments. Multiple assessments and on-demand teacher assessments most likely compound the challenge. Dr. Timberlake recommends engaging with as many people as you can and preparing for the inevitable day when you are asked to make an adjustment and to think about whether it has an implication on your test design.

Dr. Karvonen asked about assessment literacy. What messages do stakeholders need about inclusion? Dr. Timberlake said that like many states struggling with the 1.0 percent issue, though we need to attend to inclusion in innovative assessment design, we also need to make sure people understand what already exists so that we can take inclusion to the next level. Mr. Lambert stated that he personally believes that Louisiana could do a better job of educating special educators about what really happens when accommodations are administered for state assessments. A high percentage of students have read-aloud accommodations for ELA assessments, and he is not sure whether it is in the best interests of these students. Dr. Mbella shared a similar sentiment about accommodations for students with IEPs. April McCrae, an Education Associate at the Delaware Department of Education, added that state assessments are system assessments, yet they feel very individualistic for special education students, English

language learners, and their teachers. The nature of the assessment gets cloudy. The assessment should allow us to look at curriculum and professional development and tell us how these students on a population level are being served, but parents and teachers feel attacked and feel the assessments are biased against the individual student. Dr. Lazarus replied that NCEO is still learning how to best communicate to parents the benefits of assessments. Parents care about what's working with their children, not necessarily what's working in systems. NCEO has a video with a parent's story about understanding the need for inclusion in assessments.