

## **Title: Rating scale use by children with disabilities on a self report of competence and value for everyday activity: A profile of four users.**

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**Major Finding:** The use of the COSA rating scales as 2- or 4- point scales resulted in four user profile types that varied by gender, intellectual disability, disability condition, age, country, and translation.

### **Participants:**

- Two Subsamples: Occupational Competence Subsample: N = 407; Values Subsample: N = 401.
  - 388 children responded in full to both rating scales.
- In both subsamples, most children male (~70%), Caucasian (~80%), diagnosed with Developmental Delay (~63%), seen in a school practice setting (~53%), and from the USA (~55%).
- Children ages 6- 17 years, mean age ~ 11 years for both subsamples.

**Method:** 98 practitioners administered the COSA version 2.1 as part of standard practice or research, and provided modifications as needed. Children with no missing responses to either the Occupational Competence or Values rating scale items were included in the subsamples.

**Analysis:** Mixed Rasch Model analysis, using Winmira software.

### **Findings:**

- 49.2% of children on the Occupational Competence scale & 54.4% on the Values scale used the rating scale as a 2- point scale. The relative competence and value reported for items differed based on rating scale use. Children in segregated schools were more likely to use Values as a 2- point scale.
- Profile One: Used both rating scales as 4- point scales (n= 123). Profile included: more children with orthopedic/musculoskeletal disabilities than expected; fewer children with ID; more children from Iceland, Germany, & Switzerland and using associated translations; children were significantly older.
- Profile Two: Used both rating scales as 2- point scales (n=138). Profile included: more children with ID than expected; more children using BSL and original English; children were significantly younger.
- Profile Three: Competence as 2- point, Value as 4- point (n=50). Profile included: more children with neurological or no diagnosis than expected; more children from the USA.
- Profile Four: Value as 2- point, Competence as 4- point (n=77). Profile included: more females than expected; more children with mental health; more children from the UK.

**Conclusion:** Children who were previously identified as responding in an unexpected manner were actually using the COSA rating scales as 2- point scales; items had acceptable fit with 2- point usage. The use of the COSA rating scales as 2- or 4- point scales resulted in four user profiles that varied by gender, presence of intellectual disability, disability condition, age, country, & the use of a translated assessment.

**Implications for future research:** Future research should determine the extent to which the variables predict rating scale use, and explore non-computer based methods for determining user profile.

### **Evidence- based practice implications:**

- **MOHO theory can be used to help practitioners make decisions about intervention based on a child's user profile.**
- **Intervention should provide children in segregated schools with the opportunities to explore their own values and interests.**
- **Children who use the COSA rating scales as 2- point scales can still engage in the self report process, as content validity was maintained.**

*Kramer, J. (2008). A mixed methods approach to building validity evidence: The Child Occupational Self Assessment (Chapter Three). [Unpublished doctoral dissertation] University of Illinois at Chicago.*