Rater Nonindependence: A Methodological Problem in Universal Risk Assessments

MARISSA SMITH-MILLMAN, MA; PAUL D FLASPOHLER, PHD; MELISSA MARAS, PHD; JONI SPLETT, PHD; KRISTY WARMBOLD, MA

OUTLINE

- 1.) Universal risk assessments: academic versus behavioral
- 2.) Possible problems with teacher-rated risk assessments
- 3.) Between-teacher rating differences
- 4.) What do we do about this?
 - a.) Explanation of the intraclass correlation (ICC)
 - b.) Example of this method
- 5.) Implications for research and practice

UNIVERSAL SCREENING

Tier III

- Academic screen
 - DIBELS
 - Woodcock Readir
 - Curriculum-base
 - All completed

- rised
- Tier II

- Behaviorg
 - System
 - Behay
 - Strey
 - DF
 - . (

(BESS) Tier I

POSSIBLE PROBLEMS WITH TEACHER RATED RISK ASSESSMENTS

Possible problems

- Teachers may interpret questions differently
- Some teachers may be high raters
- Others may be low raters
- Could be due to a nonrandom distribution of difficult students to certain classrooms or other classroom level influences

So what?

 This may lead to the misidentification of some students and the non-identification of other students who are in need

BETWEEN-TEACHER RATING DIFFERENCES

- Office discipline referrals (ODRs):
 - 2/3 of all ODRs in one middle school came from 25% of teachers (Skiba et al., 1997)
 - In an elementary school, 70% of school staff gave 1-5 ODRs, while 6.2% of the staff gave over 25 (Putnam et al., 2003)
- Mashburn and colleagues (2006) found that 15-33% of the variance in preschool teachers' ratings of their students' competence was due to teacher differences

WHAT DO WE DO ABOUT THIS?: RESEARCH PERSPECTIVE

- Use multilevel modeling (MLM) techniques
- This enables us to do two things:
 - Determine the degree of rater difference in scores
 - Look at other variables while accounting for rater differences

INTRACLASS-CORRELATION (ICC)

- How do you calculate this?
 - Run a multi-level model with no predictors to get 2 pieces of information: between-subjects variance and within-subjects variance
 - ICC = between-subjects variance / between-subjects variance + within-subjects variance

$$\rho = \frac{\sigma_S^2}{\sigma_S^2 + \sigma_e^2}$$

- What does it mean?
 - This gives you an estimate of the degree of rater-differences in a given set of measures

EXAMPLE: DESSA-MINI DATA

Covariance Parameters

Within-subjects variance

Estimates of Covariance Parameters^a

					95% Confidence Interval	
Parameter	Estimate	Std. Error	Wald Z	Sig.	Lower Bound	Upper Bound
Residual	128.391653	7.261783	17.680	.000	114.919349	143.443352
Intercept [subject Variance = Rater]	33.192809	9.748351	3.405	.001	18.666195	59.024487

a. Dependent Variable: DESSAT score.

Between-subjects variance

$$\rho = \frac{\sigma_s^2}{\sigma_s^2 + \sigma_e^2} \quad 33.192809/33.192809 + 128.391653 \approx$$

EXAMPLE: DESSA-MINI DATA CON'T

- In two samples (one from OH and one from MO), we examined the ICC in DESSA-Mini ratings
 - In the Ohio sample, ICC = .205
 - In the Missouri sample, ICC = .184
- What does this mean?
 - In the Ohio sample, we know that 20.5% of variance in DESSA-Mini scores is due to either teacher- or classroomlevel differences, NOT differences between students
 - In the Missouri sample, we know that 18.4% of variance in DESSA-Mini scores is due to either teacher- or classroomlevel differences, NOT differences between students

THE MULTI-LEVEL MODEL

- MLM can be used to answer other questions, while controlling for rater-differences
- By entering the rater into the model at level 1, you can control for rater-differences to ask questions about universal risk assessment data such as:
 - Does risk assessment data predict academic achievement?
 - Is risk assessment data related to discipline referrals?
 - And many more
- Controlling for rater-differences will provide more accurate, less biased results

IMPLICATIONS FOR RESEARCH

When using universal screening data completed by teachers, use MLM to control for possible teacher or classroom effects

IMPLICATIONS FOR PRACTICE

- Possible that some at-risk kids are not being identified and not getting necessary treatment
- Possible that kids who are not really at-risk are being misidentified and given treatment they do not need
- So, what should you do?
 - Multi-rater assessments of students identified as "at-risk" by universal screening
 - Training for teachers on how to complete the universal screener
 - Use a variety of indicators
 - Present information to school staff to identify classrooms in need of more support

THANK YOU

QUESTIONS?