Workgroup for Social Work Licensure Requirements Date: Jan 9, 2024 Time: 10:00 am - 12:00 pm Video call link: <u>https://meet.google.com/xoh-ixfk-wms</u> (US) +1 314-833-7089 PIN: 221 673 610#

<u>Agenda</u>

I. Administrative Updates

- A. Vote on Meeting Minutes
- B. Update on Meeting Cadence and Staffing Information

II. Presentation | Testing Barriers for the Deaf and Hard of Hearing

- A. Presentation by Dr. Mounty on testing barriers
- B. Questions and Comment

III. Discussion | Subgroup Assignments and Expectations

- A. Discussion of subgroup assignments and administrative structure
- B. Discussion of subgroup meeting expectations
- C. Discussion of the timeline for reporting requirements

IV. Public Comment

V. Closing and Next Steps

Judith "Judy" Mounty, Ed.D., MSW

Dr. Judith Mounty is a licensed clinical social worker in private practice in Takoma Park, Maryland. She represents the Maryland Association of the Deaf (MDAD) on the Maryland Social Work Licensing Workgroup.

Dr. Mounty has strived to address issues with standardized testing affecting the deaf and hard of hearing population for over 30 years. As a postdoctoral fellow and then a research scientist at Educational Testing Service, she led and collaborated on projects related to equity in testing for persons with disabilities, with a focus on the deaf and hard of hearing population. This included a job analysis and substantial revision of the Praxis test in educating deaf and hard of hearing students and experimentation with ASL versions of several tests. She also chaired the National Task Force on Testing Individuals who are Deaf and Hard of Hearing for several years, and coedited a book, *Assessing Deaf Adults: Critical Issues in Testing and Evaluation* (Gallaudet University Press, 2005).

With respect to social work, Dr. Mounty met and communicated with Donna DeAngelis, former ASWB Executive Director, familiarizing her with the challenges that deaf social work candidates experience. Their discussions led to presentations to ASWB committees in 2004 and 2015. Unfortunately, there has been no follow-up communication since 2015.

Dr. Mounty worked at Gallaudet University for 22 years in a variety of administrative, teaching, and research positions, including four years as Director of Field Education for the Social Work program and was a senior adjunct instructor for Social Work and other academic programs. Dr. Mounty was involved in diversity, equity, and inclusion work during and prior to Gallaudet employment.

Dr. Mounty was an early proponent of bilingual-multicultural education for deaf and hard of hearing students. She taught at Boston University and what is now McDaniel College, and was a teacher and program administrator in pre-college and human service settings. She holds a doctorate in applied psycholinguistics from Boston University and master's degrees in deaf education from Temple University and social work from Gallaudet University.

Deaf and hard of hearing candidates for social work licensure

A briefing by Judith L. Mounty Workgroup Member Representing the Maryland Association of the Deaf (MDAD) January 9, 2024

Today's briefing

- Deaf and hard of hearing population Brief overview
- Deaf and hard of hearing licensure candidates A culturally and linguistically distinct population
- Deaf and hard of hearing social workers' role
- Standardized testing challenges
 - Overall
 - Licensing and certification examinations
 - ASWB tests
- Increasing equity for deaf and hard of hearing licensure candidates

Deaf and hard of hearing population – Brief overview

- Deaf and hard of hearing (D/HH): an inclusive term
- "Hearing" used to refer to those who are not deaf or hard of hearing
- Uppercase "D" Deaf refers to individuals...
 - ...that use their national sign language American Sign Language (ASL) in the United States and parts of Canada, and
 - whose social networks and cultural orientation are primarily within Deaf communities
- D/HH individuals have a range of trajectories evolving over time related to age of onset, etiology, functional hearing, identification with communities, family, linguistic and educational experiences, and use of technology.
- Yet, commonalities of experience justify understanding deaf and hard of hearing populations as culturally distinct entities.

Two-tiered perspective on diversity within the D/HH population

- Deaf and hard of hearing people as a whole encounter audism and experience microaggressions and implicit bias in daily life. Audism (Humphries, 1975) presumes the superiority of people who can hear and behaviors tied to hearing. Everyday needs generally overlooked. Information and communication largely inaccessible.
- Deaf communities and deaf and hard of hearing populations are a microcosm of larger society, grappling with the pervasive issues of racism and oppression of various identity groups.

Language considerations

- Deaf and hard of hearing people have a different experience with English:
 - Being auditorily-based, English does not fully function as a first language for much of the population, even if it is the home language
 - It continues not to be fully accessible across situations
- Many D/HH people are ASL-English bilinguals
 - ASL acquisition may begin at different times, and proficiency varies, but it is fully accessible; thus becomes the primary language for many D/HH people even when it was not technically their first language
- Education, including Social Work BSW and MSW studies, usually involves both ASL and English, through bilingual instructors and/or interpreters

Importance of deaf and hard of hearing social workers

- Shared lived experiences, cultural knowledge, and bilingual ASL-English competency to address the needs of D/HH clients
- Advocacy for access in all areas of life for D/HH communities

Challenges to licensure

- Different experiences applying knowledge and skills and/or a different way of practicing to meet the needs of the deaf and hard of hearing population
- Less access to educational or professional development opportunities
- Less access to interaction with hearing colleagues and incidental learning in field and practice settings

Challenges with standardized testing

 Challenges with standardized testing, including licensing and certification tests in general and ASWB tests specifically, are experienced by D/HH people with a variety of language and educational experiences.

Problems with standardized tests in general

Item or question construction

- Not enough information to figure out the meaning of the question
- Multiple choice options include "plays" on words or sounds that are not accessible to deaf people
- Options are too similar

Considering possible bias and barriers in test item structure

- Are test items accessible to all candidates, including English language learners, deaf and hard of hearing candidates, and those for whom English may not be, or may not function as, a first or primary language?
- Do test items include contextual redundancy?
- Do test items use clear, unambiguous language?

A licensing test should not be a test of English language proficiency. It should not be designed to weed out candidates who have different experiences with English.

Problematic English in test items

- Insufficient context makes it more difficult for persons who do not have native facility with English to understand complex sentence structure such as:
 - Subordinate or embedded clauses lose track of who is doing what to whom
 - Especially
 - Passives
 - Relative clauses
- Vocabulary
 - Multiple meanings less common meaning used on the test
 - Words usually seen as verbs changed into nouns (nominalization)
 - Expressions that hearing people use while speaking, but to which deaf people may not have access

Suggestions from the test development field

During the 1990s. Drs. Carolyn Emrick Massad, Neil Kingston, and Michael Ehringhaus worked closely with Dr. Mounty, Robert Weinstock, and other deaf and hard of hearing professionals on test equity and test development issues. Subsequently, they contributed chapters to *Assessing Deaf and Hard of Hearing Adults: Critical Issues in Testing and Evaluation*, edited by Judith L. Mounty and David S. Martin (Gallaudet University Press, 2005). The material that follows is adapted from their chapters.

Test development considerations (Massad/Harcourt Assessment)

- Questions should be structured around <u>one</u> central idea or problem that is clearly and completely stated in the stem of the question.
 - The stem should stand alone; the options should not complete it.
- The stem should include as much information as is needed to answer the question, and should be free of irrelevant material.
- Negatively-stated items should be used only when significant learning outcomes require them.
 - least important, least often used, least likely

Test development considerations

- Given a choice, use the simplest available vocabulary
- Use active voice and present tense
- Keep subject and verb together
- Avoid sentences with multiple embedded clauses; these are particularly difficult for candidates with recent or different experiences with English
- Keep together parts of prepositional phrases

Test development considerations

- When using a pronoun, especially at the beginning of a sentence, its referent should be clear
- Avoid double negatives, such as
 - It is not true that Christopher Columbus did not discover the Americas
- Choose distractors with care; incorrectness should not be the only criterion
- Distractors should be grammatically consistent
- Avoid the use of "all of the above" and "none of the above" when the instructions ask the candidate to select the one correct answer

Universal design concepts (Kingston and Ehringhaus)

- Avoid the decontextualized "language of testing" in favor of contextualized plain English
- Use simple grammatical constructions
- Avoid esoteric, non-discipline-specific vocabulary when simpler choices are available
- Avoid words with multiple meanings
- Avoid the use of idiomatic expressions

Additional problems with social work licensing tests

- Situations on the test might be dealt with differently for deaf clients
- Items include terms and expressions that hearing people use in their work, but to which deaf candidates may have less exposure or access — they know the concept, but don't recognize it because of the choice of words (e.g., "doorknob phenomenon")
 - Avoid terminology that may not be used in all communities and is not essential to ethical, safe, and effective practice
 - Test the construct in the most direct and transparent language

Increasing equity: Interpreters and ASL versions of tests

- Interpreters can NOT interpret tests "cold." They need to be familiar with the content and the terminology and have materials in advance to prepare
 - They should have training and experience in interpreting tests
- If the translation is incongruent, the candidate will be penalized
- A better option maybe a test that has ASL translations available. The test-taker would click to see the ASL translation as needed
 - There are logistical, fiscal, and other challenges doing this when a relatively small number of deaf people take the test in a given time period.

Increasing equity: Other considerations

- Eliminate testing for bachelor's and master's license
- Conduct qualitative and mixed-methods research with populations that are disproportionally affected by the current test
- Conduct a job analysis study that is inclusive of populations disproportionally affected
- Make revisions to test construction that consider what has been discussed in this briefing
- Multiple/alternative measures for clinical licensure candidates (e.g., extended supervision periods, portfolio assessment, interview/oral exams)

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