

Beyond Academics: Measures for Social-Emotional Learning, Mental Health, and Implementation Quality

27 February 2020

MENAT Measurement Library

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MENAT Measurement Library

The MENAT (Middle East, North Africa, and Turkey) Measurement Library is a **collection of measurement tools to assess children's learning and holistic development and service provider quality in crisis contexts**. This includes measures that have been **vett ed and tested** by members of the Evidence to Action: Education in Emergencies (3EA) MENAT Consortium, along with technical working papers on the validity and reliability of the measures, guidance materials and training materials.

You will also find measures and assessments of children's learning and holistic development that have been used in MENAT prior to the development of this Library.

The Library is meant to help key stakeholders generate the high-quality data they need to reflect on their work and identify critical gaps and solutions.

Scroll down to begin your search.

If you're not sure what you're looking for...



Take this measure selection quiz to help identify the best measure for your purpose and context.

GET STARTED

If you know what you're looking for...

Get started by filtering using the options below.

13 results found

Use

Choose some options ▼

Resource Category

Choose some options ▼

Resource Language

Choose some options

Age Group

To

ASSESSMENT

The Early Child Behavior Questionnaire-Short Form (ECBQ-S)

Published by Department of Psychiatry-American University of Beirut Medical Center, Ministry of Public Health-Lebanon

Published 13 November 2019

ENGLISH ARABIC

The Early Childhood Behavior Questionnaire - Short (ECBQ-S) is a parent-report survey that was designed to measure toddlers' emotional and behavioral regulation skills. It is intended to provide data for program evaluation purposes.

ASSESSMENT

Academic Readiness for Children (ARCH)

Published by New York University (NYU), Bahçeşehir University, Hacettepe University

Published 21 October 2019

ARABIC TURKISH ENGLISH

The Academic Readiness of Children in Arabic (ARCH-A) and Turkish (ARCH-T) is a measure that was designed to assess 8 domains of school readiness through a combination of child-completed performance tasks and parent-report survey questions.

ASSESSMENT

Social-Emotional Response and Information Scenarios (SERAIS)

Published by International Rescue Committee (IRC), NYU Global TIES for Children

Published 16 October 2019

Social-Emotional Response and Information Scenarios (SERAIS)

Published by [International Rescue Committee \(IRC\)](#), NYU Global TIES for Children

Published 16 October 2019

Use: Program evaluation, Basic research

Resource Category: Social-emotional Skills

Age Group: 5 to 16

Topic(s): Social and Emotional Learning, Psychosocial Support

This tool is part of the [MENAT Measurement Library](#). Learn more about the olive tree stages in our [Measure Review Criteria](#). If you'd like to select and adapt a measure, read our [Measure Guidance](#).

Social-Emotional Response and Information Scenarios (SERAIS) is a scenario-based student assessment designed to measure a suite of social and emotional skills among elementary school-aged children. The measure introduces children to six hypothetical social situations, and prompts them to answer a series of questions asking what they would do in that situation in order to measure four constructs: hostile attribution bias, emotional orientation, emotional regulation, and interpersonal negotiation skills. It is intended to provide data for program evaluation purposes. SERAIS was administered to a sample of 3,661 Syrian refugee children ages 5 - 16 who were enrolled in Lebanese formal schools and had access to the International Rescue Committee's SEL-infused non-formal retention support programming in the Bekaa and Akkar regions of Lebanon. Results of the testing indicated that SERAIS is ready for purpose with modest revisions if used in the same context. If used in a new context, the measure requires adaptation of the social situation scenarios and items and further testing. We note that versions of SERAIS have also been adapted and tested in Niger and Nigeria.

Please look at the one-pager for a brief overview of the measure, or download below the package which includes the user guide, enumerator training powerpoint, and technical working paper.

For more information, please contact Roxane Caires at roxane.aires@nyu.edu.

ENGLISH

 [SERAIS One-pager](#) (249.53 KB)

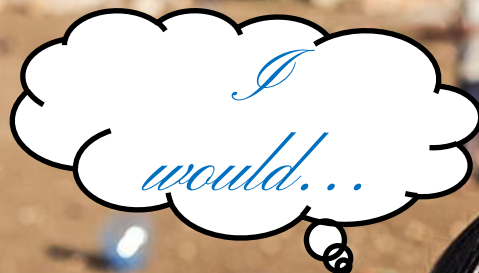
ENGLISH

 [SERAIS](#) (8.74 MB)



SERAIS: Social-Emotional Response and Information Scenarios

Ha Yeon Kim, PhD
Global TIES for Children



Cognitive, emotional, and social skills *in social context*

“Imagine your teacher is handing out pencils. You just got a good spot near the front of the line. Then another student just comes in and stands in front of you, taking your place in line.”



What SERAIS measures, for what purpose?

Program Evaluation & Basic Research

Inclination to strategies such as aggression, disengagement, appeal to authority, or resolution-oriented strategies, when having to deal with interpersonal conflicts.



Interpersonal negotiation strategies

Hostile attribution bias



Cognitive tendency to interpret others' behavior as hostile

Type and intensity of emotions that the child may experience in socially challenging situations such as feeling angry, sad, and calm

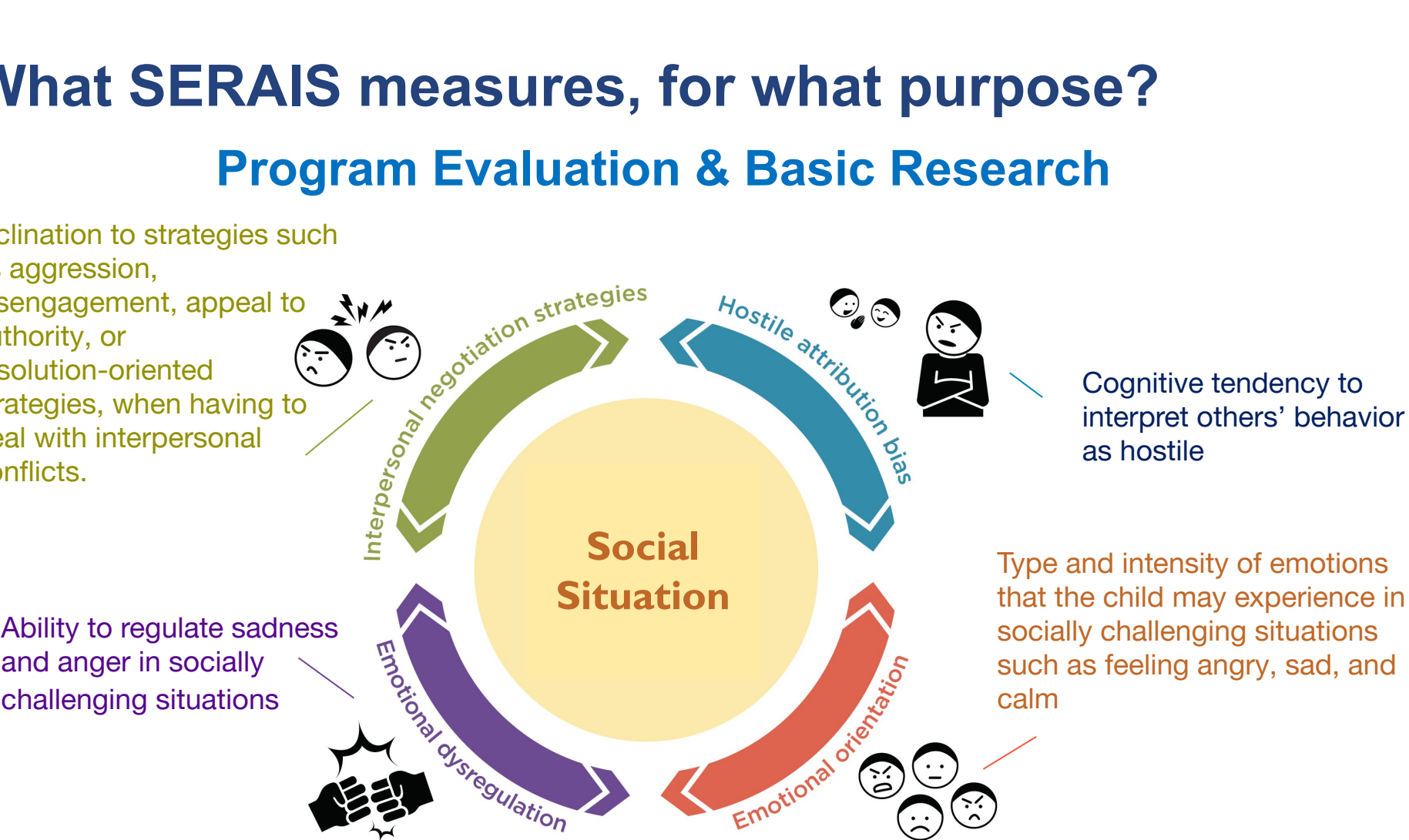
Emotional dysregulation



Emotional orientation



Ability to regulate sadness and anger in socially challenging situations



What is SERAIS?



**Scenario-based
self-report**

**6 social scenarios
13 questions for each**



Appx. 20 minutes

**On
purpose**

**A little
bit**

Maybe

No

“Imagine your teacher is handing out pencils. You just got a good spot near the front of the line. Then another student just comes in and stands in front of you, taking your place in line.”

1. Hostile Attribution Bias

Do you think that the child took your place:

- a. On purpose
- b. By accident

2. Emotional Orientation

If you were in this situation,

- a. Would you feel angry?
- b. Would you feel sad?
- c. Would you feel calm?

3. Emotion Dysregulation

What would you do next, in this situation?

- a. Whine or cry?
- b. Yell or stomp your feet?

4. Conflict Resolution

- a. Ask the child why they took your place?
- b. Say something mean to get back at the child?
- c. Tell your teacher the child took your place?
- d. Push the child out of the line?
- e. Give them an angry look but do nothing?
- f. Tell the child to get in line behind you?
- g. Let the child know you were there first and it's not fair the child took your place?

Evidence from what context/population, for what?



Bekaa and Akkar regions of Lebanon, in school year 2017-18

- 3,661 Syrian refugee children (ages 5-16)
- Enrolled in Lebanese formal schools
- Had access to IRC programming



Developed and used for program evaluation (SEL, Retention Support)



Evidence of reliability and validity



Ready for use in:

- **Rigorous program evaluation studies**
- **Descriptive research**
- **With Syrian refugee children in Lebanon attending Lebanese public schools**

✓ Strong Evidence of Reliability

- ✓ Internal Consistency
- ✓ Longitudinal correlation

✓ Strong Evidence of Construct Validity

- ✓ Consistent factor structures and high factor loadings
- ✓ Measurement invariance over time and across treatment groups and **gender**
- ✓ Correlated with child characteristics, risk factors, and other social-emotional constructs in the expected direction (e.g., child age, **school victimization experience, behavioral regulation, internalizing symptoms**)

Recommendations for use and adaptation of SERAIS

Careful **adaptation and validation** required for use with different context and population

- **CONSIDER REVISING SCENARIOS** and items for better aligned measure for the children's social experience and social repertoire for their culture, context, and age
- **CONSIDER FURTHER PILOTING** anger and sadness items to ensure translation and linguistic meaning
- **CONSIDER REVISING** disengagement items to have less negative tone and to remove double-barreled wording.
- **AVOID** gender-sensitive terms and and other cultural/population-specific stereotypes in adaptation
- **DO NOT USE** for screening or formative assessment purposes
- **CHECK BACK FOR UPDATE & SHARE EVIDENCE!!**

THANK YOU

For more on SERAIS, go to:

https://inee.org/resources/social-emotional-response-and-information-scenarios-serais?webform_id=toolkit_resources
& keep in touch!

Gracious support provided by:



Validating screening questionnaires for internalising and externalising disorders against clinical interviews in 8-17 year-old Syrian refugee children

UK



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LEBANON



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Stephanie Saad
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Dahlia Saab
Georges Karam



Tania Bosqui

Background

- **Syrians make up the majority of the estimated 1.5 million refugees in Lebanon (UNRWA, 2015)**
- **Conflict affected Syrians may experience a wide range of mental health problems, BUT...**
- **While mental health symptoms may be common, they don't necessarily indicate mental disorders (Hassan et al., 2016)**
- **Can we accurately identify children who have mental disorders**
 - To offer treatment to children who might benefit?
 - To estimate prevalence of disorder and so the possible need for mental health services?
- ***How good are brief screening tools in identifying children with mental disorders? Do they work in this population?***

Aim

To establish reliability and validity of brief screening tools for common mental health problems in Syrian refugee children in Lebanon

DEPRESSION

Center for Epidemiological Studies Depression Scale for Children (CES-DC)

- Abridged 10-item version

ANXIETY

Screen for Child Anxiety Related Emotional Disorders (SCARED)

- Abridged 18-item version

Methods

1. **Screening tools translated into Arabic**
2. **Piloted with Syrian refugees and amended**
3. **Data collection as part of cohort study (BIOPATH, N=1596 at baseline, N=1006 at follow up)**
4. **Syrian children aged 8-16 years, left Syria ≤ 4 years ago**
5. **Living in Informal Tented Settlements (ITS) in Beqaa**
6. **Further data collection in subsample to complete a clinical interview (N=119)**
 - Internal consistency reliability (do the items “hang together”?)
 - Factor analysis (do the items fit the expected pattern for the scale / subscales?)
 - Validity (does the tool predict who has mental disorder?)
 - *NB Insufficient data to look at test-retest or inter-rater reliability*

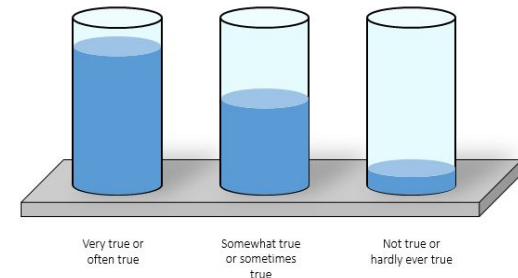
Methods

- Questionnaires completed as **interview in person or via phone**
- **Visual aids**
- Data entered into Qualtrics using tablets
- Clinical interview (MINI KID) completed in **settlement or clinic**
- **Clinical supervision** for all cases: consensus diagnosis and CGI-s score assigned
→ **Diagnosis + impairment/distress**



Child: Anxiety

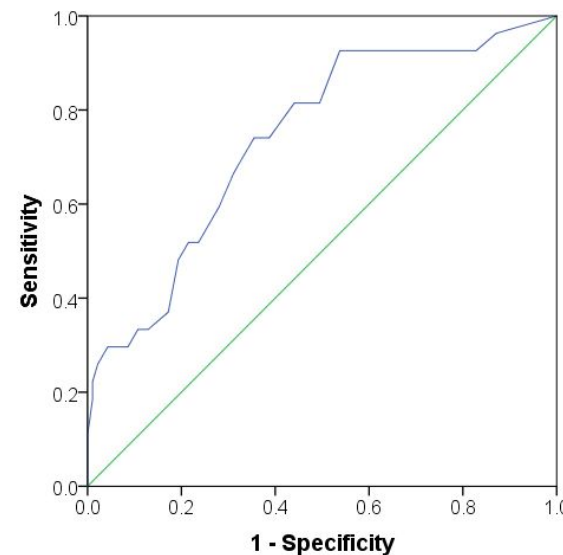
I'm going to read you a list of sentences that describe how people feel. Listen to each phrase and decide if it is "Not True or Hardly Ever True" or "Somewhat True or Sometimes True" or "Very True or Often True" for you. Then, for each sentence, tell me which response seems to describe you for the last month.



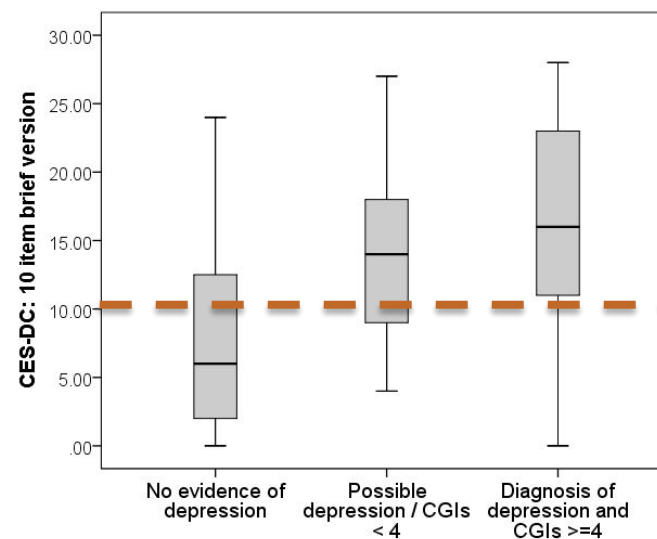
Results: CES-DC

Screen for depression

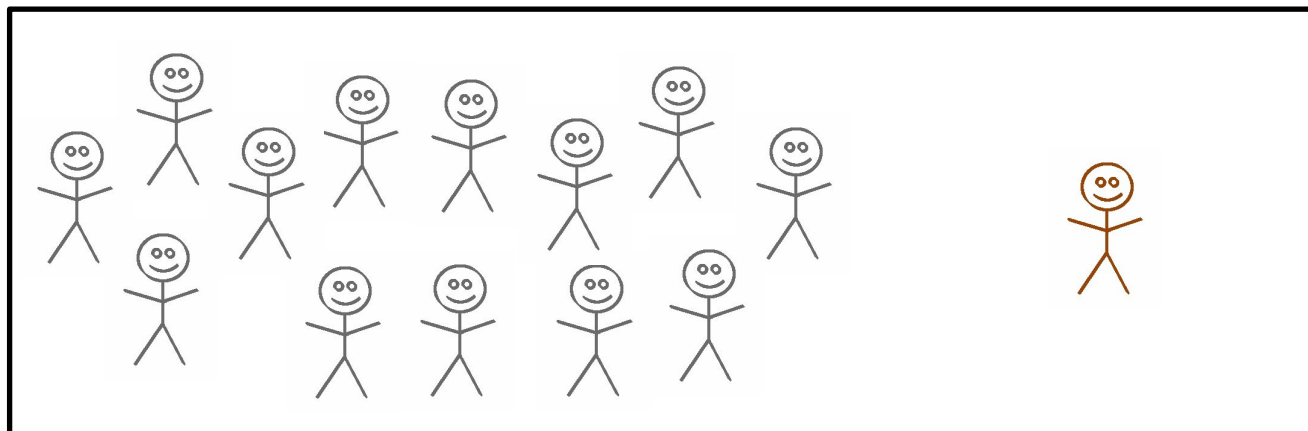
Exploratory Factor Analysis	1 factor ✓
Cronbach's alpha	.89 ✓
Area Under Curve	.74 ✓
Sensitivity	.81 ✓
Specificity	.56
Positive Predictive Value	.35
Negative Predictive Value	.91 ✓



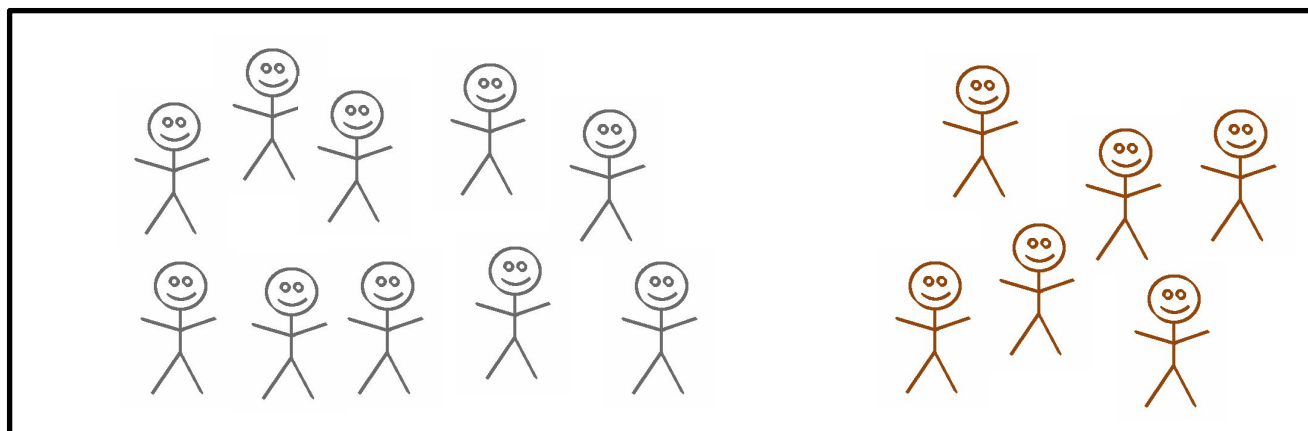
Diagonal segments are produced by ties.



Results: CES-DC

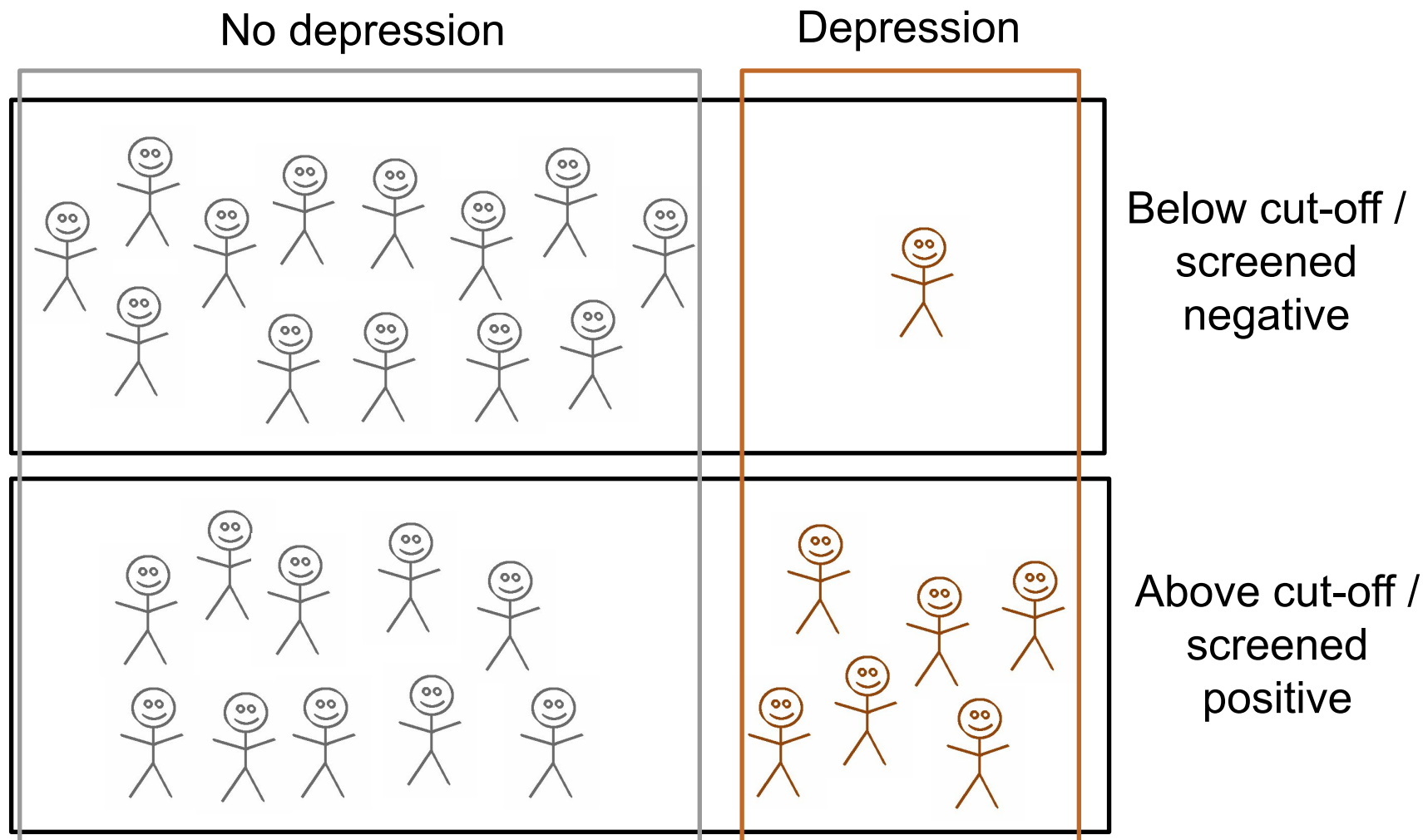


Below cut-off /
screened
negative



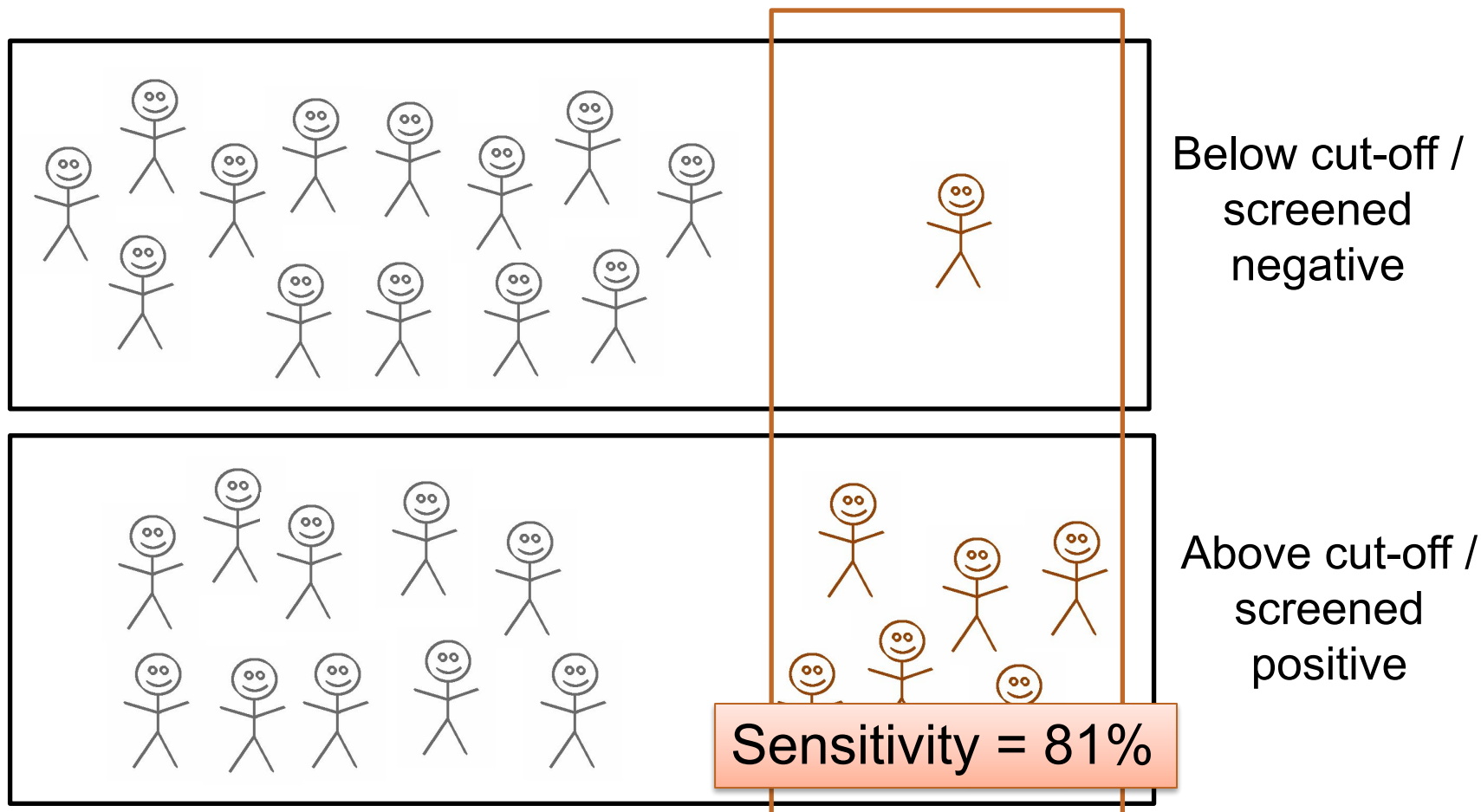
Above cut-off /
screened
positive

Results: CES-DC



Results: CES-DC

Depression



Results: CES-DC

No depression

Specificity = 56%

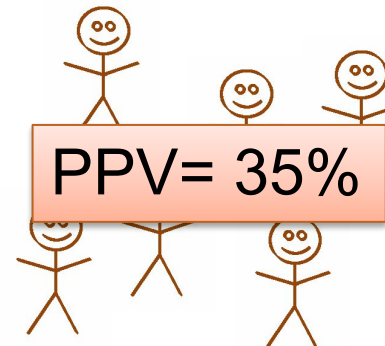
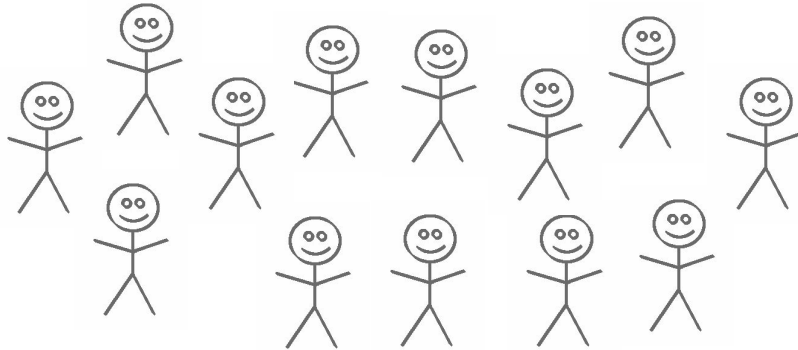
Below cut-off /
screened
negative

Above cut-off /
screened
positive

Results: CES-DC

No depression

Depression

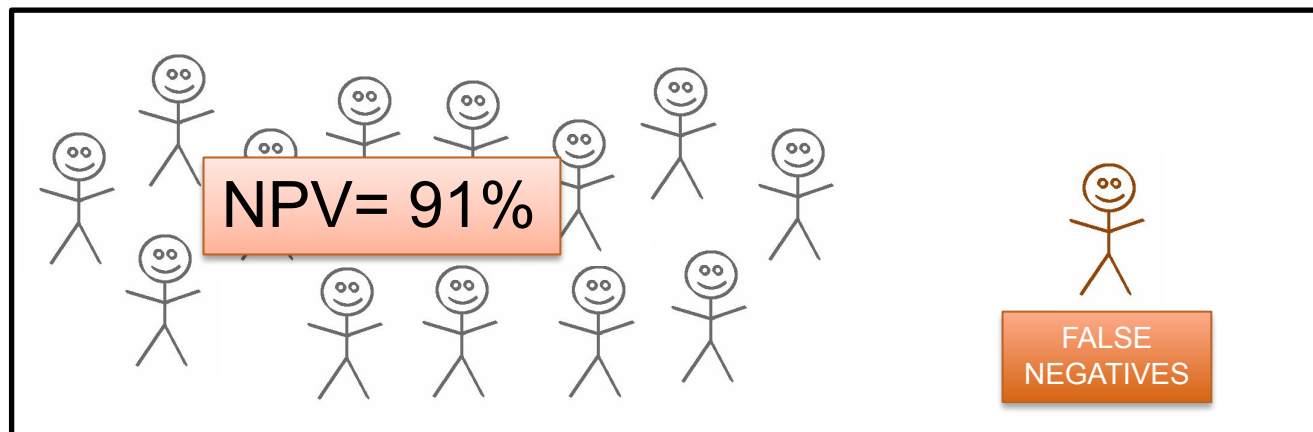


Above cut-off /
screened
positive

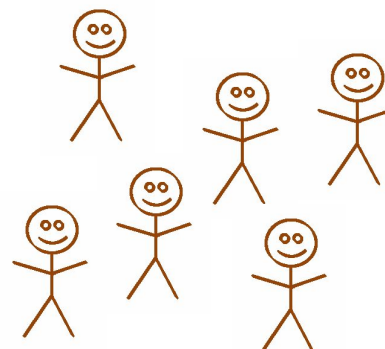
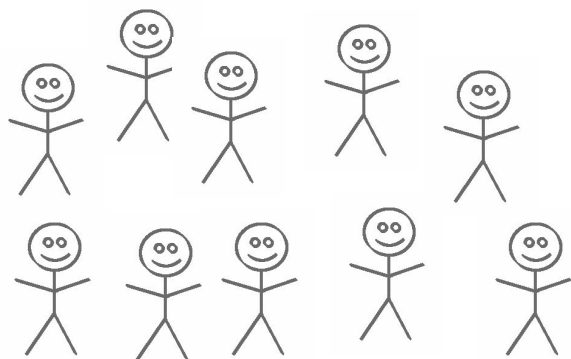
Results: CES-DC

No depression

Depression



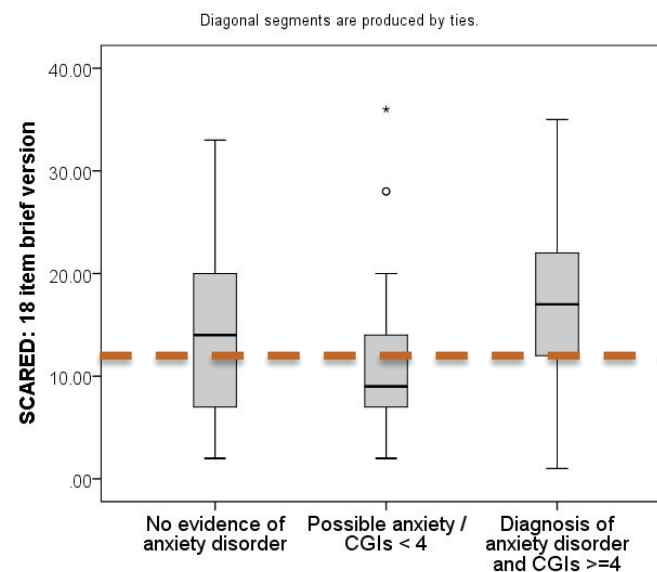
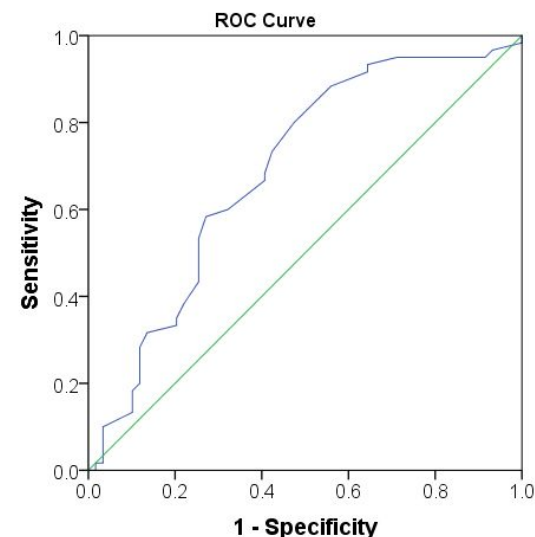
Below cut-off /
screened
negative



Results: SCARED

Screen for anxiety

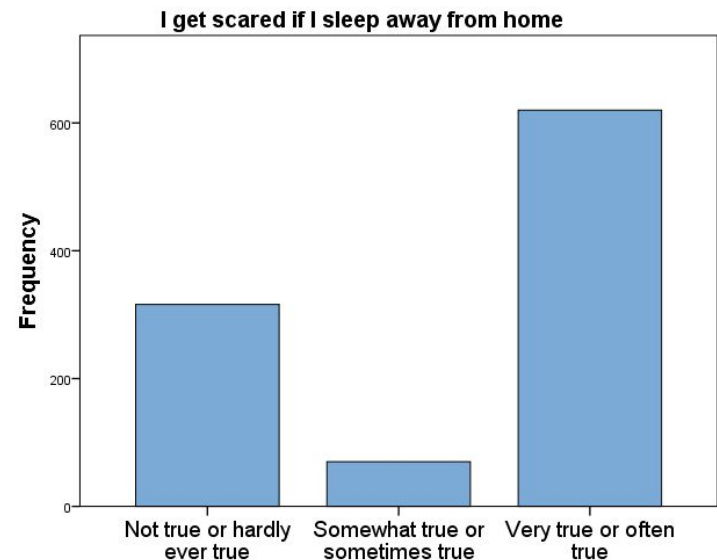
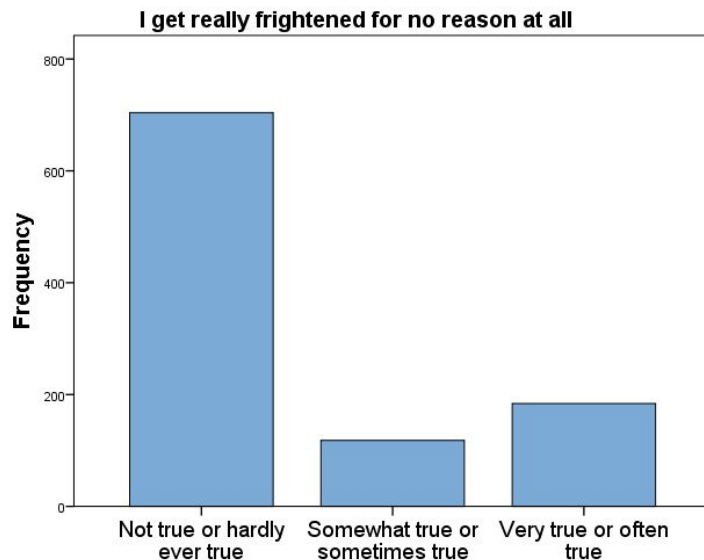
Exploratory Factor Analysis	4 factors
Cronbach's alpha	.84 ✓
Area Under Curve	.69
Sensitivity	.80 ✓
Specificity	.53
Positive Predictive Value	.63
Negative Predictive Value	.72



Discussion: SCARED

What might explain relatively poor performance of (abridged version of) SCARED in this population?

- **Items endorsed at high frequency confounded by culture or context?**
e.g.
 - I am afraid to be alone in the house
 - I worry about how well I do things
 - I feel shy with people I don't know well



General discussion

- **CES-DC**: Possible to select a cut off that achieves *good sensitivity* and identifies most cases
 - But this results in *low specificity* and high number of *false positives*
 - If used for screening into service, need *further assessment* to determine diagnosis
 - If used to estimate prevalence, significant proportion of false positives will *inflate prevalence*
 - Need to adjust cut offs to balance false positives and false negatives
 - Difficult to differentiate **cases** from children who report some symptoms but without significant impairment
 - Do the latter need clinical services?
- **SCARED**: Doesn't differentiate between cases and non-cases
 - Not currently recommended for use in this population
- Important to evaluate reliability and validity *in the population* in which a tool is to be used!

Thanks to

Queen Mary University of London

- Michael Pluess (BIOPATH and t-CETA PI)
- Cassandra Popham

IDRAAC / University of Balamand

- Elie Karam (BIOPATH co-PI)
- Georges Karam
- Dahlia Saab

Médecins du Monde

- Patricia Moghames
- Nicolas Chehade
- Vanessa Kyrillos
- Stephanie Saad
- Diana Abdul Rahman

American University of Beirut

- Tania Bosqui
- Alaa Hijazi

Johns Hopkins University

- Laura Murray
- Paul Bolton
- Stephanie Skavenski

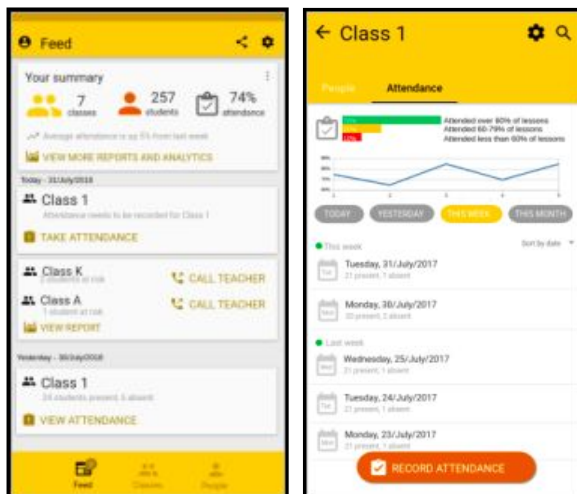


Research for health
in humanitarian crises

elrha



Program Implementation Quality (PIQ) Measurement



Status Spot Check

Background
Add information about the classroom that you are observing.

Location _____
Class ID _____
Teacher Name _____
Date _____
Observer Name _____

Core Items

Observe all of these items, and see if any of them are missing or broken. Check all that apply.

- 1. Safety**
 - ☐ 1.1. School grounds are not safe.
 - ☐ 1.2. There is standing water with mosquitoes.
- 2. Doors and Windows**
 - ☐ 2.1. Door/windows are missing.
 - ☐ 2.2. Door/windows are broken.
- 3. Protection from Elements**
 - ☐ 3.1. The classroom structure is damaged (sun, wind, and rain).
- 4. Light**
 - ☐ 4.1. There is no adequate light.

Note: Light can be provided through windows.
- 5. Toilets**
 - ☐ 5.1. Separate latrines for boys and girls.
 - ☐ 5.2. Latrine doors do not lock.



6. Soap and Water

- ☐ 6.1. Soap and water are not available for hand washing.



7. Ventilation and Temperature

- ☐ 7.1. The classroom does not have air circulating.
- ☐ 7.2. The temperature is not comfortable.



8. Water

- ☐ 8.1. There is no potable water nearby.
- Note: Water should be provided via pipe or ground water.



9. Tables and Chairs

- ☐ 9.1. Children cannot sit comfortably.
- ☐ 9.2. There is an inadequate number of chairs for children sharing one chair.



10. Board

- ☐ 10.1. A board is missing or is broken.



11. First Aid Kit and Fire Extinguisher

- ☐ 11.1. One or both items are not available.



12. Decorations

- ☐ 12.1. There are no child-friendly decorations on the walls.



13. Visible Protective Boundary

- ☐ 13.1. There is no visible protective boundary around the classroom.

Optional Items

Choose which of these items are relevant in your context. Delete the rows for those items that are not relevant. For remaining items, observe to see if any of them need to be fixed or replaced. Check all that apply.

14. Calendar

- ☐ 14.1. Calendar is missing or is out of date.

15. Flashcards

- ☐ 15.1. The flashcards needed for learning are not available, in good shape, and/or complete.

16. Posters

- ☐ 16.1. The posters needed for learning are not available and/or in good shape.

17. Food

- ☐ 17.1. There is not enough food for each student.

18. Attendance Registrar

- ☐ 18.1. The attendance register is not being filled out daily.
- ☐ 18.2. The attendance register is not accurate for the day.

Thank you!

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Q&A

Q&A

The following Q&A questions were not addressed during the webinar. Presenters have provided responses to the remaining questions. All other Q&A can be found in the webinar recording.

Has Classbook been used for analyzing the fidelity or dosage of holistic development measures? As an attendance tracking application, it measures dosage.

Is this applicable in public schools or in NFE centers? Do you have permission from MEHE? We have not yet used it in public schools or introduced the measure to MEHE. Currently, it has only been tested and used successfully in IRC remedial centers in Lebanon.

Class-Book: I download the APP, and the versión in spanish is not available . Do you know if it is going to be available at any time soon? When you download the application, it should display in the language of your phone. If your phone is in Spanish, but the app is still in English—please do let me (Autumn Brown) know.

Thank You

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