

MEMORANDUM

OMB # 1850-0911 v.9

DATE: March 7, 2016

TO: Robert Sivinski
Office of Information and Regulatory Affairs, Office of Management and Budget

FROM: Carolyn Fidelman
National Center for Education Statistics

THROUGH: Kashka Kubzdela
National Center for Education Statistics

SUBJECT: Middle Grades Longitudinal Study of 2017–18 (MGLS:2017) Item Validation Field Test (IVFT) and Operational Field Test (OFT) Authorization Citation and Parent Survey Change Request 83C

The Middle Grades Longitudinal Study of 2017-18 (MGLS:2017) is the first study conducted by the National Center for Education Statistics (NCES), within the Institute of Education Sciences (IES) of the U.S. Department of Education, to follow a nationally representative sample of students as they enter and move through the middle grades (grades 6-8). An Item Validation Field Test (IVFT) is being conducted to determine the psychometric properties of items and the predictive potential of assessment and survey items so that valid, reliable, and useful assessment and survey instruments can be composed for the main study. The IVFT data collection was approved in November 2015 (OMB# 1850-0911 v.4), and the Operational Field Test (OFT) recruitment in December 2015 (OMB# 1850-0911 v.6). Both were amended through a change request also approved in December 2015 (OMB# 1850-0911 v.8).

This request is (1) to amend the MGLS:2017 (OMB# 1850-0852 v.7-8) supporting statement Part A and respondent contacting materials to correct the regulatory citation under the Family Educational Rights and Privacy Act (FERPA), which provides NCES with the authority to collect personally identifying information from students' education records without their consent, and (2) to modify language in the MGLS:2017 IVFT parent questionnaire to improve item clarity. This previous change request (OMB# 1850-0911 v.8) amended the MGLS:2017 facilities checklist and student questionnaire, which enabled the IVFT student data collection to begin in February 2016. The IVFT parent data collection, for which revisions are requested here, will commence in mid-March 2016.

A separate change memo will be submitted later in March 2016 to update the MGLS:2017 OFT recruitment activities.

FERPA Citations

Changes are requested to ensure FERPA citations on all MGLS:2017 IVFT and OFT materials refer to the more detailed exception to the general consent requirement (34 CFR §§ 99.31 (a)(3)(iii) and 99.35). This exception permits disclosures to authorized representatives of the Secretary for the purpose of evaluating federally supported education programs. Previous materials included incomplete citations (34 CFR Part 99.31) and did not properly cite authority as being derived from the Secretary.

The change to the text noted below was made in Part A (A.10 Assurance of Confidentiality) in the following documents:

1. Carried over - Part A MGLS 2017 IV Field Test 2016 Recruitment, p. 13
2. Carried over - Part A MGLS 2017 IV Field Test 2016, p. 13
3. Part A MGLS 2017 Operational Field Test 2017 Recruitment, p. 12

Old text

A request for a list of middle grade students with IEPs will be requested from school districts and/or schools under FERPA exception (34 CFR Part 99.31). This information will be used for sampling purposes only and will be securely destroyed once student samples are drawn.

New text

A request for a list of middle grade students with IEPs will be requested from school districts and/or schools under the FERPA exception to the general consent requirement that permits disclosures to authorized representatives of the Secretary for the purpose of evaluating Federally supported education programs (34 CFR §§ 99.31 (a)(3)(iii) and 99.35). This information will be securely destroyed when no longer needed for the purposes specified in 34 CFR § 99.35.

The change to the citation noted below was made in Appendix S, Student Rostering Materials, in the following documents:

1. Carried over - Appendices A-S MGLS 2017 IV Field Test 2016 Recruitment, p. 40
2. Appendices A-S MGLS 2017 IV Field Test 2016 Recruitment, p. 40
3. Appendices A-S MGLS 2017 Operational Field Test 2017 Recruitment, p. 43

Old Citation

The MGLS:2017 roster data request conforms fully to the requirements of the Family Educational Rights and Privacy Act of 1974 (FERPA) (34 CFR Part 99.31) Under FERPA’s general consent rule, the U.S. Department of Education’s National Center for Education Statistics (NCES) is authorized to obtain student level data from education entities for any study-eligible student, without prior consent, if the disclosure is to an organization conducting studies for, or on behalf of, NCES. Student data are subject to strict protections that are adhered to by NCES and its contractor organizations. Roster information will be used for sampling purposes only and will be securely destroyed once student samples are drawn.

New citation

The MGLS:2017 roster data request conforms fully to the requirements of the Family Educational Rights and Privacy Act of 1974 (FERPA) (20 U.S.C. § 1232g; 34 CFR Part 99). For the purposes of this collection of data, FERPA permits educational agencies and institutions to disclose personally identifiable information from students’ education records, without consent, to authorized representatives of the Secretary of Education in connection with an evaluation of federally supported education programs (34 CFR §§ 99.31(a)(3)(iii) and 99.35). Student data are subject to strict protections that are adhered to by NCES and its contractor organizations. Roster information will be securely destroyed when no longer needed for the purposes specified in 34 CFR § 99.35.

Modify Parent Questionnaire Language

The purpose of the IVFT is to test the instruments on at least 1,200 students in each of grades 6 through 8; 350 students in grade 5; and at least 200 students in each of three disability groups: specific learning disability, autism, and emotional disturbance. One parent of each sampled student will be asked to complete a 30-minute web-based survey. This request is to revise the questions about disabilities and health in the parent survey in order to make the language more accessible to parents, to limit burden, and to better reflect the disabilities that would be detected in the middle grades, particularly among students in the focal disability groups. This request also includes edits throughout the parent survey so as to add clarity to the survey item. The revisions requested here do not change the estimated respondent burden, nor do they impact cost to the federal government.

The table in exhibit 1 below lists all edits made to the parent survey, along with justification for each edit. Part C and Appendix V have also been updated to reflect these edits.

Exhibit 1. Proposed changes to the Parent Questionnaire

Item #	Original Item	New/Updated Item	Justification
F07a	Has {CFNAME} ever been evaluated by a professional because of an issue with... Independence and taking care of {himself/herself}?	Has {CFNAME} ever been evaluated by a professional because of an issue with... Independently taking care of {himself/herself}?	Clarify the language so that the item asks about child’s ability to independently take care of self rather than asking about independence and taking care of self.
F07c	Learning, thinking, and solving problems?	Learning, thinking, or solving problems?	Broaden the response option so that response is either learning, thinking, or solving problems versus the use of the word “and”

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			implying that all three issues are necessary.
F07d	Coordination in moving {his/her} arms and legs?	Difficulty coordinating or moving {his/her} whole body, arms, or legs?	Include the whole body, in addition to arms and legs.
F07e	Behaving and relating to other children?	Behaving or relating to other children?	Broaden language and change “and” to “or”
F07f	Behaving and relating to adults?	Behaving or relating to adults?	Broaden language and change “and” to “or”
F07g	{His/Her} overall activity level?	{His/Her} activity level?	Broaden language to remove the word “overall”
F07h	{His/Her} emotional or psychological difficulties?	{His/Her} emotional or mental health issues?	Language clarified and vocabulary demand reduced to increase parental understanding, particularly among parents with more limited education.
F07i	New item	Harming {himself/herself} ?	Cutting and other self-harming problems emerge during this pre-adolescent period among children who may be experiencing depression or anxiety.
Help Text at F07 and F08	Professional: This includes health professionals such as doctors, pediatricians, and other licensed persons, including nurses or nurse practitioners, optometrists, ophthalmologists, ear-nose-throat (ENT) doctors, audiologists, school or other psychologists, school or other psychiatrists, psychiatric social workers, speech-language pathologists, etc. Do not include teachers or some other non-health professional.	Professional: This includes health and mental health professionals such as doctors, pediatricians, nurse practitioners, optometrists, ophthalmologists, school or other psychologists, psychiatrists, social workers, speech-language pathologists, physical therapists, etc. Do not include teachers, principals or guidance counselors.	Revised the definition of professional to include both health and mental health professionals, and clearly exclude professionals not qualified to diagnose.
F09	What was the diagnosis?	What was the diagnosis? If you don't see your child's diagnosis in the list below, please type it in the “Other, Please Specify” box	Added additional instruction to respondent to provide direction.
F09=4 (original instrument)	Developmental delay	Item deleted	Diagnosis is a category used only from birth to age 8.
F09=6 (original instrument)	Dyslexia	Item deleted	Replaced with “Learning disability (LD – Reading disability (or dyslexia))”
F09=7 (original instrument)	Dyscalculia	Item deleted	Replaced with “Learning disability (LD – Math disability)”
F09=09 (original instrument)	Orthopedic impairment	Item deleted	Replaced with “Health impairment – physical disability”
F09=13 (original instrument)	Separation anxiety disorder	Item deleted	Replaced with “Anxiety disorder or phobia”
F09=15	Generalized anxiety disorder	Item deleted	Replaced with “Anxiety disorder or

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(original instrument)			phobia”
F09=16 (original instrument)	Other anxiety disorder	Item deleted	Replaced with “Anxiety disorder or phobia”
F09=1	Learning disability (LD)	Learning disability (LD) Learning disability (LD -- Reading disability (or dyslexia) Learning disability LD -- Math disability	Differentiate between reading and math disabilities among students with learning disabilities.
F09=4	Attention Deficit Disorder (ADD) Attention Deficit Hyperactivity Disorder (ADHD)	Attention Deficit Disorder (ADD) or Attention Deficit Hyperactivity Disorder (ADHD)	Combined the two attention deficit disorders into one response category.
F09=5	Autistic Disorder/Asperger’s Disorder/Childhood Disintegrative Disorder/ Pervasive Developmental Disorder (PDD)/other Autism Spectrum Disorder	Autism Spectrum Disorder (ASD); Autistic Disorder/Asperger’s Disorder/Pervasive Developmental Disorder (PDD)	Revised wording to improve accuracy and clarity.
F09=6	Speech problems (such as articulation problems; communication problems; phonological problems; voice disorders; or stuttering)	Speech or language disorder	Combine speech and language disorders and simplified the language to improve clarity.
F09=7	Intellectual disability/severe cognitive disability/mental retardation	Intellectual disability* (severe cognitive disability) * Previously called “mental retardation”	Intellectual disability no longer includes “mental retardation” in the item, per Rosa’s Law
F09=8	New item	Health impairment (such as seizures, asthma, diabetes)	Health impairment added and includes examples of the most common health impairments.
F09=9	New item	Physical disability (such as cerebral palsy, spina bifida, amputee, contractures)	New item added under the category of “Health Impairment” to specify physical disabilities and provide common examples.
F09=10	Sensory deficit disorder (such as sensory deprivation problems, sensory processing problems, sensory integration problems, or sensory organization	Sensory impairment (such as hypersensitivity; sensory processing problems; sensory integration problems; sensory deficit, or sensory organization problems)	Item revised and added under the category of “Health Impairment” to specify sensory impairment and provide common examples and current language.
F09=11	Serious emotional disturbance	Emotional disturbance	Deleted “Serious” to match help text wording and because parents are not likely to use “serious.”
F09=12	New item	Conduct disorder or oppositional defiant disorder	New category added under the category of “Serious emotional disturbance” to provide a more specific diagnosis for respondents which may be familiar.
F09=14	New item	Anxiety disorder or phobia	Create new response option for anxiety disorder or phobias, which may be common diagnoses.
F09=16	New item	Eating disorder	Add eating disorders given the

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			emergence of these during this preadolescent time of body changes
F09=19	New item	Tourette's syndrome	Differentiate Tourette's syndrome to determine whether schools are recognizing that this is a neurological problem and not an emotional disturbance
F09=21	New item	Diagnosis not yet determined	Add response option for cases in which no diagnosis has been determined because student is still being evaluated.
F09=1 help text	Learning disability: This is a disorder in one or more of the basic psychological processes involved in understanding or in using language, spoken or written, which shows up as difficulty to listen, think, speak, read, write, spell, or do mathematical calculations. In some cases the child can perform at grade level, but only with special help. Some names of learning disabilities are dyslexia, dyscalculia, developmental aphasia, minimal brain dysfunction, brain injury, and perceptual disabilities. The term does not include learning problems that are primarily the result of problems with seeing, hearing, or walking (or visual, hearing or motor disabilities); mental retardation; emotional disturbance; or environmental, cultural, or economic disadvantage. A commonly used acronym is "LD."	Learning disability involves problems with one or more of the basic processes used in understanding or in using language (spoken or written), listening, thinking, reading, writing, spelling, or solving problems in math. This may be referred to as a reading disability or math disability. In some cases a child with a learning disability can perform at grade level with special help.	Clarified definition and used fewer clinical terms to improve understandability for all populations.
F09=2 help text	New help text	Reading disability is a learning disability that affects a child's ability to read and often also affects his or her writing.	Added new response option which also required new help text.
F09=3 help text	New help text	Math disability is a learning disability that affects the child's ability to understand and solve math problems.	Added new response option which also required new help text.
F09=4 help text	Attention Deficit Disorder (ADD): A childhood syndrome characterized by short attention span that is inappropriate for his/her age group. Attention Deficit Hyperactivity Disorder (ADHD): The child displays signs of inattention, impulsivity, and hyperactivity that are inappropriate for his or her	Attention Deficit Disorder (ADD)/ Attention Deficit Hyperactivity Disorder (ADHD): ADD and ADHD are health impairments that make it hard for a child to focus and pay attention. With ADHD, a child is also often hyperactive (always on the go) and may have trouble being patient. A child may act without thinking, and struggle to sit still (more than is appropriate	Clarified definition and used fewer clinical terms to improve understandability for all populations.

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	<p>mental and chronological age. Adults in the child's environment, such as parents and teachers must report the signs. Inattention means difficulty concentrating, easily distracted, and not finishing things started. Impulsivity means often acts before thinking, shifts excessively from one activity to another, needs a lot of supervision. Hyperactivity means runs about or climbs on things excessively, has difficulty staying seated, always on the go, as if driven by a motor. Onset is typically before age seven and condition lasts at least six months.</p>	<p>for his or her age).</p>	
<p>F09=5 help text</p>	<p>Autism is a developmental disability significantly affecting verbal and nonverbal communication as well as social interaction, generally evident before age three. Other characteristics often associated with autism are a pervasive lack of responsiveness to other people, and engagement in repetitive activities and stereotyped movements (such as hand-flapping or rocking). There is also often an insistence on sameness, as shown by stereotyped play, abnormal preoccupations, or resistance to change. With autism, the impaired social development and delayed or deviant language development are not merely predictable from the child's cognitive retardation. Some children with autism are actually advanced in their reading skills, memory skills, or musical abilities. The term autism does not apply if the child's educational performance is negatively affected primarily because the child has an emotional disturbance. Asperger's Disorder, Pervasive Developmental Disorder (PDD), or any other autism spectrum disorder may be coded here; the subtype will be captured in the next question. Pervasive developmental disorder or delay is also characterized by gross and sustained impairment in social relationships, but typically has an onset after 30 months of age. Other characteristics are</p>	<p>Autism Spectrum Disorder (ASD) or autism: ASD or autism affects a child's ability to communicate (verbally and nonverbally) and interact socially. A child with autism has difficulty understanding emotions and the perspective of others. The characteristics may include a lack of responsiveness to other people, facial expressions that do not seem appropriate for the situation, responding in other socially inappropriate ways, and repetitive activities and movements (such as hand-flapping or rocking). A child with autism may show resistance to change and hypersensitivity to sensory experiences such as the texture of some clothes for example. A child with autism may be advanced or gifted in one or more areas. Autism Spectrum Disorder (ASD) includes children with Asperger's syndrome and pervasive developmental disorder (PDD).</p>	<p>Clarified definition and used fewer clinical terms to improve understandability for all populations.</p>

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	sudden excessive anxiety, inappropriate affect or emotions, resistance to change in the environment, oddities of motor movement, abnormalities of speech, hypersensitivity to sensory stimuli, and self-mutilation. This condition generally does not involve delusions, hallucinations, incoherence, or bizarre associations.		
F09=6 help text	Speech problems: Speech disorders refer to problems talking. These disorders range from difficulty with using a particular sound (for example, the “th” sound in this) to the inability to use language to communicate with others. Speech problems include voice disorders, stuttering, and problems distinguishing and making sounds.	Speech or language impairment refers to a communication disorder. A child with a speech disorder may have voice disorders stutter, or have problems distinguishing sounds. Speech disorders range from difficulty with using a particular sound (for example, the “th” sound in this) to difficulty with speaking loudly. A child may also have difficulty understanding and forming sentences, finding words for what she or he wants to say, or his or her ability to repeat information just heard.	Clarified definition and used fewer clinical terms to improve understandability for all populations.
F09=7 help text	Intellectual or Severe cognitive disability/Mental Retardation: The child's mental development is significantly and noticeably behind what would ordinarily be expected for a child of his or her age. This significantly below average general intellectual functioning exists at the same time as problems in adaptive behavior, and negatively affects the child's educational performance.	Intellectual disability (Severe cognitive disability): A child's mental development is noticeably behind what is expected for a child of his or her age. A child with an intellectual disability also has difficulty with performing some daily life activities or functions on his or her own. A child's learning in school is very slow and far behind other children of that age.	Clarified definition and used fewer clinical terms to improve understandability for all populations.
F09=8 help text	New item, new help text	Health impairment includes health issues that cause problems with strength, vitality, and alertness. A child with a health condition may function intellectually or cognitively as well as his or her peers, but have difficulty “keeping up” in general. Health impairments include problems such as epilepsy or other seizure disorder, asthma, diabetes, sickle cell anemia, or hemophilia.	Added help text for new response option.
F09=9 help text	New item, new help text	Physical disability affects a child's ability to move or balance. Disabling physical problems can include for example, cerebral palsy, amputations, bone tuberculosis, polio, and	Added help text for new response option.

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		contractures (difficulty straightening a joint such as knees, elbows, and fingers).	
F09=10 help text	Sensory disorder: Sensory disorders involve being hypersensitive to touch, sound, movement, temperature; or very under responsive to sensory input; or an inability to regulate which sensory input to pay attention to. Students may have a heightened alertness to even very small changes in the environment making it difficult to maintain attention to what they are supposed to be learning.	Sensory impairments involve being hypersensitive (overly responsive) to touch, sound, movement, or temperature; or very under responsive to those sensory input. Sensory impairments may also involve a lack of control over what sensory information to pay attention to. A child may have an increased alertness to very small changes in the environment making it difficult to maintain attention to what she or he is supposed to be learning.	Clarified definition and used fewer clinical terms to improve understandability for all populations.
F09= 11 help text	New item, new help text	Emotional Disturbance (ED) involves difficulty with emotions over a long period of time that hurts a child's school performance. ED may include (a) difficulty learning that cannot be explained by other factors; (b) difficulty with interpersonal relationships (i.e., getting along) with peers and teachers; (c) behavior or feelings that do not match what is happening; d) a general mood of unhappiness or depression; and/or (e) a tendency to develop physical symptoms or fears associated with personal or school problems. Emotional disturbance includes bipolar disorder and schizophrenia. It does not apply to a child who is socially maladjusted (extreme behavior problems), unless he or she also has an emotional disturbance.	Provide definition for new item added.
F09=12	New item, new help text	Conduct disorder involves a pattern of behavior that is frequently defiant, angry, hostile, and disrespectful, and disrupts child's normal functioning. Before the age of ten, a child exhibiting these negative behaviors is usually diagnosed with oppositional defiant disorder. If behavioral symptoms after age ten are not severe, a child may also be diagnosed with oppositional defiant disorder.	Provide definition for new item added.
F09=13 help text	Panic Disorder: A disorder in which there is the sudden onset of several different physical signs, such as rapid heart rate, shaking,	Panic Disorder involves the sudden onset of several different physical signs, such as rapid heart rate, shaking, sweating, nausea,	Clarified definition and used fewer clinical terms to improve understandability for all populations.

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	sweating, nausea, dizziness, and difficulty breathing. A panic disorder may make a child think that something horrible is about to happen.	dizziness, and difficulty breathing when the child is not in danger. A panic disorder may make a child think that something horrible is about to happen.	
F09=14 help text	<p>Separation Anxiety Disorder: This is the fear a child has of being separated from his/her parents which is far more than would be expected for the child's developmental stage.</p> <p>Generalized Anxiety Disorder: Children who have this disorder worry all the time over nothing, themselves, other's safety, their health, and/or the world to a far greater extent than average. They often have many physical signs of anxiety such as headache, abdominal pain, cramps, diarrhea, vomiting, and dizziness.</p>	<p>Anxiety Disorders: A child who has an anxiety disorder worries much more than other children and may worry all the time. She or he may worry about nothing in particular or themselves, other's safety, her or his health, and/or the world. She or he often has physical signs of anxiety such as headache, abdominal pain, cramps, diarrhea, vomiting, and dizziness. Anxiety disorders include generalized anxiety disorder, posttraumatic stress disorder (PTSD), social anxiety disorder (also called social phobia), and other specific phobias that interfere with a child's ability to function.</p>	Clarified definition and used fewer clinical terms to improve understandability for all populations.
F09=15 help text	New item, new help text	<p>Obsessive Compulsive Disorder: A child must have obsessions or compulsions or both to have this disorder, and these obsessions and/or compulsions must be disabling to the child. Obsessions are thoughts that occur over and over and cause distress. A child spends so much time on the thoughts that she or he has a hard time taking care of herself or himself or relating to others. Compulsions are acts that a child feels driven to repeat over and over, such as a need to clean or organize excessively, to keep everything the same.</p>	Provide definition for new item added.
F09=16 help text	New item, new help text	<p>Eating disorders may involve eating too little and an obsession with staying thin (anorexia) or binge eating (gorging food). A child may make his or herself throw-up (vomit) after binge eating and/or taking laxatives (bulimia) or a child may vomit without trying after overeating.</p>	Provide definition for new item added.
F09=17 help text	<p>Depression: Depression is a general or pervasive mood of sadness or unhappiness -- including feeling helpless, hopeless, and worthless - that lasts for many days to weeks and keep the person from functioning normally</p>	<p>Depression is a general or pervasive mood of sadness or unhappiness. It includes feeling helpless, hopeless, and worthless. Depression lasts for many days to weeks keeping a child from functioning normally.</p>	Clarified definition and used fewer clinical terms to improve understandability for all populations.

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F09=18 help text	Bipolar disorder: Bipolar disorder (also known as manic depressive disorder or manic depression) causes unusual shifts in mood, energy, activity levels, and can make it difficult to carry out day-to-day tasks and lead to poor decisions. The ups and downs that everyone experiences at some point in life are magnified with more intense emotional swings experienced by those with a bipolar disorder.	Bipolar Disorder (also known as manic depressive disorder or manic depression) causes unusual swings in mood, energy, and activity levels in a child. This disability can make it difficult to carry out day-to-day tasks and can lead to poor decisions. The intense emotional swings are often unrelated to life events.	Clarified definition and used fewer clinical terms to improve understandability for all populations.
F09=19 help text	New item, new help text	Tourette's syndrome is a nervous system disorder that involves movements or vocalizations that are repetitive and involuntary (not under the control of the child). These involuntary movements and vocalizations are called tics. Some examples include repeated facial grimaces, eye blinking, throat clearing, or grunting. Tics often get worse if a child is excited or anxious. Early symptoms are often first noticed between 3 and 9 years of age.	Provide definition for new item added.
F09=20 help text	Traumatic Brain Injury: An acquired injury to the brain caused by an external force, resulting in total or partial functional disability or psychosocial impairment, or both, that adversely affects a child's educational performance. The term applies to open or closed head injuries resulting in impairments in one or more areas, such as cognition; language; memory; attention; reasoning; abstract thinking; judgment; problem-solving; sensory, perceptual, and motor abilities; psycho-social behavior; physical functions; information processing; and speech. The term does not apply to brain injuries that are congenital (there at birth) or degenerative (problem that grows worse over time), or to brain injuries brought on by birth trauma (injuries during birth). The term is used when an external force has caused the injury.	Traumatic Brain Injury (TBI) is an injury to the brain from an impact to the head such as a bad fall or a car accident. A TBI makes it hard for a child to learn and may affect day to day functioning. TBI applies to open or closed head injuries that lead to difficulties in one or more areas, such as understanding; memory; attention; reasoning; abstract thinking; judgment; problem-solving; language; sensory, perceptual, and motor abilities; social behavior; physical functions; information processing; and speech. The term does not apply to brain injuries that are there or that occur at birth, or that grow worse over time.	Clarified definition and used fewer clinical terms to improve understandability for all populations.