

**Research Study: Adapting the British Sign Language Receptive Skills
Test into American Sign Language
Summary Report**

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Purpose:

In order to monitor the success of bilingual deaf education programs, and in particular to monitor the progress of children acquiring signed language, it is essential to develop an assessment tool of signed language skills. Although researchers have developed some checklists and experimental tests related to American Sign Language (ASL), at this time a standardized measure of ASL does not exist. There have been tests developed in other signed languages, for example British Sign Language, that can serve as models in this area. The purpose of this study was to adapt the *British Sign Language Receptive Skills Test* (Herman, Holmes & Woll, 1999) for use in ASL to begin the process of developing a standardized measure of ASL skills.

Method:

The initial tasks of the study involved analyzing the BSL test and determining which items needed to be changed or added, and to create new test materials (a picture response book and video) in ASL. This was all done by consulting with a panel of signed language specialists and native ASL users. Once the test was adapted into ASL, it had to be pilot tested with children. The adapted ASL test was administered to 47 children (aged 4 to 13 years) who were all native ASL users, or more specifically were Deaf and had Deaf parents that had exposed them to ASL since birth. It was necessary to recruit and test students from four different sites, including the Manitoba School for the Deaf (4 students), Alberta School for the Deaf (Edmonton, AB – 5 students), Metro Deaf School (St. Paul, MN – 21 students), and E.C. Drury School for the Deaf (Milton, ON – 17 students).

Results:

Results from pilot testing indicated that although the test was clearly distinguishing ASL abilities across the age range, in general the test appeared to be “too easy” for students over 10 years of age. Please refer to Table 1 for a summary of the pilot test results. Through analysis of the error patterns and consultation with Dr. Rosalind Herman (primary author of the BSL test) it was determined that further adaptation of the test was needed. Revisions will need to be made to the distracter drawings (11 items), signed stimulus sentences (4 items), or both (8 items) for a total of 23 of the original 41 test items requiring changes. These revisions will make sure that the children are using their understanding of ASL grammar to answer the questions, rather than being able to guess from the pictures. In this way, the test will more clearly show how children develop their ASL skills at each age level.

Table 1: Pilot Testing Results

Age	# of Children	Mean Raw Score (41) and Range
4 yrs	3	16.34 (14 – 19)
5 yrs	4	27.25 (17 – 33)
6 yrs	6	32.30 (23 – 36)
7 & 8 yrs	8	33.64 (29 – 36)
9 yrs	7	35.57 (34 – 39)
10 & 11 yrs	10	37.10 (35 – 41)
12 & 13 yrs	9	37.40 (36 – 40)

Future Research:

The next steps of the test development process involve making the necessary revisions to the test items and again testing at least 30 children to determine if the changes are effective. Then the test can be finalized. The finalized version of the test will then need to be “normed”. This will involve testing at least 20 children at each age level to get a standard score for what is expected at that age. When the test is used with other children they can be compared to the normal score for their age and determined if they are developing an understanding of ASL age appropriately.

This research project of ASL test development begins to fill an enormous gap regarding the credibility of ASL as a language of instruction in schools. It also provides a contribution for teachers and researchers to help them deliver appropriate educational programming, monitoring and reporting. Thank you to all schools and families who participated in the pilot testing – we hope you will also consider being involved in future testing.