

Expanding the Children's Kitchen Task Assessment to Three Tasks: Examining Task Reliability Rose Brenner, OTS and Dr. Elizabeth Larson, PH.D., OTR **OCCUPATIONAL THERAPY PROGRAM, DEPARTMENT OF KINESIOLOGY, UNIVERSITY OF WISCONSIN-MADISON**

Introduction

- The Children's Kitchen Task Assessment (CKTA) Playdough Task is a performance-based assessment that assess Executive Function (EF).¹ EF encompasses a key set of skills essential for children's adaptive & independent functioning. EF is comprised of planning, response inhibition, impulse control, working memory, and mental flexibility.²
- Valid, reliable, & sensitive performance-based EF **assessments are needed** to assess child's level of EF & to reassess after treatment to determine whether interventions were effective.
- Novel & complex tasks are needed to activate & test children's EF skills.³
- **Purpose:** to establish equivalency between the original Playdough task & two additional tasks (Mug Cake & Chocolate Popcorn) by establishing parallel forms reliability.

Research Design & Methods

Study Design and Participants

- A quasi-experimental, repeated measures design was used to determine whether participants performed similarly across the 3 tasks.

Participants

Participant Count by Age (in years) & Gender								
Age	Total	7	8	9	10	Gender	Male	Female
Count	6	1	2	2	1	Count	1	5

Procedures

- Each task was developed & then analyzed to assure equivalency in examining the following EF areas:

Initiation	Planning & Sequencing	Organization
Inhibition	Judgment & Safety	Termination

- Participants completed all 3 tasks in a randomized order. Scored based on amount of cuing required to complete each task successfully.

Cuing Levels	¢
Independent	0
Verbal Guidance	1
Gestural Guidance	2
Direct Verbal Instruction	3
Physical Assistance	4
Unable to completes step	5

Leing was provided as needed by child for each step, beginning with lowest level of cuing. 2 cues were given at each level before progressing to next level of cues.

Data Analysis

- Raw scores were converted into percentage scores. Participant = 100x (Total Cueing Points Possible - Points Cued) Score **Total Cueing Points Possible**
- Calculated intraclass correlation coefficient (ICC) to quantify reliability within-subject between the 3 tasks using IBM SPSS 22.

Results

Raw Scores, Means & Standard Deviations for each Task Higher raw scores indicate more cuing required & lower EF performance. Mean cuing scores & standard deviations were calculated for each task (mug cake, playdough or popcorn) & task order (1st, 2nd or 3rd) to examine order effects.

	y Task	F Scores by	w Total El	oant Ra	Particip
Mu	Popcorn Score	Playdough Score	Mug Cake Score	Age (vears)	Participant
Play	4	2	8	7	1
Po	2	10	0	8	2
1 ^s	11	0	0	8	3
2 n	3	0	0	9	4
	0	0	0	9	5
3'	3	0	0	10	6



Participant Scores (%)

Participant 1 — Participant 2 — Participant 3

Participant 4 — Participant 5 — Participant 6

Consistently high EF Performance:

All children's percentage scores

were in 97.5% - 100%.





pco





Negative intraclass correlations may reflect small sample size & greater within-groups difference than between-groups difference

ICC Calculations by Task							
All Tasks		Playdough		Mug Cake		Play Dough	
		& Mug Cake		& Popcorn		& Popcorn	
ICC	р	ICC	р	ICC	р	ICC	р
45	.628	-0.06	0.521	-0.046	0.521	-0.78	.698

	Μ	SD
ake	1.33	3.27
ugh	2.00	4.00
orn	3.83	3.76
sk	4.33	4.92
ask	1.83	3.25
isk	1.00	1.67

Older children had higher % scores & required less cueing

rrelations by Age					
Popcorn	Playdough				
0.30	.70				
0.57	.12				

Order Effects were Greater for Younger Children

%	%	%
Score	Score	Score
All	Age 7-	Age 9-
Ages	8	10
99.1	98.4	99.8
99.6	99.5	99.8
99.8	99.6	99.8

ICC of > 0.7 is strong reliability

p > .05 is statistically significant

Conclusions

Finding 1: Consistently high scores. All participants' scores were within a 2.5% range, reflecting little variability between EF performance across all tasks. - Most cueing was needed for chocolate popcorn task, indicating it was the most difficult EF task. - 5 out of 6 children completed mug cake with no cueing; it may be the least challenging task. Finding 2: Age may be moderator of order effects. - Trend noted with lowest performance in 1st task & highest percentage performance in 3rd task, suggesting learning over time when tasks completed

- sequentially.
- Age effects may also be a factor in this trend: greatest order effects seen in 7-8 year old group compared to 9-10 year old group.
- Further testing necessary to determine influence of age & order on differences in performance across the three tasks.

Finding 3: Negative ICC values may reflect small sample size & larger within-groups differences than betweengroups differences in CKTA scores.

Implications for Practice

Each of the 3 CKTA tasks allows practitioners to learn about a child's strengths & weaknesses in EF areas through observation of child's performance of a functional task (following a recipe).

Future research should assess more children with diverse abilities to increase study power & better analyze the relatedness between the 3 tasks. To better develop tasks for the CKTA, children with disabilities that frequently have EF impairments should be included.

References

¹ Berg, C., Edwards, D. F., & King, A. (2012). Executive function performance on the children's kitchen task assessment with children with sickle cell disease and matched controls. Child Neuropsychology: A Journal on Normal and Abnormal Development in Childhood and Adolescence, 18(5), 432-448. doi:10.1080/09297049.2011.613813

² Hilton, C. L., Cumpata, K., Klohr, C., Gaetke, S., Artner, A., Johnson, H., & Dobbs, S. (2014). Effects of exergaming on executive function and motor skills in children with autism spectrum disorder: A pilot study. American Journal of Occupational Therapy, 68(1), 57-65. https://doi.org/10.5014/ajot.2014.008664 ³Anderson, P. (2002). Assessment and development of executive function (EF) during childhood. Child Neuropsychology, 8(2), 71.

⁴Baum, C. M., Connor, L. T., Morrison, T., Hahn, M., Dromerick, A. W., & Edwards, D. F. (2008). Reliability, validity, and clinical utility of the Executive Function Performance Test: A measure of executive function in a sample of people with stroke. American Journal of Occupational Therapy, 62(4), 446–455. https://doi.org 10.5014/ajot.62.4.446

Acknowledgments

I am grateful for the guidance in this project of the principal investigator in this study, Dr. Elizabeth Larson & Dr. Brittany Travers. I also thank Sophie Riffken, Rebecca Johnson, & Molli Gehring for their contributions. Finally, I thank Brittany Ewert, Andrea Cook, Ted Elias, & Kate Mroczynski for their previous work on the project.

