

PRECISION MEETS PROGRESS ASSESSING VISUAL ATTENTION IN EARLY CHILDHOOD

DEVELOPED BY



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How the Conners Kiddie Continuous Performance Test™ 2nd Edition Online (Conners K-CPT™ 2 Online) Works

The Conners Kiddie Continuous Performance
Test™ 2nd Edition Online (Conners K-CPT™ 2
Online) assesses attention-related problems in
children ages 4 to 7 years. Based on the wellestablished Conners CPT paradigm, the measure
takes 7.5 minutes to complete and uses pictures of
objects familiar to young children.

The Conners K-CPT 2 Online is a time-efficient and cost-effective screening device and adjunct to the process of assessing attention problems. Results from the 7.5-minute measure can be used for clinical assessment, early identification, and educational classification. The assessment can be administered before treatment and at subsequent intervals to monitor progress.

Quick Reference

Age:

4-7 years

Administration:

Individual-completed

Paradigm:

Click on non-X, ignore X

Administration time:

7.5 minutes

Format:

Administer and Score Online

Device Type:

Computer/laptop

Qualifications:

B-level





The child is asked to respond to targets (all objects except a soccer ball) and refrain from responding to non-targets (soccer ball) that appear on the computer screen. The Conners K-CPT 2 Online uses two Inter-Stimulus Intervals (ISIs) of 1.5 or 3 seconds to prevent the practice effects that can occur as respondents learn to predict and prepare for stimuli. Each Conners K-CPT 2 Online administration includes 5 blocks, each containing a 20-trial sub-block of 1.5-second ISIs and a 20-trial sub-block of 3-second ISIs (200-trial total).

Key Features

	Normative Data:		Scores and Dimensions of Attention Measured:
$\frac{1}{2}$	Consists of 320 cases representative of the U.S. population, along with a clinical sample of 100 cases of children diagnosed with ADHD and other clinical disorders	000	Inattentiveness Impulsivity Sustained Attention
9	Normed on a variety of computer models and operating systems	0	Vigilance
	Easy-to-understand clinical likelihood state displayed as High, Moderate, or Minimal	ments	s based on <i>T</i> -scores and
	Digital Access:		
ϕ	Easy client set up, administration, and customizable re MHS Online Assessment Center+	ports c	on the
þ	Free digital manual		
$\frac{1}{1}$	Ouick access to inventory management, account balan	ce. and	usage history

Conners K-CPT 2 Online Features Representative Normative Samples and Strong Psychometric Properties

Development of the Conners K–CPT 2 Online was based on a normative sample of 320 4–7-year-old children. The normative sample was stratified to match the U.S. census on a number of key demographic variables including gender, age, region, race/ethnicity, and parental education level. An additional clinical sample of over 100 cases of children diagnosed with ADHD and other clinical disorders was also collected.

Reliability

Users can be confident that the Conners K-CPT 2 Online will yield consistent and stable scores across administrations.

Internal Consistency

One measure of a test's internal consistency is split-half reliability, which has been previously used to establish the reliability of other continuous performance tests. Split-half reliability estimates of the Conners K-CPT 2 Online scales were calculated for the normative and clinical samples. Results were very strong—across all scores, the median split-half reliability estimate across gender groups was .87 to .89 for the norm samples, and .86 to .89 for the clinical samples (all correlations were significant, p < .001). These results indicate that the Conners K-CPT 2 Online demonstrates excellent internal consistency for both the normative and the clinical groups.

Test-Retest Reliability

Test-retest reliability refers to the consistency of scores obtained from the same respondent on separate occasions over a specified period of time. To estimate the test-retest reliability of the Conners K-CPT 2 Online, a sample of 45 respondents from the general population completed the Conners K-CPT 2 Online twice with a 8-to-34-day interval between administrations. The median test-retest correlation was .57. These results suggest a good level of test-retest reliability.





Validity

Discriminative Validity

Conners K-CPT 2 Online accurately discriminates between clinical and non-clinical groups. Including Conners K-CPT 2 Online as part of a battery of assessments contributes to a more accurate prediction of clinical conditions.

Both an ADHD sample and a clinical non-ADHD sample scored higher than the general population sample on the majority of the Conners K-CPT 2 Online scores, indicating more attention-related problems.

Incremental Validity

Adding the Conners K-CPT 2 Online to a broadband emotional and behavioral rating scale completed by parents or teachers (Conners Early ChildhoodTM [Conners ECTM; Conners EC-P refers to the Parent form]) increases the ability to predict group membership (ADHD versus general population groups).

94.9	100.0	5.1
88.9	100.0	11.1
97.6	100.0	2.4
94.1	100.0	5.9
95.2	100.0	4.8
	97.6 94.1	97.6 100.0 94.1 100.0

Easy-to-Interpret Reports

The computer-generated reports have been designed to guide assessors through each step of the recommended interpretation process. Clear visuals and interpretive text complement and narrate the wealth of data. Additionally, there is an easy-to-understand clinical likelihood statement that estimates whether the child has a high, moderate, or minimal likelihood of having a clinical disorder characterized by attention deficits.



There are two report types available for the Conners K-CPT 2 Online:



The **Assessment Report**, which provides information about a single administration, presented numerically and graphically, including the individual scores, how the child compares to others, and which scores are elevated.

The **Progress Report**, which provides an overview of change over time by combining and presenting results for up to four administrations.





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