



The Comparative Effect of Dynamic vs. Diagnostic Assessment on EFL Learners' Speaking ability

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Abstract

There has been a growing interest in the implementation of different types of assessment, including dynamic and diagnostic, in L2 settings recently. Accordingly, this study tried to explore the effectiveness of dynamic and diagnostic assessment on improving EFL learners' speaking ability. To this end, 82 intermediate-level EFL learners were selected based on their performance on IELTS (2016). The participants were then divided into three groups of dynamic assessment, diagnostic assessment, and control. In the dynamic group, the students received three speaking tests in the form of test-mediation-retest; in the diagnostic group, the participants received the same three speaking tests and feedback on their problems; and the learners in the control group went through the routine of speaking courses by focusing on the same three speaking tests. The speaking pretest and posttest were recorded and scored by two raters as well. To answer the research questions, a repeated-measures two-way ANOVA was run. The results showed an improvement in the three groups' performance from pretest to posttest. More specifically, the diagnostic and dynamic assessment groups showed a significant improvement, however, the difference in their progress was not significant. Conclusions and pedagogical implications of the study are further explained.

Keywords: Assessment, Diagnostic assessment, Dynamic assessment, EFL learners, Speaking ability

1. Introduction

Assessment is an ongoing process to investigate how well students are meeting the expectations of a particular instructional program. This can be done in different ways, for example by using formative assessment, dynamic assessment, diagnostic assessment, performance assessment, etc. Out of these different types, dynamic and diagnostic assessment were selected for the purpose of this study. Dynamic assessment (DA) is considered an interactive approach to conducting assessment that focuses on the ability of the learners to respond to intervention. The idea comes from Vygotskian sociocultural psychology and the zone of proximal development (ZPD) (Poehner, 2008). What is emphasized in DA is the mediation or the role of support as DA merges teaching and assessment in the form of a cooperative activity (Poehner & Lantolf, 2010). The key elements are the active intervention of assessors and of the test takers' response to that intervention (Haywood & Lidz, 2007) which can boost test takers' performance dramatically. On the other hand, diagnostic assessment aims to focus on both strengths and weaknesses in a learner's knowledge and use of language. Focusing on strengths will enable the teacher to identify the level a learner has reached, consequently, further instruction and remediation would be provided. Furthermore, diagnostic assessment is usually followed by a kind of therapy or compensatory instruction to overcome the problems by offering different forms of supportive activities, to smooth the way for the data-based decision making. Moreover, diagnostic assessment enables a detailed analysis and report of responses to tasks, and provides detailed feedback which can be acted upon. The feedback provided may be based on materials which have been covered or which will be covered. Alternatively, it may be based on a detailed theory of language proficiency (Jang & Wagner, 2014). Both dynamic and diagnostic assessment can help teachers to enhance learners' achievement in the ongoing process of learning rather than just checking their amount of learning by one-shot achievement tests at the end of a course.

Moreover, with the focus on communication in EFL classes nowadays, speaking ability as an expressive language skill was selected for further investigation in this study because it is considered a vital language skill since when an EFL learner is able to speak in the target language, he/she knows that language and can communicate with it. In addition, many language teachers and learners have problems in dealing with, teaching, and mastering the speaking skill in EFL classes. That is why it was tried in this study to find

out the comparative effect of dynamic and diagnostic assessment on enhancing EFL learners' speaking ability. This study can be significant for EFL teachers and learners by identifying the assessment techniques which can boost the learners' speaking performance.

2. Literature Review

“Assessment is undergoing a paradigm shift, from psychometrics to a broader model of educational assessment, from a testing and examination culture to an assessment culture which support teaching and learning by providing information about pupils, teachers and schools” (Gipps, 1994, p.1). In fact, there is a growth in interest in growing interest in a range of assessment types that provides useful information about a learner's knowledge (Cross, 1990). The most popular of these assessment types nowadays are summative, formative, diagnostic, dynamic, performance, and task-based assessment, out of which diagnostic and dynamic were selected for this study and are explained below.

2.1. Diagnostic Assessment

The term, *diagnosis*, originating from the Greek word *diagignoskein* means ‘discerning’ or ‘distinguishing’ (Harper, 2010). Jang and Wagner (2014) believed diagnostic assessment aims at pointing to a learner's strengths and weaknesses based on both assessment and instruction, which is followed by using the information obtained to help the student's learning.

Alderson and Huhta (2011) outlined some of the characteristics of a ‘truly’ diagnostic test, the most important of which are: it is more likely to be discrete-point than integrative, it is less authentic than proficiency or other tests, and feedback is given to the test-takers after the test.

Feedback is a core element of diagnostic assessment and plays a crucial role by providing the learners with the data needed to take remedial actions. As stated by Hattie and Timperley (2007), feedback is more than information about the learners' errors, although this probably comes to mind first when we hear the word feedback in the context of second or foreign language education. Clearly, feedback on errors, or error correction, is part of the information given to learners, but the concept covers much more. Generally, feedback has been supposed to be most effective when it is aimed at pinpointing and treating misconceptions and faulty understanding revealed through the learner's

performance, rather than complete lack of understanding (Hattie & Timperley, 2007). Most types of feedback are designed to impact subsequent learning activities positively which ultimately help test-takers end up in becoming self-regulating who can self-monitor, seek appropriate feedback, and self-adjust their learning processes.

2.2. Dynamic Assessment (DA)

The most important paradigm shift in testing was known as a movement from product-oriented testing to process-oriented assessment, or from static assessment to dynamic assessment. Dynamic assessment provides new visions into assessment and reveals the areas in which the student can improve. Dynamic assessment is defined as “the interaction between an examiner and a learner targeting at estimating the degree of learners’ modifiability and the means by which cognitive functioning and positive changes can be induced and maintained” (Lidz, 1987, p.4). In dynamic assessment, the interaction between the teacher and the students offers predictions about the students’ probable future development (Ghonsooly & Hassanzadeh, 2019).

A noticeable feature of DA is altering the focus of attention from a learner’s abilities to perform individually to his responsiveness to the interventions provided. The goal of DA is to endorse learner development and the learners’ progress and abilities are determined with reference to their development in the course of instruction. Hence, it is development-referenced or development-centered (Poehner, 2008). What makes a procedure dynamic or static is not the instrument itself but whether or not an intervention is incorporated into the process, regardless of where in the process the intervention occurs (Sternberg & Grigorenko, 2002). In other words, different tests are in themselves neither static nor dynamic instruments and their status is determined by the goal of the procedure and the format in which it is subsequently administered.

2.3. Empirical Studies on Diagnostic and Dynamic Assessment

Different studies have been conducted to study the effectiveness of diagnostic and/or dynamic assessment in various contexts. One recent study on diagnostic assessment was done by Tan, Lim, and Kee (2017) who found that primary school pupils faced various levels of difficulty as they were learning the concept of *time*; however, they could use this information to monitor what they have learnt by minimizing their weakness and

maintaining their strength to cope with their own learning. In another study, Ebadi and Asakereh (2017) focused on a web-based qualitative inquiry in online DA and found that DA mediation and reciprocity patterns provided a deeper insight of the learners' potentials for future functioning whereas the diagnostic feedback of the web-based DIALANG test on reflecting on students' potentials for future development was inadequate. Mazloomi and Khabiri (2016) also worked on diagnostic assessment of writing through dynamic self-assessment, and concluded that dynamic self-assessment had a significant influence on EFL students' writing ability provided that the learners receive appropriate training and feedback from their teachers.

In two similar studies on dynamic and diagnostic assessment, Nikmard (2017) and Zandi (2017) found the positive effect of dynamic and diagnostic assessment on EFL learners' performance on selective and productive reading comprehension tasks and selective and productive listening comprehension tasks, respectively. Further, Ardin (2017) investigated the effect of dynamic and diagnostic assessment on EFL learners' performance on descriptive and narrative writing and concluded that both dynamic and diagnostic assessment positively affected the students' writing in both descriptive and narrative writing.

In yet another more recent study on DA, Kamali, Abbasi, and Sadighi (2018) examined the effect of DA on L2 grammar acquisition of EFL learners. What was indicated in their study was that the learners who received DA mediations significantly outperformed the ones in the control group. They acknowledged that the learners had internalized the L2 grammar knowledge and scored higher because they had been provided with the appropriate feedback in the form of DA mediations. The study showed the advantage of the implementation of DA in L2 grammar teaching.

All and all, the results of various studies on diagnostic assessment as well as dynamic assessment showed their positive effects on improving different aspects of EFL learners' language knowledge.

2.4. Speaking

The ability to speak English fluently is the goal of the majority of EFL learners (Mohammadi & Enayati, 2018); that is why it has always been of particular attention among language learners. Speaking is a productive skill that teachers strive to improve in

EFL learners and let them produce utterances when communicating with others. It is the active use of language to express meaning so that other people can make sense of what the speakers say. Moreover, speaking is recognized as an interactive, social, and contextualized communicative event. It can help people to establish and maintain social relationships, share feelings, and express their identities. Nunan (1991) suggested that to most people, mastering the art of speaking is the most important aspect of learning a second or foreign language, and success is measured in terms of the ability to carry out a conversation in the target language. Speaking is one of the most difficult aspects for students to master because they should master all the components of speaking in order to speak clearly and fluently. There are five components of the speaking skill to master: pronunciation, grammar, vocabulary, fluency, and comprehension (Fulcher & Davidson, 2006).

Speaking has been widely investigated in language education. Lumettu and Runtuwene (2018) examined the English speaking ability of EFL learners through impromptu speaking method. In this study, students have learnt English for 4 semesters. This means they have got enough background to participate in impromptu speaking with various activities. There were two groups in this study, the first group was the experimental group following the impromptu speaking method and the other group was the control group. The students in the experimental group prepared their speaking creatively using their own sentences while the participants in the control group prepared their speaking by memorizing the texts. The results showed that students in the experimental group were more successful in speaking than those in the control group, meaning that the relationship between speaking ability and impromptu speaking method was very strong and significant.

To meet the objectives of this study, the following research questions were posed:

- Does diagnostic assessment have any significant effect on EFL learners' speaking ability?
- Does dynamic assessment have any significant effect on EFL learners' speaking ability?
- Is there any significant difference between EFL learners' speaking ability in the dynamic and diagnostic assessment groups?

3. Methodology

3.1. Design of the Study

The design of this study was pretest/posttest quasi-experimental with non-random availability sampling for choosing the participants.

3.2. Participants

The participants in this study were 82 EFL learners out of an initial pool of 133 learners taking the preparation courses for the IELTS exam. The participants were both female and male with the age range of 25-40. The researchers used non-random availability sampling, selecting the participants who were available for the study.

3.3. Instruments

A number of different instruments were used in this research:

3.3.1. A Four-Skill IELTS Test

IELTS test (2016) was used to check the proficiency level and homogeneity of the participants at the beginning of the study. The test included listening (40 items), reading (40 items), writing (2 tasks), and speaking (3 parts). The test lasted for almost three hours.

3.3.2. IELTS Speaking

Two IELTS speaking tests were used as the pretest (2015) and the posttest (2014) in this research. In IELTS speaking tests, students participate in a discussion which is interactive and as close to a real life situation as a test can get. The test is 11 to 14 minutes long in three parts. In part one, there are short answer questions about the examinees, their family, their work, and their interests, which lasts fewer than 5 minutes. In the second part, the examinees are given a task card which asks them to speak about a particular topic and includes points they can cover in their talk. They are given one minute to prepare their talk and then they will speak for 1-2 minutes. In part three, there is a longer discussion with about 4 to 8 questions, which lasts for almost 5 minutes. Student performance is evaluated based on four grading criteria: fluency and coherence, pronunciation, lexical resources, and grammatical range and accuracy, which should all be graded consistently.

3.3.3. A Set of Four Speaking Tests

Four speaking tests with the similar topic and format as the pretest and posttest were used during the term in all the three groups.

3.4. Data Collection Procedure

The participants in this study were 133 female and male intermediate level EFL learners who participated in an IELTS proficiency test (2016). They were between 25-40 years old and they were selected non-randomly based on availability sampling. Out of them, 82 participants who scored between one standard deviation above and below the mean score on the IELTS test were chosen. They scored between 5 to 7 on IELTS indicating modest to good users according to IELTS band score description. They were then randomly assigned into three groups, two experimental groups, one diagnostic assessment and one dynamic assessment, and one control group.

At the beginning of the study, all the three groups took an IELTS speaking test (2015) as the pretest. The participants in the diagnostic assessment group received diagnostic feedback on their weaknesses and strengths on three speaking tests as the treatment during the semester. The most common types of feedback and correction given by the researchers were repeating, using facial expressions and gesture, hinting, echoing, and reformulation. This process was done three times throughout the study. The participants in the dynamic assessment group took the same three speaking tests (but each one twice) and went through the test-mediation-retest model of dynamic assessment; in each cycle of test-mediation-retest, the learners were provided with some strategies in the mediation phase to improve their speaking ability. To achieve this, the researchers provided the participants with a list of ideas related to the topics, commented on their answers, and provided model answers to the students to have a better supposition of the test requirements. Moreover, a list of vocabulary as well as a list of useful links were available for the participants. On the other hand, the control group had a usual IELTS speaking course with various speaking activities. They also received the three speaking tests during the semester but without receiving any particular feedback or mediation on their performance. Task types comprising the treatment instruction in the three groups included elicitation, ordering and sorting, role play, information gap activity, describing (a place, a thing, and a person), oral presentation, telling a story or personal anecdote,

common questions and answers, and problem-solving tasks. At the end of the study, all the three groups took another IELTS speaking test (2014) as the posttest. All the participants' pretest and posttest speaking were recorded and later scored by two raters. As the assessment criteria, IELTS scoring was used which consists of the components fluency and coherence, pronunciation, lexical resources, and grammatical range and accuracy. The inter-rater reliability of the scores given to the speaking pretest and posttest was also calculated and is reported in the next section.

4. Results

To answer the research questions of the study, various data analysis techniques were used. The first point to be checked was to make sure of having a set of normally distributed data without which it is not possible to use parametric formulae to analyze the data. That is, in the case of having a set of data which is not distributed normally, the researcher has to use nonparametric formulae. In Table 1, the researchers checked and reported the normality of the distribution of the scores on the proficiency test of the control, dynamic assessment, and diagnostic assessment groups.

Table 1.

One-sample Kolmogorov-Smirnov Test of the Proficiency Test of the Control, Dynamic, and Diagnostic Groups

	Proficiency test of the control group	Proficiency test of the dynamic group	Proficiency test of the diagnostic group
N	28	27	27
Mean	5.35	5.27	5.46
SD	.40	.34	.47
Asymp. Sig. (2-tailed)	.15	.17	.07

As can be seen in Table 1, the two-tailed asymptotic level of significance for the proficiency test of the control group is .15, of the dynamic assessment group is .17, and of the diagnostic assessment group is .07. In all the three groups, the sig. value is higher than the standard .05 level, which means the scores of all the groups on the proficiency test enjoyed being normally distributed. Consequently, parametric formula which gives the researchers more certainty about reliable results could be used to analyze the data.

Next, the descriptive statistics of the proficiency test of the three groups are reported in Table 2 to see whether the groups had the same proficiency at the beginning of the study.

Table 2

Descriptive Statistics of the Proficiency Test of the Three Groups

Group membership	N	Mean	SD
Control Group	28	5.35	.40
Dynamic Group	27	5.27	.34
Diagnostic Group	27	5.46	.47

As shown in Table 2, the mean scores of the participants on the proficiency test are marginally different, i.e. they are 5.35, 5.27, and 5.46 for the control, dynamic assessment, and diagnostic assessment groups, respectively. However, just checking the mean and standard deviation of the three groups' scores on the proficiency test is not a suitable way to say whether the difference among them is significant or not.

Next, to check whether the three groups' performance on the proficiency test was significantly different from each other or not, a one-way ANOVA was run on their scores on the proficiency test.

Table 3

One-way ANOVA on the Proficiency Test of the Three Groups

	Sum of Squares	df	Mean Square	F	Sig.
Between Groups	.46	2	.23	1.35	.26
Within Groups	13.55	79	.17		
Total	2375.00	82			

The result of one-way ANOVA on the proficiency test of the three groups revealed that the difference between the learners' knowledge of English was not statistically significant at the beginning of the study as the significance value corresponding to F is above the critical value ($F = 1.35$; $p = .26$; $\alpha = .05$; $p > \alpha$). This confirms the similar mean scores of the three groups observed in Table 2.

The other important analysis to be checked before answering the research questions was checking the reliability of the speaking pretest and posttest. This was done through checking the inter-rater reliability of the scores given to the speaking tests by the two raters in this study. Table 4 below reports the results of Pearson correlations run on the scores by the two raters to check their inter-rater reliability.

Table 4

Inter-rater Reliability of the Pretest and Posttest of the Three Groups

		Pretest 2 st rater	Posttest 2 st rater
Pretest	Pearson Correlation	.83	
1 st rater	Sig. (2-tailed)	.00**	
Posttest	Pearson Correlation		.86
1 st rater	Sig. (2-tailed)		.00**

As can be seen in Table 4, the sig. value of the Pearson correlation between the two raters on the pretest is .83 which shows there is a strong correlation between the two raters' scores ($p = .00$; $\alpha = .05$; $p < \alpha$). A very similar result was obtained for the posttest, as there is a significant correlation of .86 between the two raters' scores ($p = .00$; $\alpha = .05$; $p < \alpha$). It should be noted that to avoid subjectivity in scoring speaking tests, in all subsequent analyses, the mean scores of the two raters on each speaking test (pretest and posttest) was used.

Now, to answer the research questions of the study, the descriptive statistics of the three groups' performance on speaking pretest and posttest are presented in Table 5.

Table 5

Descriptive Statistics of Pretest and Posttest of the Control, Dynamic, and Diagnostic Groups

	N		Pretest	Posttest
Control Group	28	Mean	5.67	6.05
		SD	.59	.69
Dynamic Group	27	Mean	5.31	6.50
		SD	.39	.33
Diagnostic Group	27	Mean	5.61	6.61
		SD	.60	.42

Looking at the mean scores in Table 5, it is clear that all the groups had a positive improvement at the end of the course. However, the experimental groups, dynamic and diagnostic, showed far better results in comparison to the control group. To be more precise, the mean score of the control group in the pretest was 5.67, which changed to 6.05 in the posttest. On the other hand, in the dynamic assessment group, a noticeable increase in the mean score, from 5.31 to 6.50, was seen. In the other experimental group, the diagnostic assessment group, the mean score changed from 5.61 in the pretest to 6.61 in the posttest. As can be seen in Table 5, the learners in all the three groups (control, dynamic, and diagnostic) made an improvement. The highest progress was achieved by the dynamic group and the least change was seen in the control group. To sum up, the main reason for this progress in posttest scores can be related to the treatment in the experimental groups, especially the dynamic assessment group. To show whether these differences are statistically significant or not, it was necessary to run a repeated-measures two-way ANOVA (Pallant, 2011). This kind of analysis was used here since the researchers wanted to seek the individual and interaction effects of the three levels of the independent variable (group variable) on the repeated measurement of the dependent variable (speaking pretest and posttest).

Table 6

Repeated-Measures Two-way ANOVA of Pretest and Posttest of the Control, Dynamic, and Diagnostic Groups

Effect	Value	F	Sig.	Partial Eta Squared
Time	.87	562.37	.00*	.87
Group		1.85	.16	.04
Time * Group	.54	46.90	.00*	.54

The within-subject factor of the present study was the time interval (from pretest to posttest), to check whether there was any increase in the participants' speaking performance. As the values of the first row show ($F = 562.37$; $p = .00$; $\alpha = .05$; $p < \alpha$), F is significant and there is a significant difference between the participants' performance from pretest to posttest. The amount of this effect is large as the partial eta squared reported is .87; partial eta squared value between .01 to .06 is considered small, between .06 to .14 is considered moderate, and above .14 is considered large (Pallant, 2011).

On the other hand, the F value of the effect of the between-subject factor (group) ($F = 1.85; p = .16; \alpha = .05; p > \alpha$) is not significant, which shows that the participants' performance was not significantly different from each other in the three groups. However, the amount of the group effect is small because the corresponding value of the partial eta squared is .04.

Still, the most important piece of information in Table 6 is the F value reported for the interaction of time (pretest and posttest) and group ($F = 46.90; p = .00; \alpha = .05; p < \alpha$) which is significant, showing a dissimilar pattern of progress in the performance of the three groups from pretest to posttest. It means the instruction had various degrees of effectiveness in the three groups. Therefore, to check where this difference in progress was significant among the three groups, multiple comparisons were run on the posttest of the three groups.

Table 7
Multiple Comparisons on the Posttest of the Three Groups

(I) Group	(J) Group	Mean Difference (I-J)	Std. Error	Sig.
Dynamic	Control	.04	.13	.95
	Diagnostic	.20	.13	.33
Diagnostic	Control	.24	.13	.20

The results of Table 7 show that the dynamic assessment and the control groups as well as the dynamic and diagnostic assessment groups were not significantly different from each other on the posttest as their sig values are .95 and .33 respectively and are both above the critical value .05. Besides, diagnostic assessment and control groups were not significantly different from each other on the posttest either as their sig value is .20 and again above the critical value .05.

For better understanding of the possible differences in progress, the comparisons between pretest and posttest scores of the three groups are also shown visually in Figure 1.

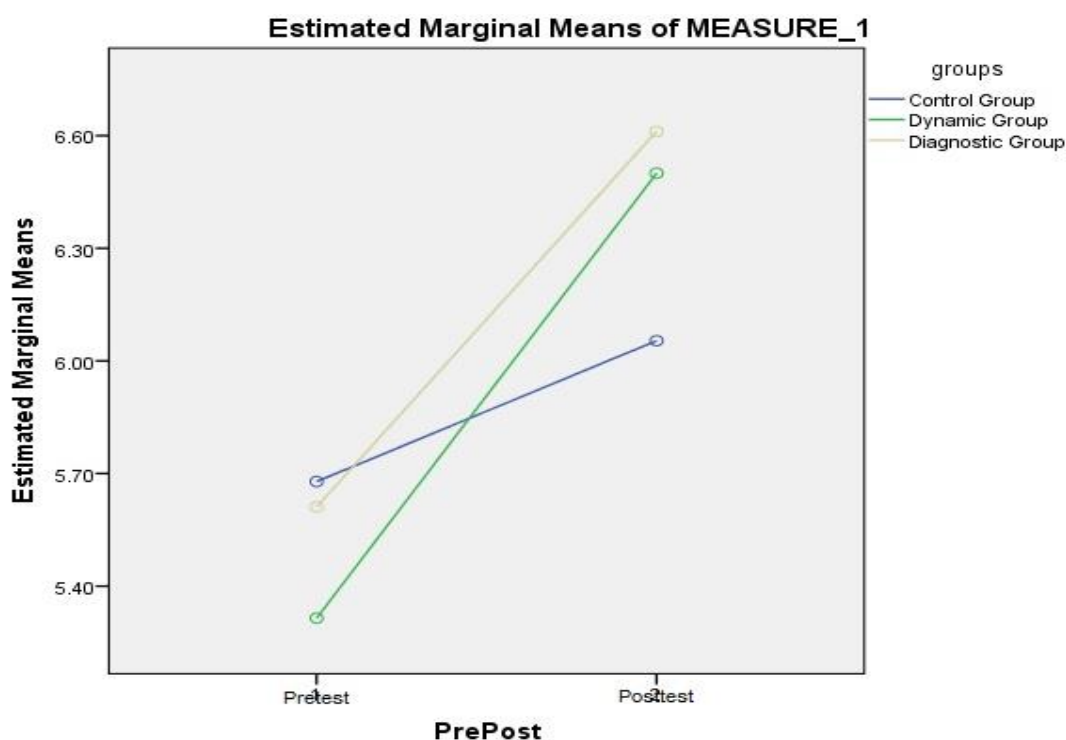


Figure 1. Differences between speaking pretest and posttest scores of the three groups

The lines in Figure 1 show the mean scores of the three groups in both pretest and posttest, which can easily help explore the research questions of the study in graphic form. Obviously, the lines representing the three groups in the diagram are not parallel; this implies that there is a difference in progress of the groups regarding their speaking ability. As can be seen, the dynamic assessment group has achieved a far more noticeable progress from pretest to posttest, compared to the other groups. The second highest progress goes to the diagnostic assessment group. However, the control group has made the least boost in their speaking ability. Accordingly, it could be concluded that in contrast to the control group, both experimental groups made a great progress from pretest to posttest, even though the difference between the two experimental groups was not significant.

Based on the outcomes of Tables 5, 6, and 7 and Figure 1, the first two null hypotheses corresponding to the first two research questions which proposed that diagnostic assessment and dynamic assessment do not have any significant effects on EFL learners' speaking ability were rejected as the learners of both experimental groups performed significantly better on the posttest. On the other hand, the third null hypothesis corresponding to the third research question which proposed that there is no significant

difference between EFL learners' speaking ability in the dynamic and diagnostic assessment groups was not rejected as the two groups' progress was similar to each other from pretest to posttest. The findings of the present research made it clear that both dynamic and diagnostic kinds of assessment are useful to improve EFL learners' performance on speaking tests.

5. Discussion

The results of this study which showed the significant influence of both dynamic and diagnostic assessment on EFL learners' speaking ability are in line with other studies on the usefulness of dynamic and diagnostic assessment in educational contexts. For example, regarding dynamic assessment, Ghonsooly and Hassanzadeh (2019) found the positive role of dynamic assessment on vocabulary learning of EFL students. In addition, Kamali, et al. (2018) found the positive effect of DA on grammar acquisition of EFL learners. More recently, Tavassoli and Nikmard (2019) identified DA as an influential technique which significantly improved EFL learners' performance on different reading tasks. On the other hand, Mazloomi and Khabiri (2016) found out the significant role of dynamic self-assessment on EFL learners' writing ability while they received appropriate training and feedback from their teachers.

The findings of the current study about the role of dynamic assessment can be explained regarding the treatment which was implemented in the form of test-mediation-retest. The participants' achievement might be related to the most practical way of improving the speaking skill which is repetition while practicing. On the other hand, in the diagnostic assessment group, in which the students' individual strengths, weaknesses, knowledge, and skills were determined prior to instruction, reaching the specified goals was much easier.

To enable language instructors to modify teaching materials and strategies to help students' improvement, the diagnostic approach is a very practical approach. In fact, this way learners are enabled to better identify specific dimensions of L2 where they have difficulties and plan for future efforts. On the other hand, the quality of mediation in dynamic assessment is very important as various forms of mediation might be found to be useful for particular individuals. Overall, students can obtain systematic, useful information from dynamic and diagnostic assessments to evaluate and guide their own language learning.

6. Conclusion

To sum up the results of the present study, there has been a significant difference in the participants' progress in speaking from pretest and posttest in both experimental groups whereas this progress has not been significant in the control group. In other words, the feedback and mediation in the diagnostic and dynamic assessment groups caused an improvement in the participants' speaking ability. However, there was not a significant difference in progress in the speaking ability of the EFL learners from pretest to posttest in the dynamic and diagnostic assessment groups.

The results of the current study would be a great help to EFL learners, teachers, materials developers, and testers. As in dynamic assessment, useful strategies were used to work on the participants' speaking ability, if students are careful enough they can learn those strategies and use them to help their own progress. Also, diagnostic assessment is a great way of reminding learners of the important role of counseling with teachers about their problems which is a good strategy to make faster progress. Teachers too can make use of these two kinds of assessment. More specifically, dynamic assessment can make teachers aware of the useful strategies the learners need to become autonomous and take them into account when teaching the points inside the class. Also, diagnostic assessment can show the new ways of having rapport with students out of which a lot of benefits can be obtained, e.g., how to talk about the areas of difficulties and how to give the best kinds of advice the learners need in a more practical and efficient way. In addition, if materials developers are aware of the role of these two kinds of assessment on the learners' progress, they can include these assessments into their course books from which teachers and students can benefit a lot. That is, they can use these two kinds of assessments as guidelines based on which activities could be designed. Knowing the degree of the effectiveness of dynamic and diagnostic assessment on the learners' improvement, testers can use these assessment types in a way that they are relevant to the students' needs and levels and make it possible for the teachers to help learners progress more by utilizing these assessment types.

Finally, further studies are needed to improve our understanding of different types of assessment and their usefulness in instruction and learning, including using the other models of dynamic assessment, e.g. the interventionist model, and checking their impact on EFL learners' language learning and attitude towards learning. Another interesting area

to explore can be comparing various assessment types and see their comparative effects on EFL learners' speaking, writing, listening, or reading ability and across different proficiency levels.

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