

**LIFESPAN PSYCHOLOGICAL and
NEUROPSYCHOLOGICAL ASSESSMENT
from an
INTERPERSONAL NEUROBIOLOGY
(IPNB) PERSPECTIVE**

The Center for Connection
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**LIFESPAN PSYCHOLOGICAL & NEUROPSYCHOLOGICAL ASSESSMENT
from an IPNB PERSPECTIVE**

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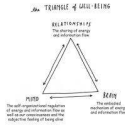
Licensed Psychologist and Mental Health Therapist

**The Interpersonal Neuropsychology
(IPNB) Approach**

- IPNB is a perspective proposed and named by Dr. Daniel J. Siegel; co-developed with Drs. Allan Schore & Louis Cozolino and other IPNB trailblazers.
- The Founder and Executive Director of the Center for Connection (CFC), Dr. Tina Payne Bryson, studied extensively with Dan Siegel and co-wrote 4 books with him, all with IPNB as a foundation. The story of how IPNB influenced Tina to form the CFC is compelling.

IPNB

- IPNB is both a theory and practical working model that focuses on the dynamic interactions of a person's brain, mind, and relationships to shape who that person is.



IPNB

- At its core, IPNB holds that we are ultimately who we are because of our relationships.
- (We are “architects” of each other’s brains).
- IPNB is heavily rooted in attachment theory; sometimes thought of as “relational neuroscience”.
- The concept of INTEGRATION: Central in IPNB & to our work
 - Differentiation: separate, distinct properties
 - Linkage: whole, working together as a coordinated team
 - Macro (e.g. organization) and micro (e.g. human body) levels

The IPNB Lens and Assessment

- Rather than simply administering a battery of tests and measures, the IPNB lens allows psychologists to view comprehensive evaluations as a **therapeutic process**.
 - Goal of this therapeutic process: create a sense of safety and advocacy
 - A framework to “peel back the layers” and look under the surface of behaviors to gain understanding of what might be going on in each person’s brain and inner world.
 - Beginning with the very 1st contact we are intentional about interpersonal warmth, attunement, care, and concern for the person/issues.
 - Collaborative: Bring professional expertise to each assessment, while also valuing the experiences/expertise clients have about themselves.
- We individualize each assessment, including adjustments to the pacing, schedule, or environment, depending on each individual’s unique needs.

The IPNB Lens and Assessment

- Interpersonal presence, attunement, and connection remain throughout the assessment process.
- Results:
 - Deepen understanding of relative strengths & areas of challenge
 - Increase knowledge of learning and behavior styles
 - Provide highly personalized feedback and targeted recommendations to better set a child or adult up for success.
- Primary goal: Empower the individual with in-depth understanding of how their neurocognitive, neurobehavioral, and neuroaffective profile may be impacting their relationships with others, themselves, and their school or work.

Assessment with adults

Neuropsychological and Psychological Evaluation

What is Neuropsychology?

- Brain - Behavior Relationship
 - Behavioral expression of brain dysfunction/Cerebral processes
- How does the brain correlate with the mind
- Neuropsych through the ages
 - Karl Lashley, Mass Action, Equipotentiality

The Purpose of a Neuropsych Evaluation

1. Integrity of Cognitive Functions
 - o Presence, nature, severity, collection of baseline data
2. Differential Diagnosis
 - o Cerebral dysfunction in the absence of anatomical evidence
 - o Thinking issues, but MRI/CT scans are “clean”
3. Treatment Planning
 - o Recommendations and profile of strengths and weaknesses as they relate to different environments (school, work, etc) and different referral questions (“are they able to return to work? Are they able to drive? ”)

What Does an Evaluation Look Like?

- Neuropsychological Measures!
 - o Memory (visual, auditory, tactile)
 - o Attention/Concentration (auditory, visual, brief, sustained)
 - o Visuosperception (graphomotor visual construction)
 - o Processing Speed (graphomotor speed, rapid identification)
 - o Executive Functions (judgment, divided attention, abstract visual and verbal reasoning)
 - o Cognitive Linguistics (confrontation naming, phonemic/semantic verbal fluency)
 - o Personality and Mood

Types of Measures

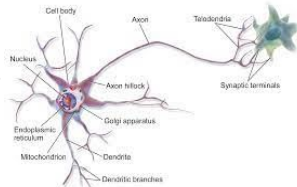
The image shows various neuropsychological test materials. On the left, there are boxes for tests like 'Trail Making Test' and 'Stroop Test'. Below these are four small grids of colored shapes: a red circle, two green stars, three blue squares, and four yellow pluses. To the right is a sample test sheet titled 'NEUROPSYCHOLOGICAL ASSESSMENT (NACA)' with sections for 'SPERMATOPHYTES', 'MAMMALS', and 'BIRDS', each containing a grid of items to be identified.

Standardization of Neuropsych Measures

- All NP measures are standardized
 - Administered to specific group(s) of people to collect normative data
 - Data is used as a comparative standard
- The issue with “Race-Norming”
 - Race is taken into account but it is not based on poor evidence.
 - Educational inequalities are not taken into consideration
- Are lower scores a result of cognitive impairment or artifacts of racism/discrimination?

IPNB & The Center For Connection

- Commitment to relational impact and neuroplasticity
 - Neurons associated with negative emotional experiences
 - Negative experiences form stronger neural connections
 - Attention Bias
 - Our experiences shape our behavior, emotion, and psychology
- A client’s background MUST be taken into account



Who Should Be Referred?

EVERYONE!

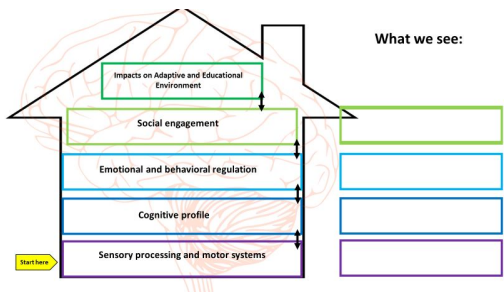
- Alzheimer’s disease
- Amyotrophic lateral sclerosis (ALS)
- Anoxic/hypoxic brain injury
- Attentional difficulties, including ADHD
- Brain tumors
- Capacity
- General confusion/Altered Mental State
- Giftedness/Twice Exceptional Adults
- Emotional Distress/Dysregulation (Depression, Anxiety, PTSD, and more)
- Encephalitis
- Epilepsy/seizure disorders
- Failure to Thrive/Launch
- Genetic disorders
- Medically complex cases (encephalopathy, metabolic disturbances, myocardial infarction, sleep apnea)
- Decline in memory/memory disorders/dementia
- Metabolic/toxic brain injury
- Mild cognitive impairment
- Movement disorders (dystonia, essential tremor, Huntington’s disease, Parkinson’s disease)
- Multiple sclerosis
- Neurodevelopmental considerations such as ASD
- Post- COVID symptoms (e.g. brain fog)
- Pre- and Post-surgical intervention (brain tumor resection, coronary artery bypass graft, deep brain stimulation)
- Stroke/cerebrovascular disease
- Systemic diseases affecting the brain or central nervous system (organ failure)
- Transplant candidates/recipients
- Traumatic brain injury/concussion

The Most Important Aspect of an Evaluation

- Recommendations/Next Steps
 - Based upon the individual's cognitive and psychological profile - Completely Unique
 - Psychotherapy - Treatment Goals - Cognitive Compensatory Strategies - Psycho Ed - Referrals
- "Warm-Handoffs" at The Center for Connection

Assessment with children and teens

An IPNB model for conceptualizing assessment



Making the recommendation towards assessment for children and teens

When to refer for assessment

- Parents/client report having a lot of concerns that are beyond the scope of what you can provide
- To decide whether to add others to the treatment team
- Minimal or lack of progress
- Poor generalization of skills; continued difficulties in other settings
- To inform treatment goals or treatment modality

What drives negative responses?



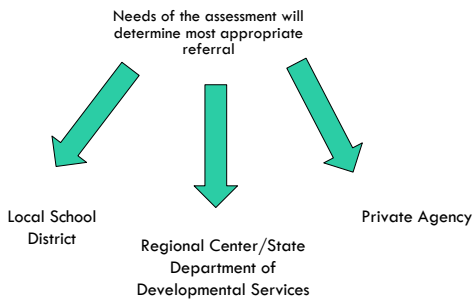
Remember that underneath the reaction is fear

- | ▫ When you reframe it from "They don't believe me," to "They're afraid of what this might mean," you are able to remain calm and co-regulate through the process

Focus on describing behaviors and observations before naming a possible diagnosis

- Once a diagnosis is mentioned, it can trigger their fight or flight response and they are longer able to hear what you are trying to share

Agencies that provide assessments for children/teens



What parents should look for in an assessment

- Incorporates information across multiple settings (assessment setting, school/childcare, home)
 - Continued collaboration with treatment team during and after assessment
- Multiple opportunities to observe the child
- Comprehensive in looking at cognitive, academic, attention and executive functioning, memory and learning, visual-motor skills, and social emotional skills

Any Questions?



Resources, References & Additional Information

- For more information about Interpersonal Neurobiology: <https://drdansiegel.com/interpersonal-neurobiology/>
- IPNB at the Center for Connection: <https://www.thecenterforconnection.org/approach>
- Assessment/Neuropsychological Services at the Center for Connection: <https://www.thecenterforconnection.org/testing>



www.thecenterforconnection.org

The Center for Connection has a team of experts from various professional fields that offer a full range of services to provide connection-based, interdisciplinary support to infants, children, adults, and couples.

Mental Health Services

- Individual and dyadic therapy
- Play therapy
- Developmental and neuropsychological assessment
- Developmental screenings and school consultations

Other Clinical Services

- Speech and Language Therapy
- Occupational Therapy
- Parenting support



Educational therapy

- School consultations
- Individualized learning support
