

# Harnessing Early-Life Plasticity Implications for Intervention in Pediatric Neuropsychology



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## Workshop Overview

This 2-hour interactive session will explore how early environmental experiences ranging from caregiver consistency to nutrition and sleep, shape neurodevelopment through the lens of *econeurobiology*. Participants will examine how to translate research on developmental plasticity into “plasticity-informed” assessment and intervention approaches for children across diverse settings.

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## Learning Objectives

At the conclusion of this workshop, participants will be able to:

- **Describe** the neurobiological mechanisms underlying early-life neural plasticity and their relationship to environmental experience.
- **Explain** how caregiving, stress, and environmental context influence pediatric neuropsychological assessment outcomes.
- **Identify** environmental and developmental variables that modify the expression of neurocognitive strengths and weaknesses in children.
- **Apply** principles of developmental plasticity to interpret assessment data and formulate context-sensitive clinical recommendations.
- **Develop** intervention strategies that leverage sensitive developmental periods to support optimal neuropsychological functioning.

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## **CE Alignment**

- . Based on peer-reviewed developmental neuroscience.
- . Integrates research and clinical practice.
- . Addresses assessment and intervention competencies.
- . Relevant to pediatric neuropsychology practice.
- . Meets APA continuing education standards.

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## **Why This Topic Matters**

- . Increasing rates of developmental and emotional concerns.
- . Earlier identification of risk in younger children.
- . Greater demand for intervention-oriented evaluations.
- . Advances in developmental neuroscience.
- . Shift from static to dynamic models of functioning.

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## **Workshop Structure**

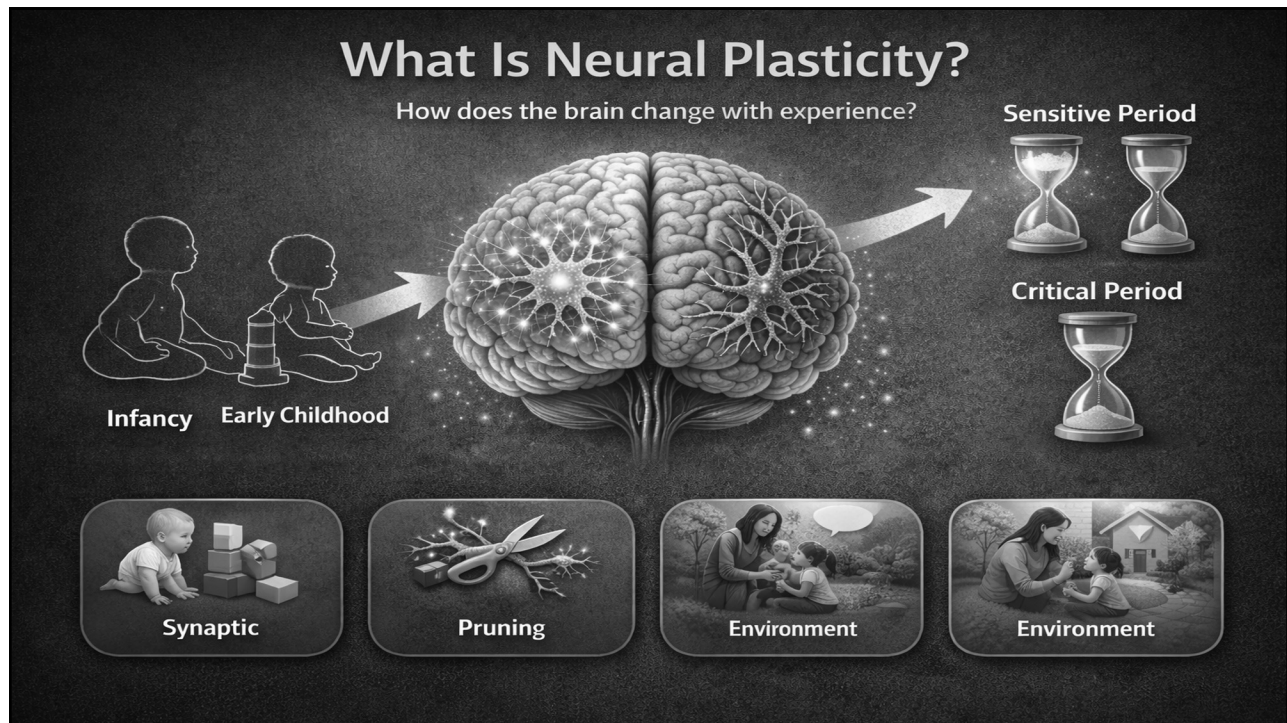
- . Foundational science of neural plasticity
- . Clinical assessment implications
- . Intervention planning and timing
- . Case-based application
- . Integration into everyday practice

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## **Framing Question**

- . Are test scores best viewed as fixed abilities?
- . How does context shape observed performance?
- . What assumptions do we bring into evaluations?
- . How often do reports emphasize growth potential?
- . What would change if plasticity guided decisions?

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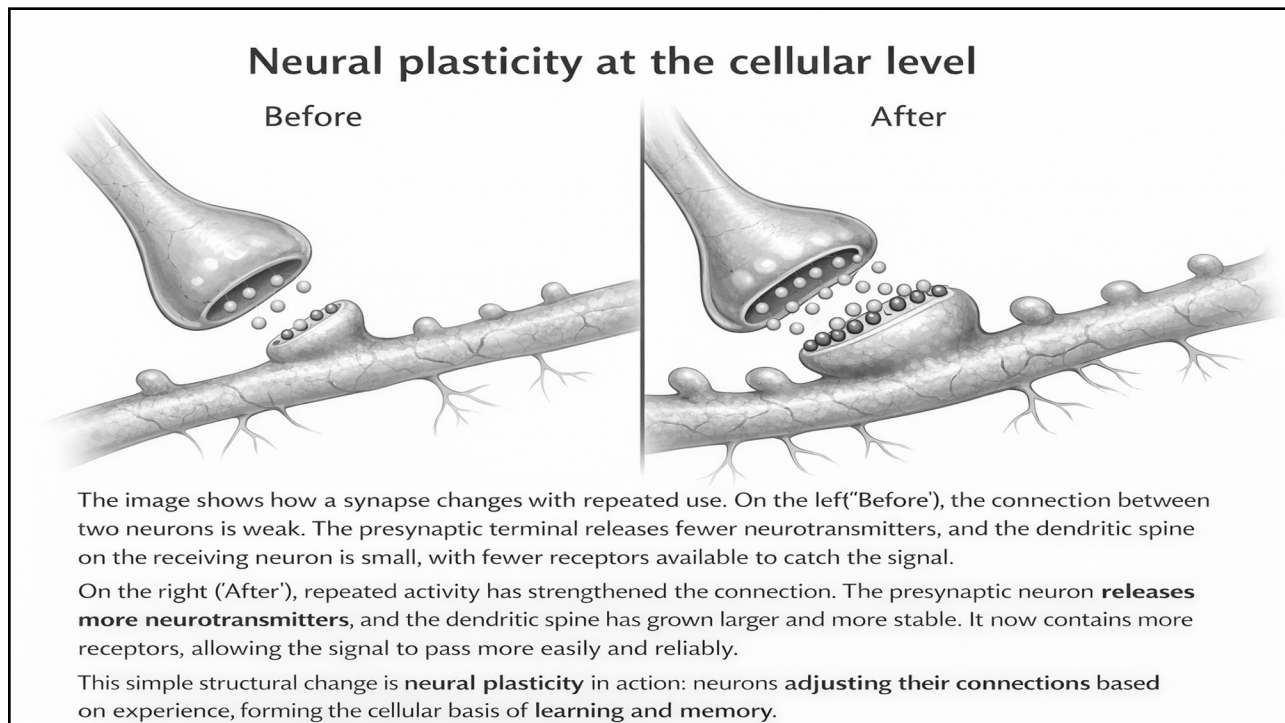


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## What Is Neural Plasticity?

- . Brain's capacity to change with experience.
- . Involves structural and functional adaptation.
- . Strongest during early development.
- . Continues across the lifespan.
- . Can be adaptive or maladaptive.

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## Developmental Timing

- . Infancy marked by rapid synapse formation.
- . Early childhood shows peak learning efficiency.
- . Adolescence includes reorganization and pruning.
- . Timing affects ease of change.
- . Missed input does not equal permanent loss.

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## **Mechanisms of Plasticity**

- . Synaptic growth in response to stimulation.
- . Pruning based on experience and use.
- . Myelination supporting efficiency and speed.
- . Network specialization over time.
- . Interaction with genetic expression.

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## **Sensitive vs. Critical Periods**

- . Sensitive periods allow heightened learning.
- . Input is more efficient but not exclusive.
- . Critical periods are rare in humans.
- . Most skills remain modifiable.
- . Clinical focus should remain flexible.

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## **Environmental Input**

- . Quality of caregiving interactions.
- . Language exposure and stimulation.
- . Physical safety and predictability.
- . Emotional climate of the home.
- . Access to learning opportunities.

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## **Stress and the Brain**

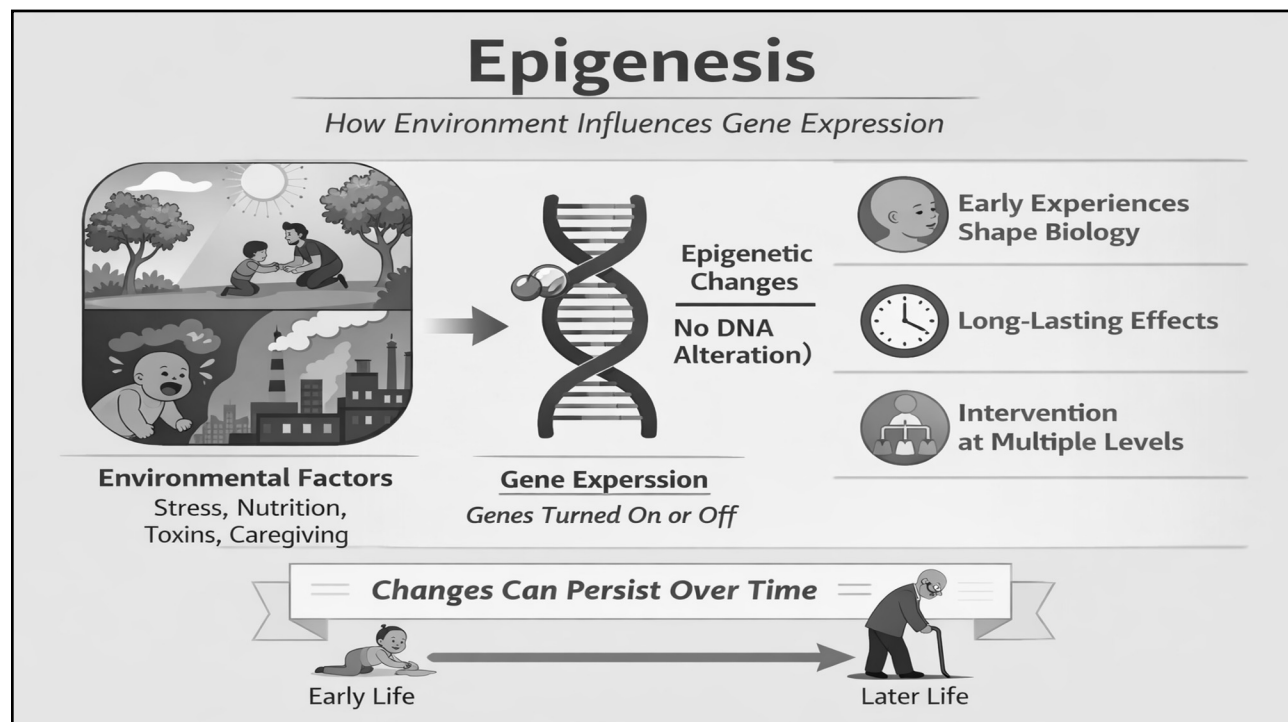
- . Acute stress can be adaptive.
- . Chronic stress alters brain development.
- . Affects attention, memory, and regulation.
- . Impacts HPA axis functioning.
- . Relationships can buffer stress effects.

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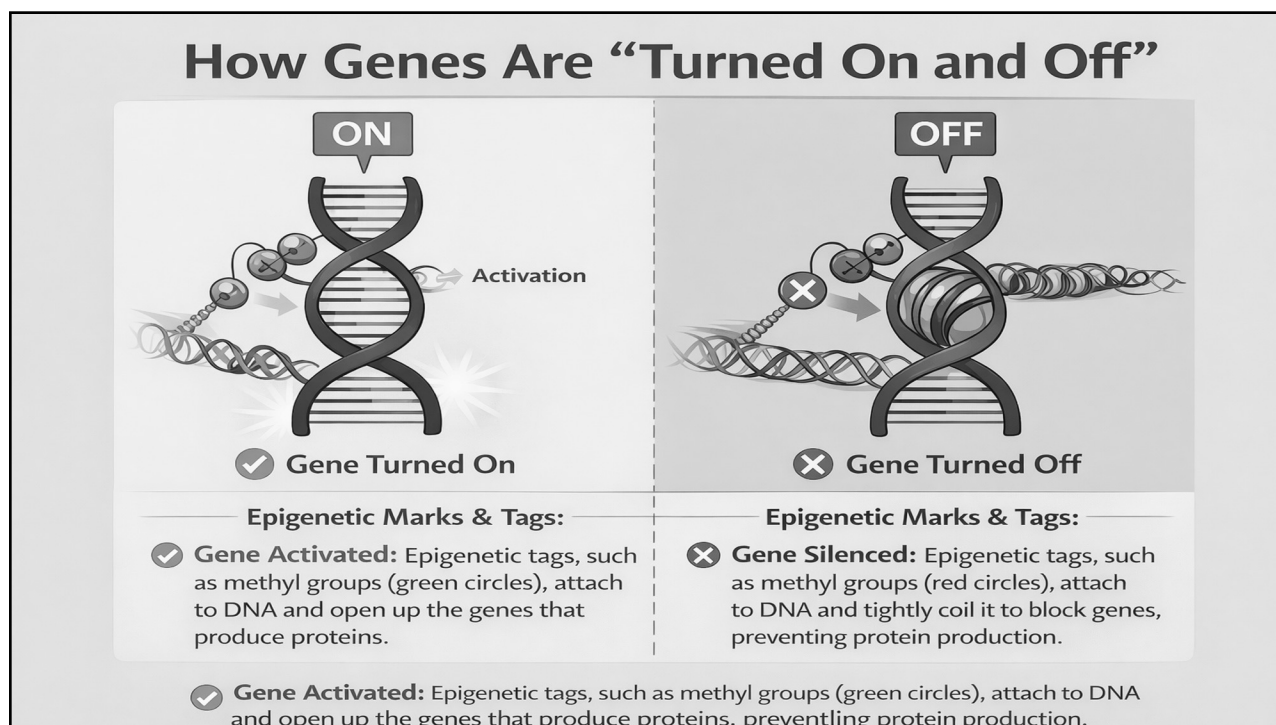
## Epigenetic Processes

- . Environment influences gene expression.
- . Changes occur without DNA alteration.
- . Early experiences are biologically embedded.
- . Effects may persist over time.
- . Supports intervention at multiple levels.

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## Enrichment Effects

- . Enhances learning and recovery.
- . Promotes synaptic connectivity.
- . Supports cognitive and emotional skills.
- . Benefits observed across development.
- . Stronger effects when sustained.

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## **Deprivation Effects**

- . Limits specialization and efficiency.
- . Narrows developmental opportunities.
- . Often context-driven rather than child-driven.
- . Effects vary by timing and duration.
- . Not inherently irreversible.

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## **Clinical Implication**

- . Brain differences often reflect adaptation.
- . Context explains variability in outcomes.
- . Deficits may signal missed opportunity.
- . Assessment must include environment.
- . Intervention should target inputs.

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## **Case Study Overview**

- . Two infants with similar medical risk.
- . Comparable birth and health histories.
- . Different caregiving environments.
- . Different stress exposures.
- . Diverging developmental trajectories.

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## **Infant A: High Adversity**

- . Inconsistent caregiving routines
- . Elevated environmental stress
- . Limited language interaction
- . Reduced responsive engagement
- . Early regulatory difficulties

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## **Infant B: Stable Context**

- . Predictable caregiving patterns.
- . Emotionally responsive interactions.
- . Language-rich environment.
- . Low chronic stress exposure.
- . Typical early regulation skills.

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## **Neural Developmental Impact**

- . Differences in stress-response systems.
- . Variations in attention networks.
- . Divergent emotional regulation pathways.
- . Adaptive responses to environment.
- . Early specialization patterns.

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## Behavioral Outcomes

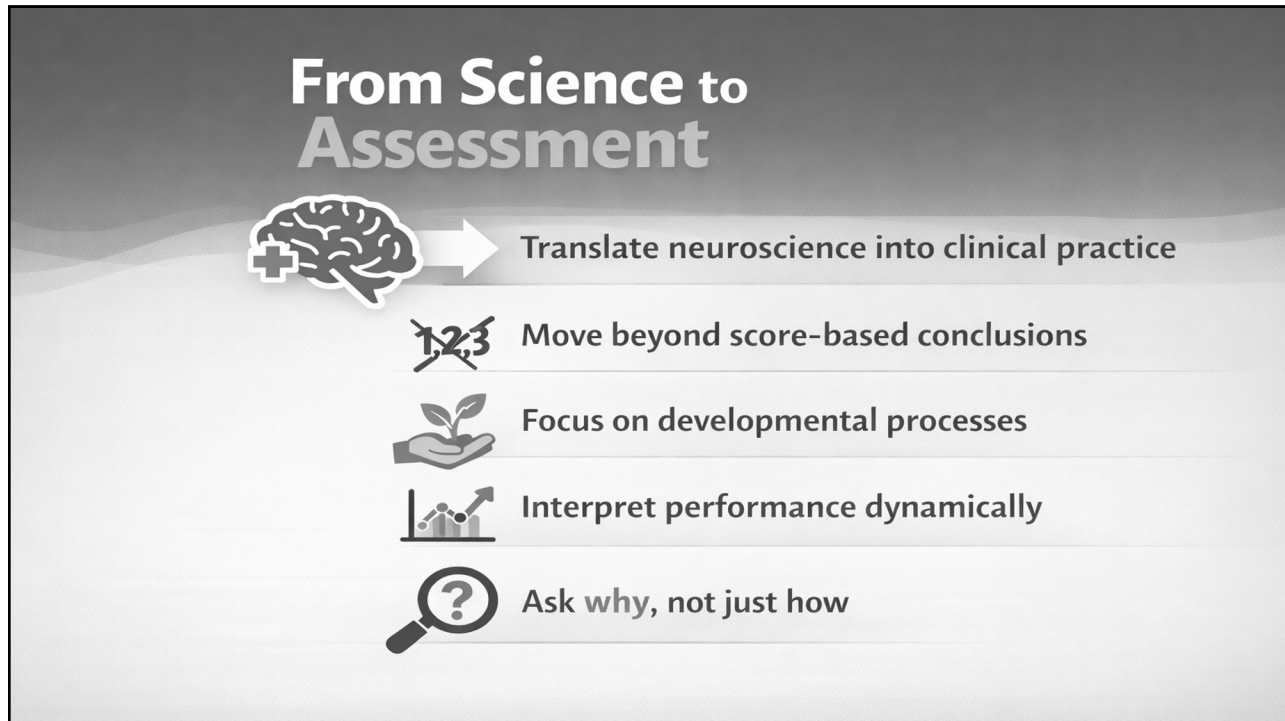
- . Attention and self-regulation differences.
- . Learning efficiency varies over time.
- . Emotional reactivity contrasts.
- . Social engagement patterns differ.
- . Context amplifies early risk.

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## Case Study Takeaways

- . Similar risk does not equal similar outcome.
- . Environment shapes developmental direction.n
- . Early behavior reflects adaptation.
- . Assessment must include context.
- . Intervention opportunities remain.

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## Limits of Traditional Testing

- . Snapshot of functioning at one moment.
- . Sensitive to fatigue and stress.
- . Often context-stripped.
- . Risk of over-pathologizing.
- . May obscure growth potential.

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## **Ecologically Valid Assessment**

- . Evaluate functioning across settings.
- . Incorporate caregiver and teacher input.
- . Examine routines and daily demands.
- . Consider cultural context.
- . Align findings with real life.

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## **Key Environmental Domains**

- . Caregiving consistency and quality.
- . Language and cognitive stimulation.
- . Sleep, nutrition, and health.
- . Socioeconomic stressors.
- . School and peer context.

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## Integrating Data Sources

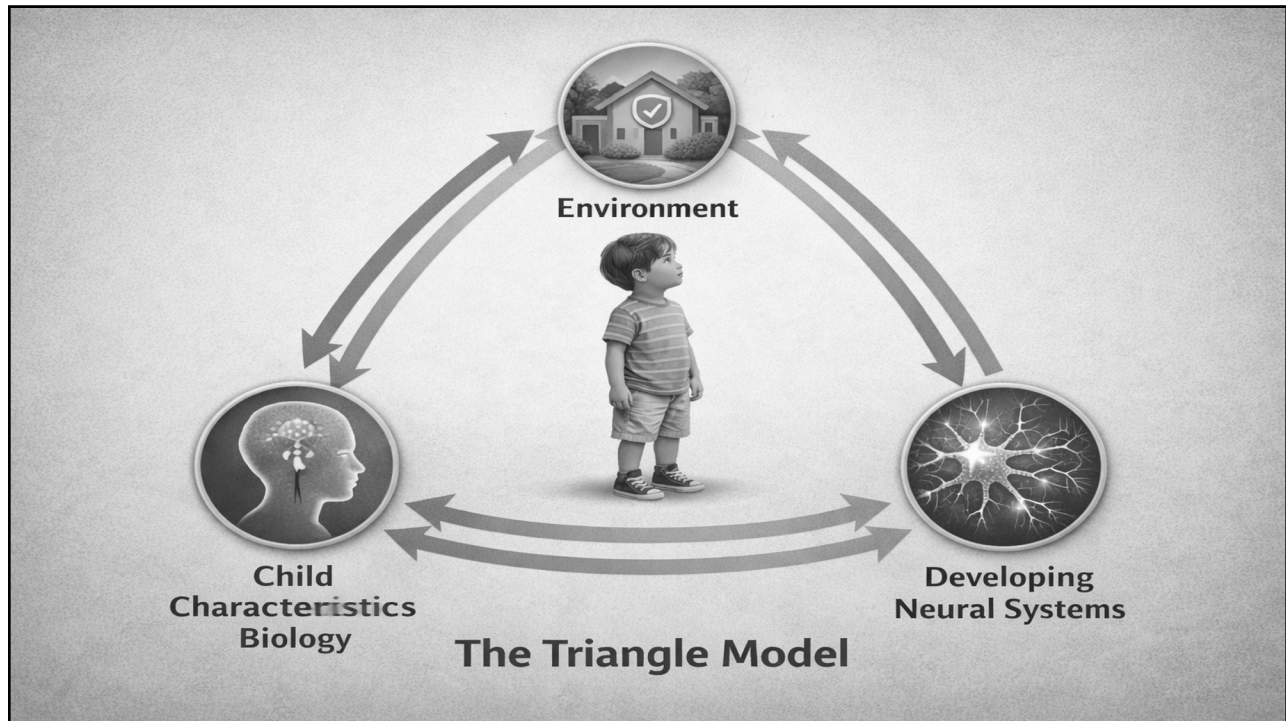
- . Test performance patterns.
- . Behavioral observations.
- . Developmental history.
- . Environmental context.
- . Functional impact.

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## Interpretation Shift

- . From deficit-based to opportunity-based.
- . Identify suppressed versus delayed skills.
- . Highlight modifiable factors.
- . Emphasize developmental timing.
- . Support intervention planning.

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## The Triangle Model

- . Child characteristics and biology.
- . Environmental inputs and demands.
- . Developing neural systems.
- . Continuous interaction.
- . Dynamic balance over time.

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## Mapping the Triangle

- . Identify dominant influencing factor
- . Assess interaction effects
- . Avoid single-cause explanations
- . Clarify intervention targets
- . Improve clinical precision

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## Assessment Language

- . Use conditional rather than fixed terms.
- . Emphasize responsiveness to support.
- . Avoid deterministic phrasing.
- . Normalize variability.
- . Communicate hope realistically.

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## **Assessment Takeaways**

- . Context enhances validity.
- . Plasticity reframes interpretation.
- . Reports guide intervention.
- . Families gain clarity.
- . Systems gain direction.

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## **Case Study: School-Age Child**

- . Seven-year-old referred for learning concerns.
- . History of inconsistent caregiving.
- . Academic underachievement.
- . Emotional and behavioral variability.
- . Multiple contextual stressors.

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## **Test Profile**

- . Average reasoning skills.
- . Weak working memory.
- . Variable attention performance.
- . Inconsistent processing speed.
- . High intra-test variability.

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## **Environmental Context**

- . Housing instability.
- . Multiple caregivers.
- . Inconsistent routines.
- . School transitions.
- . Elevated family stress.

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## **Integrative Interpretation**

- . Performance reflects context sensitivity.
- . Skills emerge under structured support.
- . Variability tied to regulation demands.
- . Not global cognitive impairment.
- . Strong intervention potential.

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## **Missed Without Context**

- . Risk of ADHD misclassification.
- . Underestimation of learning capacity.
- . Overemphasis on test weaknesses.
- . Inaccurate prognostic statements.
- . Misaligned recommendations.

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## Case Takeaways

- . Context clarifies test meaning.
- . Plasticity supports optimism.
- . Environment shapes expression.
- . Assessment informs intervention.
- . Timing still matters.

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## Why Timing Matters

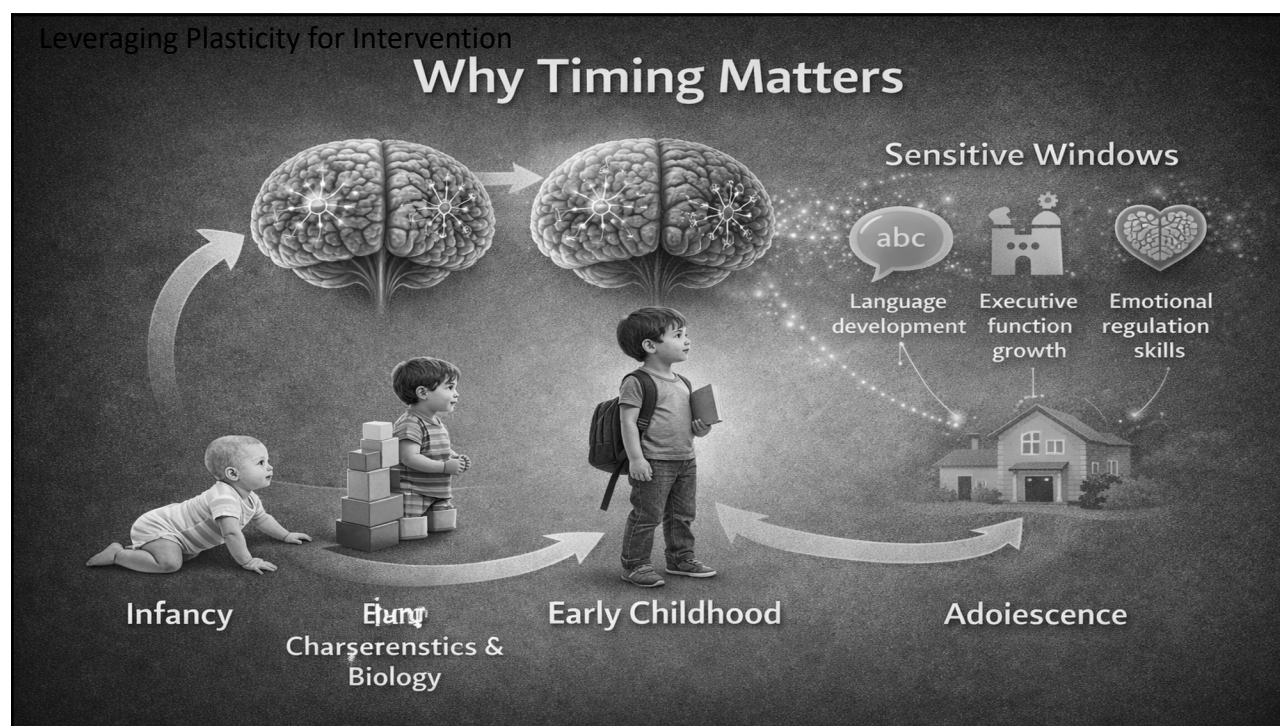
- . Brain systems differ in readiness.
- . Earlier change often easier.
- . Later change still possible.
- . Intervention efficiency varies.
- . Match timing to target.

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## Sensitive Windows

- . Language development.
- . Executive function growth.
- . Emotional regulation skills.
- . Social cognition.
- . Academic foundations.

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## Intervention Philosophy

- . Change inputs, not just behavior.
- . Support systems around the child.
- . Reduce unnecessary stress.
- . Increase meaningful stimulation.
- . Build consistency.

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## Ecological Interventions

- . Caregiver coaching.
- . Classroom structure.
- . Environmental predictability.
- . Skill scaffolding.
- . Stress reduction strategies.

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## Family-Based Supports

- . Strengthen caregiver responsiveness.
- . Establish routines.
- . Increase positive interactions.
- . Reduce chaos.
- . Empower caregivers.

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## School-Based Supports

- . Clear expectations.
- . Structured transitions.
- . Executive function scaffolds.
- . Emotional regulation supports.
- . Teacher collaboration.

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## **Language Intervention Example**

- . Increase conversational turns.
- . Embed language in routines.
- . Model complex language.
- . Encourage reciprocal interaction.
- . Monitor progress over time.

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## **Executive Function Example**

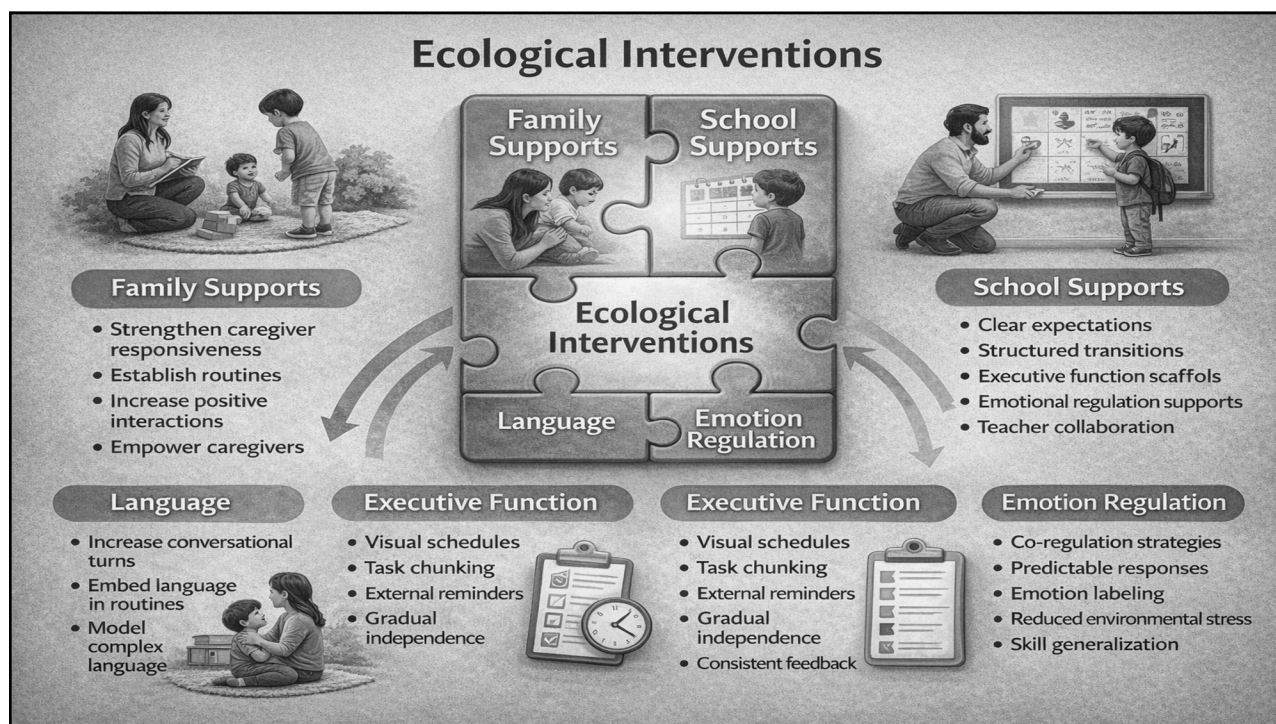
- . Visual schedules.
- . Task chunking.
- . External reminders.
- . Gradual independence.
- . Consistent feedback.

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## Emotion Regulation Example

- . Co-regulation strategies
- . Predictable responses
- . Emotion labeling
- . Reduced environmental stress
- . Skill generalization

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## **Case Intervention Plan**

- . Target regulation first.
- . Stabilize routines.
- . Layer cognitive demands.
- . Monitor responsiveness.
- . Adjust timing as needed.

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## **Barriers to Change**

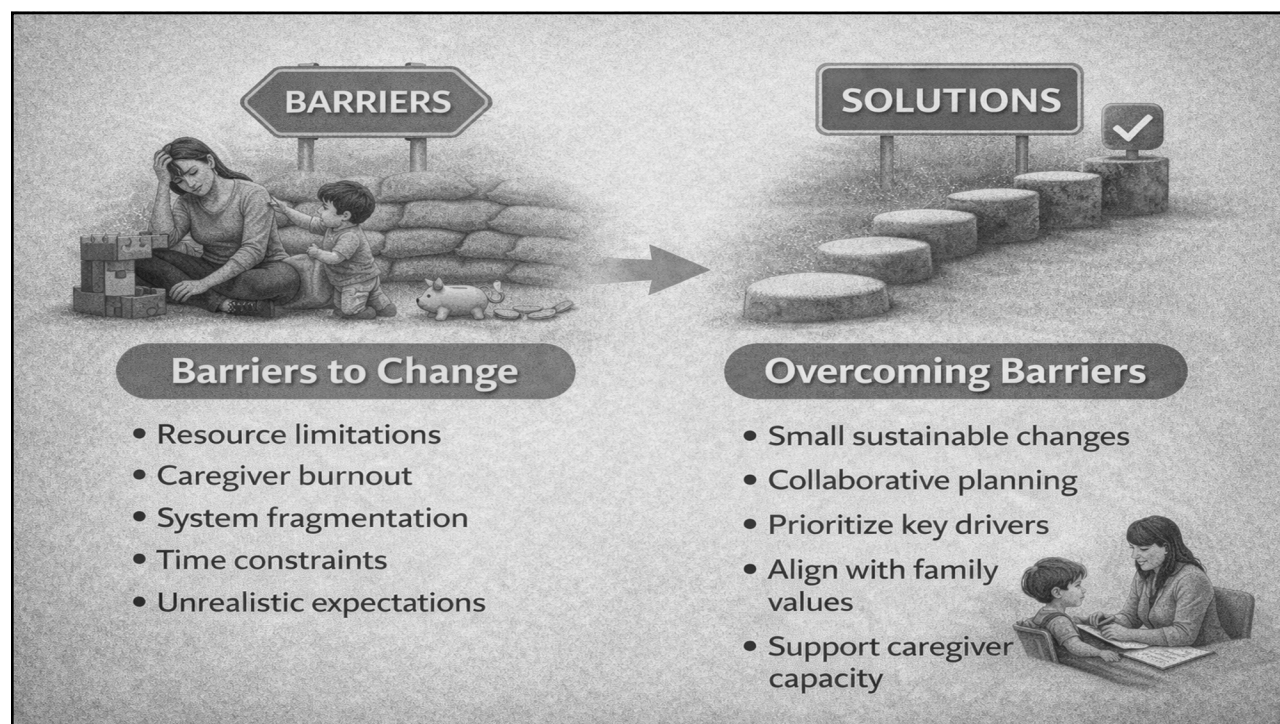
- . Resource limitations.
- . Caregiver burnout
- . System fragmentation.
- . Time constraints.
- . Unrealistic expectations.

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## Overcoming Barriers

- . Small sustainable changes.
- . Collaborative planning.
- . Prioritize key drivers.
- . Align with family values.
- . Support caregiver capacity.

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## **Measuring Progress**

- . Functional change over scores.
- . Improved regulation.
- . Increased engagement.
- . Greater consistency.
- . Enhanced participation.

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## **Intervention Takeaways**

- . Plasticity is leveraged systemically.
- . Timing improves efficiency.
- . Context sustains change.
- . Progress is nonlinear.
- . Hope remains grounded.

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## Integrating Into Practice



- Shift assessment mindset



- Ask contextual questions



- Interpret dynamically



- Recommend ecologically



- Follow developmental timing

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## Integrating Into Practice

- . Shift assessment mindset.
- . Ask contextual questions.
- . Interpret dynamically.
- . Recommend ecologically.
- . Follow developmental timing.

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## Report Writing

- . Highlight strengths and opportunity.
- . Frame weaknesses as modifiable.
- . Tie findings to context.
- . Clarify intervention rationale.
- . Support collaborative action.

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## Communicating With Families

- . Explain brain plasticity clearly.
- . Normalize developmental variability.
- . Emphasize role of environment.
- . Encourage realistic optimism.
- . Build partnership.

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## Advocacy Role

- . Translate science into practice.
- . Inform schools and systems.
- . Push against deterministic models.
- . Promote early support.
- . Center child development.

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## Key Takeaways



Early environments shape trajectories



Plasticity informs interpretation



Context enhances assessment



Timing optimizes intervention



• Neuropsychologists guide change

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## Reflection Prompt

- One assumption I will question
- One assessment habit I will change
- One way to emphasize plasticity
- One system I will educate
- One child who may benefit

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## Extreme Brains Podcast

EXTREME BRAINS is a lively, thought-provoking podcast in which Sam, David, and James—three friends with sharp wit and unique perspectives—gather around a microphone to critique current events, explore life's challenges, and unpack the absurdity of modern times. Whether dissecting the day's headlines, debating life's perplexing questions, or finding humor in the chaos, this podcast offers listeners an engaging mix of critical insight, camaraderie, and laughs.

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# Questions



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