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Self-Report Form Interpretive Report

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Client name : Sample Client
Client ID : 111
Gender : Male
Age : 16
Grade : 10th
Test date : 12/28/2015

This report is intended for use by qualified professionals only and is not to be shared with the examinee or any other unqualified persons.

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Validity

Before examining the Behavior Rating Inventory of Executive Function[®], Second Edition (BRIEF[®]2) Self-Report profile, it is essential to carefully consider the validity of the data provided. The inherent nature of rating scales carries potential biases to the ratings and scores. The first step is to examine the protocol for missing data. With a valid number of responses, the BRIEF2 Self-Report Inconsistency, Negativity, and Infrequency scales provide additional information about the validity of the protocol.

Missing items

Sample completed 55 of a possible 55 BRIEF2 Self-Report items. For reference purposes, the summary table for each scale indicates Sample's actual rating for each item. There are no missing responses in the protocol, providing a complete data set for interpretation.

Inconsistency

Scores on the Inconsistency scale indicate the extent to which Sample answered similar BRIEF2 Self-Report items in an inconsistent manner relative to the clinical samples. For example, a high Inconsistency score might be associated with the combination of marking Never in response to the item "I have angry outbursts" and Often in response to the item "I have outbursts for little reason." Item pairs comprising the Inconsistency scale are shown in the following summary table. *T* scores are not generated for the Inconsistency scale. Instead, the absolute value of the raw difference scores for the 8 paired items are summed, and the total difference score (i.e., the Inconsistency score) is compared with the cumulative percentile of similar scores in the combined clinical sample and used to classify the protocol as either Acceptable, Questionable, or Inconsistent. The Inconsistency score of 1 is within the Acceptable range, suggesting that Sample was reasonably consistent in his responses.

Item #	Inconsistency items	Response	
1	I have trouble sitting still	Sometimes	0
12	<i>Remaining content redacted for sample report purposes</i>	Sometimes	
6		Never	0
14		Never	
22		Sometimes	0
27		Sometimes	
23		Sometimes	0
52		Sometimes	
28		Sometimes	1
41		Never	
33		Sometimes	0
42		Sometimes	
44		Sometimes	0
55		Sometimes	
45		Never	0
53		Never	

Negativity

The Negativity scale measures the extent to which the respondent answered selected BRIEF2 Self-Report items in an unusually negative manner relative to the clinical sample. Items comprising the Negativity scale are shown in the following summary table. A higher raw score on this scale indicates a greater degree of negativity, with less than 1% of respondents scoring 5 or greater in the clinical sample. As with the Inconsistency scale, *T* scores are not generated for this scale. The Negativity score of 0 is within the acceptable range, suggesting that Sample's view of himself is not overly negative and that the BRIEF2 Self-Report protocol is likely to be valid.

Item #	Negativity items	Response
16	I get out of control more than my friends	Sometimes
19	<i>Remaining content redacted for sample report purposes</i>	Sometimes
20		Sometimes

Item #	Negativity items	Response
24		Sometimes
30		Sometimes
43		Sometimes
50		Sometimes
51		Sometimes

Infrequency

The Infrequency scale measures the extent to which the respondent endorsed items in an atypical fashion. The scale includes three items that are likely to be endorsed in one direction by most respondents. Marking Sometimes or Often to any of the items is highly unusual, even for adolescents with severe cognitive impairment.

Items comprising the Infrequency scale are shown in the following summary table. A higher raw score on this scale indicates a greater degree of infrequency, with less than 1% of respondents scoring 1 or greater in the standardization sample. As with the Inconsistency and Negativity scales, *T* scores are not generated for this scale. The Infrequency score of 0 is within the acceptable range, reducing the likelihood of an atypical response pattern.

Item #	Infrequency items	Response
18	I forget my name	Never
36	<i>Remaining content redacted for sample report purposes</i>	Never
54		Never

End of Validity Section

Introduction

The BRIEF[®]2 Self-Report Form is a 55-item standardized self-report measure developed to capture older children's and adolescents' (aged 11 to 18 years with a fifth-grade or better reading level) views of their own executive functions, or self-regulation, in their everyday environment. The BRIEF2 Self-Report Form was intended to complement parent and teacher ratings of the adolescent's executive function on the BRIEF2 Parent and Teacher forms to meet the need for capturing adolescent's views of their self-regulatory strengths and weaknesses. In addition to a more comprehensive assessment, an understanding of the adolescent's perspective with respect to difficulties in self-control is critical when considering intervention strategies. Explicitly assessing, valuing, and providing feedback about his viewpoint can facilitate rapport and a collaborative working relationship, which in turn can serve as a starting point for interventions. Indeed, the adolescent's level of self-understanding and awareness becomes an important factor in gauging the amount of support he will require. For those who possess a high awareness of their executive and regulatory difficulties and who are eager to ameliorate their struggles, the intervention process can be facilitated. For those who lack awareness or acceptance, a much higher degree of external support may be required. While response patterns on self-report behavior rating scales such as the BRIEF2 Self-Report Form can range from strong agreement with other informants to aggressive denial of any problems, rich clinical information can be gleaned from directly assessing their opinions.

As is the case for all measures, the BRIEF2 Self-Report Form should not be used in isolation as a diagnostic tool. Instead, it should be used in conjunction with other sources of information, including detailed history, BRIEF2 parent and teacher ratings, clinical interviews, performance test results, and, when possible, direct observation in the natural setting. By examining converging evidence, the clinician can confidently arrive at a valid diagnosis and, most importantly, an effective treatment plan. A thorough understanding of the BRIEF2 Self-Report Form, including its development and its psychometric properties, is a prerequisite to interpretation. As with any clinical method or procedure, appropriate training and clinical supervision is necessary to ensure competent use of the BRIEF2 Self-Report Form.

This report is confidential and is intended for use by qualified professionals only. This report should not be released to the parents or teachers of the adolescent being evaluated or directly to the adolescent. If a summary of the results specifically written for the responding adolescent is desired and clinically appropriate, the BRIEF2 Self-Report Form Adolescent Feedback Report can be generated and given to the

adolescent, preferably in the context of verbal feedback and a review of the Adolescent Feedback Report with the clinician.

T scores are used to interpret the adolescent's self-reported profile of executive functioning on the BRIEF2 Self-Report Form. These scores are linear transformations of the raw scale scores ($M = 50$, $SD = 10$). *T* scores provide information about an individual's scores relative to the scores of respondents in the standardization sample. Percentiles, which are also presented in this report, represent the percentage of children in the standardization sample with scores at or below the same value. For all BRIEF2 clinical scales and indexes, *T* scores from 60 to 64 are considered mildly elevated, and *T* scores from 65 to 69 are considered potentially clinically elevated. *T* scores at or above 70 are considered clinically elevated.

In the process of interpreting the BRIEF2 Self-Report Form, review of individual items within each scale can yield useful information for understanding the specific nature of the adolescent's elevated score on any given clinical scale. Placing too much interpretive significance on individual items is not recommended, however, due to lower reliability of individual items relative to the scales and indexes.

Overview

Sample completed the Self-Report Form of the Behavior Rating Inventory of Executive Function, Second Edition (BRIEF2) on 12/28/2015. There are no missing item responses in the protocol. Responses are reasonably consistent. The respondent's ratings of his own self-regulation do not appear overly negative. There were no atypical responses to infrequently endorsed items. In the context of these validity considerations, Sample's ratings of his everyday executive function suggest some areas of concern. The overall index, the GEC, was mildly elevated (GEC $T = 62$, %ile = 84).

The CRI is potentially clinically elevated ($T = 66$, %ile = 93), but the BRI ($T = 54$, %ile = 73) and ERI ($T = 57$, %ile = 78) are within the average range.

Within these summary indicators, all of the individual scales are valid. One or more of the individual BRIEF2 Self-Report scales were at least mildly elevated, suggesting that Sample reports difficulty with some aspects of executive function. Concerns are noted on the following behaviors: get going on tasks, activities, and problem-solving approaches, sustain working memory and plan and organize his approach to problem solving appropriately. Sample describes his abilities on the following behaviors as not problematic: resist impulses, be aware of his functioning in social settings, adjust well to changes in environment, people, plans, or demands and react to events appropriately.

BRIEF®2 Self-Report Score Summary Table

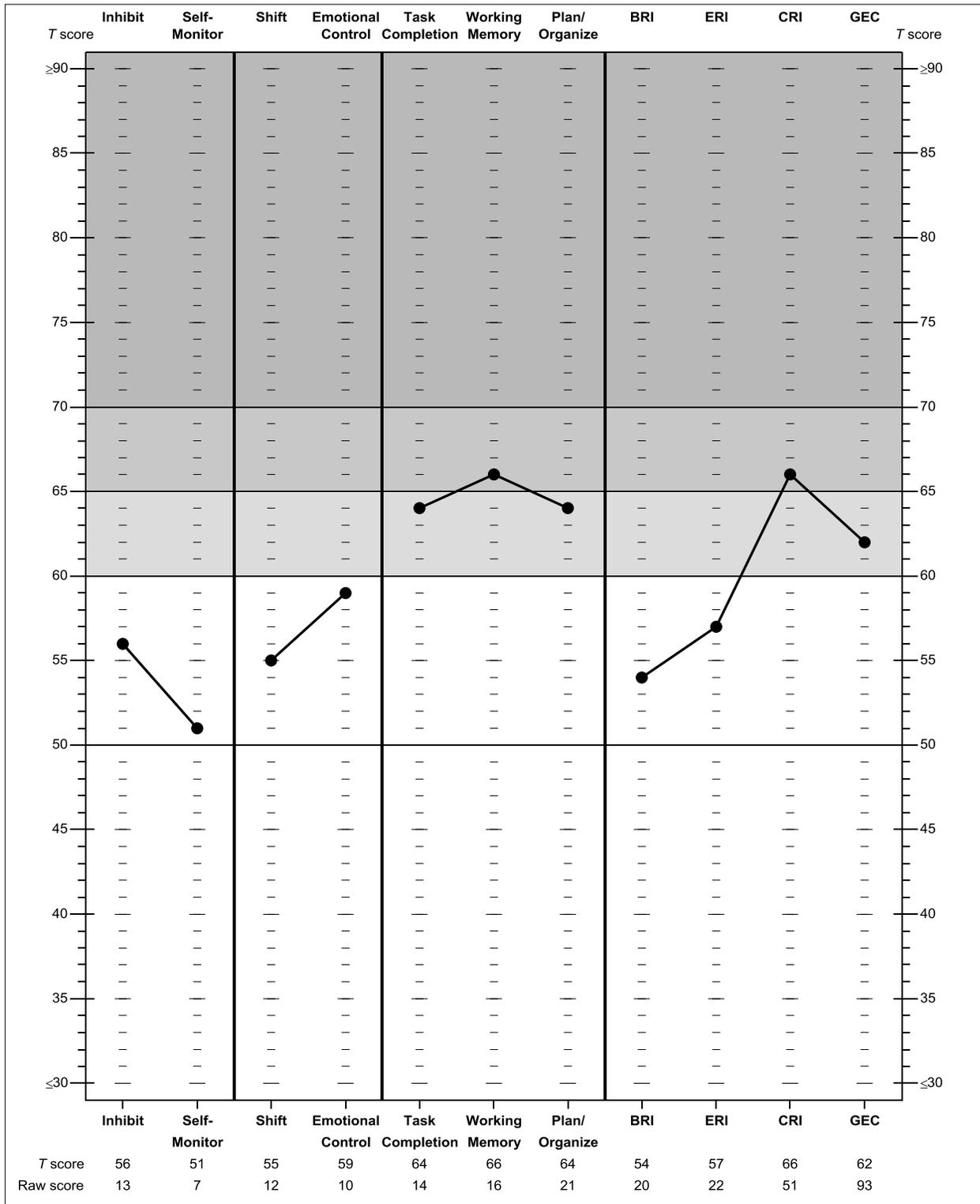
Index/Scale	Raw score	T score	Percentile	90% C.I.
Inhibit	13	56	77	50-62
Self-Monitor	7	51	71	44-58
Behavior Regulation Index (BRI)	20	54	73	49-59
Shift	12	55	73	49-61
Emotional Control	10	59	85	52-66
Emotion Regulation Index (ERI)	22	57	78	52-62
Task-Completion	14	64	91	58-70
Working Memory	16	66	94	60-72
Plan/Organize	21	64	92	59-69
Cognitive Regulation Index (CRI)	51	66	93	63-69
Global Executive Composite (GEC)	93	62	84	59-65

Validity scale	Raw score	Percentile	Protocol classification
Negativity	0	≤ 98	Acceptable
Inconsistency	1	≤ 98	Acceptable
Infrequency	0	99	Acceptable

Note: Male, age-specific norms have been used to generate this profile.

For additional normative information, refer to Appendix C in the BRIEF®2 Professional Manual.

Profile of BRIEF®2 Self-Report T Scores



Note: Male, age-specific norms have been used to generate this profile.
 For additional normative information, refer to Appendix C in the BRIEF®2 Professional Manual.

Clinical Scales

The BRIEF2 Self-Report clinical scales measure the extent to which Sample reports problems with different behaviors related to the seven domains of executive functioning captured within the BRIEF2 Self-Report Form. The following sections describe the scores obtained on the clinical scales and the suggested interpretation for each individual clinical scale.

Inhibit

The Inhibit scale assesses inhibitory control and impulsivity. This can be described as the ability to resist impulses and the ability to stop one's behavior at the appropriate time. Sample's *T* score of 56 (%ile = 77) on this scale is within the expected range compared with his peers. This suggests that he views himself as typically able to resist impulses, to consider consequences before acting, and generally to be in control of himself.

Item #	Inhibit items	Response
1	I have trouble sitting still	Sometimes
10	<i>Remaining content redacted for sample report purposes</i>	Never
16		Sometimes
24		Sometimes
30		Sometimes
39		Sometimes
48		Never
49		Never

Self-Monitor

The Self-Monitor scale assesses awareness of the impact of one's behavior on other people and outcomes. It captures the degree to which a child or adolescent perceives himself as aware of the effect that his behavior has on others and how his behavior compares with standards or expectations for behavior. Sample's score on the Self-Monitor scale is within normal limits, suggesting that he perceives himself as appropriately aware of his functioning in social settings (*T* = 51, %ile = 71).

Item #	Self-Monitor items	Response
4	I am not aware of how my behavior affects or bothers others	Never
13	<i>Remaining content redacted for sample report purposes</i>	Never
20		Sometimes

Item #	Self-Monitor items	Response
26		Never
50		Sometimes

Shift

The Shift scale assesses the ability to move freely from one situation, activity, or aspect of a problem to another as the circumstances demand. Key aspects of shifting include the ability to make transitions, tolerate change, problem solve flexibly, switch or alternate attention between tasks, and change focus from one mindset or topic to another. Mild deficits may compromise efficiency of problem solving and result in a tendency to get stuck or focused on a topic or problem, whereas more severe difficulties can be reflected in perseverative behaviors and marked resistance to change. Sample's score on the Shift scale is within the average range as compared with peers ($T = 55$, %ile = 73). This suggests that he views himself as able to adjust to changes in environment, people, plans, or demands well.

Item #	Shift items	Response
2	I have trouble accepting a different way to solve a problem with things such as schoolwork, friends, or tasks	Sometimes
11	<i>Remaining content redacted for sample report purposes</i>	Sometimes
17		Never
31		Sometimes
40		Never
45		Never
51		Sometimes
53		Never

Emotional Control

The Emotional Control scale measures the impact of executive function problems on emotional expression and assesses an individual's ability to modulate or control his or her emotional responses. Sample's score on the Emotional Control scale falls within the average range compared with peers ($T = 59$, %ile = 85). This suggests that Sample experiences himself as having appropriate ability to modulate or regulate emotions overall. Sample generally described himself as reacting to events appropriately: without outbursts, sudden or frequent mood changes, or excessive periods of emotional upset.

Item #	Emotional Control items	Response
6	I have angry outbursts	Never
14	<i>Remaining content redacted for sample report purposes</i>	Never
22		Sometimes
27		Sometimes
34		Sometimes
43		Sometimes

Task Completion

The Task Completion scale reflects the ability to finish or complete tasks appropriately and/or in a timely manner, emphasizing difficulties with the production of work or performance output. Although "task completion" is not commonly considered an executive function, it represents the outcome of other executive difficulties including working memory, planning, organization, and inhibitory control. Sample's score on the Task Completion scale is mildly elevated compared with peers ($T = 64$, %ile = 91). This suggests that Sample may have difficulties finishing homework or other projects in a timely fashion. Examination of other scales may reveal potential sources of difficulty completing tasks, including struggles with working memory, planning, and organization or with the ability to inhibit task-irrelevant actions.

Item #	Task Completion items	Response
23	I have good ideas but do not get the job done (I lack	Sometimes

Item #	Task Completion items	Response
	follow-through)	
25	<i>Remaining content redacted for sample report purposes</i>	Sometimes
33		Sometimes
38		Sometimes
42		Sometimes
44		Sometimes
55		Sometimes

Working Memory

The Working Memory scale measures the capacity to hold information in mind for the purpose of completing a task, encoding information, or generating goals, plans, and sequential steps to achieving goals. Working memory is essential to carrying out multistep activities, completing mental manipulations such as mental arithmetic, and following complex instructions. Sample's score on the Working Memory scale is potentially clinically elevated compared with peers ($T = 66$, %ile = 94). This suggests that Sample experiences substantial difficulty holding an appropriate amount of information in mind or in active memory for further processing, encoding, and/or mental manipulation. Further, Sample's score suggests difficulties sustaining working memory, which has a negative impact on his ability to remain attentive and focused for appropriate lengths of time. Caregivers or teachers often describe children or adolescents with fragile or limited working memory as having trouble remembering things (e.g., phone numbers or instructions) even for a few seconds, losing track of what they are doing as they work, or forgetting what they are supposed to retrieve when sent on an errand. Such individuals may miss information that exceeds their working memory capacity such as instructions for an assignment. Clinical evaluators may observe that Sample cannot remember the rules governing a specific task (even as they work on that task), rehearses information repeatedly, loses track of what responses he has already given on a task that requires multiple answers, and struggles with mental manipulation tasks (e.g., repeating digits in reverse order) or solving arithmetic problems that are orally presented without writing down figures.

Appropriate working memory is necessary to sustaining performance and attention. Parents of children and adolescents with difficulties in this domain often report that they cannot stick to an activity for an age-appropriate amount of time and frequently switch or fail to complete tasks. Although working memory and the ability to sustain it have been conceptualized as distinct entities, behavioral outcomes of these two domains are often difficult to distinguish.

Item #	Working Memory items	Response
3	When I am given three things to do, I remember only the first or last	Often
12	<i>Remaining content redacted for sample report purposes</i>	Sometimes
19		Sometimes
28		Sometimes
29		Often
32		Sometimes
41		Never
46		Never

Plan/Organize

The Plan/Organize scale measures perceived ability to manage current and future-oriented task demands. The scale has two components: Plan and Organize. The Plan component captures the ability to anticipate future events, to set goals, and to develop appropriate sequential steps ahead of time to carry out a task or activity. The Organize component refers to the ability to bring order to information and to appreciate main ideas or key concepts when learning or communicating information. Sample's score on the Plan/Organize scale is mildly elevated as compared with peers ($T = 64$, %ile = 92). This suggests that Sample may have some difficulty with planning and organizing information, which has a negative impact on his approach to problem solving.

Planning involves developing a goal or end state and then strategically determining the most effective method or steps to attain that goal. Evaluators can observe planning when a student is given a problem requiring multiple steps (e.g., assembling a puzzle or completing a maze). Sample may underestimate the time required to complete tasks or the level of difficulty inherent in a task. He may often wait until the last minute to begin a long-term project or assignment for school, and he may have trouble carrying out the actions needed to reach his goals.

Organization involves the ability to bring order to oral and written expression and to understand the main points expressed in presentations or written material. Organization also has a clerical component that is demonstrated, for example, in the ability to efficiently scan a visual array or to keep track of a homework assignment. Sample may approach tasks in a haphazard fashion, getting caught up in the details and missing the big picture. He may have good ideas that he fails to express on tests and written assignments. He may often feel overwhelmed by large amounts of information and may have difficulty retrieving material spontaneously or in response to open-ended questions. He may, however, exhibit better performance with recognition (multiple-choice) questions.

Item #	Plan/Organize items	Response
5	My work is sloppy	Sometimes

Item #	Plan/Organize items	Response
7	<i>Remaining content redacted for sample report purposes</i>	Sometimes
8		Often
9		Often
15		Sometimes
21		Sometimes
35		Sometimes
37		Never
47		Sometimes
52		Sometimes

Summary Indexes and Global Executive Composite

Behavior Regulation, Emotion Regulation, and Cognitive Regulation Indexes

The Behavior Regulation Index (BRI) captures the adolescent's ability to regulate and monitor behavior effectively. It is composed of the Inhibit and Self-Monitor scales. Appropriate behavior regulation is likely to be a precursor to appropriate cognitive regulation. It enables the cognitive regulatory processes to successfully guide active, systematic problem solving and more generally supports appropriate self-regulation.

The Emotion Regulation Index (ERI) represents an adolescent's ability to regulate emotional responses and to shift set or adjust to changes in environment, people, plans, or demands. It is composed of the Shift and Emotional Control scales. Appropriate emotion regulation and flexibility are precursors to effective cognitive regulation.

The Cognitive Regulation Index (CRI) reflects an adolescent's ability to control and manage cognitive processes and to problem solve effectively. It is composed of the Task Completion, Working Memory, and Plan/Organize scales and relates directly to the ability to actively problem solve in a variety of contexts and to complete tasks such as schoolwork.

Examination of the indexes reveals that the CRI is potentially clinically elevated ($T = 66$, %ile = 93), but the BRI ($T = 54$, %ile = 73) and ERI ($T = 57$, %ile = 78) are within the average range. This suggests broadly intact inhibitory control, emotional modulation, ability to shift set, and ability to self-monitor behavior but also indicates difficulties with one or more aspects of working memory, planning, organizing, or completing work.

Global Executive Composite

The Global Executive Composite (GEC) is an overarching summary score that incorporates all of the BRIEF2 Self-Report clinical scales. Although review of the BRI, ERI, CRI, and individual scale scores is strongly recommended for all BRIEF2 Self-Report Form profiles, the GEC can sometimes be useful as a summary measure. In this case, at least two summary indexes are substantially different, with *T* scores separated by 12 points or greater. Differences of this magnitude occurred less than 10% of the time in the normative sample. Thus, the GEC may not adequately reflect the overall profile. With this in mind, Sample's *T* score of 62 (%ile = 84) on the GEC is mildly elevated compared with the scores of his peers, suggesting some difficulty in one or more areas of executive function.

Executive Function Interventions

Ratings of Sample's everyday functioning revealed some areas of concern. Recommendations for interventions and accommodations are offered according to the identified concerns. While the efficacy of each intervention has not been empirically demonstrated, the majority are common interventions that are likely familiar to the intervention team. These recommendations are general and are intended here as suggestions or ideas that may be tailored to suit Sample's needs. As with any intervention, clinical judgment is paramount.

Remaining content redacted for sample report purposes

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BRIEF[®]2 Self-Report Item Response Table

Item	Response	Item	Response	Item	Response	Item	Response
1	Sometimes	15	Sometimes	29	Often	43	Sometimes
2	Sometimes	16	Sometimes	30	Sometimes	44	Sometimes
3	Often	17	Never	31	Sometimes	45	Never
4	Never	18	Never	32	Sometimes	46	Never
5	Sometimes	19	Sometimes	33	Sometimes	47	Sometimes
6	Never	20	Sometimes	34	Sometimes	48	Never
7	Sometimes	21	Sometimes	35	Sometimes	49	Never
8	Often	22	Sometimes	36	Never	50	Sometimes
9	Often	23	Sometimes	37	Never	51	Sometimes
10	Never	24	Sometimes	38	Sometimes	52	Sometimes
11	Sometimes	25	Sometimes	39	Sometimes	53	Never
12	Sometimes	26	Never	40	Never	54	Never
13	Never	27	Sometimes	41	Never	55	Sometimes
14	Never	28	Sometimes	42	Sometimes		

***** End of Report *****