



Psychology Practice

Psychotherapy, Assessment, Training, Research

Neuropsychological and Educational Psychological Assessments 2026

Introduction

Neuropsychological and educational psychological assessments for children and adolescents are requested for by parents, school, or doctors when a child has difficulties in reading, writing, mathematics, general learning, feels bored in school, has attention difficulties, or has socio-emotional or behavioural challenges. The assessment aims to understand the neuro-cognitive, educational, behavioural, social and emotional functioning of a child, identify any neurodevelopmental or learning disorder the child may have, and provide recommendations for schools and parents in response to the child's academic, social-emotional, and behavioural strengths and difficulties.

Assessment process

The assessment is a process which takes approximately 4 weeks and consists of 4 or 5 clinic appointments, 1 school visit and classroom observation, and sometimes a home observation. The clinic visits include a developmental history interview with parents, neurocognitive or educational assessments of the child, and discussion of the assessment results. A detailed report of the assessment results and recommendations will be given and explained to parents first, and will, with parents' approval, be shared (in summary form) with the child, and later the school to develop an Individualized Education (IEP) or Learning Support Plan (LSP).

Assessment tools

During the assessment process various internationally recognized cognitive and behavioural tools are used to understand the child's abilities, strengths, and weaknesses.

In all assessments of children aged 6 to 17 years of age the following tests are used:

The **Wechsler Intelligence Scale for Children (WISC V, 2016)** gives a comprehensive picture of a child's abilities and provides a comprehensive measure of overall intellectual ability, as well as five specific cognitive domains that impact performance in the classroom and beyond. Note: for children under 6 the NEPSY is used whilst for teenagers and young adults aged 17 and above the Wechsler Adult Intelligence Scale is administered.

The **Wechsler Individual Achievement Test (WIAT III, 2017)** is a test designed to measure a child's level of academic strengths and weaknesses. It assesses the specific domains: Oral Language, Total Reading, Basic Reading, Reading Comprehension and Fluency, Written Expression, Mathematics and Mathematics Fluency. It informs decision regarding eligibility for educational services, placement, or diagnosis of a specific learning difficulty. Note: for children under 6 the NEPSY is used.

The **Behaviour Assessment System for Children (BASC-3, 2015)** is used to evaluate symptoms of developmental, learning, and behavioral disorders for children aged 3 to 21 years. The assessment scales consist of 4 composite

indexes with subscales. Three questionnaires are administered, one is designed for parents, one for teachers, and one for the child (from 8 and above).

Depending on the first interview with parents and referral information from school or doctor, and the current age of the child the following assessment tools may be used in addition to or as replacement of the tests above in neuropsychological assessments. These can included but are not limited to: the Autism Diagnostic Observation Scale (ADOS, 2012), Ages and Stages Questionnaire (ASQ 3, 2009), Autism Beck Youth Inventories (BYI, 2005), Beery Buktenica Developmental Test of Visual and Motor Integration (VMI, 2010), Clinical Evaluation of Language Fundamentals (CELF-5, 2013), Connors Rating Scales (Connors, 2008), Communication and Symbolic Behavior Scale (CSBS), Family Relations Test (FRT, 2008), NEPSY II (2007), Sentence Completion Tests (SCT), Social Communication Questionnaire (AQ), the Van der Bilt ADHD Diagnostic Rating Scale (VADRS, 2003), Vineland Adaptive Behaviour Skills (VABS, 2005), or Wechsler Adult Intelligence Scale (WAIS, 2008).

Follow up

After completion of the assessment Psychology Practice can provide follow up on a term or semester basis with school and parents depending on the child's needs. The follow up recommendations will be shared with parents during the meeting in which the assessment results are discussed. When a child has a learning disorder, mostly school support will be indicated, and further follow up at the clinic may not be necessary. In case of attention, socio-emotional or behavioural challenges, a combination of both psychological out of school and in school support is often recommended. Psychology Practice provides psychotherapy for children, and families, as well as parental support programs, social skills trainings, and IEP support to teachers and schools. Common disorders we offer treatment for include Attention Deficiency Hyperactivity Disorder (ADHD), Autistic Spectrum Disorders (ASD), Adjustment Disorders, Intellectual Disabilities, Depressive disorders, Anxiety disorders, Post Traumatic Stress Disorder, Reactive Attachment Disorders, and Eating disorders. The most common treatment types we use with children are Cognitive Behavioural Therapy (CBT), play therapy, parental and systemic therapy, and Eye Movement Desensitization and Reprocessing (EMDR). Psychotherapy support typically consist of 5 to 10 weekly or biweekly sessions of 45-60 minutes each. Sometimes therapies take longer than 10 sessions. In consultation with The Surgery's medical doctors and specialists, psychotherapy may be combined with medication.

Assessment team

Child assessments are conducted by a team of internationally trained clinical child and educational psychologists and early childhood specialists working at Psychology Practice. Psychology Practice has provided assessments, counselling, psychotherapy, trainings, on job mentorships, and program development and monitoring and evaluation services for corporate, private non for profit, and individual clients since 2003. The practice is located at The Surgery in Naguru, Kampala, and has conducted child assessments for students of Ambrosoli International School, Acacia International School, Acorns International School, Aga Khan Schools, the British School of Kampala, Galaxy International School, Heritage International School, the International School of Uganda, Kampala Community International School, Kampala International School of Uganda, Oak Foundation schools, Rainbow International School of Uganda, 7 Hills International School, Taibah International School amongst others.

Dr Femke Bannink – Mbazzi is a clinical and educational psychologist and the director of Psychology Practice. She holds a PhD from the Faculty of Psychology and Educational Sciences, research group Disability Studies & Inclusive Education, and three Master degrees in Clinical Psychology, Educational Psychology / Pedagogy, and

Cultural Anthropology respectively from Leiden University in The Netherlands and Ghent University in Belgium. She is an Associate Professor at the London School of Hygiene and Tropical Medicine, and head of the Disability Research Group at the MRC/UVRI & LSHTM Uganda Research Unit. She has 25 years of experience in clinical practice, of which 23 in Uganda. She conducts all interviews with parents, socio-emotional and behavioural assessments of the child, decides on the cognitive assessment tools to be used, and shares the assessment results with parents. Dr Femke works together with **Vivian Olgha Kudda** and **Elizabeth Shalom Kawesa**, Clinical Psychologists (MSc) from Uganda with over 10 years of work experience at our practice. They conduct the neuro-cognitive assessments and most of the classroom observations. **Laura Slater**, Educational Diagnostician (MA, United States), supports the educational and observational aspects of the assessment process. **Carol Nanyunga**, clinician and early childhood specialist with over 8 years of clinical experience working with children with developmental disorders, supports the team in neurocognitive assessments. Follow up counselling and training at the clinic, home, and school, where recommended, can be carried out by all members of the team.

Pricing and payment schedules

The costs of first-time assessments are outlined below; different pricings apply for re-assessments. To book an assessment place, payment of the full amount is required 30 days prior to the first appointment, an invoice with payment details will be sent after making a booking. Payments can be made in cash, by credit card or bank transfer. We provide a detailed breakdown of the assessment costs for insurance companies if needed.

Neuropsychological and educational assessments	Follow up psychological support
Total costs: 1,560 USD	Cost per session: 120 USD
Interview with parents 120 USD - clinic	Family therapy session 120 USD - clinic
Social, emotional, and behavioural assessment 240 USD - clinic	Child therapy session 120 USD - clinic
Neuro-cognitive and educational assessment 840 USD - clinic	Parental guidance session 120 USD - clinic
Classroom observation and meeting with teachers 240 USD - school	School visit 240 USD - within Kampala
Report discussion parents (and child) 120 USD - clinic	Home visit 240 USD - within Kampala

Please note we have a 24-hour cancellation policy. Appointments that are missed (no-shows) or cancelled with less than 24 hours' notice will be charged the full session fee. This policy allows us to offer the appointment time to other clients who may be waiting for services. By scheduling an appointment, you agree to this cancellation policy.

Appointments

For more information and booking an assessment please send an email with your child's name, date of birth, school, current year or grade, and reason for the request to femke.bannink@psychologypractice.org. In case your child needs an assessment report to apply for examination accommodations please book the assessment at least 4 months before the deadline of submission of the report to the examination board. For information about adult assessments and therapy services please refer to the brochures on [The Surgery website](#).