


Clinical Neuropsychology in Action (CliNiA) Lab: Mental Health, Cognition and Behaviours in everyday life following Neurological conditions



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Background

- Neurological conditions affect 43% of the world’s population and are the leading cause of overall disease burden in the world (Steinmetz et al., 2024).
- The clinical neuropsychological aspects of neurological conditions including *psychological distress, fatigue, pain, sleep, cognitive and behavioural, social, relational* changes often have the most significant impact on people’s quality of life.
- Clinical Neuropsychology In Action (CliNiA) Lab** champions the development of understanding, assessing, supporting those living with neurological conditions through a research programme of:
 - Collaborative, interdisciplinary clinically applied research
 - Highlighting the voices of those living with neurological conditions
 - Adopting a biopsychosocial framework
 - Development of novel neuropsychological interventions
 - Focussing on real world clinical and research impact

Selected Key Findings: Outcomes and impact of neurological conditions

- Cognition: Social Cognition, Executive Function, Cognitive Reserve**

Social cognition, executive functioning and mood impacted in **cervical dystonia** and important targets for clinical interventions (Diepman...O’Keeffe, 2024)

- Mental Health, psychological distress & resilience and post-traumatic growth**

Half of participants reported clinically elevated anxiety and depression 8 years following **acquired brain injury** in a longitudinal study. (Igoe, Twomey...O’Keeffe, 2025)
Post-traumatic growth following acquired brain injury can be identified, and practitioners can support PTG through provision of individual and family based supports (Allen...O’Keeffe, 2022)

- Quality of life**

Reduced quality of life is associated with neuropsychological outcomes of emotional, behavioural, social, cognitive difficulties and fatigue following **childhood stroke** (O’Keeffe, Cogley, Monaghan, 2021)

- Body Image & Sexual Functioning & Relationships**

Body image, mood, disability status and MS duration significantly contribute to sexual functioning difficulties in people with **Multiple Sclerosis** (Breheny, O’Keeffe, Cooney, 2025)

- Parenting**

Multiple Sclerosis (MS) can significantly negatively impact both the parenting role and dynamics in the whole family (Scallan Dowd & O’Keeffe, 2025)

What is it like living with a neurological condition or physical health disability?

- “I feel like a young person in an old person’s body”
Participant with young onset **Parkinson’s Disease** (Cullen...O’Keeffe, 2025)
- “This is real”, “this is hard” and “I’m not making it up”:
Participants with **Functional Neurological Disorder** (Walsh...O’Keeffe, 2024).
- “Not a whole woman”
Participant describing body image and sexuality after **amputation** (Ward Khan, O’Keeffe et al., 2019)
- “It’s the things that people can’t see”.
Participant describing neuropsychological impact of TBI on relationships (O’Keeffe et al., 2020)

From Impact to Interventions

A better understanding of the neuropsychological outcomes can lead to **developing bespoke interventions to support people living with neurological conditions:**

- Improved error monitoring and increased self-awareness post TBI (Fitzgerald, O’Keeffe et al., 2019)
- Psychoeducation, CBT and solution focussed intervention to support adjustment to ABI (O’Keeffe et al., 2019)
- Neuropsychological Intervention for Managing Invisible Symptoms of MS Group: Cognitive rehabilitation and Acceptance and Commitment Therapy (ACT) (O’Keeffe et al., 2024)
- Psychological Interventions for Depressive Symptoms after ABI Systematic Review and Meta-analysis (Seery....O’Keeffe, 2025).

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