Neuropsychological Rehabilitation
Neuropsychological Rehabilitation
Theory, Models, Therapy and Outcome

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Foreword

Neuropsychological rehabilitation has shown tremendous growth in the last few decades, largely based on clinical acumen and experience. More recently, there has been much ado about the need for evidence-based rehabilitation based on the best available scientific evidence to support the effectiveness of interventions. The emphasis on evidence-based rehabilitation is often interpreted as standing in opposition to clinical judgment, when in fact these are complementary aspects of care, with sound clinical judgment required to apply the appropriate principles and techniques of treatment to the individual with a neurological disability. In addition, evidence-based treatment must incorporate the client’s values, preferences and goals in the decision-making process in order to make the treatment accommodations that may ultimately determine the effectiveness of treatment.

The current volume by Barbara Wilson, Fergus Gracey, Jonathan Evans, Andrew Bateman and their colleagues is unique in the integration of scientific evidence, clinical judgment and patient-centred goals as the basis for neuropsychological rehabilitation. In discussing the evidence for the effectiveness of neuropsychological rehabilitation, the authors – who are all experienced clinicians as well as prolific researchers – emphasize that rehabilitation is an interactive process that requires the involvement of therapists, the person with a disability, and family, even extending to the person’s community as a basis of support and reinforcement. The principles and examples that are elaborated in this volume provide a framework for approaching the individual client through an appreciation of their unique combination of limitations and strengths, motivation, personality and resources. The effectiveness of rehabilitation is evaluated in terms of the ability of rehabilitation to assist the client in reaching his or her personal goals and the relevance of treatment to the person’s everyday functioning and quality of life, and these principles guide the planning and implementation of neuropsychological treatment.

It is most impressive that all of these principles and practices have been developed within an integrative treatment model at the Oliver Zangwill Centre for Neuropsychological Rehabilitation. This represents a major accomplishment, for at least two reasons. First, the Centre provides a therapeutic milieu that serves as a critical component of treatment. The therapeutic milieu establishes a sense of cohesion among clients and reinforces the relationship among clients and therapists, factors that are common to all forms of effective treatment and have a significant role in rehabilitation even when individual treatment techniques are based on specific, empirically based interventions. Second, the treatment provided at the Oliver Zangwill Centre fosters the integration of theory and practice, reflected in the use of learning theory, principles of cognitive re-organization, and goal planning as a method of organizing and evaluating client-oriented clinical activity.

Ultimately, the goal of rehabilitation is to assist people to lead meaningful, fulfilling lives. This is a tremendous undertaking, and one that cannot be accomplished without a...
true collaborative effort. This volume provides a window into the techniques, principles and values that make this effort possible, and how they translate into effective neuropsychological rehabilitation.

Keith Cicerone
Neuropsychological rehabilitation is concerned with enabling people with cognitive, emotional or behavioural deficits to achieve their maximum potential in the domains of psychological, social, leisure, vocational or everyday functioning. In this book we address current rehabilitation practice as followed by those who believe that a holistic approach to rehabilitation is most effective. We define the holistic approach to rehabilitation as one that recognizes the fact that cognition, emotion and behaviour are dynamically interlinked. Consequently all these functions need to be addressed in an integrated way in brain injury rehabilitation by an interdisciplinary team.

We firmly believe that rehabilitation needs a broad theoretical base incorporating frameworks, theories and models from many different areas. Being constrained by one theoretical model can lead to poor clinical practice. We discuss the major theoretical approaches to rehabilitation, and the main changes in rehabilitation over the past 20 years. The major purpose of the book, however, is to present practical approaches to helping people with brain injury achieve those goals most valued by them and their families.

There are four sections to the book:

First, we review the background and guiding principles of neuropsychological rehabilitation. This includes an outline of the holistic programme of the Oliver Zangwill Centre for Neuropsychological Rehabilitation in Ely, Cambridgeshire, United Kingdom. This programme, influenced by the work of Yehuda Ben-Yishay and George Prigatano from the United States of America and Anne-Lise Christensen from Denmark, combines group and individual therapy to address the cognitive, emotional and social problems faced by adults with acquired, non-progressive brain injury.

In Section 2, we discuss the various groups run at the Centre and present descriptions of the structure of these groups. These include a group that is primarily educational (the Understanding Brain Injury Group), groups dealing specifically with cognitive problems (the Attention and Goal Management Group, the Memory Group), social skills (the Communication Group), emotional consequences of brain injury (the Mood Management Group), working with families, and groups that require bringing together skills and strategies (Project Group, Newsletter Group, Vocational and Independent Living Groups, Psychological Support Group).

Section 3 comprises nine detailed individual cases to illustrate how the principles outlined in Section 1 are applied in practice. The first six cases have been selected to illustrate aspects of the intensive holistic programme. Three further cases describe work with individuals whose difficulties precluded them from attending the intensive programme.

The final section is concerned with measuring the various outcomes of the Centre including clinical efficacy, research output and education. We discuss the challenges of measuring efficacy of a comprehensive holistic rehabilitation programme. Here we have been particularly influenced by the work of Keith Cicerone, James Malec and colleagues.
As neuropsychological rehabilitation is not only multidisciplinary but also interdisciplinary, we hope that many health service professionals will benefit from this book. The main audience is likely to be clinical neuropsychologists, clinical psychologists, speech and language therapists, occupational therapists, psychiatrists, neurologists, physiotherapists, social workers and nurses. Others may also find the book of interest, particularly relatives of people with brain injury, people with brain injury themselves, general practitioners and teachers.

Barbara A. Wilson