

### Traumatic Brain Injury Rehabilitation: The Lefaivre Rainbow Effect

by *Christine Lefaivre*

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The author of this book, Christine Lefaivre, is a Canadian occupational therapist with 26 years of clinical experience with clients with traumatic brain injury (TBI). In the introduction, Lefaivre explains that early in her career, she realised that TBI clients were being placed in inappropriate environments such as mental health group homes, so she started advocating for people with TBI to remain at home.

She went on to develop the Lefaivre Rainbow Effect (LRE), which she describes as a ground-breaking treatment for people with TBI. She emphasises that the model focuses on the cognitive retraining of the brain not only based on the organic damage to the brain but also based on the individual's pre-injury lifestyle. She describes how the treatment is individually designed for each client. Although this is a positive feature of the model, it doesn't appear to be anything very new or different to other models. As therapists, we always try to individualise our treatment for each client, and a key part of the occupational therapy process is gaining information about the person's pre-injury lifestyle and taking this into consideration during the treatment process.

The main concept of the LRE is its formula: the "total sum" (pre-injury function) minus the "loss" (diagnostic and observable changes) plus the "intervention" (therapy) equals the "residual loss".

Lefaivre focuses closely on the concept of the "human spirit". She emphasises the underlying belief that our motivations are spawned from the human spirit. She highlights the need for health care professionals to get to know their clients as individuals and step into their world. She identifies that preserving hope is essential to recovery and is key to motivating the client to engage in the therapeutic process.

Lefaivre writes a nice chapter on educating the family. It is important that this issue is given some consideration, particularly in the case of TBI clients where they may rely greatly on family to provide structure and implement strategy use. She also provides some good tips on how to prepare for a family meeting.

Some suggestions in the book appear unrealistic. Lefaivre emphasises that it is important that the family does not assume the role of care provider, but rather goes on with life as



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usual, thus providing the framework of familiar activity and routine for the brain-injured family member. While this concept is interesting, in most circumstances, it would be highly difficult to implement, especially in an Irish context where due to limited funding for care packages, families are more often than not left to perform the burden of care tasks.

In reviewing the Lefaivre Rainbow Effect, it is important to consider the context in which Lefaivre works. She continues to work as an occupational therapist in Canada and provides occupational therapy services to clients through third-party funders such as insurance companies and litigators. There are many references to the “funder” in the book, implying that financial resources are available if the case for them is argued strongly enough. The focus of treatment is therapy provision in the community, for up to six years. It is apparent that Lefaivre is not working within a publicly funded system, which makes it difficult to evaluate how the LRE might be implemented in an Irish, publicly funded system with limited resources.

Overall, the book is an interesting read. It doesn't appear to suggest anything entirely new or radical in terms of the treatment of clients with TBI, and on the whole, it seems difficult to imagine how some of the ideas could be implemented in an Irish context due to current limitations of therapy available to clients with TBI, particularly within a community setting.

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