Acquired brain injury (ABI) is a generic term for brain injuries caused mainly by stroke or traumatic brain injury (TBI), although other causes are included as well. Impairments following an ABI are heterogeneous and affect both sensory-motor, cognitive, and emotional functions. Studies have reported a high frequency of cognitive impairment in both early and late stages after ABI resulting in, for example, visuo-spatial neglect, impaired attention, impaired memory, apraxia, and difficulties in planning, organising and initiating activities. Cognitive impairment can create difficulties in all areas of daily activities, and consequently, impact on every aspect of life. Studies have shown that the consequences of cognitive impairments often have a greater influence on independence in the performance of daily activities than do physical impairments.

The occupational therapist plays an important role in the multidisciplinary team caring for clients with cognitive impairment following ABI (CIABI), and is responsible for interventions addressing the consequences of the cognitive impairments in occupational performance. Occupational therapy interventions have been shown to have a positive effect on the occupational performance among clients with CIABI. However, the content of these interventions are insufficiently described leading to a lack of knowledge regarding what components that form the occupational therapists interventions. By identifying and describing the component parts of occupational therapy practice patterns with regard to clients with CIABI, the content of interventions can be clarified. Such knowledge can be used in the continuing development of evidence-based interventions, the identification of content not previously researched, and separating effective practice patterns from ineffective.

The overall aim of this thesis was to describe occupational therapy practice for clients with CIABI from the perspective of practicing occupational therapists.