



# British Aphasiology Society

## NEWSLETTER SPRING 2007

### IMPORTANT NOTICE

#### TO MEMBERS OF THE BRITISH APHASIOLOGY SOCIETY

The BAS Committee is responsible for ensuring that the Society manages its finances responsibly. Income from events and from membership subscriptions is used to pay for our events, student prizes, the conference support funds, and to meet costs associated with travel to committee meetings. For the past three years we have seen a steady decrease in the Society's assets. This is due in part to loss in membership subscriptions, and to increased costs associated with venue hire and travel. In order to ensure that the Society continues to function within its means, we have decided that we need to increase the membership fees. This is the first time in many years that this has happened.

The new membership fees, which will come into effect on 1<sup>st</sup> April 2007, are as follows:

Payment by standing order:	£15
Payment by cash or cheque:	£20
Fee for people with aphasia:	£10
Student fee:	£10

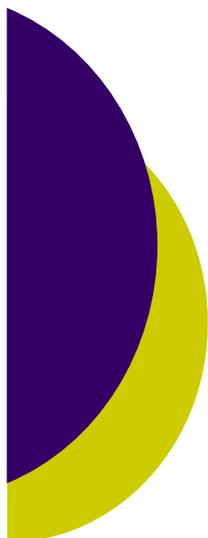
**Please can all members who currently pay by standing order complete the attached form and return it to the membership secretary by the end of June 2007. Please ensure that you cancel your existing standing order directly with your bank.**

We look forward to seeing as many of you as possible at the upcoming Biennial Conference in Edinburgh, September 10<sup>th</sup> to 12<sup>th</sup>.

Ruth Herbert  
Chair, BAS Committee

**And don't forget one of the benefits of membership:**

- **Reduced personal subscription to relevant Psychology Press Journals (see attached flyer)**



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## Reflections on the BAS Therapy Symposium, Plymouth 2006

The BAS Therapy Symposium took place at St Mark's and St John's College on 4th to 5th September 2006. In the last newsletter, Madeline Cruice shared her reflections on the event. Here we have further reflections on some of the papers from the people who acted as mentors to the presenters, Suzanne Beeke, Chris Code, Rosie Cunningham, Ruth Herbert and Julie Morris.

### 'Applying the principles of Neurolinguistic Programming (NLP) within the context of a conversation group for people with aphasia' Maggie Wallis

Comments from Chris Code, University of Exeter

In the 20 years or so that the BAS has been in existence, there have been a fair few Therapy Symposia like the one held at St Luke's and St John's College (Marjons to locals) in Plymouth in early September and hosted by Emily Burtenshaw and Claire Gatehouse and their colleagues. I was delighted to be asked to be a mentor for Maggie Wallis who had travelled from Scotland to present her work on applying Neurolinguistic Programming (NLP) in a group setting. I'm not sure Maggie got much from me during our email and phone exchanges leading up to the meeting, but I learnt a lot from her.

Each presenter at the therapy symposium is asked to prepare and deliver a one-hour presentation followed by 30 minutes of open discussion. This allows for a more detailed examination of issues than is possible at a conventional conference. I found each presentation interesting and highly relevant clinically. The quality and clarity of all presentations was high, and I would defy anyone not to come away without having learnt something. There were six presentations in all, but I have space to mention one, and only briefly.

NLP had always interested me as a possible approach in aphasia but I knew little about it, so I was keen to learn what I could from Maggie Wallis. I hope she'll forgive me if I get any of the following potted description wrong. NLP studies the structure of subjective experience and examines the thoughts, behaviours and beliefs that limit us in some way, seeking ways to change situations. It claims that no behaviours (functional or [dysfunctional](#)) are random, but have a structure that can be understood. NLP is used in psychotherapy, but is sometimes criticized as pseudo-scientific and for making exaggerated claims.

Maggie set out to explore NLP in aphasia therapy in a group setting using it as a framework and employed NLP techniques to examine members' perceptions and feelings on everyday issues in their daily lives. Attitudes towards disability were measured, interviews conducted and comments and perceptions collected. Results reflected the group in a positive and vital light with strong group bonding. Maggie had the time to

present a wealth of multi-media detail that would not have been possible at a conventional conference. The experience left Maggie keen to pursue further explorations of NLP and I got a great deal from her work and the symposium as a whole.

### 'Working with the Family of a Man with Severe Aphasia to Improve Conversation and Manage Emotions' Claire Thomas & Ray Wilkinson

Comments from Suzanne Beeke

In this presentation, Claire discussed the process and outcomes of an intervention programme for two families affected by aphasia. She used Supporting Partners of People with Aphasia in Relationships and Conversation (SPPARC, Lock, Wilkinson and Bryan, 2001). This consists of two 8 week programmes, (i) conversation training (using Conversation Analysis) and (ii) support for the conversation partner.

Claire modified SPPARC in three important ways: (i) she combined the conversation training and support programmes into one 8 week block of therapy, (ii) she made a decision with the client and family as to who was involved in therapy, and (iii) she chose not to transcribe the conversation. Instead she analysed it by viewing the video repeatedly with a colleague with experience of using CA and SPPARC. For case study 1, Claire worked jointly with the person with aphasia and their conversation partner (spouse). For case study 2, she worked with the spouse and other family members but the person with aphasia chose not to be involved. A single case methodology was deployed to good effect with multiple pre- and post-therapy baselines for conversation and language behaviours.

The great strength of Claire's presentation was her decision not only to share examples from actual session plans with the audience, but also to show video clips of herself doing the therapy. This facilitated a deep level of understanding of what she was doing, and thus really struck at the heart of what a BAS therapy symposium is about. She presented each case thoroughly and reviewed the evidence for the effectiveness of therapy. It is not always easy to show empirically the changes in conversation that one senses are there, and Claire dealt with this issue well. She was able to conclude that involving the wider family, not just the spouse, could have benefits, that SPPARC could be effective with clients with marked receptive language difficulties, and possibly most important to clinicians, that transcription is not required to effectively analyse conversation.

## Reflections on the BAS Therapy Symposium, Plymouth 2006

### 'Bridging the gap between language therapy and conversation: the way towards generalisation?' By Jon Hunt.

Comments from Rosie Cunningham,  
Southern Derbyshire SLT Service

Jon discovered cognitive neuropsychology as it 'hit' speech and language therapy. He began his presentation with a brief historical review. He expressed his frustration with the limitations of a single word model, the preoccupation with picture-naming and that generalisation to everyday life was not an automatic outcome following language treatment. He discussed the importance of tapping into the actual processes of the system and influencing how these work in order for generalisation to take place. His presentation centred on a young woman who became nonverbal following a stroke. Her priority was to regain her speech and Jon discussed how he used a language approach in a very personal and functional way to try and achieve an improvement in everyday conversation. He demonstrated how he adapted traditional word-finding tasks to avoid confrontation naming and how he used personally relevant information to create meaningful exercises. His client responded positively to this approach and can now use phrases in non-clinical situations. Although, throughout the talk Jon challenged the audience about the usefulness of the language processing model his therapy was clearly influenced by it and by his theoretical knowledge. He suggested a new perspective to put the emotional aspects of language at the centre of the model because, as he pointed out, we are made up of our emotions not a library of words. He was not advocating that we throw the baby out with the bath water but that we find ways for language therapy to impact on people's actual lives.

### Errorless and errorful learning of verbs and nouns in aphasia: a case-series study by Paul Conroy

Comments from Ruth Herbert, University of Sheffield.

Errorless learning was first knowingly used with people with amnesia. Recently it has been applied to anomia with people with aphasia. Paul Conroy extended the previous work done on noun retrieval to verbs, in a series of case studies of people with aphasia. Paul gave detailed and interesting background information about the participants and considered the results in this context. The participants presented a range of severities of anomia. The two therapies - errorless and errorful - are easily replicated in the clinical setting. Errorless therapy involved multiple

attempts at repetition of the target word while exposed also to the written form. Errorful therapy involved staged cueing starting with a single phonological cue and progressing in stages to whole word repetition. Importantly however, and this was not discussed here, the two therapies differ also in the degree to which they demand conscious retrieval of the word, and in depth of processing.

The results showed that all the participants made some gains in both verb and noun naming in both conditions. This is encouraging and not always the case in such studies. Although there were few significant differences across sets, there was a tendency to a slight advantage for errorless over errorful learning techniques, and an advantage for nouns over verbs. It would be interesting to see whether nouns and verbs differed in their response to the two techniques. Of clinical relevance is the fact that the amount of time required to complete the errorful condition was greater than that needed for errorless learning.

Some of the people with aphasia reported a preference: people with more severe problems preferred errorless learning; errorless learning was deemed more appropriate in earlier sessions and errorful in later sessions.

Whilst the advantage for one therapy over the other remains unresolved, the work described here offers therapists further techniques for relearning words. Either form can be adapted, or both combined, to provide a programme that is tailored to an individual's needs and learning ability.

### Treatment of word sound deafness with an aphasia patient- was it effective? By Dorte Hessler and Nicole Stadie

Comments from Julie Morris, University of Newcastle

The audience at the BAS therapy symposium was delighted to welcome Dorte Hessler from the University of Potsdam who presented work focusing on word sound deafness. In her study, Dorte described a client with auditory processing difficulties, which affected early discrimination tasks in addition to auditorily presented lexical and semantic tasks. Dorte argued that the client had deficits in auditory analysis and designed treatment which aimed to improve auditory processing, closely based on earlier reported work in this area (Morris et al).

Continued overleaf

## Reflections on the BAS Therapy Symposium, Plymouth 2006

### Continued comments from Julie Morris

Dorte utilised the finding that the person was affected by the degree of difference between sounds and a hierarchy of difficulty was established. The treatment design Dorte presented was extremely rigorous and clearly articulated. She demonstrated that the client improved both on trained and untrained items and that this improvement was maintained over time, although there was no corresponding change to other auditory tasks (beyond discrimination). Dorte raised the interesting issue of whether the client benefited given improvement was only within discrimination tasks. She argued convincingly that there was clear benefit as these abilities were the precursors to subsequent treatment programmes, for example, focusing on semantics, with the correct phonological form now available (in input) to be 'forwarded' to the semantic system.

### Jackie Davies, an SLT from Cardiff presented a paper at the Symposium. Here we have her personal report and reflections of the experience.

"Superb"; "great" and "fandabbiedozie" (spoken with a Cornish accent!). These were the responses of four members of our team from Cardiff after being asked their opinions of the recent BAS therapy Symposium in Plymouth.

Our team was made up of two people with aphasia, a carer, a Speech and Language Therapy Technician and a Speech and Language Therapist. We had all travelled to Plymouth by train to attend the symposium and make a platform presentation entitled "Living with Aphasia: People in Partnership" – the final presentation of the two day symposium.

Our attendance at the symposium was made possible by grants from the Tavistock Trust, the Stroke Association and BAS itself. To all these groups we are extremely grateful. We were also very well supported by Ruth Nieuwenhuis, our SLT mentor and manager in Cardiff and Madeleine Cruice, our team mentor prior to and on the day of the Symposium.

### The "fandabbiedozie"bits

The presentations were varied and interesting. We had worried that some might be difficult to follow for those of us who were not SLTs. However Huw and Enfy, our two volunteers, found them extremely interesting and reported being able to get the gist of what was being said. There was plenty of time between speakers to allow each of us to process and digest the information before moving on to the next topic. Huw and Enfy both felt confident enough

to ask questions and were very well accommodated by the speakers and the Plymouth team.

We enjoyed giving our presentation, though being on last, we were aware of people wanting to leave to get trains etc. We had some unexpected technical difficulties with the Promethean Presenta pads that the volunteers used on the day. We are still trying to sort these out with Promethean.

Generally we all felt very happy to have achieved something that we had not thought we could do three months earlier when Ruth had suggested it.

### Some of the barriers we encountered

Physical barriers: The campus was generally disability friendly but some of the stairways had handrails only on one side, which led to people having to go down the stairs backwards or having to use a very unfamiliar stairlift. The tiered lecture theatre also presented some difficulties, though the Plymouth staff were very helpful and allowed us to sit in the front row. (Our volunteers reported later that sitting at the front gave them more confidence to ask questions as they could not see the audience behind them!)

The trip from the auditorium to the cafeteria took 15 minutes each way for our volunteers. This did not matter too much on the first day, when a buffet was served, but led to them being last to the table on day two when the meal was waitress served. They did not complain but had to rush their meals and then walk the fifteen minute journey back to the auditorium to make their presentation.

After the first day, the symposium organisers had arranged a social event. We had planned to go to this to help us to get to know some of the other therapists and presenters. When it came to it, we were all extremely tired and decided to stay in the hotel instead. We had not considered how tiring the day could be and, in the future, would consider how we were going to build in time for rest and recovery for people with aphasia and supporting team members.

Barriers to communication: It is not easy for people with aphasia to introduce themselves to others and make pleasantries. Our volunteers were very made to feel very welcome by some therapists who introduced themselves and wished them good luck for their presentation. At other times, away from the auditorium, when we were not able to be together as a team, they said that they felt a little isolated and uncomfortable.

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## Reflections on the BAS Therapy Symposium, Plymouth 2006

If more people with aphasia are to be encouraged to attend these types of events, then we may need to make more effort to include people with aphasia in group conversations or to use positive non-verbal communication to demonstrate inclusion.

Lessons learnt: The SLT team learnt a great deal about what it is like to be a disabled person in society. Although we had undertaken a risk assessment while planning the trip, many unforeseen health and safety issues arose. These were mostly regarding mobility and balance and carrying of suitcases and bags. We have concluded that the risks of travelling by train in such a group are too high for us to repeat this type of trip in the future.

In addition to health and safety risks, we also became very aware of how we take so many of the simple things for granted - from reading train timetables, moving around on a platform or on a train, ordering a taxi, getting into that taxi, ordering a drink and a meal, paying the bill and chatting to friends and colleagues to relieve the stresses and strains of everyday life. The volunteers just took things in their stride and accepted the increased effort that every action seemed to require. By the end of the two days, myself and the SLT Technician, could well understand why some people with aphasia seem to lose motivation for getting out into the community. Living with aphasia seems to affect every strand of everyday life.

### Conclusion

As someone who has never spoken to this type of audience in the past, I would recommend that all SLTs stand up and have a go. The audience, the Plymouth team and Madeline, our mentor on the day, were all very supportive and it was a good experience to add to my CPD diary and CV. The other team members all enjoyed the experience and we all feel that have a better understanding of each other

Health and safety (of the SLT team and the people with aphasia) is a major issue that is very easy to underestimate when planning journeys with people with disabilities. I would not want to use the train again and would consider alternative methods of transport. Breaks from each other to allow rest and recuperation are essential and keeping a flexible schedule in the evenings also allows time to be built in for rest.

Thanks again to all those involved in funding this trip and our managers and mentors for supporting us and giving us the confidence to stand up and be heard. Personally I would also like to thank Huw and Enfy's for allowing me to be part of their lives for a few days and to Alison Sawyer, our technician who was a great companion on a tiring but very enlightening trip.

Jackie Davies, Specialist Speech and Language Therapist, Rookwood Hospital, Fairwater Rd, Cardiff, CF5 2YN



## BAS Research in Progress Meeting

### CALL FOR PAPERS

**Would you like the opportunity to present your current work with an extended time for discussion and questions?**

The next research in progress meeting will be held at Manchester University on Thursday 14<sup>th</sup> June 2007.

**The theme for the day will be 'Semantic Memory and Comprehension Disorders'.**

We would welcome abstracts on ongoing or prospective studies related to this topic.

Please email your abstract (max 300 words) to  
Lisa Perkins: [l.perkins@health.gov.je](mailto:l.perkins@health.gov.je) by **20<sup>th</sup> April 2007**.

## Research in Progress Meeting, November 2006

The 'Research in Progress Meeting' is a yearly event organised to give clinicians and researchers the opportunity to hear about, and discuss, current/ongoing aphasia research. The meeting last November in Newcastle was very well attended by 49 clinicians and researchers from across the country. The seven presentations on the day were around the topic of 'Verb and Sentences'.

*David Howard and Sonia Brownsett* (University of Newcastle) investigated Grodzinsky's trace deletion hypothesis looking at 'Movement and reversible sentence comprehension'. They assessed six people with agrammatic, non-fluent speech production suggesting that the identity of the verb affected the overall interpretation of the sentence and that Grodzinsky's predicted patterns of performance were not evident.

In the next talk *Elaine Funnell and Michael Kopelman* presented their research findings into past tense verbs ('Crossing the divide: Interaction and accommodation between past tense verbs in a case of progressive fluent aphasia'). They suggested that better regular and irregular past tense verbs are produced by a specific interactive-phonological system (in which final alveolar stop consonants behave as past tense markers, and past tense rimes behave like morphemes). Elaine concluded that within this system both regular and irregular verbs are produced.

*Ruth Herbert's* research looked at 'the role of noun syntax in spoken word production' and investigated participants' knowledge of the different syntactic structures used by mass and count nouns. It was interesting, for both clinicians and clinical researchers, to hear that the therapy carried out with identified participants following their research, has proven to be effective in increasing spoken word production. The results encourage clinicians to consider focusing on noun syntax when working with people who have deficits in accessing spoken word forms.

*Kath Mumby* presented her research into the nature of apraxic errors in 'proper sentences' ('Apraxia of Speech: Do people with aphasia make more apraxic errors when producing 'proper sentences?'). She discussed how in her study spontaneous speech was segmented into text units for analysis. Errors were more likely to occur in lexical and clausal text units. She concluded by suggesting apraxic errors might be related to grammar in the spontaneous speech of people with aphasia, and the probability of apraxic errors occurring increases when people attempt 'proper sentences'.

The afternoon session began with a presentation on 'Errorless and errorful learning of verbs and nouns in

aphasia: a case series study' by *Paul Conroy, Matt Lambon Ralph and Karen Sage*. Their study tries to establish which of the above learning methods is the most effective in teaching nouns and verbs to people with aphasia. They used a case-series design with errorless and errorful therapy for verb and noun naming with nine people with aphasia. Results showed that there was no significant difference between levels of baseline verb and noun naming in any of the participants. All participants showed significant therapy effects across both therapies. Errorless learning had a non-significantly greater effect for seven participants, and nouns showed a non-significantly greater therapy effect over verbs in five participants. Other observations were discussed, such as the suggestion that errorful learning was more time consuming, and errorless learning seemed to be enjoyed more by participants as it was seen to be engaging and positive. Their research suggests that errorless and errorful learning is an area that requires more investigation, especially as the time taken to implement errorless learning appears to be half of that of errorful learning.

*Susan Edwards and Kate Tucker's* research on 'treating verbs in fluent aphasia: a clinical study' discussed the success and limitations of treatment of verb retrieval problems in three people with fluent aphasia. The therapy consisted of twice-weekly verb therapy for four months and achieved improvement for practised items, but limited generalisation. They suggested that verbs may not generalise much, and therefore verbs need to be chosen carefully for therapy.

A stimulating day finished with *Janet Webster and Barbara Gordon's* presentation on 'Verb and noun association therapy: a study of therapy effects'. Their single-case study investigated the use of verb and noun association therapy with a client with aphasia for whom previous therapy, targeting verb and noun retrieval and 'mapping', had not been effective. Therapy resulted in significant improvements in verb retrieval as well as in comprehension of verbs. Improvement in sentence generation seemed to result from a greater understanding of the relationship between the verb and noun within the sentence rather than an improvement in the retrieval of particular nouns.

All in all this was a successful, interesting and enjoyable day for all participants. The abstracts from the meeting can be accessed via the BAS website <http://www.bas.org.uk/workingprogress.htm>.

Frauke Buerk, Ruth Hall & Jill Summersall, Newcastle upon Tyne

**If you have suggestions for topics for future meetings or your institution would be willing to host a meeting, please contact Lisa Perkins at [l.perkins@health.gov.je](mailto:l.perkins@health.gov.je), tel: 01534-624501.**

## Research Round Up by Emma Eaton

### Neuroimaging in language and aphasia

This study examines and evaluates the various structural and functional imaging methods that are currently available to study the representation and processing of language in the brain, the effects of damage or dysfunction and the mechanisms of language recovery following stroke.

**Lee, A., Kannan, V. and Hillis, A. E. (2006). The Contribution of neuroimaging to the study of language and aphasia. *Neuropsychology Review*, 16 (4), 171-83**

### Quantifying outcomes in single case studies

While single case studies are widely used in the study of aphasia and have been found to provide useful evidence for the effectiveness of different treatments, it is difficult to evaluate the effects of these treatments in a standardised way. This study uses effect sizes to quantify treatment outcomes, in order to compare their relative strength. The authors claim that this approach maximises the value of research into different treatment approaches.

**Beeson, P. M. and Robey, R. R. (2006). Evaluating single-subject treatment research: lessons learned from the aphasia literature. *Neuropsychology Review*, 16 (4), 161-9**

### Facilitation of naming by word-to-picture matching: where is the priming?

This study replicates research that has found improved naming following word-to-picture matching, in order to investigate the source of this priming. In the first experiment, it was found that people with semantic impairment improved on naming only when there was a short time-lag between word-to-picture matching and naming, while people with less semantic impairment improved equally on short and long time-lags. The second experiment found no difference in the facilitation effect whether the word-to-picture matching used unrelated or semantically related distractors. The authors argue that facilitation cannot be due to semantic priming, but is due instead to priming at post-semantic stages of processing.

**Howard, D., Hickin, J., Redmond, T., Clark, P. and Best, W. (2006). Re-visiting “semantic facilitation” of word retrieval for people with aphasia: facilitation yes but semantic no. *Cortex*, 42**

### Please receive the BAS newsletter by e-mail!

Recent increase in postal costs for A4 size envelopes has increased the cost of sending out the newsletter. To reduce costs, everyone who has an e-mail address will now receive the newsletter via e-mail, unless a hard copy is specifically requested.

If you currently receive the newsletter by post but have an email address, please help to reduce costs by contacting Annette Cameron, BAS Membership Secretary with your email address ([annette.cameron@nhs.net](mailto:annette.cameron@nhs.net)).

**[annette.cameron@nhs.net](mailto:annette.cameron@nhs.net)**

## Events Diary

### 'Aphasia: Partnership Working in Practice'

Study Day: £15.00: 26 April 2007: Postgraduate Centre, Llandough Hospital, Penlan Road, Vale of Glamorgan, CF64 2XX (Nr. Cardiff). Partnership working between people with aphasia, health professionals, and voluntary agencies. Contact Ann Smith, Dept. Secretary, Rookwood Hospital, Llandaff, Cardiff CF5 2YN. (Tel: 029 2031 3733; Email [ann.smith@cardiffandvale.wales.nhs.uk](mailto:ann.smith@cardiffandvale.wales.nhs.uk)) for further details.

### 'Science of Aphasia VIII'

Science of Aphasia VIII Conference: 14-19<sup>th</sup> September 2007, Monopoli, Italy. Theme: Neurocognition of Language. Various topics including intervention. Call for abstracts. Deadline: April 15<sup>th</sup> 2007. For further information see: [www.soa-online.com](http://www.soa-online.com)

### '1<sup>st</sup> National Aphasia Support Group Meeting'

Aphasia Now Support Meeting. 17<sup>th</sup>-18<sup>th</sup> September. An opportunity for people with aphasia to meet other people with aphasia. See: [www.aphasianow.org](http://www.aphasianow.org) or email: [mail@aphasianow.org](mailto:mail@aphasianow.org)

### 'Symposium on Identities in Health'

Symposium at University of East Anglia, 20<sup>th</sup> March. Aims: to provide a forum for health practitioners, academics and researchers to share interests and perspectives on health identities in client focussed care - ranging from health and illness identities, communication of illness identity in professional discourse and professional identity experienced or perceived by others. Contact: Mrs Rachel Lunness, The Short Course Co-ordinator (AHP): 01603 597137; Email: [shortcourse.ahp@uea.ac.uk](mailto:shortcourse.ahp@uea.ac.uk)

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## Information on BAS Student Prizes

The British Aphasiology Society invites entries for the Student Project Prize and Student Essay Prize.

**The BAS Student Project Prize:** £200 will be awarded for the best student project on any topic relating to acquired aphasia. The project or dissertation should have been submitted as part of the normal examination procedure in the final year of an undergraduate or postgraduate course (masters level). The prize will be divided equally between the winning student and his/her educational establishment.

**The BAS Student Essay Prize:** £100 will be awarded for the best essay on any topic relating to acquired aphasia. Entrants should be undergraduate or postgraduate students (masters level). The prize will be divided on the basis of £75 to the winning student and £25 to his/her educational establishment.

**Closing date for both prizes: 6/7/07**

**Guidelines for the student prizes are available on, the BAS web page ([www.bas.org.uk](http://www.bas.org.uk)) , from [claire.gatehouse@pcs-tr.swest.nhs.uk](mailto:claire.gatehouse@pcs-tr.swest.nhs.uk) or contact:**

Claire Gatehouse, Speech and Language Therapy Dept, Beauchamp Centre, Mount Gould Hospital, Plymouth, PL4 7QD, Tel 01752 272556

### Student Essay Prize Winner

Congratulations to Laura Harvey from the University of Strathclyde who won the student prize in 2005/6. Her winning essay was entitled 'Aphasia and Employment Reintegration'.



**Are you thinking of attending a conference this year?  
Do you need financial support?**

**BAS Events Grants** support members attending the BAS International Conference or Therapy Symposium. You may apply for up to £200.

**The Support Fund for Conferences (non-BAS)** supports members attending other conferences. You may apply for up to £400. Overseas members may only apply to attend UK conferences.

Funding is available to people who have been members for at least a year. You can apply for funds whether or not you are presenting work but priority is given to presenters. Awards can cover registration, accommodation, travel expenses and other essentials. You may submit a retrospective application for a conference you have already attended this year. BAS is particularly keen to support members who do not have access to funding from other sources. (If you have previously received funding, you may not re-apply for at least 2 years).

**The deadline for applications is 31<sup>st</sup> May 2007.**

For further information and an application form, visit the BAS web page ([www.bas.org.uk](http://www.bas.org.uk)) or contact:

Roz Rosenblatt, BAS Conference Support Fund Organiser, Speakability, 1 Royal Street, London, SE1 7LL

Tel: 0207 261 9572

Fax 0207 928 9542

Email: [roz@speakability.org.uk](mailto:roz@speakability.org.uk)

## British Aphasiology Society Biennial International Conference, 10 – 12 September 2007, Edinburgh



### CONFERENCE ANNOUNCEMENT

Reserve your place on-line at [www.trainingmadeeasy.co.uk](http://www.trainingmadeeasy.co.uk) or call 44 (0)1332 740172 for further information

### INVITED SPEAKERS:

Sharon Abrahams	Thomas Bak	Miriam Brazzelli	Alfonso Caramazza	Gianna Cocchini
Roberto Cubelli	Pam Enderby	Fernanda Ferreira	Sue Franklin	Argye Hillis
David Howard	Marjorie Lorch	Katie Overy	Martin Pickering	Klaus Willmes

### PROPOSED PROGRAMME THEMES:

Awareness of language deficits	Cognitive models of aphasia therapy	Social aspects of aphasia
Reading and writing in aphasia	Historical perspectives	Language in neurodegenerative conditions
Language relearning	Sentence comprehension and production	Conversation and dialogue
Debate on evidence based therapy		

**Provisional programme available on the BAS website after 23rd March 2007.**

### CONFERENCE VENUE:

Our Dynamic Earth, one of Scotland's premier conference venues, offering stunning views of the Scottish Parliament, Palace of Holyroodhouse, and Salisbury Crags.

Conference guests will have the opportunity to enjoy a FREE Conference Wine Reception hosted by the Lord Provost of Edinburgh on Sunday 9th September and special BAS 21st Anniversary Gala Dinner on Tuesday 11 September at the Balmoral Hotel with traditional Scottish entertainment.

### CONFERENCE FEE:

Full Conference **£250**

Discounted rate of £200 for confirmed bookings received prior to 1 May 2007

Single Day **£120**

Gala Dinner **£35**

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**And don't forget BAS Events Grants can support people to attend the Conference.**