



British Aphasiology Society Biennial Conference  
University of Manchester, UK

9<sup>th</sup>, 10<sup>th</sup>, 11<sup>th</sup> September 2013

**Keynote speakers:**

**Professor Linda Worrall**

**Professor Nina Dronkers**

**Dr Jenny Crinion**

**Dr Shirley Thomas**

**Professor Jane Marshall**

**Dr Audrey Bowen**

**Professor Matt Lambon Ralph**

**Book your place now:**

<https://www.meeting.co.uk/confercare/bas2013/>

<b>MONDAY</b>			
9.00 – 9.50	Registration		
9.50 – 10.00	Welcome		
10.00 – 11.00	Keynote session: Professor Linda Worrall <b>People living with aphasia win! Better pathways and rehabilitation options</b>		
11.00-11.30	Break, posters, exhibitors		
11.30-1.00	Varied topics session  <b>Finding a clear path through the fog – experiences, expectations and hopes of a person with aphasia, relative and therapist</b> Bindi Patel, David Oldham, Ann Oldham  <b>An innovative concept to improve quality of life in aphasia: the biographic-narrative intervention</b> Sabine Corsten, Jürgen Konradi, Erika Schimpf, Friedericke Hardering, Annerose Keilmann  <b>Clearing the Mist: What do clinicians actually do for people with primary progressive aphasia?</b> Anna Volkmer  <b>Interactive Storytelling Therapy: Initial results from a novel intervention</b> Marcella Carragher, Karen Sage, Paul Conroy		
1.00 – 2.00	Lunch, posters, exhibitors		
2.00-3.00	Keynote session: Professor Matt Lambon Ralph - Using neurocomputational models to advance our understanding of aphasia and its treatment		
3.00-3.30	Break, posters, exhibitors		
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4.40-5.00	Break, posters, exhibitors		
5.00-6.00	Keynote session: Dr Audrey Bowen – <b>Early intervention: how strong is the evidence from the ACT NoW study and other recent trials?</b>		
6.00	Wine reception		

TUESDAY							
9.30-11.00	<p style="text-align: center;"><b>Varied topics session</b></p> <p><b>What factors predict who will feel well supported and have a strong social network six months post stroke?</b> Sarah Northcott, Katerina Hilari</p> <p><b>Consequences of stroke and aphasia according to the WHO ICF: Views of people with aphasia, family members and professionals</b> Maria Assunção Matos, Luis M. T. Jesus, Ana Gomes, Madeline Cruice</p> <p><b>Hopes, wishes and goals of communication partners of chronic aphasic people</b> Gustav Pfeiffer, Elisabeth Pfeiffer, Eva Schillikowski</p> <p><b>Collaborating with people with aphasia to develop accessible information materials</b> Caroline Haw, Emma Gregory, Sheila Brumfitt, Ruth Herbert</p>						
11.00-11.30	<b>Break, posters, exhibitors</b>						
11.30-12.30	<b>Keynote session: Professor Nina Dronkers - The neural architecture of auditory comprehension</b>						
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4.00-5.00	<b>Keynote session: Dr Shirley Thomas - Communication and Low Mood: A behavioural therapy for stroke aphasia</b>						
7.30	<b>Conference Dinner</b>						

WEDNESDAY			
9.00-10.40	<p style="text-align: center;"><b>Varied topics session</b></p> <p><b>Selective preservation of passives in a man with primary progressive aphasia</b> Vitor Zimmerer, Ewa Dąbrowska, Rosemary Varley</p> <p><b>Discourse under the microscope: a novel assessment protocol for real-life communication</b> Anne Whitworth, Mary Claessen, Suze Leitao, Janet Webster</p> <p><b>Spreading the Word 'Aphasia'. International Comparisons of the Public Awareness of Aphasia in Argentina, Canada, Croatia, Greece, Slovenia and Norway.</b> Chris Code, Ilias Papathanasiou, Silvia Rubio-Bruno, María de la Paz Cabana, Maria Marta Villanueva, Line Haaland-Johansen, Tatjana Prizl-Jakovac, Ana Leko, Nada Zemva, Ruth Patterson, Richard Berry, Elizabeth Rochon, Carol Leonard, Amelie Robert</p> <p><b>Evaluation of a multicomponent therapy targeting syntactic construction in people with Broca's-type aphasia: Evidence from assessment tasks and conversation</b> Marcella Carragher, Karen Sage, Paul Conroy</p> <p><b>Fostering a collaborative international aphasia research network</b> Marian Brady on behalf of Collaboration of Aphasia Trialists</p>		
10.40-11.10	<b>Break, posters, exhibitors</b>		
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2.40-3.00	<b>Break, posters, exhibitors</b>		
3.00-4.00	<b>Keynote session: Professor Jane Marshall - Technological applications in aphasia therapy</b>		
4.00	<b>Conference close</b>		

**Tuesday - Poster presentations**

**Context Matters: Stroke and friendship in the elderly population** Caitlin Longman, Claire Penn & Jennifer Watermeyer

**Disfluencies, inhibition and syntactic processing in ageing: evidence from immediate reconstructive sentence recall** Christos Salis, Catherine Foy, Jet Vonk, Mona Spaeth

**Speech pathologists' clinical decisions in the provision of services to people with aphasia: A comparison of ideal, planned and provided occasions of service** Natalie Ciccone, Deborah Hersh, Elizabeth Armstrong, Erin Godecke

**The application of construction grammar to language in aphasia** Rachel Hatchard, Ray Wilkinson & Ruth Herbert

**Non-word errors in jargon aphasia: phonological overlap patterns and naming abilities** Catherine Godbold, Holly Robson, Arpita Bose

**Communication confidence in different settings: perceptions of nineteen people with aphasia** Hayward, K. & Bixley, M.

**Monday – Poster presentations**

**Involving and being involved: service users and the design and delivery of a staff training intervention in stroke-aphasia rehabilitation** Simon Horton, Kathleen Lane, Linda Watson, Colin Bell

**Comparing uni-modal and multi-modal therapies for improving writing in acquired dysgraphia** Lindsey Thiel, Karen Sage, Paul Conroy

**Setting Up Memory Cafes in Residential Care Home Settings** Margaret Stephens, Diana Rickard-Saggs, Shelley Cross

**Visual Analogue Scales in Stroke: what can they tell us about health-related quality of life?** Katerina Hilari, Lois-Danielle Boreham

**Giving instructions- aphasia, procedural narrative, and iconic gesture** Madeleine Pritchard, Lucy Dipper, Naomi Cocks, Gary Morgan

**Very Early Rehabilitation in SpEech (VERSE): The development of an Australian randomised controlled trial of aphasia therapy after stroke** E. Godecke, E. Armstrong, J. Bernhardt, S. Middleton, T. Rai, A. Holland, D. Cadilhac, A. Whitworth, M. Rose, N. Ciccone, GJ. Hankey

**People with aphasia creating an aphasia friendly website: The DMU4 experience** Bixley, M., DMU4, Hall, R., Weale, R., Collingwood, J., Marshall, F. & Hamilton, C.

**Wednesday – Poster presentations**

**Providing information about stroke and aphasia to people with aphasia and their families** Sarah Edney, Alison Ferguson, Isobel Hubbard, Hazel Roddam, James Selfe

**Using bromocriptine alongside speech and language therapy: How might the combination benefit someone with aphasia?** Karen Sage, Mandy Galling

**Transcortical Motor Aphasia: A Special Case of Executive Dysfunctions?** Lilla Zakariás, Attila Keresztes, Gyula Demeter, Ágnes Lukács

**Stroke Social Network Scale: development and psychometric evaluation of a new patient-reported measure** Sarah Northcott, Katerina Hilari

**Preliminary psychometric analysis for two patient-reported outcome measures quantifying communicative and social activities: the COMACT and SOCACT** Sukhpreet Aujla, Madeline Cruice, Nicola Botting, Linda Worrall Louise Hickson

**Speech and language therapies for aphasia: a systematic review of learning processes in therapies with a functional goal** Ciara Shiggins, Simon Horton, Valerie Pomeroy

**Comparing verb and noun retrieval in aphasia using pictures and video**  
Clare McCann, Simone van Weerd

**The Aphasia Impact Questionnaire in practice.**  
Alex Stirling, Chloe Greenwood, Kate Swinburn

**Fostering a collaborative international aphasia research network**  
Marian Brady on behalf of Collaboration of Aphasia Trialists

## Research Round Up

**Kati Renvall, Lyndsey Nickels, Bronwyn Davidson**

***Functionally relevant items in the treatment of aphasia (part I): Challenges for current practice.* Aphasiology Volume 27, Issue 6, p. 636-650.**

***Functionally relevant items in the treatment of aphasia (part II): Further perspectives and specific tools.* Aphasiology Volume 27, Issue 6, p.651-677.**

These two articles are concerned with aphasiologists' interest in selecting "functional", "relevant" and "useful" items for use in therapy. The first article aims to review the meaning of "functionally relevant" in the aphasia treatment literature and to specify challenges in identifying potentially relevant items for therapy. The authors conclude that we lack clear definitions, strategies and concrete tools to assist with identification of functionally relevant items for language therapy. However, they identify two main categories of functional vocabulary: personally chosen vocabulary and generally frequent vocabulary. Two drawbacks in current literature are identified: 1. although aphasiologists often try to target the most common vocabulary in therapy, language corpora are typically not used to determine the identity of the most frequent words. 2. the analyses of the language corpora show that the most frequent spoken words represent a wide variety of word classes, such as adjectives, adverbs and pronouns. Yet, only a few treatment studies have targeted words other than concrete nouns and verbs. Renvall et al. conclude that there is a need to use objective sources to identify and choose treatment targets. In addition, more therapy attempts should be directed to words other than the most concrete nouns and verbs. Use of frequency-based lists provides one way to identify and increase the number of items that are potentially relevant across people. Such lists can also be used as a tool when asking people with aphasia or their significant others to identify items that they personally think should be targeted in therapy.

The second article reviews the existing strategies and materials from adjacent fields (particularly AAC) relating to functionally relevant stimuli with the aim of establishing resources for identifying potentially relevant therapy items at the level of both vocabulary items and topics of conversation. Four resources are presented. 2 data sets provide evidence regarding the most frequent topics of conversation; one is based on unimpaired speakers conversations and the other extends this by including information from both unimpaired and aphasic speakers' topics of conversation. In addition, to provide evidence of the most frequent vocabulary in adult conversations, a list of words compiled from three separate data sets is provided. Finally, a vocabulary list of the 1000 most frequent words retrieved from an objective frequency count (SUBTLEX-US) is presented. These resources provide a means for clinicians to select objectively frequent topics and vocabulary as stimuli for functionally relevant therapy.

## Research Round Up

**Bronwyn Hemsley, Maryanne Werninck & Linda Worrall**

**“That really shouldn't have happened”: People with aphasia and their spouses narrate adverse events in hospital. *Aphasiology, Volume 27, Issue 6, p.706-722.***

Communication disability leads to increased risk of experiencing an adverse event in hospital. Despite forming a particularly vulnerable patient group, little is known about the nature or cause of adverse events experienced by people with aphasia and their spouses in hospital. This study therefore aimed to (a) describe the adverse events experienced by people with aphasia and their spouses in hospital, (b) identify the situations, people, events, and outcomes relevant to the adverse events, and (c) identify commonalities in participant stories of adverse events. Using a narrative method of inquiry, ten people with chronic aphasia and their spouses participated in in-depth interviews about the adverse events they experienced or witnessed in hospital. A wide variety of adverse event types were identified in the participants' stories, with “undesirable events” amongst the most common, along with “inappropriate discharge home or inadequate discharge plan”. Exclusion of spouses from important interactions on the ward was also identified representing a barrier to effective communication and a risk for adverse events. Participants suggested strategies for improving the safety of people with aphasia in hospital in the hope of preventing future adverse events in this population. The authors concluded that such adverse events occurring in hospital were distressing to participants and often related to the presence of aphasia. They recommend that hospital policies should acknowledge the role that spouses have with patients with aphasia and ensure their inclusion. The need for better discharge planning and information should also be recognised as a means of preventing adverse events.

**Naomi Cocks, Madeleine Pritchard, Hannah Cornish, Nesta Johnson & Madeline Cruice**

**A “novel” reading therapy programme for reading difficulties after a subarachnoid haemorrhage. *Aphasiology, Volume 27, Issue 5, 509-531.***

This study focused on treatment for mild reading difficulties and treatment for reading difficulties associated with cognitive impairment. It reports an individual strategy-based reading treatment of 11 sessions given to a female participant (IW) who had mild reading difficulties following a subarachnoid haemorrhage (SAH). The results examined impact of treatment on reading ability, confidence and emotions associated with reading. Treatment focused on the use of strategies to support IW's memory when reading books, the use of a checklist to select appropriate reading materials, and methods for increasing IW's confidence in discussing the book she was reading with others. A person-centred approach and personally relevant materials were used throughout the treatment. Results showed gains in reading rate, accuracy, comprehension, and confidence, with parallel increased pleasure gained from reading and reduced negative emotions and frustration. Self-reported gains included conversing with others about material read, verbal communication, and re-engagement with the identity of being a reader. The authors concluded that the positive results suggest that further research is warranted that investigates the effectiveness of strategy-based reading therapy approaches for others with acquired reading difficulties.

## Research Round Up

**S. McDonald, L. Togher, R. Tate, R. Randall, T. English & A. Gowland**

**A randomised controlled trial evaluating a brief intervention for deficits in recognising emotional prosody following severe ABI. *Neuropsychological Rehabilitation: An International Journal*, Volume 23, Issue 2, p.267-286.**

This study examines impaired emotion perception following traumatic brain injury (TBI). Impaired perception of emotion in voice can occur independently of facial expression. This study used a randomised controlled trial to evaluate a short treatment (three x two-hour sessions) for improving the ability to recognise emotional prosody for people with acquired brain injury, mostly TBI. Ten participants were allocated to treatment and 10 to waitlist. There were no significant treatment effects for group, but analyses of individual performances indicated that six of the treated participants made demonstrable improvements on objective measures of prosody recognition. There were no clear reasons why some participants showed improvements while others did not. Improvements on objective lab-based measures did not generalise to relative reports of improvements in everyday communicative ability. Nor was there clear evidence of long-term effects. In conclusion, treatment of emotional prosody was effective in the short-term for half of the participants. The authors concluded that further research is required to determine what conditions are required to optimise generalisability and longer-term gains.

**Yasmeen Faroqi-Shah, Tobi Frymark, Robert Mullen, Beverly Wang**

**Effect of treatment for bilingual individuals with aphasia: A systematic review of the evidence. *Journal of Neurolinguistics*, Volume 23, Issue 4, p.319–341.**

Bilingual aphasia is a multifaceted phenomenon: influenced by variables such as age of onset, literacy, usage patterns, and emotional valence. These authors point out that although the majority of the world is bilingual, relatively little is known about the best practices for language therapy in bilingual aphasia. This systematic review was undertaken to examine three crucial questions faced by speech-language therapist during clinical decision making: outcomes when language therapy is provided in the secondary (less-dominant) language (L2), extent of cross-language transfer (CLT) and variables that influence CLT, and outcomes when language therapy is mediated by a language broker. Data obtained from 14 studies ( $N = 45$  aphasic individuals) indicated that treatment in L2 leads to positive outcomes (akin to L1 treatment); CLT was found to occur in most studies, especially when L1 was the language of treatment. Although limited by the methodological quality of included studies, this systematic review shows positive findings for unilingual aphasia treatment and CLT. The authors consider some implications for clinical practice, models of language representation in bilinguals, and future research.

## Contact the BAS committee

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<b>Jennifer Vigouroux</b> <b>Student Prize Co-ordinator</b> Tel: 0191 2295845		<b>Alex Stirling</b> <b>Connect Representative</b> alexstirling@ukconnect.org

## NEW LOOK FOR THE Aphasia Association of the USA WEBSITE!

[www.aphasia.org](http://www.aphasia.org)

We are excited to share our newly-designed website! It includes both old and new information. Best part? You can still find us at [aphasia.org](http://aphasia.org). We would like to extend a big thank you to Webserves for putting the site together, as well as our Board members, Advisory Council Members, Affiliates, friends with aphasia, family members and friends of persons with aphasia and everyone else that assisted us on this endeavor! A Million Thanks!!

### Dedication to Aphasia Awareness

Our website now includes a new section containing information on international research and local grassroots efforts to measure public awareness of aphasia and to assess the effect of people's effort to increase aphasia awareness. The purpose of the Aphasia Awareness webpages is to improve the quality of life for people with aphasia and for their families by increasing public awareness of aphasia through local, grassroots efforts of individuals and groups to develop aphasia-friendly services within their neighbourhoods. Towards that effort, materials, sources and resources are included for activists who wish to affect change in their community. The information on the webpages is tailored for people with aphasia, their carers, health professionals, and media professionals. In addition, an online survey is provided for people to provide information and ask questions about increasing awareness of aphasia in their own community and nationally. This page can be found under "Advocacy" and is titled "Other Aphasia Awareness Information."

Chris Code  
University of Exeter

# Speakability launches 'Charter for People with Aphasia'

To mark SPEAK ABOUT APHASIA MONTH in June, National Aphasia charity Speakability launched its renewed 'Charter for People with Aphasia'.

Speaking at the UK Stroke Assembly in the East Midlands, Speakability Chief Executive, Melanie Derbyshire said: 'We're calling for:

- (1) **recognition of Aphasia as a disability in its own right;**
- (2) **greater public awareness and understanding of Aphasia;**
- (3) **Aphasia training for all health and social care workers;**
- (4) **a full count of the actual number of people who have Aphasia, in every health authority in the UK, on a continuing basis.**

She continued: 'There are estimated to be **250,000 people in the UK with Aphasia**. So this is a vital campaign, which will be taken up by Speakability's vibrant national network of Self-Help Groups, and also by the excellent Speech and Language Therapy teams in hospitals right across the country. We are simply appealing to everyone who values their own speech and language skills to add their voice now to our campaign to recognise Aphasia as a disability. Follow us on Twitter [@SpeakabilityADA](https://twitter.com/SpeakabilityADA) and mark your tweet [#recogniseaphasia](https://twitter.com/#recogniseaphasia). And do please watch our wonderful video on YouTube presented by the BBC's Andrew Marr: <http://www.youtube.com/watch?v=XYXSxNu01gc>'



As part of their campaign this year, Speakability challenged individuals to spend a day saying absolutely nothing... then, as they put it, you will 'get a *sense* of what it feels like to be deprived of the vital and humanising gift we call speech'. If you would like to get more involved, or just learn more, visit [www.speakability.org.uk](http://www.speakability.org.uk). There, you can find out what is happening near you, or volunteer, or make a donation to Speakability's vital work providing long-term support for people with aphasia.

# I have Aphasia

I have difficulty with speaking, understanding, reading and writing.

I can't always find the words although I know what I want to say.

I find it hard to concentrate for long.

There may be a delay before I can reply to a question.

Sometimes I get frustrated when people do not give me enough time to say what I want to say or finish my sentences for me.

I have difficulty communicating.

**I am not stupid.**

- Aphasia is a hidden disability – you can't see it!
- Aphasia affects speech, reading and writing and sometimes understanding.
- Aphasia is caused by injury to the language centres of the brain. It may result from a stroke, head injury, brain tumour or neurological condition, e.g. M.S. or Meningitis.
- An estimated 250,000 people in the UK have Aphasia.
- Speakability supports and empowers people with Aphasia and their families and carers.
- Speakability provides information, practical solutions and self-help opportunities.

Please support our campaign to make life easier for people with Aphasia or other communication support needs. Your donation can make a real difference.



Rebuilding Communication

## BAS Research Update Meeting – Exeter University, Friday April 19<sup>th</sup> 2013

The RUM meeting was very successfully organised by Professor Chris Code, and Dr. Katherine Mumby, and it was a full day of talks for the 45 or so delegates. The list of talk titles can be found on the BAS website (<http://www.bas.org.uk/documents/research/Exeter%20programme%202013.pdf>).

Three themes emerged during the day. The first was related to the design and quality of outcome measures that we use in aphasia, and new ways that we can improve the quality of those measures. Louise Barrett presented a fascinating talk on Rasch analysis and how this can provide an objective measure of the difficulty of different items in an assessment. There is real potential for this analysis tool to change how we assess language impairments. Kate Swinburn reported on a shortened patient reported outcome measure (PROM) based on the Communication Disability Profile and developed for Connect service users. This generated a good discussion on how the use of such a PROM could provide both a quantitative measure and a tool for exploring the social and emotional impact of aphasia when working with clients. The second theme was related to new approaches in therapy. Pippa Kirby presented data on using shape-coding – adapted from the paediatric literature - to improve spoken language production in two individuals with chronic aphasia and non-fluent output. There were two presentations on gesture therapy. Abi Roper introduced us to new technologies to support this therapy and plans for evaluating its efficacy, and Lucy Dipper presented data linking intact semantic processing and to positive outcomes in gesture therapy. Arpita Bose presented data on blocked picture naming as tool for assessment and therapy, when pictures are presented in semantic blocks of the same or different category or phonological blocks of same or different word onsets. Corinne Dobinson presented initial data from a review of whether Constraint Induced Aphasia Therapy could be implemented in an SLT outpatient service. The main challenge related to recruiting into these intensive group programmes so they can be a stable or regular service. Sue Franklin presented initial data that naming therapy with a large set of items can be effective, opening up the possibility for therapy with many rather than few items. Finally, the third theme was long term recovery. Kath Mumby presented data that explored quality of life and adjustment over the long term, highlighting the importance of peer support and tackling the emotional and psychological consequences of aphasia. Finally, we saw initial data from the PLORAS project that is running at University College London. Based a large database of individuals with aphasia, Tom Hope presented very encouraging data that showed continued improvement for some individuals many years after stroke. This data is being used to predict outcomes in the long term for aphasia.

It was a very packed and enjoyable day, and a real bargain at £10 for full BAS members. Thank you to Chris Code and Kath Mumby for pulling it together.

**Lotte Meteyard, Research Update Coordinator**



## News

### 1. Connect awarded Big Lottery Fund grant to support outreach work

Connect has received a large grant to support its outreach programme, which aims to create more peer-led opportunities for people with aphasia in their local communities. For example these opportunities might be drop-in sessions or conversation groups. We're looking for a minimum of four people with aphasia in each area, to work in partnership with and to lead these new opportunities. Connect will provide training and support in a number of ways to ensure the new opportunities become sustainable in the long-term.

If you know of people with aphasia who might be interested in getting involved, please get in touch. There are a number of roles people with aphasia can take on – big and small – so there's something for everyone.

Contact: Helen Mann on 020 7367 0864 or [helenmann@ukconnect.org](mailto:helenmann@ukconnect.org)

### 2. Connect is moving!

#### Connect is moving premises

Connect has been at Marshalsea Road for 13 years, and it has been a spectacular home for us. Dunhill Medical Trust were our founding benefactors. They have decided to sell the building. The good news is that we have found a new home in the same part of London, 15 minutes from Marshalsea Road. From September 23<sup>rd</sup> 2013, our new address will be Connect, St Alphege, Kings Bench Street, London Se1. Our website address and staff emails will remain the same: new telephone numbers will be available on our website at the time of moving.

## Want to know more?

A summary of our BAS committee meeting minutes can now be found on the website. Visit our **homepage** and **click on the link under 'Membership Information'**

**Work in aphasia? Interested in quality of life? We're conducting a study on using QOL measures in clinical practice in aphasia. Participation involves survey completion and a free 1-day workshop at City University London by Dr. Madeline Cruice. See [www.qualityoflifeinaphasia.wordpress.com](http://www.qualityoflifeinaphasia.wordpress.com)**



### **The Tavistock Trust for Aphasia University Student Prizes**

*The criterion for the prize is that it should be awarded for an excellent 'piece of work' relating to aphasia. The value of each prize is £300.*

The Trustees are pleased to announce that The Tavistock Trust for Aphasia Student Prizes, from 2012-2013 onwards, will be awarded at all universities that teach Speech and Language Therapy in the United Kingdom, New Zealand and Australia. We have recently invited universities in Canada who teach SLT and also look forward to working with them.

**Please visit <http://www.aphasiatavistocktrust.org> to learn more about the Student Prizes.**

The Trustees wish to congratulate the recipients of the Tavistock Trust for Aphasia's University Student Prizes for the academic year 2011-2012, who are:

#### **United Kingdom**

Birmingham City University – *Caroline Pickering*  
Cardiff Metropolitan University – *Sean O'Sullivan*  
City London University – *Alexandra Ziff*  
DeMontfort University Leicester – *Casey Stevens*  
Leeds University – *Esther Capes*  
Manchester Metropolitan University – *Anna Boratyn*  
University College London – *Tong Guo & Kate Middleton*  
University of East Anglia – *Brittany Wells*  
University of Essex – *Lucy Reynolds*  
University of Greenwich and Canterbury Christ Church University – *Heather Woodcock*  
University of Manchester – *Jennifer Moore*  
University of Newcastle upon Tyne – *Jennifer Wood*  
University of Reading – *Abigail Glasspool*  
University of St Mark & St John – *Erin Jarvis*  
University of Sheffield – *Katharine Harris & Frances Perkins*  
University of Strathclyde – *Mairi Lang*  
University of Ulster – *Linda Kenneway*

#### **New Zealand**

University of Auckland – *Beatrice Clarke*  
University of Canterbury – *Eleanor Barclay*