# WFNR World Federation of NeuroRehabilitation

### 2022 Newsletter

## **NEUROPSYCHOLOGICAL REHABILITATION (NR-SIG)**

Dear members and colleagues,

Welcome to the 2022 Newsletter of the NR-SIG of the WFNR. In this Newsletter, I introduce the current NR-SIG Committee, provide brief background to the NR-SIG and bring you up-to-date with current activity and development. We also present the first of our Researcher Spotlights, featuring Dr Dana Wong, from Melbourne, Australia.



The most notable announcement is that the founder and inaugural chair of the NR-SIG, Professor Barbara Wilson, stood down as chair in 2021. Barbara's contribution to the NR-SIG, starting from our first pre-SIG conference in Uluru, Australia in 2004 (from whence our logo was derived), was enormous. She found a home for our interest group within the WFNR (2006), and enthusiastically spearheaded the organisation of 18 scientific meetings over as many years in almost as many countries. As a result, the NR-SIG is widely regarded as one of the most vibrant and inclusive multidisciplinary international organisations specialising in neuropsychological rehabilitation, bringing together clinicians and researchers from all over the world at our annual conferences.

The NR-SIG is one of 37 Special Interests Groups of the WFNR. Our SIG has 165 members from 30 countries, and membership is open to any member of WFNR (there is no limit to the number of SIGs a WFNR member can join). Membership fee of the WFNR (only £ 30) is payable annually – there is no additional fee to join any SIG. The NR-SIG has a management committee (see right), which was augmented at the 2021 AGM to include a three-member 'social media' team to raise the profile of the NR-SIG. The goals of the social media team are to increase NR-SIG membership, build up followers on social media (especially Twitter; @nrsigwfnr), promote our conferences, and disseminate information on research and neurorehabilitation issues.

The main activity of the NR-SIG is the annual 2-day conference and the AGM takes place at the conference. We welcome all rehabilitation disciplines including neuro- and clinical psychology, occupational therapy, speech/language therapy, physiotherapy, social work, rehabilitation medicine and nursing. Submissions on a wide range of topics are sought (see website). The primary focus of the conference is the rehabilitation of neuropsychological consequences of acquired brain impairment. The next conference will be held in conjunction with Dutch neuropsychology organisations in Maastricht, The Netherlands from 12-14 October 2022, convened by Professor Caroline van Heugten. Abstracts are due by 15 May 2022. <a href="https://www.cvent.com/c/abstracts/d401ce7e-d4cb-4b57-a555-58a29b4abcc7">https://www.cvent.com/c/abstracts/d401ce7e-d4cb-4b57-a555-58a29b4abcc7</a>

Are you a young/early career professional in neurorehabilitation? Can you help? Dr Elia Fischer, Chair of the Young WFNR SIG (yWFNR), has put out a call for involvement in his agenda to spark interest and promote careers in neurorehabilitation. This could be an exciting opportunity. For further information please contact Dr Fischer (elialuca.fischer@insel.ch) or me (robyn.tate@sydney.edu.au).

My best wishes to you all, Robyn Tate, Chair, NR-SIG-WFNR



#### 19th Annual NR-SIG Conference

12-14 October, 2022, Maastricht, The Netherlands <u>SUBMIT ABSTRACT HERE</u>

#### **WFNR Research Webinars**

24 March - Meta-analysis 28 April - WFNR-Based Study/Outcome Research 26 May - Understand the Process of Publication (Meet the Editor); <u>traceymole@wfnr.co.uk</u>

#### Franz Gerstenbrand Award

Applications close on 31 October 2022. See WFNR website (<u>www.wfnr.co.uk</u>)

**12th World Congress for Neurorehabilitation** 14-17 December 2022 Vienna, Austria, http://www.wfnr-congress.org

### Aims and objectives of the NR-SIG

The NR-SIG is for clinicians and researchers in a multitude of disciplines interested in the rehabilitation of people across the lifespan with cognitive, emotional, psychosocial and behavioural changes caused by acquired brain injury or neurological disease (both progressive and nonprogressive).

The main objectives of the NR-SIG are as follows:

- To encourage and support multidisciplinary clinical practice and research into the rehabilitation of people with cognitive, emotional, psychosocial and behavioural changes caused by brain injury or neurological conditions (both progressive and nonprogressive) across the lifespan.
- To improve the care of survivors of brain injury and their families through the translation of clinically relevant research.
- To support the future of neuropsychological rehabilitation throughout the world and to provide a forum of communication for those with an interest in the area.

We work on these objectives via our annual two-day conference, the training of students, and the provision of continuing education activities to clinicians and researchers with lectures, webinars and workshops, including participating in the WFNR Flying Faculty programme.

Funds generated from NR-SIG activities are channelled into travel and student assistant bursary schemes to support attendance at the annual 2-day conference. The travel bursary scheme offers a total of three bursaries to (1) clinicians or researchers who are permanent residents from low, lowermiddle and upper-middle income countries (as defined by the World Bank), (2) Masters or Doctoral students or Early Career clinicians or researchers from other countries. The student assistant bursary provides students with hands-on experience in supporting the running of the annual conference in return for free registration.

The main activity of the NR-SIG is the annual two-day conference. Over the past two decades, conferences have been held at exciting locations across the world: 2004: Uluru, Australia; convenors: Barbara Wilson and Robyn Tate 2008: Brasilia, Brazil, 5rd WCNR 2005: Galway, Ireland; convenor: Huw Williams 2010: Vienna, Austria, 6th WCNR 2006: Vaduz, Lichtenstein; convenor: Tom Manly 2007: San Sebastian, Spain; convenors: Nacho Quemada and Michael Perdices 2008: Iguaçu Falls, Brazil; convenors: Teresa Torralva and Robyn Tate 2009: Tallin, Estonia; convenor: Jonathan Evans 2010: Krakow, Poland; convenor: James Malec 2011: Rotorua, New Zealand; convenor: Jennie Ponsford (with Margaret Eagers first joining us as conference organiser) 2012: Bergen, Norway; convenor: Tamara Ownsworth 2013: Maastricht, The Netherlands; convenor: Caroline van Heugten 2014: Limassol, Cyprus; convenor: Fofi Constantinidou 2015: Daydream Island, Australia; Catherine Haslam 2016: Glasgow, Scotland; convenor: Jonathan Evans 2017: Cape Town, South Africa; convenors: Anita Rose and Caroline van Heugten 2018: Prague, Czech Republic; convenor: Michael Perdices 2019: Granada, Spain; convenor: Alfonso Caracuel 2020: Vienna, Austria; convenor: Satu Baylan (virtual meeting due to COVID) 2021: Lorne, Australia; convenors: Jennie Ponsford and Tamara Ownsworth (hybrid meeting due to COVID)

Our group joined the WFNR in 2006, and has contributed to the World Congresses since then:

2012: Melbourne, Australia, 7th WCNR 2014: Istanbul, Turkey, 8th WCNR 2016: Philadelphia, USA, 9th WCNR 2018: Mumbai, India, 10th WCNR 2020: Digital meeting, 11th WCNR

The NR-SIG has also contributed to the WFNR Flying Faculty: 2014: Chennai, India 2016: Kolkata, India 2018: Moscow, Russia

The Chair of the NR-SIG is a member of the SIG Chair Committee of the WFNR, and as such makes contributions to the WFNR in presenting lectures and webinars and participating in committees.





### **Researcher Spotlight: Dr Dana Wong**



Associate Professor and Clinical Neuropsychologist, Department of Psychology, Counselling

and Therapy,

School Director of Graduate Research, School of Psychology and Public Health La Trobe University, Melbourne, Australia

Lead, eNACT (Neurorehabilitation And Clinical Translation) Research Group

#### **Key Research Interests**

My research aims to improve the lives of people living acquired brain injury (ABI) by developing and evaluating neuropsychological interventions with meaningful outcomes for the person and their family; and implementing these into practice by engaging with health services and training competent, effective clinicians. I see my work as sitting within the nexus of clinical research, education and practice. I enjoy using a range of research methods, both quantitative (randomised controlled trials, single case experimental designs, implementation studies, observational cohort studies, surveys, meta-analyses) and qualitative (focus groups, interviews). I work with fantastic multidisciplinary teams that include researchers at all career stages, clinicians, students, health service managers, and people with lived experience of ABI.

### Summary of recent research

I have pursued two main research 'streams' in recent years. The first of these aims to develop neuropsychological rehabilitation interventions that result in sustained, meaningful improvements for the person living with ABI, and can be delivered both in-person and via telehealth. These include cognitive (e.g., memory rehabilitation strategies and programs), psychological (e.g., Cognitive Behaviour Therapy for depression and anxiety, adapted for people with brain injury; CBT-ABI) and combined holistic interventions (e.g., VaLiANT, which aims to concurrently address cognitive and emotional barriers to participation in valued activities by combining cognitive rehabilitation and psychological therapies). I have been lucky to work with some amazing world-leading rehabilitation researchers on these projects, including Prof Jennie Ponsford, A/Prof Rene Stolwyk, Prof Roshan das Nair and Prof Dominique Cadilhac. I have also been working recently with speech pathology colleagues to improve the communicative accessibility of these interventions and various assessment tools; and occupational therapy and physiotherapy colleagues to ensure these interventions contribute to improved meaningful participation in work and other productive activities, particularly for young stroke survivors.

The second stream aims to implement these interventions into clinical practice and ensure a well-trained, competent clinical workforce. This has included developing frameworks for implementation of memory groups into stroke services; evaluating methods for training clinicians to deliver CBT-ABI; developing checklists of competencies for group facilitation and for giving neuropsychological assessment feedback; evaluating the impact of the BRAINSPaN community of practice (for multidisciplinary clinicians and researchers in the brain impairment field); exploring the experiences of students and recent graduates of clinical neuropsychology and clinical psychology training programs; and determining the impact of structured group supervision for early career psychologists' competence and confidence. These projects have been conducted with a diverse set of collaborators, embedded in clinical settings, and have centred primarily on supporting clinicians and students to deliver best practice.

### **Researcher Spotlight (continued): Dr Dana Wong**

### What next?

In the past year I have been thrilled to be part of several multidisciplinary teams awarded funding to tackle big issues in ABI rehabilitation,



where my role is to contribute expertise in neuropsychological assessment and intervention. These include "Building Australia's first young stroke service" (MRFF Rapid Translation Grant, CIA Prof Julie Bernhardt), "Communication Connect" for people with communication disability after ABI (NHMRC ideas grant, CIA Prof Miranda Rose) and "New models of rehabilitation to improve work and health outcomes after stroke" (MRFF Cardiovascular Health Mission grant, CIA Prof Natasha Lannin). These projects are great examples of what can be achieved when different disciplines work together towards common goals.

I see the main task ahead as ensuring widespread access to effective interventions and support services for everyone in the ABI community, regardless of their cultural and linguistic background, geographical location, socioeconomic status, health literacy and technological competence. This is of course an enormous challenge, but a crucially important one. Related to this, an equally important future direction is towards 'precision rehabilitation', which embraces the complexity and heterogeneity of people living with ABI and ideally ensures that appropriate supports are delivered in appropriate ways to the appropriate people.

In addition to big-picture research, I hope to contribute to progress in these directions through other initiatives and organisations. Recently, I was delighted to be nominated as President-Elect of ASSBI (the Australasian Society for the Study of Brain Impairment), an organisation which does excellent work to improve the lives of people with brain conditions. I have co-led the development of a clinical position paper on neuropsychological interventions for the Australian Psychological Society's College of Clinical Neuropsychologists, to be published soon; and I contribute to the Stroke Foundation's Living Stroke Guidelines. I have become Co-Chair of a new International Neuropsychological Society Special Interest Group in Neuropsychological Intervention. I also co-lead an Australian neuropsychology advocacy group, advocating for better community awareness and funding to support the training and workforce of clinical neuropsychologists. My hope is that these activities all make a difference, in some small way.

You can read more about me and my publications here and more about the work of the eNACT research group here. Tweet with me @neurodana

**Interested in** goal-management training, family-oriented interventions, reminiscence therapy, telerehabilitation? Here are some recent studies highlighted by the NeuroBITE team – and another 7,000 are on NeuroBITE! (go to: <u>www.neuro-bite.com</u>)

NeuroBITE 🧠

An important #metaanalysis of 21 studies by @vess\_stamenova and @briantlevine summarizes the efficacy of goal management training in improving executive functions. Read more here: bit.ly/3gS3D9j#NeuroBITE #sysrev #attention #rehabilitation #intervention #rehabiresearch





This scoping review or 89 studies by @Vero\_deGoumoens and colleagues provides an actual state of the current evidence on #family oriented #interventions for adults with #ABI and their families. Read more: bit.ly/3omNqNc#NeuroBITE #sysrev #rehabresearch #braininjury





This group #reminiscence #therapy #RCT study by Li et al. (2019) with 90 #AD patients improved symptoms of #depression and was beneficial for treating #neuropsychiatric symptoms. Read more: bit.ly/3IThx6I#NeuroBITE #Alzheimer #intervention #NeuroTwitter





This #sysrev by Appleby et al. (2019) from @UniversitySA investigates the effectiveness of #telerehabilitation in adults with #stroke. 13 RCTs met the inclusion criteria. Read more here: bit.ly/3gPHOqy#NeuroBITE #review #rehabresearch #intervention



