

## **EUCAPA 2012 CONFERENCE**

**KILLARNEY, IRELAND**

**6 MAY 2012**

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1 EUCAPA Conference 2012, Sunday 6th May:

2  
3 MR O'FLYNN: Ladies and gentlemen, good morning, good morning! Failte, welcome to you  
4 all, especially those who journeyed from far away.

5  
6 Ahead of us over the next three days is the most important APA event in the world this year.

7  
8 33 countries are represented here, offering you a unique opportunity to share, learn and network.

9  
10 This is the first time ever that Ireland has hosted the European congress. The congress theme  
11 however putting practice-based research into action has been at the heart of what we do here in  
12 Kerry for the last 15 years.

13  
14 So the emphasis at this congress will be on the skills and interventions that assist people with  
15 disabilities. Working with them, alongside them, meeting their requirements.

16  
17 That's why you'll find in every session over the next three days a practical workshop; teaching  
18 best practice in everything from dance to aquatics, power soccer to table cricket, sitting  
19 volleyball to marble arts.

20  
21 Speaking of practical, this congress simply couldn't have happened without the support and  
22 commitment of several key bodies. Most notably, EUFAPA, the European federation of  
23 Adapted Physical Activity, the Irish Sports Council, Bord Failte, the Irish tourist board, our host  
24 this weekend the IT Tralee and of course the Irish government, in the shape of the Department of  
25 Justice and equality.

26  
27 We're privileged here today to have Minister Kathleen Lynch to perform the official opening.  
28 Minister Lynch, in her relatively short time in office, has been a strong supporter of the APA  
29 movement right from the start. Helping to fund in particular the accessibility leisure centre  
30 initiative. She has a keen interest too in the area of inclusion of people with disabilities in  
31 physical activities of all kinds.

32  
33 So today, this morning, we welcome a friend.

1 Ladies and gentlemen, the Minister of State at the Department of Health and the Department of  
2 Justice and Equality, the Minister with responsibility for disability, older people, equality and  
3 mental health, Minister Kathleen Lynch.

4  
5 MINISTER LYNCH: Good morning everybody, how are you?

6  
7 It's Sunday, and the priest usually starts off by saying good morning and everyone replies good  
8 morning father, in this case we're hopeful that in the future it will be good morning mother, we'll  
9 wait.

10  
11 It's a beautiful day and you couldn't be in a better place than Kerry when the sun shines like it is  
12 this morning and indeed, to welcome all of you, and the President of the Institute of Technology  
13 Tralee tells me that you have all arrived from 33 different countries, and that is a spectacular  
14 attendance.

15  
16 And really that attendance only goes to indicate how important this particular conference is, and  
17 I would like to thank the President of the European federation for awarding the conference to  
18 Ireland and to Kerry and we do deeply appreciate that, Mr President.

19  
20 I also would like to thank the President and indeed the entire faculty in Tralee Institute of  
21 Technology for being at the coal face, being where it is important to be, where it is important to  
22 be is in relation to not just the practical teaching of physical activity as it applies to people with  
23 disabilities, but also being involved in the European dimension, so as they were there to apply  
24 for and be accepted as the people to host this particular conference.

25  
26 It's nice to see in a time when Ireland has such difficulties, and we are not going to talk about  
27 those today, that they can -- we can in fact still attract conferences of this significance to Ireland,  
28 that's very important. And it will be important to us into the future.

29  
30 It is equally important to see that people with disabilities will be at the centre of your  
31 deliberations this weekend.

32  
33 It's not just politicians like myself that have an interest in this area, we also have with us today  
34 our MEP Sean Kelly, who has always had an interest in the area, Sean as you might know was in

1 fact president of the GAA and the GAA have been a big player when it comes to including  
2 people with disabilities and will become an even bigger player into the future.

3  
4 We have an incredible reputation in Ireland in terms of sport, at any weekend you will find an  
5 array of sports I think would be hard to match anywhere else in the world, and those sports and  
6 those local heroes, that type of activity, go on in the small little clubhouse, in the raw field  
7 without the markings, in the big stadiums, in all of those towns.

8  
9 Up to recently people with disabilities were on the side line, wearing the county colour, wearing  
10 the club colour, getting involved, involved in the fundraising and the support that the people  
11 involved in sport, that they support it.

12  
13 What we're now seeing is the people with disabilities are becoming involved in the sport  
14 themselves and that's vitally important.

15  
16 Mary Davis is here with us this morning and Mary is going to be one of your keynote speakers.  
17 Mary has a reputation in relation to disability I think that is far and above anything that any of us  
18 involved in politics could possibly achieve.

19  
20 She has been involved with Special Olympics all her life as far as I can remember, Jean Spain  
21 tells me so. And she has brought Special Olympics to Ireland, again a major achievement, and a  
22 spectacular event.

23  
24 I know Mary now doesn't want me to mention that she was involved in a particular election  
25 recently, but let me tell you, as someone who has stood in elections all of my life, been  
26 successful in some, and unsuccessful in others, and unsuccessful in others! I think we can never  
27 over estimate the value of people standing, putting their ideas forward and actually taking that  
28 risk.

29  
30 And I have always maintained that the value of our democracy is those who stand, there  
31 sometimes is only one winner, but those who stand are as valuable to our democracy as anyone  
32 else. And I salute people who stand and I salute Mary Davis in that respect, she is a remarkable  
33 woman with great courage and I think she deserves our support.

1 I have always felt that people with disabilities should be at the centre of what we do. At the  
2 centre of what we do! I always make the point that for instance if I had someone making  
3 decisions on my behalf without consulting me, I think I would find it most frustrating and  
4 annoying.

5  
6 What we see with this particular conference, what we see with the federation European wide and  
7 what we see in Tralee Institute of Technology is that concept being put into practice. Training  
8 people, training people to apply physical activity and ensuring that when they come across  
9 people who have a physical or intellectual disabilities that it is not a barrier, that it is part and  
10 parcel of what they do, an ensuring that those people come into the centre of that activity.

11  
12 We all know that those of us who have leisure time -- I don't any more unfortunately, but I hope  
13 to in the future again! But those of us who do have leisure time, where do we spend it? In  
14 activity such as sports, leisure centres and the other things that we like to support along the way.

15  
16 Why should we exclude people with disabilities from that? Why should they be excluded? And  
17 it's not as if they all want to go swimming, and it's not as if they all want to go playing hockey or  
18 with rebel wheelers all wanting to go playing basketball or football. What we need to do is start  
19 asking them what sport are you interested in? What would you like to do? How will we manage  
20 this? How will we develop it? How will we ensure that the barriers that we put in place -- that  
21 we put in place -- can be taken down? And that's really what this is all about.

22  
23 It is about looking at how we'll do things in order to ensure that those who have a disability can  
24 become involved and will be part and parcel of what we do.

25  
26 And not alone will it include the social element of it, but as we hear time and time and time  
27 again, physical activity is good for our health, good for our mental health, good for our physical  
28 health, so clearly it must be good for both mental and physical health of people with disabilities  
29 as well.

30  
31 So if we're serious about ensuring that people live longer, stay healthier and are happier, then we  
32 must include everyone in what we do.

33  
34 I was involved in the women's movement for a long number of years, and we always had a

1 saying that we were different but equal, I think that can be applied as well to people with  
2 disabilities. Different but equal.

3  
4 Equally, we set out as a group of women to say that you must be blind to gender, whilst putting  
5 the positive supports in place in order to ensure that the playing pitch, which was very uneven,  
6 becomes more even. We need to do that with disability as well.

7  
8 I keep saying to people that people with disabilities are not that different from the rest of us, they  
9 don't want to live in the pigeon hole of health, they don't want to live in the pigeon hole of  
10 justice, they want to live in exactly the same space that we live in, exactly the same space.

11  
12 The difficulty is that we have put a wall around that space. And we need to take that wall  
13 down.

14  
15 The NDA, the National Disability Authority who do tremendous work in terms of planning,  
16 development and research, enormous resources, tells me that they have now become engaged  
17 with architects and the national institute of architects in order to ensure that the type of design  
18 and planning that we'll look at in the future will take all of those things into consideration. We'll  
19 ensure that when a building is now being designed, reconfigured, or indeed built on a green field  
20 site, that the needs of people who might have a physical, sensory or any of the disabilities will be  
21 taken into consideration.

22  
23 Now we keep talking about people who have enormous talent in this country and that's very true,  
24 we have an enormously talented population. Surely allowing accessibility can't be that difficult?  
25 Can't be that difficult! And we must ensure -- we must ensure that our planners, our architects,  
26 our educators, our health specialists must figure into the equation of that delivery of service,  
27 people who have a disability.

28  
29 I have responsibility for four different areas; Brendan Howlin calls me the Minister for  
30 everything else! I sometimes dread picking up the phone to the Tánaiste in case he is going to  
31 figure out we need a Minister for another particular area and I'm just the one he wants. I think I  
32 have enough to do with the four I have and I don't intend to get any more!

33  
34 But I do think that when we start looking at the different ranges, the entire range of how we live

1 our lives and I have responsibility as well for older people, as we grow older, and that's  
2 something we should be very thankful for, because some people are not that lucky, some people  
3 don't make it to old age and those of us that will make it to old age, should consider it a plus, and  
4 when we talk about older people, we shouldn't automatically think of burden, we should think of  
5 contribution.

6  
7 But as we grow older, we will acquire a disability, very few of us will not. Whether it's to sight,  
8 hearing, to fall and break the hip, knee replacement, all of those things. We'll acquire a  
9 disability. So it's not as if people with disabilities are some cohort out there and separate from us  
10 -- separate from us. They are part of what we are, part of community, part of the entire  
11 population and we are only beginning to realise that we need a plan to include, we need to plan  
12 to include.

13  
14 And that inclusion, once it starts, and once we start putting the building blocks in place, will be  
15 significant and there will be no going back. There will be no going back. But central to all of  
16 that is asking the person themselves. The looking into your heart, which in most cases was a  
17 very good thing, and deciding in conscience what the other person needed, has to go, it has to go.

18  
19 When I talk to the parents of people with disability and they are very worried about people with  
20 disabilities being allowed to make decisions for themselves, but what if they make the wrong  
21 decision? I say, I've four kids, they are adults now, and I'll tell you they've made some choices I  
22 wouldn't agree with and they don't have a disability, that's what life is. We make decisions and  
23 sometimes we make choices, which turn out to be the wrong choice and I think people with  
24 disabilities have ever right to make the wrong choice as well. But we'll never know that unless  
25 we talk to them.

26  
27 You've probably gathered from the accent I'm from Cork! I'm very proud of being from Cork by  
28 the way. How come I'm proud of being from Cork? Proud of the fact that from time to time  
29 Cork beats Kerry on matches I often say if we concentrated on one sport we'd be unbeatable, but  
30 we have two and in Kerry they have only one, I'm only saying that!

31  
32 Could I say in terms of being from Cork and being proud of both women and people with  
33 disabilities I was incredibly proud during the week to see Joanne O'Riordan being invited to  
34 address the UN in terms of disability and technology, young woman, 16 years of age from Cork

1 -- but no matter where she is from, I was just so incredibly proud to see her Joanne was born  
2 without limbs and she says "no limbs, no limits!" Which is a great way to be, when I started off  
3 my political career someone said to me, you need to learn standing orders. I said if I learn  
4 standing orders I said I'd have to obey them, so we let that go.

5  
6 So no limbs no limit has a resonance with me that I think is incredible. Joanne talks about  
7 technology and how it assisted her in her life and how with technology there are no limits to  
8 what she can do, she is an incredibly articulate and bright young woman. And you know, where  
9 else could you marry the two things of vision, ambition and technology other than in an  
10 institution of technology.

11  
12 I think the combination of that; the combination of those things will make the future limitless.  
13 We can apply all sorts of things to how we view disability, but really what we should be saying  
14 to ourselves is how do we view the world? And the blue sky thinking, the type of thinking that  
15 had Martin Luther King saying, "I have a dream" surely we are all entitled to dreams? And  
16 surely we are all entitled to have not just our dream fulfilled, but the fact that we should be  
17 allowed to fulfil our ambition to its fullest potential. Surely that's what the world should be  
18 about.

19  
20 We're sending people to the moon, we are looking at Mars, I'm a great advocate of Galileo, who  
21 did not look down, he looked up and when he looked up he saw unimaginable things and that's  
22 what we should be doing.

23  
24 Thinking the unimaginable and with the resources that we have at our disposal we should be able  
25 to deliver all of those.

26  
27 I hope that you will go away from this conference inspired, inspired with a new view of the  
28 world and a view of the world which will be inclusive and which will ensure that those that  
29 depend on us to be generous, to be generous not just with our imagination, but with our space  
30 and with our time, that they will be the beneficiaries of what comes out of this weekend, they  
31 will be the beneficiaries.

32  
33 And don't do to ourselves what we did to people with disabilities, do not put a limit -- do not put  
34 a limit on your achievements. Do not do that. Ensure that people with disabilities are at the

1 centre of what you are thinking about and for them and with them, think, think the unimaginable  
2 and I know you will achieve it. Thank you very much.

3  
4 MR O'FLYNN: Thank you Minister and thank you for your support which let me tell you, has  
5 gone a lot further than mere kind words.

6  
7 It's time now to hear from our host, the Institute of Technology Tralee. It's migrate pleasure to  
8 introduce a man who has been a long time supporter of Adapted Physical Activity, placing the  
9 CARA APA centre at the very heart of his institution and he has big plans which he is about to  
10 tell you about, to go even further. Ladies and gentlemen, the President of IT Tralee, Dr Oliver  
11 Murphy.

12  
13 DR MURPHY: (Welcome in Irish language).

14  
15 Minister, members of the governing body, public representatives, invited guests, representatives  
16 from partner agencies and all of you who commit your lives to providing equity and accessibility  
17 to physical activity for all, I welcome you to this European Congress of Adapted Physical  
18 Activity.

19  
20 In particular I would like to extend a warm welcome to Minister Kathleen Lynch and thank her  
21 for the help and support we received from her.

22  
23 It is indeed a great honour for the institute to host this conference, particularly given that it is the  
24 first time the event has been held in Ireland.

25  
26 The Institute of Technology Tralee has worked to transform the landscape in Ireland in terms of  
27 capacity building and empowerment to facilitate the inclusion of people with disability in  
28 physical education, sport, fitness and recreation, and our achievements to date have been  
29 recognised both nationally and internationally for excellence and innovation.

30  
31 This conference will give us a wonderful opportunity to network, and I have no doubt that some  
32 of the presentations will influence how many of us approach future work and engagement with  
33 communities. You will leave with new ideas, gleaned from the knowledge of this exceptional  
34 grouping of national and international experts.

1  
2 The institute has an impressive track record of achievement in Adapted Physical Activity and the  
3 institute has developed, led and directed a multitude of successful initiatives such as: The  
4 hosting of the national APA conferences since 2003, one of the first Higher Educational  
5 Institutes in Ireland to run an honours undergraduate programme in APA and I'm proud to say  
6 the first cohort of those students graduated last October, the development of an MSc programme  
7 in APA with Palacky University in the Czech Republic, the invitation by UNESCO in 2011 to  
8 present on inclusion at the expert symposium of quality physical education, Campabilities  
9 Ireland which provides children with vision impairments with the opportunity to participate in a  
10 range of physical activities within a residential setting.

11  
12 As the knowledge base and expertise in the institute has grown, APA has moved to the centre of  
13 our strategic focus as a core specialist area, in November 2007 and in response to the nationally  
14 recognised gap in the provision of sport, physical activity and physical education for people with  
15 disabilities, CARA, the national Adapted Physical Activity centre was established at IT Tralee,  
16 supported by the Irish Sports Council and the Institute of Technology, CARA Adapted Physical  
17 Activity centre is the national resource centre aimed at coordinating, facilitating and advocating  
18 for the inclusion of people with disabilities throughout Ireland in sport, physical activity and  
19 physical education. The location of CARA in IT Tralee is a testament to the institute's  
20 progressive, proactive community centred policies.

21  
22 In 2007 the institute secured a grant aid to lead a European project aimed at developing a  
23 teaching resource for the training of undergraduate PE teachers across Europe. The European  
24 Inclusive Physical Education Training EIPET project was a two-year transfer of innovation  
25 project funded through the lifelong learning programme of the European Union. This  
26 programme is based on the successful Adapted Physical Activity modules designed at IT Tralee  
27 and developed with Sports Coach UK, Lithuanian Academy of Physical Education, Palacky  
28 University. The EIPET online course was launched in 2009 and it is available at no cost to any  
29 third level institution that prepares PE teachers. We are particularly proud that this programme  
30 now is being used in Ireland, Iceland, Spain, UK and Finland.

31  
32 Following the success of EIPET and the consequent international acclaim and affirmation  
33 afforded to the APA specialism at IT Tralee, we are committed to further pursuing international  
34 research and intervention projects.

1  
2 This year we are seeking Edu-link funding to continue the roll out of EIPET resources in the  
3 Caribbean and Africa. We are also preparing an application for European Commission funding  
4 to develop the outcomes of the previously mentioned VET project.  
5

6 In conjunction with a number of national partners CARA and the institute is developing an APA  
7 national training and education framework. These partners are detailed with in the literature  
8 provided for the conference.  
9

10 To build on the progress to date, the immediate plans for the institute include the development of  
11 a new international sports academy building. This 16 million euro facility will represent an  
12 example of universal design and best practice in terms of both physical amenities and operation  
13 of services for APA. The academy will house teaching, sporting, cultural and recreational  
14 facilities. This will ensure participation for all in a diverse range of sport. This facility will  
15 become an exemplar of best practice both nationally and internationally. And will enable us to  
16 achieve our goal to be an internationally recognised centre of excellence, to enable us achieve  
17 this goal the institute is currently seeking philanthropic funding.  
18

19 The national centre for Adapted Physical Activity CARA will be housed in the proposed centre  
20 thus furthering the university access goal through it's role in coordinating, facilitating and  
21 advocating for the inclusion of people with disabilities throughout Ireland in sport, physical  
22 activity and physical education.  
23

24 The institute has just submitted an application to UNESCO for category 2 centre designation.  
25 Our aim is to coordinate a unified action towards the lives of people with disabilities, their  
26 families and communities through enabling their inclusion in physical education, sport, fitness  
27 and recreation. This will be achieved by means of education, advocacy and collaboration  
28 between higher education institutions, federations, development agencies, service providers,  
29 users and industry. I would like to thank all those here today who have partnered with us in this  
30 UNESCO application.  
31

32 I would like to thank all those involved in organising this congress, particularly Niamh Daffy,  
33 Linda Raymond, Liam McDonagh, Ursula Barrett and a special thanks to Pat Flanagan.  
34

1 I hope that you find this conference enlightening and fulfilling. And that you will all take home  
2 with you examples of best practice that you will in turn use to improve the lives of others.

3  
4 Enjoy your stay with us here in Kerry. Make sure you take the opportunity to explore and enjoy  
5 our hospitality, wonderful natural amenities and rich cultural heritage. Thank you.

6  
7 MR O'FLYNN: Thank you Oliver, congratulations on all the institute has achieved so far and  
8 best of luck with your future plans.

9  
10 Minister Lynch has to leave us now, Minister thanks again for taking time out of your busy  
11 schedule, Minister Kathleen Lynch. Thank you.

12  
13 Our next speaker is a man at the forefront of European APA, he is a good man, a wise man, wise  
14 enough to award this congress to Ireland. Ladies and gentlemen, the President of the European  
15 Federation of Adapted Physical Activity, Dr Martin Kudlacek.

16  
17 DR KUDLACEK: Failte roimh go lear.

18  
19 First the congress of European Physical Activity was held in year 1986, when I was thinking  
20 about that and I was thinking what I was doing in the year 1986? And to be honest ... I didn't  
21 know a word of English, I lived 5 kilometres from the border with Austria and I was nearly  
22 arrested because I was suspicious at that time, I don't know why! I used to have long hair, maybe  
23 that's why.

24  
25 So it is 26 years, I believe this movement, European movement of Adapted Physical Activity  
26 made a long way. When I think again about myself and you can think about yourself, where  
27 when you were 26 years old and growing in the development of Adapted Physical Activity and  
28 sports science, you can reflect where were you when you were 26? Most likely you had a lot of  
29 dreams, a lot of ambitions and hopefully you didn't think too much about limits.

30  
31 When I was 26 I thought I can go from the Czech Republic to America, learn about Adapted  
32 Physical Activity and teach it back home. I learned that the most I have learned was actually  
33 back home in the Czech Republic. And I'm glad we are learning to appreciate the differences  
34 and good examples that we have in Europe.

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This is a tough time, 2012 everybody talks about bad times and recession and austerity, so there are not many good news on television, or maybe I am watching wrong television, I don't know, reading wrong newspapers! But when I am here in year 2012 I don't feel so bad. I don't think the times are as bad as media is drawing them, I see a lot of talented people that work hard, very hard, regardless of when their pay cheques are being cut at their universities that makes me feel good, it shows me there is a lot of talent in Europe and that Europe and Adapted Physical Activity will be prospering.

There are a lot of examples of good practice and I believe we'll be learning from them. When we discussed yesterday at the board meeting with EUFAPA board members, I would like to thank them for the hard work they do in between the conferences, this is like party time, we come together and we can actually share and see each other and talk, but there is a lot of work in between conferences, so I would like to thank them all the board members and Irish team that did tremendously good job to prepare such a good conference.

We talk about Adapted Physical Activity based on two main pillars, one is science, scientific inquiry and one is professional development. They are the two areas that I believe we'll be learning and growing together.

We'll get a lot of inspiration at this conference from examples of good practice, a lot of challenges; I hope we'll challenge each other colleagues if our scientific inquiry is going in the right direction and if it's rigid enough. And I hope we also will be working very hard on building our friendships. Over a pint of Guinness or good Irish music, in the practical rooms or in the theoretical lectures.

And what is most important, we should keep positive thinking. I think there is not a single person here that does not have tremendous talent and I'm excited to learn about these talents and I'm excited and proud that EUFAPA decided to have this conference in Ireland so thank you very much.

MR O'FLYNN: Thank you Dr Kudlacek. It's time now to hear from our main man, the man most responsible for promoting APA in Ireland. Pat Flanagan is a lecturer in APA here in Kerry since 1995; he started the first academic course in the subject, founded the CARA national APA

1 centre and oversees the European training project. A warm welcome please for the congress  
2 Chairman Pat Flanagan.

3  
4 MR FLANAGAN: Thank you very much, very kind words, I'll be very brief I'm looking  
5 forward to listening to Mary Davis in her keynote speech.

6  
7 Very quickly, when Martin mentioned 1986 I start to feel very old! In 1986 I was teaching a PE  
8 programme and a colleague of Mary Davis and people like Terrence McSweeney, Susan McGill  
9 who runs a centre for adults with intellectual disabilities and Special Olympics clubs rang me to  
10 say that she wanted to bring her adults to share a PE programme with my students and we started  
11 share a PE programme in 1986 and it still runs today and her call and her interest in sharing  
12 physical education with adults with intellectual disabilities, with students who didn't have a  
13 disability but needed to find out what it was like to know someone with a disability and share the  
14 PE programme, so I felt very old when Martin said what we were doing in 1986, maybe too  
15 aware of it!

16  
17 But very quickly, can I just acknowledge the Minister's speech earlier on to me is a most  
18 significant speech that I have heard from any Minister or any political person in this country ever  
19 in relation to disability. It was absolutely powerful. It's very significant that someone at that  
20 level has that level of understanding of listening to the voice of people with disabilities and we're  
21 delighted that she is a friend of our work here and a supporter of CARA and the IT Tralee.

22  
23 And another supporter is about to speak to you, Mary Davis, launched EIPET and Special  
24 Olympics and all it's would work was really the only game in town in Ireland for many years  
25 since 1978 in relation to the provision for people with disabilities, its work and the hosting of the  
26 2003 games allowed us to develop our APA programmes, it was on the back of that kind of  
27 profile and that promotion that allowed us develop our programmes at IT Tralee.

28  
29 I want to finish with three things. The Minister and Martin mentioned it as well, mentioned  
30 challenges. I'd like to give you three challenges for the three days. The three challenges I'd like  
31 to give you at the end of this conference, could we answer three questions.

32  
33 Number one, what can I do to increase the level of physical activity and the quality of physical  
34 activity participation of people with disabilities in my country? What can I do to affect change

1 and increase participation?

2  
3 Number two, and it follows the Minister's statements, how can we, I, all of us, engage with  
4 people with disabilities to guide and direct our APA programmes, teaching and research? How  
5 can we listen to the voice of people with disabilities, a phrase often used, nothing about us  
6 without us, that we get them to guide us on our work, teaching and research. I think we'll make a  
7 major impact.

8  
9 And finally, I think the biggest challenge that faces us all in adapted -- because I know people in  
10 this room are hugely committed to Adapted Physical Activity and put years and years of work  
11 and dedication into it, but there is an area which we need to address and the third challenge is  
12 how in ten years time at EUCAPA 2022, Martin I'm sure will be president at that stage as well,  
13 in EUCAPA 2022 how many of the people in the audience will be professionals working and  
14 delivering in the area of APA, but who have a disability? And that is our major challenge.

15  
16 One of the talks at the congress is Kevin Smith from the national network on our organising  
17 committee as well, one of the programmes we have linked with is a programme called Sporting  
18 Chance, a bridging programme to allow people with disabilities to join the leisure sports,  
19 physical education professions, initially through a programme at the national learning network  
20 and then to go on to third level or work in the industry. That's our big challenge. We need to  
21 invite people with disabilities to participate and we need to encourage them to go on and become  
22 coaches, instructors, teachers and leaders in APA.

23  
24 That's a tough challenge, it will be a difficult conference but an enjoyable conference, hopefully  
25 at the plenary session at the end we might have some answers that we'll all take away with us to  
26 try and achieve some of those or meet some of those challenges.

27  
28 Thank you very much and enjoy the conference. Thank you.

29  
30 MR O'FLYNN: Thanks Pat and thanks to all our hosts here this morning. It's time now to get to  
31 work, to begin the real business of the congress and time to welcome our first keynote speaker.

32  
33 When we talk of advocacy in Ireland and particularly the championing of people with  
34 disabilities, one woman stands above all others.

1  
2 Mary Davis is president and Managing Director of Special Olympics Europe Eurasia, she is the  
3 former CEO of Special Olympics Ireland and was Chief Executive for 2003 Special Olympics  
4 World Summer Games, she is in addition heading the government task force on active  
5 citizenship and the north/south consultative conference.

6  
7 She is a busy lady but she is here to talk to us, ladies and gentlemen, Mary Davis.

8  
9 MS DAVIS: Thank you very much Niall for that introduction, just while we are getting  
10 organised here with the screen and the overheads, good morning everybody. Our Céad Míle  
11 Fáilte, that means hundred thousand welcomes, to our overseas visitors.

12  
13 So say I'm delighted to be here and to join in with the previous speakers in welcoming you all  
14 here and I hope you have a most enjoyable stay, you couldn't come to a better part of Ireland, to  
15 the south coast and the beauty that there is right here in Killarney. So a great welcome.

16  
17 When Martin was mentioning thereabout 1986 and where we were and what we were doing? I  
18 really did feel very old, because long before that I became involved with Special Olympics  
19 straight out of college indeed as the Minister said, in 1978.

20  
21 Then when Pat Flanagan spoke, indeed I want to take the opportunity to congratulate Pat, I know  
22 the President of the college spoke about him, but he really was a trail blazer in relation to the  
23 provision of opportunities and services and training and courses and initiating all that and having  
24 the vision and foresight to see that this needed to be done and not just thinking about it and  
25 talking about it, but actually getting up and doing something about it.

26  
27 But when he was speaking briefly to you he spoke about Susan McGill a colleague of mine, a  
28 physical education specialist, she worked in County Waterford and when Susan started to work  
29 in the area, as I did, back then in 1978 and 1979 we had nowhere to turn. As specialists we just  
30 didn't really know how to approach the whole area of special needs, special education, special  
31 physical education, adapted physical education as it became then.

32  
33 I was talking to Pat last night he was telling me the story about when he met Susan initially, she  
34 said her first class, she had a group around doing some exercise with them and she was showing

1 them exactly what to do and nobody was doing it, none of them were doing it except this one  
2 person, one student Alfred Marks, because Alfred had been in England and had participated in a  
3 physical activity programme in the school that he was in, in England but everybody else, all the  
4 Irish students there in that special needs school in the Brothers of Charity in Waterford just had  
5 no idea what to do.

6  
7 So when you look back then, 30 years ago and you see what we have now, you have to say that  
8 indeed we have come a long way, and it was that thinking that innovation of Pat and wonderful  
9 team that he has in the institute. And many other people like the Susan McGill's of this world  
10 that we mentioned to you as well. Coming together and trying to make change happen and  
11 coming up with innovative ideas, that has really brought us from those times 30 years ago of  
12 aspiration, to the wonderful many achievements that were mentioned and that I will be  
13 mentioning again, that we have today.

14  
15 And even though we still can stay there is an awful lot more to be done, yes of course there is an  
16 awful lot more to be done and we must always have an urgency and we must always have the  
17 interest and the enthusiasm and the creativeness that the Minister spoke about as well, to keep  
18 going, until we do have a truly integrated and inclusive society for everybody. And I think that's  
19 the great thing about having conference here, it gives us that ambition and it gives us that  
20 courage, Misneach we call it in Irish, courage to go on and keep doing things.

21  
22 I was fortunate enough as well to finish off my studies in the University of Alberta in Canada  
23 and I know that Donna Goodwin is here I'd like to obviously particularly welcome her, I didn't  
24 get a chance to meet her last night, but that was my first introduction, a very short, just a couple  
25 of weeks course on adapted physical education, but it certainly did help me in a way to get  
26 started when I started my career working as a teacher in St. Michael's House.

27  
28 So just to go on then to a little bit of detail on what I am doing at the moment, and what we cater  
29 for. I work with Special Olympics Europe Eurasia, that is one of 7 regions around the world, I  
30 know there are many people here not just from Europe in representing 33 countries that are here  
31 but from other parts of the world as well, just so you are aware that there is a regional office in 7  
32 regions right across the world.

33  
34 But in Europe Eurasia we have 58 countries stretching from Ireland and Iceland all the way over

1 to the borders of China, and we work with over half a million athletes and thousands and  
2 thousands of volunteers and family members and teachers, and coaches and we have introduced  
3 31 sports to all of the Special Olympics athletes that participate in the programme.

4  
5 We have a staff of 21 and the main office for Europe and Asia is here in Ireland, it's based in  
6 Dublin, but we have a small office in Brussels and in Warsaw and also in Cologne where we  
7 coordinate a lot of our research projects out of that office.

8  
9 Our job is really all about supporting the national programme so there will be a national Special  
10 Olympics programme in each of those 58 countries and our job as a team and my colleague  
11 Marian Murphy is with me this morning and she works very closely with all the countries in  
12 building capacity, in developing the programme, encouraging them to increase the number of  
13 people, to find and provide places and to provide opportunities and skills development and to  
14 help them to become better known and better funded, because we do find that awareness is very  
15 important and we have been working with agencies like the EU and with Sean Kelly here, the  
16 MEP that joined us as well today, and I know that will be speaking to you later on in the week,  
17 Sean has been a tremendous help to us in securing more resources and opportunities through the  
18 EU to assist us in the work that we are doing.

19  
20 But in addition to the sports, we offer a number of initiatives also and you will see some of those  
21 on the screen, because we believe that the health of the athlete is very, obviously critically  
22 important to their performance, and to the quality of their experience and therefore we offer on a  
23 volunteer basis a health screening programme at all of our events.

24  
25 We also offer an education programme in schools and communities to educate people on  
26 disability, on Special Olympics and encouraging them to become involved with us in the  
27 programme, but more than that, also to raise their consciousness to raise their awareness in terms  
28 of inclusivity.

29  
30 We believe in empowering Special Olympics athletes so we offer an athlete leadership  
31 programme also and then more recently we have begun to introduce young athlete programme,  
32 together with a family programme for athletes from young children from the age of two to six,  
33 because as we all know, if you do get involved in activities at a very young age, the chances are  
34 that you will continue that later on in your life as well.

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So in addition to the day-to-day training opportunities and all of these other initiatives and activities that we offer through the Special Olympics programme, we also offer a number of competitions at local and regional and national and international level. For example in Europe we had a European games in Poland in 2010 and the next games are in 2014 in Belgium. And our last world games was in Athens last year.

Now I'm going to show you a very short clip of a World Games, I could have chosen a World Games from anywhere that they have been organised in the last, since 1968 but I did choose to show you the clip from the world games that were held here in 2003, I know many people in the room were very involved in those games and the theme that I'm talking about is really all about partnerships and people networking and people working together, and it was the coming together of the government of the time, the EU, the corporate community, the thousands and thousands of volunteers and coaches and family members that worked on that project and the thousands of agencies and groups that came together that truly made it a success.

And the reason we did it is because we felt that it would move along the whole area of awareness and involvement and inclusion more than we could ever do in the daily work and in what we were trying to achieve, and that was our whole motivation for saying why don't we just try to organise a World Games? It seemed like a bizarre thing at the time to try and do in a small country like this, but anyway, we went ahead and did it and it became one of the most successful games that have ever been held in the history of Special Olympics.

So hopefully, if the technical bits work now, or my technical person can come back up again, just to change this onto the short video. No?

There we go.

Maybe I'll be brave enough to do it myself!

(Video playing.)

Well there you go, you got a bit of Irish culture, music and everything thrown in there as well.

1 Now we have to escape and get back out again!

2  
3 So that just breaks up all the talk as well, just to allow to you see something visually is always  
4 very nice, but I am as I said a huge believer in the power of team, the power of groups, the power  
5 of people coming together, working together to make something happen and I believe as long as  
6 we can have that sort of joint effort and relationships that we can achieve anything that we wish  
7 to achieve in our lives.

8  
9 And during the conference we are talk to about a range of the subject matter around the area of  
10 Adapted Physical Education or Adapted Physical Activity, rehabilitation sports or research,  
11 etcetera, etcetera over the next couple of days and they are all very much connected and we've  
12 got to see the commonalities, the things that we can share together because it is in a joint effort  
13 that we have a much stronger voice and a louder voice that can enable us to achieve what it is we  
14 want to achieve, that is positive change and progress.

15  
16 This is really why organising the conference here, and it's just so important and it gives us all the  
17 chance, the opportunity to get together and to work together, not just in the formal sessions, but  
18 in the many informal sessions that you will be having as well. It's a chance to expand our  
19 networks and to tackle common challenges and identify solutions and I have no doubt that all of  
20 us will make the best possible use of that.

21  
22 Just to go back to some of the partnerships and I know that a lot of them were mentioned this  
23 morning already in great detail so I'm not going to go into them, but just to mention them, one of  
24 the first great developments in the area as well was through coaching Ireland, you can see the  
25 slide there, the materials and the modules that have I think three different modules developed  
26 through Coaching Ireland, but that happened because there was an inclusive group of all the  
27 disability organisations that came together, together with the Sports Council, I see Peter Smith  
28 here from the Sports Council, and there is a great integration and co-operative effort there as  
29 well and with the local sports partnerships and Sports Council in the North of Ireland as well,  
30 Sport Northern Ireland, and it was that coming together that created that "Coaching for People  
31 With Disabilities" manual that you see there and that is now so useful for, in helping national  
32 governing bodies of sport to provide the specific coaching and training that is required.

33  
34 And is it successful? Well the manuals are there. Now the challenge is getting people to

1 actually use them and getting national governing bodies to incorporate them into their own  
2 training. And it is happening in some cases and that's fantastic, where it is happening. But it  
3 isn't happening in others and it's our job to push that and to ensure that every national governing  
4 body does include these modules as part of the training that they offer.

5  
6 There is also the CARA Centre we talked and referred to that, but there is the national training  
7 and education framework that's there, another great initiative that is being developed and being  
8 led by the institute in Tralee, and I know that Liam McDonagh from the CARA Centre is going  
9 to be talking about that in one of the sessions during the next couple of days, so you have the  
10 opportunity to get to know more about that.

11  
12 Some of the strands of the framework focus on we also referred to earlier the EIPET, the  
13 European Inclusive Physical Education Training module and when I look at that key that has all  
14 that knowledge that you see on the slide, that has all that knowledge and resource and training  
15 and education possibilities in it, I really do think back to those times in the late 70s early 80s and  
16 how we wished we just -- we were eager to have something like that and we didn't, and it's so  
17 great now to think that you have that just simple key that can give you -- open up a whole gate  
18 way of opportunity in terms of training and resources, not just for the trainers themselves for the  
19 people with disabilities that we work with and work also in the area.

20  
21 And you heard, I think it was the President say that it's in five countries the EIPET module  
22 already, that will be extended and I'm delight to hear that is going to be extended and if we can  
23 spread the message in relation to that out into as many countries as possible, then I think that  
24 would be great also.

25  
26 Again in terms of partnerships what we try to do in our work is work with all of the European  
27 agencies so whether it's FIBA Europe or European Basketball or UEFA, we have nine  
28 agreements signed with European federations of sport and we continue to do that in all of the  
29 sports we're involved with. Similarly, so then we encourage the national programmes for  
30 Special Olympics to have the same partnership and collaborative approach with the federations,  
31 the sports federations in their country, and it's when you do have that close collaboration and  
32 working relationship that you then find that governing bodies will begin to include some of the  
33 modules that were spoken about earlier.

1 One of the programmes that I was very excited to start, it started around about 2010 was a  
2 collaboration with the University of Ulster and using the University of Ulster to help Special  
3 Olympics in some of the research that we were undertaking. And really you see it very much as  
4 networking, research, as consultancy and also the provision of education and training, and I  
5 know that the university now are involving PhD students, I think some of them are here, I know  
6 that some members of the university are going to be presenting on some of the research that they  
7 have done in conjunction with us, but there you see us at the European games in Poland in 2010  
8 signing the official agreement in the presence of Timothy Shriver with the university.

9  
10 And to me that's a great step forward, we want to encourage more universities to work  
11 collaboratively with the University of Ulster so for any of you here that are interested in that I  
12 know David Hassan will be speaking during the conference from the university and please do  
13 take the opportunity to talk to them and become involved in some way as well.

14  
15 And one of the research pieces that they did do was in the whole area of unified sport because  
16 unified sports are something that we have introduced many years ago into Special Olympics  
17 programme, because Special Olympics can sometimes be perceived as a segregated organisation  
18 and not a good thing because it's not inclusive, well our philosophy is that we want to provide  
19 the skills and opportunities with the ultimate aim of Special Olympics athletes being totally  
20 integrated and included in community and society at large.

21  
22 And as a step towards that we have introduced a very successful unified programme, basically in  
23 schools and leisure centres, etcetera, where students of equal ability with and without a  
24 disability, an intellectual disability can participate together and that's been a hugely successful  
25 programme for us, anecdotally of course, but we wanted the research to back that up as well, so  
26 we did engage with the University of Ulster to help us to under take a study in that area and it  
27 was a very -- I think there were 200 participant, qualitative study across five countries and these  
28 are some -- I'll just show you a snippet of some of the findings, you can see certainly if you're  
29 interested get all of the findings online.

30  
31 But again you can see there is nothing new in terms of the findings and what being involved in a  
32 unified programme can do in terms of the sports skills and improving the sports skills of the  
33 athletes but also personal skills and having the opportunity to play with people that don't have a  
34 disability and interact with them socially and the confidence and self esteem and discipline that

1 that brings as well and access to places, again very, very important.

2  
3 And there is a lovely quote here from one of our athletes in Serbia where the study was  
4 undertaken to say "We go to the town square to talk, or to the games arcade or for a drink in the  
5 Cafe, these guys from the team know the places to go and where to take us and whenever we  
6 have time we can do that" it just -- sport is not just the physical side, but the social element and  
7 how it opens up opportunities for the athletes.

8  
9 Back to the relationships as well that it builds with people and with the wider community, and it  
10 was interesting to look on some of the findings, the micro culture within unified sports and then  
11 the culture outside of unified sports that still exists, and the way in which unified sports can  
12 provide a bridge and a gateway to social inclusion, so the culture within unified sports very  
13 much everybody working together, the personal development, the inclusive nature of the activity  
14 and how it happens and the positive representation and alliances that can be built and achieved  
15 through that micro culture within.

16  
17 And then outside, that there are still, and we all know, even though we say that we've come a  
18 long way in 30 years, we all know that in our own countries or particularly some countries, there  
19 is very much a segregated lifestyle there and there are negative attitudes and low expectations  
20 towards certainly we find in our area in the field of intellectual disabilities, and the how we can  
21 bring that micro culture of unified sports into the greater culture and greater society. And we see  
22 unified sport as a great bridge to that social -- to the barriers that still exist in relation to the  
23 inclusion of people with intellectual disabilities.

24  
25 We have one partner who is involved in the unified programme saying "I am shamed to say that  
26 I used to laugh at these people, now I will tell anybody to stop laughing", so you can read that  
27 for yourself, but it shows you that if you're not involved, not engaged you can have a much  
28 different perception sometimes than when you are totally engaged.

29  
30 So just to show you that again and reiterate, just the point in relation to the move from unified  
31 sports then into the total culture of inclusivity which is ultimately what we are striving to do and  
32 if unified sports is the way to do that, then the next step is totally out of Special Olympics  
33 altogether and into community activities, then that's where we would love to be.

1 Many of us say in our work it would be great if we were totally redundant and there wasn't a  
2 need for a programme like Special Olympics because it was an every day part of society and the  
3 involvement for people with an intellectual disabilities, but of course we all know that that is not  
4 the case at the moment.

5  
6 Here we have another partner from Poland talking about the stereotypes about people with  
7 intellectual disabilities that keep us away from each other, the fears that they have, but once you  
8 are part of unified programmes, the way that you can break down those fears and overcome the  
9 barriers and be full participants.

10  
11 Coaches play a very important part as well in helping our athletes as we know, in across all types  
12 of sport and there is another quote just as part of the study from one of the coaches in Hungary  
13 saying the importance, how useful the coach can obviously be, not just in coaching, but in other  
14 aspects of the person's life and once a trust has been built up through the unified programme and  
15 there is a belief there, it's part of what they do as unified coaches.

16  
17 I'm just going to show you another short video, I know we're strapped for time at the moment,  
18 but I'm going to show you a short video just in relation to unified of two partners, I'm going to  
19 try and do this again. Here we go.

20  
21 But it's basically of two partners from Romania, who are involved in the unified programme. It  
22 just gives you an idea of the interaction and how they work together.

23  
24 (Video playing)

25  
26 So that gives you some idea of what the unified programme means to the athletes, and just to  
27 finish with, I came across a wonderful story of an Israeli athlete involved in the tennis centres I  
28 know there is somebody here from Israel I'm sure you are familiar with the tennis centres, tennis  
29 was his first love though he was involved in many other sports as well, but his great desire was  
30 to join the Israeli Army that's what he wanted to do and that was his lifelong ambition, and there  
31 is a wonderful picture of him with the chief of staff and the Minister of Defence because his  
32 ambition was fulfilled and when you talk to him he will say that it was because of the skills he  
33 had learned in tennis and in swimming, it was because of the confidence he got, the self esteem  
34 and the discipline through participating in sport that that is what gave him the key to being in

1 what was his lifelong ambition, of being a part of the Israeli Army.

2  
3 And I thought that was just a lovely story to finish with. "Just give us a chance", that's what our  
4 athletes say, and it is up to us to ensure that every opportunity through the work that we are  
5 doing is provided, so that the lifelong ambitions of every single person are met and everyone can  
6 take their place in society with great dignity and respect.

7  
8 So thank you very much, enjoy the rest of your stay here in Ireland, in Killarney, I know you  
9 will have a wonderful time and I hope you have a very successful conference.

10  
11 Thank you.

12  
13 MR O'FLYNN: Thank you Mary Davis the best possible person I'm sure you will agree to get  
14 this cop influence off to a great start.

15  
16 I'd like to welcome too one of our senior MEPs Sean Kelly he is not speaking until tomorrow but  
17 still here today, welcome Sean, another great friend of the CARA centre.

18  
19 We're going for coffee break but before you rush off just small items of housekeeping, each item  
20 will affect one or other of you.

21  
22 Firstly the parallel sessions start at 10.45 sharp, please feel free to move around, choosing the  
23 talks at every break which best suit you, all sessions are colour coded to facilitate access.

24  
25 There are practical workshops at every session but places are limited.

26  
27 The dance workshop at 10.45 for example is now totally booked out, so to avoid disappointment  
28 please sign up at the registration desk.

29  
30 Take the opportunity too to sign up for our cultural programme, tonight you can choose between  
31 heal to surf at Inch beach or GAA, our national games, and there is a cultural programme there  
32 as well. You can also sign up for the cultural programme at registration.

33  
34 API Mobility for those who are interested will be doing a demo of the pool hoist in the breaks

1 between sessions and some quick notes for various groups: Can the APA VET group meet at  
2 lunch please. The Scientific Committee you will be meeting at Muckross B at coffee after lunch  
3 2.35.

4  
5 Can I remind the poster presenters to be at your stands from 4 pm to 5.30. Can you also indicate  
6 if you wish to be part of the poster competition?

7  
8 Finally, and crucially, oral presenters those of you making presentations at the parallel sessions,  
9 the five of you who have not yet up loaded your presentations, please do so now! You have only  
10 about 15 minutes before your session starts.

11  
12 Can you be present at the start of each parallel session, and also please complete and hand in to  
13 the registration desks the small information sheet relating to your presentations so people will  
14 know the basis of what you are talking about and get a better idea of the sessions they want to go  
15 to.

16  
17 So everyone, coffee now, parallel sessions start at 10.45, see you all then. Thank you very  
18 much.

19  
20 Coffee break

21  
22 Javier Soto Rey: Study of visual reaction time in athletes with and without hearing disability:  
23 sports applications:

24  
25 MR SOTO REY: That's why you'll find in every session over the next three days a practical  
26 workshop, teaching best practice in a sport application.

27  
28 Starting system in athletics will visually stimulate deaf athletes. Adaptation is to allow inclusive  
29 practice of hearing impaired athletes. Examples of competing with athletes without disabilities.

30  
31 Before I start to speak about reaction time, I would like to speak about the importance of reaction  
32 time in sport and mention this author, Henry, Drouin, Larvier, Sampedro and Martinez.

33  
34 There are a lot of definitions of reaction time, but I select this, the amount of time since the

1 appearance of a stimulus to the initiation of the corresponding response (Tudela).

2  
3 Some studies found that people with sensory disabilities compensate for their deficiencies with  
4 further development of other sensory pathway (compensation mechanisms) as in the case of the  
5 deaf.

6  
7 However in relation to athletic population without studies distinguishing between people with  
8 and without disabilities, which in our opinion will have determination application on the  
9 development of inclusiveness in competition. The aim of the study is to analyse the difference in  
10 reaction time to a visual stimulus in athletes with and without hearing disabilities, in a sufficient  
11 sample of physically active people.

12  
13 The method was -- (inaudible) methodology was used, comparing visual reaction time  
14 performance to a given stimulus between a group of people with hearing impairments to another  
15 group without disabilities. In addition, both groups were characterised and studied in terms of  
16 gender, sport level and type of sport practiced.

17  
18 The study involved 80 volunteers without disabilities, all students of the faculty of physical  
19 activity and sports science INEF of the Polytechnic University of Madrid, aged between 18 and  
20 35 years, and 44 deaf athletes, volunteers from the Madrid Federation of Sports for the Deaf and  
21 the Spanish Federation of Sports for the Deaf. Aged between 16 and 26 years old.

22  
23 They were all healthy people, all had slept enough, and did not take substances that might alter  
24 reaction time, exciting or depressing substance unless an individual without disability.

25  
26 The final sample was composed of 79 persons for the group without disabilities of which 59  
27 were men, 74%, and 20 were women, 26% and a group of 44 hearing impaired persons of whom  
28 27 were deaf men, 61% and 17 deaf women, 39%.

29  
30 A record sheet designed for the purpose of collecting data from each participant was used,  
31 gender, age, practising sports, competing sport, length of time competing in the given sport,  
32 medication consumption at data collection time, energy drink consumption or any other  
33 substance that could alter reaction time and number of hours of sleep that day.

1 To measure reaction time super lab pro was used, the experimental protocol was experiment  
2 reception, information on the subject and completing the record, carrying out the experiment  
3 with the reaction time measures (super lab).

4  
5 Distribution and normality were evaluated with Kolmogorov test, normal results were found for  
6 each of the variables so parametric statistics were applied. Student T test for independent  
7 samples was performed. Statistical analysis were conducted in SPSS version 18. Significant  
8 levels was established at P less 0.05 -- sorry for my English!

9  
10 The results this is general descriptive statistical results for visual stimuli regarding group. The  
11 group without disability is 0.322 and the group of hearing impaired, deaf, is 0.252. So the group  
12 of hearing impaired is 44% and the group without disability is 79 person.

13  
14 We're going to find the difference between men and women, there are significant differences.  
15 The group with disability hearing, deaf, are -- is the best, have the best results, are quicker with  
16 their reaction time than the other group.

17  
18 And inside of the group without disabilities men have better results than women.

19  
20 There are significant differences between groups without disabilities and with disabilities in  
21 collective and in the individual sports. We can see the difference in this PowerPoint.

22  
23 We can see that result for person with disabilities, the results are better than the group without  
24 disabilities.

25  
26 In conclusion, reaction time to visual stimuli was lower for hearing impaired athletes than for  
27 athletes without disabilities. Reaction time visual for hearing impaired athletes less than reaction  
28 times for athletes without disabilities.

29  
30 We need to develop a starting system with visual stimuli instead of sound stimuli for deaf  
31 athletes. This will enable them to compete on an equal situation with non-disabled athletes.

32  
33 Now we are going to see what this picture shows, a person with or without disabilities? In the  
34 first picture we can see that he is deaf, because he has to have his eyes all the time in front to

1 remind him to view.

2  
3 We have to develop the deaflympics light system, like the picture.

4  
5 (Video playing)

6  
7 The people who wear yellow shirt are deaf.

8  
9 The orange line that appears in the picture, you can find better results with the light design than  
10 in the other one.

11  
12 We can see athletes seeing adjustments in the outputs, lighting devices, powerful shot from the  
13 gun and flags, etcetera.

14  
15 The red circles are the adaptation in this case, in team sports like football or volley ball,  
16 adaptations to whistles, handkerchiefs, lighting devices on the back of the goal posts and lights  
17 on the board etcetera.

18  
19 We can see that there are some sport stars that participate in inclusive sports like these sports.

20  
21 In the case of the swimmer, Terrence Parkin, he used a lighting device and Miha Zupan used, he  
22 has with him always his translator.

23  
24 Lance Allred is the first deaf player in the NBA.

25  
26 And Rajeev Bagga is the 14th ranked in IBF.

27  
28 Frank Bartolillo he is deaf, he can't communicate very well with his mouth, so he can  
29 communicate with his body.

30  
31 Tamika, she just went deaf but now she is playing and she didn't stop playing basketball.

32  
33 Finally, this is the INEF, faculty of Madrid where will be CA PA 2014, so thank you very much  
34 for listening, thank you very much for your attention.

1  
2 End of Presentation

3  
4 CHAIR: Thank you to Javier and Mia and Carmen, we have a couple of minutes and if we have  
5 any questions we can take them now rather than wait until the end we may not have Mia, any  
6 questions on what was a really interesting presentation, in keeping with the conference evident  
7 based research, you can see the practical applications, I was surprised by the level of difference  
8 in terms of performance between people with disabilities, people without, it was very significant,  
9 and clearly they have highlighted some of the practical applications around that.

10  
11 So we'll take some questions, if anybody is interested. You are here for a reason, so hopefully  
12 now here is your opportunity to join the conference.

13  
14 Even one? No. Okay, well then once again I'd like you to put your hands together and thank  
15 Javier and Mia and Carmen.

16  
17 Our next presenter is Kevin Smith from the national learning network

18  
19 We have two presenters Kevin Smith from the National Learning Network in Kerry is going to  
20 present on a programme called Sporting Chance, which is a programme providing education  
21 qualifications in the sport and leisure sector for people with disabilities.

22  
23 Kevin is the coordinator of the Sporting Chance programme here in Tralee, recently completed a  
24 masters in health promotion and has a great interest in Adapted Physical Activity for people with  
25 disabilities and their participation in sport. So I'd like to welcome Kevin for his presentation.

26  
27 Kevin Smith & Peter Bounds:

28 Sporting chance – providing education and qualifications in the sport and leisure sector for  
29 people with disabilities.

30  
31 MR SMITH: Good morning ladies and gentlemen, my name is Kevin Smith and I'm the  
32 coordinator of the Sporting Chance in National Learning Network, this is Peter Bounds over to  
33 the left-hand side, Peter is a former student of the sporting chance programme and Peter is going  
34 to speak to you as well about his experiences on the course as well.

1  
2 Sporting Chance is a course that's aimed, I use the word disabilities very broadly but aim to  
3 provide people with disabilities with the qualifications and experience for a career in the sport  
4 and leisure industry. We cater for people who are also maybe out of work because of injury, or  
5 illness, they could be recovering from injury or illness for example it could be things like Lupus,  
6 Crohn's disease, people recovering from cancer, heart conditions and then injuries such as  
7 Osteitis Pubis and people with me reconstructions it can be injuries or disabilities, we have a  
8 wide range of students on the course.

9  
10 The course is two years full time and we cover a mix of theory practical and community based  
11 work, so the idea is that people get a fully rounded qualification, not just the theoretical  
12 qualification, but also qualifications in actual coaching and practically working with people,  
13 which is very important for many of the people that come in to us, because they may not have  
14 been previously involved in local community groups or even at any time it may have been a  
15 while since they were involved.

16  
17 Just a quick background on why the course commenced, back in 2007 the course began and Pat  
18 Flanagan the chairperson of the EUCAPA conference here was actually one of the influences on  
19 the programme, I suppose with Pat and the manager of the National Learning Network in Tralee,  
20 Pat O'Neill they had a number of informal conversation, they recognised that there was a  
21 demand there for a course, in particular in the National Learning Network centre there would  
22 have been a lot of people coming in with a strong interest in sport, but wouldn't have felt they  
23 had confidence or capabilities to go to third level, so they recognised there was a gap there.

24  
25 National Learning Network was a training centre part of the Rehab Group, so part of that reason  
26 the NDA did a report back in 2005 which recommends an increase in the number of people with  
27 disabilities employed in the sports and leisure sector, but yet there was for many people with  
28 disabilities they are still very much under represented particularly at the Institute of Technology  
29 level, due to lack of funding from the Higher Education Authority to provide the necessary  
30 supports required.

31  
32 For a lot of people coming out of school they were in a supported environment where a lot of  
33 needs were met and then to go into third level environment where you have to actually disclose  
34 your needs and you have to do educational reports if you have a learning disability or mental

1 health disability, there's a lot of work involved, not just a case of going in and saying to the  
2 lecturers that we need extra supports.

3  
4 So we were established in 2007 and I suppose it's slightly different than a lot of other PLC  
5 courses, we see ourselves very much as a bridge way to third level, but also many of our students  
6 progressed on to employment as well.

7  
8 Firstly it's a two year course and that's in comparison to many PLC courses which would be nine  
9 months running from September to May, so it allows people extra time to gain the qualifications  
10 that might be required, and in addition to that students aren't under as much pressure, for  
11 example they do an ITEC gym instruction in diploma if they feel not ready for the exam they  
12 don't necessarily have to do it straightaway, we can spend a little more time working with them.

13  
14 In addition we have individual one-to-one supports, so in the classroom it's not constant classes  
15 thrown at them, not a constant 9 to 10, 10 to 11 where there is a roster there is a lot of time for  
16 self directed work and it gives us, the instructors, a chance to spend one-to-one time and assist  
17 people where necessary with any difficulties that they might have.

18  
19 As I said already an individual can work at a pace suitable to their ability, it's not a rush to get  
20 eight Fetac level five completed in an eight month period, there is two years and that's a lot of  
21 time and we found it works very well and people who would have come in and started at Fetac  
22 level three are now towards the end of the two years and finished the major award at level 5,  
23 some of those students might have thought it would never be possible.

24  
25 One of the latest developments we have is a very good relationship with the college in Tralee  
26 and that we have an agreement now that two places will be reserved on the health and leisure  
27 courses starting in 2011, so specifically for students from the National Learning Network and  
28 Sporting Chance programme. They will have the -- once they meet certain criteria they will gain  
29 entry into the college.

30  
31 We provide a wide range of qualifications, so Fetac modules at level 3, 4 and 5, so slightly  
32 different to other PLC courses in that they are mainly just level 5, we can cater for level 3 or 4  
33 depending on the individual and they can work their way up, some people started at level 3 and  
34 are now completing level 5.

1  
2 We also have core modules and one of the key ones is ITEC gym instruction diploma, people  
3 when they leave us are at least qualified to work in a gym environment.  
4

5 One of the more unique aspects is the practical experience where people are out in the  
6 community and gaining, it's not just work experience where they work in the gym one day a  
7 week, we are very much involved in the community groups, one is GAA coaching for children  
8 with Dyspraxia where we are in partnership with HSE, occupational therapy unit and twice a  
9 month we run Gaelic sessions for children who might require additional sports and need  
10 additional coaching they might not get at the club.  
11

12 In recent times last Wednesday 19 students were assisting Darren Ahern, the officer in Kerry  
13 with the national school, that was fantastic, some were refereeing, some lines men and some  
14 administration, but for all it was a fantastic opportunity to see how an event like that runs, there  
15 were 24 schools, 6 pitches in operation at any one time. We had some students who, one of the  
16 students for example has Aspergers doesn't do a whole lot of talking, but extremely  
17 knowledgeable about soccer. He has almost achieved his Fetac level 5 award and refereed five  
18 games, including the final of the girls competition and that gives him extreme confidence and  
19 makes him realise what his abilities are, I know from talking to his family they are delighted and  
20 feel the improvement, not just about qualifications but his own confidence and communication  
21 skills, he is talking a lot more, spending more time at social events and occasions.  
22

23 Our students have also been involved in Campabilities and again that's a fantastic experience in  
24 working with people with disabilities and actually leading events and leading groups and there is  
25 a bit of responsibility being placed on many of our students.  
26

27 This is just a picture of the chair aerobics special session not only are our own students benefits  
28 but all the students these are three of our students doing a class with one of the other  
29 programmes, so everybody is benefiting and you are getting exercise opportunities for people  
30 who might go home in the evening and not normally do anything, you can see the smiles on the  
31 face, everybody is enjoying it, again confidence has grown for not just the three candidates there  
32 but all 24 people that we have on the programme at the moment.  
33

34 I suppose again we provide a lot of supports to individuals which they may not get at other PLC

1 courses, so for example we have a resource teacher, if anybody has any difficulties with reading  
2 and writing, literacy, they are small classes and it's very small teacher pupil ratio and they can  
3 get up to four or five hours a week assistance with their literacy skills if required.  
4

5 One of the great barriers for many people with disabilities is transport and we have a bus in our  
6 centre and that will collect people, it comes from north Kerry, Listowel and that is about a 15  
7 mile radius, and it will collect people in the morning and drop them home in the evening, that's a  
8 significant barrier that's reduced by enabling people to come to the centre. And we also have in  
9 the centre a rehabilitation officer, we provide assistance with things like housing, allowances, it  
10 could be getting family, getting fuel allowance -- again financial issues are a big barrier for many  
11 people with disabilities coming to participate in a course like ours, so that takes away a lot of the  
12 stress and allows them concentrate on getting qualifications and work experience.  
13

14 What I might do at this stage is let Peter talk a little about his experience from a student's point  
15 of view and where maybe the course has led him and I'll just finish off giving you a little on the  
16 outcomes of the course and where people ended up.  
17

18 MR BOUNDS: Thank you, good morning everyone. Thanks Kevin, as Kevin said basically I  
19 was a member of the Sporting Chance programme, so just in a brief explanation or summary of  
20 my 12 month experience within the programme, how I came to joining and coming across the  
21 programme itself, what personally for me it helped me and showed me throughout the 12 months  
22 and from beyond where I have got to career change wise after the programme had finished.  
23

24 So if I start from the very beginning, basically what led me to the sporting chance programme,  
25 from Australia myself, I came travelling 15, 16 years ago now, my wife is from Tralee so I  
26 settled and stayed here, quite happily, two kids, everything going smoothly, working in a sales  
27 career, I developed rheumatoid arthritis so the year 2009 as I said there was the year my happy  
28 home changed.  
29

30 Our second child when she was born my wife had given up work, I was the sole provider for the  
31 family, prior to 2009 I had been involved in the tourism industry in Australia working on the  
32 Barrier Reef and I worked out in the mining industry, so had done quite a range of jobs but there  
33 were none of those available to me when I came over to Ireland, so I fell into the sales career, got  
34 up to management level as I said everything was going smoothly. I have always been interested

1 in sport, water sports mainly on the Barrier Reef and coming from Australia you are sort of  
2 immersed in that lifestyle anyway, rugby league, GAA since I have been in Ireland so there was  
3 a wide interest in sport anyway.

4  
5 As I said 2009 the diagnosis of the rheumatoid arthritis the main thing I had, I was off work for  
6 18 months or more until the medication improved my condition, but I had a great family support  
7 which I have to pay tribute to my wife, she was wonderful throughout that, but there was always  
8 a feeling of what next? I didn't really know where to go next, what was available, what I was  
9 going to do as a career or as the provider for the family.

10  
11 I went into FÁS, which had a career assessment tool, which gave a summary of interests, likes,  
12 abilities, level of academic responses to this tool that they had, it brought up everything sport,  
13 everything active, involved with coaching or teaching, those type of scenarios, so I was given  
14 Kevin Smith's name, so we had a meeting, that was late or mid 2010 and from the word go it was  
15 actually as if you'd found, come across the Lotto it was really positive.

16  
17 The first feelings that I had with meeting Kevin and his colleague, Una Flynn, the doors were  
18 open, there was no hiccups at all as Kevin said, there were people there for financial support  
19 discussions, there were people to discuss the options, through the course what it could provide  
20 and beyond, and whether it be into a career in gym instruction, coaching, further studies into the  
21 IT Tralee there was a pathway as Kevin said into that stream.

22  
23 So immediately it really focused the mind, focused the attention as to what to do next, and that  
24 positivity helps anyone's situation whether it be just joint aches and pains or a feeling of  
25 non-belonging or change of what next. So it did open up a new direction and opportunity for  
26 me.

27  
28 One of the major benefits, at the time when I joined I was thankfully I'm feeling much better  
29 these days and medication is working for me, but at the time I was still suffering from a  
30 numerous amount of flare-ups with the arthritic pain so self paced learning really helped, they  
31 were very understanding and again positivity from the centre itself was never anything that  
32 restricted your participation, so the self paced learning really helped you achieve what you could  
33 in your own time, whether it be as Kevin said throughout the whole two years or in my instance  
34 it was 12 months, but the supportive staff, classmates everybody was there, you weren't sure who

1 was there for what or why, but it didn't matter.

2  
3 Everyone was really helpful towards each other, in the classroom environment they were small  
4 enough classes, you could then move on to smaller groups if need be, but everyone supported  
5 and helped each other.

6  
7 The assistance available as Kevin said, there were people there for time constraints, if you need  
8 to slow down the learning you were at the level you could be, that opportunity there was as well,  
9 the financial advice and any medical problems that you had, they could be talked through and  
10 understood all confidential and in privacy as well which was another support.

11  
12 Then from it you got qualifications and practical skills to change, in my situation anyway change  
13 career path, which was an amazing positive effect for my future. And again for myself it gave  
14 me the pathway to further study and employment afterwards.

15  
16 In my 12 months I was able to achieve the Fetac level 5 major award, there are a number of areas  
17 of that eight or nine, but for instance the human biology and kinetics, health related fitness, team  
18 working, sport and recreation, we had the coaching from GAA and Kick-start FAI coaching, I  
19 had the gym instruction, ITEC diploma and sports massage as well.

20  
21 But from a personal perspective I have always been involved in water sports and water activity  
22 so Halliwick was a concept I was not familiar with, I was lucky to be introduced to that, I have  
23 now achieved the Halliwick instructors certificate it's basically a movement in the water process  
24 founded back in the 1950s for people in wheelchairs to be able to participate with the swimming  
25 carnivals and at their own pace and through movement and body motion, you can swim, there is  
26 no denying it, so it's a fascinating area to be in. I'm working at the moment with a hydrotherapy  
27 session, which I'll come to later on, but through the Sporting Chance I was able to get the swim  
28 teacher qualifications for people with disabilities, it's further -- where I'm at now with the health  
29 and leisure studies, I am working for able bodied people as well but it's a very rounded  
30 swimming environment that I'm focusing on.

31  
32 The practical culture of the sporting chance, areas of interest are encouraged whether it be water  
33 activities and hydro therapy or as Kevin mentioned one of the other classmates was focused on  
34 soccer and his football, so whatever the area may be, you are encouraged. If you don't know

1 how or why or where to source those details and information, Kevin and Una or others in the  
2 centre will really bend over backwards to find those places for you and then they will support  
3 you along the whole way.

4  
5 One of my first experiences within the course was only a few weeks I was in Sporting Chance I  
6 came across Surf to Heal operation that we'll be talking about later in the conference, which is a  
7 fascinating and fabulous movement or programme for people on the autism spectrum, it's well  
8 worth a listen to Thomas' speech later there is a practical session this evening as well.

9  
10 I volunteered for that and was overwhelmed with the possibilities in that field and the experience  
11 really touched me to be honest to go on that career path, I found the effects of undeniable, again  
12 the Halliwick swim teacher work, experience through that, I was working with Enable Ireland in  
13 Tralee, group therapy sessions for people with arthritis, completely coincidental -- that was just  
14 the way it fell, but also people with Spina Bifida, knee reconstructions, it was a complete wide  
15 variety of people in the group.

16  
17 Then Campabilities as Kevin said we were introduced to that, people with vision impairments.

18  
19 So after sporting chance I was fortunate enough to qualify and my grades were acceptable to get  
20 onto the Bachelor of Science health and leisure in IT Tralee, I have finished my first year, exams  
21 this week and next week, I'm delight to say it's all going well. I was continued working with  
22 Arthritis Ireland in hydrotherapy and we are running four people group sessions and then another  
23 physiotherapist in town that I'm working with at the moment for one-on-one practical sessions as  
24 well within the hydrotherapy pool, it's going very well, from a personal side it helps my joints so  
25 it's a positive all around.

26  
27 The swim teacher qualifications and initiatives we are running here in Kerry through the local  
28 sports partnerships another thing I was involved and APA is my career objective with IT Tralee.

29  
30 Just on a final note before I bring Kevin back up to summarise again, Sporting Chance really did  
31 clear the haze for me at a time when I was lost for direction, out of any sort of aim for 12 or 18  
32 months, it gave me the confidence and broad skill-set in whichever field you are interested in to  
33 open the door to new opportunities and experiences and it led me to the career path I'm on now,  
34 so I can't thank Kevin enough now and Una for the course.

1  
2 I feel everyone in the course has the same experience, whatever field or outcome they have. So  
3 thank you. I'll just bring Kevin back up.  
4

5 MR SMITH: I think Peter is an example of a lot of the student who is have gone through the  
6 course, fantastic attitude, came in as he said, wasn't sure where he was going, but really has  
7 taken the opportunity and that's why the course initially was called Sporting Chance, it's about  
8 getting a chance and taking it and Peter is one of ten of our former students who have actually  
9 progressed on to third level, so we have at present, we'll have two former students graduating  
10 this year with honours degrees from two different colleges, IT Tralee and Waterford IT. We  
11 have been only in existence since 2007 so they spent a year with us and progressed to third level  
12 straightaway.  
13

14 In fairness to both of them, they have come back and said that neither would have had -- they felt  
15 they wouldn't have had the confidence to go into third level initially, so they felt the little support  
16 they got from us gave them a bit of confidence and that's what it's about for a lot of people, really  
17 giving people some skills and giving them a little confidence and making them realise yes you  
18 can do it.  
19

20 Again just to finish off just on the supports that we provide, the qualifications as Peter said are  
21 adapted for each individual. So we have what's called continuous intake, we don't take a block  
22 of people in September, basically the way the National Learning Network works is if somebody  
23 finishes in June then somebody else starts in June to replace them, if somebody else finishes in  
24 October somebody else starts at that time to replace them, as Peter said he did 12 months other  
25 people may need two years, that's up to the individual, we always say that, you don't worry about  
26 anybody else, you worry about yourself, that worked very well, because it allows people that  
27 they are not in a panic, no rush, see other people going out the door early, they can relax and say  
28 I have the time if I need it.  
29

30 As Peter said as well that's very important, with some people, maybe with an illness that may  
31 flare-up from time to time they may need additional time off, that's a big comfort to realise that  
32 you have that and the support is there that you can just take a couple of weeks to get yourself  
33 well again because we always say health is the most important thing.  
34

1 Just with regards preparation for work as I mentioned already some of the practical experience  
2 which has been fantastic, but only yesterday one of our current students started part-time  
3 employment with a large leisure centre here in Kerry doing swim teaching and he will be,  
4 hopefully there is potential for full time employment out of it, so he got that from just doing the  
5 swim teaching qualification, then he got a little work with Kerry Recreational Sports Partnership  
6 on the Swim For All programme, he was spotted swim teaching by one of the managers of the  
7 leisure centre and they are after offering him part-time paid employment.

8  
9 He is just one of a number, there is six other students who also gained employment in the Swim  
10 For All programme this year. So far to date in 2012 we have four of our students who have gone  
11 on to employment, now that may be either paid employment or could be work placement  
12 programme, but it's regarded as employment and the hope for work placement programme would  
13 be that they would be kept on after it, but working a full 36 hour a week jobs, so again massive  
14 progression from where many of them might have been two years ago.

15  
16 Just again, unique partnership with IT Tralee, we use a lot of the facilities there without the  
17 support we wouldn't be able to run the programme. The HSE Occupational Therapy Unit, Kerry  
18 Autism Services, FAI, they are different groups we work with and they have given great support  
19 and it allows the students to become involved in practical experience and as you probably know,  
20 for many people with disabilities social exclusion is a big problem. So this gives people to a  
21 chance to go out and work in communities.

22  
23 One of the other areas we encourage strongly is in their own time, when they finish in the  
24 evening time they don't go home and sit down, go to the local club and get involved that worked  
25 very well where a number of students are coaching soccer and GAA clubs in their home  
26 parishes, they are making contacts, getting out there and people looking at them and by doing  
27 that there is a chance of gaining future employment.

28  
29 Our outcomes since we started in 2007, 78% of students have progressed to employment, third  
30 level or further training, for example one student specialised in massage and went on to study  
31 that and gain ITEC diplomas.

32  
33 Ten students progressed to third level and eight so far to date have gained full time or part-time  
34 employment.

1  
2 So really what it is, it's instilling confidence and it's empowering the students to set higher  
3 targets, very many people, whether they are born with a disability or whether the disability is an  
4 onset throughout life, very often when they go to doctors and medical services they are told they  
5 can't do something. That's very often a problem we find, I can't exercise, I can't do this.

6  
7 We come with the other option, yes you can. You may not be able to run a marathon, but you  
8 can do something, it might be only a stretching session but you can do something. So in our  
9 practical sessions we don't allow people not participate, they do something, they may not be able  
10 to do the full session, but that doesn't mean that you can't teach it.

11  
12 So because somebody might have a bad me that doesn't mean that they can't be a good coach or  
13 gym instructor.

14  
15 We expect students to attain an outcome, so again taking away previous low expectation, we are  
16 taking that away and saying yes you can, we are providing supports and job seeking skills,  
17 setting up CVs and things like that.

18  
19 I think it's proven that anybody with the right supports and with the proper confidence they can  
20 achieve very highly in the sport and leisure sector both in qualifications and employment.

21  
22 Thanks very much for your time.

23  
24 CHAIR: Thanks to Kevin and Peter for an interesting presentation, a different viewpoint and I  
25 think one of the things we saw was the presentations echoed each other in the sense of the ideas  
26 that they were communicating.

27  
28 I think again going back to our keynotes this morning, Pat Flanagan mentioned three challenges  
29 and one of the challenges was the idea that we go into 2022 that if we have leaders who are  
30 people with disabilities, I think a programme like the Sporting Chance programme is possibly  
31 one of those type of programmes that can help make those leaders of the future.

32  
33 We have a few minutes left, I don't know if anybody has any questions for Kevin or Peter? I'm  
34 sure they'll be happy to take them.

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Q. Just three very short questions. One; how many people are on the course at any one time? Second one is, are there any other Sporting Chances in the country? And the third one is, you mentioned a rehab officer and I'm just curious about the background of that member of staff, what qualification that person has?

MR SMITH: At any one time, 24 is the maximum on the programme, we have got two instructors myself and Una as Peter said, it's a one to 12 ratio but we also have supports like the resource teacher so there could be, for example, six of our students in with a resource teacher, so normally it's not, or people out on work experience, it's not normally 24 in the class at any one time, but that number is fine, we are well able to work in that.

The rehabilitation officer is the, the background, she is not a counselor, she would -- I suppose the background is coming from that area but her role is as an advocate for the students, so if they have any issues, it could be personal issue they need to talk to her about, she is not a counselor but she'll be able to refer them in the right direction. They could have personal problems at home, for example we have many students with mental health difficulties just going through a bad patch, maybe not being well at that particular time, she is there to guide them through that, it could be allowances like disability allowance or even travel allowance or fuel allowance, so any sort of assistance that they need in anyway, any information, anything really she is there to try and guide them in the right direction. What was the third part?

Q. Sporting Chance anywhere else?

MR SMITH: My manager doesn't want me to say about any others, there is one established in Castlebar in Mayo that's up and running about three months and there is plans for one in Roslin Park in Head Office in Dublin as well.

Q. Will they all be associated with National Learning Network set up?

MR SMITH: They are being run by National Learning Network yes, in National Learning Network Castlebar and Roslin Park and we are trying to make sure ours is the one that people want to come to.

But there is a need for them, regionally because in fairness, transport and accommodation, although we have people who came from all over the country, Dublin, Mayo, we actually have a guy from Mayo with us at the moment, Waterford. But we do find that there have been a lot of

1 people interested but just trying to get accommodation, transport, being so far away from home  
2 and leaving the supports that they have set up is just maybe a little too much for them, so there is  
3 need, initially it was flagged maybe there might be one in Waterford, Dublin is set up and one in  
4 the west as well.

5 SPEAKER: Thank you.

6  
7 Q. Are any of your courses offered online or through distance or is it just full time, you must  
8 attend?

9 MR SMITH: At the moment it's full time, but we are National Learning Network are piloting E  
10 learning at the moment and it is hoped that there would be some moves made in that direction,  
11 but I don't have a timeline on it as of yet, but it's definitely something we are looking at, and a lot  
12 of our resources have gone online within the organisation, so it's going very well so far, we hope  
13 at some stage it might happen.

14  
15 CHAIR: So would you again put your hands together for two excellent presentations.

16  
17 End of Presentation

18  
19 Mariana de Sena Amaral da Cunha:

20 Including disabled pupils in regular physical education classes: Strategies deployed by  
21 Portuguese teachers:

22  
23 CHAIR: Hi ladies and gentlemen, welcome, I was going to wait for the bell to start but I think  
24 we'll just start now.

25  
26 This is Mariana who is going to speak to us about including pupils with disabilities in regular  
27 physical education classes, strategies deployed by Portuguese teachers, we have 30 minutes for  
28 this session. Mariana will speak for 25 minutes leaving time for questions. I'll stop it after 30  
29 minutes, but she'll take questions afterwards at lunch and then later as well. Thank you.

30  
31 MS DA CUNHA: Good morning to all I'm a teacher and PhD student at faculty of sport in  
32 University of Portugal, this presentation relates to my dissertation in vocal case and social  
33 research at the institute of education under the supervision of Professor Paul Dowling.

1 As we know disability sport was introduced by the neurosurgeon Sir Ludwig Guttmann after  
2 World War II, as a means of physical and psychological rehab. Soon the benefits of competition  
3 and organised sports for people with disabilities were widely recognised and expanded.  
4

5 From the grass-roots to the elite level such as Paralympic Games. Further, the development of  
6 mainstream disability sport and the emergence of social and educational policies, set the ground  
7 to inclusion of pupils with disabilities in mainstream physical education classes. This is a key  
8 issue in disability sport which is, has been increasingly addressed over the last ten years, both in  
9 literature and practice.  
10

11 In Portugal, inclusion started to assume a considerable role at late 80s and beginning of the 90s,  
12 today it is one of the most speculated issues, especially due to the recent event of re-enacting the  
13 inclusion policies, which led to considerable changes in both conceptual and practical levels.  
14

15 As a consequence a significant shift regarding students, educational placements had been  
16 occurring from specialist schools to official schools and general education classes.  
17

18 The study aims to identify and characterise the teaching inclusive practices employed by  
19 Portuguese general physical education teachers, as well as to develop analytical framework,  
20 grounded on the practitioner's local practices.  
21

22 The research approach employed was exploratory, drawn upon general personal accounts  
23 underpinned by some of the grounded theory methodological approach ingredients.  
24

25 Six Portuguese GPE teachers, three male and three female, were purposely and theoretically  
26 select to participate in the study. The research setting related to a middle public school located at  
27 the suburbs of Porto City, which includes pupils with a varied type of disabilities and in most  
28 cases with multiple disabilities attending the educational services.  
29

30 Semi structured interviews were conducted to capture the GPE teachers' personal accounts on  
31 inclusive practices. An indicative thematic comparative approach, based upon Glenn Strauss,  
32 and Strauss and Corbin's cycling coding process was employed to categorise data and draw  
33 conclusions on the type of strategies employed by the selected teachers to include students with  
34 disabilities in their regular or general classes.

1  
2 Two overarching themes emerged out of data. Access and access to what? The core theme  
3 "Access" includes two themes of action strategies, strategies of exclusion, strategies of  
4 differentiation and strategies of support, whereas the shift theme "access to what?" Covered the  
5 subcategories of common curriculum, differentiated curriculum and differentiated objectives.

6  
7 No action strategies occur when access does not present a problem. Inversely strategies of  
8 exclusion take place when access to General PE class is not possible. Access nonetheless might  
9 be achieved through curriculum activity and/or objectives modifications, that is strategies of  
10 differentiation, or through the activation of physical and human resources that is strategies of  
11 support.

12  
13 The pupils with disabilities might have access to the same curriculum as their peers, these  
14 strategies imply no modifications in the curriculum, or to differentiated curriculum where  
15 different activities or roles within that activity are designated to them.

16  
17 Finally, differentiated objectives strategies might occur when the PE goal for the students with  
18 disabilities are different from those related to their peers.

19  
20 The scheme of analysis presented in the earlier slide provided the foundations to discuss data in  
21 an interactive way.

22  
23 Since explanations of access or access to what have been used by participants, movements  
24 between the sub categories are also possible and considered.

25  
26 For example, no action strategies chiefly occur when the common curriculum is followed, there  
27 is no measured adaptations to the PE class activities made. On the other hand, differentiations in  
28 the curriculum might explain strategies of exclusion, example attending individual lessons.  
29 Strategies of differentiation, example applying games modifications such as rules, equipment or  
30 roles. Or strategies of support, example having the assistance of another teacher in class.

31  
32 Findings would be centred on the type of disabilities the teachers contact with during their  
33 career, the teaching settings where these encounters occurred as well as the type of strategies  
34 used to include the pupils with disabilities in their general classes, in terms of access and access

1 to what. Structured in tables and occasionally followed by short statements of the teachers  
2 narratives for you to get an overview into their inclusive experiences and practices.

3  
4 During his 22 years of experience Mr Lord contacted with pupils with intellectual disabilities,  
5 motor limitations, Down Syndrome, hearing difficulties, serious illness and motor complications  
6 as well. In two sets of context such as general PE classes and individualised sessions, both in  
7 public schools. Chiefly he employed strategies of support, example searching for specific  
8 knowledge together with parent and doctors and teacher assistance in his class. He also used  
9 strategies of exclude, example, individualised lessons with students with disabilities, resulting in  
10 a differentiated curriculum and distinct objectives.

11  
12 Nonetheless he also reported a no action strategy following the common curriculum employing  
13 just small rule adaptation, peer collaboration and disability awareness procedures.

14  
15 As an example Mr Lord had worked with a pupil with a serious illness, which affected her motor  
16 ability. Nonetheless she was always integrated in the class and doing all exercises and activities  
17 of the lesson with her peers without disabilities as he said. This statement suggests the  
18 implement of no action strategies, in terms of access, following the common curriculum with  
19 regards to the access to what.

20  
21 Nevertheless, no action strategies might sometimes lead to measures of exclusion, as the  
22 following statement regarding a case of, including a pupil with severe intellectual and motor  
23 limitation in common activity reveals.

24  
25 Last year Mr Lord and a teacher assistant in class were able to work with her. This year without  
26 the collaboration of my colleague, I am unable to work with her. She often excludes herself  
27 from the proposed activities.

28  
29 During his 29 years of experience Mr Boris' contact with pupils with autistic behaviours, hearing  
30 impairment or disabilities, intellectual disabilities and Down Syndrome. In his GPE classes and  
31 school sport club in public and private schools, using mainly strategies of support, for instance  
32 internet research and contact with more experienced teachers, as well as strategies of  
33 differentiation, example curriculum equipment and instructional adaptations, as well as  
34 individualised work with pupils with disabilities.

1  
2 No action strategies, such as focused attention on pupils with disability and strategies of  
3 exclusion, such as individualised sessions, were also reported.

4  
5 During his 22 years of experience Mr Ricardo contacted with a variety of pupils with disabilities,  
6 either in General PE settings in public school or in training context in private educational  
7 institution. He often attempt to promote no action strategies based on the common curriculum  
8 through small adaptations into the class and activities rules, learning progressions and focusing  
9 attention. Strategies of support were registered whenever he had the collaboration of a colleague  
10 specialised in physical education and special education in his general PE class.

11  
12 Strategies of differentiation in curriculum and objectives were also applied using small  
13 adaptations or rules modifications and assigning specific tasks to the people with disabilities for  
14 instance being responsible for the class equipment and enrolling in referee performances.

15  
16 As an example Mr Ricardo teaches two Down Syndrome pupils and a student with a mild  
17 cognitive and motor disability in his Judo training lessons and felt the need to apply small  
18 adaptations into the training activities.

19  
20 Mrs Maria taught just for 13 years and had already contact with a variety of pupils with  
21 disabilities, performing distinct roles, either as a teacher and a teacher assistant in PE classes,  
22 only in public schools. She also employed these types of strategies to include in her class to  
23 enhance motor ability of her students, specifically Mrs Maria reported a case of a blind student  
24 with whom she developed individualised sessions separated from her class and her peers. But  
25 sporadically this student was also included in general PE class with her peers without disabilities  
26 through the introduction of a disability sport, Goalball.

27  
28 This was a response to a reverse strategy where the curriculum and objectives of the pupils  
29 without disabilities are altered in order to embrace their blind or visually disabled classmate in  
30 the main general PE class.

31  
32 Mrs Joana taught for over 18 years and I would highlight the fact that beyond the general PE  
33 classes she was also responsible for the adapted sport club in school where she gave extra  
34 support to a Down Syndrome student to enhance his general and specific motor skills.

1  
2 Furthermore, as Mrs Maria she often organised her general PE class in small groups according to  
3 the students level of ability and to include further the pupils with disabilities in her class.

4  
5 As for Mrs Eduarda, during her 20 years of experience she contacted with pupils with Down  
6 Syndrome and Cerebral Palsy, in the context of general PE classes.

7  
8 But she, the place where she most contacted with pupils with disabilities or individuals with  
9 disabilities and gained experience was in her work as a caretaker in special institutions.

10  
11 As Mrs Maria and Mrs Joana she also invested in small groups and on establishment of routines  
12 in her PE class to promote strategies of no action and differentiation in the curriculum and  
13 objectives, among other strategies.

14  
15 For instance, with respect to a wheelchair pupil, strategies of differentiation were the most  
16 employed. He would represent different roles within the activities and work for distinct  
17 objectives compared with his peers. For instance, he would perform the goalkeeper role or  
18 assume the referee task.

19  
20 As main conclusions most of the participants taught for over 20 years and had experience in  
21 teaching pupils with disabilities. One female teacher also had experience in special institutions  
22 as a carer.

23  
24 The scheme of analysis developed in this research study is grounded in the practitioners local  
25 practices and meet the general inclusive procedures identified within the literature, specifically  
26 Lieberman Displacement Model and Ken Black's Inclusion Spectrum Sport Activity Model  
27 centred on the sport activities in PE classes or sport activities in other contexts.

28  
29 The conceived analytical model access and access to what, provided a comprehensive  
30 understanding on how pupils with disabilities are being included in Portuguese regular physical  
31 education settings, since it describes how the pupils with disabilities are being included in  
32 mainstream Portuguese general PE classes, characterises how teachers respond to inclusion in  
33 terms of access and access to what domains, and offers practical solutions that can be applied in  
34 similar contexts by the teachers in their general classes and hopefully to change and improve

1 their practices.

2  
3 Thank you very much for your attention. Obrigado, I am available for questions now.

4  
5 CHAIR: Any questions or comments?

6  
7 Q. Thank you for the presentation, and I had a question, I came in late so maybe I missed it, but  
8 what is the training that the general PE teachers have?

9 MS DA CUNHA: All of the set of teachers had training in their initial academic training, one of  
10 the teachers also undertook a master degree on Physical Adapted Physical Activity, and one of  
11 the female teachers also had experience as a caretaker in an institution for, I think, visual  
12 impairment, visual disability and intellectual disabilities too, and that's it.

13  
14 CHAIR: Any other comments or questions?

15  
16 Q. I'm just curious to know about a difference maybe that you might find with younger teachers or  
17 teachers with less experience, do you think their practices might vary considerably with your  
18 findings?

19 MS DA CUNHA: I didn't get into that variable. Although we can -- in our data conclusions we  
20 can infer about the type, the differences about type of disabilities the teachers have in classes as  
21 well as their training, but actually that variable I didn't -- because all of them has over 20 years  
22 of experience in teaching, and including pupils with disabilities in their classes so I didn't go into  
23 that variable, unfortunately, it wasn't significant.

24  
25 Q. Good morning Mariana thank you very much for your presentation I am not going to make a  
26 question, just a comment based on the previous question, just to clarify that in Portugal there is  
27 undergraduate level we have in 90% of the sports sciences faculties we have at least two  
28 compulsory Adapted Physical Activity subjects, so there is a background for all PE teachers.

29  
30 Then that could be extended if there are, if they have optional subjects on the area, but at least  
31 two subjects will be compulsory for undergraduates. Thank you.

32  
33 CHAIR: Okay, if there are no more questions or comments we'll bring this session to a close.  
34 Thank you very much for your attention. And I hope you will enjoy your lunch.

1  
2 End of Presentation

3  
4 Maria Campos: Attitudes of Portuguese physical educators towards inclusion of students with  
5 disabilities in elementary schools:

6  
7 CHAIR: Good afternoon, people realise it's unusually sunshiney outside and went out to enjoy  
8 the sun, but those who are here, thank you for coming.

9  
10 I'm happy to present my friend and colleague from Portugal, Maria Campos, she'll present a  
11 wonderful study on attitudes of Portuguese physical educators towards inclusion of students with  
12 disabilities in elementary schools. This year she is going to graduate PhD programme, so she'll  
13 tell us her research.

14  
15 MS CAMPOS: Hello I'm from the faculty of sports science and physical education of the  
16 University of Coimbra, my current interests are in perceptions of school community towards  
17 inclusion and this presentation talks about attitudes of Portuguese physical educators towards  
18 inclusion of students with disability in elementary schools.

19  
20 And why are we focusing our interest in this air gentleman? The research on teacher's attitudes  
21 towards inclusion of pupils with disabilities ... physical education is not remain indifferent to this  
22 movement as part of the curriculum offered by schools.

23  
24 As we know in the literature there are some research regarding teacher's attitudes and beliefs  
25 towards inclusion in physical education, and considering the importance of teacher's role as an  
26 agent of change, it is crucial to study attitudes regarding inclusion of student with disability and  
27 physical education.

28  
29 Studies concerning attitudes haven't been carried out in Portugal and they can provide an  
30 important contribution to the development of future interventions in development in our country.

31  
32 So this exploratory study aims to report physical educators attitudes towards inclusion of  
33 children with disability in elementary schools as well as to assess teacher related variables such  
34 as gender, experience in teaching students with disabilities, quality of experience, perceived

1 competence and training in adapted physical education.

2  
3 The study involved 159 PE teachers of elementary Portuguese schools, 89 male and 70 females  
4 with ages between 22 and 46 years old, and we used the survey of physical educator's attitudes  
5 towards teaching individuals with disabilities of Terry Rizzo.

6  
7 Regarding the variables, we study gender, course work in adapted physical education, experience  
8 in teaching students with disabilities, perceived competence and quality of experience. And our  
9 dependent variables were attitudes towards disability, physical disability, intellectual disability,  
10 hearing impairment and visual impairment.

11  
12 So to measure the internal consistency of this test we assessed the Cronbach alpha and most  
13 values are equal to 0.19, which represents excellence internal consistence. These values were  
14 consistent also with values reported in other studies using this survey follow come, meek and  
15 Rizzo used this using different sub scales, behavioural disorders, mild intellectual disabilities  
16 and learning disabilities.

17  
18 This survey measures three different factors, the first is outcomes of teaching students with  
19 disabilities in regular classes with six items, the second one is effect on student learnings with  
20 four items, and the third one is the need for more academic preparation to teach students with  
21 disabilities.

22  
23 Our results show that Portuguese PE teachers are concerned about themselves, about the student  
24 learning and the need for more training to teach children with disabilities.

25  
26 About disability conditions, we think it's important to ascertain which of the disabilities are  
27 perceived as more difficult to include in physical education classes. And our results show that  
28 elementary physical education teachers have more positive perceptions of students with hearing  
29 disorders, intellectual disabilities and physical disabilities, showing that the last positive attitude  
30 is towards including children with blindness.

31  
32 These outcomes were also revealed in some interviews we made in focus groups, where teachers  
33 point out their concerns in preparing a physical education class for blind students. They said  
34 they don't feel confident enough in preparing and adapting exercises for students with visual

1 impairment compared with other disabilities.

2  
3 We can see there are significant differences for gender, for all dependent variables and females  
4 had more positive attitudes scores compared to males for all dependent variables. Our study  
5 confirms the results that other studies did with female teachers having higher attitudes towards  
6 inclusion.

7  
8 Training in adapted physical education also revealed significant outcomes for almost all  
9 variables as teachers with course work had significantly higher attitude values. We can also say  
10 that the lack of preparation can negatively affect teacher's confidence, self-confidence and  
11 attitudes in working with students with disabilities.

12  
13 In respect of teaching experience with students with disabilities, we can also find significant  
14 differences and teachers are experience reveals higher levels of perceived competence and  
15 perceived quality of experience and our results go in accordance with other studies.

16  
17 The results also show that higher levels of perceived quality of experience, leads to higher levels  
18 of perceived competence and attitudes. We have to notice that it's not only important to have  
19 experience but that experience has to be perceived as positive, otherwise it will decrease the  
20 level of competence.

21  
22 It is also clear that the greater their perception of competence the more comfortable teachers feel  
23 about dealing with students with disabilities in physical education classes, as shown as well in  
24 other studies.

25  
26 To finish our results, we did some correlations and we saw that perceived competence is strongly  
27 related to favourable attitudes about working with children with disabilities across all disability  
28 conditions and is often found to be the best predictor of higher attitudes like Rizzo and Wright  
29 said it, the same happened in our study.

30  
31 Also other variables related with attitudes is course work and quality of experience.

32  
33 In spite of elementary physical education teacher overall express a positive attitude towards  
34 teaching students with disabilities in physical education classes, results disclose the existence of

1 significant differences for gender, course work and training in adapted physical education,  
2 quality of experience and perceived competence.

3  
4 Another highlight is that perceived competence is the best predictor of higher attitudes towards  
5 inclusion as well as quality of experience and course work in adapted physical education.

6  
7 We can conclude that it is essential to implement strategies, particularly at specific training and  
8 course work in adapted physical education, so that physical education teachers have greater  
9 knowledge regarding teaching students with disabilities and perceive themselves as competent,  
10 which leads to more favourable attitudes towards teaching students with disability, making  
11 inclusion a reality in our country.

12  
13 So our Portuguese teachers ready to receive pupils with disability? We think they are, especially  
14 if they have training in adapted physical education and positive teacher experience, which leads  
15 to perceived higher levels of perceived competence and higher attitudes.

16  
17 Our possible outcomes or practical implications could be at school level, we think it's very  
18 important to introduce Paralympic sports and other adapted activities in physical education  
19 curriculum as well as in physical education school books. In addition to implement awareness  
20 programmes such as Paralympic school days, that's one of the work we are doing now in some  
21 Portuguese schools.

22  
23 Attention must also be made in teacher training along their professional career and one of the  
24 most important implications of this study concerns two institutions responsible for preparing PE  
25 teachers and although the great majority provide course work in special education needs,  
26 Portuguese universities should restructure their programmes to include information and  
27 experience about disabilities throughout the curriculum.

28  
29 Thank you for your attention. If you have any questions?

30  
31 Q. How would the Portuguese people perceive blind and visually impaired in general?

32 MS CAMPOS: We are now doing focus group interviews to Portuguese teachers and actually  
33 for them it is the most disability condition to include in physical education classes.

1 Now in Portugal all students with disabilities are included in schools, but unfortunately some of  
2 the PE teachers don't work in the same group with children without disabilities, and that's why  
3 we are trying to do this kind of study in Portugal, because we have some concerns about parents  
4 of children with disability, they come to us and say my child doesn't do physical education at  
5 school, so we are trying to go to schools to prepare physical education teachers so they can do  
6 the same exercises for people, for children with and without disabilities at the same time.

7  
8 Q. Portuguese FA, the football association, would they have any influence on encouraging blind  
9 and visually impaired into soccer?

10 MS CAMPOS: We don't have many teams of blind athletes, especially in Portugal.

11  
12 Q. I have a question, what is the average of students with disabilities in elementary schools, since  
13 you have full inclusion now, so what is the average number of students with disability in regular  
14 school and general education class?

15 MS CAMPOS: Each class with 20 students, probably has one or two with a disability condition.  
16 Either autism, visually impaired.

17  
18 Q. Is that for APA teachers?

19 MS CAMPOS: No in Portugal we don't have APA teacher, sometimes when a child has a mild  
20 intellectual disabilities or autism, they can have some assistance, it's not a teacher, it's a school  
21 staff member, but sometimes for the physical education class but we don't have that the APA.

22  
23 One of the work we have in the university is go to some regular schools and our undergrad  
24 students and masters students to go to physical education classes to help physical educators  
25 taking classes for the children at that level.

26  
27 CHAIR: Some more questions?

28  
29 Q. Is that -- do you decide which school are having support from you? Or do you have some  
30 system for helping schools?

31 MS CAMPOS: We are trying to go to schools where more students with disabilities, because we  
32 have now, since last year Portuguese schools have reference schools for each disabilities and  
33 there are schools near our university with lots of students with intellectual disabilities and autism  
34 and we will go there because some of the teachers ask us for help and we are available to go to

1 any school if they want to.

2

3 Q. But those children with intellectual disabilities and autism as you say, they are already included?

4 MS CAMPOS: They are included in physical education class, they don't have special physical  
5 education classes.

6

7 Q. But are they in special classes in other subjects?

8 MS CAMPOS: Some subjects they don't go but physical education and music, all of them have  
9 that kind of subject of the

10

11 Q. What about those teachers who think that they don't have to teach everyone?

12 MS CAMPOS: That's our big problem.

13

14 Q. So do you have any ideas?

15 MS CAMPOS: That's why I start to go to the schools near my university to talk with teachers  
16 and do some exercises for myself with all the class for them to see it's not difficult to include a  
17 student in a wheelchair or an intellectual disability child in physical education, so we are trying  
18 to go to schools and do some exercises and adapt exercises for all physical educators in our  
19 schools. In some schools.

20

21 Q. Could you tell me a little about the course work that you undertake at your university with the  
22 pre-service teachers in relation to adapting PE?

23 MS CAMPOS: In our university we have two compulsory subjects about adapted physical  
24 education and university students can also choose another two subjects, so they can have four  
25 subjects in adapted physical education in our university.

26

27 And we do some other course work for teachers for already teachers of physical education that  
28 can go to our university and we give some strategies to implement and have practical classes, not  
29 only with our students in the university but also with teachers that want some preparation, more  
30 course work and training in the physical education.

31

32 Q. Do they get hands on experience with children in their courses on campus in the university?

33 MS CAMPOS: Yes, we do some activities with our students, we put some blind folds or use  
34 some wheelchairs or invite students with disabilities from some institutions to go to our faculty

1 and do exercises with them and other activities.

2

3 Q. Is that typical of provision in Portugal? Or is your university...

4 MS CAMPOS: That's what we do, some universities I know they don't do activities on and off  
5 campus, just theoretical work but in our university we try to do both because we think it's  
6 important and we can see in the results that it's very important to future teachers to have work  
7 already with children with disabilities.

8

9 CHAIR: Any more questions or comments? Thank you Maria for your presentation it was  
10 really interesting and thank you all for your questions.

11

12 End of Presentation

13

14 Miguel Olio: Sailing with the deaf/blind.

15

16 CHAIR: Hello, welcome to our second session for the afternoon, and then I think -- I don't  
17 know what's after this, then a break!

18

19 But our second presenter Miguel Olio, from (inaudible) school for students with multiple  
20 disabilities from Brazil, he will be presenting -- his title is Sailing with the Deaf/Blind, Miguel  
21 does not have any research interest, but more the areas that he really enjoys pursuing and  
22 working in, so that's the title that say it is all, so welcome Miguel and you're off and running.

23

24 MR OLIO: Thank you, good afternoon. This is more a conversation about the programme we  
25 try to do with deaf and blind people.

26

27 I'm sorry but my English is not so good, but if necessary, if you have a question, please I'll give  
28 an answer.

29 SPEAKER: You're doing great, don't worry!

30 MR OLIO: Thank you I'm trying!

31

32 I started thinking about sports and disabilities when I started the course with Shirley and Voulet,  
33 it's a course specialised in working with people who are deaf and blind and multiple disability.  
34 But nothing with physical education.

1  
2 And in my college, in my high school -- sorry the college, I don't work with adapted physical  
3 education, it only started after that.

4  
5 When I started the course, the specialised course I started work with Down Syndrome, with  
6 physical problems and work with blind people, but nothing with deaf and blind.

7  
8 And we started this course, to have work to do and work with Usher Syndrome. And Usher  
9 Syndrome acquired -- I never saw this syndrome before, but okay, that's fine.

10  
11 After this work I was thinking okay, because I'm a sailor, I have a sailing school, I was thinking  
12 okay, I came to do something in nature, a physical activity or a sport, maybe it's possible to do  
13 this sport, something for wellness and something that's possible to do alone or in a team, this is  
14 the whole idea.

15  
16 So I thought okay, sailing is something that's possible to do with these whole things. You can do  
17 it alone or in a team, a group. You need to do this in nature.

18  
19 Okay, sailing is a good idea; nature is not necessary in the sea, because we do this in a lake, not a  
20 natural lake but in a lake in the middle of the city in Sao Paulo.

21  
22 I have the boats, so it's easy to do. The place we have some yacht clubs in Sao Paulo the name  
23 of the lake is Represa de Guarapiranga!

24  
25 This is a lake in the middle of the city, yes it's possible to sail in Sao Paulo in a big city, it's fine,  
26 it's possible to do this. And this is an amazing view -- like the photo, this one -- this day we  
27 don't have wind in the morning, but in the afternoon we have a good wind like ten knots, that's  
28 perfect for sailing.

29  
30 The project started with, we did two tests before, the first is with a woman, with a deaf/blind  
31 acquired, and then after was a girl who was 16 years old deaf and blind congenital, it was  
32 different, to explain the things.

33  
34 But I need to explain the same things, I don't need to change them -- I don't need to adapt

1 anything, I need to explain for the different ways, but it's the same, when I need to explain to a  
2 "Normal" person. I need to explain what happens and why -- what happens with this thing...

3  
4 Communication with these women, I don't need to use sign language. With her it was  
5 unnecessary, just to speak loud, only this. We used some signal, but not a proper sign language.  
6 So only some signals to explain some details, no more than this.

7  
8 But now I prefer to use an intervener to help if necessary and to film too.

9  
10 We speak loud, just higher and closer to the ear.

11  
12 But to do this, to sail with the deaf and blind people I organised some steps, in three steps to be  
13 honest. The first step is show the boat, show the space, the whole space and show the small part,  
14 the cockpit is the space you use to push and pull the lines, the sheet, use the foil and explain with  
15 more detail this space, this area.

16  
17 Then show when I use the sheet, the first photo I don't know if it's possible to see, but this guy is  
18 deaf and blind, and with him is an intervener to show him the things, the sail, what is the sail, the  
19 whole thing, the whole part of the boat.

20  
21 And after this he was sailing, proper sailing, using the sheet, when you need to push or when you  
22 need to pull the line.

23  
24 The second step is sailing, proper sailing. How I use the foil because it is not like a steering  
25 wheel in the car, it is not the same, because the foil you put the right side and the boat goes to the  
26 left side and you need to explain this.

27  
28 Okay explain this part! Explain the wind, where is the wind coming from? That's necessary, it  
29 doesn't matter but it's necessary to know that.

30  
31 The boat movements, I think the boat movement is, the second step is the most important part  
32 because a boat's speed is the whole time the boat is flat, it doesn't move a lot, only this way the  
33 front up and down, no more than this. When you are in a cruise ship it's the same, you never see  
34 the boat movement a lot, it is always the front side is up and down, this is the huge movement,

1 but sailing is this movement, but the worst part is when the boat turns on one side, but this is the  
2 normal part.

3  
4 When the boat is in this position, okay the boat is sailing, proper sailing. Yes when you think in  
5 a competition the boat needs to be flat, but when you are sailing, only sailing when the boat is in  
6 this position the boat is sailing and I need to explain these differences, because in a moment  
7 when I am talking to her and I have a question, when the boat is stopped or the boat is sailing.  
8 The moment the boat is totally stopped and flat, she told me the boat was sailing, and I was  
9 thinking, the boat is sailing? But it's stopped. Totally flat, I see we don't have any movement.

10  
11 When the boat starts sailing, start movement and the boat started tilt and the woman said "Okay  
12 what happened?" nothing happened, this is normal. The boat now is starting to sail. Okay, this  
13 is the boat sailing? Okay that's fine. I understand now.

14  
15 And I'm thinking, this is the point I need to explain, it's more difficult. And the other part is the  
16 manoeuvre, the boat -- we can do the two manoeuvres, the jib and the tack, it's more specific but  
17 when you do the movement the jibing is the picture when the wind, the boat is in the draft of the  
18 wind and the tack is when you approach the wind, when you cross the wind.

19  
20 And I'm thinking the other thing that is really important to explain is the orientation because  
21 inside the boat you don't have signs. You can't touch anything, you only touch the water and the  
22 water don't give us signs. But you have a point like nature points, you have an island, you have a  
23 street, you have a club and I need to explain all the time, every time okay in front of you, you  
24 have an island, on your right side you have a club and we start sailing, continue sailing. Okay in  
25 front of you now you have another island but this island is in front of the other island. Okay on  
26 your left side you have a street, avenue, a big avenue -- in this point when you are explaining this  
27 part you give a location and when you need to come back to the club you need to explain this  
28 whole part again. Okay we come back, but now on your right side you have the avenue, no more  
29 on the left side.

30  
31 The third step is evaluation. If the person really understands what happened? If the person  
32 understands when you need to come back to the club, if the way is right? I'm thinking the most  
33 important thing is what happened in the boat, if the movement is clear.

1 Some results we continued this programme and we have in 2011 the first nautical meeting with  
2 deaf and blind leaders in a world deaf and blind conference in Brazil, Sao Paulo, and we believe  
3 it's possible you can do a championship, a national championship and international  
4 championship, yes it's possible. We believe in that.

5  
6 This is the group, these guys, everybody is deaf and blind, some more congenital, others  
7 acquired, but everybody of these guys are deaf and blind. And thank you Shirley and Vula and  
8 Ahimsa too.

9  
10 CHAIR: Does anybody have any questions for Miguel and what he is doing on the project?

11  
12 Q. How did you recruit all the people who are deaf/blind? How did they find out the participants,  
13 how did they find out about your programme?

14 MR OLIO: I work in Ahimsa, in a special school, working with deaf and blind and multiple  
15 acquired and then we have another group with adults or with deaf and blind students, in Ahimsa  
16 in the school and it's only for children and teenagers. In Brazil there is a group for deaf and  
17 blind adults and we use this group to make the group.

18  
19 Q. Is there only one school in Brazil for deaf/blind? How many schools in Brazil for deaf/blind?

20 MR OLIO: In Sao Paulo we only have one school for deaf and blind.

21  
22 We have schools in Brazil in all 27 states, specifically only for deaf blind people, there are six in  
23 Brazil and the other states the deaf/blind are included in some kind of setting. And we have  
24 representatives that have learned how to deal with deaf/blind people, we have studied and trained  
25 them in the 27 states of Brazil.

26  
27 Q. Do you plan to start more programmes so more kids can get the benefit from sailing or deaf  
28 blind, like start programmes in Brazil and other places?

29 MR OLIO: This is our idea, but we first started to find problems with transportation, we have a  
30 problem, Sao Paulo is a big city and the youth club from the houses is far, we have this problem.  
31 Yes it's possible to do this, yes I really would like to do this, but first we need to resolve this  
32 problem but yes we want to and I think we're looking at it that's it's possible.

33  
34 We're looking for someone to sponsor at least the transport so they can go to the beautiful place

1 you saw there.

2

3 Yes it's possible. Yes it's something to think about.

4

5 Q. Will you be presenting this next week at the national Brazilian conference?

6 MR OLIO: No. I tried to talk with the organisation but I don't have the time for the deadline.

7 When I knew, it was past the deadline.

8

9 CHAIR: Any other questions?

10

11 SPEAKER: We're going to talk to you later!

12

13 CHAIR: I noticed a pattern with those two, they keep cornering everybody after the speech!

14

15 We'll thank Miguel very much for his time and his presentation; I look forward to hearing more  
16 about sailing for the deaf/blind. We are a little ahead; we have a coffee break at 2.35 for 15  
17 minutes, maybe a little longer. Then we have the plenary session number 2 with Dr David  
18 Carless in Mangerton D, thank you for your time.

19

20 End of Presentation

21

22 Coffee Break

23

24 Plenary session: Dr David Carless:

25 Recovery stories, narrative research in physical activity and mental health.

26

27 MR O'FLYNN: Good afternoon everyone I think we'll get started.

28

29 Welcome back everyone I hope you enjoyed your lunch and that you are enjoying all the  
30 presentations and parallel sessions at this European congress.

31

32 Just before we get into the afternoon work a couple of brief things, you will all have got a  
33 conference bag, yes? Okay, in that bag amongst other things you will find this, it's an invitation  
34 to tonight's cultural activity, the heal to surf I believe is full at this stage but there are some

1 places left in the GAA, our national games, in their cultural and sporting evening, which will be  
2 well worthwhile, it's both an exhibition of Gaelic football and hurling and then some traditional  
3 music and dance, the time is 6.30 to 8.30, a bus will leave from the front of reception of the  
4 hotel.

5  
6 If you want to go, this invitation there is a place at the bottom for your name and your country,  
7 please fill it in and drop it to Bernie at the GAA desk, you'll also go into a raffle for a couple of  
8 nice gift bags which are worthwhile.

9  
10 Also inside your conference bag should be a memory stick, everybody got that? If you haven't,  
11 blame Tomas. The memory key, on it are all the abstracts and other useful information on the  
12 CARA Centre, EIPET and APA VET, have a look at it on your own time.

13  
14 Just to tell you all our presentations from the presenters who have given us permission will be on  
15 our website after the conference, the website is [EUCAPA2012.EU](http://EUCAPA2012.EU).

16  
17 Time now for our second keynote lecture, our next presenter has been a primary schoolteacher,  
18 outdoor activity instructor, educational consultant, academic and author. Now with Leeds  
19 Metropolitan University, Dr David Carless is best known for his multidisciplinary research into  
20 how mental health, psychological well-being and identity are developed, challenged and or  
21 recovered through physical activity or sport.

22  
23 Here to share some of his research on narrative research into physical activity and mental health,  
24 please welcome Dr David Carless.

25  
26 DR CARLESS: Good afternoon, just to check everyone can hear me okay before I begin?

27  
28 I'd like to start with a story; "I can remember my primary school vividly, you were allow to work  
29 at your own pace and I loved it, there was no traditional hockey or cricket, we just played games,  
30 it was fun.'

31  
32 'I started ballet classes when I was three and tap and I also went swimming, apparently at  
33 swimming I was a bit of a demon, my swimming teacher was lovely but did threaten to throw  
34 you in at the deep end if you didn't behave!'

1  
2 'Having started ballet at three I took to tap dancing like a duck to water, but apparently had the  
3 odd tantrum there as well. I think most of my self-expression, extremes of mood, which have  
4 become more obvious, now I'm bipolar, were apparent when I was tiny as well. By the time I  
5 was 11 I was dancing every day, one day off on Sunday.'

6  
7 'I went to auditions at the Royal Ballet School, fortunately I didn't get in, short dumpy ballerinas  
8 with big boobs don't earn much money, but I carried on at that level and intensity until I went to  
9 secondary school. That was a shock to the system, boarding school at 11, fantastic and horrific  
10 in equal quantities. It teaches you self reliance, takes away any sense of normal relationships,  
11 we had games teachers who were bullies, they would only take the one who really shone, only  
12 work with them.'

13  
14 'I loved hockey probably just because I didn't get shouted at. When I was in the sixth form I fell,  
15 shattered my left knee, left school. From the point of view of work, the degree was great, but  
16 having time for anything else became more and more difficult, couldn't dance, damaged knee,  
17 there was no swimming pool, so the two things I really enjoyed and was good at, I was  
18 grounded.'

19  
20 'The sport was also very competitive, the sort of atmosphere you weren't encouraged unless you  
21 were good enough to play at one of the best teams, so I didn't do any formal exercise, I'd go in  
22 the sports hall only to take exams. When I went home I did lots of adventure stuff, canoeing,  
23 climbing, caving, loved it. No competition, but you were encourage to check up on the person in  
24 front or behind. I loved that. There was a big group of us, all different ages and we achieved  
25 things.'

26  
27 'I first got ill when I was 16, depression was the problem. Everyone thought wow, there is a girl  
28 whose going places, yet actually I was profoundly depressed. I used to spend hours crying, it  
29 wasn't diagnosed, nothing really happened, it did settle when I first went to university, but flared  
30 up in fourth year as I was in a much bigger environment, much less secure.'

31  
32 'I start to become much more brittle and got very depressed very quickly, eventually I was  
33 hospitalised. I was aware that something wasn't quite right and went to student health, from then  
34 it gets a bit blurry, I had a few bad episodes, which required hospitalisation, that was horrendous,

1 it was one of those old style hospitals, you know that has it's own farm, it's own train line.'

2  
3 'It's the only time in my life I have ever been offered hard drugs. The first two days I was in  
4 there I didn't eat. Nobody told me how to get food. When you went to get something we had to  
5 register, I was number 14. They would use that number instead of your name. I still dislike the  
6 number 14."

7  
8 What you have just heard is part of Laura's story. You're going to hear more from Laura late  
9 they are afternoon, but I'd just like to pause now and provide a little context to what I'd like to  
10 talk with you about this afternoon.

11  
12 The first thing is thanking my good friend and colleague Kitrina Douglas, academic research is  
13 nearly always a collaboration and partnership, nearly always we present in a solitary manner, so  
14 this is Kitrina's work as much as mine, everything I have to say today has been developed in  
15 close collaboration with her and I'd like to acknowledge that.

16  
17 In terms of the context of mental health, many of us are probably aware of the figures by now,  
18 World Health Organisation suggests that 27% of the European Union population experience  
19 some sort of mental disorder in the past year, around about a quarter.

20  
21 They estimate 83 million people across Europe are affected and they suggest mental disorders  
22 rank as the first cause of years lived with a disability, accounting for nearly 40%.

23  
24 The clear thing is that mental health problems seem to be widespread in Europe, and probably  
25 increasing too.

26  
27 In terms of what mental health is I like these definitions, not particularly new, the first is from  
28 the US, the Surgeon General's report; "A state of successful performance of mental function,  
29 resulting in productive activities, fulfilling relationships with other people and the ability to  
30 adapt and change and cope with adversity."

31  
32 From the UK. "Mental health has been defined as emotion and spiritual resilience, which  
33 enables us to survive life and avoid pain and sadness."

1 When -- what I think I like about the two definitions is that I think for me at least they tend to  
2 resist a tendency that we have had in our communities to other people who have mental health  
3 problems.

4  
5 So they don't focus on diagnosis or difference, they don't focus on problems particularly, instead  
6 mental health is conceptualised as something that is perhaps an exaggeration of processes that  
7 affect us all, I think that's important.

8  
9 Again the Department of Health in the UK suggests that mental health is influenced by diverse  
10 factors, social, cultural, biographical, historical, economic, not just chemistry, not just genetic  
11 predisposition, so there are studies that suggest that genetics shape mental health in some way or  
12 another, particularly schizophrenia, there is a lot of research looking at whether there is a genetic  
13 pre-disposition towards it and some studies suggest that there is, but it's not a direct relationship  
14 and some researchers, Peter Chadwick particularly, has shown has the very genetic profile that  
15 predisposes to schizophrenia also brings positive quality such as creativity, empathy, insight.

16  
17 So very much a human condition that is about positives, as well as negatives.

18  
19 Some sort of disquiet quite widely building over the past few decades, very well articulated by  
20 Richard Bentall, a practising psychologist in his book *Doctoring the Mind, Why Psychiatric  
21 Treatments Fail*, so he articulated a disquiet with what has become a reliance on medication,  
22 pharmacological intervention for treating or intervening with mental health.

23  
24 He suggested that psychiatry, the medical nature, has led to ignoring psychological factors of  
25 people's well-being and recovery.

26  
27 This is a particularly strong perspective and I'm sure familiar to many of you working in the  
28 Adapt area when it comes to users, survivors of mental health, people who experienced it, there  
29 instead is more of a recovery focus that has a lot of parallels with the disability movement over  
30 recent decades.

31  
32 For example, we have learned that recovery from serious mental illness does not require  
33 remission of symptoms or other deficits. Rather recovery involves incorporation of one's illness  
34 within a context of a sense of hopefulness about one's future particularly about one's ability to

1 rebuild a positive sense of self and social identity.

2  
3 One survivor, Patricia Deegan was hospitalised with schizophrenia as a young woman, went on  
4 to gain a doctorate in clinical psychology and wrote powerfully about it; mental illness, she  
5 suggests because many of us have experienced our lives and dreams shattering in the wake of  
6 mental illness once the essential challenges to face us is to ask who can I become and why  
7 should I say yes to life?

8  
9 This perspective 1996 that was published, that's very much underlying Kitrina and my work, we  
10 want to think along these lines to understand the potential of physical activity and sport with  
11 people with mental health difficulties, why should I say yes to life?

12  
13 More explicitly the recovery, the survivor movement influenced our methods, Julie Repper and  
14 Rachel Perkins, both survivors, argued we now need to move beyond symptoms and deficits  
15 they suggest we start in a different place with the voice of first hand experience, we need to  
16 begin by listening to people with mental health problems and gain insight into the possibilities of  
17 life with mental health problems.

18  
19 So that's the foundations, that's been leading us in a certain direction of research, how can we  
20 conduct research so we can listen, so that we can gain insight into other people's experience?

21  
22 The answer for us is not the only way, but it's the way that's been useful in our experience is  
23 narrative research, so qualitative research, I'm describing it as a variety really of narrative  
24 methods, so the focus has been on people with severe and enduring mental health problems, so  
25 that's difficulties that are disabling on a day-to-day basis, that's the severe bit, the endure  
26 something problems that last for months at least and most likely years.

27  
28 Total of -- I've got 30 plus partly because we have research participants, but also do some  
29 evaluations in Bristol, Active Life Project, so we've interacted with more than 30 people. Men  
30 and women, predominantly men, and the way we have interacted with them to gain insights into  
31 their experience and stories is through in-depth interviews, one-to-one interviews, usually  
32 repeated over time, focus groups, informal interaction, a lot of that, a lot of chatting and talking  
33 over cups of tea during activity sessions, after activity sessions, ethnography, field notes,  
34 documented through field notes and also participation. So taking part in activity groups

1 ourselves, sometimes leading activity groups and sometimes watching people who are taking  
2 part.

3  
4 So it's a variety of different qualitative data, gathering methods and our focus, it's taken me a  
5 while to get this clear in my own mind, is on people's stories of their own experience. We want  
6 to learn from and understand the experiences of people who have been there. Because they are  
7 different people, it's not me, I can never know another's experience, you can never know my  
8 experience fully, we are different people, so it's a problem, how do we get at that?

9  
10 One way is through these sorts of narrative methods, to try and support, listen and take seriously  
11 the stories people tell of what they have experienced. So not their perceptions, opinions or  
12 views, it's their experiences we focus on.

13  
14 Then what we are going to do today, what I'd like to do is do a little story analysis, Arthur Frank,  
15 a medical sociologist talks about thinking about stories, a traditional qualitative approach, taking  
16 several stories and almost take them apart, look at the bits within them, the themes and strands.

17  
18 We might look at what holds across different people's stories or how an individual's story  
19 changes overtime, but it's an analysis that's about stepping back from the story, being a little  
20 distant from it, traditional social science research really.

21  
22 Also what we like to do, because it's -- Kitrina found it enlightening personally, is try and do  
23 some storytelling, to preserve an individual's story, to try to communicate with a sense of  
24 empathy, try to retain the emotions and meaning that a phenomena holds for an individual  
25 person. That for Arthur Frank is thinking with a story, not being distant from it, it's immersing  
26 ourselves in a person's story, a little like hopefully we do when we watch a film, read a novel,  
27 see a play. Abandoning objectivity and neutrality and being more immersed.

28  
29 I think the important thing to point out with that in terms of research methods for anyone that's  
30 interested is that when it comes to experience there is no single valid truth. Any of our  
31 experiences of a given phenomenon, this lecture for example are equally valid, we won't  
32 experience it in the same way, there may be differences and some similarities but anyone's  
33 experience is valid, it's not a matter of validity, it's a matter of understanding perhaps diversity  
34 and perhaps some common ground too.

1  
2 So what I'd like to do now is return to Laura's story for a moment, you all remember she was in  
3 hospital with her dislike of the number 14.

4  
5 "Anyway, I got better, caught up, graduated on time. By then I was aware that I was vulnerable,  
6 so I applied for house jobs nearer home and the first one was surgical, I enjoyed it, but was never  
7 cut out to be a surgeon there was a danger that someone's scar would have flowers and beads  
8 sewn into it.'

9  
10 'Then I went on to do medicine that was fantastic, I was really well all through it, none of this  
11 I'm doctor you're a physio or a nurse, we'd all go out together, you are made feel valued for what  
12 you do but you have respect for everyone.'

13  
14 'Then I move to a big children's hospital, this is my horror story. I think the first problem was I  
15 didn't make friends. I mean I know that sounds primary school-ish, but it just disintegrated from  
16 there. The environment was career paediatricians, and I felt I was expected to be like that. So I  
17 actually saw a GP fairly soon.'

18  
19 'I know exactly when it happened because I was walking to my appointment and a random bloke  
20 grabbed me and said look at this you have to see this, I saw a plane go into the Twin Towers on  
21 the TV screen. That was my D-Day, that's when thing really unravelled quickly, I became  
22 profoundly suicidal.'

23  
24 'It's weird, I can remember everything up to that point very clearly, but from there, there is a big  
25 chunk, probably three or four years, just a blur of this happening or that happening and a nasty  
26 blur as well.'

27  
28 'Psych services can be a very cruel place. You get all sorts of labels about being manipulative,  
29 having personality disorders, and actually you are just struggling with a problem. You are awash  
30 with bizarre medication, you've lost any form of normality in your life and any regularity your  
31 life might have. Your life is falling completely to bits and they are judging you from there rather  
32 than saying this is Laura and this is what happened to her.'

33  
34 'I wouldn't wish it on anyone those first few years.'

1  
2 'The day centre had an exercise group, a little gym, physio came and did circuits for very poorly  
3 people, because she had a knowledge of sport and mental health, she didn't do anything too hard,  
4 but got us into doing little bits and bobs, I went into that and did gardening and pottery too.  
5 Then I joined a walking group run by a chap my headmaster would say a man who walks with  
6 purpose.'

7  
8 'We'd have a brisk walk, have lunch, people would chat again go back to your life.'

9  
10 'When I got discharged from a supportive atmosphere to nothing, there is no middle ground. For  
11 several years I bounced between GP and psychiatrist before I eventually ended back with psych  
12 services, in the interim day centre had changed, they still had classes but little camaraderie, it felt  
13 a bit them and us. It was we're going to prescribe you art instead of why don't you come and do  
14 some art. It wasn't a huge success, they aren't offering support, I just drifted.'

15  
16 'That put my partner, stuck with being my carer, under a huge strain. Then we moved house,  
17 that meant a different GP and day centre. The doctor suggested physical activity, something I  
18 could carry on after being discharged. I had a period of no activity, then two years ago I got the  
19 opportunity of going to badminton, I would have struggled if I was really poorly, people think  
20 it's just a badminton session but it's not. There is a hell of a lot more to deal with, like if you  
21 have got your computer out and ran 14 web searches, eight lots of Photoshop and Word for  
22 Windows, it would gradually grind to a halt right? That's exactly what going to the gym is like  
23 for me, putting myself in a position of vulnerability, having to meet lots of people and things that  
24 aren't necessarily predictive. I can't always say who will be there, who won't be there and that's  
25 aside from any symptom that is I have.'

26  
27 'But what playing badminton has done, from a physical activity point of view, has been the  
28 finger that pushed the dominoes, after I start to play, one of my best friends said you're getting  
29 fit, I'm getting lardy, what are we going to do about it? So doing badminton in the mental health  
30 setting gave me the confidence to start aerobics at the local sport centre with a friend.'

31  
32 'I get a buzz afterwards, feel like I have achieved something, feel energised. I definitely feel  
33 good that I can do something normal. The teacher is very dedicated, but not draconian, so much  
34 so on a few occasions, when the others haven't been able to go, I have gone on my own, I'm sure

1 I wouldn't have done that without badminton group."

2  
3 We'll pause again from Laura's story there. I'd like to turn now, that was the storytelling. I'd like  
4 to turn to a bit of story analysis to consider what's been some of the issues and themes in the  
5 story generally, not just Laura's, but the other participants too.

6  
7 So I'd like to suggest, which is something Kitrina focused on in our book in 2010, Three  
8 Avenues, through which we have seen physical activity and sport be helpful, I'm not saying they  
9 are the only three, but they have been evident in our data.

10  
11 The first is activity as a stepping-stone or a vehicle to something else. I'd like to share little  
12 Mark's interview transcripts with you to give a sense of this: Mark said: "I had a chat with  
13 Sarah when I was in woodwork, she suggested I take up a bit of exercise to get a bit fitter. She  
14 said I wasn't very fit. So that's what I decided to do, take up a bit of exercise on the bike. That's  
15 where I started. I progressed, one thing led to another, progress to football, badminton and  
16 walking group."

17  
18 Later on Mark reflected on how, "I'm a bit fitter than I used to be doing woodwork, I can saw  
19 bits of wood, it helps me build strength for digging weeds, made me stronger, capable of  
20 gardening." He also suggested exercise has not made me into a different person, I'm still Mark,  
21 but feel a bit more energised and with it than did I when I started. So for me Mark's account is  
22 very matter of fact, he is not particularly passionate about activity, it isn't a reason for him to say  
23 yes to life, but perhaps the accounts start to take on a little more meaning, if you know and  
24 understand that actually Mark hopes to return to work, he hasn't worked for many years, but he  
25 hopes to return to work as a part-time gardener, so perhaps as a consequence of his medication,  
26 perhaps his lifestyle, perhaps being in mental health services again for several years, his fitness  
27 and strength wasn't up to the task in his view, so the activity was something that equipped him to  
28 do that, so it was a stepping stone or vehicle that was meaningful for him, is that perhaps for him  
29 would ultimately be a reason to say yes to life.

30  
31 Also within this, Mark's account is a sense of using time, of being busy. If I ask colleagues  
32 around Leeds Met how are you, what's the one word? Busy! Nine people out of ten, I've done  
33 surveys, they say busy, it's part of our culture to be busy and use our time. It's different in  
34 mental health services, where often people aren't busy, don't have much to occupy their time, so

1 Mark's tapping into mainstream culture and using time to do things.

2  
3 So across other participants, the sorts of things we see as a stepping-stone or vehicle are these  
4 sorts of areas. Things you have read about perhaps in other studies in this area, not particularly  
5 surprising, but I think important because that activity serves as this stepping stone, and it may  
6 well be that people, we've certainly experienced participants like this ourselves, only do activity  
7 for a while because they realise the goal, and there is no point, they don't want to carry on with  
8 the gym because they are now fit enough that they can sustain whatever they really wanted to do  
9 and I think that's okay.

10  
11 The second avenue that we've found is a bit more of an intrinsic focus on physical activity and  
12 sport, we talked about it as recreating an athletic identity, so again Repper and Perkins talked  
13 about how everyone over time develops a sense of who they are, but the sense of self is  
14 profoundly challenged and fragmented by the experience of mental health problem. Within each  
15 person who faced mental health problems there remains a persistent healthy self, trying to  
16 survive, this is all too easily eclipsed by the identity of mental patient, which tends to mask all  
17 other identities.

18  
19 So interviews with one participant called Ben provided an example of this fairly clearly, Ben was  
20 a runner, he was very keen on competitive running, before he was diagnosed with schizophrenia,  
21 over a period of several years the acute phase of his illness and physical side-effects of  
22 medication, that's a big body weight gain, he went from about 12 stone up to nearly 20 stone,  
23 40% gain, made it impossible for him to run, so not only did he not run and was not active, he  
24 lost an element of himself, thought of himself as a runner, he could no longer see himself and  
25 think of himself as a runner.

26  
27 For him returning to activity, I would suggest, helped him to recreate an element of his identity,  
28 an important and valued aspect of who he thought of himself as a person. He said I started  
29 getting fitter and fitter and eventually I was back, apart from being overweight, I was back to  
30 normal again. The first time I was out running again I felt on top of the world, I was back to  
31 what I used to be like, doing the running again.

32  
33 He also had this to say, I suppose in a way running is a bit of a drug, I want to do it to get that  
34 good feeling back again, but I think it's better actually than drinking, because if you drink you're

1 living in a dream world, but if you're keeping fit it's free, you don't have to pay, you do it  
2 because you like doing it, you don't live in a dream world, you are making yourself feel better,  
3 other people get a kick out of other things, but for me it's exercise.

4  
5 So within these types of accounts, I think, is a move of Ben being an object that's acted on by the  
6 medical profession, that's prescribed tablets, takes tablets to some kind of active agent or subject,  
7 he is doing something himself that's helpful and important to him.

8  
9 So in this sense his illness is a journey, it's leading him to a new and different lifestyle.

10  
11 So for Ben it's some sort of return to an athletic identity, which may not always be rosy, there are  
12 problems, there is research out there into that, however compared to the identity of a mental  
13 health patient, I think it's preferable, certainly for Ben getting back to that seemed to be  
14 important. The illness was denying, if you like, an aspect of his self, he couldn't run, he lost that  
15 strand to his identity.

16  
17 And the third avenue of the three, if I had to distil our work into three words, they would be it.  
18 Action, achievement and relationships. And this is where we have used as a narrative researcher,  
19 we have used narrative theory to try and make sense, to try and interpret what we're hearing in  
20 people's stories. And what we saw was three types of story that were shared and very often  
21 enacted, not always spoken but actually lived as a script in some way.

22  
23 I think these three are core to a lot of people's experiences who find mental activity beneficial.

24  
25 So looking at those briefly, first action, it's going places and doing stuff. One participant said it's  
26 just that I've got an activity for the afternoon I'm not sat watching TV, I watch so much that it  
27 draws me, I need to get away, break away from a day indoors and get out and do something,  
28 something to get me out of bed that morning.

29  
30 Another said about football, when he plays football my mind is occupied, I think other things, I  
31 don't really think about bad things I might think about if I wasn't doing something. It can happen  
32 with other things, but sport is such an active thing, it tends to have that effect on me.

33  
34 So there is obviously advantages in doing stuff, going places, many of us get benefits from that,

1 there is also, I suggest, advantages in that that gives us stories, gives us something to talk about.  
2 So it's a way of living rather than doing nothing in perhaps a psychiatric unit, perhaps in a day  
3 centre, it's actually doing stuff rather than being passive. So very much a contrast with perhaps  
4 one of the dominant stories of severe mental illness, Patricia Deegan's work, which talks about  
5 the endless time, day and day of nothingness, smoking cigarettes.

6  
7 Second type of story, was an achievement story. So one individual during a golf programme  
8 said I hit a lovely one last week with the six-iron when we were out on the pitch and putt course  
9 on the first tee. I couldn't believe it. I thought how the hell did I do that? I thought well I've got  
10 to try and remember what I've actually done to hit the ball, prepared for the shot, swung the club  
11 and it worked, I thought hurray, yeah, I've done it, it's amazing, I amazed myself really, I thought  
12 it wasn't going to work out that way.

13  
14 So within this account hopefully it communicates, I'm trying to read it reasonably in a live  
15 fashion, is a sense of joy, elation, success experience, I think we all, I imagine everyone in this  
16 room knows how powerful that can be. It's particularly powerful, I think, which very much  
17 struck us, in the context of severe mental illness, a sense of surprise, many people are surprised  
18 that they can do it right, that they can pull it off. It's very sad I think, whatever their experience  
19 have been in mental health services, they have lost faith in their own ability.

20  
21 So low expectations that are actually challenged because someone sees themselves pull  
22 something off, holing a putt or whatever it may be. Those sorts of stories build and in concentric  
23 circles like a stone into a pond, they build and circle and start to spread.

24  
25 The final one is relationships, one person said you're meeting other people, sharing a common  
26 thing, common, exercising that experience, all doing the same thing, same experience, got  
27 something to talk about. So these stories all three of them are connected to what individuals  
28 experience through activity and support. Without actually the experience these stories would  
29 just be fabrications, they wouldn't be authentic.

30  
31 I suggest people can't tell a story without the experience in the first place. But then a positive  
32 side is through activity in sport, is those stories are very often shared, a lot of the sports are  
33 group, communal, social activities, so these stories can be co-constructed, build together, and  
34 there is not only something to the story but an audience to share the stories with, so it starts to

1 become a community, going on, that starts with the activity, without the activity it can't happen.

2  
3 So John MacLeod a psycho-therapist suggested adventure experiences give a person a ready  
4 supply of stories through which to create an identity, both in the form of an on-going self  
5 narrative, but also a story that is shared with and co-constructed with other people, so the  
6 activity, one of the benefits that we have seen it bring, is providing material and resources for  
7 life stories, also the second thing is an opportunity to share the stories.

8  
9 Importantly those stories are generally very positive, particularly when compared to medical  
10 narratives and stories about mental illness, which tend to be as the literature shows focus on  
11 deficits, dysfunction and difficulties.

12  
13 I'd like to return to Laura's story briefly.

14 "Now things are even more unusual because I'm mad and pregnant. After the baby is born I'm  
15 going to be discharged, I'm not sure if I'm going to have access to the activity run by the Trust.  
16 Badminton group is less threatening than a mainstream class, there is a little group of us that stay  
17 for a drink in the cafe, we build up a nice social group, three have been approached about  
18 attending a move-on class so I'll lose those friends. The other thing was badminton was stoking  
19 all the other exercise; it has an important role in that it makes normal things to access. Without  
20 the security of supported activity, community sport becomes a mountain to climb.'

21  
22 'It's weird, they build you up for discharge, which is great, but it also curtails your access to all  
23 those things that help you stay stable.'

24  
25 'From when you start to get poorly, to when you accept the diagnosis, you are putting your brain  
26 in society's straitjacket, and that expects you to conform in a certain way, when you can relax  
27 and accept who you are, the problems the challenges and bonuses it might give you, you can  
28 blossom in a different way. It might be very different to the expected path, it's a better one, well  
29 it suits me better anyway.'

30  
31 'People assume with bipolar that you don't want it, but if you took me back ten years when I was  
32 a high-flying achiever, a state everyone assumes I want to get back to, very few bother to check  
33 in and find out I'm happier than I have ever been and probably weller than I have ever been too!'

1 Several core themes are in the recovery literature, sorts of experiences that people talk about,  
2 retrospectively in their recovery from mental health difficulties my PhD advisor, Ken Fox, at  
3 Bristol University, in the early 2000s, published a paper in '99, I think it was saying that physical  
4 activity and mental health was a horses for courses phenomenon. I think he was right about that,  
5 people have diverse needs for recovery and they can gain very diverse benefits or outcomes  
6 through physical activity, I suggest all of those, any or all are potentially satisfiable through --  
7 satisfiable?

8  
9 Potentially can be satisfied through involvement in physical activity and sport. They are not  
10 going to be for everyone, not all the time, but they are for some people, some of the time.

11  
12 Perhaps this flexibility is the key, there isn't a single answer to the physical activity mental health  
13 relationship, instead it's much more complex and individual specific. I think practitioners get  
14 that better than we do as researchers. My partner James is a Pilates teacher, he works with  
15 people all the time on a one-to-one class basis who he recognises as having unique individual  
16 needs, he doesn't have a problem with that; researchers, we sometimes fall into the trap of trying  
17 to find a single answer when actually a single answer doesn't exist.

18  
19 So where now with research in activity and mental health? These are just some of our thoughts,  
20 suggestions, very briefly some researchers are suggesting that we need to look more at what's a  
21 physical activity, so the prescription if you like, what activities? What frequency? Intensity,  
22 duration and so on are most effective. I think that might be important, might be useful, but we  
23 also need to focus on the how. Perhaps we need to more focus on this to balance it up a bit, what  
24 kind of culture, ethos, environments are useful for people with mental health problems?

25  
26 Research in psychotherapy and counselling suggest consistently the single best predictor of  
27 outcome is relationship between therapist and client, not the type of therapy, but the relationship,  
28 I think it's likely in activity and sport similar sorts of dynamics exist.

29  
30 What can we do to include hard to reach groups, typically in England ethnic minorities have a  
31 low uptake particularly in mental health settings.

32  
33 How can we better support people through discharge? Laura talked about the dependability and  
34 then being well enough to no longer receive the care and then losing those groups, so what can

1 we do to sustain and ease that transition process?

2  
3 Also it may be time that we start to research a little more alternative forms of activity that many  
4 of you here I know are involved in, such as dance, outdoor activities such as surfing, canoeing  
5 whatever it may be.

6  
7 Finally, what kind of research do we want? Can we ever prove this? I'm doubtful we can, I  
8 think we're talking about things that can never be measured. So the natural sciences model of  
9 measuring objects and only accepting statistical evidence is not going to work in the mental  
10 health field and activity area in my opinion.

11  
12 We need to start changing what we, as a community, accept as evidence, and include within that  
13 carefully gathered, analysed and considered survivor stories and experiences, because I think  
14 things like hope, optimism, a reason to say yes to life are things that are very difficult to put a  
15 number to.

16  
17 So thank you very much for your time, thank you for coming this afternoon, I'm sorry I have  
18 done everything in English and not been able to offer any different languages! But I very much  
19 appreciate you coming.

20  
21 I hope it's been useful for you in your own work, your own lives, or some aspect of it.

22  
23 Thanks also to the participants, this research wouldn't have happened without people being  
24 generous enough to share their stories and experiences with Kitrina and I, thanks also to the  
25 committee for inviting me, it's an honour to speak to you today, I very much appreciate the  
26 invitation and welcome that has been given. Thank you very much.

27  
28 MR O'FLYNN: Thanks very much David, a really fascinating presentation, I'm sure you will  
29 agree. And I'm sure it raised a number of questions, Dr Carless is happy to take questions now,  
30 or during the rest of the congress or during the expert group on Tuesday, but we do have 5 to 7  
31 minutes now if you have any questions for Dr David Carless we have a mic to go around if you  
32 want.

33  
34 While we're waiting, Thomas do you want to? While we're waiting, we'd like to make, as an

1 organising committee, a small presentation to Dr Carless, this is Thomas Aylward of the  
2 organising committee.

3  
4 MR AYLWARD: I might mention that the presentation to David is the piece of pottery from  
5 one of the famous potters here in Kerry, Louis Mulcahy Pottery on the Dingle peninsula, it's an  
6 oil lamp inscribed "Shining The Light On APA" and what David has done in his research, like  
7 many of the researchers presenting here this week, is shining a light on areas that don't always  
8 get a lot of attention, so thank you very much David.

9  
10 MR O'FLYNN: So is there any questions?

11 DR CARLESS: Oh no, this is bad!

12 MR O'FLYNN: Again while we're waiting, can I just remind all poster presenters to be at their  
13 stands from 4 o'clock, that's in a few minutes, until 5.30 for the formal presentation for the first  
14 formal presentation, in this room afterwards, right after this there will be the EUFAPA General  
15 Assembly. I see a question thank you.

16  
17 Q. Thank you, David, it's not really a question, it's more a comment and a request, I know that apart  
18 from the data in the narratives that you presented here, you have other work, especially in the  
19 context of mental health, that as there are no other questions, if you could share with us some of  
20 your expertise also in that specific composite.

21 DR CARLESS: The narrative methods?

22 Q. No with the project of golf.

23 DR CARLESS: I've known Pedro for about 12 years, he is referring to work we did while we  
24 were PhD students in Bristol in 2003, I was working, studying as a researcher in a particular day  
25 centre that was quite groundbreaking at the time in terms of the activity provision that was made  
26 there, but it was, tended to be particular types of activity, they had a small gym with a rowing  
27 machine and treadmill and that was about it I think.

28  
29 But Kitrina was a professional golfer, so she suggested that we tried using golf, which we hadn't  
30 done before, I hate golf! For me it's not a culture that I'm at all comfortable with, so we argued  
31 for months about the wisdom of inviting a stigmatised section of society into one of the most  
32 stigmatising areas there is, golf clubs, potentially!

33  
34 Kitrina won, she always wins! And we managed to raise a small amount of money to run a

1 programme over the summer, so we did half-day golf group, which some of the stories from  
2 today came from that, one afternoon a week.

3  
4 Kitrina led those sessions, she is a very good coach, very well suited to differentiation, working  
5 with people at different levels, and that was actually taken on within that centre and they have  
6 managed to keep the golf group running because of the response it got. It was fantastic for us,  
7 because it was actually a chance to give a little back, researchers tend to take, take, take, so it  
8 was nice to have a chance to actually put something on that gave people a chance to try a new  
9 activity or run to activity that they had done before.

10  
11 Q. Hi David, would you advocate that people with mental health problems don't take medication?  
12 And if exercise is pre-descriptive, how much of the prescription should it be?

13 DR CARLESS: No I wouldn't -- I'm not from a mental health background, I'm physical  
14 education, so activity, sport and PE, so I wouldn't presume to say that nobody should take  
15 medication. My understanding is based on service user's accounts of their experiences, so some  
16 people, Peter Chadwick's one who published a lot, a psychologist on his own experience with  
17 schizophrenia and he said medication helped him without a shadow of a doubt, he wouldn't be  
18 living his life in as independent a way now without the medication.

19  
20 Others have felt medication has been problematic, so I wouldn't say that we need to stop using  
21 medication, I think for me it would be irresponsible to say that. However, I think like a lot of  
22 people, I think I would have concerns that it's the first and primary means of treatment or  
23 intervention. I think we need some diversity, so I think I have some mental health difficulties  
24 myself in my teens, we had, that was back with family general practitioner I went to see with my  
25 mum, and he didn't give me tablets, he arranged for me to talk to someone, some counselling and  
26 I think it's really important that we provide these resources for people, young and old, and not  
27 just assume that medication is the best treatment.

28  
29 I think the research evidence, research is perhaps easier to conduct with tablets they are  
30 standardised, randomised control trials work very well, it's much harder for activities and talking  
31 therapies, which we can't standardise, that's harder to compare those.

32  
33 So I see activity, which is something hopefully discussed in a care team and with that individual  
34 in terms of whether it would be potentially satisfactory or desirable in their lives. And some

1 participants certainly rated it as more important in recovery than other forms of intervention,  
2 while others valued the medication over psychotherapy, but thank you for your question.

3 MR O'FLYNN: Anyone else?  
4

5 Q. I have a question, when you are looking at different sports, do you make any differentiation  
6 between a sport which can be done on your own, like running, or a sport which brings you into  
7 contact with others like badminton? Are they a progression or are they different things for  
8 different people?

9 DR CARLESS: That's a good question as well, it's hard to make those distinctions, what we  
10 have seen is some people start with a single sport, like Mark talked about going to the gym and  
11 then that was the thing that pushed the dominoes in Laura's phrase that led to him doing social  
12 activities; Ben was someone who was really only interested in running and he did that on his  
13 own, however it was still a social activity, because he would still talk with others about running,  
14 about the results of his races when he was competing, other people -- it is the social thing that  
15 they are interested in. So we haven't looked particularly at whether they lead to different  
16 outcomes, some people I think have probably a reference for some rather than others, I think as  
17 was discussed this morning by the Minister, it's really important that we consider what  
18 individuals actually want and value, and what suits them in trying to support those needs.  
19

20 MR O'FLYNN: I think that's as good a way as any to finish. Thank you all very much and  
21 Dr Carless, I think another round of applause please.  
22

23 End of Presentation  
24

25 MR O'FLYNN: A final announcement, poster presenters to your stands, EUFAPA general  
26 assembly in here, thank you all very much.  
27

28 DR KUDLACEK: Our General Assembly will begin about two minutes and last half an hour, so  
29 you can get both. General assembly will start in two minutes and go for 30 minutes, so you can  
30 stay.  
31

32 EUFAPA General Assembly  
33

34 DR KUDLACEK: Introducing the board of directors of EUFAPA. We have somewhere the

1 organising of EUCAPA 2010, 2012 Ursula trying to get people from poster session and most  
2 important our organising for 2012 Javier from Spain that's very important and the EUCAPA  
3 2014 will be also introduced at the closing ceremony where there will be more people but we are  
4 going for a short informative session on the assembly.

5  
6 We'll go first with the report on EUFAPA and the European journal will be done by Pedro, then  
7 Javier will talk about EUCAPA 2014 and then we'll talk about membership.

8  
9 So about the news, what is the key place for sharing the news and information, is the website of  
10 European Federation of Adapted Physical Activity, where you can find a lot of interesting  
11 information and the website is very easy on us, you know that [www.eufapa.eu](http://www.eufapa.eu), so you can find  
12 all the details needed in there.

13  
14 EUFAPA is trying to get engaged in a project currently with IT Tralee there is a discussion with  
15 EUFAPA being a partner in the UNESCO project that IT Tralee has put application in. So we  
16 are also thinking under the leadership to prepare some projects to be determined and submitted  
17 for 2012 with European Commission.

18  
19 In the past we have been directly involved in the project of EUSAPA and we are developing  
20 EIPET hopefully we'll come to a conclusion on that. All the information you can find on  
21 [eufapa.eu](http://eufapa.eu). We have also been approached by the company developing the new concept of hand  
22 cycle, also power assisted and we are considering also the partnership of EUFAPA, especially on  
23 European tour that we would be promoting most European federations, this new hand cycle that  
24 is perfect for more recreation and training.

25  
26 So I would like quickly to pass the board to Jose and Pedro to tell you about the journal.

27  
28 JOSE: Good afternoon the European Journal of Adapted Physical Activity. EUJAPA is a  
29 projected started in 2008, it was a continuous work from the previous bulletin of Adapted  
30 Physical Activity, however we would like to take this opportunity to promote the journal and  
31 also to give you some information about what we have been doing over these last four years.

32  
33 So basically the journal is now using a new online journal system for submissions of new  
34 manuscripts, so it's improving and becoming more efficient in the peer reviewing process, as all

1 of you know this journal is a peer review journal, so we were able, during the last year, to give  
2 this step forward in quality.

3  
4 We are also the journal is also indexed in the EPSCO database and Index Copernicus  
5 International, which is also an important opportunity, as it is considered in database research and  
6 it is valued for scientific purposes.

7  
8 Recently the journal had some changes in the editorial board, basically in the editor, Yves  
9 Valandnik has been in front of the journal for about 10 or 11 years, recently he decided he was  
10 no more available to keep as the main editor, so the editorial board just decided that Martin  
11 Kudlacek would assume the position of editor and we have three other co-editors.

12  
13 So basically this new, this is an image of the new submission system and we have now published  
14 four years of publications with two issues because we have a period of six months publication  
15 and we have now eight numbers published. Of course they are available on our web page as  
16 well as some of the back issues related to the European Union bullet of Adapted Physical  
17 Activity as I mentioned before.

18  
19 So just a few days ago with a very hard effort from the editor and the support technical team we  
20 were able to put online the number one from 2012 issue and with two basic interesting features.

21  
22 The first one is that we have, for the first time, a publication and articles submitted and accepted  
23 for publication from China, and we have two articles from China, so the journal is no longer  
24 searched by just European Adapted Physical Activity groups as we have submissions from  
25 United States, from China and from other countries outside of Europe.

26  
27 The second important thing is that we were able to publish this issue of 2012 with five papers,  
28 usually we publish the issue with four papers, but we have now an extra paper and I presume that  
29 with the increasing number of submissions every year, we'll be able to proceed and probably to  
30 step up to six, that would be a good opportunity, six articles per issue.

31  
32 So just to remind about the editorial policy of the paper, we are a peer review paper, the major  
33 aim of the journal is to spread scientific knowledge in the area of APA, providing researches  
34 with new opportunities of publication and this is the basic idea, or the major idea of the journal,

1 was to help young master and PhD students in Europe to publish their research in the area of  
2 APA. So our approach in the journal, as peer review journal, is to help authors to build up their  
3 manuscripts, and of course we are available to send for a second and a third resubmission and to  
4 make changes in order to help the authors in this publication process.

5  
6 So during 2011 and 2012 we had 30 submissions and from this 30 submissions, 13 articles were  
7 published. So we have a little bit lower than 50% but I think it is an important contribution for  
8 the area.

9  
10 Thank you very much, we hope you submit your manuscripts in the future to EUJAPA. Thank  
11 you.

12  
13 DR KUDLACEK: Thank you Pedro for a nice presentation, I would like to thank Pedro, Aija  
14 and other reviewers who worked really hard to make this journal with a growing number of  
15 submissions, we are growing also in quality.

16  
17 Next presentation will be by Javier, a little presentation on EUCAPA 2014, I will prepare it, this  
18 is like the famous movies, it's the before, the premiere, so it's a special for you because you  
19 stayed for the assembly, you will be first in the world to see this presentation so please Javier.

20  
21 JAVIER: Thank you Martin, I feel proud and honoured to be selected by the EUFAPA to host  
22 European Conference of Adapted Physical Activity in 2012 -- sorry 14!

23  
24 We have been working I have to say, hard, but I have to say first, thank you to two main  
25 institutions or organisations, I would like to thank of course EUFAPA for the process of  
26 selection to really evaluate with a very nice eyes our bid, our proposal, and I want to thank the  
27 whole team of EUCAPA 2012, Ursula, Liam, all the people organising this wonderful congress,  
28 because it was already in October 2009 that I came here just to hear what is going on, something  
29 about EIPET or something about that European Inclusive Physical Education Training and I get  
30 really amazed by the capability to do things regarding physical activity and inclusive settings.

31  
32 So with these two inspirations in Madrid we'll try to take their relay of this conference, so this is  
33 our aim.

1 Just to introduce the conference, which is in our mind at this first moment, is that as you see, the  
2 main theme of the conference will be something similar to the one that we are here, but we want  
3 to go a little bit further: "Inclusion into action: Applications from research."  
4

5 We are talking a lot these days about inclusive settings and from our centre and the organiser of  
6 the conference of 2014, we'll try to analyse the real context of inclusive practice, so as the  
7 preview or keynote presenter said; "research sometimes is not what we need, we need something  
8 else." So we're trying to really apply a research in the real context of inclusion, and keeping this  
9 in mind we want to offer a really unique opportunity for sports scientist and professionals to  
10 present their work, but different disciplines to come together and be inspired about new  
11 developments, research application and information related to sport science, sport medicine,  
12 physical education, health promotion and physical movement therapies in the context of APA.  
13

14 And even more, we would like just to promote fruitful and long standing co-operation between  
15 professional experts and institutions within Europe and of course worldwide.  
16

17 And I want just to now introduce the organiser who is let's say behind the event is the Centre for  
18 Inclusive Sports Studies, which is located in the faculty of Sports Science of the Technology  
19 University of Madrid, and this centre is proudly supported by Santas Foundation, a private  
20 company.  
21

22 So this triangle has arised this centre, and now it is facing this challenge and we are really here in  
23 Killarney these days, trying to learn and this assembly I would like to just let you know that we  
24 really would like to just be the congress of EUFAPA.  
25

26 It's not only a matter of our faculty and I would like EUFAPA to be engaged in the process to  
27 make the congress grow up and of course trying to - we are trying to, and my team is here, Mia  
28 and Javier are here, we are trying to collate all the good information that we are looking here,  
29 scientific level of course but organisational level too and of course Tony in 2010 a wonderful  
30 EUCAPA conference and of course this one in Tralee.  
31

32 You have this information in the flier that you can easily pick up outside next to the coffee when  
33 you will go to take the coffee please take a flier, with the important dates, this is the first event,  
34 we didn't mention it at our faculty, even in our department so you are really -- you are really the

1 first receiver of the news.

2  
3 It will be next October and then in 2014 we'll start with the process of receiving the abstracts for  
4 publication.

5  
6 I don't want to go very in deep, I just want to accepted you a piece of information regarding our  
7 centre, and our centre is trying to - the mission of the centre is to try to, from a research point of  
8 view, to analyse and spread benefits of health oriented physical activity and sport for people with  
9 disabilities which is something we are really going deep in this conference and this is I think the  
10 key issue of EUCAPA.

11  
12 So we'll keep -- we use this practice from an inclusive perspective to try to sensibilise the  
13 mainstream sports and at the same time offer opportunities for practice and places to update your  
14 knowledge.

15  
16 At the same time for me I have to say it's a pleasure to try and take this interest into Madrid and  
17 be a reference at international level to the discussion of this best practice.

18  
19 One of the main activities that we have been launching this last year has been the inclusive sport  
20 week that we organise together with our sponsor and it's a week that we develop in October and  
21 in October 2014 we would like to mix, to merge the two events. And merging the two events but  
22 keeping the eye on our aim, to promote sport practice from the scientific, academic and  
23 educational field.

24  
25 And using the inclusive context as a method of research.

26  
27 So these are the four areas in which we are working we have research, we have grants for PhD  
28 students. Training and formation, like even the inclusive sport week, or now the EUCAPA  
29 2014. We have activities and implementation, real activities of inclusion that we work together  
30 with other sponsors that I will introduce you now. And the diffusion of this knowledge.

31  
32 These are the partners that are behind our alliance, we have an alliance in Spain promoting  
33 Inclusive Sport which can coordinated, we have our national Paralympic committee, we have the  
34 television of Madrid and we have I know Pat really likes Real Madrid, we have the Real Madrid

1 foundation, one of our major collaborators, for example last weekend we have inclusive  
2 basketball camp, five days of children together, in one activity organised by Real Madrid  
3 Foundation, so in this way we are working as collaborators and even consultancy at technical  
4 level -- this is a picture, this is the fourth edition of this camp and I have to say for me it's  
5 difficult to be very objective when I talk about this camp, because it's a really, really fruitful, not  
6 only for the children, even for us for the technical stuff, to work during these days with the  
7 children because they don't have -- they don't see the disability as you can imagine.

8  
9 We have another academic and scientific level institution that will support this conference, of  
10 course our department, the faculty of health and human performance, we have the royal  
11 patronage on disability and we have different, you can see here different universities in Madrid,  
12 apart from ours, and this is something really important for us. We'll try to make the conference  
13 very linked with a university that is engaged with APA, teachers of other faculties, we have in  
14 Madrid 7 faculties of sports science, three public and four private, so there is a lot of interest,  
15 because APA is a key subject in the degree.

16  
17 Of course we have the director of reference centre for disability in Lyon, and our national  
18 hospital for paraplegic, which is really leading some research areas in Spain. And at the same  
19 time the federations of sport, disability federations in our country. And some that are not related  
20 with disability, because now in Spain you may know the process of integration of disability sport  
21 into mainstream sport is a really big, big problem we can say. Sometimes we forget the athlete  
22 in this process, but this is another issue.

23  
24 Well you see here this is a picture last October, you see there Aija, we had a form in the Real  
25 Madrid stadium, sorry Pat, just to let you know that our sponsors are really, really committed  
26 with the idea of -- to spread out the knowledge that we are generating and I have to say, I was  
27 really proud, but at the same time a little bit anxious because we were being evaluated to be or  
28 not to be the host of EUCAPA 2014, so for us it was another challenge.

29  
30 I have to tell you now, you can go to the website and you can see the basic information that I'm  
31 translating for you, you have it on the flier and you have a website similar that we have here in  
32 Tralee, but 2014 and you have an e-mail -- so I asked, kindly ask EUFAPA to help us to promote  
33 as much as possible the congress.

1 I will ask people from Finland, people from ITT to help us too, because I know that now here we  
2 have the best conference possible, but we would like to go a little bit further, I don't know how,  
3 but we'll try.

4  
5 And this is something that I think that Tralee and here in the conference we are enjoying, is the  
6 practical setting, to have the opportunity to enjoy the keynotes, all the communication, but at the  
7 same time the practical, this is something that we won't forget in Madrid in 2014.

8  
9 So even from the very first week, the inclusive sport week we have in October 2010 we have key  
10 speakers like Oscar Pistorius, we asked him to go to the track, we couldn't convince him to run  
11 with our students in an inclusive practice, but I have to tell you, his speech was really inspired,  
12 inspirational because a lot of people talk about this issue, but most of the time people don't ask  
13 him or ask the people with disabilities, so we wanted to ask him what's going on in his mind and  
14 his motivation and how was his PE and so on, it was really fruitful.

15  
16 And at the same time you see we have different sport practice from the inclusive points of view.

17  
18 Just to finish Martin I want to just share a little video, I hope it will work.

19  
20 Just to get some inspiration.

21  
22 (Video played)

23  
24 That's just a piece of inspiration that we tried to get from our practice and I just want to finish,  
25 just trying to ask you for, not help, help of course, support, and I really do hope to see you in  
26 Madrid in 2014. Thank you very much.

27  
28 DR KUDLACEK: I am a little bit worried as Javier mentioned if we are going to keep raising  
29 the bar on the quality of the conferences, I don't know where we are, and tell your friends that  
30 went to change for surfing or coffee that they missed a lot so they will not be invited to Real  
31 Madrid by Pat and us, you should tell them!

32  
33 Now we'll have a short report by secretary Aija Clavijna.

1 MS CLAVIJNA: Okay I will be really short because we are running out of time, basically as  
2 you can see numbers, member number -- the numbers have increased enormously since 2006  
3 when I got the list of members; I think I had about 70 or 80 e-mail addresses, so now we have  
4 over 200 and unfortunately here it's very few of you, but thanks for being here. And that's why  
5 we have to change a little bit in the future, over maintaining this list of membership so we don't  
6 lose those who have sent member applications two years ago and especially students who have  
7 been students two years ago or four years ago and today these people are not students any more  
8 and have other e-mail addresses and since we don't have a membership fee and we don't have  
9 any other control system to maintain membership list, so we have some innovations in the future  
10 just to help us and help you as being members to monitor how many are real members and how  
11 we can contribute also of course, increasing the bar of organising EUCAPA conferences, we  
12 have to help us help you increase the bar and help organising committees and also help those  
13 who maybe cannot attend those conferences because of financial issues and create some support  
14 for these people and especially for countries who are new in APA area.

15  
16 So we have decided to start with a low contribution payment to EUFAPA to €20 for two years  
17 and that will be part of your payment membership.

18  
19 So basically it will be started in 2014 and as I mentioned it will be included in the conference  
20 fee, of course for those who are not going to be attending our conference there are going to be  
21 other possibility to pay this payment, but as I mentioned before, it's only because this enormous  
22 increase of members and of course we want to have more members in the future. And to  
23 monitor and maintain real member list, so we need control system and as mentioned before, also  
24 to support those countries and maybe have some scholarship, award system for those who cannot  
25 pay maybe registration fee for European conferences.

26  
27 So basically this is in short about members and I don't know if we want to add something? But it  
28 has been really appreciable to see how the numbers of members increase, if you see Finland  
29 where EUCAPA was organised the number of members increased, Ireland again number of  
30 members increased, hopefully Spain next time number of members will increase because of  
31 Spain, so that's how we can attract more members and spread the information about EUFAPA.  
32 Thank you.

33  
34 DR KUDLACEK: Thank you very much, we promised to be short so we are slowly getting to

1 the end. There is one important initiative we are taking and that's under the leadership of Tony  
2 Bisponan. It was Tony who is trying to create a network of national organisations of Adapted  
3 Physical Activity, at this stage we know there are such organisations in Sweden, Italy, France,  
4 Czech Republic and Poland, until now we have only formally registered associations from Czech  
5 and Sweden, so there is going to be on our priority list and we are thinking about organising  
6 workshops or mini symposium and it will develop on how APA is developed in different  
7 nations.

8  
9 Quick reminder we are looking at 2016 so in about one year time, usually in fall 2013 there will  
10 be calls for organisers of EUCAPA 2016 so keep that in mind, share with the crowds that will be  
11 on the beach and in Irish pubs, so we'll be announcing it also on the website and online and we'll  
12 be also announcing it at the next event and so on.

13  
14 So thank you very much, we didn't have 214 people but we had those people that really cared  
15 and wanted to learn and as I said it's very hard to compete against the beach, a sunny day after a  
16 full day sitting inside and a good Irish Guinness, so thank you all. And I'm looking forward to  
17 the next two days here with you, thank you and thanks to the board members.

18  
19 Day concluded

<b>A</b>	<b>actual</b> 30:12	6:8,15 7:13,15,16,25	8:1,2,4,9,10,16,20,21,2	15:29,30 18:17	<b>austerity</b> 12:2
<b>abilities</b> 32:19 34:12	<b>actually</b> 3:27 11:32	8:16,17 10:14,29,32	<b>anecdotal</b> 21:25	19:9,24 20:19	<b>authentic</b> 71:29
<b>ability</b> 21:23 31:19 44:16	12:13 15:25 20:1	11:1,7 12:14 13:24	<b>announcement</b> 77:25	21:15,26 22:20	<b>author</b> 25:32 60:18
45:23 46:3 62:29	30:18,33 32:24 34:15	14:3,9,25,30,34	<b>announcing</b> 86:11,12	35:26,34 40:13 47:30	<b>authors</b> 80:2,4
63:34 71:19	37:8 40:33 47:21	15:13,23 16:3,34	<b>annoying</b> 4:4	56:15 63:28 69:4	<b>autism</b> 36:7 38:18
<b>able</b> 7:24 35:16,24,27,29	51:32 61:28 66:17,29	17:3,9,11,23,33	<b>another's</b> 65:7	74:10 79:33 80:1,8	52:16,20,33 53:3
38:17 39:7,9 40:10,15	68:24 69:34 70:21	18:2,11	<b>another</b> 5:31 13:23 20:7	85:14	<b>autistic</b> 44:29
44:25 67:34 74:18	71:3,10,21,28 73:17	19:3,11,16,19,26	23:6,12,17 24:17	<b>areas</b> 5:29 12:18	<b>automatically</b> 6:4
79:1,20,27,29	76:5,7,8 77:18	20:13,14,26,28 21:29	26:14 35:10 36:22,28	35:16,32 38:23 54:21	<b>available</b> 9:28 33:33 34:8
<b>about</b> 2:26 4:21,23,31	<b>acute</b> 69:21	22:17,18 23:3,11	43:30 51:4 53:24	69:4 75:7,32 82:27	35:7 47:3 52:34
5:23 6:4,19 7:6,18	<b>adaptation</b> 25:28 28:15	24:23 25:17 26:18,23	57:25 58:15 63:12	83:18	79:10,15 80:3
8:1,9,10	44:13	27:34 32:14,28	68:15 70:30 77:21	<b>aren't</b> 31:10 67:14,24	<b>avenue</b> 57:26,28 69:11
11:20,26,29,31	<b>adaptations</b> 28:16 43:27	<b>alliance</b> 82:32	83:9,22,28	68:34	70:17
12:2,17,28 13:23 14:5	44:33 45:8,13,18	<b>alliances</b> 22:14	<b>answer</b> 13:31 54:28	<b>argued</b> 64:14 75:30	<b>average</b> 52:12,13
15:22,24,25,27,33	<b>adapting</b> 49:34 53:22	<b>allow</b> 14:18 19:3 25:28	64:22 73:12,17	<b>arised</b> 81:22	<b>avoid</b> 24:27 62:33
16:17,19 17:9 18:11	<b>add</b> 85:27	39:9 60:28	<b>answers</b> 14:25	<b>around</b> 5:12 15:34 16:29	<b>award</b> 11:14 31:22 32:17
19:9 20:9,10,33 21:1	<b>addition</b> 15:4 17:20 18:2	<b>allowance</b> 33:10 40:18	<b>anxious</b> 83:27	19:9 21:1 24:22 29:9	35:16 85:24
23:6 25:10,14,31	26:15 31:10,14 51:19	<b>allowances</b> 33:9 40:18	<b>any</b> 3:4,17 4:12 5:20,32	36:25 62:19 68:32	<b>awarding</b> 2:17
29:34 32:17,20	<b>additional</b> 32:9,10 37:31	<b>allowed</b> 6:20 7:17	9:28 13:18 21:11	74:31	<b>aware</b> 13:15 16:31 61:33
33:6,14 36:6	<b>address</b> 6:34 14:11	13:26,27	26:32 29:5 30:14	<b>arranged</b> 76:25	62:17 66:5
37:7,16,25,26	<b>addressed</b> 42:8	<b>allowing</b> 5:24	31:17 32:15 33:1	<b>array</b> 3:5	<b>awareness</b> 17:14,27
40:4,14,23,24 41:26	<b>addresses</b> 85:3,8	<b>allows</b> 31:9 33:12 37:26	35:9 36:31 39:33	<b>arrested</b> 11:22	18:17 44:13 51:19
47:16,20 48:17	<b>adjustments</b> 28:12	38:19	40:2,3,6,9,14,18,19,2	<b>arrived</b> 2:13	<b>awash</b> 66:29
49:23,26 50:23,	<b>administration</b> 32:14	<b>almost</b> 32:17 50:8 65:16	3 41:7 47:5,14 51:29	<b>art</b> 67:13,14	<b>away</b> 1:4 7:27 14:25 23:7
<b>above</b> 3:17 14:34	<b>adults</b> 6:21 13:9,10,12	<b>alone</b> 4:26 55:13,17	52:8 53:1,14 54:9,21	<b>arthritic</b> 34:30	33:11 39:15,16 41:1
<b>absolutely</b> 13:19	58:15,17	<b>along</b> 4:14 18:17 36:3	57:9 58:10 59:9	<b>articles</b> 79:22,23,30 80:6	61:10 70:27
<b>abstracts</b> 60:11 82:3	<b>advantages</b> 70:34 71:1	51:23 64:10	61:10,21 65:30 66:30	<b>articulate</b> 7:8	<b>awful</b> 16:15,16
<b>academic</b> 12:34 34:12	<b>adventure</b> 61:22 72:3	<b>alongside</b> 1:15	67:25 73:6 74:18,31	<b>articulated</b> 63:19,21	<b>Abandoning</b> 65:27
47:9 49:20 60:18	<b>adversity</b> 62:30	<b>alpha</b> 49:12	75:10 77:5,20 85:7,9	<b>arts</b> 1:19	<b>Activity</b> 1:23 2:22 3:6
62:12 82:22 83:9	<b>advice</b> 35:9	<b>already</b> 19:23 20:22	<b>anybody</b> 22:26 29:11	<b>ascertain</b> 49:26	4:8,10,14,27
<b>academy</b> 9:27 10:11,13	<b>advisor</b> 73:2	31:19 38:1 45:20	33:1 37:26 39:19,33	<b>aside</b> 67:25	8:8,17,18
<b>accent</b> 6:27	<b>advocacy</b> 10:27 14:33	53:3,27 54:7 80:28	58:10	<b>ask</b> 52:34 64:6 68:31	9:2,14,15,17,18,26
<b>accept</b> 72:25,27 74:12	<b>advocate</b> 7:20 40:13	<b>also</b> 2:20,23,33 10:3	12:23	83:32 84:1,12,13,25	10:19,22
<b>acceptable</b> 36:19	76:11	12:23	17:6,20,25,27,31 18:3	<b>asked</b> 83:32 84:10	11:15,19,25,27,32
<b>accepted</b> 2:24 79:22 82:6	<b>advocating</b> 9:17 10:21	20:6,12,19,24 21:4,33	24:32 25:5,12 30:4,12	<b>asking</b> 4:19 6:16	12:8,17 13:33,34
<b>accepting</b> 74:9	<b>aerobics</b> 32:27 67:30	31:5 32:2,23 33:8	36:14 38:9 40:7	<b>aspect</b> 69:28 70:14 74:21	14:10 16:3 19:10
<b>access</b> 10:20 22:1 24:23	<b>affect</b> 13:34 24:20 50:10	43:24 44:8,12	43:24 44:8,12	<b>aspects</b> 23:14 32:5	22:13 26:19 29:24
43:2,3,4,7,8,13,23,34	63:7	45:3,12,22,25,33	46:11,21 47:10,11	<b>aspiration</b> 16:12	35:21 43:9,15 44:23
44:34,18,19 46:29,33	<b>affected</b> 44:15 62:21	46:11,21 47:10,11	49:14,32	<b>assembly</b> 75:15	46:26 47:10,28 55:12
72:15,19,22	<b>affirmation</b> 9:32	49:14,32	50:8,9,13,17,22,31	77:26,28,29,32 78:4	59:25,34 60:18,21,23
<b>accessibility</b> 1:29 5:24	<b>afforded</b> 9:33	50:8,9,13,17,22,31	51:23 53:24,29	80:19 81:23	64:10,33,34 65:1
8:16	<b>after</b> 25:2 33:22 36:19	51:23 53:24,29	60:7,10,32 61:20	<b>assess</b> 48:33	67:17,18,27
<b>acclaim</b> 9:32	38:7,13 41:28 42:1	60:7,10,32 61:20	63:15 64:28,34 65:2	<b>assessed</b> 49:12	68:8,11,22,27 69:5,6
<b>accommodation</b> 40:32	54:17 55:3,11,31	63:15 64:28,34 65:2	<b>alter</b> 26:23,33	<b>assessment</b> 34:11	<b>Adapt</b> 53:18 56:34 62:30
41:1	56:21 59:13 60:15	<b>altered</b> 45:29	<b>alternative</b> 74:3	<b>assigning</b> 45:13	63:28
<b>accordance</b> 50:15	64:33 67:18,28 72:14	<b>altered</b> 45:29	<b>although</b> 40:33 47:19	<b>assist</b> 1:14 17:18 31:16	<b>Adapted</b> 1:23 8:8,17
<b>according</b> 46:2	75:14 86:15	<b>altered</b> 45:29	51:25	<b>assistance</b> 33:3,9 35:7	9:2,15,16,26 10:19
<b>account</b> 68:21,31 71:14	<b>afternoon</b> 48:7 54:16,24	<b>altered</b> 45:29	<b>altogether</b> 22:33	40:19 43:30 44:8	11:15,25,27,31
<b>accounting</b> 62:22	55:27 59:27,32 60:26	<b>altered</b> 45:29	<b>always</b> 2:34 3:30	52:20	12:7,17 14:9,10 15:31
<b>accounts</b> 42:22,30 68:23	62:9,10 70:26 74:17	<b>altered</b> 45:29	4:1,2,34 16:16 19:3	<b>assistant</b> 44:25 45:21	16:25 19:10 29:24
70:5 76:15	76:2 78:28	<b>altered</b> 45:29	28:22 33:34 34:7	<b>assisted</b> 7:7 78:22	37:21 45:33 47:10,28
<b>aches</b> 34:24	<b>afterwards</b> 35:14 41:29	<b>altered</b> 45:29	35:21 37:25,33 44:16	<b>assisting</b> 32:12	49:1,7 50:8
<b>achieve</b> 3:18 8:2 10:16	67:32 75:14	<b>altered</b> 45:29	56:34 62:13 67:24	<b>associated</b> 40:27	51:1,5,8,14,18
14:26 18:19	<b>again</b> 3:21 4:13,27	<b>altered</b> 45:29	70:11,21 75:7,34	<b>association</b> 52:8	53:23,25 55:2
19:6,7,13,14 34:32	11:10,26 16:13 18:24	<b>altered</b> 45:29	<b>amazed</b> 71:11 80:30	<b>associations</b> 86:4	78:10,28,29 79:16,24
35:16 39:20	19:1 20:26 21:31	<b>altered</b> 45:29	<b>amazing</b> 35:13 55:26	<b>assume</b> 42:11 46:18	80:22 86:2
<b>achieved</b> 10:27 11:7	22:1,30 23:19 29:14	<b>altered</b> 45:29	71:11	72:31 76:27 79:11	<b>Africa</b> 10:3
22:14 32:17 35:23	32:23,31,34 33:10	<b>altered</b> 45:29	<b>ambition</b> 7:9,17 16:19	<b>assumes</b> 72:32	<b>Aged</b> 26:19,21
43:9 61:24 67:32	34:31 35:13 36:11,30	<b>altered</b> 45:29	23:30,32 24:1	<b>athlete</b> 17:1,30,31 23:27	<b>Ahern</b> 32:12
<b>achievement</b> 3:21 9:2	37:20,33 38:13,16	<b>altered</b> 45:29	28:20,24,26,28	83:21	<b>Ahimsa</b> 58:8,14,15
70:18 71:7	39:15,28 41:15 57:28	<b>altered</b> 45:29	31:2,5,10,14,16,17,21,	<b>athletes</b> 17:1,3,30,32	<b>Aija</b> 80:13 83:24 84:33
<b>achievements</b> 7:34 8:28	63:9 67:8 68:3,26	<b>altered</b> 45:29	24,26,28,31,34	21:19,33 22:3,7	<b>Alberta</b> 16:22
16:12	69:12,30,31,34 75:12	<b>altered</b> 45:29	1,32	23:11,26 24:4	<b>Allred</b> 16:2
<b>achiever</b> 72:32	85:29	<b>altered</b> 45:29	6:1,3,8,9,11,14,15,17,	25:22,28,29 26:10,20	<b>Allred</b> 28:24
<b>acknowledge</b> 13:17	<b>against</b> 86:15	<b>altered</b> 45:29	19,21,22,23,30,32,34	27:26,27,28,31 28:12	<b>Amaral</b> 41:19
62:15	<b>age</b> 6:3,34 17:32,33	<b>altered</b> 45:29	7:2,7,8,9,14,15,21,24,	52:10	<b>America</b> 11:31
<b>acquire</b> 6:7,8	26:31	<b>altered</b> 45:29	28,30,33	<b>athletic</b> 26:7 69:12 70:11	<b>Anyone</b> 3:31 65:29 66:34
<b>acquired</b> 55:9,31 58:7,15	<b>agencies</b> 8:16 10:28	<b>altered</b> 45:29	<b>arcade</b> 22:4	<b>athletics</b> 25:28	77:3
<b>across</b> 4:8 9:23 16:32	17:15 18:15 20:27	<b>altered</b> 45:29	<b>architects</b> 5:17,25	<b>atmosphere</b> 61:20 67:10	<b>APA</b> 1:6,28 8:9
21:27 23:11,27 33:20	<b>agent</b> 48:26 70:6	<b>altered</b> 45:29	<b>are</b> 1:8 2:5,26 3:13,31	<b>attain</b> 39:15	9:4,5,7,12,33 10:6,13
34:15 36:6 50:27	<b>ages</b> 49:4 61:24	<b>altered</b> 45:29	4:19,31 5:8	<b>attempt</b> 45:7	11:13 12:33 13:34,26
62:21 65:18 69:3	<b>ago</b> 16:7,11 21:16 33:25	<b>altered</b> 45:29	6:2,9,10,11,19,21	<b>attend</b> 41:8 85:13	14:4,14,22 25:1 36:28
<b>acted</b> 70:5	38:14 67:18 79:19	<b>altered</b> 45:29	7:7,15,16,20,34 8:1	<b>attendance</b> 2:14,16	52:18,19,21 60:12
<b>action</b> 1:11 10:25	85:6,7	<b>altered</b> 45:29	9:29,33 10:2,3,7	<b>attending</b> 42:28 43:28	75:6 79:33 80:2
43:3,7,26 44:12,18,21	<b>agree</b> 6:22 24:13 74:29	<b>altered</b> 45:29	11:33 12:3,5,6,10,18	72:18 85:20	81:12 83:13,15 85:14
45:2,7 46:12 70:18,25	<b>agreement</b> 21:8 31:26	<b>altered</b> 45:29	14:10 15:9 16:30,31	<b>attention</b> 28:34 34:23	86:6
81:3	<b>agreements</b> 20:28	<b>altered</b> 45:29	17:18,33 18:5	45:2,9 47:3,34	<b>API</b> 24:34
<b>activation</b> 43:10	<b>ahead</b> 1:6 18:21 59:16	<b>altered</b> 45:29	19:9,11,34	51:23,29 75:8	<b>Army</b> 23:30 24:1
<b>active</b> 15:4 26:11 34:13	<b>aid</b> 9:22	<b>altered</b> 45:29	21:5,6,11,16,28	<b>attitude</b> 37:6 49:29	<b>Arthritis</b> 33:27 34:5
64:29 69:23 70:6,32	<b>aim</b> 10:25 21:19 26:9	<b>altered</b> 45:29	22:17,19,28,31	50:9,33	36:13,22
<b>activities</b> 1:31 9:10 17:33	30:2 36:31 79:33	<b>altered</b> 45:29	23:8,21,28	<b>attitudes</b> 22:19	<b>Arthur</b> 65:14,25
18:3 22:33 35:33	80:33 82:22	<b>altered</b> 45:29	24:4,5,23,25,34	48:4,11,17,20,24,26,2	<b>Asia</b> 17:5
43:15,27 44:16,27	<b>aimed</b> 9:17,22 30:2	<b>altered</b> 45:29	25:14,34	9:32 49:4,9	<b>Aspergers</b> 32:16
45:8,18 46:16,27	<b>aims</b> 42:18 48:32	<b>altered</b> 45:29	27:14,15,20,23,33	50:4,5,11,18,27,28,31	<b>Athens</b> 18:6
51:18 53:33 54:1,4	<b>air</b> 48:20	<b>altered</b> 45:29	28:7,15,19 29:9	51:4,10,15	<b>Australia</b> 33:25,31 34:1
62:29 71:33 73:21	<b>all</b> 1:4,31 2:12,13	<b>altered</b> 45:29	<b>area</b> 1:30 2:33,34 5:31	<b>attract</b> 2:27 85:31	<b>Austria</b> 11:21
74:4 76:30 77:12	3:7,20,25	<b>altered</b> 45:29	9:13 14:11,14	<b>audience</b> 14:13 71:34	<b>Authority</b> 5:15 30:29
82:19,29	4:12,17,18,21 5:18	<b>altered</b> 45:29		<b>auditions</b> 61:7	<b>Avenues</b> 68:8

- AYLWARD** 75:1,4
- B**
- baby** 72:14
- back** 6:15 11:32,33 13:26  
15:29 16:7 18:24  
19:1,22 20:15 21:25  
22:9 28:16 30:17,26  
35:24 36:30 37:3,14  
39:28 57:27,28,32  
59:29 65:19 67:8,11  
69:29,30,34 70:13  
72:31,32 76:7,24  
79:16
- background** 30:17  
40:4,12,13 47:28  
76:13
- backwards** 36:2
- bad** 12:2,4,5 39:12 40:17  
61:34 70:31 75:11
- badminton**  
67:19,20,27,29  
68:1,15 72:16,18 77:7
- bag** 59:33 60:10
- bags** 60:8
- balance** 73:23
- ball** 28:15 71:10
- ballerinas** 61:7
- bar** 84:29 85:11,12
- barriers** 4:20 22:22 23:9  
33:5
- base** 9:12
- based** 1:11 9:26 12:17  
17:5 29:7 30:10  
42:31 45:7 47:26  
76:15
- basic** 79:20,34 83:30
- basically** 21:22 23:21  
33:18,24 35:23 37:22  
78:33 79:8,13  
85:1,19,27
- basis** 17:23 25:14 64:25  
73:15
- basketball** 4:18 20:27  
28:31 83:2
- beach** 24:31 86:11,15
- beads** 66:7
- beats** 6:29
- beautiful** 2:11 58:34
- beauty** 15:15
- became** 15:18,31 18:21  
61:16 66:21
- because** 6:2 11:22 14:9  
15:18 16:2  
17:14,21,33 18:17  
19:12,26 21:15,17,18  
23:2,31,32,33 27:34  
30:4,13 37:26,33  
39:12 40:32 47:21  
52:3,31,34 54:5  
55:11,19 56:24,25,32  
57:6,20 61:14 64:5,28  
65:6,22 66:19 67:3  
69:5,7,8,34 70:2  
71:21 72:14 74:13  
76:6,7 77:13 7
- become** 3:2 4:24 5:16  
10:15 14:21 17:14,26  
21:13 38:19 61:4,32  
63:21 64:6 72:1
- becomes** 5:6 72:20
- becoming** 3:13 78:34
- bed** 70:28
- been** 1:11,28 3:1,20,25  
8:8,24,28 16:2  
17:15,17 18:9,22  
21:24 23:14 30:14,22  
32:23 33:31,34 34:2  
35:21 37:11 38:2,14  
40:34 42:8,15 43:23  
48:29 60:17  
62:3,14,32  
64:19,22,24 65:6  
67:27,34 68:4,9 71:19  
72:17,33 74:18,21,26  
76:20 78:19,21,31  
79:9 80:24 82:19 8
- before** 15:18 24:19  
25:10,31 36:30
- 55:9,30 59:32 60:26  
67:11 69:20 75:30  
76:9 79:17 80:18  
85:21,23
- began** 30:17
- begin** 14:31 20:32 60:26  
64:16 77:28
- beginning** 6:11 33:24  
42:11
- begun** 17:31
- behalf** 4:3
- behave** 60:34
- behavioural** 49:15
- behaviours** 44:29
- behind** 61:24 81:17  
82:32
- being** 2:21,23 4:7 5:19  
6:20,27,28,32,33 9:30  
12:6 20:7 21:19,31  
23:34 24:1 32:25  
40:17,28 41:1 45:14  
46:30,31 60:20 63:25  
65:19,25,27 66:28  
67:16,18 68:26,31  
69:29 70:5 71:3  
73:34 74:23 78:15  
83:27 85:4,10
- belief** 23:15
- beliefs** 48:24
- believe** 11:25 12:10,18  
17:21,30 19:5 58:2,4  
59:34 71:9
- believer** 19:4
- bell** 41:23
- belonging** 34:25
- belong** 36:2
- beneficial** 70:23
- beneficiaries** 7:30,31
- benefit** 58:27
- benefiting** 32:29
- benefits** 32:27 34:28 42:2  
70:34 72:6 73:5 82:8
- best** 1:18 10:12,15 11:2,8  
19:20 24:13,23 25:26  
27:15 50:28 51:4  
60:19 61:21 67:28  
73:26 76:27 82:17  
84:2
- better** 2:11 15:14 17:14  
25:14 27:18,23 28:9  
34:28 66:5 69:34  
70:2 72:28,29  
73:14,33
- between** 10:28 12:12,14  
24:30 25:1  
26:7,14,19,21  
27:14,20 29:8 43:24  
49:4 67:11 73:27  
77:6 81:14
- beyond** 33:22 34:20  
45:32 64:14
- bid** 80:26
- big** 3:1,7 8:9 14:20 33:10  
37:31 38:20 53:12  
55:25 57:26 58:30  
61:8,24 66:14,24  
69:22 83:21
- bigger** 3:2 61:30
- biggest** 14:9
- bike** 68:14
- biographical** 63:10
- biology** 35:17
- bipolar** 61:4 72:31
- bit** 16:28 18:33 32:25  
37:16 60:33 61:34  
64:25 67:13  
68:4,13,14,18,21  
69:11,33 73:23 80:7  
81:3 83:27 84:2,28  
85:5
- bits** 18:24 65:16 66:31  
67:4 68:19
- bizarre** 18:20 66:30
- blame** 60:11
- blazer** 15:22
- blind** 5:4 45:23,29 49:33  
51:31 52:8,10 53:33  
54:14,20,25,33
- 55:6,30,31 56:12,18  
58:2,6,7,12,14,15,17,  
19,20,22,23,24,28  
59:16
- blindness** 49:30
- block** 37:21
- blocks** 6:14
- bloke** 66:19
- blossom** 72:28
- blue** 7:14
- blur** 66:25,26
- blurry** 61:34
- board** 1:23 12:11,14  
28:17 77:34 78:26  
79:8,10 86:17
- boarding** 61:9
- boat** 56:13,19,25,31,32,34  
57:1,4,5,6,7,8,9,11,12  
13,16,17,21,33
- boats** 55:22
- bobs** 67:4
- bodied** 35:29
- bodies** 1:22 19:32  
20:1,32
- body** 8:15 20:4 28:29  
35:25 69:22
- bonuses** 72:27
- boobs** 61:8
- book** 63:20 68:7
- booked** 24:27
- books** 51:19
- border** 11:21
- border** 17:1
- born** 7:1 33:30 39:3  
72:14
- both** 4:28 6:32 8:29  
10:12,15 26:15 37:14  
39:20 42:8,13 44:6  
54:5 60:2 64:14 72:4  
77:29
- bother** 72:32
- bottom** 60:6
- bounced** 67:11
- brain** 72:25
- brave** 18:29
- break** 6:8 23:8 24:19,23  
25:20 54:17 59:16,22  
70:27
- breaks** 19:3 25:34
- bridge** 22:12,22 31:5
- bridging** 14:18
- brief** 13:4 33:19 59:32
- briefly** 15:27 70:25 72:13  
73:20
- bright** 7:8
- bring** 13:10 22:21 36:30  
37:3 47:33 72:6
- brings** 22:1 63:15 77:6
- brisk** 67:8
- brittle** 61:32
- broad** 36:32
- broadly** 30:2
- brought** 3:21 16:11  
34:12
- build** 10:10 68:19  
71:22,23,33 72:17,22  
80:2
- building** 5:19 6:14 8:27  
10:11 12:24 17:12  
63:19
- builds** 22:9
- built** 5:19 22:14 23:14
- bullet** 79:16
- bulletin** 78:29
- bullies** 61:11
- burden** 6:4
- bus** 33:5 60:3
- business** 14:31
- busy** 11:10 15:7  
68:31,32,33,34
- but** 2:23 3:25,31  
4:12,13,26 5:1,2,3,4  
6:7,15,20,24,29  
7:1,13,16,29 12:4,13  
13:13,17 14:11,14,24  
15:7,22,25,27
- 16:3,24,25,31,34  
17:6,20,27 18:9,21  
19:4,17,23,26 20:2,6  
21:7,25,31,33 22:6,27  
23:3,7,13,18,21,29  
24:16,19,25 25:34  
28:31 30:2,12,22,27  
31:5 32:14
- buzz** 67:32
- Bachelor** 36:20
- Bagga** 28:26
- Ballet** 60:32 61:2,7
- Barrett** 10:33
- Barrier** 4:9 33:8,10,32  
34:1
- Bartolillo** 28:28
- Belgium** 18:5
- Ben** 69:19 70:5,11,13  
77:12
- Bentall** 63:20
- Bernie** 60:7
- Bifida** 36:14
- Bispanan** 86:2
- Black's** 46:26
- Bord** 1:23
- Boris** 44:29
- BOUNDS** 29:27,32  
33:18
- Brazil** 54:20  
58:2,16,19,22,23,25,2  
8
- Brazilian** 59:5
- Brendan** 5:29
- Bristol** 64:29 73:3 75:24
- Brothers** 16:4
- Brussels** 17:6
- C**
- cafe** 22:5 72:17
- call** 13:11 16:20
- called** 14:17 29:20  
37:7,21 69:19
- calls** 5:29 86:10
- camaraderie** 67:12
- came** 18:15 19:27 23:27  
33:20,25,33 36:6 37:6  
40:33 47:7 55:12  
67:2 76:2 80:28
- camp** 83:2,4,5
- campus** 53:32 54:5
- can't** 5:24,25 28:28 36:34  
39:5,10,12 57:21  
67:24 71:31 72:1  
76:31
- can** 2:27 3:20,26 4:21,23  
5:1 7:8,13  
11:26,28,31 12:13  
13:17,33,34 14:3,5  
16:15 18:24  
19:6,12,13,24  
20:17,22  
21:17,24,28,31,32  
22:6,11,14,20,26,27  
23:8,13 24:5,30,32  
25:1,5,12 27:21,23,34  
28:9,12,19,28 29:5,7  
30:7 31:12,19,32,33  
32:30 33:2 35:25  
37:18,27,3
- cancer** 30:6
- candidates** 32:31
- cannot** 85:13,24
- canoeing** 61:22 74:4
- capabilities** 30:23
- capability** 80:30
- capable** 68:19
- capacity** 8:27 17:12
- capture** 42:30
- car** 56:25
- care** 73:34 76:33
- cared** 86:14
- career** 7:3 16:26 30:3  
33:22,27,33  
34:9,11,20 35:13  
36:11,28,33 43:33  
51:23 66:16
- carefully** 74:13
- carer** 46:22 67:16
- caretaker** 46:9 47:11
- carnivals** 35:25
- carried** 48:29 61:8
- carry** 67:18 69:7
- carrying** 27:2
- case** 2:8 5:30 23:4 26:4  
28:15,21 31:1 41:32  
44:22 45:23
- cases** 6:16 20:2 42:28
- categories** 43:24
- category** 42:32
- category** 10:24
- cater** 16:28 30:4 31:32
- caught** 66:5
- cause** 62:22
- caving** 61:23
- central** 6:15
- centre** 1:29 2:30 4:1,2,10  
8:1,9 9:12,15,17  
10:16,19,24 13:1,9  
20:6,8 24:17 30:21,25  
33:6,8,9 34:31 36:2  
38:3,7 60:12  
67:2,12,17,30 71:3  
75:25 76:5  
81:5,17,19,22 82:7  
83:17
- centred** 9:20 43:32 46:27
- centres** 4:14 21:23  
23:27,28
- ceremony** 78:3
- certain** 31:28 64:19  
72:26
- certainly** 16:25 21:28  
22:20 69:6 70:13  
77:1
- certificate** 35:23
- chairperson** 30:18
- challenge** 12:22  
14:9,11,14,20,24  
19:34 81:22 83:28
- challenged** 60:20 69:14  
71:21
- challenges** 12:22 13:30  
14:26 19:19 39:28,29  
64:6 72:27
- championing** 14:33
- championship** 58:3,4
- chance** 14:18 16:24  
19:17,18 24:3  
29:20,23,28,32,33  
30:2 31:16,28  
33:19,24 35:27,32  
36:5,19,30 37:7,8  
38:21,27 39:30 40:22  
76:7,8
- change** 14:34 16:10  
18:25 19:14 33:22  
34:25 35:12 46:34  
48:26 55:34 62:30  
84:30 85:5
- changed** 33:28 67:12
- changes** 42:13 65:19  
79:8 80:4
- changing** 74:12
- chap** 67:5
- characterise** 42:18
- characterised** 26:15
- characterises** 46:32
- chat** 67:8 68:12
- chatting** 64:32
- check** 60:26 61:23 72:32
- chemistry** 63:10
- cheques** 12:6
- chief** 15:3 23:31
- child** 33:30 52:4,19 53:17
- children's** 66:14
- children** 9:9 17:32 32:7,9  
48:33 49:24,30 50:27  
52:2,4,6,25 53:3,32  
54:7 58:16 83:2,6,7
- choice** 6:23,24
- choices** 6:21,23
- choose** 18:9 24:30 53:24
- choosing** 24:22
- chosen** 18:8
- chunk** 66:25
- cigarettes** 71:5
- circle** 71:23
- circles** 28:15 71:23
- circuits** 67:2
- citizenship** 15:5
- city** 42:27 55:20,25 58:30
- clarify** 47:26
- class** 15:34 32:28 40:9  
43:8,27,30 44:8,16,25  
45:8,10,14,22,24,25,3  
0 46:2,3,12 49:33  
52:14,15,21 53:4,16  
72:16,18 73:15
- classes** 31:14 33:2 35:4  
41:20,27 42:7,16,34  
43:34 44:6,30  
45:21,33  
46:6,27,32,34  
47:20,22 49:19,27  
50:23,34 51:33  
52:24,25 53:5,7,28  
60:32 67:12
- classmate** 45:29
- classmates** 34:34 35:33
- classroom** 31:14 35:3
- clear** 36:31 50:22 57:33  
62:24 65:5
- clearly** 4:28 29:9 66:24  
69:19
- client** 73:27
- climb** 72:20
- climbing** 61:23
- clinical** 64:4
- clip** 18:8,10
- close** 20:31 47:33 62:15
- closely** 17:11
- closer** 56:10
- closing** 78:3
- club** 3:10 32:10 38:24  
44:31 45:33  
57:23,24,27,32 58:30  
71:10
- clubhouse** 3:6
- clubs** 13:9 38:25 55:22  
75:32
- coach** 9:27 23:13 39:12  
76:4
- coaches** 14:22 17:2 18:14  
23:11,12,15
- coaching** 19:24,26,30,32  
23:13 30:12 32:7,10  
34:13,20 35:18 38:25
- coal** 2:21
- coast** 15:15
- cockpit** 56:14
- coded** 24:23
- coding** 42:32
- coffee** 24:19 25:2,17,20  
59:16,22 81:32,33  
84:30
- cognitive** 45:17
- cohort** 6:9 9:6
- coincidental** 36:13
- collaboration** 10:27  
20:31 21:2 44:13,26  
45:9 62:13,15
- collaborative** 20:30
- collaboratively** 21:11
- collaborators** 83:1,3
- collate** 81:28
- colleague** 13:8 15:27  
17:10 34:17 44:26  
45:9 48:10 62:12
- colleagues** 12:22 68:31
- collect** 33:6,7
- collecting** 26:30
- collection** 26:32
- collective** 27:21
- college** 15:19,22 31:25,29  
55:2
- colleges** 37:10
- colour** 3:9,10 24:23
- combination** 7:12  
15:14 16:8 18:24  
22:17 30:13 31:21  
33:8 34:15 35:27  
37:14 39:7 40:30  
49:14 52:4

57:27,28,32 67:13 78:20 81:10 <b>comes</b> 3:1 7:30 33:6 63:28 65:30 <b>comfort</b> 37:31 <b>comfortable</b> 50:22 75:30 <b>coming</b> 16:10,11 18:12 19:5,30 30:22,32 33:11,20 34:1 40:13 48:8 56:28 74:17,19 <b>commenced</b> 30:17 <b>comment</b> 47:26 75:17 <b>comments</b> 47:5,14,33 54:9 <b>commit</b> 8:16 <b>commitment</b> 1:22 <b>committed</b> 9:33 14:10 83:25 <b>committee</b> 14:17 25:2 74:25 75:1,2 82:33 <b>committees</b> 85:12 <b>common</b> 19:19 43:5,26 44:12,18,23 45:7 65:34 71:25,26 <b>commonalities</b> 19:12 <b>communal</b> 71:33 <b>communicate</b> 28:28,29 65:23 <b>communicates</b> 71:14 <b>communicating</b> 39:26 <b>communication</b> 32:20 56:4 84:6 <b>communities</b> 8:33 10:26 17:25 38:21 63:2 <b>community</b> 6:10 9:20 18:13 21:20 22:9,33 30:10,14 32:6,7 48:16 72:1,20 74:12 <b>company</b> 78:21 81:20 <b>comparative</b> 42:31 <b>compare</b> 76:31 <b>compared</b> 46:17 50:1,4 70:12 72:9 <b>comparing</b> 26:13 <b>comparison</b> 31:8 <b>compensate</b> 26:3 <b>compensation</b> 26:4 <b>compete</b> 27:31 86:15 <b>competence</b> 49:1,8 50:14,18,20,22,26 51:2,4,15 <b>competent</b> 51:9 <b>competing</b> 25:29 26:31 77:14 <b>competition</b> 25:6 26:9 32:18 42:2 57:5 61:23 <b>competitions</b> 18:4 <b>competitive</b> 61:20 69:20 <b>complete</b> 25:12 36:14 <b>completed</b> 29:23 31:20 <b>completely</b> 36:13 66:31 <b>completing</b> 27:2 31:34 <b>complex</b> 73:13 <b>complications</b> 44:5 <b>composed</b> 26:26 <b>composite</b> 75:20 <b>comprehensive</b> 46:29 <b>compulsory</b> 47:28,31 53:23 <b>computer</b> 67:21 <b>conceived</b> 46:29 <b>concentrate</b> 33:12 <b>concentrated</b> 6:29 <b>concentric</b> 71:22 <b>concept</b> 4:7 35:22 78:21 <b>conceptual</b> 42:13 <b>conceptualised</b> 63:6 <b>concerned</b> 49:23 <b>concerning</b> 48:29 <b>concerns</b> 49:33 51:24 52:3 76:22 <b>conclude</b> 51:7 <b>concluded</b> 86:19 <b>conclusion</b> 27:26 78:20 <b>conclusions</b> 42:33 46:20 47:19	<b>condition</b> 34:6 51:33 52:15 63:17 <b>conditions</b> 30:6 49:26 50:28 <b>conduct</b> 42:30 64:20 76:29 <b>conducted</b> 27:7 <b>conference</b> 1:1 2:16,17,24 4:6 7:27 8:23,31 10:8 11:1 12:15,21,29 13:31 14:24,28 15:5 16:19 19:9,16 21:12 24:9 29:6,12 30:18 36:6 58:2 59:5,33 60:10,15 80:22,32 81:1,2,6,30 82:9 83:9,12 84:2,5 85:19,20 <b>conferences</b> 2:27 9:4 12:12,14 84:29 85:11,13,25 <b>confidence</b> 21:34 23:33 30:23 32:18,20,31 36:32 37:15,16,17 39:2,19 50:10 67:30 <b>confident</b> 49:34 <b>confidential</b> 35:10 <b>confirms</b> 50:5 <b>conform</b> 72:26 <b>congenital</b> 55:31 58:6 <b>congratulate</b> 15:21 <b>congratulations</b> 11:7 <b>congress</b> 1:10,14,21 8:17 10:32 11:14,19 13:1 14:16,31 59:30 74:30 80:27 81:24,27 83:33 <b>conjunction</b> 10:6 21:7 <b>connected</b> 19:11 71:27 <b>conscience</b> 6:17 <b>consciousness</b> 17:27 <b>consequence</b> 42:15 68:25 <b>consequent</b> 9:32 <b>consider</b> 6:3 68:4 77:17 <b>considerable</b> 42:11,13 <b>considerably</b> 47:17 <b>consideration</b> 5:18,21 <b>considered</b> 43:24 74:13 79:5 <b>considering</b> 48:25 78:22 <b>consistence</b> 49:13 <b>consistency</b> 49:12 <b>consistent</b> 49:14 <b>consistently</b> 73:26 <b>constant</b> 31:14,15 <b>constraints</b> 35:7 <b>constructed</b> 71:33 72:5 <b>consultancy</b> 21:4 83:3 <b>consultant</b> 60:18 <b>consultative</b> 15:5 <b>consulting</b> 4:3 <b>consumption</b> 26:32 <b>contact</b> 43:32 44:29,32 45:20 77:7 <b>contacted</b> 44:4 45:5 46:5,8 <b>contacts</b> 38:26 <b>context</b> 44:6 45:6 46:6 62:9,17 63:34 71:17 75:19 81:6,8,12 82:25 <b>contexts</b> 46:27,34 <b>continue</b> 10:2 17:34 20:28 57:24 <b>continued</b> 36:21 58:1 <b>continuous</b> 37:21 78:29 <b>contrast</b> 71:3 <b>contribute</b> 85:11 <b>contribution</b> 6:5 48:30 80:7 85:16 <b>control</b> 76:30 85:9,23 <b>conversation</b> 30:20 54:24 <b>convince</b> 84:10 <b>coordinate</b> 10:25 17:7 <b>coordinated</b> 82:33 <b>coordinating</b> 9:17 10:20 <b>coordinator</b> 29:23,32 32:14 <b>cope</b> 62:30	<b>core</b> 9:13 32:2 43:2 70:23 73:1 <b>cornering</b> 59:13 <b>corporate</b> 18:13 <b>correlations</b> 50:26 <b>corresponding</b> 26:1 <b>cost</b> 9:28 <b>could</b> 3:18 6:32 7:9 13:31 18:8,18 26:33 30:5 33:10 34:19,32 35:4,8,9 38:11 40:8,14,15,18 47:30 51:17 53:21 67:18 69:24 75:19 <b>couldn't</b> 1:21 2:11 15:14 61:16 70:14 71:9 84:10 <b>counselling</b> 73:26 76:25 <b>counselor</b> 40:12,14 <b>countries</b> 1:8 2:13 16:30,34 17:10,11 20:21,23 21:27 22:18 79:25 85:14,24 <b>country</b> 5:23 13:18,34 18:21 20:31 40:3,33 48:30 51:11 60:6 83:19 <b>couple</b> 16:24 19:11 20:9 29:4 37:32 59:32 60:7 <b>courage</b> 3:33 16:20 <b>course</b> 1:24 9:28 12:34 16:15,25 21:25 23:3 29:34 30:2,8,10,17,21 31:8 33:11,15,16 34:19 36:5,34 37:2,6,7 40:2 49:7 50:9,31 51:1,5,8,25 53:21,27,30 54:32,33 55:5,8 71:8 79:15 80:3,25 81:15,27,29,30 83:10,17 84:25 85:11,20,22 <b>courses</b> 15:23 31:5,8,27,32 33:1 41:7 53:32 73:4 <b>cover</b> 30:10 <b>create</b> 72:4 85:13 86:2 <b>created</b> 19:30 <b>creativity</b> 16:17 <b>creativity</b> 63:15 <b>cricket</b> 1:18 60:29 <b>criteria</b> 31:28 <b>critically</b> 17:21 <b>cross</b> 57:18 <b>crowds</b> 86:10 <b>crucial</b> 48:26 <b>crucially</b> 25:8 <b>cruel</b> 66:28 <b>cruise</b> 56:33 <b>crying</b> 61:28 <b>cultural</b> 10:13 11:5 24:30,31,32 59:34 60:1 63:10 <b>culture</b> 18:33 22:10,11,12,15,21,31 35:32 68:33 69:1 73:24 75:30 <b>cups</b> 64:33 <b>curious</b> 40:4 47:16 <b>current</b> 38:2 48:16 <b>currently</b> 10:17 78:14 <b>curriculum</b> 43:5,9,13,14,26,28 44:10,12,18,33 45:7,12,28 46:12 48:22 51:19,27 <b>curtains</b> 72:22 <b>cut</b> 12:6 66:7 <b>cycle</b> 78:22,23 <b>cycling</b> 42:32 <b>Campabilities</b> 9:8 32:23 36:17 <b>Canada</b> 16:22 <b>Caribbean</b> 10:3 <b>Carless</b> 59:18,24 60:19,24,26 74:29,31	75:1,11,21,23 76:13 77:9,21 <b>Carmen</b> 29:4,15 <b>Castlebar</b> 40:24,29 <b>CAMPOS</b> 48:4,10,15 51:32 52:10,15,19,31 53:4,8,12,15,23,33 54:4 <b>CARA</b> 8:9 9:15,16,19 10:6,19 12:34 13:21 20:6 8,24:17 60:12 <b>Cerebral</b> 46:6 <b>CEO</b> 15:3 <b>Céad</b> 15:10 <b>Chadwick's</b> 76:16 <b>Chadwick</b> 63:14 <b>Chairman</b> 13:2 <b>Chances</b> 17:33 40:3 <b>Charity</b> 16:4 <b>Chiefly</b> 43:26 44:7 <b>China</b> 17:1 79:23,25 <b>CHAIR</b> 29:4 32:27 39:24 41:15,23 47:5,14,33 48:7 52:27 54:9,16 58:10 59:9,13 <b>CLAVLJNA</b> 84:33 85:1 <b>Coimbra</b> 48:16 <b>Cologne</b> 17:6 <b>Commission</b> 10:3 78:17 <b>Copernicus</b> 79:4 <b>Corbin's</b> 42:32 <b>Cork</b> 6:27,28,29,32 7:34 <b>Council</b> 1:23 9:16 19:27,28,29 <b>County</b> 3:9 15:28 <b>Covered</b> 43:4 <b>Crohn's</b> 30:6 <b>Cronbach</b> 49:12 <b>CUNHA</b> 41:19,31 47:9,19 <b>CVs</b> 39:17 <b>Czech</b> 9:7 11:31,33 86:4 <b>D</b> <b>daily</b> 18:18 <b>damaged</b> 61:16 <b>dance</b> 1:18 24:27 60:3 61:16 74:4 <b>dancing</b> 61:2,5 <b>danger</b> 66:7 <b>data</b> 26:30,32 42:32 43:2,20 47:19 65:4 68:9 75:18 <b>database</b> 79:4,5 <b>date</b> 8:28 10:10 38:10,33 <b>dates</b> 81:33 <b>days</b> 1:6,17 13:30 19:11 20:9 25:25 34:29 51:20 62:3 79:19 81:5,23 83:2,6 86:17 <b>deadline</b> 59:6,7 <b>deaf</b> 25:28 26:5,20,21,28 27:11,15,30,34 28:7,24,28,31 54:14,20,25,33 55:6,30,31 56:12,18 58:2,6,7,12,14,15,16, 19,20,22,23,24,27 59:16 <b>deaflympics</b> 28:3 <b>deal</b> 58:24 67:20 <b>dealing</b> 50:23 <b>decades</b> 63:19,30 <b>decide</b> 52:29 <b>decided</b> 12:29 68:14 79:9,10 85:16 <b>deciding</b> 6:17 <b>decision</b> 6:21 <b>decisions</b> 4:3 6:20,22 <b>decrease</b> 50:19 <b>dedicated</b> 67:33 <b>dedication</b> 14:11 <b>deep</b> 60:34 82:6,9 <b>deeply</b> 2:18 <b>deficiencies</b> 26:3 <b>deficits</b> 63:33 64:14 72:11 <b>defined</b> 62:32 <b>definitely</b> 41:11 67:32	<b>definitions</b> 25:34 62:27 63:1 <b>degree</b> 47:10 61:15 83:15 <b>degrees</b> 37:10 <b>deliberations</b> 2:31 <b>delight</b> 20:22 36:21 <b>delighted</b> 13:21 15:13 32:19 <b>deliver</b> 7:25 <b>delivering</b> 14:14 <b>delivery</b> 5:26 <b>demand</b> 30:21 <b>demo</b> 24:34 <b>democracy</b> 3:30,31 <b>demon</b> 60:33 <b>denying</b> 35:26 70:14 <b>department</b> 1:24 2:1 63:9 81:34 83:10 <b>depend</b> 7:29 <b>dependability</b> 73:33 <b>dependent</b> 49:9 50:3,4 <b>depending</b> 31:33 <b>deployed</b> 41:20,27 <b>depressed</b> 61:28,32 <b>depressing</b> 26:24 <b>depression</b> 61:27 <b>depth</b> 64:31 <b>describes</b> 46:31 <b>describing</b> 64:23 <b>descriptive</b> 27:10 76:12 <b>deserves</b> 3:33 <b>design</b> 5:17 10:12 28:9 <b>designated</b> 43:15 <b>designation</b> 10:24 <b>designed</b> 5:19 9:26 26:30 <b>desirable</b> 76:34 <b>desire</b> 23:29 <b>desk</b> 24:28 60:7 <b>desks</b> 25:13 <b>detail</b> 16:28 19:23 56:15 <b>detailed</b> 10:7 <b>details</b> 36:1 56:6 78:12 <b>determination</b> 26:8 <b>determined</b> 78:16 <b>develop</b> 4:20 10:4 13:26,27 27:30 28:3 42:19 82:20 86:6 <b>developed</b> 9:3,27 19:25 20:7 33:27 45:24 46:24 60:20 62:14 86:6 <b>developing</b> 9:22 10:6 17:12 78:19,21 <b>development</b> 5:16 9:6 10:10,28 11:27 12:18 17:13 22:13 26:4,9 42:5 48:30 <b>developments</b> 19:24 31:25 81:11 <b>develops</b> 69:13 <b>device</b> 28:21 <b>devices</b> 28:12,16 <b>diagnosed</b> 61:29 69:20 <b>diagnosis</b> 34:5 63:5 72:25 <b>did</b> 7:21,33 12:15 15:18,29 16:25 18:9,17,21 21:15,26 26:23 30:26 34:25 36:30 37:24 50:5,26 55:30 58:12,13 60:33 61:22,29 67:2,4 68:21 69:23 71:9 75:23 76:1 77:12 <b>didn't</b> 11:20,29 13:12 15:30 16:23 20:16 28:31 34:8 35:1 47:19,21,22 60:34 61:7,14,21 62:4 66:15 67:3 76:25 81:34 86:14 <b>difference</b> 26:9 27:14,21 29:7 47:16 63:5 <b>differences</b> 11:33 27:14,20 47:20 50:3,14 51:1 57:6 65:32	<b>different</b> 2:13 5:1,2,8,29,34 19:25 22:28 31:4,32 37:10 38:18 39:24 43:15,18 46:16 49:15,18 55:32 56:1 61:24 64:15 65:4,7,8,18 67:17 68:20,33 70:9 72:28 74:18 76:5 77:5,7,8,15 81:10 83:11 84:16 86:6 <b>differentiated</b> 43:5,14,17 44:10 <b>differentiation</b> 43:4,10,29 44:33 45:12 46:12,15 76:4 77:5 <b>differentiations</b> 43:27 <b>difficult</b> 5:24,25 14:24 49:27 53:16 57:15 61:16 74:14 83:5 <b>difficulties</b> 2:26 31:17 33:1 40:16 44:5 64:11,25 72:11 73:2 76:23 <b>difficulty</b> 5:12 <b>diffusion</b> 82:30 <b>digging</b> 68:19 <b>dignity</b> 24:6 <b>dimension</b> 2:23 <b>diploma</b> 31:11 32:2 35:19 <b>diplomas</b> 38:31 <b>direct</b> 14:4 63:13 <b>directed</b> 9:3 31:16 <b>direction</b> 12:23 34:25 36:31 40:15,20 41:10 64:19 <b>directly</b> 78:19 <b>director</b> 15:2 83:17 <b>directors</b> 77:34 <b>disabilities</b> 1:15,30 2:23,30 3:2,9,13 4:1,9,16,28 5:2,8,20 6:9,20,24,33 7:33,34 9:15,18 10:21,25 13:9,12,20,25,34 14:4,5,18,21,34 19:31 20:19 22:20,23 23:3,7 25:29 26:3,8,10,15,18,26 27:18,20,23,24,27,28, 33 29:8,21,25,29 30:2,3,7,27,28 32:24 33:5,11 35:28 <b>disability</b> 2:2 3:17 4:23 5:6,15,27 6:7,9,19,22,34 7:13 8:27 13:13,19 14:14 17:26 19:27 21:24,34 25:22 26:24 27:11,12,15 30:34 31:1 39:3 40:18 42:1,6,8 44:13 45:2,17,26 47:12 48:18,26,33 49:9,26 50:27 51:10,13,33 52:4,13,15 53:17 54:33 62:22 63:29 83:7,11, <b>disabled</b> 27:31 41:20 45:29 <b>disabling</b> 64:25 <b>disappointment</b> 24:27 <b>discharge</b> 72:22 73:33 <b>discharged</b> 67:10,18 72:15 <b>discipline</b> 21:34 23:34 <b>disciplines</b> 81:10 <b>disclose</b> 30:33 50:34 <b>discuss</b> 34:19 43:20 <b>discussed</b> 12:11 76:33 77:17 <b>discussion</b> 78:14 82:17 <b>discussions</b> 34:19 <b>disease</b> 30:6 <b>disintegrated</b> 66:15 <b>dislike</b> 62:5 66:3
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- disorder** 62:19  
**disorders** 49:15,29 62:21 66:29  
**disposal** 7:24  
**disposition** 63:13  
**disquiet** 63:19,21  
**dissertation** 41:32  
**distance** 41:7  
**distant** 65:20,25  
**distil** 70:17  
**distinct** 44:10 45:21 46:16  
**distinctions** 77:9  
**distinguishing** 26:7  
**diverse** 10:14 63:9 73:5  
**diversity** 65:33 76:23  
**doctor** 66:11 67:17  
**doctrate** 64:4  
**doctors** 39:4 44:8  
**documented** 64:34  
**does** 12:28 20:4 43:7 54:21 58:10 63:32  
**doesn't** 3:24 32:16 39:10,12 40:23 52:4 56:29,32 73:16,17  
**doing** 7:22 11:20 13:14 15:17,25,34 16:1,20,28 17:18 24:5,34 32:28 38:3,4,26 44:16 51:20,32 54:29 58:10 67:4,29 68:18 69:31 70:2,7,25,31,34 71:2,3,26 77:11 78:31  
**domains** 46:33  
**dominant** 71:4  
**dominoes** 67:28 77:11  
**don't** 4:12 5:9,32 6:3,22 7:33 11:22 12:3,4 18:19 21:33 31:12 35:34 37:21,25 38:24 39:9,33 41:11 49:34 52:2,10,19,21 53:4,8,11 54:4,16,29 55:2,27,34 56:4,17 57:9,21,22 59:6 61:8 63:5 67:13 68:34 69:7 70:1,2,31 72:31 75:7 76:11 82:6 83:7 84:2,12,29 85:5,8,2  
**done** 15:24 16:15,16 21:7 33:32 67:27 68:1,32 71:10,11 74:18 75:6,30 76:9 77:6 78:6  
**door** 36:33 37:27  
**doors** 34:17  
**doubt** 8:31 19:19 76:17  
**doubtful** 74:7  
**down** 4:21 5:13 7:21 23:8 35:8 38:24 44:5,30 45:16,34 46:5 55:5 56:33,34  
**draconian** 67:33  
**draft** 57:17  
**draw** 42:32  
**drawing** 12:5  
**drawn** 42:22  
**draws** 70:27  
**dread** 5:30  
**dream** 7:15,16 70:1,2  
**dreams** 7:15 11:29 64:5  
**drifted** 67:14  
**drink** 22:4 26:32 69:34 72:17  
**drinking** 69:34  
**drop** 33:7 60:7  
**drug** 69:33  
**drugs** 62:3  
**duck** 61:2  
**due** 30:29 42:12  
**dummy** 61:7  
**duration** 73:22  
**during** 6:33 19:9 20:9 21:12 43:32 44:4,29 45:5 46:5 64:33 71:7 74:30 79:1 80:6 83:6  
**dynamics** 73:28  
**dysfunction** 72:11  
**Daffy** 10:32  
**Darren** 32:12  
**David** 21:12 59:17,24 60:19,24 74:28,31 75:4,6,8,17 76:11  
**Davis** 3:16,32 13:5,8,23 15:2,7,9 24:13  
**Day** 2:11 18:2 23:2 26:33 32:6 55:26 61:5 64:25 66:21 67:2,12,17 70:27 71:2,5 75:24 76:1 86:15,16,19  
**Deegan's** 71:4  
**Deegan** 64:3  
**Defence** 23:31  
**Dingle** 75:5  
**Displacement** 46:26  
**Distribution** 27:5  
**Doctoring** 63:20  
**Donna** 16:23  
**Douglas** 62:12  
**Dowling** 41:33  
**Drouin** 25:32  
**Dublin** 17:6 40:25,33 41:3  
**Dyspraxia** 32:8  
**E**  
**each** 12:13,22 17:10 23:7 24:19 25:12 26:30 27:6 35:3,5 37:21 39:25 52:15,32 69:14  
**eager** 20:16  
**ear** 56:10  
**earlier** 13:17 20:12,33 43:20  
**early** 20:15 37:27 73:3  
**earn** 61:8  
**ease** 74:1  
**easier** 76:29  
**easily** 69:16 81:32  
**easy** 55:22 78:11  
**eat** 62:4  
**echoed** 39:25  
**eclipsed** 69:16  
**economic** 63:10  
**edition** 83:4  
**editor** 79:8,10,11,19  
**editorial** 79:8,10,32  
**editors** 79:11  
**educate** 17:25  
**education** 8:28 9:8,14,19,24,27 10:7,22,26,27,28 13:12 14:19 15:28,30,31 16:25 17:25 19:10 20:7,13,15 21:4 29:20,28 30:29 41:20,27,33 42:7,16,19 45:10 46:31 48:15,21,25,27 49:1,7,27,28,33 50:8,23,33,34 51:1,5,8,14,18,19,25, 33 52:4,5,14,21,24 53:4,5,8,17,24  
**educational** 9:4 30:34 42:6,15,28 45:6 60:18 82:23  
**educator's** 49:4  
**educators** 5:26 48:4,11,17,32 52:24 53:18  
**effect** 35:13 49:19 70:32  
**effective** 73:22  
**effects** 36:11 69:21  
**efficient** 78:34  
**effort** 19:6,12,28 79:19  
**eight** 31:20 35:17 38:33 67:21 79:15  
**elation** 71:15  
**election** 3:24  
**elections** 3:25  
**element** 4:26 22:6 69:24,27  
**elementary** 48:5,12,18,33 49:3,28 50:33 52:12  
**elite** 42:5  
**else** 3:5,32 5:30 7:9 16:3 37:23,24,26 40:22 61:16 68:11 77:3 81:8  
**embrace** 45:29  
**emerged** 43:2  
**emergence** 42:6  
**emotion** 62:32  
**emotions** 65:24  
**empathy** 63:15 65:24  
**emphasis** 1:14  
**employed** 30:27 42:18,22,32,33 44:7 45:22 46:16  
**employing** 44:12  
**employment** 31:6 35:14 38:3,4,7,9,11,12,27,2 9,34 39:20  
**empowering** 17:30 39:2  
**empowerment** 8:27  
**enables** 62:33  
**enabling** 10:26 33:8  
**enacted** 70:21  
**enacting** 42:12  
**encounters** 43:33  
**encourage** 14:21 20:29 21:10 38:23 61:23  
**encouraged** 35:32,34 61:20  
**encouraging** 17:12,26 52:8  
**end** 13:31 14:25 29:2,5 31:22 41:17 48:2 54:12 59:20 60:34 77:23 86:1  
**ended** 33:16 67:11  
**endless** 71:5  
**endure** 64:25  
**enduring** 64:24  
**energised** 67:32 68:21  
**energy** 26:32  
**engage** 14:3 21:26  
**engaged** 5:16 22:27,28 78:14 81:26 83:13  
**engagement** 8:32  
**enhance** 45:23,34  
**enjoy** 11:4 14:28 24:8 47:34 48:7 84:6  
**enjoyable** 14:24 15:14  
**enjoyed** 59:29 61:17 66:6  
**enjoying** 32:31 59:29 84:5  
**enjoys** 54:21  
**enlightening** 11:1 65:22  
**enormous** 5:16,23 85:21  
**enormously** 5:24 85:2  
**enough** 5:32 11:14 12:23 16:22 18:29 26:23 35:4 36:19,34 49:34 61:21 69:8 73:34 74:24  
**enrolling** 45:14  
**ensure** 4:20,23 5:5,17,19,25 7:28,34 10:14 20:3 24:4  
**ensuring** 4:8,10,31  
**enthusiasm** 16:17  
**entire** 2:20 5:34 6:10  
**entitled** 7:15,16  
**entry** 31:29  
**environment** 30:32,33 32:3 35:3,30 61:30 66:16  
**environments** 73:24  
**episodes** 61:34  
**equal** 5:1,2,21 23:27 31 49:13 61:10  
**equality** 1:25 2:2  
**equally** 2:30 5:4 65:31  
**equation** 5:26  
**equipment** 43:29 44:33 45:14  
**equipped** 68:27  
**equity** 8:16  
**escape** 19:1  
**especially** 1:4 42:12 51:13 52:10 75:18 78:22 85:6,14  
**essential** 51:7 64:6  
**established** 9:15 27:8 31:4 40:23  
**establishment** 46:11  
**esteem** 21:34 23:33  
**estimate** 32:7 62:21  
**etcetera** 19:11 21:23 28:13,17  
**ethnic** 73:30  
**ethnography** 64:33  
**ethos** 73:24  
**euro** 10:11  
**evaluate** 80:26  
**evaluated** 27:5 83:27  
**evaluation** 57:31  
**evaluations** 64:29  
**even** 3:2 5:6 8:10 16:15 22:17 29:14 30:14 40:18 72:14 81:14,34 82:28 83:3,6 84:9  
**evening** 32:30 33:7 36:8 38:24 60:1  
**event** 1:6 3:22 8:24 32:14 42:12 81:17,33 86:12  
**events** 17:23 32:21,24 82:21  
**eventually** 61:32 67:11 69:29  
**ever** 1:10 6:24 13:18 18:18,22 62:3 72:33 74:7  
**every** 1:17 20:3 23:2 24:4,5,23,25 25:25 57:23 61:5 79:29  
**everybody** 2:5 12:2 15:10 16:3,18 22:13 32:29,31 34:34 58:6,7 59:13 60:10  
**everyone** 2:7 4:32 24:5 25:17 33:18 35:3,4 37:2 53:11 59:27,29 60:26 61:27 66:12 69:13 71:15 72:32 73:10  
**everything** 1:18 5:30 18:33 33:26,34 34:1,12,13 62:14 66:24 74:18  
**evidence** 74:9,12 76:29  
**evident** 29:6 68:9  
**exactly** 5:10 16:1 66:19 67:22  
**exaggeration** 63:6  
**exam** 31:11  
**example** 10:12 18:4 24:27 30:5 31:11 32:16 33:1 37:5 38:30 40:8,16 43:26,28,29,30 44:7,9,15,33 45:16 63:32 65:31 69:19 83:1  
**exams** 36:20 61:22  
**excellence** 8:29 10:16 49:13  
**excellent** 41:15  
**except** 16:1  
**exceptional** 8:33  
**excited** 12:28,29 21:1  
**exciting** 26:24  
**exclude** 4:16 44:9  
**excluded** 4:16  
**excludes** 44:26  
**exclusion** 38:20 43:3,8,28 44:21 45:3  
**exemplar** 10:15  
**exercise** 15:34 32:29 39:5 61:21 67:2 68:13,14,20 70:3 72:19 76:12  
**exercises** 44:16 49:34 52:6 53:16,18 54:1  
**exercising** 71:26  
**exhibition** 60:2  
**exist** 22:22 73:17,28  
**existence** 37:11 50:34  
**exists** 22:11  
**expand** 19:18  
**expanded** 42:3  
**expect** 39:15  
**expectation** 39:15  
**expectations** 22:19 71:21  
**expected** 66:16 72:28  
**expects** 72:26  
**experience** 17:22 30:3 32:5,6,23 33:12,14,20 36:10,12 37:2 38:1,19 40:9 44:4,29 45:5 46:5,9,20,21 47:11,17,22 48:34 49:7,8 50:13,14,15,17,19,31 51:2,5,14,27 53:32 62:18 64:15,20,22,31 65:5,7,8,30,32,33 69:14 71:15,18,26,28,31 76:16  
**experienced** 44:32 63:28 64:5 65:11 69:6  
**experiences** 29:34 36:5,33 44:2 65:6,12,31 70:23 72:3 73:1 74:13,24 76:15  
**experiment** 27:1,2  
**experimental** 27:1  
**expert** 9:8 74:30  
**expertise** 9:12 75:20  
**experts** 8:34 81:15  
**explain** 43:28 55:32,34 56:1,2,6,14,26,28 57:6,15,20,23,27  
**explaining** 57:26  
**explanation** 33:19  
**explanations** 43:23  
**explicitly** 64:13  
**exploratory** 42:22 48:32  
**explore** 11:4  
**express** 50:33  
**expression** 61:3  
**extend** 8:20  
**extended** 20:22 47:30  
**extra** 31:2,9 45:33 79:28  
**extreme** 32:18  
**extremely** 32:16  
**extremes** 61:3  
**eye** 82:22  
**eyes** 27:34 80:26  
**Edu** 10:2  
**Eduarda** 46:5  
**Either** 38:11 45:6,21 52:16  
**EIPET** 9:24,28,32 10:2 13:23 20:12,21 60:12 78:20 80:29  
**Enable** 10:15,16 19:13 27:31 36:12  
**England** 16:2,3 73:30  
**English** 11:21 27:8 54:27 74:18  
**EPSCO** 79:4  
**Eurasia** 15:2 16:29,34  
**Europe** 9:23 11:34 12:7 15:2 16:29,30,34 17:5 18:4 20:27 62:21,24 79:25 80:1 81:15  
**European** 1:10,22 2:17,23 4:6 8:17 9:22,23,25 10:3 11:13,14,19,25 13:1 18:5 20:13,26,27,28 21:7 59:30 62:18 78:6,10,17,23,28 79:16,24 80:22,29 85:25  
**EUCAPA** 1:1 14:12,13 30:18 78:1,2,7 80:17,27 81:30 82:28 83:28 85:11,29 86:10  
**EUCAPA2012** 60:15  
**EUFAFA** 1:22 12:11,29 75:14 77:25,32,34  
**EUJAPA** 78:28 80:10  
**EUSAPA** 78:19  
**Examples** 11:2,34 12:10,21 25:29  
**Executive** 15:3  
**F**  
**fabrications** 71:29  
**fabulous** 36:7  
**face** 2:21 32:31 64:6  
**faced** 69:15  
**faces** 14:9  
**facilitate** 8:27 24:23  
**facilitating** 9:17 10:20  
**facilities** 10:14 38:16  
**facility** 10:11,14  
**facing** 81:22  
**fact** 2:27 3:1 6:28 7:16 45:32 68:22  
**factors** 49:18 63:10,24  
**faculties** 47:27 83:13,14  
**faculty** 2:20 26:18 28:33 41:31 48:15 54:34 81:18,26,34 83:10  
**fairly** 66:17 69:19  
**fairness** 37:14 40:32  
**faith** 71:19  
**fall** 6:8 73:16 86:9  
**falling** 66:31  
**familiar** 23:28 35:22 63:27  
**families** 10:26  
**family** 17:2,32 18:14 32:19 33:10,31 34:6,9 76:24  
**famous** 75:5 80:18  
**fantastic** 20:2 32:13,14,23 37:6 38:2 61:9 66:10 76:6  
**far** 1:4 3:17,20 11:7 38:10,33 41:1,12 58:30  
**farm** 62:1  
**fascinating** 35:26 36:7 74:28  
**fashion** 71:15  
**father** 2:8  
**favourable** 50:27 51:10  
**fears** 23:7,8  
**features** 79:20  
**federations** 10:28 20:28,30,31 78:23 83:19  
**fee** 85:8,20,25  
**feel** 12:4,6 13:7 15:18 24:22 31:11 32:20 37:2 49:34 50:22 66:11 67:32 68:21 70:2 80:21  
**feeling** 34:8,24,28 69:34  
**feelings** 34:17  
**fell** 33:33 36:14 61:14  
**felt** 4:1 13:14 18:17 30:22 37:14,15 45:17 66:16 67:12 69:30 76:20  
**female** 42:25 46:21 47:11 50:5  
**females** 49:3 50:3  
**few** 6:7 36:5 39:33 61:34 63:19 66:34 67:34 72:32 75:13 79:19 85:4  
**field** 3:6 5:19 22:20 36:10,32 37:2 64:33,34 74:10 82:23  
**figure** 5:26,31  
**figures** 62:17  
**fill** 60:7  
**film** 56:8 65:26  
**final** 26:26 32:18 36:30 71:25 77:25  
**financial** 33:10 34:18 35:9 85:13  
**find** 1:17 3:4 4:3 11:1 13:13 17:13,14 20:32  
**78:6,11,14,15,21,22 80:21,25 81:24,26 82:10 83:32 85:16,31**

22:20 25:25 27:14  
28:9 36:2 39:5 40:34  
47:16 50:13  
58:12,13,29 59:33  
70:23 72:33 73:17  
78:10,11,20  
**findings** 21:28,29,31  
22:10 43:32 47:18  
**fine** 40:10 55:9,25 57:13  
**finger** 67:28  
**finish** 13:29 16:22 23:27  
24:3 33:15 37:20  
38:23 50:26 77:20  
84:18,24  
**finished** 31:22 33:22  
36:20  
**finishes** 37:23  
**first** 1:10 8:24 9:4,6  
11:19 12:34 14:31  
15:34 16:24 19:24  
23:29 27:34 28:24  
34:17 36:5,20 49:18  
55:30 56:13,17  
58:1,29,31 61:27,29  
62:3,12,22,27 64:15  
66:6,14,34 68:11  
69:30 70:25 71:9,31  
75:13 76:22 78:6  
79:22 80:19,24  
81:1,33 82:1 84:9  
**fit** 67:29 68:14 69:8 70:1  
**fitness** 8:28 10:26 35:17  
68:26  
**fitter** 68:13,18 69:29  
**five** 20:21 21:27 25:9  
31:20 32:17 33:3  
79:27 83:2  
**flagged** 41:3  
**flags** 28:13  
**flare** 34:30 37:31  
**flared** 61:29  
**flat** 56:32 57:5,8,9  
**flexibility** 73:12  
**flier** 81:32,33 83:31  
**flowers** 66:7  
**flying** 72:32  
**focus** 9:13 20:12 49:32  
51:32 63:5,29  
64:24,32 65:4,12  
69:11 72:10 73:23  
**focused** 34:23 35:33 45:2  
68:7  
**focusing** 35:30 45:8  
48:20  
**foil** 56:14,24,25  
**folds** 53:33  
**follow** 49:14  
**followed** 43:26 44:1  
**following** 9:32  
44:12,18,22  
**follows** 14:3  
**foot** 62:4  
**football** 4:18 28:15 35:34  
52:8 60:2 68:15  
70:30  
**for** 1:12 2:2,17,21,24  
4:2,27,28,34 5:29,31  
6:1,2,20  
8:1,4,17,21,23,29  
9:14,18,23  
10:3,8,10,13,14,19,21  
24 11:10 12:12,33  
13:1,9,24,25,30  
15:3,9 16:18,29  
17:5,32 18:4,19  
19:30,31 20:18,29  
21:11,25 22:4,7,27  
23:2,3,17  
24:19,27,30,32,34  
25:1 26:3,20,21,26,30  
**force** 15:4  
**forefront** 11:13  
**foresight** 15:24  
**forget** 83:21 84:7  
**form** 61:14 66:30 72:4  
83:24  
**formal** 19:17 61:21  
75:13,14  
**formally** 86:4  
**formation** 82:28  
**former** 15:3 29:33 37:8,9  
**formats** 74:3 77:1  
**fortunate** 16:22 36:19  
**fortunately** 61:7  
**forward** 3:27 13:5 21:10  
59:15 79:2 86:16  
**found** 26:3 27:5 31:21  
34:15 36:11 50:28  
65:22 69:11  
**foundations** 43:20 64:19  
**founded** 12:34 35:24  
**four** 5:29,32 6:21 33:3  
36:22 38:10 49:20  
53:24 66:25 78:31  
79:14,28 82:27 83:14  
85:7  
**fourth** 61:30 83:4  
**fragmented** 69:14  
**framework** 10:7 20:7,12  
42:19  
**free** 24:22 70:1  
**frequency** 73:21  
**friend** 1:33 13:21 24:17  
48:10 62:12 67:30  
**friends** 66:15 67:28  
72:18 84:29  
**friendships** 12:24  
**from** 1:4,18,29 2:13 4:16  
5:8  
6:9,10,27,28,32,34  
7:1,27 8:7,16,21,33  
11:21,31 12:10,21,32  
13:18 14:16  
16:11,30,31,34 17:32  
18:9,10 19:28 20:8  
21:12 22:3,5,30  
23:6,7,12,21,28 25:5  
26:20,30 28:12  
29:17,19 30:5,6,29  
31:9,27 32:19  
33:6,14,22,24,25  
34:1,14,29,3  
**front** 27:34 56:33,34  
57:23,25 60:3 61:24  
79:9  
**fruitful** 81:14 83:5 84:14  
**frustrating** 4:3  
**fuel** 33:10 40:18  
**fulfil** 7:17  
**fulfilled** 7:16 23:32  
**fulfilling** 11:1 62:29  
**full** 23:9 30:10  
38:4,13,33 39:10  
41:7,9 52:13 59:34  
86:16  
**fullest** 7:17  
**fully** 30:11 65:8  
**fun** 60:30  
**function** 62:28  
**fund** 1:29  
**funded** 9:25 17:14  
**funding** 10:2,3,17 30:29  
**fundraising** 3:10  
**further** 8:5,10 9:33 26:4  
34:20 35:14,28 38:30  
42:5 46:3 81:3 84:2  
**furthering** 10:20  
**future** 2:8,28 3:2 4:13  
5:18 7:12 8:32 11:8  
35:13 38:27 39:31  
48:30 54:6 63:34  
80:10 85:5,9,22  
**Fail** 63:21  
**Faite** 1:3,23 11:17  
**FAI** 35:18 38:18  
**Faite** 15:11  
**FAS** 34:11  
**Federation** 1:22 2:17 4:6  
11:15 26:20,21 78:10  
**Fetac** 31:20,21,31 32:17  
35:16  
**Finally** 14:9 25:8 28:33  
43:17 74:7  
**Finland** 9:30 84:1 85:28  
**Firstly** 24:22 31:8  
**FIBA** 20:27  
**Flanagan** 10:33 12:33  
13:2,4 15:21 30:18  
39:28  
**Flynn** 34:17  
**Foundation** 81:19 83:1,3  
**Fox** 73:2  
**France** 86:3  
**Frank** 28:28 65:14,25  
**Furthermore** 46:2  
**G**  
**gain** 31:9,28 38:31  
64:4,16,20,30  
69:22,23 73:5  
**gained** 38:9,33 46:9  
**gaining** 32:6 38:27  
**game** 13:24  
**games** 13:26 15:4  
18:5,6,8,9,10,11,20,2  
2 21:7 22:4 24:31  
32:18 42:5 43:29  
60:1,29 61:11  
**gap** 9:14 30:23  
**gardener** 68:25  
**gardening** 67:4 68:20  
**gate** 20:17  
**gateway** 22:12  
**gathered** 6:27 74:13  
**gathering** 65:4  
**gave** 23:34 34:11 35:13  
36:32 37:16 45:33  
67:30 76:8  
**gender** 5:4 26:16,31  
48:34 49:7 50:3 51:1  
**generally** 68:5 72:9  
**generating** 83:26  
**generous** 7:29 74:24  
**genetic** 63:10,12,14  
**genetics** 63:11  
**gentleman** 48:20  
**gentlemen** 1:3 2:1 8:10  
11:14 15:7 29:31  
41:23  
**get** 5:32 12:21 14:6,30  
16:24,25 17:33  
19:1,17 20:10 21:29  
24:13 25:14 30:11  
31:19 32:10,34 33:3  
35:27 36:19 37:32  
38:24 41:1 44:2  
47:19 53:32 58:27  
59:27,32 61:7,14 62:4  
65:5,8 66:28 67:32  
68:13 69:33  
70:3,27,28,34  
72:25,32 73:13 75:8  
77:29 78:1,14 80:29  
**gets** 61:34  
**getting** 3:10 15:9,25  
19:34 20:1 32:29  
33:10,12 37:8 38:26  
67:28,29 69:29 70:13  
85:34  
**gift** 60:8  
**girl** 55:31 61:27  
**girls** 32:18  
**give** 8:31 13:30,31 20:17  
24:3 53:28 54:27  
57:22,27 68:12  
72:3,27 76:7,25 78:31  
79:1  
**given** 8:23 26:14,31  
33:30 34:13 38:18  
60:14 65:31 74:26  
**gives** 16:19 19:16  
23:22,26 31:16 32:18  
38:20 71:1  
**giving** 33:15 37:17  
**glad** 11:33  
**gleaned** 8:33  
**goal** 10:16,17,20 28:16  
43:17 69:7  
**goalkeeper** 46:17  
**goes** 2:16 56:25  
**going** 2:26 3:16 5:30 6:15  
12:22 16:18 18:8  
19:23 20:8,22 21:6  
23:17,18 24:19  
27:14,33 29:19,33  
31:1 33:26,34 34:9  
36:21,24 37:6,27  
39:28 40:16  
41:12,23,26 47:25  
48:12 59:11 61:28  
62:8 65:14  
67:13,19,22,29  
70:25,34 71:12  
72:1,4,15 73:10 74:9  
77:10 78:4 80:  
**golf** 71:7 75:22,29,30,32  
76:1,6  
**golfer** 75:29  
**gone** 8:5 37:5 38:10  
41:12 67:34  
**good** 1:3 2:5,7,8 4:27,28  
6:17 11:13,34  
12:3,7,10,15,21,24  
15:10 21:18 29:31  
31:25 33:18 39:12  
41:31 47:25 48:7  
54:24,27 55:19,27  
59:27 60:26 61:17,21  
62:12 67:33 69:34  
76:4 77:9,20 78:28  
79:30 81:28 86:16  
**got** 18:33 19:12 23:33  
33:22,33 35:12 37:16  
38:4,5 40:6 59:32  
60:10 61:27,32 64:28  
66:5 67:4,10,18,21  
70:26 71:9,26 76:6  
85:3  
**governing** 8:15 19:32  
20:1,3,32  
**government** 1:24 15:4  
18:13  
**grabbed** 66:20  
**grades** 36:19  
**gradually** 67:22  
**graduate** 48:12  
**graduated** 9:6 66:5  
**graduating** 37:9  
**grant** 9:22  
**grants** 82:27  
**grass** 42:5  
**great** 3:33 7:2,20 8:23  
15:15 16:19  
19:23,24,28  
20:7,17,24 21:10  
22:22 23:1,29  
24:6,14,17 29:24 33:5  
34:6 38:18 51:25  
54:29 61:15 72:22  
**greater** 22:21 50:22 51:8  
**green** 5:19  
**grind** 67:22  
**ground** 42:6 65:34 67:10  
**groundbreaking** 75:25  
**grounded** 42:20,23 46:24  
61:18  
**group** 5:4 15:34 19:26  
25:1 26:14,15,26,27  
27:10,11,12,15,16,18,  
23 30:25 36:13,15,22  
51:32 52:2 55:17  
58:6,15,16,17 61:24  
67:2,5 68:1,16 71:33  
72:16,17 74:30 76:1,6  
**grouping** 8:34  
**groups** 18:15 19:4 25:1  
26:15 27:20 30:14  
32:7,24 35:4 38:18  
46:2,11 49:32 64:32  
65:34,1 73:30,34  
79:24  
**grow** 6:1,7 81:27  
**growing** 11:27 12:19  
80:14,15  
**grown** 9:12 32:31  
**growth** 8:15  
**guide** 14:4,6 40:17,20  
**gun** 28:13  
**guy** 40:34 56:17  
**guys** 22:5 58:6,7  
**gym** 31:11 32:2,3,6 34:20  
35:19 39:13 67:2,22  
69:8 75:26 77:10  
**Gaelic** 32:9 60:2  
**Galileo** 7:20  
**GAA** 3:1 24:31 32:7 34:2  
35:18 38:25 60:1,7  
**General's** 62:28  
**General** 27:10  
42:16,19,22,34  
43:8,34 44:6  
45:6,10,25,30,32,34  
46:2,6,25,32,34 47:8  
51:31 52:14 75:14  
76:24 77:25,28,29,32  
**Glennon** 42:31  
**Goalball** 45:26  
**Goodwin** 16:23  
**GPE** 42:25,30 44:30  
**Guarapiranga** 55:23  
**Guinness** 12:24 86:16  
**Guttmann** 42:1  
**H**  
**had** 2:34 4:2,34 7:15  
11:28 15:29,34 16:2,4  
18:5 20:33 26:23  
30:20,23 32:15  
33:22,30,31,32  
34:5,6,11,12,14,17  
35:9,18,19 37:14,15  
42:15 44:15 45:9,20  
46:20,21 47:7,9,11  
50:4,9 61:2,11,34  
62:4 63:2  
67:2,3,12,18 68:12  
69:33 70:17 75:26  
76:9,24 79:8 80:6  
83:2  
**hadn't** 75:29  
**hair** 11:22  
**half** 17:1 76:1 77:28  
**hall** 61:22  
**halt** 67:22  
**hand** 25:12 29:33 43:27  
64:15 78:21,23  
**handkerchiefs** 28:16  
**hands** 29:14 41:15 53:32  
61:29 66:19,32 74:23  
**happening** 20:2,3 66:25  
**happens** 22:14 56:2  
**happier** 4:31 72:33  
**happily** 33:26  
**happy** 33:27 39:34 48:10  
74:29  
**hard** 3:5 12:5,6,12,23  
62:3 67:3 73:30 77:9  
79:19 80:14,24 86:15  
**harder** 76:30,31  
**has** 1:10,11,28,30  
2:26,34 3:17,20,21,25  
6:17 7:6 8:4,8,9,24,26  
9:2,3,12 10:24  
11:7,10 13:20 16:9,11  
17:17 20:13,14 23:14  
27:34 28:22 29:24  
32:16,17,31 33:1,15  
37:2,6 38:2 39:33  
40:5 42:8 47:21  
50:19 52:15,19 60:17  
62:1,14,32  
63:14,21,24,29 64:24  
67:27 68:  
**hasn't** 68:24  
**hate** 75:30  
**have** 1:21,27 2:13,33  
3:1,4,30  
4:1,9,12,13,23  
5:12,16,20,23,24,27,2  
9,32 6:1,22,24,30  
7:4,15,16,24 8:28,31  
10:29 11:22,32,34  
12:28,29 13:12,18  
14:14,17,25 15:14  
16:7,8,13,16,18,34  
17:2,5,6,15,31  
18:8,9,22  
19:1,6,13,19,25  
20:9,16,17,27,30,31  
21:7,16,22,33 22  
**haven't** 48:29 60:10  
67:34 77:15  
**having** 15:23 16:19  
19:18 21:33 43:30  
50:5 52:29 61:2,16  
66:29 67:23 73:15  
**haze** 36:31  
**heading** 15:4  
**headmaster** 67:5  
**heal** 24:31 36:6 59:34  
**health** 2:1,3 4:27,28  
5:9,26 17:21,23 29:24  
31:1,26 35:17,28  
36:20 37:33 40:16  
59:25 60:20,23 61:33  
62:17,18,24,27,32  
63:2,6,9,11,22,28  
64:11,16,17,24  
67:3,29 68:26,34  
69:14,15 70:13 71:19  
73:2,4,12,19,24,31  
74:10 75:19  
76:11,13,23 81:12  
82:8 83:10  
**healthier** 4:31  
**healthy** 26:23 69:15  
**hear** 4:26 8:7 12:32  
20:22 60:26 62:8  
80:28  
**heard** 13:18 20:21 62:8  
**hearing** 6:8 25:22,29  
26:10,14,27  
27:11,12,15,26,27  
44:5,29 49:10,28  
59:15 70:19  
**heart** 1:11 6:16 8:9 30:6  
**held** 8:24 11:19 18:10,22  
**hell** 67:20 71:9  
**help** 8:21 16:25 17:14,17  
21:2,26 39:31  
52:24,34 56:8 72:23  
80:1,2,4 83:32  
84:1,25 85:10,12  
**helped** 33:21 34:30,32  
35:5 69:27 76:17  
**helpful** 35:3 68:8 70:7  
**helping** 1:29 19:31 23:11  
52:30  
**helps** 34:24 36:24 68:19  
**her** 1:28 3:20 7:1,7  
8:20,21 13:5,10,11  
15:34 16:23,24  
40:13,14  
44:15,17,25,26  
45:22,23,24,25  
46:2,3,5,9,12 48:13  
56:4 57:7 62:15  
66:3,32  
**here** 1:8,11,27 3:16  
10:29 11:4 12:4,28,33  
13:21 14:30  
15:7,10,13,14,15  
16:19,23,30 17:5,15  
18:10 19:16,28  
21:5,11 22:3  
23:6,19,28 24:8,17  
29:11,12,23 30:18  
33:26 36:27 38:3  
48:8 60:23 74:4  
75:5,7,18 77:26 80:28  
81:2,22,27,28  
83:11,24,31 84:1,5  
85:4 86:17  
**heritage** 11:5  
**heroes** 3:6  
**herself** 44:26  
**hicups** 34:18  
**high** 55:2 72:32  
**higher** 9:4 10:28 30:29  
39:2 50:5,9,14,17,28  
51:4,15 56:10  
**highlight** 45:32 51:4  
**highlighted** 29:9  
**highly** 39:20  
**him** 15:22 23:31,32,34  
28:1,22 32:18,19

- 33:15 38:7 56:18  
68:22,27,28 69:23,27  
70:7,9 76:17 77:11  
84:10,13  
**himself** 69:24,25,28 70:7  
**hip** 6:8  
**his** 8:9 23:29,30,31 24:1  
27:34 28:22,28,29  
29:25,34 32:17,19,20  
33:14 34:17 35:34  
44:4,8,29,30  
45:5,10,17,34 46:17  
54:20 59:15 60:19,23  
63:20 68:25,26,27  
69:21,27 70:9,14,15  
75:6 76:16,18  
77:12,14 84:11,13,14  
**historical** 63:10  
**history** 18:22  
**hit** 71:8,10  
**hockey** 4:17 60:29 61:14  
**hoist** 24:34  
**holds** 65:18,24  
**hole** 5:9  
**holing** 71:22  
**home** 11:1,32,33 32:30  
33:7,28 38:24,25  
40:16 41:1 61:22  
66:6  
**honest** 11:20 36:11 56:13  
**honour** 8:23 74:25  
**honoured** 80:21  
**honours** 9:5 37:10  
**hope** 4:12 7:27 11:1  
12:22,23 15:14 24:9  
38:12 41:12 47:34  
59:29 74:14,21 80:10  
84:18,25  
**hoped** 41:10  
**hopeful** 2:8  
**hopefully** 11:29 14:24  
18:24 29:11 38:4  
46:34 65:26 71:14  
76:33 78:20 85:30  
**hopefulness** 63:34  
**hopes** 68:24,25  
**horrendous** 61:34  
**horrific** 61:9  
**horror** 66:14  
**horses** 73:4  
**hospital** 66:3,14 83:18  
**hospitalisation** 61:34  
**hospitalised** 61:33 64:3  
**hospitality** 11:5  
**hospitals** 62:1  
**host** 1:23 2:24 8:7,23  
80:21 83:28  
**hosted** 1:10  
**hosting** 9:4 13:25  
**hosts** 14:30  
**hotel** 60:4  
**hour** 38:13 77:28  
**hours** 26:33 33:3 61:28  
**house** 10:13 16:26 66:6  
67:16  
**housed** 10:19  
**housekeeping** 24:19  
**houses** 58:30  
**housing** 33:9  
**how** 2:5,16 4:19,20,23  
5:34 6:28 7:7,13,14  
8:32 14:3,4,12,13  
15:30 20:16  
22:7,14,20 23:13,22  
32:14 33:20 36:1  
40:2 46:30,31,32  
51:31 56:24  
58:12,13,19,24 60:20  
62:4 64:19 65:8,18  
68:18,32 69:13  
71:9,16 73:23,33  
76:12 84:2,14  
85:10,28,31 86:6  
**however** 1:11 26:7 70:12  
76:21 77:13 78:30  
**huge** 19:4 56:34 67:14,16  
**hugely** 14:10 21:24  
**human** 35:17 43:10  
63:17 83:10  
**hundred** 15:11  
**hurling** 60:2  
**hurray** 71:11  
**hydro** 35:33  
**hydrotherapy** 35:26  
36:22,24  
**Halliwick** 35:22,23 36:12  
**Hassan** 21:12  
**Head** 40:25  
**Hello** 48:15 54:16  
**Henry** 25:32  
**Howlin** 5:29  
**HSE** 32:8 38:17  
**Hungary** 23:12  
**I**  
**idea** 16:5 23:22,26 25:14  
30:11 39:29 55:14,19  
58:29 79:34 83:26  
**ideas** 3:27 8:33 16:11  
39:25 53:14  
**identified** 46:25  
**identify** 19:19 42:18  
**identities** 69:17  
**identity** 60:20 64:1  
69:12,16,27  
70:11,12,15 72:4  
**ignoring** 63:24  
**ill** 61:27  
**illness** 30:5 37:30 44:5,15  
63:32,33 64:4,6 69:21  
70:9,14 71:4,17 72:10  
**image** 79:13  
**imagination** 7:29  
**imagine** 71:15 83:7  
**immediate** 10:10  
**immediately** 34:23  
**immersed** 34:2 65:27  
**immersing** 65:25  
**impact** 14:7  
**impaired** 25:29 26:27  
27:11,12,26,27 51:31  
52:9,16  
**impairment** 44:30 47:12  
49:10 50:1  
**impairments** 9:9 26:14  
36:17  
**implement** 44:18 51:7,19  
53:28  
**implementation** 82:29  
**implications** 51:17,24  
**imply** 43:14  
**importance** 23:13 25:31  
48:25  
**important** 1:6  
2:16,21,28,30 3:14  
12:27 17:15,22 19:16  
22:1 23:11 30:13  
37:30,33 48:30 49:26  
50:18 51:18,24 54:6  
56:31 57:20,33 63:7  
65:29 69:5,28 70:7,14  
72:19 73:22 76:26  
77:1,17 78:2 79:5,27  
80:7 81:33 83:12  
86:1  
**impossible** 69:23  
**impressive** 9:2  
**improve** 11:2 47:34  
**improved** 34:6  
**improvement** 32:20  
**improving** 21:32 78:34  
**inaudible** 26:13 54:19  
**include** 4:26,32 6:11,12  
10:10 20:4,32 42:33  
43:34 45:22 46:3  
49:27 51:26,33 53:16  
73:30 74:12  
**included** 21:20 45:25  
46:30,31 52:1 53:3,4  
58:23 85:19  
**includes** 42:27 43:3  
**including** 3:1 32:18  
41:20,26 44:22 47:22  
49:30  
**inclusion** 1:30 6:14 8:27  
9:8,18 10:21,26 18:18  
22:12,23 42:7,11,13  
46:26,32  
48:4,11,17,18,21,25,2  
6,32 50:6 51:5,11  
52:13 81:3,8 82:29  
**inclusive** 7:28 9:24 16:18  
19:26 20:13 21:18  
22:13 25:28 28:19  
41:33  
42:18,31 44:2 46:25  
80:29,30 81:5,6,18  
82:12,19,25,28,33  
83:1 84:9,11,16  
**inclusiveness** 26:9  
**inclusivity** 17:28 22:31  
**incorporate** 20:1  
**incorporation** 63:33  
**increase** 13:33 14:1  
17:12 30:26  
85:12,22,28,30  
**increased** 85:2,29,30  
**increasing** 62:25 79:29  
85:11  
**increasingly** 42:8  
**incredible** 3:4 7:6  
**incredibly** 6:33 7:1,8  
**indeed** 2:12,20 5:19 8:23  
15:19,21 16:8  
**independent** 27:6 76:18  
**indexed** 79:4  
**indicate** 2:16 25:5  
**indicative** 42:31  
**indifferent** 48:21  
**individual's** 65:18,23  
**individual** 26:24 27:21  
31:14,19,33 37:21,25  
43:28 65:24 71:7  
73:13,15 76:33  
**individualised** 44:6,9,34  
45:3,24  
**individuals** 32:34 46:8  
49:5 71:27 77:18  
**indoors** 70:27  
**industry** 10:29 14:20  
30:4 33:31,32  
**infer** 47:20  
**influence** 8:32 24:14  
52:8  
**influenced** 63:9 64:13  
**influences** 30:18  
**informal** 19:18 30:20  
64:32  
**information** 25:13 27:2  
36:1 40:19 51:26  
60:11 78:9,11,20,31  
81:11,28,32 82:6  
83:30 85:31  
**informative** 78:4  
**ingredients** 42:23  
**initial** 47:9  
**initially** 14:19 15:33  
37:7,15 41:3  
**initiating** 15:23  
**initiation** 26:1  
**initiative** 1:30 20:7 86:1  
72:19 73:22 76:26  
77:1,17 78:2 79:5,27  
80:7 81:33 83:12  
86:1  
**injuries** 30:6,7  
**injury** 30:4,5  
**innovation** 8:29 9:24  
16:8  
**innovations** 85:9  
**innovative** 16:11  
**inquiry** 12:18,22  
**inscribed** 75:6  
**inside** 27:18 57:21 60:10  
86:16  
**insight** 63:15 64:16,20  
**insights** 64:30  
**inspiration** 12:21  
84:20,24  
**inspirational** 84:12  
**inspirations** 80:32  
**inspired** 7:27 81:10  
84:11  
**instance** 4:2 34:33 35:17  
44:31 45:14 46:15,17  
**instead** 27:30 62:5  
63:5,29 67:13 73:13  
**instilling** 39:2  
**institute's** 9:19  
**institute** 2:12,20 4:7 5:17  
8:7,23,26  
9:2,3,12,16,22  
10:6,10,17,24 11:7  
16:9 20:8 30:28  
21:13,31 22:25,27  
23:21,27,29 26:18  
30:14,15 31:1 32:7,23  
33:31 34:13 35:21  
36:28 38:19,24 49:3  
74:4 78:19  
**involvement** 18:18 23:3  
73:9  
**involves** 63:33  
**involving** 21:5  
**iron** 71:8  
**irresponsible** 76:21  
**ish** 66:15  
**island** 57:22,24,25  
**isn't** 20:3 68:22 73:12  
**issue** 40:14 42:8  
79:20,27,28,30 82:10  
83:22 84:12  
**issues** 33:10 40:14 42:12  
68:4 79:14,16 85:13  
**it's** 2:7,11,26,33 4:17  
6:7,9 8:7 10:20  
12:23,32 13:19,24  
14:30 17:5 19:16,18  
20:3,16,21,27,31  
21:18 23:15,21  
31:4,8,14,19 32:6  
33:2 35:23,26,28,29  
36:7,21,24,25 37:7,16  
38:12 39:2,19 40:7,9  
41:9,11,12 48:7 49:26  
50:18 51:17 52:20  
53:16 54:5,6,33  
55:12,22,  
**item** 24:19  
**items** 24:19 49:19,20  
**its** 7:17 13:25  
**itself** 33:21 34:31  
**I'd** 7:4 13:30 16:23 24:16  
29:14,25 60:28 61:21  
62:9,15 65:14 66:2  
68:3,7,11 72:13  
**I'll** 6:21 13:4 18:29 21:28  
33:15 35:27 37:3  
41:28 54:27 72:18  
**I'm** 5:31 6:27,28,30 7:20  
9:5 11:33 12:28,29  
13:4 14:12 15:13  
18:8,11 19:23 20:22  
23:17,18,28 24:13  
29:31 34:28  
35:26,28,30  
36:21,23,33 39:33  
40:4 41:31 47:16  
48:10,15 54:27,30  
55:11 57:15,20,32  
61:4 63:27 64:23  
66:11 67:29,34  
68:8,18,20 70:26  
71:14 72:14,  
**I've** 6:21 64:28 68:32  
70:26 71:9,10,11  
75:23  
**IBF** 28:26  
**Iceland** 9:30 16:34  
**Importantly** 72:9  
**Inch** 24:31  
**Index** 79:4  
**Institutes** 9:5  
**Intensity** 61:8 73:21  
**Introducing** 77:34  
**Inversely** 43:7  
**INEF** 26:19 28:33  
**Ireland** 1:10 2:18,26,27  
3:4,21 8:24,26  
9:5,9,18,30 10:21  
11:14 12:29,33 13:24  
14:33 15:3,14 16:34  
17:5 19:24,26,29,30  
24:8 33:33 34:2  
36:12,22 85:29  
**Irish** 1:23,24 8:13 9:16  
12:14,24 16:4,20  
18:33 86:11,16  
**Israel** 23:28  
**Israeli** 23:27,30 24:1  
**Italy** 86:3  
**ITEC** 31:11 32:2 35:19  
38:31  
**ITT** 84:1  
**J**  
**jib** 57:16  
**jibing** 57:17  
**job** 12:15 17:9,10 20:3  
39:16  
**jobs** 33:32 38:13 66:6  
**join** 14:18 15:13 23:30  
29:12  
**joined** 17:16 34:28 67:5  
**joining** 33:20  
**joint** 19:6,12 34:24  
**joins** 36:24  
**journal** 78:6,26,28,30,33  
79:1,4,8,9,23,33,34  
80:2,14  
**journey** 70:9  
**journeyed** 1:4  
**joy** 71:15  
**judging** 66:31  
**just** 2:22,33 5:31  
7:1,16,29 10:24 13:17  
15:9,24,29  
16:4,24,28,30,31  
18:19,25  
19:3,16,17,22,23  
20:16,17,18 21:28  
22:6,30  
23:12,13,17,18,22,26  
24:3,19 28:31  
30:11,17 31:1,32  
32:6,20,27,31  
33:15,19 34:24  
36:13,30 37:3,20,32  
38:1,4,9,16 40:2,4,16  
41:1,2,7,24  
**justice** 1:25 2:2 5:10  
**James** 73:14  
**Javier** 25:22 29:4,15  
78:2 7:80 17:19,21  
81:28 84:28  
**Jean** 3:20  
**Joana** 45:32 46:11  
**Joanne** 6:33 7:1,6  
**John** 72:3  
**JOSE** 78:26,28  
**Judo** 45:17  
**Julie** 64:13  
**June** 37:23  
**K**  
**keen** 1:30 69:20  
**keep** 5:8,23 12:27  
16:17,20 23:7 59:13  
76:6 79:10 82:12  
84:28 86:10  
**keeping** 29:6 70:1 81:8  
82:22  
**kept** 38:13  
**key** 1:22 20:13,17 23:34  
32:2 42:7 60:11  
73:12 78:9 82:10  
83:15 84:9  
**keynote** 3:16 13:5 14:31  
60:17 81:7  
**keynotes** 39:28 84:6  
**kick** 35:18 70:3  
**kids** 6:21 33:26 58:27  
**kilometres** 11:21  
**kind** 8:5 13:4,26 52:3  
53:9 58:23 70:6  
73:24 74:7  
**kindly** 83:32  
**kinds** 1:31  
**kinetics** 35:17  
**knee** 6:8 36:14 61:15,16  
**knew** 59:7  
**knobs** 55:27  
**know** 2:34 3:24 4:12 6:24  
7:8 8:2 11:21,22 12:3

- 13:13 14:9 15:21,30  
16:23,30 17:16,33  
18:10 19:22 20:8,10  
21:5,12 22:5,17,18  
23:3,11,17,28 24:8  
25:14 32:19 34:8  
36:34 38:19 39:33  
42:1 47:16 48:24  
54:4,17 56:17,29 62:1  
65:7 66:15,19 68:23  
74:4 75:17 78:11 7
- knowledge** 8:33 9:12  
20:14 44:8 51:9 67:3  
79:33 82:14,30 83:26
- knowledgeable** 32:17
- known** 17:14 60:19  
75:23
- knows** 71:16
- Kathleen** 1:27 2:3 8:20  
11:11
- Kelly** 2:34 17:15 24:16
- Ken** 46:26 73:2
- Kerry** 1:12 2:11,18  
6:29,30 11:4 12:33  
29:19 32:12 33:6  
36:27 38:3,5,17 75:5
- Kevin** 14:16  
29:17,19,23,25,27,31  
33:18  
34:14,17,18,21,33  
35:7,33 36:1,17,30,34  
37:3 39:24,33
- Killarney** 15:15 24:8  
81:23
- King** 7:15
- Kitrina's** 62:14
- Kitrina** 62:12 64:9 65:22  
68:7 74:24 75:29,34  
76:4
- Kolmogorov** 27:5
- KUDLACEK** 11:15,17  
12:32 77:28,34 79:11  
80:13 84:28 85:34
- L**
- lab** 27:1,3
- labels** 66:28
- lack** 30:29 50:10
- ladies** 1:3 2:1 8:10 11:14  
15:7 29:31 41:23
- lady** 15:7
- lake** 55:19,20,23,25
- lamp** 75:6
- landscape** 8:26
- language** 8:13 56:4,5
- languages** 74:18
- lardy** 67:29
- large** 21:20 38:3
- last** 1:12 9:6 15:33 16:24  
18:6,9 32:12 42:8  
44:25 49:29 52:32  
64:26 71:8 77:28  
78:31 79:1 82:19  
83:1,24
- late** 20:15 34:14 42:11  
47:7 62:8
- latest** 31:25
- laugh** 22:26
- laughing** 22:26
- launched** 9:28 13:23
- launching** 82:19
- lead** 9:22 44:21 77:15
- leaders** 14:22 39:29,31  
58:2
- leadership** 17:30 78:16  
86:1
- leading** 32:24 64:19 65:1  
70:9 83:18
- leads** 50:17 51:10,14
- league** 34:2
- lear** 11:17
- learn** 1:8 7:3 11:31 12:28  
65:6 81:23 86:15
- learned** 11:32 23:33  
58:24 63:32
- learning** 9:25 11:33  
12:10,19 14:19  
29:17,19,32  
30:19,21,25,34 31:27
- 34:30,32 35:8 37:22  
40:27,28 41:9,10 45:8  
49:16,24
- learnings** 49:19
- least** 32:3 47:27,30 58:34  
63:1 64:26
- leave** 8:33 11:10 32:3  
60:3
- leaving** 41:2,28
- lecture** 60:17 65:31
- lecturer** 12:33
- lecturers** 31:2
- lectures** 12:25
- led** 9:3 20:8 33:15,24  
36:33 42:13 63:24  
68:15 76:4 77:11
- left** 29:33 39:33 56:26  
57:26,29 60:1 61:15
- leisure** 1:29 4:12,13,14  
14:18 21:23 29:21,28  
30:4,27 31:26 35:29  
36:20 38:3,7 39:20
- length** 26:31
- less** 27:8,27 47:17 61:30  
72:16
- lesson** 44:17
- lessons** 43:28 44:9 45:17
- let's** 81:17
- let** 3:25 7:4 8:4 33:14  
81:23 83:25
- level** 9:29 13:20,33 14:20  
18:4 26:16 29:7  
30:23,29,33  
31:5,20,22,31,32,33,3  
4 32:17 33:34 34:12  
35:8,16 37:9,11,15  
38:30,33 42:5 46:3  
47:27 50:20 51:17  
52:25 61:8 81:29  
82:17 83:4,9
- levels** 27:8 42:13  
50:14,17 51:15 76:5
- life** 3:20,25 6:22 7:7  
17:34 23:14 39:4  
62:3,33 64:7,11,17,29  
66:30,31 67:8  
68:23,29 72:7 74:14  
76:18
- lifelong** 9:25 23:30  
24:1,5
- lifestyle** 22:19 34:2 68:26  
70:9
- light** 28:3,9 75:6,7
- lighting** 28:12,16,21
- lights** 28:16
- like** 2:11,17,20,33  
4:14,19 8:20 10:29,32  
12:11,12,14  
13:8,13,30 16:9,23  
17:15 18:20,21 20:16  
23:2 24:16 25:31  
28:3,15,19 29:14,25  
30:5 32:14 33:9,11  
39:17,30 40:7,18  
50:28 55:26,27 56:24  
57:22 58:28,31 60:28  
61:2 62:9,15,27 63:1  
65:14,22,26 66:2,16  
67:20,
- likely** 11:28 64:26 73:28
- likes** 34:11 82:34
- limbs** 7:2,6
- limit** 7:6,33,34
- limitation** 44:23
- limitations** 44:5
- limited** 24:25
- limitless** 7:12
- limits** 7:2,7 11:29
- line** 3:9 28:9 56:22 62:1
- lines** 32:13 56:14 64:10
- link** 10:2
- linked** 14:17 83:13
- list** 85:3,5,9,23 86:5
- listen** 14:5 36:8 64:20  
65:10
- listening** 13:5,20 28:34  
64:16
- literacy** 33:2,3
- literature** 10:7 42:9  
46:25 48:24 72:10  
73:1
- little** 3:6 16:28 31:12  
33:14,15 37:15,17  
38:5 41:2 53:21  
59:16,17 62:9  
65:14,19,26 67:2,4,12  
68:11,23 72:16 74:3  
76:7 80:7,17 81:3  
83:27 84:2,18,28 85:5
- live** 4:31 5:9,10 6:34 70:2  
71:14
- lived** 11:21 62:22 70:21
- lives** 6:1 8:16 10:25 11:2  
19:7 64:5 74:21  
76:34
- living** 70:1 71:2 76:18
- loaded** 25:9
- local** 3:6 18:4 19:29  
30:14 36:27 38:24  
42:20 46:24 67:30
- located** 42:26 81:18
- location** 9:19 57:27
- long** 4:34 8:8 11:22,26  
15:18 16:8 19:5  
22:18 81:14
- longer** 4:31 59:17 69:24  
73:34 79:23
- look** 5:18 7:21 16:7 20:13  
22:10 59:15 60:12  
65:16,18 66:20 73:20
- looked** 7:21 77:15
- looking** 4:23 5:34 6:16  
7:20 13:4 38:26  
41:11 58:32,34 63:12  
70:25 77:5 81:28  
86:9,16
- lose** 7:2 18 85:6
- losing** 73:34
- lost** 36:31 66:30 69:24  
70:14 71:19
- lot** 8:5 11:28,29  
12:5,7,10,13,21  
16:15,16 17:7 19:22  
25:34 30:22,32  
31:1,4,15,20  
32:16,21,34 33:11  
37:5,16 38:16 40:34  
41:11 56:32,34  
63:12,29 64:32 67:20  
70:23 71:32 75:8  
76:16,21 78:10 81:5  
83:14 84:12,30
- lots** 52:33 61:22 67:21,23
- loud** 56:5,10
- louder** 19:13
- love** 22:33 23:29
- loved** 60:29 61:14,23,24
- lovely** 22:3 24:3 60:33  
71:8
- low** 22:19 39:15 71:21  
73:31 85:16
- lower** 27:26 80:7
- luck** 11:8
- lucky** 6:2 35:22
- lunch** 25:2 41:29 47:34  
59:29 67:8
- Lance** 28:24
- Larvier** 25:32
- Later** 17:16,34 35:27  
36:6,8 41:29 59:11  
68:18
- Laura's** 62:8 66:2 68:3,5  
72:13 77:11
- Laura** 62:8 66:32 73:33
- Leeds** 60:18 68:32
- Liam** 10:33 20:8 80:27
- Lieberman** 46:26
- Linda** 10:33
- Listowel** 33:6
- Lithuanian** 9:27
- Lord** 44:4,15,25
- Lotto** 34:15
- Louis** 75:5
- Ludwig** 42:1
- Lupus** 30:5
- Luther** 7:15
- Lynch** 1:27,28 2:3,5 8:20  
11:10,11
- Lyon** 83:17
- M**
- machine** 75:27
- mad** 72:14
- made** 6:21 11:26 18:15  
41:10 43:27 49:32  
51:23 66:11 68:19,20  
69:23 75:25
- mail** 83:32 85:3,8
- main** 12:17,32 17:5 34:5  
45:30 46:20 79:10  
80:24 81:2 82:19
- mainly** 31:32 34:1 44:31
- mainstream** 42:6,7 46:32  
69:1 72:16 82:13  
83:21
- maintain** 85:9,23
- maintained** 3:30
- maintaining** 85:5
- major** 3:21 14:7,14 31:22  
34:28 35:16 79:32,34  
83:1
- majority** 51:25
- make** 4:2 6:3,20,22,23,24  
7:12 11:4 14:6 16:10  
19:5,20 39:31 40:29  
47:25 58:17 66:15  
70:19 74:34 77:5,9  
80:4,14 81:27 83:12
- makes** 12:6 37:27 72:19
- making** 4:2 25:8 37:17  
38:26 51:10 70:2
- male** 42:25 49:3
- males** 50:4
- man** 8:8 11:13 12:32  
67:5
- manage** 4:19
- managed** 75:34 76:6
- management** 33:34
- manager** 30:19 40:23
- managers** 38:6
- manipulative** 66:28
- manner** 62:13
- manoeuvre** 57:16
- manoeuvres** 57:16
- manual** 19:31
- manuals** 19:34
- manuscripts** 78:34  
80:3,10
- many** 8:32 12:3 13:24  
14:13 16:9,12,30  
18:10 19:18 20:23  
21:16 23:1,29  
30:13,27 31:5,8 32:25  
33:5,10 38:14,20 39:3  
40:2,16 52:10 58:19  
62:17 63:27 64:5  
68:24 70:34 71:17  
74:3 75:7 85:10
- marathon** 39:7
- marble** 1:19
- markings** 3:7
- marry** 7:9
- mask** 69:16
- massage** 35:19 38:30
- massive** 38:13
- master** 47:10 80:1
- masters** 29:24 52:24
- match** 3:5
- matches** 6:29
- material** 72:6
- materials** 19:25
- matter** 7:1 19:9 35:1  
56:29 65:33 68:22  
81:26
- maximum** 40:6
- may** 1:1 29:5 30:13,14  
31:9 32:34 35:34  
37:25,30,31 38:11  
39:7,9 65:32 69:5  
70:11 71:22 74:3,5  
83:20
- maybe** 11:22 12:3 13:14  
18:29 30:4 33:15  
37:30 40:17 41:2,3
- 47:7,16 55:12 59:17  
85:13,24,25
- mean** 39:10,12 66:15
- meaning** 65:24 68:23
- meaningful** 68:28
- means** 10:27 15:11 23:26  
42:2 76:22
- meant** 67:17
- measure** 27:1 49:12
- measured** 43:27 74:8
- measures** 27:3 44:21  
49:18
- measuring** 74:9
- mechanisms** 26:4
- media** 12:5
- medical** 35:9 39:4 63:24  
65:15 70:6 72:9
- medication** 26:32  
34:6,29 63:21 66:30  
68:25 69:22  
76:11,15,17,18,20,21,  
27 77:2
- medicine** 66:10 81:11
- meek** 49:14
- meet** 14:26 16:24 25:1  
31:28 46:25 67:23
- meeting** 1:15 12:11 25:2  
34:14,17 58:1 71:25
- member** 33:19 40:4  
52:21 85:2,6,23
- members** 8:15 12:11,14  
17:2 18:14 21:6  
85:3,10,22,27,28,29,3  
0,31 86:17
- membership** 78:7  
85:5,8,9,17
- memory** 60:10,11
- men** 26:27,28 27:14,18  
32:13 64:29,30
- mental** 2:3 4:27,28 31:34  
40:16 59:25 60:20,23  
62:17,19,21,22,27,28,28,  
32  
63:2,6,9,11,22,28,32  
64:4,6,11,16,17,24  
67:3,29 68:26,34  
69:14,15,16 70:12,23  
71:4,17,19 72:10  
73:2,4,12,19,24,31  
74:9 75:19  
76:11,13,23
- mention** 3:24 19:23  
25:32 75:4 81:34
- mentioned** 10:4 13:7,29  
16:10,12 19:22 35:33  
38:1 39:28 40:4  
79:17 84:28  
85:19,21,23
- mentioning** 15:17 16:13  
8:5
- mere** 8:5
- merge** 82:21
- merging** 82:21
- message** 20:23
- metalogical** 42:23
- method** 26:13 82:25
- methodology** 26:13
- methods** 64:13,24  
65:4,10,29 75:21
- mic** 74:31
- micro** 22:10,15,21
- mid** 34:14
- middle** 42:26 55:20,25  
67:10
- might** 2:34 5:20 14:25  
26:23 31:10,17,23  
32:9,10,30 33:14  
38:14 39:8,12 41:3,13  
43:8,13,17,28 44:21  
47:16,17 65:18 66:31  
70:31 72:27,28 73:22  
75:4
- migrate** 8:7
- mild** 45:16 49:15 52:19
- mile** 33:7
- million** 10:11 17:1 62:21
- mind** 34:23 63:20 65:5  
70:30 81:1,9 84:13  
86:10
- mine** 15:27 62:14
- mini** 86:6
- mining** 33:32
- minorities** 73:30
- minutes** 25:10 29:4  
39:33 41:27,28,29  
59:17 74:31 75:13  
77:28,29
- missed** 47:7 84:30
- mission** 82:7
- mix** 30:10 82:21
- model** 46:26,29 74:8
- modifications** 43:9,14,29  
45:13
- module** 20:13,21
- modules** 9:26 19:25  
20:4,33 31:31 32:2  
32:32 35:26 36:23  
40:34 41:9,10 57:6,8  
66:2 81:1
- money** 61:8 75:34
- monitor** 85:10,23
- month** 31:20 32:9 33:20
- months** 31:9 33:21  
34:6,34 35:16 36:32  
37:24 40:12 64:26  
75:31 79:14
- mood** 61:3
- moon** 7:20
- more** 4:12 5:6,32  
16:15,16 17:17,27,31  
18:18 20:10 21:10  
31:12 32:5,21 34:6  
44:32 47:33  
49:20,24,27,28  
50:4,22 51:10  
52:27,31 53:29  
54:9,21,24 56:6,15,33  
57:15,16,28 58:6,27  
59:15 61:4,16,32 62:8  
63:29 64:13,29 65:27  
67:20 68:21,23 69:11  
72:14 73:13,20,23
- morning** 1:3,33  
2:5,7,8,12 3:16 14:30  
15:10 17:11 19:23  
29:31 33:7,18 39:28  
41:31 47:25 55:27  
70:28 77:17
- most** 1:6,22 4:3 6:16  
11:28,32 12:27,33  
13:17 15:14 18:21  
37:33 42:12,27  
46:8,15,20 49:12  
51:24,33 56:31 57:32  
61:3 64:26 73:22  
75:31 78:1,23 84:12
- mother** 2:8
- move** 35:25
- motivation** 18:19 84:14
- motor** 44:5,15,22  
45:17,23,34
- mountain** 72:20
- mouth** 28:28
- move** 18:17 22:30 24:22  
35:4 56:32 64:14  
66:14 70:5 72:18
- moved** 9:12 67:16
- movement** 1:29 4:34  
11:25 35:23,25 36:7  
48:22 56:31,34  
57:1,9,11,17,33 63:29  
64:13 81:12
- movements** 43:23 56:31
- moves** 41:10
- movies** 80:18
- much** 8:2 11:29 12:30  
13:4 14:28 15:9  
19:11,13 21:3  
22:13,19,27 24:8  
25:18 28:33,34 30:28  
31:5,10 32:7 34:28  
39:22 41:2 47:3,25,34  
59:15 61:8,30,32  
62:14 63:17 64:9  
67:33 68:34 70:26  
71:3,16 73:13

74:17,18,25,26,28  
75:8 76:12,30  
77:20,26 80:10 83:33  
84:26  
**multidisciplinary** 60:19  
**multiple** 4:28 54:19,33  
58:14  
**multitude** 9:3  
**mum** 76:25  
**music** 12:24 18:33 53:8  
60:3  
**must** 4:28,32 5:4,25,26  
16:16 41:7 51:23  
**myself** 2:33 11:26 18:29  
33:25 35:13 40:7  
53:16 67:23 71:11  
76:24  
**MacLeod** 72:3  
**Madrid** 26:19,20 28:33  
80:32 81:19 82:16,34  
83:34,2,11,14,25  
84:7,26,31  
**Managing** 15:2  
**Mangerton** 59:18  
**Maria** 45:20,23 46:2,11  
48:4,10 54:9  
**Marian** 17:11  
**Mariana** 41:19,26,28  
47:25  
**Mark's** 68:12,21,31 69:1  
**Mark** 68:12,18,20,24  
77:10  
**Marks** 16:2  
**Mars** 7:20  
**Martin** 7:15 11:15  
13:7,14,29 14:12  
15:17 79:10 80:21  
84:18  
**Martinez** 25:32  
**Mary** 3:16,17,24,32  
13:5,8,23 15:2,7  
24:13  
**Mayo** 40:24,33,34  
**McDonagh** 10:33 20:8  
**McGill's** 16:9  
**McGill** 13:8 15:27  
**McSweeney** 13:8  
**Met** 15:33 24:5 30:33  
68:32  
**Metropolitan** 60:19  
**MEP** 2:34 17:16  
**MEPs** 24:16  
**Mia** 29:4,5,15 81:27  
**Michael's** 16:26  
**Miguel** 54:14,19,20,22  
58:10 59:15  
**Miha** 28:21  
**Minister's** 13:17 14:3  
**Minister** 1:27,28  
2:1,2,3,5 5:29,31  
8:4,15,20 11:10,11  
13:18,29 15:19 16:17  
23:31 77:17  
**Misneach** 16:20  
**Mile** 15:10  
**Mobility** 24:34  
**Mrs** 45:20,23,32  
46:2,5,11  
**MSc** 9:6  
**Muckcross** 25:2  
**Mulcahy** 75:5  
**Murphy** 8:11,13 17:11  
**N**  
**name** 29:31 34:14 55:22  
60:6 62:5  
**narrative** 59:25 60:23  
64:23 65:10 70:18,19  
72:5 75:21  
**narratives** 44:2 72:10  
75:18  
**nasty** 66:25  
**national** 5:15,17 8:34  
9:4,15,17 10:6,7,19  
12:34 14:16,19 17:9  
18:4 19:31  
20:1,3,6,29 24:31  
29:17,19,32  
30:19,21,25 31:27  
32:13 37:22 40:27,28  
41:9 58:3 59:5 60:1  
82:33 83:17 86:2  
**nationally** 8:29 9:13  
10:15  
**nations** 86:7  
**natural** 11:5 55:20 74:8  
**nature** 22:13 55:12,17,19  
57:22 63:24  
**nautical** 58:1  
**near** 52:33 53:15  
**nearer** 66:6  
**nearly** 11:21 62:13,22  
69:22  
**necessarily** 31:12 67:24  
**necessary** 30:29 31:17  
54:27 55:19  
56:8,28,29  
**need** 4:18 5:6,12,31 6:11  
7:3 14:11,20,21 23:2  
27:30 31:2 32:9  
35:4,7 37:25,28,31  
40:14,19,32 41:3  
45:17 49:20,24  
55:17,34  
56:1,2,4,21,22,26  
57:6,15,23,27,32  
58:31 64:14,15 70:27  
73:20,23 74:12  
76:20,23 81:7 85:23  
**needed** 6:17 13:13 15:24  
78:12  
**needs** 5:20 15:30 16:4  
30:33,34 51:25 57:5  
73:5,16 77:18  
**negative** 22:19  
**negatively** 50:10  
**negatives** 63:17  
**neither** 37:14  
**network** 1:8 8:31  
14:16,19 29:17,19,32  
30:19,21,25 31:27  
37:22 40:27,28,29  
41:9 86:2  
**networking** 18:12 21:4  
**networks** 19:19  
**neurosurgeon** 42:1  
**neutrality** 65:27  
**never** 3:26 6:24 31:23  
34:31 55:9 56:33  
65:7 66:6 74:8  
**new** 7:27 8:33 10:11  
21:31 34:25 36:33  
62:27 70:9 76:8  
78:21,23,33 79:13,34  
81:10 85:14  
**news** 12:3 78:9 82:1  
**newspapers** 12:4  
**next** 1:6,17 11:13 18:5  
19:11 20:9 22:32  
25:25 29:17  
34:8,23,25 36:21 59:5  
60:17 80:17 81:32  
82:3 85:30 86:12,17  
**nice** 2:26 19:4 60:8 72:17  
76:8 80:13,26  
**night** 15:33 16:24  
**nobody** 16:1 62:4 76:14  
**non** 27:31 34:25  
**none** 16:1 33:33 66:10  
**normal** 27:5 56:2 57:2,12  
61:10 67:33 69:30  
72:19  
**normality** 27:5 66:30  
**normally** 32:30 40:9  
**north** 15:5 19:29 33:6  
**not** 2:22,26,33 4:9,17,26  
5:8 6:2,7,9  
7:16,21,29,33,34  
12:3,27,28 15:24  
16:30 19:17,23 20:18  
21:18 22:6,27 23:3,13  
24:16 25:9 26:23  
29:5 30:11,13  
31:1,11,14,15,19  
32:6,10,20,27,30,31,3  
4 35:22 37:27 39:7,9  
40:9,12,14,17 43:7,8  
47:25 48:21 50:18  
52:20 53:16,  
**notably** 1:22  
**note** 36:30  
**notes** 25:1 64:33,34  
**nothing** 14:5 21:31 54:34  
55:6 57:12 61:29  
67:10 71:2  
**nothingness** 71:5  
**notice** 50:18  
**noticed** 59:13  
**novel** 65:26  
**now** 3:13,24 5:16,19,23  
6:21 8:7 9:30 11:10  
12:32 14:30 16:7  
18:8,24 19:1,31,34  
20:17 21:5 22:26  
24:27 25:9,17 27:33  
28:31 29:5,12  
31:22,26,34 33:25  
35:23,28 36:33,34  
38:11 41:24 47:3  
51:20 32:52,1,13,32  
56:8 57:12,13,25,28  
60:17,18 61:4 62:9,17  
64:14 66:2  
**nowhere** 15:29  
**number** 4:34 10:6 13:33  
14:3 17:12,20 18:3  
26:33 30:20,26 35:16  
38:9,25 40:10 52:13  
59:17 62:5,6 66:3  
74:15,29 79:20,29  
80:14 85:2,29,30  
**numbers** 79:15 85:2,28  
**numerous** 34:30  
**nurse** 66:11  
**NBA** 28:24  
**NDA** 5:15 30:26  
**Nevertheless** 44:21  
**Niall** 15:9  
**Niamh** 10:32  
**Nine** 20:27 31:8 35:17  
68:32  
**Nonetheless** 43:8  
44:12,16  
**Northern** 19:30  
**November** 9:13  
**O**  
**o'clock** 75:13  
**obey** 7:4  
**object** 70:5  
**objective** 36:28 83:5  
**objectives** 43:5,9,17  
44:10 45:12,28  
46:13,17  
**objectivity** 65:27  
**objects** 74:9  
**obvious** 61:4  
**obviously** 16:23 17:21  
23:13 70:34  
**occasionally** 44:1  
**occasions** 32:21 67:34  
**occupied** 70:30  
**occupy** 68:34  
**occur** 43:7,17,26  
**occurred** 43:33  
**occurring** 42:16  
**odd** 61:3  
**off** 2:7 7:2 16:22  
24:14,19 33:15 34:5  
37:20,31 54:4,22 61:5  
71:18,22  
**offer** 17:20,22,25,30 18:3  
20:4 74:18 81:9  
82:13  
**offered** 41:7 48:22 62:3  
**offering** 1:8 38:7 67:14  
**offers** 46:33  
**officer** 32:12 33:9  
40:4,12  
**official** 1:27 21:8 42:16  
**often** 6:29 14:5 39:4,5  
44:26 45:7 46:2  
50:28 68:34 70:20  
71:32  
**oil** 75:6  
51:18 53:7,27 54:1  
57:15,20,25 58:23,28  
59:9,33 60:11 62:29  
63:2,33 64:20 68  
**others** 3:26 11:2 14:34  
20:3 36:1 40:23 58:6  
67:34 76:20  
77:2,7,13,16  
**otherwise** 50:19  
**our** 1:23 2:34 3:30,31,33  
4:27 5:25 26 6:1  
7:16,17,24,29,30  
8:7,28 9:13 10:16,25  
11:5,13 12:22,24,32  
13:21,26,27  
14:4,6,14,16,20,30,31  
15:10,11 17:7,9,10,23  
18:6,19 19:7,18  
20:3,26 21:18  
22:3,18,20 23:1,11  
24:3,16,30,31 26:8  
29:17 31:5  
32:23,25,27,28 33:5,  
**ours** 33:11 40:29 83:12  
**ourselves** 7:14,33 31:5  
65:1,26 69:6  
**out** 5:4,31 6:9,23 7:30  
10:2 11:10 13:13  
15:19 17:7 19:1  
20:23 22:32 24:27  
27:2 30:4,32 32:5  
33:32 36:31 37:27  
38:4,21,26 40:9 43:2  
48:7,29 49:33  
58:12,13 65:29  
66:7,11 67:21 68:32  
69:30 70:3,12,27,28  
71:8,12 72:33 83:26  
85:1  
**outcome** 37:2 39:15  
73:27  
**outcomes** 10:4 33:16  
38:29 49:18,32 50:8  
51:17 73:5 77:16  
**outdoor** 60:18 74:4  
**outputs** 28:12  
**outside** 22:11,17 48:7  
79:25 81:32  
**over** 1:6,17 3:27 12:24  
17:34,1 19:11 25:25  
29:32 33:33 36:2  
40:33 42:8 45:32  
46:20 47:21 63:19,29  
64:32,33 69:13,21  
76:1 77:2 78:31  
85:4,5  
**overall** 50:33  
**overarching** 43:2  
**overcome** 23:8  
**overheads** 15:10  
**overseas** 15:11  
**oversees** 13:1  
**overtime** 65:19  
**overview** 44:2  
**overweight** 69:29  
**overwhelmed** 36:10  
**own** 20:1 22:18 32:20,27  
34:33 35:25 38:23  
60:12,29 62:1 65:5  
67:34 71:19 74:21  
76:16 77:6,13  
**O'FLYNN** 1:3 8:4 11:7  
12:32 14:30 24:13  
59:27 74:28 75:10,12  
77:3,20,25  
**O'Neill** 30:20  
**O'Riordan** 6:33  
**Obrigado** 47:3  
**Occupational** 32:8 38:17  
**October** 9:6 37:24 80:28  
82:3,20,21 83:24 84:9  
**Office** 1:28 16:31  
17:5,6,7 40:25  
**Okay** 29:14 47:33  
55:9,11,12,16,19  
56:28  
57:4,11,12,13,23,24,2

528 59:33 60:26 69:9  
85:1  
**Oliver** 8:10 11:7  
**Olympics** 3:20,21  
13:9,24 15:2,3,18  
16:29 17:3,10,26,30  
18:3,22 20:30  
21:3,16,17,19 22:32  
23:2  
**OLIO** 54:14,19,24,30  
58:14,20,29 59:6  
**Organisation** 21:17  
41:12 59:6 62:18  
**Oscar** 84:10  
**Osteitis** 30:7  
**P**  
**pace** 31:19 35:25 60:29  
**paced** 34:30,32  
**paediatricians** 66:16  
**page** 79:15  
**paid** 38:7,11  
**pain** 34:30 62:33  
**pains** 34:24  
**panic** 37:27  
**paper** 73:3 79:28,32  
**papers** 79:27,28  
**parallel** 24:22 25:8,12,17  
59:30  
**parallels** 63:29  
**paramedic** 27:6  
**paraplegic** 83:18  
**parcel** 4:10,24  
**parent** 44:8  
**parents** 6:19 52:3  
**parishes** 38:26  
**part** 4:9,24 6:10 15:14  
20:4 23:2,8,11,12,15  
24:1 25:6 30:25  
38:2,7,33 40:20 48:22  
56:13,19,28,31  
57:1,2,15,27,28 62:8  
64:34 65:2 68:25,33  
85:17  
**participant** 21:27 26:30  
69:19 70:25  
**participants** 23:9 43:23  
46:20 58:12 64:28  
68:5 69:3,6 74:23  
77:1  
**participate** 9:9 14:21  
17:3 21:24 28:19  
33:11 35:24 39:9  
42:26  
**participated** 16:2  
**participating** 23:34  
**participation** 10:14  
13:34 14:1 29:25  
34:32 64:34  
**particular** 1:29 2:16,24  
3:24 4:6 5:31 8:20  
30:21 40:17 75:24,26  
**particularly** 8:23 9:29  
10:32 14:33 16:23  
22:18 30:28 51:7  
62:27  
63:5,12,14,27,34  
68:22 69:4 71:16  
72:9 73:31 77:15  
**partly** 64:28  
**partner** 8:16 22:25 23:6  
67:16 73:14 78:15  
**partnered** 10:29  
**partners** 10:6,7 23:18,21  
82:32  
**partnership** 20:30 32:8  
38:5,16 62:13 78:22  
**partnerships** 18:12  
19:22,29 20:26 36:28  
**parts** 16:31  
**party** 12:12  
**pass** 78:26  
**passionate** 68:22  
**passive** 71:3  
**past** 59:7 62:19 63:19  
78:19  
**patch** 40:17  
**path** 35:13 36:11,33  
72:28

- pathway** 26:4 34:21  
 35:14  
**patient** 69:16 70:13  
**patronage** 83:11  
**pattern** 59:13  
**pause** 62:9 68:3  
**pay** 12:6 34:7 70:1  
 85:21,25  
**payment** 85:16,17,21  
**peer** 44:13 78:34 79:1,32  
 80:2  
**peers** 43:13,18 44:17  
 45:24,25 46:17  
**peninsula** 75:5  
**people's** 63:25 64:20  
 65:5,18 70:20,23  
**people** 1:14,30  
 2:2,22,24,30  
 3:2,9,10,13,27,32  
 4:1,8,9,10,16,28,31  
 5:1,8,20,23,27  
 6:1,2,4,9,19,23,32  
 7:20,33,34 8:27  
 9:14,18 10:21,25 12:5  
 13:8,20,25,34  
 14:4,5,9,13,18,21,33  
 16:9,30 17:13,25  
 18:10,12 19:5,30,34  
 20:19 21:33  
 22:9,23,26 23:3,6  
 25:13 26:3,7,11  
**per** 79:30  
**perceive** 51:9,31  
**perceived** 21:17  
 49:34,8,27  
 50:14,15,17,18,19,26  
 51:2,4,15  
**perception** 22:28 50:22  
**perceptions** 48:16 49:28  
 65:11  
**perfect** 55:28 78:24  
**perform** 1:27 46:17  
**performance** 17:22  
 26:14 29:8 62:28  
 83:10  
**performances** 45:14  
**performed** 27:7  
**performing** 45:21  
**perhaps** 63:6 65:33,34  
 68:23,25,26,28 69:4  
 71:2,3 73:12,23 76:29  
**period** 31:20 67:18 69:21  
 79:14  
**permission** 60:14  
**persistent** 69:15  
**person's** 23:14 65:26  
**person** 6:16,17 12:28  
 13:18 16:2 18:24  
 24:5,13 27:12,23,33  
 40:5 56:2 57:31  
 61:23 65:25 68:20  
 69:15,28 71:25 72:3  
**personal** 21:33 22:13  
 35:21 36:24 40:14,15  
 42:22,30  
**personality** 66:29  
**personally** 33:21 65:22  
**persons** 26:26,27  
**perspective** 35:21 63:27  
 64:9 82:12  
**pharmacological** 63:22  
**phase** 69:21  
**phenomena** 65:24  
**phenomenon** 65:31 73:4  
**philanthropic** 10:17  
**philosophy** 21:18  
**phone** 5:30  
**photo** 55:26 56:17  
**phrase** 14:5 77:11  
**physically** 26:11  
**physio** 66:11 67:2  
**physiotherapist** 36:23  
**pick** 81:32  
**picking** 5:30  
**picture** 23:31 27:33,34  
 28:3,9 32:27 57:17  
 83:4,24  
**piece** 75:4 82:6 84:24  
**pieces** 21:15  
**pigeon** 5:9  
**pillars** 12:17  
**piloting** 41:9  
**pint** 12:24  
**pitch** 5:5 71:8  
**pitches** 32:15  
**place** 2:11 4:20,21 5:5  
 6:14 24:6 43:8 46:8  
 55:22 59:34 60:6  
 64:15 66:28 71:31  
 78:9  
**placed** 32:25  
**placement** 38:11,12  
**placements** 42:15  
**places** 17:13 22:1,5 24:25  
 31:26 36:2 58:28  
 60:1 61:28 70:25,34  
 82:13  
**placing** 8:8  
**plan** 6:11 58:27  
**plane** 66:20  
**planners** 5:25  
**planning** 5:15,18  
**plans** 8:9 10:10 11:8  
 40:24  
**play** 21:33 23:11 61:21  
 65:27 67:28  
**played** 60:29 84:22  
**player** 3:1,2 28:24  
**playing** 4:17,18 5:5  
 18:31 23:24 28:5,31  
 67:27  
**plays** 70:30  
**please** 13:1 21:12  
 24:22,28 25:2,9,12  
 54:27 60:7,24 77:21  
 80:19 81:33  
**pleasure** 8:7 82:16  
**plus** 6:3 64:28  
**point** 4:2 22:30 33:14  
 49:33 57:15,22,26  
 61:15 65:29 66:24  
 67:27 69:7 82:7  
**points** 57:22 84:16  
**policies** 9:20 42:6,13  
**policy** 79:32  
**political** 7:3 13:18  
**politicians** 2:33  
**politics** 3:18  
**pond** 71:23  
**pool** 24:34 36:24 61:17  
**poorly** 67:2,19 72:25  
**population** 5:24 6:11  
 26:7 62:18  
**position** 57:4,6 67:23  
 79:11  
**positive** 5:5 12:27 19:14  
 22:14 34:15 35:13  
 36:25 49:28,29  
 50:4,19,33 51:14  
 63:15 64:1 71:31  
 72:9  
**positives** 63:17  
**positivity** 34:24,31  
**possibilities** 20:15 36:10  
 64:16  
**possibility** 85:21  
**possible** 19:20 20:23  
 24:13 31:23 43:8,24  
 51:17  
 55:12,13,16,25,26  
 56:17 58:3,4,31,32  
 59:3 83:33 84:2  
**possibly** 3:18 39:30  
**poster** 25:5,6 75:12  
 77:25 78:1  
**posts** 28:16  
**potential** 7:17 38:4 64:10  
**potentially** 73:6,9 75:32  
 76:34  
**potters** 75:5  
**power** 1:18 19:4 78:22  
**powerful** 13:19 28:12  
 71:16  
**powerfully** 64:4  
**practically** 1:17,21 2:22  
 12:24 24:25 25:25  
 29:7,9 30:10 32:5  
 35:12,32 36:8,23  
 38:1,19 39:9 42:13  
 46:33 51:17 53:28  
 84:6,7  
**practically** 30:12  
**practice** 1:11,18 4:7  
 10:12,15 11:2  
 12:10,21 25:26,29  
 42:9 81:6  
 82:12,13,17,22  
 84:11,16,24  
**practiced** 26:16  
**practices** 42:18,20,31  
 44:2 46:25 47:1,17  
**practising** 26:31 63:20  
**practitioner's** 42:20  
**practitioner** 76:24  
**practitioners** 46:24  
 73:13  
**pre** 53:22 63:13 76:12  
**predictive** 67:24  
**predictor** 50:28 51:4  
 73:26  
**predisposes** 63:15  
**predisposition** 63:11  
**predominantly** 64:30  
**prefer** 56:8  
**preferable** 70:13  
**pregnant** 72:14  
**premiere** 80:18  
**preparation** 38:1 49:20  
 50:10 53:29  
**prepare** 12:15 52:5  
 78:16 80:17  
**prepared** 71:10  
**preparing** 9:29  
**preparing** 10:3 49:33,34  
 51:24  
**prescribe** 67:13  
**prescribed** 70:6  
**prescription** 73:21 76:12  
**presence** 2:18  
**present** 9:8 25:12 29:20  
 37:9 43:7 48:10  
 62:13 81:10  
**presentation** 29:2,6,25  
 39:24 41:17,32  
 47:7,25 48:2,17  
 54:9,12 59:15,20  
 74:28 75:1,4,13,14  
 77:23 80:13,17,19  
**presentations** 8:32  
 25:8,9,13 39:25 41:15  
 59:30 60:14  
**presented** 43:20 75:18  
**presenter** 29:17 54:19  
 60:17 81:7  
**presenters** 25:5,8 29:19  
 60:14 75:12 77:25  
**presenting** 21:6 54:20  
 59:5 75:7  
**preserve** 65:23  
**pressure** 31:10  
**presume** 76:14 79:28  
**preview** 81:7  
**previous** 15:13 39:15  
 47:26 78:29  
**previously** 10:4 30:14  
**priest** 2:7  
**primary** 60:17,28 66:15  
 76:22  
**prior** 33:31  
**priority** 86:5  
**privacy** 35:10  
**private** 44:31 45:6 81:19  
 83:14  
**privileged** 1:27  
**pro** 27:1  
**proactive** 9:20  
**probably** 6:27 38:19  
 52:15 61:14 62:17,24  
 66:25 72:33 77:16  
 79:29  
**problem** 38:20 39:5 43:7  
 53:12 58:30,32 61:27  
 65:8 66:14,29 69:14  
 73:16 83:21  
**problematic** 76:20  
**problems** 35:9 40:15  
 55:6 58:29 62:24  
 63:3,5 64:16,17,24,26  
 69:15 70:12 72:27  
 73:24 76:11  
**procedures** 44:13 46:25  
**proceed** 79:29  
**process** 35:23 42:32 74:1  
 78:34 80:4,25 81:26  
 82:3 83:20,22  
**processes** 63:6  
**productive** 62:29  
**profession** 70:6  
**professional** 12:18 51:23  
 75:29 81:15  
**professionals** 14:13 81:9  
**professions** 14:19  
**profile** 13:27 63:14  
**profoundly** 61:28 66:22  
 69:14  
**programme**  
 9:5,6,25,26,29  
 13:8,10,11,14  
 14:17,18,19 16:3  
 17:3,9,10,12,23,25,27  
 ,31,32 18:3  
 21:17,22,25,32 22:25  
 23:2,14,21,26  
 24:30,31,32  
 29:20,23,33 30:19  
 31:28 32:32  
 33:19,20,21,22,24  
 36:7 38:6,10,12,17  
 39:30 40:6 48:12  
 54:24 58:1,13 71:7  
 76:1  
**programmes** 13:26,27  
 14:4,17 20:29 21:1  
 23:8 32:29 39:31  
 51:20,26 58:27,28  
**progress** 10:10 19:14  
 68:15  
**progressed** 31:6 37:9,11  
 38:29,33 68:15  
**progression** 38:14 77:7  
**progressions** 45:8  
**progressive** 9:20  
**project** 9:22,24,25 10:4  
 13:1 18:14 55:30  
 58:10 64:29 75:22  
 78:14,15,19  
**projected** 78:29  
**projects** 9:34 17:7 78:16  
**promised** 85:34  
**promote** 45:7 46:12  
 78:30 81:14 82:22  
 83:32  
**promoting** 12:33 78:23  
 82:32  
**promotion** 13:27 29:24  
 81:12  
**proper** 39:19 56:5,21,24  
 57:4  
**proposal** 80:26  
**proposed** 10:19 44:27  
**prospering** 12:8  
**protocol** 27:1  
**proud** 6:27,28,32,33 7:1  
 9:5,29 12:29 80:21  
 83:27  
**proudly** 81:19  
**prove** 74:7  
**proven** 39:19  
**provide** 17:13 19:32  
 21:18 22:12 30:3,29  
 31:31 32:34 33:9  
 34:19 37:20 48:29  
 51:25 62:9 76:26  
**provided** 10:8 24:5 43:20  
 46:29 69:19  
**provider** 33:30 34:9  
**providers** 10:28  
**provides** 9:9  
**providing** 8:16 29:20,28  
 39:16 72:6 79:33  
**provision** 9:14 13:25  
 15:23 21:4 54:3  
 75:25  
**psych** 66:28 67:11  
**psychiatric** 63:20 71:2  
**psychiatrist** 67:11  
**psychiatry** 63:24  
**psycho** 72:3  
**psychological** 42:2 60:20  
 63:24  
**psychologist** 63:20 76:16  
**psychology** 64:4  
**psychotherapy** 73:26  
 77:2  
**public** 8:15 42:26  
 44:7,31 45:6,22 83:14  
**publication**  
 79:14,22,23,34 80:4  
 82:4  
**publications** 79:14  
**publish** 79:27,28 80:1  
**published** 64:9 73:3  
 76:16 79:13,15 80:7  
**pubs** 86:11  
**pull** 56:14,22 71:18,21  
**pupil** 33:2 44:15,22  
 46:15  
**pupils** 41:20,26 42:7,27  
 43:13,34 44:4,29,34  
 45:2,5,16,20,28  
 46:3,5,8,21,30,31  
 47:22 48:21 51:13  
**purpose** 26:30 67:6  
**purposely** 42:25  
**purposes** 79:6  
**pursuing** 9:33 54:21  
**push** 20:3 56:14,21  
**pushed** 67:28 77:11  
**put** 4:7,20,21 5:12 7:33  
 14:10 29:14 41:15  
 53:33 56:25 67:16  
 74:14 76:8 78:15  
 79:20  
**putt** 71:8,22  
**putting** 1:11 3:27 5:4  
 6:14 67:23 72:25  
**Palacky** 9:7,27  
**Palsy** 46:6  
**Paralympic** 42:5  
 51:18,20 82:33  
**Park** 40:25,29  
**Parkin** 28:21  
**Pat** 10:33 12:33 13:2  
 14:30 15:21,33 16:8  
 30:17,19,20 39:28  
 82:34 83:25 84:31  
**Patricia** 64:3 71:4  
**Paul** 41:33  
**Paulo** 55:20,22,25  
 58:2,20,30  
**Pedro** 75:23 78:6,26  
 80:13  
**Perkins** 64:14 69:12  
**Peter** 19:27 29:27,32,33  
 33:14 37:5,8,20,24,30  
 39:24,33 40:7 63:14  
 76:16  
**PhD** 21:5 41:31 48:12  
 73:2 75:24 80:1  
 82:27  
**Photoshop** 67:21  
**Physical** 1:23,31 2:22  
 4:8,9,27,28 5:20  
 8:8,17,28  
 9:2,8,10,14,15,16,18,  
 19,24,26,27  
 10:12,19,21,22,26  
 11:15,19,25,27,32  
 12:7,17 13:12,33  
 14:10,19 15:28,31  
 16:3,25 19:10 20:13  
 22:6 26:18 29:24  
 41:20,27 42:2,7,19  
 43:10 45:10 46:30  
 47:10,28  
 48:4,11,15,17,21,25  
**Pilates** 73:14  
**Pistorius** 84:10  
**Plenary** 14:25 59:17,24  
**PLC** 31:4,8,32 33:34  
**Poland** 18:5 21:7 23:6  
 86:4  
**Polytechnic** 26:19  
**Porto** 42:27  
**Portugal** 41:32 42:11  
 47:26 48:10,29  
 52:1,3,10,19 54:3  
**Portuguese** 41:21,27  
 42:19,25 46:30,32  
 48:4,11,17 49:3,23  
 51:13,21,26,31,32  
 52:8,32  
**Pottery** 67:4 75:4,5  
**PowerPoint** 27:21  
**President** 2:12,17,18,20  
 3:1 8:10 11:14 14:12  
 15:2,22 20:21  
**Professor** 41:33  
**Pubis** 30:7  
**Q**  
**qualification** 30:11,12  
 38:5 40:5  
**qualifications** 29:21,28  
 30:3,12 31:9,31 32:20  
 33:12 35:12,28 36:27  
 37:20 39:20  
**qualified** 32:3  
**qualify** 36:19  
**qualitative** 21:27 64:23  
 65:4,15  
**quality** 9:8 13:33 17:22  
 48:34 49:8  
 50:15,17,31 51:2,5  
 63:15 79:2 80:15  
 84:29  
**quantities** 61:10  
**quarter** 62:19  
**question** 47:7,26 52:12  
 54:27 57:7 75:15,17  
 77:2,5,9  
**questions** 13:31  
 29:5,6,11 39:33 40:2  
 41:28,29 47:3,5,14,33  
 51:29 52:27 54:9,10  
 58:10 59:9 74:29,31  
 75:10,19  
**quicker** 27:15  
**quickly** 13:7,17 61:32  
 66:21 78:26  
**quite** 33:26,32 61:33  
 63:19 75:25  
**quote** 22:3 23:12  
**Quick** 25:1 30:17 86:9  
**R**  
**races** 77:14  
**radius** 33:7  
**raffle** 60:7  
**raise** 17:27 75:34  
**raised** 74:29  
**raising** 84:28  
**ran** 67:21  
**random** 66:19  
**randomised** 76:30  
**rang** 13:9  
**range** 5:34 9:10 10:14  
 19:9 30:8 31:31  
 33:32  
**ranges** 5:34  
**rank** 62:22  
**ranked** 28:26  
**rated** 77:1  
**rather** 29:5 63:33 66:31  
 71:2,3 77:16  
**ratio** 33:2 40:7  
**raw** 3:6  
**reach** 73:30  
**reaction** 25:22,31,34  
 26:10,13,24,33  
 27:1,3,16,26,27  
**read** 22:26 65:26 69:4  
 71:14  
**reading** 12:4 33:1  
**ready** 31:11 51:13 72:3

<b>real</b> 14:31 81:6,8 82:29,34 83:2,24 84:30 85:10,23 <b>realise</b> 6:11 32:19 37:17,31 48:7 69:7 <b>reality</b> 51:11 <b>really</b> 2:16 4:21 7:13 13:24 15:18,22,30 16:11 17:9 18:11 19:16 20:15 21:3 29:6 34:8,15,23,30,32 35:3 36:2,11,30 37:6,16 39:2 40:19 54:10,21 57:20,31 58:31 61:11,17,29 64:23 65:20 66:10,21 67:19 69:8 70:31 71:11 74:28 75:17 76:26 77:12,17 80:14,26,30 81:8, <b>reason</b> 18:17 29:11 30:25 68:22,29 74:14 <b>reasonably</b> 71:14 <b>rebel</b> 4:18 <b>rebuild</b> 64:1 <b>receive</b> 51:13 73:34 <b>received</b> 8:21 <b>receiver</b> 82:1 <b>receiving</b> 82:3 <b>recent</b> 32:12 42:12 63:30 <b>recently</b> 3:9,25 17:31 29:23 79:8,9 <b>reception</b> 27:2 60:3 <b>recession</b> 12:2 <b>recognised</b> 8:29 9:14 10:16 30:20,23 42:3 <b>recognises</b> 73:15 <b>recommends</b> 30:26 <b>reconfigured</b> 5:19 <b>reconstructions</b> 30:7 36:14 <b>record</b> 9:2 26:30 27:2 <b>recovered</b> 60:21 <b>recovering</b> 30:5,6 <b>recovery</b> 59:25 63:25,29,32,33 64:13 73:1,2,5 77:1 <b>recreate</b> 69:27 <b>recreating</b> 69:12 <b>recreation</b> 8:28 10:27 35:18 78:24 <b>recruit</b> 58:12 <b>red</b> 28:15 <b>reduced</b> 33:8 <b>redundant</b> 23:1 <b>refer</b> 40:15 <b>referee</b> 45:14 46:18 <b>refereed</b> 32:17 <b>refereing</b> 32:13 <b>reference</b> 52:32 77:16 82:17 83:17 <b>referred</b> 20:6,12 <b>referring</b> 75:23 <b>reflect</b> 11:28 <b>reflected</b> 68:18 <b>regarded</b> 38:12 <b>regarding</b> 27:10 42:15 44:22 48:24,26 49:7 51:9 80:30 82:6 <b>regardless</b> 12:6 <b>regards</b> 38:1 44:19 <b>regional</b> 16:31 18:4 <b>regionally</b> 40:32 <b>regions</b> 16:29,32 <b>register</b> 62:5 <b>registered</b> 45:9 86:4 <b>registration</b> 24:28,32 25:13 85:25 <b>regular</b> 41:20,26 42:34 46:30 49:19 52:13,23 <b>regularity</b> 66:30 <b>rehab</b> 30:25 40:4 42:2 <b>rehabilitation</b> 19:10 33:9 40:12 <b>reiterate</b> 22:30 <b>related</b> 35:17 42:26 43:18 48:33 50:27,31 79:16 81:11 83:19	<b>relates</b> 41:32 <b>relating</b> 25:13 <b>relation</b> 2:22 3:17 13:19,25 15:22 20:23 22:22,30 23:18 26:7 53:22 <b>relationship</b> 20:32 31:25 63:13 73:13,27 <b>relationships</b> 19:6 22:9 61:10 62:29 70:18 71:25 <b>relatively</b> 1:28 <b>relax</b> 37:27 72:26 <b>relay</b> 80:32 <b>reliance</b> 61:10 63:21 <b>remain</b> 48:21 <b>remains</b> 69:15 <b>remarkable</b> 3:32 <b>remember</b> 3:20 60:28 66:2,24 71:10 <b>remind</b> 25:5 28:1 75:12 79:32 <b>reminder</b> 86:9 <b>remission</b> 63:33 <b>repeated</b> 64:32 <b>replace</b> 37:23,24 <b>replacement</b> 6:8 <b>replies</b> 2:7 <b>report</b> 30:26 48:32 62:28 78:6 84:33 <b>reported</b> 44:12 45:3,23 49:14 <b>reports</b> 30:34 <b>represent</b> 10:11 46:16 <b>representation</b> 22:14 <b>representatives</b> 8:15 58:24 <b>represented</b> 1:8 30:28 <b>representing</b> 16:30 <b>represents</b> 49:13 <b>reputation</b> 3:4,17 <b>request</b> 75:17 <b>require</b> 32:9 63:32 <b>required</b> 19:32 30:30 31:10 33:3 61:34 <b>requirements</b> 1:15 <b>research</b> 1:11 5:16 9:34 14:4,6 17:7 19:10 21:3,4,6,15,25 29:7 41:33 42:22,26 44:32 46:24 48:13,20,24 54:21 59:25 60:19,23 62:12 63:12 64:19,20,23,28 65:20,29 70:12 73:19,26 74:3,7,23 75:6 76:29 79:5 80:1 81:3,7,8,11 82:7,25,27 83:18 <b>researcher</b> 70:18 75:24 <b>researchers</b> 63:14 73:14,16,20 75:7 76:7 <b>researches</b> 79:33 <b>reserved</b> 31:26 <b>residential</b> 9:10 <b>resilience</b> 62:32 <b>resist</b> 63:2 <b>resolve</b> 58:31 <b>resonance</b> 7:6 <b>resource</b> 9:17,23 20:14 33:1 40:8 <b>resources</b> 5:16 7:24 10:2 17:17 20:18 41:12 43:10 72:6 76:26 <b>respect</b> 3:32 24:6 46:15 50:13 66:12 <b>respond</b> 46:32 <b>response</b> 9:13 26:1 45:28 76:6 <b>responses</b> 34:12 <b>responsibility</b> 2:2 5:29 6:1 32:25 <b>responsible</b> 12:33 45:14,33 51:24 <b>rest</b> 5:8 24:8 74:30 <b>restricted</b> 34:32 <b>restructure</b> 51:26 <b>resubmission</b> 80:3	<b>result</b> 27:23 <b>resulting</b> 44:9 62:29 <b>results</b> 27:5,10,15,18,23 28:9 49:23,27 50:5,15,17,26,34 54:6 58:1 77:14 <b>retain</b> 65:24 <b>retrospectively</b> 73:2 <b>return</b> 66:2 68:24,25 70:11 72:13 <b>returning</b> 69:27 <b>revealed</b> 49:32 50:8 <b>reveals</b> 44:23 50:14 <b>reverse</b> 45:28 <b>review</b> 79:1,32 80:2 <b>reviewers</b> 80:14 <b>reviewing</b> 78:34 <b>rheumatoid</b> 33:27 34:5 <b>rich</b> 11:5 <b>right</b> 1:29 6:24 12:23 15:15 16:32 39:19 40:15,20 56:25 57:24,28,32 61:33 67:22 71:18 73:4 75:14 <b>rigid</b> 12:23 <b>risk</b> 3:28 <b>roimnh</b> 11:17 <b>role</b> 10:20 40:13 42:11 46:17 48:25 72:19 <b>roles</b> 43:15,30 45:21 46:16 <b>roll</b> 10:2 <b>room</b> 14:10 18:11 71:16 75:14 <b>rooms</b> 12:24 <b>roots</b> 42:5 <b>roster</b> 31:15 <b>rosy</b> 70:11 <b>round</b> 77:21 <b>rounded</b> 30:11 35:29 <b>routines</b> 46:11 <b>rowing</b> 75:26 <b>royal</b> 61:7 83:10 <b>rugby</b> 34:2 <b>rule</b> 44:13 <b>rules</b> 43:29 45:8,13 <b>run</b> 9:5 32:9 38:17 39:7 40:28 67:5 69:23 70:14 72:15 75:34 76:9 84:10 <b>runner</b> 69:20,24,25 <b>running</b> 31:9 36:22,27 40:24 54:22 69:20,30,31,33 76:6 77:6,12,13 85:1 <b>runs</b> 13:9,11 32:14 <b>rush</b> 24:19 31:19 37:27 <b>Rachel</b> 64:14 <b>Rajeev</b> 28:26 <b>Raymond</b> 10:33 <b>Recreational</b> 10:13 38:5 <b>Reef</b> 33:32 34:1 <b>Repper</b> 64:13 69:12 <b>Represa</b> 55:23 <b>Republic</b> 9:7 11:31,33 86:4 <b>REY</b> 25:22,25 <b>Ricardo</b> 45:5,16 <b>Richard</b> 63:20 <b>Rizzo</b> 49:5,15 50:28 <b>Romania</b> 23:21 <b>Roslin</b> 40:24,29 <b>S</b> <b>sad</b> 71:18 <b>sadness</b> 62:33 <b>said</b> 7:3,4 13:14 15:19,34 19:4 31:19 33:18,27,34 34:5,18,21,33 35:7 36:17 37:6,14,20,24,30 40:7 44:17 49:33 50:29 57:11 66:20 67:28 68:12,14 69:28 70:25,30 71:8,25 76:17 81:7 86:15 <b>sail</b> 55:25 56:12,18 57:12	<b>sailing</b> 54:14,20 55:11,16,19,28 56:21,24 57:1,4,5,6,7,8,9,11,13 24 58:27 59:16 <b>sailor</b> 55:11 <b>sales</b> 33:26,33 <b>salute</b> 3:32 <b>same</b> 5:10 20:30 37:2 43:13 50:29 52:2,6 55:34 56:1,25,33 65:32 71:26 82:13,16 83:18,27 84:7,16 <b>sample</b> 26:11,26 <b>samples</b> 27:7 <b>sat</b> 70:26 <b>satisfactory</b> 76:34 <b>satisfiable</b> 73:6,7 <b>satisfied</b> 73:9 <b>saw</b> 7:21 39:25 50:26 55:9 59:1 66:17,20 68:18 70:20 <b>say</b> 5:4 6:21,29,32 9:5 13:10 15:13 16:7 20:21 22:4,17,25 23:1,32 24:4 36:21 37:25,27,33 40:23 50:9 52:4 53:3 54:22 62:14 64:7,11 67:5,24 68:22,29,33 69:33 74:14 76:14,20,21 80:24 81:17 82:16 83:4,21,26 <b>saying</b> 2:7 5:1,8 6:30 7:13,15 18:19 22:25 23:13 31:1 39:16 66:32 68:8 73:3 <b>says</b> 7:2 <b>scales</b> 49:15 <b>scar</b> 66:7 <b>scenarios</b> 34:13 <b>schedule</b> 11:11 <b>scheme</b> 43:20 46:24 <b>schizophrenia</b> 63:12,15 64:3 69:20 76:17 <b>scholarship</b> 85:24 <b>school</b> 16:3,4 30:32 32:13 42:26 44:31 45:6,33 48:16 51:17,19,20 52:5,14,20,29 53:1 54:19 55:2,11 58:14,16,19,20 60:28 61:7,9,15 66:15 <b>schools</b> 17:25 21:23 32:15 42:16 44:7,31 45:22 48:5,12,18,22,33 49:3 51:21 52:1,5,12,23,30,31,32 33 53:15,18,19 58:19,22 <b>schoolteacher</b> 60:17 <b>science</b> 11:28 12:17 26:19 36:20 48:15 65:20 81:11,18 83:14 <b>sciences</b> 47:27 74:8 <b>scientific</b> 12:17,22 25:2 79:6,33 81:29 82:22 83:9 <b>scientist</b> 81:9 <b>scores</b> 50:4 <b>screen</b> 15:10 17:21 66:21 <b>screening</b> 17:23 <b>script</b> 70:21 <b>sea</b> 55:19 <b>searched</b> 79:24 <b>searches</b> 67:21 <b>searching</b> 44:7 <b>second</b> 33:30 40:3 49:19 54:16,19 56:24,31 60:17 69:11 71:7 72:7 79:27 80:3 <b>secondary</b> 61:9 <b>secretary</b> 84:33 <b>section</b> 75:31 <b>sector</b> 29:21,28 30:27 39:20	<b>secure</b> 61:30 <b>secured</b> 9:22 <b>securing</b> 17:17 <b>security</b> 72:20 <b>see</b> 2:26,30 4:6,7 6:33 7:1 12:5,13 15:24 16:7 17:20 19:3,12,24,27,31 20:14 21:3,7,28,31 22:21 25:17 27:21,23,33,34 28:12,19 29:7 31:5 32:14,30 37:27 50:3 53:16 54:6 56:17,33 57:9 65:27 66:20 69:3,24 75:15 76:24,33 80:19 81:1 83:7,11,24,30 84:16,25 85:2,28 <b>seeing</b> 3:13 28:12 <b>seeking</b> 10:2,17 39:16 <b>seem</b> 62:24 <b>seemed</b> 18:20 70:13 <b>seen</b> 68:8 72:6 77:10 <b>sees</b> 71:21 <b>segregated</b> 21:17 22:19 <b>select</b> 25:34 42:26 <b>selected</b> 42:33 80:21 <b>selection</b> 80:26 <b>self</b> 21:34 23:33 31:16 34:30,32 50:10 61:3,10 64:1 69:13,15 70:14 72:4 <b>send</b> 80:3 <b>sending</b> 7:20 <b>senior</b> 24:16 <b>sense</b> 39:25 61:10 63:34 64:1 65:23 68:12,31 69:13 70:9,19 71:15,17 <b>sensibilise</b> 82:12 <b>sensory</b> 5:20 26:3,4 <b>sent</b> 85:6 <b>separate</b> 6:9,10 <b>separated</b> 45:24 <b>serious</b> 4:31 44:5,15 63:32 <b>seriously</b> 65:10 <b>serves</b> 69:5 <b>service</b> 5:26 10:28 53:22 76:15 <b>services</b> 10:13 15:23 38:18 39:4 42:28 66:28 67:12 68:26,34 71:19 <b>session</b> 1:17 14:25 24:25 25:10,12,25 32:27 35:27 36:8 39:8,10 41:28 47:33 54:16 59:17,24 67:20 78:1,4 <b>sessions</b> 19:17,18 20:9 24:22,23 25:1,8,14,17 32:9 36:13,22,23 39:9 44:6 45:3,24 59:30 64:33 76:4 <b>set</b> 5:4 36:32 39:2 40:27 41:2,3 42:6 47:9 <b>sets</b> 44:6 <b>setting</b> 9:10 39:17 42:26 58:23 67:30 84:6 <b>settings</b> 43:33 45:6 46:31 73:31 80:30 81:5 <b>settle</b> 61:29 <b>settled</b> 33:26 <b>severe</b> 44:22 64:24,25 71:4,17 <b>sewn</b> 66:8 <b>shadow</b> 76:17 <b>shamed</b> 22:25 <b>shape</b> 1:24 63:11 <b>share</b> 1:8 12:13 13:10,11,13 19:12 60:23 68:11 71:34 72:7 74:24 75:19 84:18 86:10 <b>shared</b> 70:20 71:32 72:5 <b>sharing</b> 13:11 71:25 78:9 <b>sharp</b> 24:22	<b>shattered</b> 61:15 <b>shattering</b> 64:5 <b>she'll</b> 40:15 41:29 48:10,12 <b>she</b> 1:30 3:20,21,24,32,33 7:1,2,8 13:10,21 15:2,4,7,28,33,34 17:11 28:31 33:30 34:7 40:12,14,17,19 44:16,26 45:22,24,33 46:2,5,8,11 48:12 57:8 64:4 66:2 67:3 68:13 75:29,34 76:4 <b>sheet</b> 25:13 26:30 56:14,17,21 <b>shift</b> 42:15 43:4 <b>shines</b> 2:11 <b>shining</b> 75:6,7 <b>ship</b> 56:33 <b>shirt</b> 28:7 <b>shock</b> 61:9 <b>shone</b> 61:11 <b>short</b> 1:28 16:24 18:8,25 23:17,18 40:2 44:1 61:7 78:4 84:33 85:1,27,34 <b>shot</b> 28:12 71:10 <b>should</b> 4:1,16 6:2,3,4 7:13,16,17,22,24 12:27 51:26 60:10 64:7,11 76:12,14 84:31 <b>shouldn't</b> 6:4 <b>shouted</b> 61:14 <b>show</b> 18:8,10 21:28 22:30 23:17,18 49:23,27 50:17 56:13,17,18 <b>showed</b> 33:21 <b>showing</b> 16:34 49:29 <b>shown</b> 50:23 63:17 <b>shows</b> 12:7 22:27 27:33 72:10 <b>side</b> 3:9 22:6 29:33 36:24 56:25,26,34 57:1,24,26,28,29 69:21 71:32 <b>sight</b> 6:7 <b>sign</b> 24:28,30,32 56:4,5 <b>signal</b> 56:5 <b>signals</b> 56:6 <b>signed</b> 20:28 <b>significance</b> 2:27 <b>significant</b> 6:15 13:18,19 27:7,14,20 29:8 33:8 42:15 47:23 50:3,8,13 51:1 <b>significantly</b> 50:9 <b>signing</b> 21:8 <b>signs</b> 57:21,22 <b>similar</b> 46:34 73:28 81:2 83:31 <b>similarities</b> 65:32 <b>simple</b> 20:17 <b>simply</b> 1:21 <b>since</b> 9:4 12:34 13:25 18:9 25:34 30:15 34:2 37:11 38:29 43:23 46:31 52:12,32 85:2,8 <b>single</b> 12:27 24:5 65:30 73:12,17,26 77:10 <b>sit</b> 38:24 <b>site</b> 5:20 <b>sitting</b> 1:18 86:16 <b>situation</b> 27:31 34:24 35:12 <b>six</b> 17:32 38:9 40:8 42:25 49:19 58:22 71:8 79:14,30 <b>sixth</b> 61:14 <b>skill</b> 36:32 <b>skills</b> 1:14 17:13 21:19,32,33 23:32 32:21 33:3 35:12 37:17 39:16 45:34 <b>sky</b> 7:14 <b>sleep</b> 26:33
---	---	---	--	---	---

slept 26:23	21:2,16,17,19 22:32	35:18 41:23,24 53:15	striving 22:31	supply 72:4	Strauss 42:31,32
slide 19:25 20:14 43:20	23:2 32:27 45:10	57:11,24 58:27,28	strong 1:28 30:22 63:27	support 1:21 3:10,11,33	Structured 42:30 44:1
slightly 31:4,31	46:9,21 51:25 53:4,7	60:28 61:32 64:15	stronger 19:13 68:19	4:14 8:4,21 34:6,18	Studies 16:22 26:3,7
slow 35:8	58:14 80:18	67:28,30 68:23 71:23	strongly 38:23 50:26	35:10 36:2 37:15,32	34:20 35:29 48:29
slowly 85:34	specialised 38:30 45:10	72:25 74:3,12	struck 71:27	38:17,18 43:4,11,30	49:14 50:5,15,24
small 3:6 17:6 18:20	54:33 55:5	77:10,29 82:3 85:16	struggled 67:19	44:7,31 45:9,34 52:29	63:11,13 69:4 81:18
24:19 25:13 33:2	specialism 9:33	started 7:2 12:34 13:10	struggling 66:29	65:10 67:14 71:28	Sunday 1:1 2:7 61:5
35:3 44:13 45:8,12,17	specialist 9:13 15:28	15:28 16:26 21:1	stuck 67:16	73:33 77:18 79:19	Surely 5:24 7:15,16,17
46:2,11 56:13	42:16	31:21,33 38:2,29	student's 33:14	83:9 84:25 85:13,24	Susan 13:8 15:27,28,33
75:1,26,34	specialists 5:26 15:29	42:11 54:32	student 16:2 27:6 29:33	supported 9:16 30:32	16:9
smaller 35:4	specific 19:32 44:7	55:3,5,8,30 57:11	37:5 38:30 41:31	35:4 72:20 81:19	Sweden 86:3,5
smiles 32:30	45:13,34 51:7 57:16	58:29 59:27 60:32	45:16,23,25,34 48:26	supporter 1:28 8:8	Swim 35:25,27 36:12,27
smoking 71:5	73:13 75:20	61:2 68:15,21 69:28	49:19,23 53:17 61:33	13:21,23	38:3,5,6,9
smoothly 33:26,34	specifically 31:27 45:23	78:29 85:19	students 9:6 13:10,12	supporting 17:9	<b>T</b>
snippet 21:28	46:25 58:22	starting 25:28 27:30	16:4 21:5,23 26:18	supportive 34:34 67:10	table 1:18
soccer 1:18 32:17 35:34	spectacular 2:13 3:22	31:27 57:12	30:8 31:5,10,23,27	supports 5:5 30:30	tables 44:1
38:25 52:9	speculated 42:12	starts 2:7 6:14 25:10	32:12,15,16,23,25,27,	31:2,14 32:34 37:20	tablets 70:6 76:25,29
social 4:26 22:6,12,22	speech 13:5,17,18 36:8	37:23,24 57:11 71:34	28 37:8,9	39:16,19 40:7 41:2	tack 57:16,18
32:21 38:20 41:32	59:13 84:11	72:1	38:2,9,10,19,25,29,33	suppose 30:19 31:4	tackle 19:19
42:6 63:10 64:1	speed 56:32	state 2:1 62:28 72:32	39:2,15 40:8,13,16	32:34 40:12 69:33	take 5:12,18 11:1,4 14:25
65:20 71:33 72:17	spend 4:13 31:12,16	statement 44:17,22	42:15,33 43:17 44:9	sure 11:4 14:12 23:28	15:21 21:13,26 22:5
77:11,13,14	61:28	statements 14:3 44:1	45:23 46:3	24:13 34:34 37:6	24:6,30 26:23 29:5,11
socially 21:34	spending 32:21	statistical 27:7,10 74:9	48:4,11,18,34	39:34 40:29 63:27	37:21,32 39:34 41:29
society's 72:26	spent 37:11	statistics 27:6	49:8,18,20,28,33,34	68:34 72:15 74:28,29	43:8 61:11,22
society 16:18 21:20	spiritual 62:32	stay 4:31 11:4 15:14	50:11,13,23,34	surf 24:31 36:6 59:34	65:10,16 68:13,14,23
22:21 23:2 24:6	spite 50:33	16:15 24:8 72:16,23	51:9,10	surfing 74:4 84:30	74:29 76:7,11,14
75:31	spoke 15:21,22,27 16:17	77:30	52:1,12,13,15,24,31,3	surgeon 62:28 66:7	78:30 80:32 81:33
sociologist 65:15	spoken 20:33 70:21	stayed 33:26 80:19	3 53:24,29,33,	surgical 66:6	82:16
sole 33:30	sponsor 58:34 82:20	steering 56:24	studied 26:15 58:24	surprise 71:17	taken 4:21 5:21 37:7
solitary 62:13	sponsors 82:30 83:25	step 21:10,22 22:32	study 21:26,27 22:3	surprised 29:7 71:17	65:4 76:5
solutions 19:19 46:33	sporadically 45:25	56:13,24,31 57:31	23:12 25:22 26:9,18	surprising 69:5	takes 33:11 61:10 70:6
some 3:26 6:2,9,21 8:31	sport 3:4,11,13 4:19 6:29	79:2,30	35:14 38:30 42:18,26	survey 49:4,14,18	taking 3:27 11:10 37:8
14:25,26 15:34 17:20	8:28 9:14,18	stepping 65:19 68:11,28	46:24 48:11,26,32	surveys 68:33	39:15,16 52:25 64:34
19:22 20:2,12,32	10:14,21,26 19:30,32	69:3,5	49:3,7 50:4,29 51:24	survive 62:33 69:16	65:1,15 86:1
21:3,5,6,13,28	20:28 21:15 22:6,22	steps 56:12	52:3	survivor 64:3,13 74:13	talent 5:23 12:7,28
22:10,18 23:26 25:1	23:12,34 25:26,32	stereotypes 23:6	studying 75:24	survivors 63:28 64:14	talented 5:24 12:5
26:3 28:19 29:9,11	26:16,31 28:19	stick 60:10	stuff 61:22 70:25,34 71:3	suspicious 11:22	talents 12:28
31:23,33 32:13,15	29:21,25,28 30:3,22	stigmatised 75:31	83:6	sustain 69:8 74:1	talk 2:26 6:4,19,25
37:17,30 38:1	34:1,3,12 35:18 39:20	stigmatising 75:32	style 62:1	swimmer 28:21	12:13,17 14:33 15:7
41:10,13 42:23 48:24	41:31 42:1,6,8 44:31	still 2:27 13:11 16:15	sub 43:24 49:15	swimming 4:17 23:33	19:3,9 21:13 22:4
49:32 50:26 51:20	45:26,33 46:26,27	22:11,17,22 24:17	subcategories 43:5	35:24,30 60:32,33	23:32 33:14 40:14
52:1,3,20,23,27,29,34	55:12,13 60:21 61:20	30:28 34:29 62:5	subject 12:34 19:9 27:2	61:17	53:15 59:6,11 62:10
53:8,16,18,19,27,28,2	64:10 67:3,30 68:8	67:12 68:20 77:13	53:9 70:6 83:15	swung 71:10	71:1,27 73:1 76:25
9,33,34 54:4 55:22	69:12 70:32 71:32	stimulate 25:28	subjects 47:28,30,31	symposium 9:8 86:6	77:13 78:7 83:5
56:5,6	72:	stimuli 27:10,26,30	53:7,8,23,24,25	symptom 67:25	84:12
somebody 23:28	sporting 10:13 14:17	stimulus 26:1,10,14	submission 79:13	symptoms 63:33 64:14	talked 20:6 35:9 69:12
37:22,23,24 39:12	29:20,23,28,32,33	stoking 72:18	submissions 78:33	syndrome 44:5,30	73:33 77:10
someone's 66:7	30:2 31:28 33:19,24	stone 68:11,28 69:3,5,22	79:24,29 80:6,15	45:16,34 46:6	talking 5:23 15:25,33
someone 3:25 4:2 7:3	35:27,32 36:5,19,30	71:23	submit 80:10	55:5,8,9	18:11 20:9 23:6
13:13,19 58:34 71:21	37:7 39:30 40:3,22	stood 3:25	submitted 10:24 78:16	system 25:28 27:30 28:3	25:14 32:16,19,21
76:25 77:12	60:1	stop 22:26 28:31 41:28	79:22	52:30 61:9 78:33	36:6 57:7 64:32 74:8
something 6:2 15:25	sports 1:23 3:5 4:14	76:20	substance 26:24,33	79:13 85:9,23,24	76:30 81:5
19:3,5 20:16 21:16	9:16,27 10:11 11:28	stopped 57:7,8,9	substances 26:23	Sampedro 25:32	talks 7:6 12:2 14:16
39:5,8,9 41:11	14:18 17:3,20	stories 59:25 64:31	suburbs 42:27	Santas 81:19	24:23 48:17 65:15
55:12,13,16 59:3	19:10,27,28,29	65:5,11,15,16,18	success 9:32 18:15 67:14	Sao 55:20,22,25	71:4
61:33 62:4 63:6	20:29,31 21:16,32	70:20	71:15	58:2,20,30	tantrum 61:3
64:26 67:17,32,33	22:10,11,12,21,31,32	71:1,4,22,27,28,32,33	successful 3:26 9:3,26	Sarah 68:13	tap 60:32 61:2
68:7,11,27	23:29 25:23	,34 72:4,7,9,10	18:21 19:34 21:22,24	Sean 2:34 17:15,17	tapping 69:1
70:7,27,28,31	26:19,20,21,31 27:21	74:13,24 76:1	24:9 62:28	24:16,17	targets 39:3
71:1,22,27,34 76:8,33	28:15,19 30:27 32:9	story 15:33 23:27 24:3	such 2:26 4:14 9:3 12:15	Semi 42:30	task 15:4 46:18 68:27
80:28,29 81:2 82:9	34:1 35:19,21 36:28	60:28 62:8	30:6 42:5 43:29 44:6	Sena 41:19	tasks 45:13
83:12 84:5,7 85:27	38:5 42:3 47:27	65:14,18,19,23,25,26	45:2,3 48:33 51:20	September 31:9 37:22	taught 45:20,32 46:20
somewhere 77:34	48:15 51:18 54:32	66:2,14 68:3,4,5	63:15 70:32 74:4	Serbia 22:3	tea 64:33
soon 42:2 66:17	61:22 71:32 77:5	70:20 71:7,31,34	86:3	Several 1:22 65:16 67:11	teach 11:32 39:10
sorry 27:8 54:27 55:2	81:9,18 82:13 83:14	72:5,13	suffering 34:29	68:26 69:21 73:1	49:20,24 53:11
74:17 80:22 83:25	spotted 38:6	storytelling 65:23 68:3	sufficient 26:10	Shirley 54:32 58:7	teacher's 48:20,24,25
sort 19:6 34:1 36:31	spread 20:23 71:23	straight 15:19	suggest 62:21 63:11,13	Shriver 21:8	50:10
40:19 61:20 62:19	79:33 82:8 83:26	straightaway 31:12	64:15 68:7 69:27	Similarly 20:29	teacher 16:26 33:1,2
63:19 70:11	85:31	37:12	71:1,31 73:6,26	Sir 42:1	35:28 36:12,27 40:8
sorts 7:13 65:10 66:28	square 22:4	strain 67:16	suggested 63:24 67:17	Smith's 34:14	41:31 43:30 44:8,25
69:3,4 71:22 73:1,28	stable 72:23	straitjacket 72:26	68:13,20 72:3 75:29	SMITH 14:16 19:27	45:21 46:21 48:33
sound 27:30	stadium 83:25	strand 70:15	suggesting 73:20	29:17,19,27,31 37:5	50:33 51:14,23
sounds 66:15	stadiums 3:7	strands 20:12 65:16	suggestions 73:20	40:6,23,28 41:9	52:19,20 60:33 67:33
source 36:1	staff 17:5 23:31 34:34	strapped 23:17	suggests 44:17 62:18	Sometimes 3:31 5:30	73:14
south 15:5,15	40:4 52:21	strategic 9:13	63:9 64:5	6:23 21:17 22:28	teachers 9:23,29 14:22
space 5:10,12 7:29	stage 14:12 33:14 41:13	strategies 41:20,27 42:33	suicidal 66:22	44:21 52:19,21 65:1	17:2 41:21,27
56:13,14,15	59:34 86:3	43:3,4,7,9,10,14,17,2	suit 24:23	73:16 81:7 83:21	42:19,25,33 43:32
speak 13:23 25:31 29:34	stand 3:30,31,32	6,28,29,30,33	suitable 31:19	SOTO 25:22,25	44:1,32 46:32,34
41:26,28 56:5,10	standardise 76:31	44:7,9,18,21,31,32	suited 76:4	Spain 3:20 9:30 78:2	47:8,9,10,11,16,17,20
74:25	standardised 76:30	45:2,7,9,12,22	suits 72:29 77:18	82:32 83:18,20	,28 49:3,23,28,32
speakers 3:16 15:13	standing 3:27 7:3,4	46:12,13,15 51:7	summarise 36:30	85:30,31	50:5,9,14,22
84:10	81:14	53:28	summary 33:19 34:11	Spanish 26:21	51:8,13,25,32
speaking 1:21 15:27	stands 14:34 25:5 75:13	strategy 44:12 45:28	summer 15:4 76:1	Spectrum 36:7 46:26	52:2,5,18,34
17:16 21:12 24:16	77:25	stream 34:21	sun 2:11 48:8	Spina 36:14	53:11,15,22,27,29
special 3:20,21 10:33	stars 28:19	street 57:23,26	sunny 86:15	SPEAKER 11:13 14:31	54:6 61:11 83:13
13:9,23 15:2,3,18,30	start 1:29 4:18 5:34 6:14	strength 68:19,27	sunshine 48:7	41:5 54:29 59:11	teachers' 42:30
16:4,29 17:3,9,26,30	13:7 21:1 24:14,22	stress 33:12	super 27:1,3	SPSS 27:7	teaches 45:16 61:10
18:3,22 20:30	25:12,17,31 33:24	stretching 16:34 39:8	supervision 41:33	States 58:22,23,25 79:25	

<b>teaching</b> 1:17 2:22 9:23 10:13 13:7 14:4,6 25:26 34:13 38:3,5,6 42:18 43:33 46:21 47:22 48:34 49:5,8,18 50:13,34 51:9,10	6,20,23,31 5:1,4,5,6,8,10,12,16,1 7,18,19,20,24,25,26,3 4 6:2,3,11,14,16,24,28, 30 7:4,6,12,14,16,24,27, 28,30,34 8:23,31 9:29 11:1,2,20,22,32,34 12:5,6,7,14,18,28,29 13:10,18,1	19:25,26,28,31,34 20:6,7,21:7,27,31 22:3,17,18,19 23:1,12,15,28,30 24:25,31 25:34 27:14,20 28:19 30:20,21,23,27 31:15,20 32:14,24,31 33:27,32 34:2,7,18,19,21,34 35:1,7,8,16	10:2,11,14,17,27,29,3 2 11:1,14,25 12:2,12,21,29 13:18,31 14:10,30 15:24 16:1,9 17:11 18:21,25 19:16,22 23:19 24:14 25:32,34 27:10,21,31,33 28:15,33 29:32 32:27 34:1 4:2,27 3:5,6,7,30,31 4:10,12,13,23 5:18 6:3,8 7:12,25,28 9:6 10:29,32 14:26 16:11 17:10,20 18:11 20:15 23:8 24:34 25:8 31:23 33:33 34:13 36:1,2 39:31 43:18 48:8 53:3,11 59:13 62:1 66:34 70:25 71:22,32 72:9,18,23 73:6,34 76:4,31 77:9 18 85:6,12,13, 16:15 22:17 23:29 24:31 25:16 61:27 69:24,28 71:9,11 72:19 73:19 74:15 11:1 75:1,2 76:13,14 77:1,2 78:13 79:1,2 80:1,2 81:1,2 82:1,2 83:1,2 84:1,2 85:1,2 86:1,2 87:1,2 88:1,2 89:1,2 90:1,2 91:1,2 92:1,2 93:1,2 94:1,2 95:1,2 96:1,2 97:1,2 98:1,2 99:1,2 100:1,2	21:24 22:13 23:22 29:14 41:15 44:8 66:11 71:33 81:10 82:20,29 83:2 <b>told</b> 39:4 57:8 62:4 <b>tomorrow</b> 24:16 <b>tonight's</b> 59:34 <b>tonight</b> 24:30 <b>too</b> 1:30 11:29 13:14 24:16,30 41:2 47:12 56:8 58:8 62:25 65:34 67:3,4 68:5 69:16 72:33 81:29 84:1 <b>took</b> 61:2 72:31 <b>tool</b> 34:11,12 <b>top</b> 69:30 <b>touch</b> 57:21 <b>touched</b> 36:11 <b>tough</b> 12:2 14:24 <b>tour</b> 78:23 <b>tourism</b> 33:31 <b>tourist</b> 1:23 <b>towards</b> 10:25 21:22 22:20 31:22 35:3 48:4,11,16,17,21,25,3 2 49:5,9,30 50:5,33 51:4,10 63:13 <b>town</b> 13:24 22:4 36:23 <b>towns</b> 3:7 <b>track</b> 9:2 84:10 <b>traditional</b> 60:2,29 65:15,20 <b>trail</b> 15:22 <b>train</b> 62:1 <b>trained</b> 58:24 <b>trainers</b> 20:18 <b>transcripts</b> 68:12 <b>transfer</b> 9:24 <b>transform</b> 8:26 <b>transition</b> 74:1 <b>translating</b> 83:31 <b>translator</b> 28:22 <b>transport</b> 33:5 40:32 41:1 58:34 <b>transportation</b> 58:29 <b>trap</b> 73:16 <b>travel</b> 40:18 <b>travelling</b> 33:25 <b>treadmill</b> 75:27 <b>treating</b> 63:22 <b>treatment</b> 76:22,27 <b>tremendous</b> 5:15 12:28 17:17 <b>tremendously</b> 12:15 <b>trials</b> 76:30 <b>triangle</b> 81:22 <b>tribute</b> 34:7 <b>tried</b> 59:6 75:29 84:24 <b>true</b> 5:23 <b>truly</b> 16:18 18:15 <b>truth</b> 65:30 <b>try</b> 14:26 18:19,20 20:26 23:19 40:19 54:5,25 65:10,22,23,24 70:19 71:10 76:8 80:32 81:6 82:7,12,16 83:12 84:3 <b>trying</b> 16:10 18:19 40:29 41:1 52:3,5,31 53:17 54:30 69:15 71:14 73:16 77:18 78:1,14 81:8,23,27,28 82:7 84:25 86:2 <b>turn</b> 6:23 11:2 15:29 68:3,4 <b>turns</b> 57:1 <b>twice</b> 32:8 <b>two</b> 6:30 7:9 9:24 12:17,18 14:3 17:32 23:18,21 29:19 30:10 31:8,20,22,26 33:26 34:33 37:9,10,25 38:14 40:6 41:15 43:2,3 44:6 45:16 47:27,31 51:24 52:15 53:23,24 55:30 57:16 59:13 61:17 62:3	63:1 67:18 77:28,29 79:14,20,23 80:24,32 82:21 85:6,7,16 86:17 <b>type</b> 3:6 5:17 7:14 26:16 34:13 39:31 42:27,33 43:32,33 47:20 71:7 73:27 <b>types</b> 23:11 45:22 70:5,20 75:26 <b>typical</b> 54:3 <b>typically</b> 73:30 <b>Tamika</b> 28:31 <b>Tánaiste</b> 5:30 <b>Technology</b> 2:12,21 4:7 6:34 7:7,9,10 8:7,26 9:16 30:28 81:18 <b>Terrence</b> 13:8 28:21 <b>Terry</b> 49:5 <b>Thomas</b> 36:8 74:34 75:1 <b>Timothy</b> 21:8 <b>Tomas</b> 60:11 <b>Tony</b> 81:29 86:1,2 <b>Total</b> 22:31 64:28 <b>Totally</b> 21:19 22:28,32 23:1 24:27 57:8,9 <b>Towers</b> 66:20 <b>Training</b> 4:7,8 9:23,24 10:7 13:1 15:23 18:2 19:32 20:2,4,6,13,14,18 21:4 30:25 38:30 45:6,17,18 47:8,9,21 49:1,24 50:8 51:1,7,14,23 53:30 78:24 80:29 82:28 <b>Tralee</b> 1:24 2:13,20 4:7 8:7,10,26 9:15,19,26,33 13:21,27 20:8 29:23 30:19 31:25 33:25 34:21 36:13,20,28 37:10 38:16 78:14,15 81:30 83:32 84:5 <b>Treatments</b> 63:21 <b>Trust</b> 23:14 72:15 <b>Tudela</b> 26:1 <b>Tuesday</b> 74:30 <b>Twin</b> 66:20 <b>U</b> <b>ultimate</b> 21:19 <b>ultimately</b> 22:31 68:29 <b>unable</b> 44:26 <b>unbeatable</b> 6:29 <b>undeniable</b> 36:11 <b>under</b> 21:26 30:28 31:10 41:33 67:16 78:16 86:1 <b>undergrad</b> 52:23 <b>undergraduate</b> 9:5,23 47:27 <b>undergraduates</b> 47:31 <b>underlying</b> 64:9 <b>underpinned</b> 42:23 <b>understand</b> 57:13 64:10 65:6 68:24 <b>understanding</b> 13:20 34:31 46:30 65:33 76:15 <b>understands</b> 57:31,32 <b>understood</b> 35:10 <b>undertake</b> 53:21 <b>undertaken</b> 22:4 <b>undertaking</b> 21:3 <b>undertook</b> 47:10 <b>uneven</b> 5:5 <b>unfortunately</b> 4:12 47:23 52:1 85:4 <b>unified</b> 10:25 21:15,16,22,32 22:10,11,12,21,22,25, 30,32 23:8,14,15,18,21,26 <b>unimaginable</b> 7:21,24 8:1 <b>unique</b> 1:8 32:5 38:16 73:15 81:9 <b>unit</b> 32:8 38:17 71:2 <b>universal</b> 10:12
---	---	--	---	--	---

**universities** 12:6 21:10  
 51:26 54:4 83:11  
**university** 9:7,28 10:20  
 16:22  
 21:2,5,6,8,11,12,26  
 26:19 41:32 48:16  
 52:23,33  
 53:15,21,23,24,25,28,  
 29,32 54:3,5 60:19  
 61:29 73:3 81:19  
 83:13  
**unless** 6:24 26:24 61:20  
**unnecessary** 56:5  
**unravelling** 66:21  
**unsuccessful** 3:26  
**until** 16:18 24:16 29:5  
 34:6 61:8 75:13 86:4  
**unusual** 72:14  
**unusually** 48:7  
**update** 82:13  
**upon** 42:22,31  
**ups** 34:30  
**uptake** 73:31  
**urgency** 16:16  
**use** 11:2 19:20 20:1 30:2  
 38:16 53:33  
 56:4,8,14,17,24 58:17  
 62:5 68:33 82:12  
**used** 9:30 11:22 14:5  
 22:26 26:13,30 27:1  
 28:21 43:23,34 44:8  
 49:4,15 56:5 61:28  
 68:18 69:31 70:18,19  
**useful** 19:31 23:13 60:11  
 64:22 73:22,24 74:21  
**user's** 76:15  
**users** 10:29 63:28  
**using** 21:2 44:31 45:12  
 49:14,15 56:21 68:31  
 69:1 75:29 76:20  
 78:33 82:25  
**usually** 2:7 64:31 79:28  
 86:9  
**UEFA** 20:27  
**Ulster** 21:2,11,26  
**Una** 34:17 36:1,34 40:7  
**Union** 9:25 62:18 79:16  
**United** 79:25  
**UNESCO** 9:7 10:24,30  
 78:15  
**Ursula** 10:33 78:1 80:27  
**Usher** 55:8  
**V**  
**valid** 65:30,31,33  
**validity** 65:33  
**valuable** 3:31  
**value** 3:27,30 77:18  
**valued** 66:11 69:28 77:2  
 79:6  
**values** 49:13,14 50:9  
**variable** 47:19,21,23  
**variables** 27:6 48:33  
 49:7,9 50:3,4,9,31  
**varied** 42:27  
**variety** 36:15 45:5,20  
 64:23 65:4  
**various** 25:1  
**vary** 47:17  
**vehicle** 68:11,28 69:3  
**version** 27:7  
**very** 2:28 5:5,23  
 6:2,7,17,19,27 8:2,9  
 12:5,23,30  
 13:4,7,14,17,19 14:28  
 15:9,18 16:24  
 17:11,14,21,33  
 18:8,11 19:4,11  
 21:1,3,22,27  
 22:1,12,19 23:11  
 24:8,9 25:17  
 28:28,33,34 29:8  
 30:2,13,28 31:5,21,25  
 32:7 33:2,24 34:31  
 35:29 36:24 37:26,30  
 38:25 39:3,4,5,20  
**view** 7:13,14,27,28 28:1  
 33:15 55:26 61:15  
 67:27 68:27 82:8  
 84:16  
**viewpoint** 39:24  
**views** 65:12  
**vision** 7:9 9:9 15:24  
 36:17  
**visitors** 15:11  
**visual** 25:22 26:10,13  
 27:10,26,27,30  
 47:11,12 49:10 50:34  
**visually** 19:3 25:28 45:29  
 51:31 52:9,16  
**vitality** 3:14  
**vividly** 60:28  
**vocal** 41:32  
**voice** 13:20 14:5 19:13  
 64:15  
**volley** 28:15  
**volleyball** 1:19  
**volunteer** 17:23  
**volunteered** 36:10  
**volunteers** 17:2 18:14  
 26:18,20  
**vulnerability** 67:23  
**vulnerable** 66:5  
**Valandrik** 79:9  
**VET** 10:4 25:1 60:12  
**Video** 18:25,31  
 23:17,18,24 28:5  
 84:18,22  
**Voulet** 54:32  
**Vula** 58:7  
**W**  
**wade** 31:31  
**wait** 2:9 29:5 41:23  
**waiting** 74:34 75:12  
**wake** 64:5  
**walk** 67:8  
**walking** 66:19 67:5  
 68:16  
**walks** 67:5  
**wall** 5:12  
**want** 3:24 4:17 5:9,10  
 13:29 15:21 19:14  
 21:10,18 25:14  
 40:23,30 53:1,29  
 58:32 60:6 64:10  
 65:5 69:7,33 72:31,32  
 74:7,32,34 77:18  
 80:26 81:2,9,17 82:6  
 84:18,24 85:22,27  
**wanted** 13:10 21:25  
 23:30 69:8 84:13  
 86:15  
**wanting** 4:18  
**wants** 5:31  
**warm** 8:20 13:1  
**was** 2:34 3:24 4:34 5:5  
 6:16,33 7:1  
 9:15,24,28  
 11:19,20,21,22,31,32  
 13:7,13,19,24,26  
 15:3,17,22,27,33,34  
 16:1,3,8,22,24  
 18:6,12,19  
 19:24,26,30 20:21  
 21:1,15,27 22:3,10  
 23:2,29,30,32,33  
 24:1,3 26:13,26,30  
 27:1,7,8,26 29:6,7,8  
 30:18,20,23,25,27  
 32:13,14 33:1  
**wasn't** 23:1 37:6 47:23  
 61:29,33 67:14  
 68:14,27 70:31 71:12  
**watch** 65:26 70:26  
**watching** 12:3 65:1  
 70:26  
**water** 34:1 35:21,23,32  
 57:21,22 61:2  
**way** 4:14 6:28 7:2 11:26  
 16:8,25,34 20:18  
 21:13 22:11,18,32  
 23:8 31:5,33 36:3,14  
 37:22 43:21 56:32  
 57:32 63:11 64:22,30  
 65:10,32 69:33 70:21  
 71:2,12 72:26,28  
 76:18 77:20 83:3  
**ways** 56:1  
**we'd** 6:29 66:11 67:8  
 74:34  
**we'll** 2:8 4:23 5:18 6:8,24  
 12:10,18,21,22  
 14:6,25 29:11 36:6  
 37:9 41:24 47:33  
 59:15,27 68:3  
 78:6,7,20 79:29 80:32  
 81:6 82:3,12 83:12  
 84:3,33 86:11  
**we're** 1:27 2:8 3:13 4:31  
 7:20 13:20 20:29  
 23:17 24:19 27:14  
 58:32,34 59:11 67:13  
 70:19 74:8,34 75:12  
 81:8  
**we've** 19:11 22:17 64:29  
 69:6,11  
**wear** 28:7  
**wearing** 3:9  
**web** 67:21 79:15  
**website** 60:15 78:9,11  
 83:30,31 86:11  
**weeds** 68:19  
**week** 6:33 17:16 32:7  
 33:3 36:21 38:13  
 59:5 71:8 75:7 76:2  
 82:20,28 84:9  
**weekend** 1:24 2:31 3:4  
 7:30 83:1  
**weeks** 16:25 36:5 37:32  
**weight** 69:22  
**weird** 66:24 72:22  
**welcome** 1:3,33 2:12  
 8:13,17,20 13:1 14:31  
 15:15 16:23 24:16,17  
 29:25 41:23 54:16,22  
 59:29 60:24 74:26  
**welcomes** 15:11  
**welcoming** 15:13  
**weller** 72:33  
**wellness** 55:13  
**went** 18:21 28:31 34:11  
 38:30 48:7 60:32  
 61:7,8,22,29,33 62:4  
 64:3 66:10 67:4  
 69:22 76:24 84:30  
**were** 2:23 3:9 5:1  
 11:27,28 13:14 15:17  
 16:1,12 18:10,11,19  
 19:22 20:16,33  
 21:3,27 23:1  
 26:15,23,27,28  
 27:5,6,7 30:15,32,33  
 31:4 32:12,13,15  
 33:33 34:17,18,19,31  
 35:3,7,8 36:17,19  
 39:26 42:3,25,30  
 44:25 45:3,9,12 46:15  
 49:9,13,32 60:28  
 61:4,11,21,23 70:20  
**weren't** 34:34 61:20  
**west** 41:4  
**what's** 37:21 54:17  
 68:4,32 73:20 84:13  
**what** 1:11 3:13  
 4:1,2,6,7,10,18,19,21,  
 24,32 6:10,17,20,22  
 7:8,13,17,22,30,33  
 8:1 11:20 12:27  
 13:13,14,33,34 15:17  
 16:1,5,7,28 18:18  
 19:13 20:26 21:31  
 22:31 23:15,26,30,34  
 24:1,3 25:14 27:33  
 29:6 32:19  
 33:14,21,24  
 34:8,19,23,25,32 35:1  
 37:16 39:2 40:5,20 43  
**whatever** 35:34 37:2  
 69:8 71:18,22 74:5  
**wheel** 56:25  
**wheelchair** 46:15 53:17  
**wheelchairs** 35:24 53:34  
**wheelers** 4:18  
**when** 2:11,26 3:1 4:8  
 5:19,34 6:4,19 7:2,21  
 11:19,26,27,28,31  
 12:4,6,10,13,7,14  
 14:33  
 15:17,21,27,28,33  
 16:7,26 20:13,31  
 22:28 23:32 32:3  
 33:30,33 34:28 36:31  
 38:23 39:4  
 43:7,8,17,26 52:19  
 54:32 55:5  
 56:1,17,21,33  
 57:1,4,5,7,11,17,18,2  
 6:27,32 59:7 60:32 61  
**whenever** 22:5 45:9  
**where** 2:21 4:13 7:1,8  
 11:26,28 15:17 17:6  
 20:2 21:23 22:3,5,33  
 28:33 30:32,33  
 31:15,17 32:5,6,8  
 33:15,16,22 34:8  
 35:28 36:1 37:6  
 38:14,25 43:14,33  
 45:28,33 46:8 49:32  
 52:31 56:28 68:15,34  
 70:18 73:19 78:3,10  
 84:29 85:29  
**whereas** 43:4  
**whether** 6:7 20:27  
 34:20,24,33 35:32  
 39:3 63:12 76:34  
 77:15  
**which** 5:5 6:16,23 7:2,28  
 8:4,9 9:9 14:11  
 22:11,31 24:23  
 26:8,26 29:20  
 30:13,26 31:8 32:34  
 34:7,11 35:10,13,27  
 36:6 38:2 42:8,13,27  
 44:15 49:13,26  
 51:10,14 52:29 60:1,8  
 61:3,34 62:32 68:7,8  
 69:16 70:11 71:4,16  
 72:4,10,22 75:29  
 76:1,31,33 77:6 79:5  
 81:1,18  
**whoever** 36:32  
**while** 15:9 30:15 65:5  
 69:7 74:34 75:12,23  
 77:2  
**whilst** 5:4  
**whistles** 28:16  
**who** 1:4 2:34  
 3:25,30,31,32  
 4:9,12,13,23  
 5:15,20,23,27 7:20  
 8:8,16 10:29 13:9,12  
 14:14 22:25 23:21  
 24:34 25:9 28:7 30:4  
 31:21 32:9,15,30  
 35:34 37:5,8 38:9,10  
 39:29 40:33 41:26  
 48:8 53:11 54:33  
 55:31 58:12 60:14  
 61:11 63:2,28 64:6  
 65:1,6 67:5,24  
 69:13,15,28  
**whole** 5:12 15:30  
 18:17,19 20:17 21:15  
 32:16 34:33 36:3  
 55:14,16 56:13,19,32  
 57:28 80:27  
**whom** 26:27 45:24  
**whose** 61:28  
**why** 1:17 4:16 11:22,23  
 18:19 19:16 25:25  
 30:17 35:1 36:1 37:7  
 48:20 52:2 53:15  
 56:2 63:20 64:6,11  
 67:13 85:4  
**wide** 4:6 30:8 34:3 36:14  
**widely** 42:3 63:19  
**wider** 22:9  
**widespread** 62:24  
**wife** 33:25,30 34:7  
**will** 1:14 2:8,28,30 3:2,4  
 4:19,20,24,26 5:18,20  
 6:3,7,14,15  
 7:12,27,28,30,31  
 8:2,31,32,33  
 10:11,13,14,15,19,27  
 11:1,2 12:8,23  
 14:12,13,24 16:12  
 17:9,16,20,34  
 19:18,20,20,22,32  
 21:12 22:26 23:32  
 24:9,13,20,34  
 25:2,13,28 27:31  
 28:33 31:26,28 33:6,7  
 36:2 38:  
**wind** 55:27 56:28  
 57:17,18  
**winner** 3:31  
**wins** 75:34  
**wisdom** 75:31  
**wise** 11:13 33:22  
**wish** 19:6 25:6 66:34  
**wished** 20:16  
**with** 1:14,15,30  
 2:2,22,30,33  
 3:2,9,13,16,20,33  
 4:1,6,16,18,28  
 5:1,6,8,17,32  
 6:9,19,22,23,32  
 7:6,7,24,27,29,30,33,  
 34 8:1,27,32,33  
 9:7,9,14,18,27  
 10:6,7,21,25,29  
 11:2,4,8,21 12:11  
 13:9,10,12,13,20,25,2  
 9,34  
 14:3,4,5,17,18,21,25,  
 33 15:10,13,18,34  
 16:11,29 17:  
**within** 9:10 22:10,12,15  
 33:20 36:5,24 41:12  
 43:15 46:16,25 63:34  
 65:16 68:31 69:14  
 70:5 71:14 74:12  
 76:5 81:15  
**without** 1:21 3:7 4:3 7:2  
 14:6 21:23 25:22,29  
 26:7,8,10,15,18,24,26  
 27:11,12,18,20,23,27,  
 28,33 29:8 38:16  
 44:17,25 45:25,29  
 52:2,6 68:1 71:28,31  
 72:1,19 74:23  
 76:17,18  
**woman** 3:33 6:34 7:8  
 14:34 55:30 57:11  
 64:3  
**women's** 4:34  
**women** 5:4 6:32 26:27,28  
 27:14,18 56:4 64:30  
**won't** 65:31 67:24 84:7  
**won** 75:34  
**wonderful** 8:31 11:5  
 16:8,12 23:27,31 24:9  
 34:7 48:11 80:27  
 81:29  
**wood** 68:19  
**woodwork** 68:13,18  
**word** 11:21 30:2 34:14  
 67:21 68:32  
**words** 8:5 13:4 70:17  
**work** 5:15 8:32  
 12:5,12,13  
 13:21,24,25  
 14:6,10,20,31 15:28  
 16:29 17:1,18  
 18:18,24 19:17  
 20:19,26 21:10  
 23:1,22 24:4 30:4,11  
 31:1,16,19,33 32:3,6  
 33:12,30 34:5 36:12  
 38:1,5,11,12,18,21  
 40:9,10 44:25,26,34  
 46:9,16 49:7 50:9,31  
 51:1,5,8,20,25  
 52:2,23 53:21,27  
**worked** 8:26 15:28 18:14  
 33:32 37:26 38:24  
 44:15 68:24 71:11  
 80:14  
**working** 1:15 12:23  
 14:13 16:26 17:15  
 18:12 19:5 20:32  
 22:13 30:12 31:12  
 32:24 33:26,31 34:29  
 35:18,26,29  
 36:12,21,23 38:13  
 50:11,27 54:22,33  
 58:14 63:27 75:24  
 76:4 80:24 82:27  
 83:3  
**works** 17:11 31:21 37:22  
 73:14  
**workshop** 1:17 24:27  
 25:26  
**workshops** 24:25 86:6  
**world** 1:6 3:5 7:14,17,28  
 15:4 16:9,29,31,32  
 18:6,8,10,20 42:2  
 58:2 62:18 69:30  
 70:1,2 80:19  
**worldwide** 81:15  
**worried** 6:19 84:28  
**worry** 37:25,26 54:29  
**worst** 57:1  
**worth** 36:8  
**worthwhile** 60:2,8  
**would** 2:17,20 3:5 4:3,19  
 8:20 10:29,32  
 12:11,14 13:24 18:17  
 20:24 22:33 23:1  
 25:31 30:21  
 31:8,21,23 37:14  
 38:12,13 40:12  
 41:10,15 43:32 45:32  
 46:16,17 51:31 52:8  
 58:31 61:11 62:5  
 66:7 67:5,8,19,22  
 68:29 69:27 70:17  
 71:28 76:11,21,22,34  
 77:13 78:23,26,30 7  
**wouldn't** 6:22 30:22  
 37:15 38:17 66:34  
 68:1 71:29 74:23  
 76:13,14,17,20  
**wow** 61:27  
**writing** 33:2  
**wrong** 6:20,23,24 12:3,4  
**wrote** 64:4  
**www** 78:11  
**War** 42:2  
**Warsaw** 17:6  
**Waterford** 15:28 16:4  
 37:10 40:34 41:3  
**Wednesday** 32:12  
**Well** 4:29 5:1,6 6:1,24  
 13:29 14:12,17  
 16:10,17,22,31  
 17:16,34 18:33  
 19:3,18,24,29,34  
 21:13,18,25 22:1,9  
 23:11,29 24:32 28:28  
 29:14,34 31:6,21  
 35:8,10,19,29  
 36:7,8,21,24  
 37:26,30,33 38:25  
 40:10,17,25  
 41:4,12,29 42:19  
 43:33 44:6,32,33  
 47:21 48:33 50:23  
 51:5  
**Windows** 67:22  
**Wright** 50:28  
**X**  
**Y**  
**yacht** 55:22  
**yeah** 71:11  
**year** 1:6 9:24 10:2  
 11:19,20 12:4 18:6  
 31:8 33:27 36:20  
 37:10,11 38:10 44:25  
 48:12 52:32 61:30  
 62:19 79:1,29 82:19  
 86:9  
**years** 1:12 4:34 6:34  
 11:25,27 13:24  
 14:10,12 16:7,11

21:16 22:18 26:20,21	<b>yet</b> 25:9 30:27 41:11	19:3,18,24,31	66:30,31 67:8,21	<b>1986</b> 11:19,20 13:7,11,14	<b>2012</b> 1:1 12:2,4 38:10
30:10 31:20,22 33:25	61:28	20:9,14,17,21,31,32	72:22,25 74:17,21	15:17	78:1,2,17 79:20,27
34:33 37:25 38:14	<b>you'd</b> 34:15	21:3,7,11,28,31	75:20 77:2,6,25 80:10	<b>1995</b> 12:34	80:6,22,27
42:8 44:4,29	<b>you'll</b> 1:17 25:25 60:7	22:26,27,28,30 23:7	82:13	<b>1996</b> 64:9	<b>2013</b> 86:9
45:5,20,32 46:5,20	<b>you're</b> 21:28 22:27	<b>young</b> 6:34 7:8	<b>yourself</b> 11:26 22:27	<b>200</b> 21:27 85:4	<b>2014</b> 18:5 28:33 78:3,7
47:21 49:4 55:31	54:22,29 62:8 66:11	17:31,32,33 64:3	37:26,32 70:2	<b>2000s</b> 73:3	80:17 81:6 82:3,21,29
62:22 64:26 66:25,34	67:28 70:34,1 71:25	76:26 80:1	<b>youth</b> 58:30	<b>2003</b> 9:4 13:26 15:3	83:28,32 84:7,26
67:11,18 68:24,26	<b>you've</b> 6:27 66:30	<b>younger</b> 47:16	<b>Yves</b> 79:8	18:10 75:24	85:19
69:21 72:31 75:23	<b>you</b> 1:3,8 2:5,11,12,13,34	<b>your</b> 2:30 3:16 6:16 7:34	<b>Z</b>	<b>2005</b> 30:26	<b>2016</b> 86:9,10
78:31 79:9,14	3:4,25 4:19 5:4 6:21	8:4,16 11:4,8,10	<b>Zupan</b> 28:21	<b>2006</b> 85:2	<b>2022</b> 14:12,13 39:29
85:6,7,16	7:3,8,9,27	17:34 24:8	...	<b>2007</b> 9:13,22 30:17 31:4	<b>214</b> 86:14
<b>yellow</b> 28:7	8:1,2,4,10,16,17,33	25:5,9,10,13 28:34	11:20 48:21 54:3 56:2	37:11 38:29	<b>252</b> 27:11
<b>yes</b> 16:15 37:17 39:7,16	11:1,2,4,5,7,11,26,27,	29:12,14 30:34	<b>14th</b> 28:26	<b>2008</b> 78:29	<b>322</b> 27:11
40:28 53:33 55:25	28,29 12:29,32	34:32,33 39:22	<b>159</b> 49:3	<b>2009</b> 9:28 33:27,31 34:5	<b>6th</b> 1:1
57:4 58:4,31,32	13:4,23,30,31 14:28	41:7,15 47:3,17,25,34	<b>1950s</b> 35:24	80:28	<b>70s</b> 20:15
59:3,33 64:7,11	15:9,13,14,27	51:29 53:21 54:3,9,10	<b>1968</b> 18:9	<b>2010</b> 18:5 21:1,7 34:14	<b>80s</b> 20:15 42:11
68:23,29 74:14	16:7,10,31	57:24,26,28 58:13	<b>1978</b> 13:25 15:19,29	68:7 78:1 81:29 84:9	<b>90s</b> 42:11
<b>yesterday</b> 12:11 38:2	17:16,20,33,34	59:18,29	<b>1979</b> 15:29	<b>2011</b> 9:7 31:27 58:1 80:6	
	18:8,10,33	60:6,10,12,29 62:5			