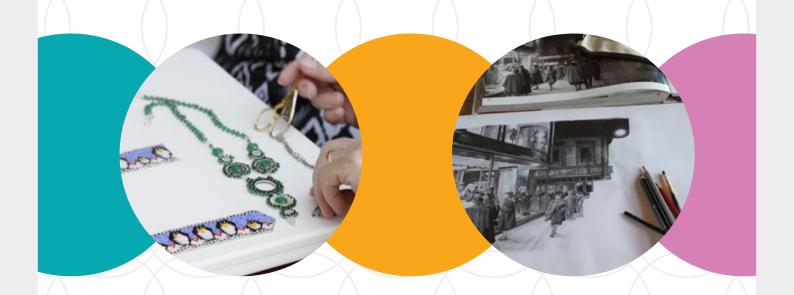
# Mutuality, Wellbeing and Mental Health Recovery

Exploring the roles of creative arts adult community learning and participatory arts initiatives











## RESEARCH BRIEFING

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This study was concerned with creative practice in adult community learning (ACL) and participatory arts settings. Its focus was on processes of mutuality – different kinds of sharing and reciprocity – in these settings and how these relate to mental health and wellbeing. The study was part of a consortium research programme, Creative Practice as Mutual Recovery: Connecting Communities for Mental Health and Wellbeing.

The aims of the research were to explore

- the mutual processes through which creative practices in adult community learning and mental health participatory arts settings affect wellbeing and recovery for a range of people involved.
- how the goals of mutuality, wellbeing and recovery interact with educational goals and traditions in adult community learning and mental health participatory arts contexts.

### Background

Opportunities for mutuality which engender social connections and social recognition have been shown to be important for promoting wellbeing and mental health recovery in community contexts. Creative practices may be viewed as potentially conducive to mutuality, particularly where they allow opportunities for participatory practice, sharing experiences and building social support. However, these opportunities can also present challenges and generate difficulties in group settings. Thus, mutuality can provide a lens through which to study interactional experiences in ACL and participatory arts settings and how these relate to mental health and wellbeing. In addition to adult learners, participants or group members, this includes the experiences of other people involved such as practitioners and volunteers, whose wellbeing needs are often overlooked in research. A concern with mutuality may also be viewed as part of a wider mental health and wellbeing agenda for ACL and participatory arts initiatives and in both these contexts there are debates about the appropriate balance between this agenda and creative or educational goals.

#### Theoretical ideas

The study drew on a range of social theories. Among these were

- the capabilities approach a human rightsbased theory concerned with the opportunities, or freedoms (capabilities) afforded by the social, political and economic context of people's lives.
- relational theory which explores how relationships with others shape our ways of thinking and acting and can affect our personal agency, or ability to engage with the world.

## Study design

The study involved five adult community learning groups in the West Midlands:

- · a women's jewellery-making learning circle;
- · a beginners painting and drawing course;
- · a creative writing learning circle;
- a 'confidence through creativity' art group (targeted for wellbeing);
- a 'reablement' art course (targeted for mental health recovery).

It also involved two London-based mental health participatory arts organisations:

- an art studio organisation managed by trained artists and art therapists;
- a poetry group based at a service user-run arts organisation.

Research methods included participant observation alongside interviews and focus groups with adult learners/members/participants (n=50) and practitioners and volunteers (n=16). In addition, interviews were conducted with wider stakeholders – project organisers and managers in the fields of ACL and mental health participatory arts (n=10).

#### **Key findings**

The study demonstrated that creative arts community initiatives can be effective means of facilitating social participation and relationship-building, which are important to wellbeing for a range of people involved, including participants, volunteers and practitioners. Participation in the creative settings was viewed as particularly important by and for those who had become isolated due to mental health issues or had restricted opportunities for social participation due to other long-term health problems, caring responsibilities or older age and was especially emphasised in the targeted settings. Other capabilities arising from the initiatives which supported wellbeing for everyone involved included shared achievement and enjoyment.

Mutual processes of 'recognition' in the creative arts community settings involved affording social value to participants through the sharing of skills and creative products. In this way, opportunities for social contribution through creative arts ACL and participatory arts initiatives were conveyed as having mental health

and wellbeing benefits across a range of circumstances associated with reduced social roles (e.g. retirement, long-term health issues).

Creative arts ACL and participatory arts settings were found to develop creativity and agency as interrelated processes. These processes were found to be relational with creative capabilities and agency often enhanced through taking part in creative spaces with others. For example, the spaces could provide stimulation and motivation for creative work, in the study settings, at home and in the wider community, and this agencyenhancement could also extend to other educational, volunteering or work opportunities and translate into other areas of participants' lives. The generation of mutual support through the shared creative activities was additionally beneficial in this respect, helping participants to deal with difficult, oppressive or restrictive circumstances, including dealing with health issues and services, domestic abuse and informal caring responsibilities. Sometimes participants described ways in which educational and mental healthrelated outcomes were achieved together, through group interactions co-creating learning opportunities and group support processes, thereby demonstrating the operation of collective agency and communal recovery and wellbeing.

An approach to mental health participatory arts in which members, practitioners and volunteers engage in creative work together was found to expand capabilities for creativity and personal development for everybody involved. In the art studio and ACL settings, shared art-making or crafting among people in various roles was considered to be part of an inclusive, communitybuilding approach and to help break down social barriers or organisational hierarchies, thereby allowing for connection beyond these. In the art studio setting, practitioners described mutual acceptance, trust and authenticity through this shared practice and how this could create the relational basis for wellbeing and recovery, which is often absent in other domains of social life. However, across the research settings, practitioners also highlighted how professional values and boundaries and organisational responsibilities can limit the possibilities for a mutual approach involving benefits for staff and members from shared art-making in community-based creative arts initiatives. Concerns here included the need for a person-centred approach which puts the client first, something which was also valued by members/adult learners, some of whom also mentioned the importance of the knowledge base and skills of practitioners for their learning experience.

Some of the other limiting factors to mutuality in the creative settings revolved around tensions between personal needs for social or creative distancing versus connection to others. While collaborative learning was a valued feature, some participants preferred to be largely 'doing their own thing' in a room with other people and did not always want to talk to others, if they did not feel up to this or wanted to focus on their own work. In the mental health settings, some respondents valued everyday chit-chat but were less comfortable when



others were more overtly expressing aspects of their mental distress, sometimes feeling they did not have the resources to help others. While many talked about feeling 'lifted' by the creative social environments, some also described how, conversely, negative emotional states could be 'mirroring' for others. Furthermore, there were occasions when the sharing of communal space could be a challenge, and when the targeted settings needed to balance inclusivity with maintaining a conducive working environment for everybody (e.g. if someone was very depressed, unresponsive or inconsiderate to others or being disruptive).

Gender was found to be an important factor in these regards. Use of communal space often reflected wider inequalities of gender. Similarly, social interaction sometimes reflected gendered expectations surrounding emotional expression and emotion work in terms of attending to the needs of others. In two of the settings, group divisions or splitting along the lines of gender were described, meaning mixed sex mental health-targeted creative groups were seen to not always work for women. However, there were also examples of gender inequalities being challenged through art work, including a communal project.

The policy and political context was considered important as well, with one unconducive factor for mutual ways of working being unstable funding. This can threaten the continuity of provision which was considered crucial in allowing for the generation of shared practices, educational experiences and support.

The findings reflected the reciprocal cultural model of adult education which involves the mutual generation of opportunities for learning and development. The model involves a participatory approach and may involve individual self-directed work as well as collective approaches comprising themed group or communal projects. It encompasses various dimensions of collaborative learning and includes reciprocal processes among and between adult learners/participants and practitioners. In ACL and participatory arts settings, it is applicable to aims across the areas of education and health.

Fitting this model, most of the ACL practitioners did not see any problems with simultaneously attempting to meet educational and mental health and wellbeing goals, viewing these as complementary, and there were similarities between the educational processes described in the targeted ACL settings and the therapeutic ones described in the art studio setting e.g. in terms of agency-enlargement. However, the practitioners, wider stakeholders and arts organisation members did discuss some tensions over competing educational/creative and therapeutic goals, for example in relation to self-directed practice compared to direct teaching input and the desirability of 'pressure' and competition (which commonly feature in educational environments but were often considered unhelpful to mental health and wellbeing). Some ACL practitioners also felt that an explicit focus on wellbeing aims may risk overshadowing educational objectives and disengaging (potential) adult learners.

While the wider stakeholders in the participatory arts settings saw a special role for the creative arts in relation to mental health and wellbeing, with the processes involved being about 'play', self-expression, communication and generating self-knowledge, the ACL stakeholders tended to have a different opinion. They saw a range of motivating subjects, taught by good tutors, and with opportunities to learn without the pressures of progression and accreditation, as crucial. One manager thought funding pressures in other sectors reinforced the mistaken idea that arts in ACL are automatically beneficial in therapeutic terms. In general, stakeholders saw funding pressures and constant restructuring of the ACL sector as highly detrimental both to traditional goals for ACL and the mental health and wellbeing agenda.

## Conclusions and implications

- Creative arts initiatives can be an effective way of meeting growing calls for a shift of emphasis in mental health services provision towards social perspectives and a community development approach and of developing relationships and social support in the context of the wellbeing agenda.
- Community-based creative arts adult education and art therapy initiatives are of significant value to a 'mutual' recovery and wellbeing agenda involving shared creative practice among people in various roles. They can create a range of opportunities for mutuality among participants which can also extend to practitioners and volunteers, thereby expanding capabilities across the areas of education, creativity and mental health and wellbeing for everyone involved. However, these creative community initiatives often need to achieve a balance between self-directed and collective practice/learning and 'mutuality' should not be expected or forced upon participants. Furthermore, in the context of such initiatives, there are factors which may restrict the full realisation of this agenda when interpreted in terms of mutual mental health benefits for practitioners and participants from communal creative activities.
- Both targeted and mainstream creative arts initiatives have a role in supporting mental health and wellbeing. There is also an important place for women-centred creative arts provision which facilitates the development of peer learning and support systems.

- Creative arts community-based initiatives should recognise the resources within client groups which can support educational and mental health and wellbeing objectives. However, staff facilitation remains important.
- As the relational nature of emotional states in mental health settings can present challenges for the mental health and wellbeing of practitioners as well as other participants, mutual support among staff is essential for practitioner wellbeing.
- The importance of relationships and social support to wellbeing and recovery means that continuity and stability of provision of creative arts ACL and participatory arts initiatives is necessary for maintaining outcomes in these domains. Creative practice in community-based initiatives should be supported as a capability, or opportunity, in itself and not just because it may lead to other things for participants or has an economic incentive in terms of people's readiness for paid work.
- It is often better for wellbeing aims to remain implicit in ACL settings. In addition, it should not be assumed that involvement in the creative arts, nor mutuality, is automatically beneficial to mental health. While the creative arts may offer distinct benefits for mental health and wellbeing objectives, in ACL it is important to maintain wide curricula which offer development opportunities for everybody and widen capabilities across the areas of health and learning.

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