Report on Interdisciplinary Arts in Health Project 2009
Funded by Centre for Excellence in Interprofessional Education,
Queen’s University, Belfast

“Shades of Mental Health”
Gaining an understanding of and articulating the human stories behind mental illness: an interactive, interdisciplinary, creative-based learning experience involving film and social work students, medical students, artists, service users and healthcare staff

Project Funding: The Interprofessional Arts in Health Project 2009 was funded by The Centre for Excellence in Interprofessional Education, Queen’s University Belfast

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1. Introduction

The following report sets out the findings of six three-hour weekly Arts in Health-based workshops. It involved an interprofessional engagement amongst Arts and Health students and service users who at the time of the project were availing of Mental Health Services. The project was a partnership programme involving Centre for Excellence in Interprofessional Education, Queen’s University, Belfast, the charitable organisation Arts Care, and Ravenhill Adult Education and Learning Centre, Belfast Health and Social Care Trust.

Many societal misunderstandings and negative perceptions exist relating to the issues and challenges of living with mental health illness. Research demonstrates that sensationalised Media reporting of events linked to Mental Health contributes in part to the rooting of these misunderstandings (Allan and Nairn 1997). A highly charged form of media portrayal of people living with mental health illness and the lack of adequate education provision has often led to the stigmatization, marginalization and isolation of many individuals within communities. Lack of education provision and negative media encounters with mental illness has also unwittingly engendered misconceptions of mental health in student populations who in their professional lives may encounter working with, investigating or reporting events/ issues of mental illness (Dogra et al 2008).

A film text, “Shades of Mental Health” is presented on DVD Format as an integral part of the evaluation text. It is not an appendix. The reader is advised from the outset of the evaluation to view the DvD stored on the back page of the report, referring to the film text references on a slide scale that is to be found on the DvD recording equipment. The aim is to offer the reader an opportunity to draw close to the live experience of the project participants and to draw on the film text as a valuable and living reference tool (Elliott 2008, Jones 2006, Rye 2004).

2. Developing an immersive creative engagement

The evaluation locates within a consideration of emerging literature in Arts in Health, Interprofessional Education and Mental Health. A review of literature failed to demonstrate any evidence of similar participatory art-based education engagement programmes involving students from the arts and health with service users. The evaluation has been conducted within the context of the increased interest in and desire to understand how wider participation in the arts offers benefits that ultimately impact on the individual’s development and community well-being. It also considers within its discussion the concept of participation in the arts offering individuals the opportunity to take active responsibility for their own overall well-being through creative education (Freeman 2006, Moriarty 2003).
There have been three major government documents produced since 1999 investigating the role of creativity within a Northern Ireland context (Department of Culture, Arts and Leisure (DCAL) et al 2000, 2001, 2004). These documents are relevant in that their creative vision appears to support through their Mission Statement, the location of evaluations such as this within a cultural context. Since the inception of the government’s unlocking creativity initiative as originally envisioned in Unlocking Creativity: A Strategy for Development (DCAL et al 2000) and in Unlocking Creativity: Making it Happen (DCAL et al 2001), the concept of creativity has been placed central to Northern Ireland’s ability to respond to challenges of global economy. By creating a vision of developing a cultural landscape that embraces both community and educational concepts of the arts, these documents empathise with the focus of the Interprofessional Arts in Health Project in that it promotes the rights of individuals to access quality programmes of arts within a healthcare context as part of a wider enhanced education and community experience.

The third document A Creative Region (DCAL 2004) continues the discourse across the four original Government Departments involved in the unlocking creativity initiative. These departments are Department of Culture, Arts and Leisure (DCAL), Department of Education (DE), Department of Higher and Further Education, Training and Employment (DHFETE) and Department of Enterprise, Trade and Investment (DETI). The DCAL Mission Statement indicates that the aim of collaborative partnership is to “develop the capacities of all our people for creativity and innovation, and to promote and sustain the social, cultural and economic well being of Northern Ireland” (DCAL et al 2001, p. 9). The general aim of the government’s creative development strategy was to “validate the concept that creativity is central to all aspects of work, learning and leisure in Northern Ireland through ensuring effective partnerships between organisations in public, private and voluntary sector” (DCAL 2001, p. 11).

The documents promote creativity beyond commercial agendas as an essential element of the personal and social development of all people. In acknowledging that literacy, numeracy and ICT are skills for all ages, the document also acknowledges that creativity enables the growth of self-confidence, self-expression and self-esteem. If such is the promotion, then anticipation emerges for government support in integrating arts programmes such as dance, music and the visual arts for people to access as an integral part of their healthcare, education and wider community experience (DCAL 2001, Elliott 2003). DCAL’s strategic aim with regard to promoting a full and co-ordinated provision of creative and cultural development in the curricula of formal and informal lifelong learning appears to support the location of this project within a cultural educational context.
The literature review provided a small evidence base that supports the valuable role of service users within developing interprofessional programmes in mental health at post graduate level (Barnes & Bailey 2000). However this participatory engagement model of service users’ involvement implemented within post graduate education programmes has been primarily achieved through discussion, completion of surveys and questionnaires and not from direct creative interaction with the students. A recent report from the Department of Health noted that patient voices were missing from most communication related skills learning in the U.K. Evidence presented in the evaluation of the post graduate student/service user involvement in education programmes reported that the participants placed high value on the service user role and voice in contextualising the part mental health played in people’s lives. This assisted according to Dogra et al (2008), in dispelling myths and fantasies often portrayed in the media about mental health. It is anticipated that the findings from this current evaluation will assist in bridging the evidence gap relating to the role of the arts in providing a voice for service users through education-based projects with interprofessional students through creative communication building (Moriarty 2003).

Whilst the literature reveals that service users have been involved in many educational projects outside of medical education it acknowledges that direct input into medical student learning has been less well developed (?). However the report does identify the potential role of the arts and creativity in relation to enhancing in particular communication skills. Such identification of the role of the arts within medical and interprofessional education programmes offers support for the implementation of the current integrated project as medical, social work and film students immerse in arts-based activity with service users with mental illness. This immersion experience according to Matassero expresses a collective and individual voice (Matarasso 1997)

Freeman (2006) acknowledges that participation in the arts and humanities contribute to a wide range of potential health and educational benefits such as inducing positive physiological and psychological changes in clinical outcomes as well as improving mental healthcare (Staricoff 2004). He however draws the focus from these positive outcomes back to the nature of the arts practice employed and states that it is the art itself that must be at the centre of the experience (Freeman 2006). He references Angus’s (2002) point that most art for health practitioners are passionate about and committed to their work. Angus (2002) holds in high esteem the arts practitioner’s professional skill and their understanding of the effects and potential of the art activity. According to Angus (2002) it is essential that artists confidently assert their vision, knowledge and expertise of the art they practice and uphold the integrity of how it is produced. It is within the integrity of the artist’s practice that creative knowledge can therefore be successfully embodied through creative skill-building and then transferred from the student perspective into enhanced professional practice development (Simmons and McCormack 2006).
The review concludes with a focus on evaluating the interprofessional creative engagement with service users and draws on creative-based methodologies of evaluation that emerge from the artist’s practice to successfully capture the project participants experience (Elliott 2008, McCormack and Elliott 2003). The literature review develops a debate on the integration of participatory arts programmes from the premise that denial of cultural heritage within a healthcare and education context impacts negatively on the individual’s well-being and education outcomes (Jermyn 2001, Napier 2004).

2.1 The Aim of the Interprofessional Arts in Health Project

The aim of the Interprofessional Arts in Health Project was to facilitate an interactive creative-based learning opportunity for students from Health and Arts backgrounds at Queen’s University. The project enabled students to come together with individuals experiencing mental illness to explore and reflect on how the relationship between film, media and health can be enhanced transforming community notions of mental health.

2.2 Objectives

The objectives of the project were:

- To promote through creative engagement an effective interprofessional dialogue through participation in a democratic arts-based learning structure
- To generate interagency action that evolves from interprofessional collaboration from partners within and outside of the university campus
- To actively involve the students in a creative project that includes service users and staff from a healthcare and community mental health context promoting a learning experience where students learn about and from each other thus potentially improving opportunities for future collaboration between the media and healthcare in a work environment

2.3 Location

The Project took place in the following two creative spaces:

1. The Arts Care Dance Studio, Belfast Health and Social Care Trust (health environment creative space)
2. Queen’s Film Theatre, Queen’s University, Belfast (community creative space)

2.4 Participants

The participants were Queen’s University film media students from the School of Languages, Literature and Performing Arts, social work students from the School of Sociology, Social Policy and Social Work and medical students from the School of Medicine, Dentistry and Biomedical Sciences, Queen’s University, Belfast. The service user participants were adults with mental health illness who attend Ravenhill Adult Education Centre, Belfast Health and Social services Trust. The breakdown of the participants was as follows:

- Three medical students
• Two film media students
• Five social work students
• Six service users experiencing mental illness

3. Methodology

3.1 Framework of Project
The project was based on the following existing Arts in Health partnership practice/research:
• The on-going development of the practice-based Arts in Health Module involving second year Queen's University medical students.
• The creative experiential and evaluation frameworks of Elliott’s (2008) field work as a dancer-in-residence within a Health and Social Care Trust
• Arts Care arts-based residencies in Health (Arts Care 2003)

The project was primarily structured on the participatory element of the self-elective Arts in Health Module for second year medical students implemented in 2006.
This original Arts in Health Module was adapted and further developed from an interprofessional perspective for the purpose of this project. The developments included:
• A partnership with students from other Schools within the university (Film Study, Medicine and Social Work)
• Engagement with service users experiencing ill mental health who were at the time of the project availing from Mental Healthcare Services, Belfast Trust
• Increased number of dance, music and art workshops offered
• Involvement of film as an expressive and evaluation tool

The intention of the project was to utilize the creative process in a workshop situation as a tool to explore and potentially improve professional understandings amongst the students from the three different disciplines. The project consisted of:

❖ A creative placement consisting of six three-hour weekly art-based workshops at the Arts Care Studio, Knockbracken Healthcare Park (spread over the 2009 spring semester)
❖ Live Dance Performance and exhibition of Art work at Queen’s Film Theatre Drama Studio
❖ Film screening
An integral part of the workshop was the opportunity for students to engage with the service users attending a Day Care Centre facility experimenting together with different art forms (visual art, movement, film-making and music) to express their individual and shared creative experience. No previous art experience was required.

3.2 Data Collection
Data for evaluation of the project was secured through the following methods:

- Film recordings
- Reflective Diaries
- Discussion
- Photographic Images

The evaluation of the project was assessed primarily from the student’s, staff and service users’ reflective texts and questionnaires including film text and discussion notes. Audience response to the film screening and dance performance was also considered. The evaluation was articulated through the analysis and evaluation of pertinent themes that were drawn from the qualitative data gathered. An evaluative DvD text is included as an integral part of the evaluation text (Elliott 2008).

3.3 The Design of the Six-Weekly Workshops
Each weekly workshop was three hours duration depending on transport and student/service user availability. The service users were invited to attend the first two hours of each session with the students.

All the workshops implemented a community model of arts engagement consisting of a creative, warm-up activity, skill-building, creative theme exploration/expression and wind down activity (Maldoom 2004). The artists worked collaboratively and participation in two art forms was offered during each workshop.

**Hour 1**
The first two hours of the workshops involved both students and service users coming together to explore creatively. An emphasis was again placed on the participants building basic skills together in the art of making, dance, film, music and visual art as a means of self-expression.

**Hour 2/3**
A one-hour slot was allocated at the end of each weekly workshop for the university students to explore their own creativity through skill-building in the areas of visual art, film-making, dance and music. The aim of this creative time specifically set aside for the students was to provide an opportunity for them:

- To become acquainted with each other and their different disciplines through participation in the multi-media arts activities
• To skill-build with the aim of providing the students with the creative tools and vocabulary to adequately express their responses to their interdisciplinary experiences through media other than the written word
• To experiment with their own creativity

3.4 Creative Theme Development
An overriding theme of Universal Mental Health and Well-being was adopted by the participants for the project. Together the participants with their newly developed creative skills extracted themes relating to mental health experience such as support, isolation, togetherness, the unknown and fear. The core themes on which the five process workshops and the performance focused on were:
  * Light/ Shade/Shapes/Textures of Mental Health

From the outset both students and service users agreed that they should acknowledge that mental health challenges and issues held universal themes and were not just assigned to those individuals availing of mental healthcare services. The portrayal of mental health illness by the media featured as an integral part of the theme exploration. The students and service users then built on their creative themes finally translating them into a choreographic work, dance performance, film, visual art work and music cd.

4. Analysis of the Six-Day Project: Process and Production of Art, Music Dance

A thematic analysis approach was implemented in the project, drawing relevant themes primarily from the film and reflective data.

4.1 Week 1: Workshop 1-Dance, Music, Art

The introductory workshop was dedicated solely to the students exploring their own creativity and self expression by offering them the opportunity to take part in a creative dance/visual art/music work shop. Service users did not take part in the initial workshop. The rationale and creative framework behind Workshop 1 was embedded in the reflections from the previous Medical Student Arts in Health Module. These reflections of the student experience of the Medical Module indicated that the students appreciated
having time allocated solely to them within the module to explore their own creativity through the different art media.

“I loved having time out to do arty things. I haven’t done anything like this. It has given me the opportunity to think around things and learn to express what I feel. (Medical Student reflection, Medical Student Arts in Health Module 2008)

Workshop 1 initiated with a brief discussion with the students focusing on words connecting with the students’ perceptions of well-being and mental illness. Words such as support, isolation, loneliness, family misunderstanding and connection began to emerge from the group. These words and concepts provided the stimulus for the students to begin to explore and develop their creative skills in dance, printmaking and drumming. The students were encouraged by the facilitating artists to create their own series of shared and individual creative expressions.

**Art Session**

Students were offered a table full of different art materials such as charcoal, rubbers, tissue paper, paint and print-making equipment. The artist demonstrated the basic techniques used to create images from the different media materials. The students then were encouraged to experiment with the materials developing images that expressed their responses to the initial discussion and words relating to the theme of mental health and well-being.

Although the students appeared tentative to begin with they soon began to experiment with the different art media offered. Observation of the around the table interaction amongst students during the art activity revealed that the shared activity appeared to encourage a free flowing discussion amongst the students about their experiences and perceptions of mental health illness. This was a very open and frank discussion were the majority of the students admitted to having a fear of people suffering with mental health illness. This was particularly apparent amongst the medical students who admitted real fears about undertaking their medical placements in mental health hospitals. Some of their fears were underlined by the social work students’ who also admitted to being afraid of encountering “scary patients with severe mental illness” within their placements in psychiatric settings. The film media students admitted to not giving people with mental health issues much thought as it was as yet relevant to their life experience nor an integral part of their university course.

The art activity also provided an opportunity for students to discuss elements of their different disciplines, course work and future aspirations. One of the overriding observations of the art experience supported by the students’ reflections was the strong element of fun and relaxation. All students reported having thoroughly enjoyed the session and gaining some first-hand insight into each other’s professions and student social lives (Film Text 1.44-2.18). Both the medical students and the social work students
showed a particular interest in the film-making course and what is involved in the making of films and the different career paths it may lead to.

The reflective feedback from the student diaries revealed that the provision of this creative time in Workshop 1 was significant for all the students in that it awarded them time to create and explore new ways of self-expression in a safe creative environment. All the students found this experience very therapeutic from a personal perspective. Students from all three disciplines on the interprofessional project reported that having creative time allocated to them within their existing education programme to express their thoughts and feelings made them feel valued and offered them a real opportunity to relax and reflect.

“I feel this activity is really important for students, having the opportunity to express how you feel about certain things even things on your course that may be bothering you or personal things, things that you may be having difficulty with. I felt I could safely share them here…like getting back to everyday basics…it was very enjoyable.”

“I liked sharing and discussing through making art and dance the different aspects of our different courses. It helped me to understand more about what social work students study for example.” (Medical Student)

“I loved chatting to the film-media students. Their work seems so creative, different than social work…but I could begin to see how we would work together in the future.” (Social Work Student)
**Dance Session**

The students participated in a gentle physical warm-up in a circle to begin the dance session. They were encouraged to create a movement that articulated their personality. There were lots of giggles and hesitant physical expressions amongst the students initially but the support offered within the group encouraged each individual to express their perception of themselves through their self-expressive body movements.

The students were then invited to come as a group before the dance mirrors in the studio where they were introduced to the basic principles of Laban Movement Technique (Laban & Lawerence 1974). This part of the session focused on the students becoming aware of their physical body in space and learning the related skill-building techniques in physical dance movement such as levels, gesturing and points in space. Some students found facing themselves in the mirror difficult relating their difficulties to poor self-image. This generated brief light hearted conversations about positive and negative body image. The Laban movement skills offered the students a movement language framework through which they were able to explore the themes of mental health later in the session as part of a group work task.

The students were invited following the mirror task to divide into three groups ensuring that each group had a mix of students from different disciplines. Taking words such as *supportive, on the edge, alone, isolation* and *freedom* the students were encouraged to create small movement sequences that depicted the theme words. Observation of the group activity supported by the student reflections indicated that all of the students initially were slightly hesitant in undertaking the movement tasks. Feedback from their reflections demonstrated that they felt very self-aware and out of their comfort zone. None of the students had ever taken part in a dance class before the project. Despite their obvious reservations, the task generated a great deal of discussion amongst the students around issues of mental health. By drawing on the introductory principles of Laban Movement and by focusing on the theme words, the students were able to create a series of movement images that involved support and individuality of expression. Each group then shared their movement sequences with the other groups creating a series of mini performances and critiques. These performances laid the foundation for developing the creative dance expressions in all of the project workshops.

“I felt very self conscious to begin with in the dance part of the session. I have never done anything like this before”. (Medical Student)

“I was scared about being put on the spot but felt liberated as well.” (Social Work Student)

“I found the experience nerve wrecking but really good to play and relax”. (Film Media Student)
Music Session
The students were invited to sit in a circle. They were introduced to a series of instruments such as rain sticks, chime bars and a range of percussion instruments. Two of the medical students informed the group that they played musical instruments on a regular basis. The facilitating musician brought a variety of drums into the circle and began to teach the students a basic drum rhythm through a series of warm-up exercises. By creating a range of sounds under his direction each student began to develop a confidence in delivering their musical expressions connecting again with words linked to mental health and well-being.

Observation of the music session indicated that the students really enjoyed the high level of interaction with each other in this group activity. Each student also had the opportunity to conduct the group taking the lead within a team activity when they felt ready to do so. A strong focus was placed on team building within this session. All of the rhythms and beats were brought finally together to create a short music work. Again this work and the skills learnt in the music session provided the foundation for the music sessions that followed.

“The sound was like no other…you could make it or arrange it as an individual or as a group. It was lovely connecting with people through sound. It felt like play time again! We were like an orchestra!” (Medical Student)

“This was a new experience for me. I found it unusual, relaxing enjoyable and above all fun!!” (Film Media Student)
“Wasn’t aware that I could pass on a message or express myself in this way… Now I know the importance of communicating through creativity.” (Social Work Student)

Photo 3: Week 1- Workshop 1, Interprofessional Music Session, Medical, Media and Social Work Students explore improvised rhythms

Analysis of Artists’ feedback Workshop 1
Three specific themes emerged from analysis of the artists’ collaborative feedback to Workshop 1. The themes focused on:

• The students’ hesitancy at the beginning of all art activities to believe that they could engage successfully in an art, dance music process producing a small end creative product
• The students’ sense of enjoyment at having time out from their traditional curriculum to explore a creative activity and to enjoy what they perceived as valuable time and relaxation from the stresses of study
• The standard and honesty of the students’ creative work and how it linked directly to their responses and knowledge of mental health
• The ability for the students across all three disciplines to work as a team

4.2 Week 2: Workshop 2 -Dance and Film-making
Workshop 2 was dedicated to dance. It consisted of enhancing the students’ knowledge and experience of integrated dance focusing on creating the foundations of the performance choreography. The workshop was divided into two distinct strands.

**Strand 1**

Strand 1 was for the students only and took place at the beginning of the workshop. This strand introduced the students to the concept of working/communicating with a group of service users through dance. It focused on the theory and practice of health care professionals coming together with service users in the creative activity of contemporary dance with the aim of understanding the development of a person-centred care practice through arts participation.

The students were shown two short film documentaries on Dance in Health. Strand 1 also presented the opportunity for the students to learn about current research in the field of Arts in Health and its impact on well-being. This part of the session generated lively conversation about the role of the arts in health outside of a therapeutic model of arts engagement. The students fed back that viewing the films gave them a better understanding of the role of the artist in health. It also brought about a greater understanding of how healthcare professionals and service users came together in a creative activity. The students also stated that viewing the film and having the space to express their feelings and views about their anxieties with regard to working with people with mental illness better prepared them to meet with the service users later in that session.

> “Watching the film I could see that dance gave people with disabilities a power and also there was a power of unity…the people with disabilities and their carers all seemed like equals.” (Media Student)

> “There was an expectation that the people with disabilities had to achieve a high standard in the performance… the people involved all lived up to this expectation. This was inspiring and made me realize that you can’t judge a book by the cover.” (Medical Student)

**Strand 2**

Strand 2 of the workshop found the students and service users with mental health problems encountering each other in the dance space. The service users who volunteered to participate in the project regularly attend day care services to support them with their chronic mental health problems.

As the doors in the dance studio opened the service users and students came forward to greet each other. There was an initial burst of positive energy as the young students eagerly greeted the service users. There wasn’t any sign of discomfort from either group of participants. One of the service users came in on a walking aide. She appeared middle-
aged and drew a great deal of focus to herself stating that she wouldn’t be able to take part in any dance activity because she couldn’t support herself physically. The students reassured her that she would be given every support needed by them. This lady’s behaviour, low self-esteem and threats of withdrawal manifested negatively on occasions throughout the project and presented challenges to the other participants and facilitator at every stage. However from the outset the student group demonstrated a maturity in dealing with her challenges demonstrating a great deal of empathy and when needed physical support.

Following the informal greetings all the participants were invited to come into a circle. The dance facilitator then repeated the warm-up exercise from Workshop 1. The familiarity of the warm-up tasks encouraged the students to relax and the service users were then supported by them through the various movement requests of expressing self through a specific movement pattern. Each individual’s pattern was mirrored by the group and embodied. The movements varied from closed over to open and at times the group discussed their interpretations of the individual expression. These movements were later utilized in the shared group activity to provide a safe framework through which the students/service users could engage.

The participants were given a series of Laban’s movement skills that focused on the different levels of space, high medium and low. The group also experimented with the different speeds of movement, learning how to discern and use movement speed to express certain elements of the creative expression. The focus in this part of the session was to offer a series of skills that both sets of participants would be able to learn and apply successfully in developing a series of short shared dance tasks.

Following the warm-up a space was offered in the session for the participants to divide up into integrated groups and discuss the concepts of mental health and well-being from both a service user and student perspective. They were then invited to select five words relating to their individual discussions and to express those words through movement using Laban’s Principles of Movement framework to assist them develop a movement vocabulary.

The groups experimented with supporting each other, making shapes at different levels and attempting to integrate different speeds into the dance. One of the most striking observations of this session was witnessing the service user with the walking aide put it to the side of the studio and experiment with supporting herself using the students and other service users in her group (See Photo 4). The footage from the film data demonstrates the service user’s ability to overcome her fears and have the confidence to trust the other “dancers” in her group (Film Text 3.14-3.29, 5.13-5.21).

The session finished with each group sharing their performances with the others. There was great support given both to individuals and groups as they shared their work. The
students were extremely supportive of the service users demonstrating an empathy for their particular emotional and physical needs within the tasks.

“Those wee students are awful nice...they really helped us in the dance...I was nervous but they made me feel okay about performing in front of the others...I really enjoyed myself and felt very confident...I am not always like that.” (Service User)

Both the service users and students were invited at each stage of the session to write a reflection if they so desired on their immediate experiences of Workshop 2. Analysis of the reflections revealed the following themes:

• An initial nervousness about students and service users meeting each other

“I wasn’t sure what to expect but these people are just ordinary like us” (Student)

“Those wee students are lovely…I was a bit nervous about meeting them as they will be the ones looking after us in the future…like they’ll be doctors and all. I feel nervous talking to my doctor…don’t feel good enough…but with these wee students…well they are just ordinary, just like us” (Service User)

• An equality in terms of this being the first time any of the service users or students had been involved in a combined dance/art/music in health project

“We were all on the same level and this meant we could all communicate with each other. We hadn’t been involved in anything like this before and the service users like us students didn’t know the first thing about making dance!” (Student)

• A desire to meet again and develop the work

“I really enjoyed all the interaction with the service users. It was fun. I am really excited about meeting up again next week” (Student)

“I loved meeting the young people today. It was great. I look forward to working with them again next week. I laughed a lot today.” (Service User)

“I loved using the art materials. I was so proud of my picture and delighted when others in the group understood what I was trying to say through it.” (Social Work Student)

Students were encouraged at certain parts of the workshop process to reflect on their immediate responses to their creative experiences, articulating their spontaneous response on blank sheets of paper.
Analysis from the Dance Facilitator’s reflections Workshop 2
Despite the initial reservations by students and service users with regard to meeting each other, it was obvious from the dance facilitator’s reflections that as the workshop progressed that both groups were comfortable with each other. This was attributed to the series of shared and “fun” movement tasks they had to fulfill at different stages of the workshops. The creative task framework appeared to create a bridge of communication between the two groups.

“I enjoyed making up dance moves together. It was great fun. I didn’t really feel awkward or silly at any time with the young students.” (Service User)

The dance facilitator reported that students demonstrated a confidence in their approach to creating the movement tasks with the service users. This appeared to be based on the experience of Workshop 1 where the students had the opportunity to experiment with making movement patterns on their own and having the space to enjoy their own creativity before encountering the service users.

“I felt quite confident and comfortable when I was working with the people from Ravenhill. I think it helped to have had some experience of dance from the previous session…at least I didn’t feel that awkward” (Student)
**Film-making Session**

The students were introduced at the end of Session 2 to Matthew Adamson, a local film-maker who specialises in capturing participants’ experience of Arts in Health activities. The film-maker offered the students an opportunity to explore the use of the moving image and sound as tools to record and capture relevant elements of the project experience. The students experimented with the basic techniques taught by the film-maker to record and explore how to film, create a film-board and interview each other within the film-making session. The students fed back at the end of the session how valuable they found this experience. The film media students found Adamson’s work inspirational and reflected that they had gained great and valuable insight into the particular field of Arts in Health. It also offered them new technical tools in terms of using the camera deep within the arts activity, particularly the dance activity. Adamson encouraged the film media students to draw physically close to the participants experience and not to film from a remote distance. He also taught them the importance of filming facial expression and gesture as a means to understanding and expressing experience. The medical and social work students through experimenting with the camera expressed how this media could be used within their disciplines to document the service users experience.

“ I have never before thought of how film could really be used within my profession without being intrusive and false. Being taught a few skills and experimenting with the cameras was exciting… the discussions afterwards with Matthew made me realise how useful recording can be in terms of telling people’s experiences.” (Medical Student)

**4.3 Week 3: Workshop 3, Music and Dance**

Workshop 3 was divided into a music and a dance session involving both service users and students.

**Dance Session**

The students and service users utilized the material they had developed from the previous week to build further movement patterns that articulated the issues and challenges of mental health and well-being. The focus of the movement tasks for this session was on physical support in the dance. Service users and students had to divide into new groups and explore ways in which they could physically support each other through a series of dance moves that involved creating different shapes on different levels. Through experiencing the physical support of the dance the students and service users were challenged through discussion in their groups to examine ways in which experiencing the physical support of each other may inform how health care professionals and service users communicate with each other.
Analysis of the student and service user reflections indicated that experiencing and negotiating the physical weight and shape of someone’s body within the context of the dance in health project elicited a body mind connection that underlined the importance of shared responsibility for each other regardless of the status of the individual within the group. This was apparent particularly in the film footage were the group work in the dance session bears witness to both service users and students exploring and negotiating what is perceived as a democratic support. Here students and service users successfully support each other in the dance. The lady who was on her walking aide in Workshop 2 has made the decision again in Workshop 3 to leave it to the side and to both offer support and be supported in the dance independent of her physical aide.

“This dance session where we concentrated on support showed me clearly that support from every direction is needed in dealing with mental health and this goes also for the students, health professionals and the patients. It is a vice versa situation…” (Social work student)

“Dance draws out all sorts of feelings and this is so important from a psychological point of view.”(Social Work Student)

“I feel happier and a release of tension. I liked all the contact with the young ones.” (Service User)

“It was great to have all the views of the students and patients represented in the dance…making sense of mental health through the theme of light and dark. I felt really good being supported by others in the dance. I felt in some way valued.” (Medical Student)

“Working in partnership is important. I could see that in the dance. The professional relationship between the patient and the health professional has to be essentially about a good working relationship. We all needed each other in the dance.” (Social Work Student)

“The service users brought lots of support into the group. It created a circle of equilibrium and flexibility. I don’t know but there was a balance and that was important.” (Film Media Student)

“It was great working with the students in the support work. I felt very unsteady at times. I couldn’t believe I was working without my walking aide. At first it felt scary but as my confidence in the group increased, I felt safe and my body relaxed in a way that it hasn’t for a long time. I am usually very fearful of falling and not coping. I trusted everyone completely” (Service User)
Analysis of Dance facilitator’s reflections
Analysis of the dance facilitator’s reflections indicates that initially there was hesitancy within the groups to explore the concept of support of the physical body in dance. This hesitancy was managed by the facilitator encouraging the participants to draw on the Laban movement skills that they had learnt from the previous sessions and taking safe “risks” that involved trusting the individuals within their group.

“I could see that the participants were slightly worried about supporting and being supported in the dance but I knew that they had developed sufficient physical dance skills in the two previous sessions to fulfill the task. It was great to witness the lady throw her walking aide to the side and lift her leg confidently as she sought support from other service users and students. The smile on her face said it all.”(Dance facilitator)

All the participants reported feeling very positive and a real sense of satisfaction after the dance session. Both students and service users feedback indicated that working together in the dance activity began to open discussions about how they felt about their illness or
the stress of being a student. This was something both groups of participants found valuable.

**Music Session**
The music workshop built on the warm-up exercises of the previous music session. This laid a foundation of skill building that was later used to develop the creative content of the music session.

The students and service users were invited to create their own vocabulary of sounds within a drum circle. As each participant spontaneous created their own short soundscape with their drum, the other participants within the group repeated it. This task continued around the circle with every participant offering their unique music sequence.

“I was excited to be doing the music this week again. I remembered some of the basic work from the last session and this made me less nervous about what I was doing. I felt I could begin to develop rhythm in my work this week.” (Social work student)

“I was a bit nervous when I started to make sounds on my drum but I liked that everyone supported me. They even clapped which made me feel good” (Service User)

This part of the session then developed into duet work with participants combining and refining their soundscapes with a partner. The task involved working closely with each other and trying to make some sense of combining their sounds. The duets were then shared with the rest of the group. Observation of this part of the session revealed an excitement and nervousness amongst the group. Everyone was keen to share the work but the sense of performing in front of the other participants created a challenge and slight apprehension for some individuals. However everyone managed to fulfill the task despite their initial apprehensions.

“The sounds were great. Everybody’s sounds, styles and ideas mixed well and it went surprisingly well when we performed it in front of the others. I was nervous but it was a good feeling to stand in front of the group with my partner and play the music piece we made up together.” (Medical Student)

“I was dead nervous playing in front of others. I am very shy normally and have never done anything like this before. I really surprised myself as how much I enjoyed it.” (Service User)

It was observed from the smiles and laughter from all the participants that everyone really enjoyed the drumming experience. Some of the following comments were drawn from the service user and student reflections.
“It was amazing to see how the service users opened up, smiling and laughing as they joined in with the drumming. Everyone in the room was equal.” (Medical Student)

“There was so much fun and laughter in the room” (Service User)

“We all played together as a team and I can’t wait to see what we will do next.” (Media Student)

“It was great to see everyone participating and to see the difference in the service users. I couldn’t believe how their level of confidence. One person I was talking to had physical disabilities and I was able to encourage her. She was very good. I learnt a lot from this….it was a different professional relationship and it felt very rewarding” (Medical Student)

“I feel supported and I don’t feel alone.” (Service Users)

Photo 7& 8: Workshop 4, Service Users and Students taking turns to conduct the music group

Analysis of Music Facilitator Reflections
The overriding theme that emerged from the music facilitator’s reflections of this music session was the high level of social integration he observed amongst all the participants. He also reflected on how much the participants were enjoying creating a short end product that they felt comfortable sharing within the group. His reflections indicated the importance of creating and sharing work with each other in terms of building confidence.
4.4 Week 4: Workshop 4, Dance and Art

Art Session
Workshop 4 focused mainly on initiating and developing a large silk screen art work with the service users and the students (Film Text 1.59-2.39). The artist facilitating the workshop encouraged a brief initial discussion amongst the group of service users and students that focused on words relating to positive mental health and the physical, mental, emotional and spiritual aspects of them as individuals.

This discussion was followed by the artist laying out a large piece of framed silk on the floor and inviting three members of the group to lie down on the silk. Many humorous comments emerged at this point of the task and there appeared to be a real sense of fun and group banter (Film Text 3.40-4.49).

The artists then invited other members of the group to trace around the individual bodies lying on the silk. It was observed that this was quite an intimate encounter for the participants and again this generated humorous exchanges.

“I really enjoy my time spent here in the art studio. It feels as if we are creating something full of fun and very worthwhile here with the patients.” (Medical Student)

When the body shapes were successfully traced both students and service users were invited to come to a large art table where the outlined silk was laid across. The artist then explained and demonstrated the technique of outlining the body shapes and writing words on the silk using special tools. The participants were all encouraged to try out the new art skills. Everyone was very keen to participate and this task again encouraged a great deal of discussion amongst the students and service users.

It was observed that the artist encouraged individuality throughout this initial process and also encouraged participants to support each other where necessary. When all of the outlining of words and shapes was completed the artist then clearly demonstrated the next step of skill building using silk painting techniques to fill in the outlined material. Both service users and students were encouraged to try out the painting technique paying particular attention to the flow of the paint across the silk.

It was observed that all the participants paid a great deal of attention to applying the specific painting techniques ensuring that the paints did not go beyond the outlines. This task encouraged a great deal of mutual support within the group. It also encouraged further discussion with regard to mental health issues and well-being. Particular discussions focused amongst the group on how mental health is managed on a day to day basis for the service users who live with on-going mental health problems. The art
activity appeared to provide a safe creative space where these sensitive discussions emerged organically and were articulated through a creative medium.

“This was a completely new experience for me and I felt very unsure at first about interacting with the patients in this way. But as the session moved on I felt very different about it all and I realized that they loved working with us. It was obvious we were creating something beautiful together.” (Media Student)

“I definitely think this kind of activity is really worthwhile and so many patients should get the opportunity to come together in art centres like this to help them.” (Social Work Student)

“I hear so much laughter and so much fun here. It feels very good and I see unity.” (Medical Student)

“This is so much fun. I haven’t stopped laughing since I got here. I feel so relaxed and I am doing things I have never done before or thought I could do.” (Service User)

The transport bus arrived shortly after the service users and students began the task of painting in the outlined silk. The service users and students were disappointed that they were not able to spend longer together working on their shared art work. When the service users left the studio the students continued to work on the silk. This time on their own provided the students with an opportunity to further discuss the theme of mental health and well-being amongst themselves. It also provided them with an opportunity to reflect on their creative experiences with the service users and each other giving consideration to the value of creativity within a healthcare context.

“I missed the service users left when they left. I had such an amazing time with them. It was great to chat with them and to find out about their lives and what living with a mental illness is like. I learnt that they are just normal people. I wasn’t afraid of them. I thought I would have been.” (Social Work Student)

“I can see the value of arts in medicine when I am here but I am asking the question how it fits into archival medical practice. I am not sure.” (Medical Student)

“I go so much on looks and first impressions. This experience is showing me that I shouldn’t judge the book by the cover. I have been unexpectedly enlightened. I would have written people with mental illness out.” (Media Student)
Photo 9: Workshop 4, Artist, Service Users and Students critique images and developing themes centred on textures and colours of mental health and well-being. Film media student records experience and response in background.
Analysis Artist’s Reflections
The prominent theme of the artist’s reflections of the art session focused on the integration of the students and service users as a group.

“I observed that both the students and service users integrated really well from the outset of the art session. The main thing that struck me was the high level of interaction between both groups. There were lots of chats and definitely humour was a central part of the experience. I had no problem when they came to the table getting both groups to share in the art activities…” (Artist)

“Many conversations took place around the table between the students and service users. These conversations centred mainly on the service users’ experience of coming to a day centre and on shared subjects such as family friends and social activities. It was great to see them all getting on so well.” (Artist)

“For me this experience today demonstrates the power of creating something together such as an art work. Around that table everyone seemed equal and there was a high level of support.” (Artist)

Dance Session
The last half hour of the workshop focused on the students working together to begin to develop a short sequence of movement that articulated their experiences in the art session of working as a team together. This involved students working as one group and exploring a choreographic sequence that was given to them by the dance facilitator. Time was limited on this session due to the focus on the art work but the students managed to create a short meaningful dance text on team work.

“I never danced like this before but it is strange how quickly you can adapt to learning new ways of expressing yourself. Sometimes words are not enough.” (Medical Student)
Photo 10: Workshop 4, Students exploring choreography focusing on the theme of team work and interprofessional experience

Analysis of Dance Facilitator’s Reflections
The primary focus of the dance facilitator’s reflections focused on how the group dance task appeared to enhance the sense of the students from different faculties coming together within the project as a team. The reflections on students’ discussions in this session revealed how important the project was to the students in terms of providing an interprofessional opportunity where they were able to learn about each other’s discipline.

“One of the things that seemed to organically emerge from this project was that the creative activities appeared to give a relaxed safe space where the students could explore each other’s disciplines. Many questions and curiosities emerged in the creating of dance together with regard to what the students’ individual courses involved. The project appeared to offer an opportunity for students from different courses to begin to understand more about their different disciplines.” (Dance Facilitator)

4.5 Week 5: Workshop 5, rehearsal for performance at the Arts Care Studio

This extended 3 hour workshop focused on preparing the material for the public performance in Week 6 of the project. The workshop was divided into two sections. Section 1 involved the service users only rehearsing the dance work. Section 2 involved both service users and students rehearsing the dance and drum elements of the project. The final part of this workshop involved the service users putting the final touches to the silk art work which was displayed at the performance.

Section 1
The service users utilized this part of Workshop 5 to concentrate on bringing the material they had created over the weeks of the project to performance standard. Up until this point the focus on the project was on the process experience. This workshop shifted the focus and analysis to the experience of preparing an end product, the performance. The service users’ reflections indicated that they were excited but apprehensive about the idea of bringing what they had created into a public arena.

“I feel very nervous about performing in public. I have never done this ever before. I am excited though because I want to show my mum what I have been doing and she will be so proud of me.”(Service User)

“We want to tell our story and we are proud of what we have done on this project. But I am very, very nervous but I want to prove to myself and my family that I can do it. More people out there need to know what it is like to have a mental illness.”
Despite the facilitator’s sensitivities to the theme of the material in relation to the service users’ experience, the participants were more than happy to use the dance as a medium through which they could tell their stories of mental illness to a wider public.

“I was amazed at how courageous the service users were and how determined they were to tell their own story of mental illness. I held my breath a few times during rehearsals trusting that they had developed enough creative skills to support them as they related their experiences on a public stage.” (Dance Facilitator)

One of the service users had agreed in an earlier workshop to make the props for the performance. She admitted to having a love for making things on her sewing machine at home and volunteered to make cushions and to hem sheets for using as costumes in the performance.

“I loved making the costumes for the show. I do a lot of work for friends in the centre like, taking up hems and alterations. I am delighted with the way they have turned out.” (Service User)

**Section 2**
The second part of Workshop 5 was dedicated to bringing both the service users and students together to rehearse the shared dance material connecting all the elements of the choreography together to create a finished dance work. The main limitation in this session was time. There was only one hour to work on all the material as students had to return to their lectures and the service users to their day centre. It was observed that all the participants worked extremely hard on ensuring that the dance material produced was of a quality worthy of performance standard.

“I enjoyed working on the final part of the rehearsals even though I was very nervous about it all. It seemed to make sense that we would show all our work to our friends and family.” (Medical Student)

“I keep saying to myself that I wouldn’t be able to do the performance. It is a scary thought but I want to prove to myself that I am able to do it. This is important for me and my confidence. I want to show my friends from the day centre…they are coming on the bus to see me…what I can do.”(Service User)

Time also had to be awarded to recording the music material onto CD so that the music created during the project could be played as an integral part of the public event. This end product was deemed important by the participants and they all reflected that they felt a great sense of achievement in their work.
“I can’t believe that the music I have made is on a CD. I never thought in a million years that I would be on a music CD. It is a great feeling. I hope I get a copy of it” (Service User)

“I love the idea that my drumming has been recorded on a CD. It makes it all worthwhile and really special…a bit crazy really for me to be on a CD!” (Social Work Student)

Photo 11: Workshop 5, Service Users and Students rehearse choreography for performance

**Analysis of Dance Facilitator’s Reflections Section 1**

The dance facilitator’s reflections focus on the level of determination and motivation of the service users to produce a high standard of work for the performance. The service users’ apprehensions were dealt with by the dance facilitator reassuring them that they had learnt enough skills, sufficiently rehearsed the material and demonstrated enough confidence to bring their work forth into a public arena. Having specific time awarded to the service users on their own assured them that they knew and were able to remember the material well enough despite their nervousness.

The dance facilitator also reflected on the high level of responsibility involved in terms of bringing the dance work to performance standard and in recognizing the level of vulnerability within this group of people with mental illness, none of whom had ever performed before.

“I was constantly aware throughout the process that we had an intention to bring the work forward for performance. This was something that was discussed from the outset of the project and agreed by all the participants. This as always is exciting but excruciating in terms of the amount of responsibility that rests with me as the dance teacher/choreographer to deliver a positive experience for not only the
participants but the audience. In recognizing the different layers of vulnerabilities shared within both the students and service user groups I have to then draw on my experience of managing the different aspects of vulnerability recognizing that at any given time if any aspect of the performance preparation and experience is mismanaged one or more of the individuals participating may feel compromised. This may ultimately impact negatively on their self esteem and well-being.” (Dance Facilitator)

4.6 Week 6: The Performance and film Screening at the Queen’s Film Theatre

The performance event took place in the university drama theatre. The morning of the performance was dedicated to rehearsal. This was the first time that the participants had access to the theatre space at the university. There was great excitement and apprehension amongst all the students and service users on entering the space. Initially both students and service users reported feeling slightly overwhelmed at times at the idea of performing in a proper theatre space. Unfortunately due to prior commitments in the space it was not possible to access it for rehearsals until the morning of the performance.

A couple of the students were unable to come until late morning for rehearsal and it was reported by the participants that this proved problematic in building up the group confidence in the dance piece during rehearsals because of the unfilled “spaces” in the choreography. This could not be avoided but did appear to put an extra pressure on the participants who were present. The Dance Facilitator’s reflections bears witness to the struggles encountered in delivering performance within education and health contexts.

“There were no surprises this morning when I arrived at the theatre. Firstly the theatre was closed and no staff were about to let me in to prepare the space. A workman going in to the building let me in.

I waited for the transport to arrive with the service users from the day centre. The bus finally arrived 45 minutes late eating well into rehearsal time. One of the service users was ill and unable to make it. This meant having to re-do some of the sequences. Most of the students arrived on time but a couple of them phoned to say they couldn’t make it until later because of unforeseen lecture commitments. The elements of the theatre rehearsal experience that were out of my control placed a great deal of pressure on me and the participants from the perspective of having a reduced rehearsal time for perfecting the performance material.”

The event was structured as a public cultural event. It involved a reception in the foyer of the building followed by the performance in the theatre and then a screening of the
evaluative film text in the film theatre. The CD of the drumming music was also played and the art work was on display in the foyer during the reception.

The reflective feedback from the student and service user participants of the performance focused on the sense of achievement that they all experienced as a result of successfully performing their dance work in front of a public audience. The reflections also highlighted the democracy of the experience with the service users and students revealing that they very much enjoyed being part of a team.

“I just can’t believe that I have just performed in front of all these people. It’s mad…my mum is here…she is going to be so proud of me. I have never done anything like this ever in my life. I feel so good about myself and proud of myself. I can’t believe what we have achieved. I don’t like going out in public because of my condition. When I saw myself up on the big screen I felt like a superstar. I thought I was beautiful.” (Service User)

“I have had such an amazing time…I feel on a total high after performing…I want to do it all again. I can’t believe that we pulled it off. We have really achieved something way out there. I feel we made a great team. We had all bonded and the work over the last few weeks has really paid off.” (Medical Student)

Approx 90 invited guests attended the event. The feedback from the audience was very positive and indicated that the performance and film screening had offered insight into the role of Arts in Health in interprofessional education and in contributing to the well-being of the participants with mental health problems.

“I loved every part of this event. I knew very little about Arts in Health but I could see clearly from all aspects of today, the film and the performance that the arts have a definite role in healthcare programmes.” (Audience Member)

“I would love to see more of this type of interprofessional education experience for our students. I could see clearly how they have benefited from it.” (Audience Member)

“I was so proud of my daughter today. She was very nervous about it all but I am delighted that it all went so well and that she was able to overcome her fears about her physical condition and have this opportunity to do something she loves to do and that is dance. She normally hides away and I couldn’t believe she was standing out there on a stage performing.” (Audience member and mother of one of the service users)

5. Key Findings
The project was initiated to gain an understanding of and articulate the human experience behind mental illness through an interactive, interdisciplinary based learning experience within an educational and healthcare context. It operated from the premise that students from different professions such as social work, medicine and film media would enhance their knowledge of each other’s professional disciplines and mental illness from participation in an arts programme that involved service users from a local Healthcare Trust who live and manage a mental illness.

The benefits from this arts-based participation from the outset were perceived as three fold:

1. The development of an effective interprofessional dialogue through participation in a democratic arts-based learning structure thus potentially improving opportunities for future collaboration between the media and healthcare in a work environment
2. The generation of interagency action that evolved from interprofessional collaboration from partners within and outside of the university campus
3. The provision of a unique learning opportunity for students to gain greater understanding of mental illness and well-being through active involvement in a creative project that includes service users and staff from a healthcare and community mental health context

The three primary characteristics to emerge from evaluation of the interactive interprofessional experience were:

- Immersive
- Educational
- Relationship

The key themes to emerge from the findings of the evaluation of the student service user experience and linked to the developmental stages of Elliott’s (2008) conceptual framework of the project were categorized under the following headings:

- Enhancement of learning
- Creative skill-building
- Development of the creative relationship

5.1 Enhancement of learning
The findings from the project indicate that the students from all three disciplines, Medicine, Social Work and Media benefited educationally from participation in the interactive Arts in Health experience involving service users with mental illness. The evaluation demonstrates how participation in the Arts in Health Project enhanced the students’ learning experiences through a practice-based knowledge framework in the following ways:

1. Students from all three disciplines learnt about the social/cultural role of the Arts in Health and its contribution through existing programmes of health to well being within a local and international context

2. Students were informed about the local Arts in Health research studies undertaken by Arts Care

3. Students through a creative practice-based learning structure had the opportunity to draw close in a safe creative environment to people who have experienced mental illness and the staff who care for them. This provided the students with a unique immersive creative learning opportunity that informed them from participative experience about how mental illness affects people’s lives.

The evaluation evidence communicates that the project offered the students an opportunity to explore their perceptions of and modify where necessary their attitudes of mental illness by directly engaging with service users with a mental illness in the different arts activities. Evidence demonstrated that the immersive learning experience provided by the outside agency Arts Care, in partnership with Queen’s University and the Health Care Trust provided all the students with an experience of significant value in terms of their future employment.

The film media students measured the value of their participation in the project in terms of how their experience of individuals with mental illness as encountered in the shared arts activities, would affect how they would understand, portray and report mental illness in their future media employment.

“I never dreamed I would have this unique opportunity of coming on to a psychiatric health care site and filming. This is just way out there. I may have waited years before having this type of experience as a film-maker. Working and creating work alongside the people with mental illness on this project has really opened my eyes and changed how I see people who we sometimes class as mad. I know that taking part in this project will have an impact on my future work. I will be very careful about how I portray a story about mental illness. There is so much negative coverage in the press and yet working with these lovely people has shown me that they are just ordinary and not to be feared.”(Media Student)

“I have always been apprehensive about meeting people with a mental illness and disability in my placements as a student. It has if I am honest, scared me a bit… worrying about not knowing what to do, how to treat them, what to say…feeling
even afraid in front of them. Taking part in this project with people with mental health has really been fantastic. I was worried about meeting them on the first day but I felt very comfortable with them very quickly. They were just like people I know, mothers, grannies, daughters and uncles and all… This project has certainly helped me to overcome my initial fears. I wouldn’t be so wary of people with a mental illness in the future when I am a doctor or even when I do my placements in a psychiatric hospital.”(Medical Student)

The above reflections would appear to provide evidence in relation to the positive contribution the immersive experience of the project had on students’ knowledge, skill and understanding of mental health fostered through an interactive learning experience.

Evidence also demonstrated that the students were not the only group to benefit from an enhanced learning experience. Service users also reported that participating in the project contributed to a better understanding of the students’ professions. This was deemed important to the service users in relation to removing some of the fear of having to deal with professionals within the context of their healthcare programmes. All of the service users admitted to feeling apprehensive when face to face with health professionals such as doctors and social workers. The service users stated that such encounters made them on some occasions “feel inferior” or “not good enough.” However all of the service users agreed in their post session discussions that taking part in the project with the students made them feel less nervous about meeting healthcare professionals. This was attributed to gaining insight into aspects of the students’ individual training courses facilitated through discussions that arose from working together on the shared arts activities and also from becoming acquainted in a very informal and personal way with the students as they painted, made music and danced together (Film Footage).

“I don’t always like going to the doctor. I feel as if I am wasting his time and that sometimes he makes me feel as if I am not good enough. Maybe that is just me… but I wish I could feel differently…I have to say though that meeting you all (referring to the students) has made me realize that you are just ordinary wee young people and you are the ones who will maybe be my doctor or social work in the future. If that was the case I would feel differently about it all. It would be great to go into the GP surgery and find one of your friendly wee faces (they all laugh).” (Service User)

The revelations of the service users perceived negative experiences of meeting with health professionals was reported as valuable information by the students. Participant feedback within the informal post session discussions indicated that the frank openness of the service users in relation to encountering health professionals made the students realize how important the service user/health professional relationship is in terms of enhancing well-being.
The evaluation also revealed that the articulation and expression of experiences and perceptions of mental health and well being facilitated by the different art forms also contributed to a two-way exchange between students and service users. Students found the shared creative discussions provided an expressive platform for them to share their concerns about stresses and issues relating to their mental health as young people. The students as well as the service users reported having found the support and ability to talk about such issues openly with the other students and service users invaluable and helpful.

5.2 Creative Skill Building

The findings relating to creative skill building demonstrate the significance for the students and service users of having the opportunity to engage with artists who have developed an expertise within their practice in the field of Arts in Health. The creative skill-building three framed learning framework employed for the project provided the participants through the facilitation of the professional artist, with the opportunity to explore, acquire, develop and implement creative skills with the intention of producing a personalized and shared vocabulary of exploration and expression involving process and product (Figure 1, Elliott 2008).

**The Creative Pod**

Understanding the role of the dance in healthcare: the dancer enables others through creative engagement to

- Explore within Self
- Development of Creative Skills (skill-building)

Democratic relationship building: Collaboration with Dancer & Group to produce a creative work (process, dance company and performance)

- Sense of Ownership
- Sense of Well-Being

Establishes a wider Community Connection

“Sometimes I cannot find the words to express how I feel but here I have found it possible to look at things differently and say something important about myself through the art workshops. It is different way of doing it but it feels safe.” (Service user reflection)

“I never considered myself to be arty. In fact I was a bit apprehensive about taking part in the project thinking I would make a fool of myself. However with the guidance of the different artists I found that I was able to create something that I felt proud about. I made really lovely prints.” (Service User)
Both sets of participants’ reflective notes revealed that there was an initial reluctance amongst the service users and students to experiment with their creativity through the different art forms. Evaluation of the discussions and reflections clearly demonstrate that all the participants initially experienced fluctuating levels of self-consciousness caused by their perceived lack of knowledge in relation to arts education. These perceptions were reported as a direct result of both students and service users’ lack of involvement in any art-based activity during or since leaving school.

It was reported by all the participants that initial participation in the dance sessions created the highest level of self-consciousness and apprehension. The initial apprehensive responses of the service users and students in relation to learning the skills of the different art forms and in particular dance is in keeping with the findings of similar community-based projects and is an expected outcome of the creative skill-building process/production (Foster 2002). The reflective evidence communicates the level of initial apprehension and the vital role of the expertise of the professional artist in health in facilitating and managing participant apprehensions whilst engaging with creativity.

“I was dead nervous to begin with. I just saw a blank piece of card and didn’t know how to begin to do my own thing. Helen (the artist) guided me through giving me advice on how to approach expressing myself by using the paints and coloured paper. She taught us right from the start some basic skills about painting which were extremely helpful.” (Social Work Student)

“I was very nervous about learning to dance. I didn’t want to look a fool. It is something I have never really thought of doing before taking part in this project. I didn’t want to let myself down in front of the young ones. Having basic words like shape, level and stretch really helped me to create something in the dance very quickly. I was amazed.” (Service User)

“I was happy enough to take part in the music and art but I had real reservations about dancing. I just didn’t want to embarrass myself. I can’t believe that we were able to express ourselves in the dance when given a few basic instructions… that seemed to make so much sense and made me feel much more comfortable with it all.” (Medical Student)

“Time and time again it goes without saying that almost everyone who engages with the art form of dance does so initially with some level of apprehension. I think that’s because in making dance we immediate into our bodies, feeling our visibility and becoming openly visible to others. Self awareness of the physicality of the body required in dancing can present as huge barrier initially, particularly if an individual is of a more introvert nature. However as the process unfolds the dancing body can become a place of liberation and knowledge. This is were the dance tutor
has to implement their expertise and practice skills focusing on building a skill base that the individual making dance can draw on to build not only a new knowledge base through their body experience but a safe framework on which to hang and reduce their apprehensions. This has been the case in this project with both the students and service users.” (Dance Facilitator)

The film in particular reveals the competent level of creative skill building acquired and mastered by service users and students as the project progressed indicating the significance of this experience in terms of the quality of the expression and production. The film also demonstrates how the art forms offered different sets of expressive skills providing the participants with a rich “palette” of creative vocabulary through which to express and document different aspects of their experiences (Film Text 1.22-1.50, 1.54-2.35, 3.42-4.70).

The process of learning basic film skills such as developing recording, and interview techniques was reported by the students to be of high value. The creative skills taught in the film making workshop by the Arts in Health film-maker Matthew Adamson, were reported in particular by the film students to be of high value in relation to enhancing their education within the field of film documentary. Both film students articulated the significance of learning how to capture the intimate human story on film by using the specific techniques taught by Adamson. The film students implemented the techniques they learnt in the workshop in creating the final short evaluative documentary film. The overall experience of the film-making workshop was perceived as a useful professional tool for both capturing and relating experience as well as learning the communication skills of how to creatively conduct an interview to extract vital information. The students agreed that these skills were relevant tools across all three student profession groups with regard to learning how to interview and represent information. An emphasis was also placed by the students on the value of learning how to use the film media techniques to convey that experience to a wider audience. Having the skills to do this was deemed useful particularly within the current use of information technology for professional information dissemination.

Overall the findings relating to creative skill building indicate that both students and service users enjoyed learning how to express themselves by developing creative technical skills across all the art forms. Members of both groups also commented on how building the new skills made them feel less apprehensive about exploring their own creativity, experimenting and improvising with the art materials and instruments.

“Learning to do a few things on the instruments makes me feel like a musician and I feel happy to get in there and play around with it all. Feel as if I have learnt something new at this stage. I’ve never played any kind of musical instrument.” (Social Work Student)
Evidence from the thematic analysis of the data across all sets demonstrated that the creative skill-building themes that emerged relating to enhancing the educational experience offer momentum to Moriarty’s (2003) passionate debate regarding the educational and cultural value of arts integration into all aspects of community experience and education. The concept of Arts in Health education practice adopted by the project and promoted as a community model of arts engagement recognizes the expertise of the arts practitioner in health as a knowledgeable practice that contributes something of value to the development of inter-professional education.

5.3 Development of the Creative Relationship

One of the primary themes to arise from the data was the development of positive relationships generated and facilitated by participation in all four creative activities. The development of the creative nurturing relationship between the service user and the student is clearly witnessed throughout the film text (Film Text 3.20-3.28).

The evaluation identifies that the relationship demands of the project across all the art-forms had a positive impact on the quality of the service users and student relationship experience within the context of the creative activities at the Arts Care Studio and Theatre. The benefits gained were from both the student and service user perspective and focused on an increased creative physical and emotional connectedness amongst all the participants as they created together.

The evaluation communicates in particular the insightful nature of the dance experience and how the physicality and emotional closeness of the dance informed students with regard to relationship development with the service users. In the project context the clinical identity of the body as interpreted through medical anatomy and physiology was set aside to be replaced by the creative dancing body, valued for its ability to physically and emotionally connect with self and other in the process of making and performing dance. It is widely recognised by dance practitioners that the profound physical and emotional intimacy in the dance making experience holds many healing ingredients that can enhance well-being (Schmais 1994).

The film text in particular communicates the journey towards the unfolding of the creative relationship amongst the healthcare staff service users and students in all of the art activities. The film footage demonstrates in particular the physical and emotional relationship development as it is facilitated within creative expression (Film Text 1.30-1.50, 2.00-2.12, 2.35-2.40).

“I was a bit awkward to begin with in the dance...just being close to someone is sometimes really difficult for me. It did get easier and I found that all the students were so nice and give me the support I needed. We got to know each other really well and I felt more confident about myself.” (Service User)
6. Discussion

Evidence provided by the evaluation has demonstrated that the benefits perceived at the outset of the project have been realized through a participatory framework of arts-based engagement involving students from different professional disciplines and service users with mental illness. The benefits of this specific model of interprofessional arts in health engagement include the development of a successful dialogue through an arts-based learning structure, interagency creative partnership development and a greater understanding of mental illness. The three primary themes education, skill-building and relationship drawn from the findings are found to best reflect the central core of the participant arts-based experience. The implementation of a participatory model of arts engagement involving students and service users offered all the participants a creative experience that impacted positively on their relationships with self and other by contributing to the service users and students’ sense of well-being (Film Text 3.10-3.32, 5.16-5.44). The perceived sense of increase in well-being was reported by students and service users to contribute to the further development of community cohesion within a healthcare and educational context.

The evaluation found the educational benefits of the art experiences to be critical contributors to the production of the creative self that induced an enhanced sense of well-being within the context of the music, dance, film-making and visual art workshops. This enhanced sense of well-being regularly reported in the student/service user reflections provided a fertile environment for knowledge and positive relationship development. Benefits such as increased communication skills, team building, body knowledge, creative skill development and art appreciation experienced by both the service users and students confirmed the value of the different elements of the arts in health experience (Film Text 1.23-, 1.35-1.42, 1.45-2.06 2.30-3.00). The value of relationship development facilitated through a creative education framework is confirmed in socio-cultural and health literature as an important contributor of well-being from the individual and community perspective (Freeman 2006).

The ability of all the participants of the project to articulate through the creative relationship the expression of ideals, failures, disappointments and successes was fostered by the artists as the valued creative wisdom of the art form and ultimately given validation through peer support during the process and in the performance elements of the project. The data revealed that discussion reflection and movement exploration permitted the service users to communicate very personal experiences relating to family and friends including the impact mental illness had on their lives thus building trustful relationships. By re-cycling and analysing their past and present experiences through creative process and production the service users and students reported a different kind of consciousness about their lives and relationships (Film Text 2.40-2.59). This was made particularly evident through the performance and finished art work.
The benefits gained for the student/service user relationship through participation in the project, links the evaluation with contemporary evidence that acknowledges and promotes the role of creativity as a tool for professional care practice development and evaluation (Coats et al 2004, Higgs, Titchen, Horsfall & Armstrong 2007, Simons & McCormack 2006). All of these authors award recognition within arts-based inquiry and creative evaluation frameworks to the role of personal creativity, creative production and the role of the professional artist within professional care practice education development and research programmes. The findings stretch back to the literature considerations and go some way in contributing to Dogra’ et al’s (2008) call for more expressions of the service user voice within interprofessional communicative learning in mental health.

In acknowledging the benefits to relationship that participation in the project offers, the students also communicated some concerns. These concerns focused on certain ethical and litigation issues relating to the level of close physical connection they experienced with service users in the dance. The students openly discussed pre-performance that they felt perhaps members of the audience viewing the dance would find it inappropriate to see service users and students supporting and connecting with each other in such a physical way.

Maldoom (2004) in his film “Rhythm is It” communicates the ethical management of such emotional and physical connections in the dance by awarding respect to the professional facilitation of the dance practitioner (Angus 2002). It is now established within art education programmes that each art practitioner is professionally trained in child and vulnerable adult protection policy and practice, undergoes formal protection screening and has adequate personal indemnity insurance cover. All of these ethical frameworks were employed with full regard to the art practice and facilitation of this project. The art facilitators took full responsibility with the support of the participants for the ethical integrity of the content and representation of the creative experiences for both service users and the students. One of the ways in which the integrity of the art experiences within the project was upheld was by using film recordings from previous projects to inform students of existing similar arts engagement between students and service users. The film recordings secured during the process and production elements of the project communicated the transparency in the project implementation.

Evaluation of the film evidence in particular highlights the usefulness of the different arts activities in generating deeper understandings of mental health from the student and service user perspective (Film Text 3.39-4.00). It also underlines how participation in arts activities encourages communication development and community building within a healthcare context. These developments offered the students from medicine, film media and social work an opportunity to bridge the gap between inter-professional education and practice, learning through a creative experience about potential future professional collaborations and enhanced understandings of each other’s disciplines (D’amour & Oandasan 2005).
The utilization of an interprofessional arts-based learning experience as employed in this project offers a unique opportunity for the further development of a collaborative patient/student centred practice-based framework that establishes valuable knowledge and meaningful links amongst students, service users, healthcare staff and artists.

The arts-based learning context within a healthcare setting offers the students and service users a flexible learning opportunity where their roles interchanged between educator and learner. The changing roles throughout the creative workshop experiences proved crucial in generating a democratic learning base for both the students and the service users. This proved a valuable teaching tool in terms of each group of participants learning from and supporting each other. The students were taught by the service users through an interactive experience the very real demands and challenges of living with a mental illness. The service users learnt from the students the demands and challenges of healthcare professional training that on occasions impacted negatively on the students’ mental health (Oandasan and Scott 2005).

The project framework was offered to the students and service users from the perspective of a right to cultural engagement within a healthcare and educational context. Although the intention of this engagement is knowledge-building it is not directly perceived from Oandasan and Scott’s perspective as a direct learning intervention (Oandasan & Scott 2005). The perspective from which the service users and the students viewed the experience was significant. Both groups reported they appreciated that the creative project was not another therapy intervention for the service users nor did it seem like another class for the students. The creative engagement was perceived by the participants as a series of arts-based activities where they felt safe to explore, discuss and articulate issues about their lives as well as learn new skills (Film Text 3.16-3.27, 3.40-4.59). This underlines the importance of providing an independent creative space within health and education that offers a meaningful cultural opportunity for students and service users that contributes positively to their well-being.

Reflexivity and interpretation through creative expression have been important components of the participants’ learning and expressive experience. The evaluation highlights the significance of reflective and interpretive practice for the students, service users and artists within the educational processing of the creative experience. It has prompted a self–understanding and facilitated a meaningful collaborative experience through which to better understand and learn about other professions and personal experience.

7. Conclusions

The evaluation investigated the experience of a group of interprofessional students from Medicine, Social Work and Film Studies, Queen’s University Belfast who participated in
a participatory model of immersive Arts in Health Project together. The project involved dance, music, visual art and film-making. The experience was successfully captured using film recording, discussion, reflective diaries and performance.

The service users and students reported that participation in the project enhanced not only their self-confidence and self-esteem. However, the student participants’ overriding memory of the project was they had a better understanding of mental illness and the role of the arts in contributing positively to managing the daily living experience of individuals with mental illness.

The outcomes of the evaluation clearly demonstrate the usefulness of service user involvement in interprofessional practice-based arts education programmes in relation to enhancing the interprofessional student learning experience. It also demonstrates the important consideration of the university student’s well being and acknowledgement of their right to access a cultural life and creative self expression and exploration as an integral part of their core education experience.

8. Recommendations

The following two recommendations have arisen from the evaluation:

1. An extension of the Project duration

   Whilst the six-day participatory model of arts engagement over a six-week period has been deemed successful through the evaluation, evidence from reflective data suggested that the project could have benefited from a longer duration than six-days (Film Text 5.21-5.44). A longer project would have given the students more time to build relationships with service users and each other. The artists reflected that a longer project would have afforded valuable time to teach the participants more creative skills. Time was limited usually to one hour shared time between students and service users due to the timetable of the service users and transport availability from the day centre facility. It is recommended that the project model would be further developed and extended to a ten-day or one semester engagement.

2. Integration of Participatory Model of Arts Engagement into mainstream Interprofessional Education Curricula

   Evidence contained in this report demonstrates the educational and personal value of participatory arts-based placements for students from different healthcare and arts disciplines. The report recommends that research is the way forward in this area with an intention of embedding similar and developed models of arts participation into mainstream curricular activity across professional disciplines within university education.
The report concludes with the voice of the student and service user summing up the essence of their experience and understanding gained through participation in the Interprofessional Arts in Health Project.

“Makes you feel that you are wanted. You want to be doing things that are good for you.” (Service User Film Text 5.09-5.20)

“Ultimately it showed that everything is not black and white. People are not just well or unwell. There is a spectrum of colours, a spectrum of people’s personalities and how these all come together to make us who we are.” (Medical Student, Film Text 4.40-5.00)

References


Unlocking Creativity: Making it Happen. (2001) Department of Culture, Arts and Leisure Northern Ireland (DCAL), Department of Education (DE), Department for Employment and Learning (DEL), Department of Enterprise, Trade and Investment (DETI) & Invest Northern Ireland, p 9, 11.


Acknowledgements

Centre for Excellence in Interprofessional Education, Queen’s University, Belfast, Dr Sue Morison, Director of the Centre for Excellence in Interprofessional Education, Mrs Sharon Dunwoody, Administrator of the Centre for Excellence in Interprofessional Education, Arts Care, Helen Shields, Arts Care artist-in-residence, Brendan Popplestone, Arts Care musician-in-residence, Belfast Health and Social Care Trust, Members of Ravenhill Adult Education Centre, film media students from the School of Languages, Literature and Performing Arts, social work students from the School of Sociology, Social Policy and Social Work and medical students from the School of Medicine, Dentistry and Biomedical Sciences, Queen’s University, Belfast, Dr Ciaran Mulholland, Medicine, Mr Declan Keeney, Film Studies and Dr James Campbell, Social Sciences.