

Participatory Engagement in Isolation: Curating multi-disciplinary Approaches to Enrich Social Support for Mental Health and Wellbeing.

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Abstract

In 2017 the Scottish Government proposed a ten-year-long strategy to establish a parity between mental and physical health. During this time, the Covid-19 pandemic in 2020 highlighted an exacerbating impact on mental health and increased need for improved support for mental health and wellbeing that is remotely accessible in order to care for people living in social isolation.

Following a call for multi-disciplinary working towards innovating frameworks for care, this research study argues that creative practices can be a valuable resource in addition to the medical sciences. Using curatorial practice as a method of inquiry, beyond the formal realm of the exhibition, remote Participatory Action Research engagements were created online and explored with a curated team of professional practitioners from arts, research and third sector organisations who concentrate on recovery-focused support for mental health. Rich insights emerged within these collaborative engagements by asking the question:

How can curatorial practice enhance multi-disciplinary approaches to designing alternative forms of gallery and community-based support for mental health and wellbeing through remote engagement?

Additionally, this research study explored the qualities and sustainability of remote engagement and understanding how to support multi-disciplinary working for improved exchange of knowledge, practices and resources across mental healthcare and cultural institutes who adopt curatorial practices.

The findings of this research offer a set of recommendations that suggest how further frameworks can be enhanced for the development of communities of practice for multi-disciplinary approaches and opportunities towards creating remote support for mental health and wellbeing.

Keywords: Remote engagement, Social Isolation, Mental Health and Wellbeing, Curatorial Practice, Participatory Action Research.

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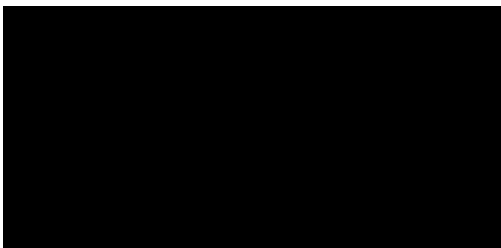
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Finally, I would like to dedicate this thesis to my Mum, an NHS nurse and volunteer for the vaccine trial, who went above and beyond during the Covid-19 pandemic to care for her community; and my Dad, who advocates that life is about seeking to continually learn. Thank you for instilling your values of health and care for everyone and remaining a positive and supportive energy.

Declaration

I, Fiona-Rose Stephens, declare that this submission of full thesis for the degree of Master of Research (MRes) meets the regulations as stated in the course handbook.

I declare that this submission is my own work and has not been submitted for any other academic award



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Appendix

The included Appendix is broken down into 4 sections containing information delivered to the participants and documentation of the Fieldwork that took place online, both visually and from the researcher perspective.

- A. Ethics
- B. Fieldwork
- C. The Miro Space
- D. Researcher's Reflective Journal

Chapter 1:

Introduction

Chapter 1: Introduction

Participatory Engagement in Isolation: Curating multi-disciplinary approaches to Enrich Social Support for Mental Health and Wellbeing.

1.1 Research Introduction

A national concern for population health gave cause to a greater focus on access to adult mental health services for the Scottish Government. In 2017 a ten year long mental health strategy was devised to establish a parity between mental and physical health working to improve areas of: prevention, access to services, recovery and a holistic approach to physical and mental health and wellbeing (The Scottish Government, 2017).

The key focus areas of the Scottish Government have relevance to the approaches of support outside of clinical settings, especially considering creative approaches and community-based support, for example, yoga and community gardens (GAMH, 2020). Taking a curatorial and interpretation focused practice, this research study uncovers some of the ways in which the relationship between arts and health can have a beneficial impact on mental health and wellbeing support in non-clinical settings.

There are many different interpretations of mental health, this research study takes on board the understanding that mental health is a state of psychological wellbeing (Pilgrim, 3:2020). In this thesis mental health is considered in tandem with mental wellbeing following the definition proposed by Dr Lina Gega, psychological therapist and expert in digital interventions for mental health at the University of York. Gega describes this relationship as 'two related but independent concepts', defining mental wellbeing as relating to our broad sense of self and ability to live our lives as close as possible to the way we want, therefore meeting our potential and forming strong relationships. Mental health is defined by specific signs and symptoms that cause a significant disruption to our ability to function and make decisions and therefore leading to mental health problems (Gega, 2021). Gega's definition of mental health and wellbeing is taken from a perspective of aiming to understand how digital technologies can meet holistic health needs and reducing preventable risk factors of illness (Digital Creativity Labs, n.d.).

The relationship between these concepts are explored in figure 1, which shows the development of poor mental health if low mental wellbeing is experienced over a length

of time. Characterising mental health and mental wellbeing together supports the recovery focus for mental health aspect of the research, as it considers the holistic entity rather than a diagnosis or deficit focus.

Other definitions such as the NHS focuses on a diagnosis (NHS inform, n.d.) and the World Health Organisation (WHO.int, 2018) provide too abstract an ideal of normal, which would be an inappropriate framing as the Covid-19 context disrupted normality in everyday lives.

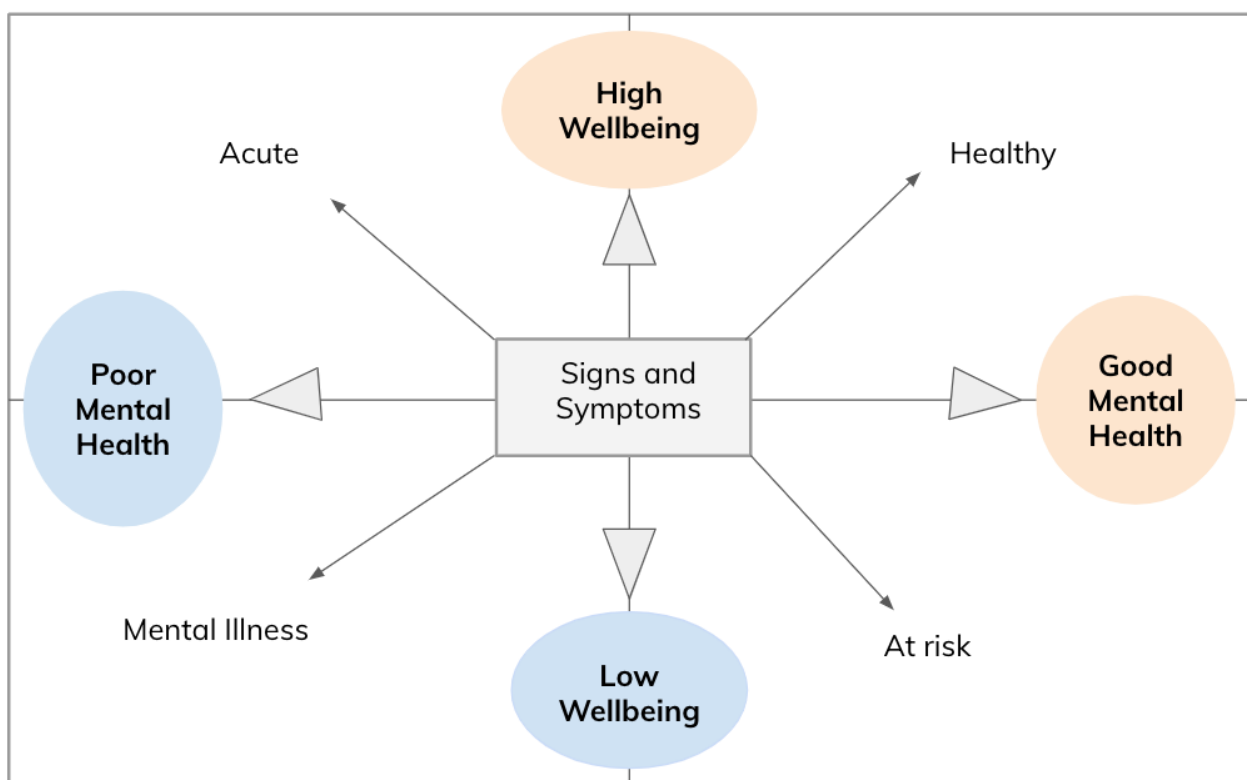


Figure 1: Stephens. F.-R. (2020) Relationship between Mental Health and Wellbeing. Diagram. Source: author's own

The duration of this research thesis coincided with a period of lockdown across the UK during the Covid-19 pandemic, which highlighted the challenge of remote working for citizens, remote delivery and access of mental health and wellbeing support and services on a national scale and increased social isolation due to the closure of public areas and limited contact outside of households. The study was undertaken by way of remote engagement methods as a means to better understand and navigate the delivery of support online, and to uncover if, and in what ways, gallery practices can better enhance support remotely.

This research study explores ways in which multi-disciplinary teams can work together to generate a mutual understanding for recovery-focused mental health and wellbeing support in non-clinical settings. Through a Participatory Action Research methodological approach, collaboration was curated between professionals from a mental health charity, arts and health research academics, and experts in gallery practices such as archives and collections to create a network of specialists within the fieldwork.

The participatory research took place in five key stages: Initiate, Explore, Define, Design and Evaluate. During these five key stages, workshops were designed to look at interpretational techniques with object handling alongside mapping and generative discussions. Prioritising the involvement and quality of participation

allows for the participant's experience to take place at the fore of the research, where a dialogic and reflective framework creates practical user-focused outcomes for improvement. (McIntyre, 2008:15, Kemmis, McTaggart and Nixon, 2014)

1.2 Evolution of Research

The framing of this research study has changed quite considerably from its conception through the early stages of initiation. The research potential emerged from an observation of the lack of a routine process of self-referral for NHS talking therapy in Scotland. In the process of taking the initial proactive decision to visit their GP, individuals at a pre-diagnosis stage face a lengthy referral and assessment process with substantial waiting times in between (isdscotland.org, 2019). Initially, the research sought to explore how the experience of the gallery space, constructed through curatorial practice – the explorative and thought-provoking qualities – could be used to build a framework of engagement and early support for people waiting for a mental health diagnosis outside of a clinical setting.

With the disruption of the Covid-19 pandemic in the UK from March 2020, the direction of research became more receptive to the impact that this unprecedented period of uncertainty and isolation can have and has had on mental health and

wellbeing. Academics from America, China and the UK called for attention to the care of patients with mental health disorders, and the ramifications of Covid-19 globally, describing it as a 'parallel epidemic of fear, anxiety, and depression' (Yao. H, Chen. J & Xu. Y, 2020). There is an increased vulnerability for those with mental health concerns, who are at risk of relapse and worsening conditions, where access to regular outpatient treatments are difficult to attend in lockdown.

In view that current circumstances continually shaped the framing of this research, the research question also became subject to adaptation as circumstances changed and the challenges of life in lockdown led to new ways of working. The study aimed to maintain an inquiry of how curatorial practices can contribute to support for mental health within gallery and public spaces, however lockdown measures due to the spread of Covid-19 meant that these spaces closed for over six months, and subjected to continual evaluation of phases. Staff were furloughed and activities and audience engagement moved into the online realm instead. This opened up a whole new area of research to undertake as the situation developed.

In response to the complications faced in lockdown, the research was adapted to focus on remote approaches to mental health and wellbeing support, and how

creative and digital technologies, as available alternatives to public and community spaces, can enhance social interaction and engagement in a meaningful way.

Understanding and working within these challenges, from a design research perspective revealed a strong desire to explore the ways in which professionals in the arts, third sector and health and social care were accessing, communicating and collaborating online. The initial question of 'How can the role of the gallery support access to mental health treatment in the community through visual art engagement, collaboration and creative thinking?' was adapted to encompass an understanding of how would this type of support be delivered remotely. This new direction focused on the curation of different experienced disciplines to explore this question together remotely, rather than direct involvement of people living in social isolation.

1.3 Research Questions, Aims and Objectives

In response to the direction of curating the experiences and values of practitioners in order to explore support for mental health under remote contexts, the main research question asks:

How can curatorial practice enhance multi-disciplinary approaches to designing alternative forms of gallery and community-based support for mental health and wellbeing through remote engagement?

A set of sub-questions were developed to support the direction of the research project:

- How does the quality of a curated, remote space change or enhance the quality of engagement and sustainability of engagement?
- How can multi-disciplinary practitioners be supported by curatorial practices to collaborate for improved exchange of knowledge, practices and resources across mental healthcare and cultural institutes who adopt curatorial practices?

The following aims and objectives were created to answer the research question:

Overarching Aim : Create an understanding and set of recommendations of how curatorial practice can be used as a method for research beyond the formal realm of the exhibition to wider communities and enhance access to mental health support.

Objectives:

- Curate a group of multi-disciplinary practitioners to explore the relational and individual goals and contributions towards social support to enhance mental health of people living in isolation.
- Design collaborative workshops to understand how collaborative remote working is experienced and ways of curating information digitally.
- Understand what forms of support need to be engaging, sustainable and patient-oriented by facilitating co-design workshops.
- Developing a framework of recommendations for galleries and communities.

Chapter 2:

Context and Literature Review

Chapter 2: Context and Literature Review

Key Words:

Remote engagement

Social Isolation

Mental Health

Curating

Interpretation

Participatory Action Research

2.1 Background

This chapter aims to explore the current contexts and processes of support for mental health from within clinical and community-based settings and consider where the curatorial practice fits in to address current challenges of accessing mental health services and the impact of the Covid-19 pandemic on mental health.

An initial review of literature of the Covid-19 pandemic rationalises the decisions made to adapt the focus of the research study towards remote engagement and the impact of social isolation on mental health.

The current modes of accessing treatment, peer support, online platforms and alternative options are then explored to understand what the experience is like for someone seeking support in Scotland.

How mental health support is dealt with in non-clinical settings is then highlighted to demonstrate the benefits of projects that promote mental health, specifically within galleries and museums by looking at the three-year long academic research study and National Alliance For Museums, Health & Wellbeing undertaken by Helen Chatterjee (Desmarais, Bedford, and Chatterjee, 2018)

Perspectives of performativity, knowledge production and the role of the curator are discussed through the essays of Charles R. Garoian (2001), Eileen Hooper Greenhill (1992) and Mike Tooby (2020) to ground the value of curatorial practice within academic and participatory research.

Finally, a scoping review of what galleries, museums and charities have been doing to stay connected during the Covid-19 pandemic was undertaken to explore what has been working, missing and to propose how to take these ideas forward to support multi-disciplinary working for mental health.

2.2 Stay Home, Stay Safe: An Overview of the Covid-19 Pandemic

In late 2019, the novel Covid-19 infectious disease broke out. By March 2020, the outbreak had been declared as a global pandemic (WHO, 2020). In response to the threat of the virus the UK government placed national lockdown restrictions, including staying home and social distancing, to ease pressure on health services; reduce rate of infection transmission and deaths; and to avoid a severe second wave of infection later on in the year (The Guardian, 2020). Extensions to the lockdown phase saw the temporary closure of business, public spaces and disturbance to all levels of education.

Amongst limits to outdoor exercise and essential journeys in public for everyone, individuals displaying associated symptoms to the virus were recommended to self-isolate for 14 days. For those with existing health conditions and more at risk of being seriously affected, they were to remain at home and shielded for 12 weeks (NHS, 2020), or the duration of the lockdown.

The term social distancing relates to the 2 meters physical distance to be kept between individuals of different households, in addition to closure of non-essential public and recreational sites such as schools, museums, gyms, libraries, cafes, community centres and places of worship (NHS inform, 2020). Measures enforced to

curb the spread of the virus, such as working from home, closure of public spaces, separation from friends and family outside of the household, and remote access to healthcare for non-emergency care further exacerbated social isolation and have had a considerable impact on the general population's daily lives and wellbeing (White and Van Der Boor, 2020, Smith and Lim 2020, Banerjee and Rai, 2020, Matias, Dominski and Marks, 2020).

2.2.1 Mental Health Impact: Loneliness and Isolation

The Covid-19 pandemic is argued (Moreno et al., 2020) to have highlighted a much-needed focus for a holistic approach to care. In the initial phases of the pandemic, the health service's first priority was to attend to the emergency of physical symptoms and related health conditions to the virus. However, the implications that the epidemic has had, direct and indirect, on mental health at a population level has become widely and increasingly acknowledged (Caulfield, Kevin, George and Mark, 2020, Cullen, Gulati and Kelly, 2020, SH Ho, et al 2020).

In addition to the psychological effects felt by groups of at-risk individuals who are shielding in quarantine, the emotional distress of health workers on the frontline, drastic lifestyle changes and fear in response to the virus have had an exacerbating

effect on vulnerable groups, such as those with established mental health and social inequalities (Holmes and O'Connor, 2020). A key survey conducted by MQ: Transforming Mental Health and the Academy of Medical Sciences (Cowan, 2020), where 86% of participants were indirectly affected by Covid-19 (Cowan, 2020:11), found that when questioned about isolation, loneliness was a frequent concern where individuals felt trapped:

“Many responses suggested a need for strategies to help individuals cope with isolation, and to help them help others, to prevent the deterioration of mental health and wellbeing if the lockdown persists” (Cowan, 2020:11).

The stakeholder survey of people with a lived experience of mental health problems, which also included supporters, health professionals and researchers showed:

“(...) a general concern about people becoming mentally unwell as a result of the pressure of the pandemic, including because of the uncertainty, the loss of control, the fear of death, the fallout of the bereavement and the practical and economic challenges [in addition to a concern for] potential implications for societal mental health and wellbeing” (Cowan, 2020:6).

With regards to access to mental health treatment and services during this time, there was a level of concern for vulnerable individuals from a mental health aspect but also potentially across pregnancy, people with autism, people with learning disabilities, children in care, refugees and families in poverty. Access to support was not only a concern highlighted during the period of the pandemic but for the lasting effect that it could have on individuals and future demand for services (Cowan, 2020:6).

During the pandemic there has been a rise in non-Covid-19 related deaths. The message to protect the National Health Service embedded into the practice of social distancing has led to individuals increasingly putting off their non-Covid-19 and mental health concerns and medical interventions (McNamara, A. 2020), which adds to the pressure of increasingly lengthy waiting times for access to mental health services.

A rise in suicide deaths of individuals with and without previous acknowledgement of mental health concerns has been observed in early global reports (Thakur. V, Anu. J, 2020), where motives have included prejudice and guilt of passing on disease (Griffiths. M, Mamun. M, 2020). In previous SARS epidemics in Hong Kong, a similar fear amongst older adults of becoming a burden on their family and social

disengagement from families led to an increase in suicide deaths (Yip, Paul S.F. Cheung, Y.T. 2010).

Existing vulnerable groups present a concerned risk of developing psychiatric morbidity post-Covid-19, beyond isolation, caused by work stressors, economic decline and PTSD, for example. It has been recommended that targeted follow-up interventions for mental health and wellbeing should be put into place for communities affected (Torales. J, O'higgins. M, et al, 2020).

The call for multi-disciplinary action for identifies the coordination of practitioners from 'psychology, psychiatry, clinical medicine, behavioural and social sciences, and neuroscience' (Holmes. A, O'connor. R, 2020:2) to be prioritised as an essential group to research and propose frameworks relating to the pandemic. However, there is a gap in knowledge here that this research study addresses by focusing on the creative and cultural sectors for additional insights to innovate care and support from a non-clinical social point of view.

Constructively, the MQ survey questioned stakeholders on what has helped during this time. Amongst those who answered listed that: regular communication via online platforms and engaging with creative hobbies such as craft, DIY, cooking, drawing and visiting online museum tours as a way of staying active and productive

helped to enhance wellbeing (Cowan, 2020:31). This secondary information of stakeholder's survey responses supports a rationale for research by creative practitioners into how to support mental health through dynamic resources and platforms delivered and signposted online.

2.2.2 Long Term Implications of the Covid-19 Pandemic on Mental Health

It has been reported that, where there has been an almost double increase in demand for access to psychological services, regular routine appointments have fallen by almost half, which is leading to a predicted surge in referrals beyond the peak phases of Covid-19 (Royal College of Psychiatrists, 2020).

It is likely that the psychological effects of Covid-19 will last beyond the pandemic with expected long-term economic decline (Gunnell, David Appleby, Louis 2020).

The transition of such approaches from clinical and broader modes of support, which helped to enhance wellbeing during isolation, is important to be developed for sustainability and future use. The unprecedented Covid-19 pandemic has made the partnership between creative disciplines and health even more important to foster. Cultural sites are identified in this thesis to have the potential to play a key role in reducing the long-term burden on mental health services and future approaches to patient waiting times. In return, learning and building on how cultural

institutions have contributed during this time can develop a direction and need for creative services to recuperate social capital and connectivity across communities.

2.3 Current Process of Seeking Mental Health Support in the UK

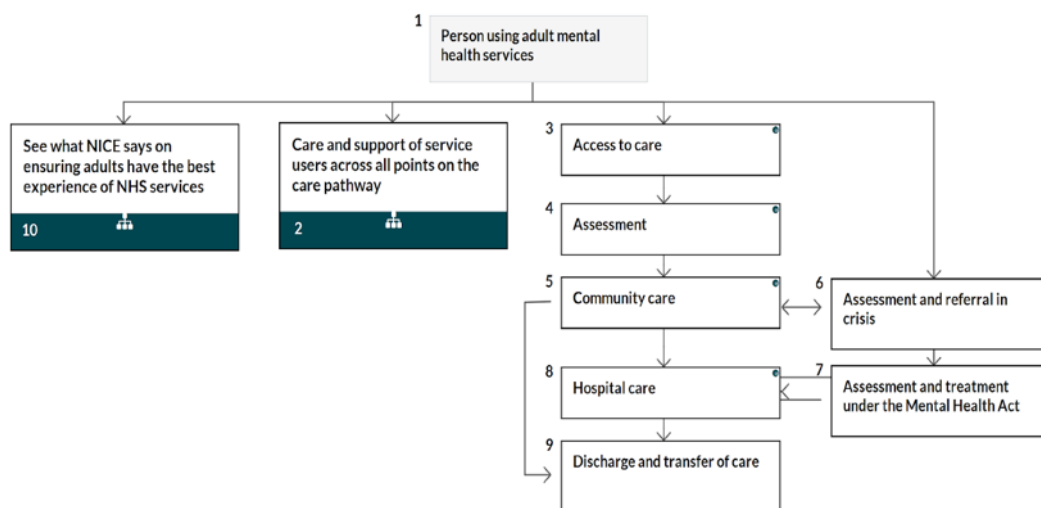


Figure 2: Service user experience in adult mental health services overview. Source: NICE Pathways

This research project was developed from an initial proposal to explore the challenges people face when accessing mental health support in Scotland. At present, there is no routine process for self-referral for talking therapies in Scotland (Jarvis, 2019). Figure 2 shows the current process of seeking access to adult mental health services, however what is not shown is the length of patient waiting time in between each step.

In NHS England, for example, there is the Improving Access to Psychological Therapies (IAPT) services, which includes a patient web portal for finding local services and making self-referral requests online. These IAPT services have been shown to be a vital link to accessing support, however, with increased use of over 1.5 million referrals made in 2018 and a lack of financing in local services to train staff, half of patients waited 28 days between their first and second appointment and one in six patients waited up to 90 days between 2018-2019 (Triggle. N, 2019). The gaps between appointment times means that initial expectations are unmet and faith is lost in the initial proactive decision to seek help.

In Scotland, there is no such option as IAPT for finding local services and making self-referrals. Individuals are required to go through their GP, adding another step in the lengthy process of assessments to find the right mental health services and treatments. The current target waiting time for psychological therapy is 18 weeks, with only a 77% success rate of referrals being fulfilled within this time (Public Health Scotland, Gov. Scot 2019). The waiting period of over four months presents a challenge of access to support and treatment for those seeking help, yet services still find it difficult to successfully meet this target.

2.3.1 Self-help Services and Online Peer Support Network

In an attempt to address the lack of professional support available to people when waiting for a clinical appointment and the need for alternative options such as remote access, there are a few self-help services signposted through NHS Scotland. For example, Breathing Space (breathingspace.scot) is a free self-service helpline delivered by NHS 24 for “first stop” support and information about mental health. There is also Moodjuice (moodjuice.scot), a text-heavy website offering self-help guidelines and resources for a range of common difficulties from a cognitive behavioural perspective, now in the process of being decommissioned after 16 years.

In addition to self-help services there is the route of peer support groups such as The Big White Wall (BWW), now rebranded as Togetherall (togetherall.com), accessible for free through the NHS, employers and universities. BWW offers an anonymous space for a trained counsellor moderated peer-support in a text only message-board format and a clickthrough resource of ‘guided support’ and self-assessments to capture mood over time and use. Creating an anonymous space reduces the stigma around mental health and other social distinctions, it encourages users to share their experiences, which they might not with their family and friends. This interpersonal engagement allows for an intentional dialogue where

participants can share their stories and hear the common experience of others in the peer community to better understand how to cope with their concerns and problems.

Online peer support services and message boards have shown to promote empowerment (Miyamoto Y, Sono T. 2012;8:22-29). However, detailed descriptions of personal and emotional experiences can present an ethical dilemma of reinforcing or promoting negative behaviours in some high-risk individuals, particularly amongst concerns of non-suicidal self-injury, addiction and eating disorders (Lewis et al. 2017:1501–1513, Keipi. T, Oksanen. A, Hawdon. J, Näsi, M & Räsänen. P, 2017:634-649). If discussions online aren't properly moderated and focused towards a recovery narrative, peer support runs the risk of triggering unhealthy behaviours as a coping strategy.

From these reviews, it is evident that for peer support to be appropriately conducted it needs to be thoroughly moderated by a multitude of voices beyond the generic faceless Wall Guide that BWW offers. Online support where users can build a community through experience can be a viable mode of support for those who are isolated and seek a sense of community. How individuals are signposted to online support communities is an interesting challenge, which this research will respond to further so that individuals are able to avoid potentially triggering sites.

Furthermore, as the benefits of social capital on the impact of recovery have been recently evidenced (Brown and Baker, 2018), this research study will explore further how to creatively and authentically include the nuances of social interactions, such as building rapport and trust by sharing experiences and jokes within a safe space through intentional participation.

2.4 Support in Non-Clinical Settings: Mental Health in the Gallery and Museum Settings

There is value in the support which is delivered in community and public settings, which offers facilitation in social settings without the connotations attached to clinical spaces.

A systemic review of existing and recent gallery-based programming (exhibitions, projects, additional workshops and audience engagements) of major public art galleries across the UK was conducted to scope the ways in which galleries and partners engage in the community for the promotion of mental health and wellbeing (fig,3).

Chapter 2: Context and Literature Review

Programme	Artefact	Health and Wellbeing Programme	Take Notice	Awakening The Senses, Slow Art Day, Art and Mindfulness Day Retreat	Breathing Space Project
Gallery	North Wales Museums	The Beany House of Art and Knowledge	Manchester Art Gallery	Pallant House	Yorkshire Sculpture Park
Target Audience	people at risk of or recovering from mental distress and to promote mental wellbeing 18+	Dementia and Social Isolation, Families and school pupils	Open to all – general public	Open to all-general public	Adolescents, a variety of organisations and schools
Activity	Museum Object Handling	Wellbeing At Home, Sensing Culture, Health and Wellbeing Exhibitions, Mindfulness Mondays, The Power of the Object Group, Sounds, Health and Wellbeing Commissions	Mindfulness, looking at art	Mindfulness, looking at art, guided meditation, mindful drawing and writing sessions	Making, learning and talking about art. therapeutic art project, a safe art space for adolescents aged 14-16
Signposting and Funding	referred from GPs, community mental health teams, third-sector organisations and psychiatric units	Paid for and free activities	Free event	Booked events	Arts Council England, The Liz, Terry Bramall Foundation, Leeds College of Art and Design and Victim Support referred via secondary schools
Date	2011-2012	Ongoing	Ongoing	Ongoing	2012-2015
Relevance to Research	Creative engagement in museums improve the mental health and wellbeing of people experiencing mental distress	Therapeutic Museum.	Looking at art as a form of mindfulness rather than making art.	Access and engagement to alternative support	Themes of physical and emotional spaces developed through dialogues
Reference Link	https://artefactproject.files.wordpress.com/2015/04/artefact-final-report.pdf	https://canterburymuseum.co.uk/participate/health-and-wellbeing/	https://manchesterartgallery.org/news/take-notice-art-and-mindfulness/	https://www.liminacollective.com/	http://www.atmag.org/wp-content/uploads/2014/06/BS-case-study-LR.pdf

Figure 3: Table of Art and Health Programmes in Galleries and Museums in the UK. Source: Author's own

Programme	Combat Stress	The City of Broken Dreams	Creative Dialogues	Is Volunteering Good for Your Health? Museum in a box	
Gallery	The Lightbox	BALTIC	Tyne & Wear Archives & Museums	Kirklees Museums and Galleries	
Target Audience	Veteran's mental health	Art Therapy	People who have multiple social and health needs through visual art.		
Activity	Bespoke art therapy admission for a small group of veterans	New art therapy project involving the Northumberland and Newcastle Gateshead Children and young Peoples' Services and BALTIC	To engage people in 'creative dialogues' by using visual media and creative arts practice to support meaningful Patient and Public Engagement.- Exhibition Output	External evaluators to assess the health and wellbeing impacts of their Volunteer programme. The Audience Agency developed an evaluation framework, which focused on the 5 Ways to Wellbeing . 20 multi-sensory objects to help stimulate discussion	
Signposting and Funding		Working alongside a BALTIC artist and two art therapists, seven young people explored their thoughts and feelings inspired by Fiona Tan's exhibition DEPOT at BALTIC	Research Project, EngageFMS, the Faculty of Medical Sciences programme for patient and public engagement/involvement, and the Institute for Creative Arts Practice at Newcastle University.	National Lottery Support Funding	
Date	2016	2016	2016	2019	
Relevance to Research	Using art to open a dialogue around mental health	Multidisciplinary working	Recovery, community and collaboration focus	Using objects as a tool to stimulate discussion. Research into impact of volunteer role on wellbeing	
Reference Link	https://www.baat.org/About-BAAT/Blog/40/Combat-Stress-The-Lightbox	https://www.baat.org/About-BAAT/Blog/43/The-City-of-Broken-Dreams-BALTIC	https://creativdialoguesproject.wordpress.com/about/	https://www.culturehealthandwellbeing.org.uk/case-studies-museums-health-and-wellbeing	

Figure 3 continued: Table of Art and Health Programmes in Galleries and Museums in the UK. Source: Author's own

There is a vast number of free events and activities run by galleries and museums across the UK. Take Notice at Manchester Art Gallery, for example, focuses on engaging in mindfulness practices by way of guided group sessions delivered by the learning and engagement team in the gallery space. This activity promotes an alternative interpretation of art within the gallery that isn't contextually situated, but where taking time and observing become the key activity. This type of activity helps to build an understanding of mindfulness and a positive relationship for audience attendance; however it relies heavily on an existing audience who actively attends the gallery.

Furthermore, projects such as Artefact, signposted to existing service users through GP and mental health services; Creative Dialogues, working alongside art therapists; and Breathing Space Project, which engages adolescents via secondary schools, demonstrate that there are existing ways in which multiple sectors can work together to deliver and signpost projects specifically aimed at support for mental health in a community setting, in addition to creating a platform for discussion.

Making wellbeing relevant and a part of gallery and museum planning is an important factor in strengthening accessibility to services in the community. The Happy Museum Project, an Arts Council England funded project developed to provide a framework for museums to develop a holistic approach of wellbeing and

sustainability, with aims to create a collaborative and shared ownership across the organisations and audiences. The project recognises that good community wellbeing and resilience relates to co-participation within shared environmental matters (The Happy Museum Project).

While the Happy Museum Project provides a rich source of case studies of partnered, evaluation reports and guidelines for gallery staff and partnerships, there is a gap in information of how to support these partnerships and projects in remote or online settings where participants cannot access gallery spaces.

The projects detailed here highlight that there is an increasing connection being made between the arts and health sectors, demonstrating that mental health in particular can be addressed in galleries who engage with wellbeing and sustainability in the community.

2.4.1 Museums as Spaces for Wellbeing 3 year-long study and National Alliance For Museums, Health & Wellbeing

At the time of writing the thesis there is a lack of academic research surrounding arts, health and digital combined contexts due to the novel challenges created by

the Covid-19 pandemic. However from the review of exemplary studies shows the positive relationship between cultural institutions and mental health and wellbeing.

Professor Helen Chatterjee of UCL led a pioneering research project that grounds the value of partnerships between cultural and health institutions in relation to the questions being asked in this research study.

The research project describes sites of culture, such as galleries and museums as:

'...key players in supporting health and wellbeing for individuals and communities, through a common and robust set of commitments to community, inclusivity, creativity, lifelong learning and partnership, as well as extraordinary resources in the form of people, spaces and material culture'
(Desmarais, Bedford, Chatterjee, 2018:53).

Positioning the qualities of health and wellbeing practices as bound to knowledge production and connectivity, mutually links to the inherent goals of cultural sites articulating these ideas as offerings to their audiences. This set of shared values between health, community and culture identified the role for curatorial practices to support social connections in addition to knowledge sharing.

Building on this study Chatterjee (2020) writes of the multiple benefits of museums and galleries as sites for wellbeing where legacy and sustainability can work to build effective resources and networks of expertise (Chatterjee, 2020:118). This growing focus on community assets for holistic healthcare has worked to develop social prescribing as a formal relationship between health and community settings (Chatterjee, 2020:122).

Due to lack of established models of evaluation from a non-clinical approach, it is suggested that museums and galleries use this gap to reframe their positions as community public health assets to document such practices for future funding and partnership opportunities (Chatterjee, 2020:122). It is through curatorial practices in which these goals can be realised, as knowledge produced for coordinated exhibitions, events and interpretation can reflect an asset-based institutional ideology.

2.5 Curatorial practice

After reviewing the current process of accessing traditional and alternative forms of support on offer, it is pertinent to explore ways in which curatorial practices can address some of the key challenges.

The term 'curator' has become contentiously used. When positioned within research, the role of curatorial practice can offer up a new set of methods that foster and support the production of thoughts, criticality and expression beyond the central role of the exhibition and artwork. Positioned within this research study, the curatorial experience as experimental and situational, outside of the form of a display, relates to the research question's mode of exploratory inquiry and connects with the potential to develop and conduct curatorial methods for a framework to enhance participatory engagement.

In this research study the understanding of curatorial practice and values is taken from the realm of the gallery, as something discursive, designerly and upholds a social criticality. A particular branch of this practice, which this research study will focus on goes beyond the exhibition, instead exploring the production of knowledge and meaning making through curatorial interpretation and learning and

engagement strategies practiced within museums and galleries (Hooper-Greenhill, E. 1992, 1991).

The analogy of curating a display is used to understand how curatorial values can be transferred to this research study. Figure 4 shows the way in which curatorial practice puts research into a specific theme and then brings artists or artworks, in this case participants with professional expertise in different fields who work within the same shared aim of support, to create a dialogue of different contexts which are presented and shared together as an exhibition of values and knowledge interpreted by the audience.

This analogy relates to the social learning theory of Etienne Wenger as a community of practice (Wenger, 1998). Curatorial practice can act as what Wenger asserts as a broker, a role which makes connections between practices (Wenger, 1998:105). In this sense the curatorial role has the opportunity to be a mediator to introduce elements between multi-disciplinary working, using methods and knowledge of contexts, to create and present knowledge and interpretations between artworks (in this case, participants) and audiences (or other disciplinary areas).

Utilising curatorial practice in this way disrupts the traditional hierarchies of the curator as the individual who has the knowledge, instead frames the knowledge that participants and collaborators bring to build the bigger picture.

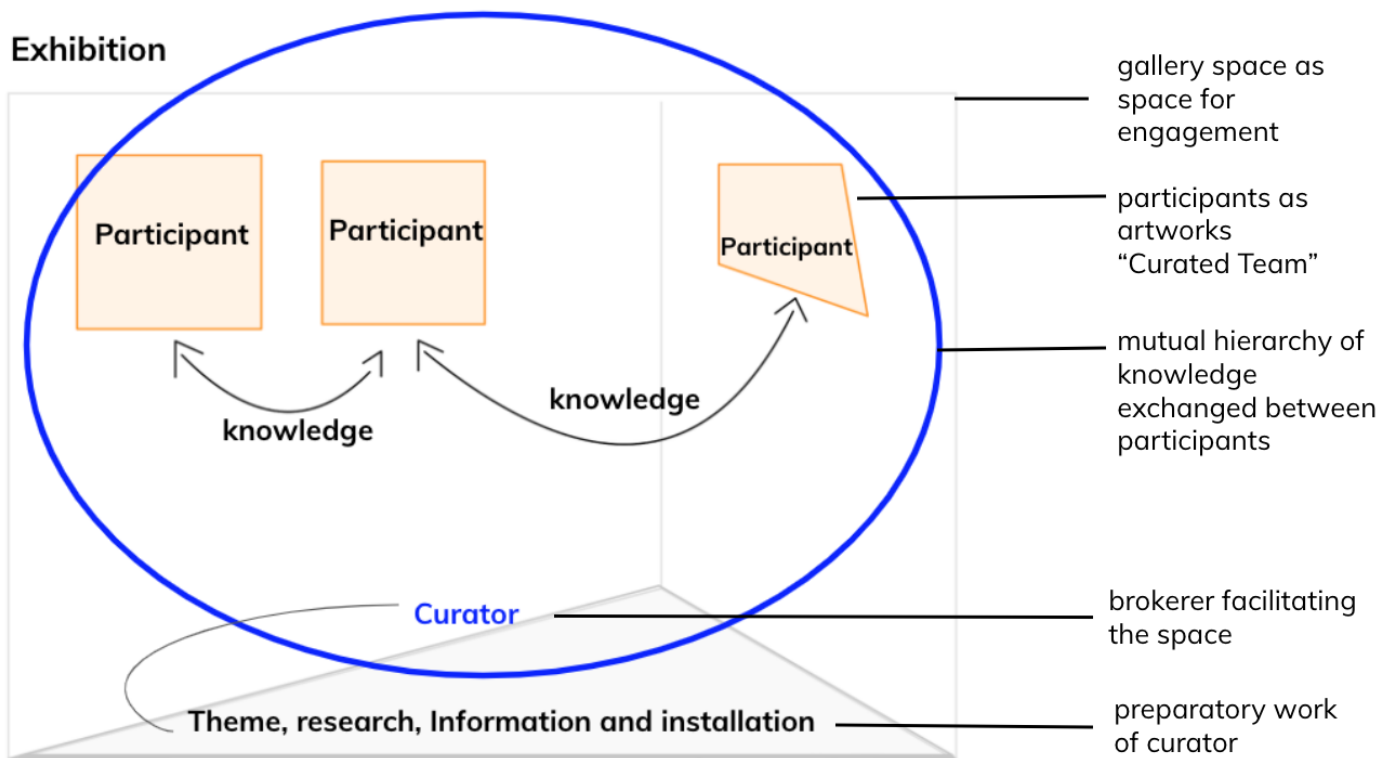


Figure 4: Stephens. F.-R., (2020) *Analogy of curating display: Situating curatorial practice in research.* Diagram. Source: Author's own.

2.5.1 A Performative Framework

Exploring the experiential aspect of the museum opens up a discourse about the liminal, immaterial space where public and private roles can be contemplated in the philosophical sense of performativity. The concept of performativity in this case relates to how the 'self' is presented in accordance to individuals or contexts within a given situation (Goffman. E, 1959). In the essay *Performing the Museum*, Charles R. Garoian (Garoian, 2001) proposes performing the museum as a 'radical

pedagogical strategy that critiques the exclusivity of the Enlightenment mindset in order to create an open discourse between museum culture and viewers' (237), where the strategy Performance of Subjectivity is presented as a way in which audience viewers can gain agency when situated within the culture of a museum.

In a set of questions illustrated, Garoian asks, "what is the relationship between museums, their cultural artifacts, and performance? Who performs the museum? Whose memory and cultural history is being performed?" (Garoian, 235). Such a question can be appropriated within this research study to help understand ways in which the concept of the gallery can become a platform to think about experiential qualities and how to enhance support for mental health. Garoian (2001) answers with an offer of critical insights with influence from John Dewey's (1998) five stages of inquiry to offer up five performative strategies of museum education as a proposed framework for 'multicentric' dialogic and critical process:

1. Performing Perception
2. Performing Autobiography
3. Performing Museum Culture
4. Performing Interdisciplinarity
5. Performing the Institution

As a strategy for engagement and interpretation, Performance of Subjectivity entails a critical thinking exercise about how a museum's collection is presented and how this represents the ideologies and beliefs of the institution. As a viewer, this information is interpreted from their autobiographical perspective. These acts have the ability to be performed outside of the museum site in a multitude of contexts and encounters.

Performative roles identified from a patient or practitioner perspective, who engage in a dialogue within a clinical space, can be framed within these five performative strategies. How clinical codes, such as language and actions, are used to understand non-visual concerns, such as mental health, will be an important factor when thinking about what hinders or enhances speech actions. Creating a reflective space outside of the clinical realm allows exploration of the idea of performing interdisciplinarity. Creatively responding to the criticality of thought from multiple perspectives can function as a mode of inquiry to engage service providers and, in turn, empowering service users.

2.5.2 Curator as facilitator

The roles within the museum that Garoian wrote about assume a top-down hierarchy of knowledge, where knowledge presented within the museum is

delivered from the academic and objective perspective of the curator and then consumed by the passive visitor. In a similar process, clinical and alternative settings for support assume a constructed narrative of health. This research study positions multi-disciplinary working as key method in understanding and designing meaningful support by way of including the voices of different experts and sectors.

Curator Mike Tooby reflects that framing curatorial practice by adopting participation as a tool to inform the curatorial work of a project or programme, such as support, helps to build a discussion of what each role will play within positioning curatorial focused projects. He further suggests that this methodology works to break down the 'binary contrast' of who has power over knowledge between institution and audience:

'...that between curator as author in generating the idea of the exhibition and overseeing its delivery; and the subsequent (and only subsequent) work of the learning and engagement curator in sharing this with audiences. It also compares ideas generated in socially-engaged art practice with their general applicability' (Tooby. M, 139:2019).

Within this study the curatorial role becomes re-imagined aligned with that of a socially engaged and ethical facilitator that recognises the value of equal

collaboration, participation and shared decision making, rather than abiding by the traditional gate-keeping role of the curator (Tooby. M 148:2019).

2.6 Remote engagement

Sudden and unforeseen closures due to the lockdown as a result of the Covid-19 pandemic gave way to an emergent space for innovative ways to socially connect and undertaking remote working from home. Increasing online engagement through social media became important in tackling mental health concerns of loneliness and reduced social activity during isolation.

While this seems to be an unexplored subject within academic research, Librarian and archivist, Trevor Owens, is an advocate for accessible research. Owens advocates the practice of curating in the open, where this approach to transparently sharing curatorial work and processes through remote engagement could expand the impact and reach of the work (Owens. T, 2016).

Other galleries, such as the Glasgow-based and artist-led Transmission gallery, released a statement in response to the Covid-19 pandemic after a period of inactivity in the absence of a material social space. They stated that this shift in online operations and expectations led to rethinking how the space supports and

encourages social discourse to serve the community in these circumstances (Transmission, 2020). The space took a noticeable step back in order to open meaningful practices rather than posting or creating online, where a saturated conversation becomes lost in a wave of similar messages from institutions.

Both of these ideas, praising and critiquing remote and online engagement, work towards understanding the importance of generating meaningful conversations to support communities. Translating these ideas towards how to creatively support mental health suggested a necessary framework for considerations that go beyond just the knowledge of one individual or institution.

2.7 Conclusion

The contextual scoping in this chapter argues for a critical exploration of ways in which mental health support can be developed by creative practices in social and non-clinical settings.

In addition, the literature review supports the benefits of multi-disciplinary working, which this research study aims to meaningfully build on the knowledge towards ways of orchestrating how to facilitate this approach.

The performative framework explored by Garoian (2001) addresses the contextual challenge of social isolation and mental health support. These ideas of performativity and constructed knowledge are taken into the research design and analysis of the project, to enhance the social learning aspects, from Wenger, for multi-disciplinary working.

Chapter 3:

Research Design

Chapter 3: Research Design

3.1 Introcution

The research study crosses different disciplines and expertise from arts, health, third sector, academia and digital aspects of remote working. Initiating an inquiry on curatorial practice in the context of this research, with contributions from other professional disciplines, necessitated an exploratory methodology situated within a participatory paradigm.

The methodological challenges within this study are firstly, gaining the continual consent from the participants and building trust in order to have a meaningful conversation about support for mental health and their individual practices.

Secondly, the challenge of conducting research that seeks to develop knowledge between disciplines questions the ownership and hierarchies of knowledge. For the integrity of the research and the participant's contributions, the role of the researcher must constantly be examined and challenged through reflective practices to understand contextual bias (Thummapol, 2019). An additional layer to this specific inquiry into remote modes of support by way of using remote modes of engagement requires constant flexibility and reflection of how the research is conducted.

This chapter sets out the Participatory Action Research methodological framework, process and methods used throughout the research project to collect data and generate qualitative insights in response to the research inquiry. The research process involved participants from a curated team of practitioners, who engaged in a series of one-to-one and collaborative exploration activities to create a meaningful contribution towards the research.

The following section describes the role of curatorial practice in the context of this research. In addition, it provides an overview as to how the research was conducted by describing the ethical considerations, methods, planning and analysis used to answer the questions asked within this study (as iterated in section 1.3 of the thesis)

How can curatorial practice enhance multi-disciplinary approaches to designing alternative forms of gallery and community-based support for mental health and wellbeing through remote engagement?

3.1.1 The Role of Practice

To demystify the role of curatorial practice (within the context of research), for an inquiry into support for mental health, this section will explore beyond the Latin etymology of the phrase to curate is to care. Instead, this research study takes on the curatorial by way of thinking about the concept of the gallery space as something which is relational, experiential and a conducive environment for open and facilitated discussions (through art and interpretation). In addition, curatorial practice offers a mode of inquiry to support and inform the research process by offering a set of methods exploring and presenting knowledge to be made accessible to an audience.

An overview of the values within curatorial practice is outlined in the next sections to support and rationalise the use of curatorial practice as a mode of inquiry within this research towards reaching a broader non-curatorial audience.

3.1.2 Curating Contexts

The exploration of this project has been motivated by a curatorial lens, where the experience of implementing methods, constructing and sharing knowledge is situated within the relational and performative implications of a gallery setting

(Syzlak, 2013:219). This research study aims to make clear the distinction of curatorial practice as something that is not exclusive to the staging of exhibitions or ways of displaying in the event of knowledge (Martinon, 2013) and aligns to a more specific practice of, as Ine Gevers asserts, 'curating contexts' (Gevers, 1997). The idea of curating contexts relates to Aneta Syzlak's notion that it is neither a discipline or methodology but an approach to reveal possibilities and also creating an understanding that the role of the curator goes beyond the exhibition and extend towards wider contexts than just the capacity of art (Syzlak, 2013:215).

Unlike a methodology, the concept behind curating contexts as a practice isn't to form a set of rules or boundaries for use. It's the diversity of the practice that is able to incorporate curatorial techniques and engage in a concern for socio-political, institutional and material issues, which can support research alongside a more rigorously understood methodology. When dealing with the topic of enhancing support for mental health with a focus on galleries, creative knowledge is often referred to as tacit and intangible (Kaethler, 2019). Including the lens of curatorial practice within this research study will work to reveal and interpret creative and social insights.

Additionally, since the mid-1990s (Tate, n.d.), the educational turn in curatorial practice, which presents the notion that the role of art can exist in and for wider

discourse outside of the art world, has taken contemporary curation on multiple mediations (Johnston, 2014) with a discerned critical framing and interests in socio-political issues.

3.1.3 Socially Engaged Practice

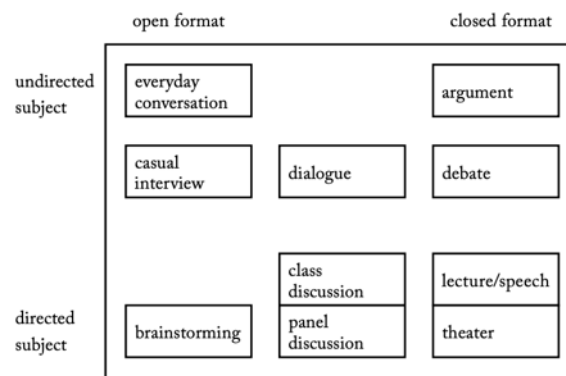


Figure 5: Diagram showing the interrelation between variables of subject and format when designing dialogic projects where participation is either active or passive. Source: Pablo Helguera's *Education for Socially Engaged Art*, 2013:45

Outlining the shift in curatorial practice here is key to understanding the importance of framing this research that is committed to a socially engaged approach to curatorial practice. Often thought of as an artistic practice established in the late 1960s (Helguera, 2013), socially engaged curatorial practice explores the production and consumption of art, research and knowledge in connection or collaboration with communities (Johnston, 2014:24).

This research study is situated within a practice that is concerned with people and issues, where participation is key. The role of the curatorial has the ability and interest to explore how to enhance support for mental health in community settings through the practice of constructing directed and open engagements (fig, 5). The curatorial extends to the way in which the curated team of practitioners were selected due to their specific expertise and interests in the subject. Scoping practitioners for participation became a key focus towards shaping the research. It was important to frame the curated team, almost thematically, owing to individual areas of knowledge. For example, including participants from a mixed group of arts, mental health, academic and third sector backgrounds to understand the different factors and experiences that all shape how support is delivered. Working with a curated team gives the ability to meaningfully reveal multiple perspectives and shared knowledge, rather than accepting the limited understanding of an individual practice.

The collective action of communities within socially engaged arts practice relates back to Wenger's belief that learning is not an isolated activity and that it relies on sharing of knowledge from other practices (Wenger, 2001). Curatorial practice situated within this research promotes not only the thinking about the integral role of *useful art* but also of *useful experiences* and sharing of knowledge within a community of mixed disciplines.

3.2 Methodological and Theoretical Framing

Thinking about how to frame the research design was made clear through Crotty's (1998) structure of understanding the hierarchical steps of influence that connects the research processes together. As demonstrated in Figure 6, the epistemology guides the entire study and outlines the means of how knowledge is produced.

Setting the epistemology as an initial step first informs the theoretical perspective of the research, which then informs the direction of inquiry and the methodological implementation. The methodology becomes a procedure of how to conduct the research, and in turn influences the methods chosen to collect data.

To make sense of the different research elements, Crotty's structure has been used to guide the following sections of the framing of research.

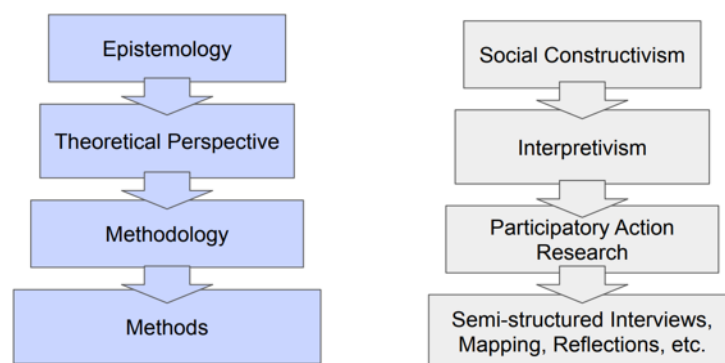


Figure 6: Diagram showing Crotty's steps in designing a research path from *The Foundations of Social Research: Meaning and perspective in the research process*, Michael Crotty, 1998

3.2.1 Episteme

As previously described, the epistemological framing for this research study is taken from a Social Constructivist point of view. Social Constructivism assumes that knowledge is culturally derived through social interaction and is a historically situated interpretation of the social, rather than natural world (Crotty, 1998).

Social Constructivism in Curatorial Practice

While the epistemological framing is important in the shaping of research, it is equally so in the changing system of knowledge within galleries and museums. As Social Constructivism describes knowledge being culturally derived, this is also true of how gallery practices of collecting and displaying are also affected by socio-political cultural ideology and therefore 'context-bound' (Lincoln & Guba, 2013).

Historically, the social function of galleries relates back to the so-called Enlightenment period in Europe 18th century, where objects were classified to understand the progress of civilisation (British Museum, n.d.). The Enlightenment model of conceptualising and disseminating knowledge was a response from colonial and industrial eras, where a fascination with looted artefacts as curiosities or

commodities became popular amongst the bourgeoisie (Craciun & Schaffer, 2016:4).

In Britain, this attention to material culture came about at a time where museums and galleries of art and science were praised as sites of high culture for adult education for the working classes (Moore, 2018). The Museum Act was then established by the government in 1945 to enable the building of municipal museums (Lange, Reeve & Woodard, 2016:20).

In contemporary curating there is the critical discourse that focuses on the operations of institution. For example, the practice of decolonising the museum and shaping a new cultural identity, which recognises that cultural institutions are situated in their pasts. Instead, the sharing of authority and interpretation has been described as an epistemic turn (Bonilla, 2017, Richter & Kolb 2017).

Social Constructivism is inherently understood in the practice of interpretation in galleries and museums and plays a powerful role in the shaping of knowledge and education, giving meaning and identity to material things (Hooper-Greenhill, 1992).

The question has been asked, 'are curators aware that they always already contribute ever more epistemological constructivist concepts of truth?' (Milekvska, 2013:68). The role of the curator is bound to the production or organisation of

knowledge. Whether held within artworks, contexts or engagements it is up to the curator to interpret and present knowledge forth for further interpretations of the audience.

The way in which museums and galleries collect art works and artefacts and disseminate information in public exhibitions says a great deal about the ideological and social representation of the institution, (Weinburg, 2014:28). Through conserving, documenting and classifying such collections, curatorial practice ultimately identifies how histories, collective memories are represented.

Taking this understanding of what curatorial practice is and can do has informed the methods used within this study, for example, applying a critical lens to how support for mental health is developed and performed. Employing interpretation engagements aims to understand the ways in which mental health is visually and verbally represented in order to examine the barriers to access support. Curating a team of practitioners towards the development of support for mental health, draws upon the tacit knowledge of professionals in multi-disciplinary working for meaningful outcomes.

3.2.2 Theoretical Perspective

The Social Constructivist epistemological framing describes how knowledge is understood, which links with an Interpretivist theoretical perspective of how knowledge is constructed.

The research study relates the construction of knowledge by recognising John Dewey's argument for experiential knowledge. In *Art as Experience* he starts with the assertion that when art becomes canonised, 'it somehow becomes isolated from the human conditions under which it was brought into being and from the human consequences it engenders in actual life-experience' (Dewey, 2005). This is to claim that, like reputation, the art or object exists within a multitude of understandings of its circumstances. However, Dewey believes that art should not be separated from the notion that it is made through human experience and should be experienced as such, rather than as a commodity.

When the understanding that knowledge isn't learnt through memorising but through experience, and therefore we are shaped by experience (Clements, 2013), then applied within a research context builds the rationale that it is important to understand the experience of a subject matter through multiple perspectives.

Dewey's theory of experiential knowledge is also related to the performative staging of knowledge within gallery spaces as previously explored within section 2.5.1 of this thesis. By exploring the theories that knowledge is both experiential and performative, the research study aims to interpret data collected as such. The narratives that are revealed, especially given the context of support for mental health, will be interpreted through an understanding that knowledge shared in the process of research cannot be disconnected from each participant's individual perspective or in turn the researcher's experience.

3.2.3 Methodological Framing

The research design was created by way of a sensitive approach that insists on democratic representation of voices of those who inform, deliver and understand the role of support for mental health.

Reflecting on the outlined research questions within the previous section, it becomes evident that selecting a methodology that engages and exchanges knowledge between multi-disciplinary practitioners is key to exploring the dynamics between participants and context within the study. Participatory Action Research (PAR) provides a framework to explore issues of sharing knowledge and remote working alongside the lens of a curatorial practice background. Engaging with

participants through PAR, where the quality of participation is a priority, allows for the participant's experience to take place at the fore of the research, where a dialogic and reflective framework creates practical user-focused outcomes for improvement (McIntyre, 2008:15, Kemmis, McTaggart and Nixon, 2014). Engaging in PAR with the curated team of practitioners means that additional insights can be uncovered when participants are viewed not as facilitators but as collaborators from different perspectives (Suopajärvi, 2016).

The inclusion of a curated, multi-disciplinary team of practitioners within this study aims to address the gap highlighted in the literature review chapter (2.2.1), extending the call for a coordination between medical science-based practices and the cultural sectors to innovate care and support from a social focus.

In addition to a strong connection towards the value of participants, there is also a motivation to address the social needs of community education for beneficial change (Reason and Bradbury, 2002). PAR connects the pursuit of human-centred issues for practical problem solving and outcomes to the people and communities situated within the problem space (Reason and Bradbury, 2001:1). This relates to both the context of enhancing access to mental health support, with a focus on art galleries, and the collaborative inquiry driven with participants in relevant fields of practice.

While Alice McIntyre, key author on PAR, asserts that, 'there is no fixed formula for designing, practicing, and implementing PAR projects' (McIntyre, 2008:2) in relation to theoretical framework, PAR offers a flexible balance with a cyclical approach to generating research methods of 'fact finding, action, reflection, leading to further inquiry and action for change' (Minkler, 2000:191). The aspect of reflection and adapting or reiterating research activities became an important factor when considering the external challenges of conducting responsive research during a pandemic. This cyclical approach (fig, 7) also provided flexibility with the changing conditions in which participants were engaging from potentially irregular environments or discovering new ways of working remotely.

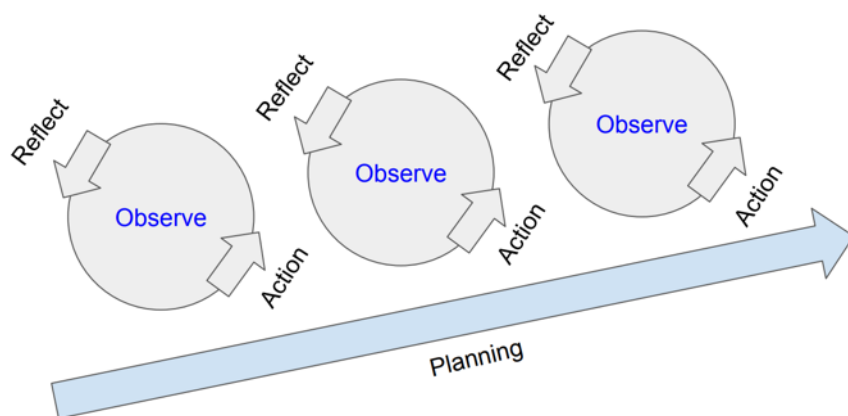


Figure 7: The action Research Cycles (Kemmis & McTaggart, 1988) Source: Author's own

A transparent and open attitude to research allows for mutual consecutiveness and trust between participants and researcher (McTaggart, 1991), where hierarchical

conventions are disregarded in favour of shared knowledge and ownership.

Allowing the participants to make decisions and direct the conversation over certain topics generates a more authentic experience for those involved in the PAR process (McIntyre, 2008:5).

The participation ladder (fig, 8) shows a typology of eight levels (Arnstein, 1969:217) and can be used as a guide to understanding the distribution of

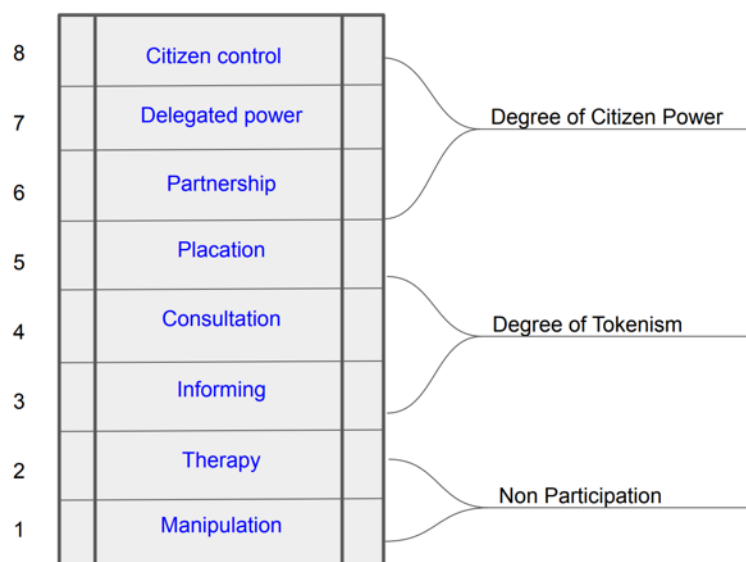


Figure 8: Participation Ladder (Arnstein, S, 1969). Source: Author's own

ownership within participation. From a hierarchical perspective, this research study sits between rung 5, placation, and 6, partnership, where participants have been selected by the researcher due to their specific practices and expertise and therefore defines this research study within a degree of tokenism reaching towards

citizen control. To ensure that this study is mindful towards the needs of the participants, levels of participation were individually agreed upon with steps taken to provide information of the goals of each engagement. Adding to the importance of shared ownership of participation, data and insights are continually presented back to the participants for their approval and to give an opportunity for amendments.

Furthermore, this study aims to go through future iterations and cycles with a wider group of participants including people with a lived experience of mental health support to further the democratic ideals of participation.

Other methodologies that related to the constructivist epistemology, such as grounded theory and ethnography, were considered as a mode of inquiry.

However, due to the need for flexibility and continual review of the external circumstances and working in a remote online environment, a Grounded Theory approach would have been too prescriptive and would not have allowed the participatory input and necessary from the outset of the research (Glaser and Strauss, 1967; Charmaz, 2006). With regards to ethnography, for this study, the primary data is on the way participants interpret the activities and their reflections, which doesn't fit with the observational nature of Ethnography (Sharma and Sakar, 2019). From a researcher point of view, it would have become difficult to remain

unaffected by the contexts or remain entirely neutral to both topics of gallery practice and the very subjective nature of how people experience and work with mental health.

3.3 Ethics

To ensure the integrity of working responsibly with participants for meaningful collaboration, the research study was subject to detailing the ethical challenges and risks of participation.

The fieldwork was reviewed and approved by members of the GSA Research Ethics Sub Committee before the engagements took place. Informed consent was taken from participants, where the purpose of the research study and details of the participatory role were outlined, with the opportunity to raise any concerns before taking part.

One of the main challenges of remaining sensitive to participants needs while conducting fieldwork during a pandemic was the unusual nature of participants engaging remotely from within their own regular environments. For this reason,

sense checking time commitments with participants was an important factor and scheduling engagements was agreed upon as a group. It was also made clear that there is the option to take time out of the research or to withdraw fully without having to provide a reason.

Security issues while remote working were considered cautiously during this time, with online collaboration and conferencing software used under institutional licensing and measures were taken to capture and store data locally and securely in line with GSA's data protection policy.

As the context of the research study is an inquiry into the support for mental health, to minimise risk steps were taken to ensure that participants had prior experience engaging with mental health and wellbeing. In addition, it was made clear that participants will not be asked to talk about their own personal experiences with mental health or to give any sensitive information regarding projects or work they have conducted professionally.

The participant's needs were also reflected upon during engagement sessions to avoid distress, and time to pause and take breaks were offered as needed.

3.4 Designing Meaningful Fieldwork Activities

During the initial stages of the research study steps were taken to understand the experience of gallery-based mindfulness sessions in order to inform the approach of designing fieldwork activities.



Figure 9: Example of art created during mindfulness exercise. Source: Author's own

Mindfulness session at GoMA:

before the Covid-19 UK lockdown was announced in March 2020, Mindful Art Sessions were attended at the Gallery of Modern Art in Glasgow (GoMA). The session was a free bookable monthly event open to the public, which took place on a Sunday in the studio space within the gallery.

Attending this session aided in gaining an understanding of some of the qualities needed within a space in order to explore the topic of mental health. For example: foregrounding the space as open and non-judgmental, both written into the event details but also setting up a table space in a circle for open communication; providing information about what will be taking place before and during the session; presenting prompts for inspiration from the gallery's collection; and providing examples of the activity which could be passed around the group.

These small actions allowed all participants to start from the same level of understanding.

Being guided by the learning and engagement coordinator, who led the event, gave an insight of how to facilitate and pace the workshops within the fieldwork of this research study.

The 2 hour session was initiated by a brief conversation about inspiring artworks within an exhibition at GoMA, followed with a painting tutorial delivered by the volunteer. The materials and information provided were extremely accessible and even offered options for how to replicate such a session at home.

Although the session was focused on art making, taking part in the workshop from the perspective of a participant helped to influence an understanding of how to design such a space for practitioners to collaboratively explore the role of support through a gallery focus. The simple activity of sharing the materials used around a table with a short discussion meant that as a group who hadn't previously met, the activity started from a mutual point of access. Being part of a group highlighted the social aspect that the research was seeking to create within the participatory fieldwork activities planned.

The learnings from the mindfulness experience were taken forward into the fieldwork of the research study. For example, the GoMA session had multiple members of staff to simultaneously coordinate and facilitate the different moving parts, whereas this study is being undertaken and facilitated by a single researcher, so preparatory information needed to be communicated to the participants in advance.

To prepare information, an instruction space was created where the participants could return to for hints and further information on how to engage if they feel as though they are stuck in an activity. The mindfulness session for wellbeing was also a key factor in engaging in this particular activity within the gallery. Mindfulness is something which was integrated into the fieldwork to share with the participants and to ground the research in an experience of different ways of understanding the curatorial role outside of the gallery space.

This Grief Thing, Fevered Sleep:

Fevered Sleep are an arts organisation who work across many creative platforms and collaboratively with teachers, scientists, adults, children and communities, with an aim to invent spaces to share experiences, (Fevered Sleep, 2020).

In an earlier iteration of the research question, the was framed around exploring the concept of the gallery space as something which is experiential and therefore a unique place for expression and introspection.

The model of *This Grief Thing*, Fevered Sleep's ongoing project became of interest to the research as the project encourages people to explore, talk and learn about experiences of grief through orchestrating grief gatherings advertised in pop-up events in galleries in the UK. These themes of exploration through meaningful exchanges shares a similar aim of the research and so contact was made with Fevered Sleep for ideas around hosting or adapting the gatherings. The guidelines they sent in response gave some key information on how to create a safe environment, set the tone of the conversation and offered suggestions of how to begin and end the session in a respectful and positive way.

From this exchange it was made clear that the feeling of the fieldwork space needed to be constructed in such a way to encourage creativity and openness in the activities to enhance the benefits of peer-to-peer engagement, additionally maintaining a safe space by acknowledgement of set groundrules and built-in reflection time.

3.5 Recruitment

The recruitment process for this research study was unique in the way that participants were considered as part of a curated team of practitioners. Much like exploring and selecting artworks for a display and building up interpretation to

support an understanding of contexts, practitioners were chosen specifically for their expertise.

Using curatorial research methods for seeking artists, a scoping exercise took place through an extensive online search to build an understanding of current practices and programmes that engage with art and health. Key organisations were identified that provide traditional and alternative forms of mental health and wellbeing support in Scotland.

Initial desk-based research was conducted to search for third sector charity organisations, arts-based programmes, social prescription projects, NHS support programmes and community initiatives. This search began at local level, thinking about services across Glasgow, which then opened up with the advantages of remote working to engage with projects and professionals nationally across Scotland.

Firstly, existing contacts with professionals in curatorial fields and familiar Journals were revisited in order to map out current contexts within art and health more broadly. While establishing an understanding of the landscape, relevant organisations were contacted via email to discuss both the research project and how their practices and work were changing with the advent of the Covid-19 pandemic. Keeping a live

document to refer to allowed for an understanding of key practitioners to reach out to. Although each contact made didn't always result in further communication, it was often the case that the details of another organisation or practitioner were forwarded on or recommended in line with the specific research project.

As opposed to other forms of indirect recruitment, potential participants were directly recruited after a series of initial conversations to understand how their specific interests and experiences would build upon the research study to inform and shape the inquiry. This then followed up with a Participation Information Sheet and Activity Framework to frame their role in the research.

The process aimed to curate a mixed group of 4-6 participants from the following professions: professionals with gallery experience engaging with health and wellbeing; third sector charity organisations who focus on promoting mental health and art; and health researchers or academics with a focus on mental health and wellbeing. Again, drawing on the notion of curatorial practice as brokering between practices (Wenger, 1998), inviting participants from different sectors aimed to create new opportunities for learning and engagement to be aligned across professional perspectives.

Due to the external stress of the Covid-19 pandemic and the limited time to build rapport and trust, the research study did not intend to explicitly curate individuals with a lived experience of social isolation. However, the participants came with their own experiences and confidence in talking about mental health and wellbeing.

Curating professionals aimed to generate a set of recommendations from those with experience of delivering support both within and outside of arts organisations to examine ways of multi-disciplinary working across arts and health sectors. The knowledge which each individual brings from their practice background relates back to the epistemological framing of this study.

3.6 Methods

The methods to collect data were chosen/developed in order to align with government Covid-19 safety guidelines (Scottish Government, 2020). As such the fieldwork took place remotely through online digital formats, and participation was facilitated over Zoom video calls and using Miro online whiteboard software. This also facilitated a shared inquiry with participants on the nuances of remote engagement and the potential for online and digital platforms to deliver remote mental health support.

3.6.1 Semi-Structured Interview

The first fieldwork took place as one-to-one semi-structured interviews of around 30 minutes to 1 hour taking place over a Zoom video call. The purpose of this method was to understand the background and the topical knowledge of each participant as complex individuals. Understanding the participants at an individual level seeks to capture what each participant is inputting to the project and what are their motivations and preferred outcomes.

The semi-structured interviews focused on three main topic areas:

- The practicalities - experience of using remote engagement tools and software, in addition to motivations for participating in the research.
- The participant's individual practice - background, meaning of support within specialism, key changes within their role during lockdown.
- Community - the value of support outside of clinical settings, the arts and health relationship, the role of galleries to explore mental health and wellbeing.

As the first method of engagement, the semi-structured interview aimed to further support the contextual understanding and experiences of practitioners who work within arts, health or third sector professions. Thematic and anecdotal data were

drawn from this exercise to explore potential affinities between the individual responses.

3.6.2 Object Handling Icebreaker

This session was designed to be an introduction both to the wider curated team of practitioners and also to situate the fieldwork within an understanding of gallery practices and how they can be used within mental health and wellbeing but also multi-disciplinary contexts.

The object handling activity was designed in order to introduce the reflective element of PAR, while also sharing a resource from gallery practices as experiential learning. This sets a positive and empowering tone for the subsequent engagements by building connectedness and capacity amongst participants (Steen, 2016).

Framing this method through a constructivist lens draws on Goffman's theories of performing identity (Goffman, 1959), where sharing thoughts and feelings focused around a chosen object gives the opportunity for the participants to meaningfully connect in the primary discussion. In addition to the rationale for sharing skills to ground the research in curatorial practice, the activity also aimed to understand the performative aspects of the participant's personal knowledge and experience as a

starting point before their professional roles are performed in the following engagements.

The activity took place again over Zoom, where introductions took place along with a brief sharing of object stories. Participants were then invited to take part in a 5-minute mindfulness session inspired by 'focused looking' exercises (Manchester Art Gallery, n.d.). Researcher and participant reflections were recorded as data to understand base level insights towards the fieldwork.

3.6.3 Mapping

Building on semi-structured interviews this activity aimed to understand how each individual comes together in a group as a curated team and how roles are played out.

This session further supported the contextual understanding of the research from the voices and experiences of professionals who work within the arts and health and social care disciplines.

Mapping how traditional and alternative forms of mental health support are currently signposted would generate insights as to how a framework can be

developed from these aspects and contribute to understanding how the values of curatorial practice can benefit research in the health field.

Audio from the Zoom conversation was recorded while Miro was simultaneously used as a tool for collaborative engagement, by visually capturing and recording responses, which could be returned to at later phases of the research.

Collaboratively working across Miro as a remote engagement tool at this stage explored issues of access and usability of remote workshops and how this could have an impact on the quality of engagement for mental health support.

3.6.4 Interpretation

Interpretational activities, developed within the Miro space, provided a starting point to talk about the experience of visual art and curated displays while galleries and museums are closed due to lockdown measures.

Through specific prompts and emerging topics from our previous sessions we used the tool as a prompt for interpretive storytelling and constructing of narratives where mental health support is concerned. The practice of interpretation lend an opportunity to share and openly communicate within a wider group by emulating

the experiential quality of museum and gallery engagement practices and meaning making.

The interpretation taking place in this activity sought to gain rich insights on processes of critical thinking, meaning making, expression, communication and narratives of value. Anecdotal and conversational data was to be recorded during the activity in addition to the visual and artefactual outcomes will be transcribed and coded.

3.6.5 Design and Prototype

The design phase focused on conceptualising ideas through collaboration where the professional experience of each participant is relevant to understanding what is important for the user and stakeholder, and how support could potentially be delivered and signposted.

In this session participants were asked to join using Miro online for a visual ideation activity. Participants were asked to reflect on their responses and learnings identified in the initial phases to think about how remote engagement frameworks can be designed for mental health support within curatorial and collaborative practices.

Prompt topics and questions were pre-populated within the Miro Activity space to critically and creatively think about potential solutions to devise a framework of support based on previously generated learnings. This session promoted creation of an artefact from the sum of collaborative work, needs and values in order to interrogate the success of the curated team rationale.

3.6.6 Reflection

Critical feedback was continually reflected upon as a group at every phase through conversation and a dedicated reflective Miro board, with a final reflective session hosted two weeks after the prototype phase. A researcher reflective journal was kept in order to capture the nuances in observational data of key learnings and developments.

The importance of reflection relates to the epistemological framing in addition to the idea presented in section 3.1 of this thesis, where the nature of research must be examined to continually assess and challenge the researcher-participant relationship for the integrity of the study.

3.7 Analysis

In order to approach the qualitative nature of this research study, thematic analysis (Braun and Clarke, 2006) is used to draw out key insights from the rich data created by the curated team's individual and collaborative participatory experiences. These experiences have been captured through transcribed recordings of the semi-structured interviews.

The analysis is iterated in three parts to express the themes relating to the three separate aspects of the research question and sub-questions:

- An analysis of the broader research question relating to the design of alternative support for mental health with input from each curated practice.
- Sub-question 1, thematic analysis is used to understand observations drawn from the quality of remote engagement.
- Finally, data is analysed in order to answer sub-question 2 in relation to how the applied curatorial practice supported multi-disciplinary working.

Each iteration of thematic analysis is captured by a set of themes, which are then refined further towards an outcome of sensibilities.

It was intended that baseline data collected from the semi-structured interviews would be used as baseline analysed with later data collected through

Interpretational Phenomenological Analysis (Eatough and Smith, 2008) to consider how knowledge brought and shared by each participant enhanced or changed the progress of the curated team. However, in practice this became out of scope for the timeline of the research study and thematic analysis produced rich insights in order to answer the research question.

3.8 Summary

In this chapter the research design of this study set a foundation for conducting the fieldwork and also insights into why the specific methods were implemented through a presentation of curatorial practices. Following a Social Constructivist epistemology, the theoretical view is that of interpretivism and the methodological framing sets out a Participatory Action Research inquiry. The data collected through the fieldwork stage of the research will then be analysed through thematic analysis.

Chapter 4:

Fieldwork

Chapter 4: Fieldwork

4.1 Fieldwork Introduction

This chapter details the fieldwork undertaken in order to gain insights through five key phases, as outlined in the methodology chapter with the curated team of participants.

The fieldwork activities comprised of one-to-one semi-structured interviews and participatory engagements, which took place remotely online. In addition to the participatory phases (fig, 10).

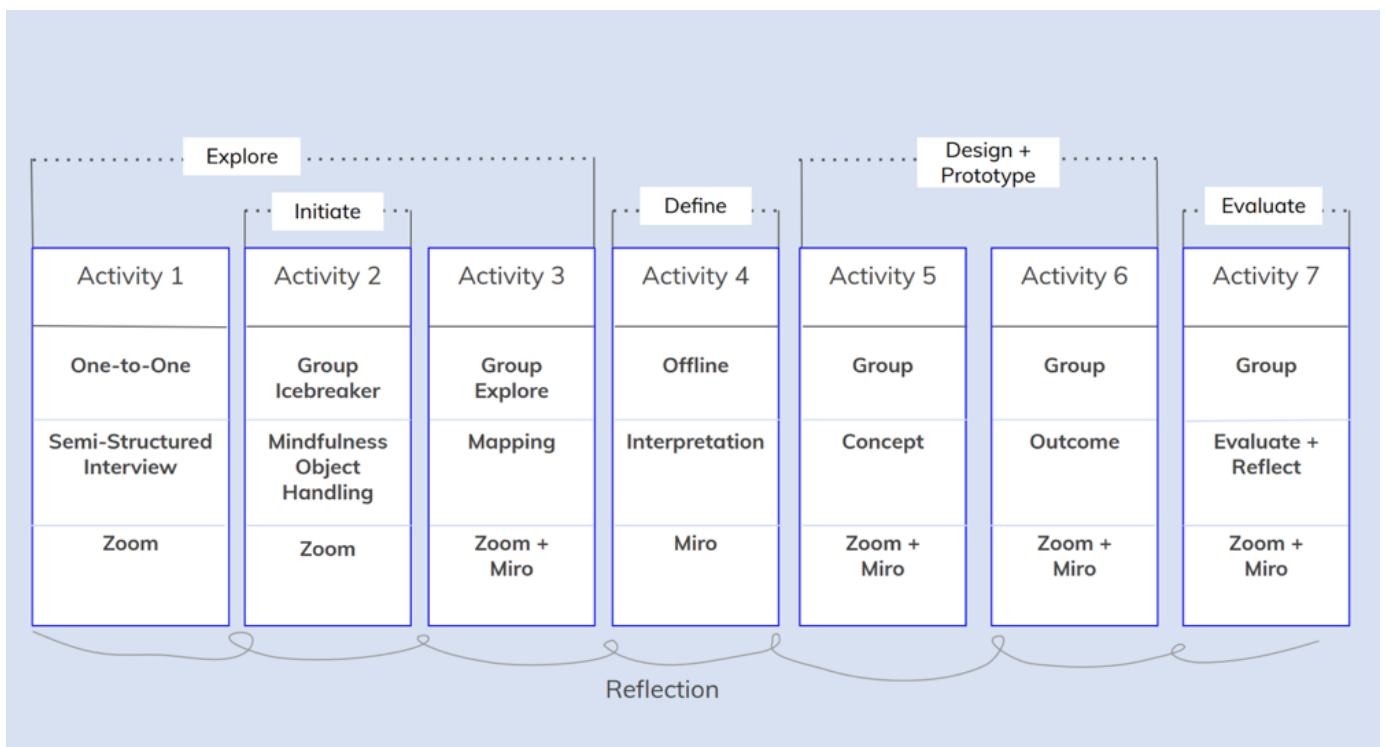


Figure 10: Structure of Fieldwork Activity Phases. Source: Author's own

This chapter also articulates the procedural challenges of both conducting research and engaging in participatory activities remotely, in order to support the inquiry of how to enhance remote support for mental health.

To highlight the distinction that the fieldwork is documented from within the constructions of culturally derived knowledge, following Dewey's understanding that knowledge is experiential, this chapter is written from the *first-person* perspective. As the constructivist paradigm suggests, one cannot be disconnected from interpreting knowledge from their perspective. In this case, it is the researcher who cannot be disconnected, as the fieldwork processes detailed in this chapter has been interpreted and presented through the performed role of the researcher-facilitator. Furthermore, if this study were to be replicated, then any findings would be subject to the undertaking researcher's perspective.

Throughout the thesis and corresponding data, participant's names have been kept confidential and abbreviated pseudonyms have been adopted (fig, 11). The participants have been given a coded identity that has been created in relation to their professionalism in order to further highlight the value of their expertise within the curated team.

Participant Professionalism	Code in text
Third Sector: Network Officer	PTS1
Third Sector: Programme Coordinator	PTS2
Arts and Health Research/Producer	PR
Archives and Collections	PA

Figure 11: Pseudonyms of participants pertaining to professionalisms, used within the thesis to keep participant's personal data confidential. Source: Author's own

Each section in this chapter is accompanied by a table of fieldnotes to capture the researcher reflections.

4.2 Contextual Scoping

The main data collection for this study took place through the participant engagements in the fieldwork. However, the initial contextual scoping that took place helped to examine the procedural curatorial methods for research, such as contextual scoping research, designing the presentation of information and creating a space for engagement.

4.2.1 Scoping Participants and Initial Conversations

In order to articulate the importance of collaboration across disciplines to explore the role of support outside of the clinical setting, a curatorial team was developed to enable a critical working relationship.

Due to the stress, which has been heightened by the nature of the Covid-19 pandemic and potentially triggering topics, this research study aimed to engage professionals with experience delivering and championing support for mental health and wellbeing, rather than directly with individuals with a lived experience of social isolation. Furthermore, the reason for including professionals is to explore how resource and knowledge sharing can be facilitated across multiple disciplines through curatorial practice.



Figure 12: Flyer for participant recruitment.
Source: Author's own

Curating participants for the fieldwork was a vital part of the research study. The primary aim of this stage of research was to find participants to take part in becoming the curated team of practitioners.

In order to understand the perspectives and expertise of each specialism from the arts, third sector and health and social care, I undertook an initial online search of organisations across Glasgow and on a national scale to build a picture of how mental health and wellbeing is being promoted. I kept a running list of organisations, such as galleries or charities who were active during the lockdown period, and approached them via email with a brief outline of my project along with a flyer detailing the participant role (fig, 12).

After the initial email exchange with potential participants, a conversation was arranged either through Zoom video call or a traditional phone call.

Interestingly, most people who I spoke with preferred to have the initial conversation over the phone as a welcome break to their remote working situation, where video meetings had become a demanding part of the everyday. During this stage of the research, the contribution that video conferencing and screen time had on stress and fatigue in the workplace and social situations became apparent.

Conscious of the the phenomena of Zoom Fatigue (Maheu. M, 2020), pressure to

be on video for hours at a time became a concern that I wanted to limit within this study.

While not all of the conversations that took place led to recruitment, I was able to gain further introductions to other practitioners who might have been interested or to gain further insights of how people were dealing with the pandemic in their workplace.

Seeking participants became a performative mode of exploring the practicalities within curating, selecting and organising participants as artists whose professionalism represents a certain value within the context.

What	Who	Where	Rationale	Reflection	Further Action
<p>Participant and context scoping</p> <p>Desk-based research</p> <p>Contacting arts, third sector and health and social care organisations</p>	<p>Mental Health Foundation</p> <p>Scottish Mental Health Arts Festival</p> <p>Artlink</p> <p>Wellbeing Hub</p> <p>Moray</p> <p>Project Ability</p> <p>Glasgow Life</p> <p>Whitworth</p> <p>Engage</p> <p>etc.</p>	Remote	<p>Collect information and an understanding of the current efforts being made by example organisations to stay connected and engaged during the Covid-19 pandemic.</p> <p>Potentially gain advice for the research study and build rapport with professionals as potential participants.</p> <p>Understand what level of experience each practice has with support for mental health.</p>	<p>Arts organisations are looking to social media a lot more in order to engage with their audiences during closures.- helpful to understand ways of connecting</p> <p>A lot of staff have been furloughed during closures.</p> <p>Third sector organisations have had to adapt to the current situation and have found ways of working which might benefit their way of working post-pandemic. For example, video conferences to mitigate excess travel across regional remits.</p> <p>Flexibility is key when working around other people's professional schedules.</p> <p>Felt productive to have initial conversations with people to gauge their interest in the research study and how they relate to the context</p>	<p>Follow up with interested contacts and formally invite as a participant to the research.</p> <p>Reach out and/or look into suggested organisations recommended.</p>

Figure 13: Participant recruitment fieldnotes. Source: Author's own

4.3 Participatory Engagements

This section outlines the developing next stages of research, which took part with participants in both one-to-one and collaborative group engagements.

Designing the Miro Space

The design of the Miro Space became an important exploration of curatorial practice in terms of setting the scene for engagement. The individual spaces were categorised as the following: *Instruction Space*, *Action Space* and *Reflection Space*.

These spaces were thought of in terms of rooms in which different engagements took place and different information was provided or shared. The feel of each space was made to create the respective environments.

I chose traffic light colour coordination to indicate the tone of each space,

- Red, to stop - Instruction Space (fig,14)
- Orange, to pause - Reflection Space (fig, 15)
- Green, to go - Action Space (fig, 16)

Designing the space for the engagement helped to think about the purpose of each stage of the research activity and how to choreograph the participation to enhance the quality of engagement. Using the performative framework explored in section

2.5.1 of the thesis, I wanted to include a multicentric mode of engaging across Miro and Zoom where the idea of performing roles and interpreting perspectives can come together.

This meant having to think about how to create a didactic space, for example: limiting the amount of functions that we would use on Miro to avoid unnecessary confusion; considering the layout of how information was presented for readability; and prompt questions and sources that were used to generate responses.



Figure 14: Miro Instruction Space. Source: Author's own

The Instruction Space was designed as an area where participants could trial out some of the functions before using them live in the fieldwork. The look of the board

mimicked iconic step-by-step instruction sheets so that it would be easy for the participants to follow. More images of the Instruction Space can be found on page 17 of the Appendix.

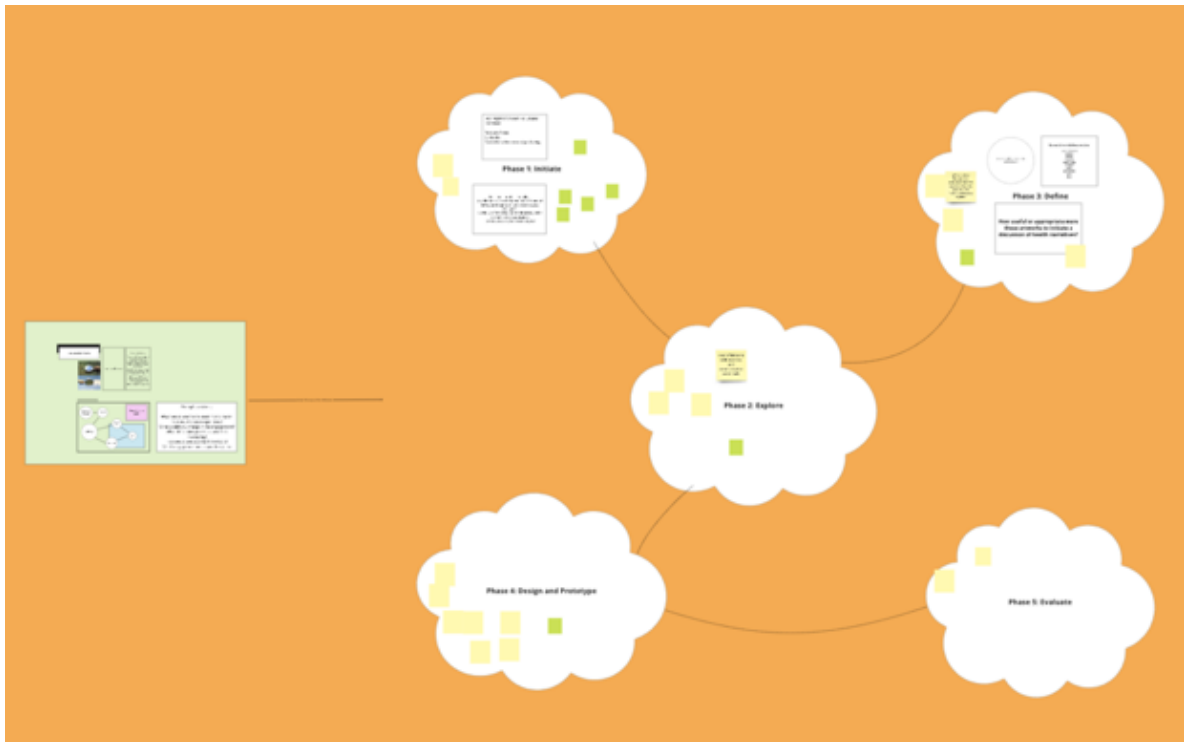


Figure 15: Miro Reflection Space. Source: Author's own

The Reflection Space, designed as an area to share thoughts on the participation retroactively to the activities. This board, like the Instruction Space, has an orientation area, with instructions on how to use the space and an example of how to start a reflection. Participants are then led to explore the board where the cloud shapes indicate areas to reflect on each phase of the fieldwork. This space was also used to update the participants with research findings. More images of the Reflection Space can be found on page 36 of the Appendix.

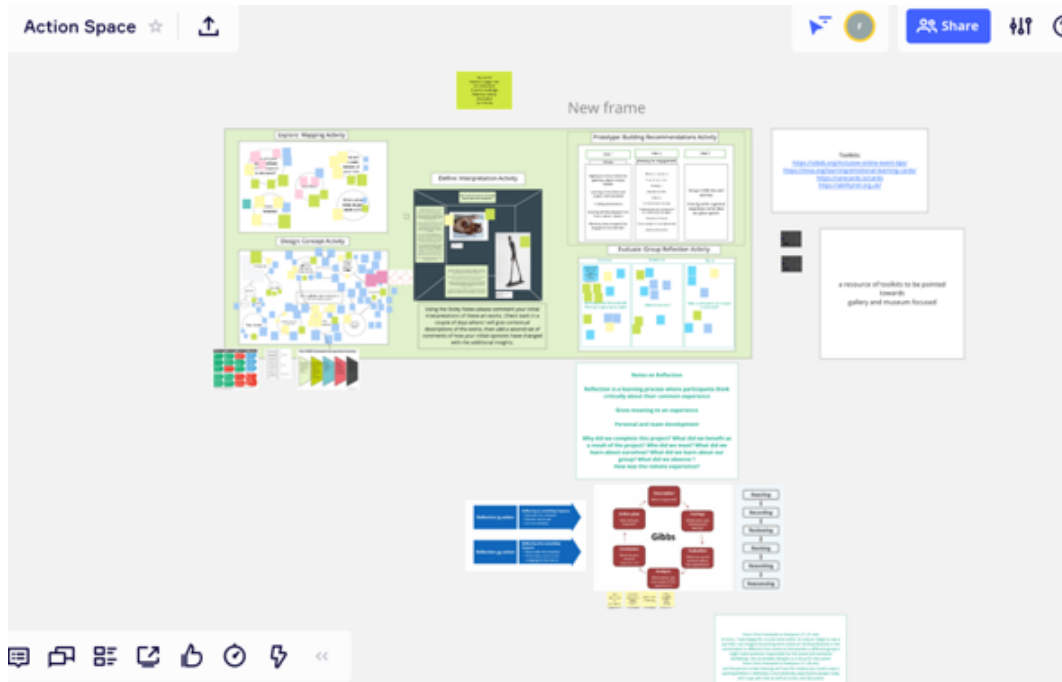


Figure 16: Miro Action Space. Source: Author's own

The Action Space made it observable where each activity would be worked on to give a notion of structure to the participation before and during the engagements. More images of the Action Space can be found on page 20 of the Appendix.

4.3.1 Phase 1: Initiate

To begin the series of engagements, an activity framework was shared alongside the Participant Information Sheet and Consent Form in order to detail the expectations of the research project. The Miro boards were also shared at this early stage so that participants were able to become familiar with using the software on the website.

Semi-Structured Interviews

The semi-structured interview initiated the start of the formal fieldwork study.

Meetings were scheduled to meet individual participant's needs, which took place over Zoom video call.

Due to the informal conversations held with the participants prior to recruitment, there was already a familiar tone to conducting the interviews, which had a positive impact on the direction of the semi-structured interviews.

This engagement provided rich data which included each participant's personal opinions and experiences on the topic of participation, their professionalism and the role of community within support.

Semi-Structured Interview Questions		
Participation	Professional Role	Community
1. Could you tell me about your motivations for participating in this research study and what you would like to learn or gain from taking part?	1. Could you please give me a bit of a background into your specific practice	1. What do you think is the value of support outside of the clinical setting?
2. Do you have previous experience of using remote engagement software during locking? In terms of digital resources, what do you have access to in order to participate?	2. Could you tell me about what support means from the perspective of your profession?	2. What do you think about the relationship between arts and health?
3. Which of the outlines participant engagement activities would you like to join?	3. What have been the key changes day-to-day, positives and drawbacks, of delivering your role during lockdown and working from home?	3. Please could you tell me your opinion on public galleries serving as a place for to explore and promote mental health and wellbeing?
	4. Do you think any of these changes will become common practice beyond the pandemic?	4. What role do you see your practice taking within a group of mixed disciplines?

Figure 17: Semi-Structured Interview Questions. Source: Author's own

Chapter 4: Fieldwork

What	Who	Where	Rationale	Reflection	Further Action
<p>Semi-Structured interviews</p> <p>Video call with participants lasting 30mins-1hr</p> <p>Based around three key topics: Participation, Professionalism and Community.</p> <p>Video and audio recorded.</p>	<p>PTS1 PA PR PTS2 (semi-structured interview conducted after Phase 4 of the research due to time commitments)</p>	<p>Remotely via Zoom</p>	<p>Understand motivations for participating in the research and experience with remote working- To better facilitate their engagement for meaningful contribution.</p> <p>Build a picture of individual roles within the curated team.</p> <p>Explore tacit and anecdotal knowledge in order to further support the contextual understanding of the research study</p>	<p>Built good rapport with participants- gained confidence as to what was achievable of the curated team in the participatory nature of the research.</p> <p>Understood the commitments each participant was able to deliver.</p> <p>Participants were equally interested in taking part due to the knowledge sharing aspect of the study- where they would also be able to connect with other professionals who they might not necessarily cross paths with in their day-to-day practice.</p> <p>Participants shared an open and curious mindset.</p> <p>Each different professionalism took either a recovery or asset-based approach to support with a key focus on a holistic view of health and care</p> <p>Value of the balance between clinical and community-based support.</p>	<p>Create activity schedule with participants to suit their availability.</p> <p>Relay key insights to the participants on the Reflection Space Miro board.</p> <p>Transcribe the interviews and code according to thematic and Interpretative phenomenological analysis</p>

Figure 18: Semi-Structured Interview Fieldnotes. Source: Author's own

Ice-Breaker

The Ice-Breaker session was the first activity where participants met together as a curated team.

Mindfulness Taster

5 Minute Introduction of a Guided Long Look

1. Get comfortable, turn off your camera if you would like.
2. Pick up your object as if you've never seen it before. With fresh eyes begin to notice it.
3. Look at the object from a variety of directions. Focus on a particular detail, this could be colour, texture, shape, perspective, symbol or pattern.
4. Pay attention to your first impressions. Does the object excite or bore you? Do you like or dislike the object?
5. Let your eyes wander. Your mind will try to make connections between the elements of the object.
6. Now try to make the familiar strange. Try to spot the hidden details in plain view.
7. If your mind begins to wander, that's okay, allow yourself to pay attention to your surroundings. You might hear traffic outside, birds, the boiler ticking over...
8. Bring your focus back to the object.
9. How do you feel? Pay attention to how your mind responds. How does the object make you feel?

Give time indication to the last 30 minutes of looking.

Slowly bring the group back together and allow for time to share reflections and questions.

Figure 19: Mindfulness Script. Source: Author's own

To initiate the session, I had sent instructions prior to meeting for the participants to select an object from their ordinary surroundings that they felt comfortable sharing.

I then offered some provocations to help narrate the chosen object:

- *How do you feel about your object, do you like it? does it have a sentimental value?*
- *How did you acquire the object?*
- *What does the object say about you? What do others say about it?*

The session started with a show and tell of the objects and a brief introduction of the participants and their practice. I had also included my own object, practice background and the role of the fieldwork in order to set the tone that we were part of a non-hierarchical team.

For the next part of the activity, I led the mindfulness session in order to ground the fieldwork within the curatorial context. The mindfulness session was guided by a series of instructions in order to provide some prompts for the curated team to take a long and intentional look at their object, replicating the type of activity that would take place in a gallery setting. None of the participants had experience taking part in online mindfulness sessions and 2 had attended mindfulness activities in person prior to the fieldwork.

Interestingly, the reflective conversation that took place after the engagement naturally shifted to thinking about how the participants would support a service-user, both remotely or during in-person engagements, rather than a professional in this setting. Barriers to focus were discussed such as: screen time, accessing technology, creating remote empathy and developing boundaries.

Conversational and observational data was recorded from this session in order to capture initial responses to the research, which can be compared to the data captured at the end of the research. Keeping a record of observational and reflective data throughout the process will help to map moments of key knowledge building and sharing along with moments of connectiveness through the design of the fieldwork.

What	Who	Where	Rationale	Reflection	Further Action
<p>Icebreaker session Object handling and guided long look.</p> <p>Participants were invited to pre-select an object from their regular environments that they were comfortable sharing and talking about with others with some prompt questions as to how to present their chosen objects.</p> <p>During the session participants each introduced themselves, their practice and their objects.</p> <p>I then delivered the mindfulness activity centred around the objects, which we shared a discussion about afterwards.</p>	<p>PTS1 PA PR PTS2</p>	<p>Remotely via Zoom</p>	<p>Introduce the curated team to each other.</p> <p>Introduce museum and gallery techniques such as object handling and a guided look at an artwork.</p> <p>Create a familiar space in which we will be meeting for the duration of the fieldwork.</p> <p>An opportunity to ask questions as a group.</p>	<p>While intended as an icebreaker session to introduce the curated team following the one-to-one interviews, the object handling activity took a capacity building approach to the session where the participants could find mutual value in taking part.</p> <p>Was able to capture participants initial feelings and preconceptions towards the research project.</p> <p>Participants found that this was an interesting way to get to know each other as objects that were chosen were sentimental or meaningful and revealed a little bit more about each other.</p> <p>Generated a wider discussion about object handling and some of the issues that took place online. For example of this session were to take place with a group of service users seeking support, they may not have the means to access an object they felt comfortable sharing.</p>	<p>Transcribe recorded session, code and collect data as per thematic and Interpretative phenomenological analysis.</p> <p>Add key insights to Reflection Space in the Miro boards.</p>

Figure 20: Icebreaker Session Fieldnotes. Source: Author's own

4.3.2 Phase 2: Explore

The curated team held a discussion of individual practices and how they related to each other, rather than working quietly to fill out their own comments. This helped to embody a feeling of connectedness in the remote setting.

This activity took place after the Ice-breaker activity and reflective discussion.

Because the first discussion between the curated team was so rich, as it was the first opportunity to meet everyone in the group, we had a much shorter time to complete the Mapping Activity than planned.

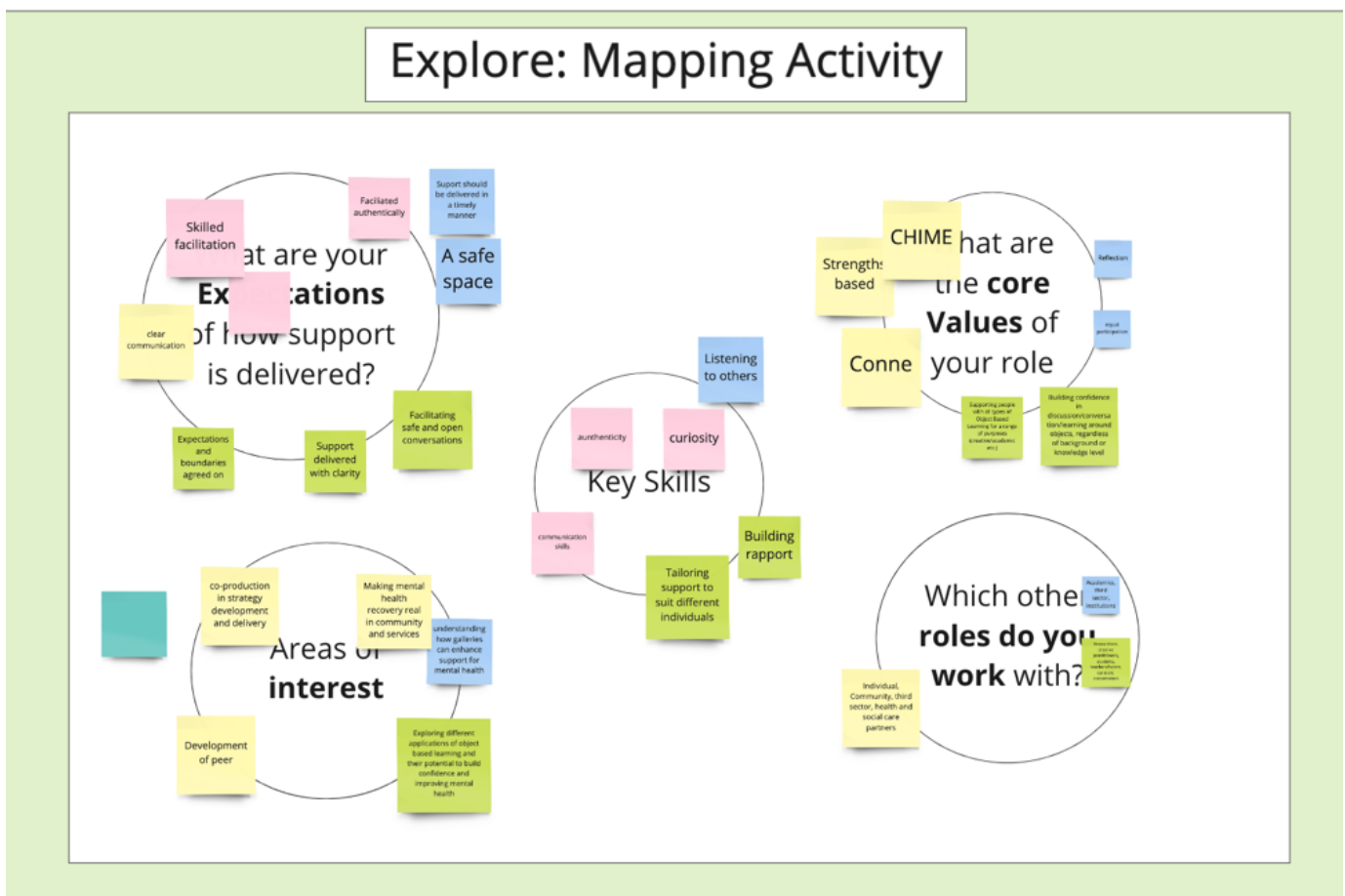


Figure 21: Miro Mapping Activity. Source: Author's own

The stickynotes added to the Miro board captured the similarities and skills between the participants' responses to understand the potential of curated multidisciplinary working.

What	Who	Where	Rationale	Reflection	Further Action
<p>Mapping activity</p> <p>Took place after the icebreaker session- 20 mins</p> <p>Five prompt questions/ topics to map:</p> <p>What are your expectations of how support is delivered?</p> <p>What are the core values of your role?</p> <p>What are your key skills?</p> <p>What other roles do you work with?</p> <p>What are your areas of interests</p>	<p>PTS1</p> <p>PA</p> <p>PR</p> <p>PTS2</p>	<p>Remotely via Zoom for the verbal discussion and Miro for the visual doing element.</p>	<p>Building on semi-structured interviews this activity aims to understand how each individual comes together in a group as a curated team. The mapping activity explores the existing processes and connections between each participant's on the topic of support. Aims to visualise ways in which the participants connect and build a relationship to the research and each other.</p>	<p>clear affinities to collectiveness and communication were made</p> <p>the value of partnerships was made clear- promoting the benefits of multidisciplinary working such as equality of voices, non-hierarchical approach, creating a more dynamic outcome by building on or contributing to a skillset, seeing different perspectives.</p> <p>Areas of interests did not always relate or bound to their specific professionalism- viewing participants as complex individuals.</p> <p>"It was useful to map our different interests and focuses within our roles and see where the similarities were."</p>	<p>Transcribe recorded session, code and collect data as per thematic and Interpretative phenomenological analysis.</p> <p>Add key insights to Reflection Space in the Miro boards.</p>

Figure 22: Mapping Activity Fieldnotes. Source: Author's own

4.3.3 Phase 3: Define

The Define Phase activity had intended to capture observational data about the language used to talk about mental health. The participants were asked to respond to the displayed images on the Miro board with their own interpretations of the artworks as a way to identify narratives of health from different professional perspectives in order to create a broader sense of the topic.

In a conversation with the curated team, it was decided that this activity would take place as an offline activity to fit with scheduling.



Figure 23: Miro Interpretation Activity. Source: Author's own

What	Who	Where	Rationale	Reflection	Further Action
<p>Interpretation activity</p> <p>Two artworks were selected and presented without context. Participants were invited to comment their interpretation of the works. A week later I entered the curatorial interpretation of the works- specifically the health narratives, modes of production and social contexts. Participants were then asked to comment on how their initial thoughts had changed.</p>	<p>PTS1 PA PR PTS2</p>	<p>Offline activity in the Action Space Miro Board</p>	<p>Using selected artworks displayed on Miro and specific prompts and emerging topics from our previous sessions we will use the artworks as a catalyst for interpretive storytelling and constructing of narratives where mental health support is concerned.</p> <p>Understand how curatorial interpretation can help to facilitate discussions and language used around the topic of mental health. Promote a connection between seeing health stories in gallery contexts.</p>	<p>We decided as a group to change this session into an offline activity that was available to come back to at any time to fit in with everyone's schedules.</p> <p>This activity generated the least amount of input- I feel like it would have benefited to have more of a facilitated group discussion around the works. This could have been because it was what the participant's felt as though they had the least experience in as it related more to arts-based activities rather than their practice.</p> <p>Compared with the engagement that took place during the object handling session, where the participants were able to actively chose what it was that they would talk about, I think that this shows the value in interpretation and the delivery of information.</p>	<p>Capture comments made in order to code and analyse</p> <p>Reflect on the lack of engagement with the participants to understand how the session could have been more productive.</p>

Figure 24: Interpretation Activity Fieldnotes. Source: Author's own

4.3.4 Phase 4: Design and Prototype

Concept

The Concept Activity focused around pre-populated prompt topics that had been built upon through previous insights captured in the Explore phase.

The curated team were keen to use this engagement as a chance to catch up and reflect further on some of the important aspects discussed such as art and health partnerships and identified frameworks.

The PAR methodology allowed for necessary flexibility at this stage of the field work. The concept ideation and the prototyping activities were designed to take part within the same session. However, due to the participants' interest in the discussion of how to enhance support, we decided that it would be best to split the activities up in order to make full use of the limited time we had together.

The data captured in the session helped to visually draw on the most relevant and emerging topics whilst the audio recording of the session captured more anecdotal insights.

Design: Concept Activity

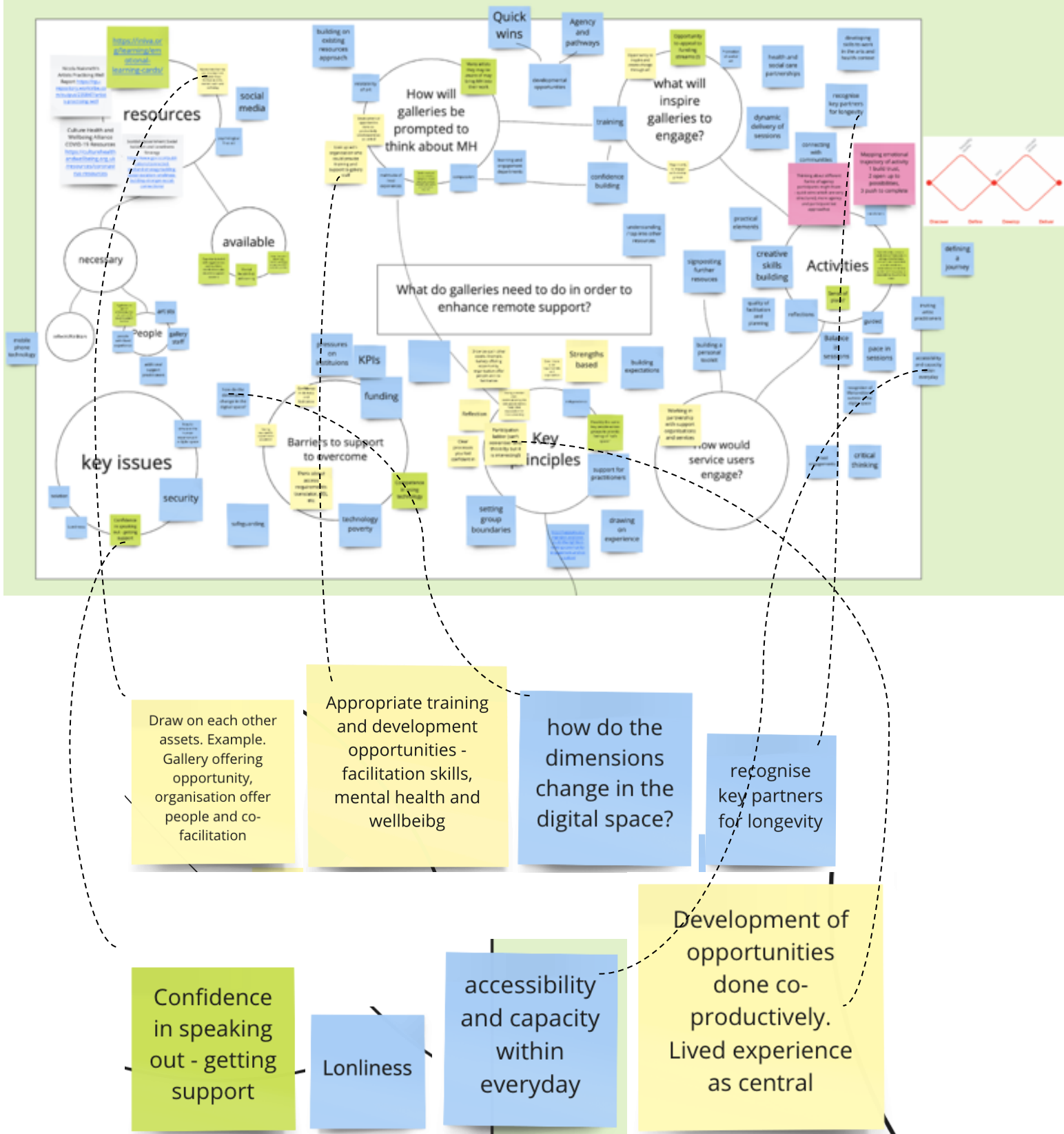


Figure 25: Miro Design Activity. Source: Author's own

What	Who	Where	Rationale	Reflection	Further Action
<p>Concept Design</p> <p>visual ideation activity, where participants will reflect on their responses and learnings identified in the initial phases and artefacts made in the Define phase to think about how remote engagement frameworks can be designed for mental health support within curatorial and interpretational practices.</p>	<p>PTS1 PA PR PTS2</p>	<p>Remotely via Zoom for the verbal discussion and Miro for the visual doing element.</p>	<p>To collaboratively understand and acknowledge what is meant by support and how it can be provided through an iterative framework and what it needs from each professional perspective. Understand how remote engagement frameworks can contribute to curatorial and interpretive practices.</p> <p>A direct approach to collaboratively answering the research question with the curated team</p>	<p>Really productive session where we had a conversation which focused on the individual prompts.</p> <p>The curated team were equally engaged and shared their experiences and knowledge of how they think about or enhance support in their practices.</p> <p>PTS1 shared the CHIME framework for evaluation, which became a topic of interest as it could be applied within everyone's individual practices. The theme of connectedness is particularly applicable to the remote context, which is a major issue within the social aspect of support for mental health.</p> <p>This session was initially intended to be directly followed by the prototyping exercise but we decided to only focus on the concept in the allocated time and reschedule to give justice to the process</p>	<p>Anecdotal and conversational data will be captured from screen and audio recordings which are then transcribed and coded into themes and recurring patterns to understand the design process</p>

Figure 26: Design Activity Fieldnotes. Source: Author's own

Prototype

The prototype activity took place the following day from the concept activity. The curated team were asked to create a set of recommendations or a framework of how galleries can enhance remote access to support for mental health.

The curated team came together through Zoom where we shared some additional insights from the previous activity. We then joined into the Miro space to begin thinking about how each professional could work together to meaningfully design a framework. Due to the situational context of the Covid-19 pandemic, the curated team used this as a focus point for when remote support would need to be accessed.

The data captured in the Miro alone space did not feel sufficient enough to be able to formalise a final outcome of recommendations. The conversational data recorded is used to provide a rigorous analysis of what took place.

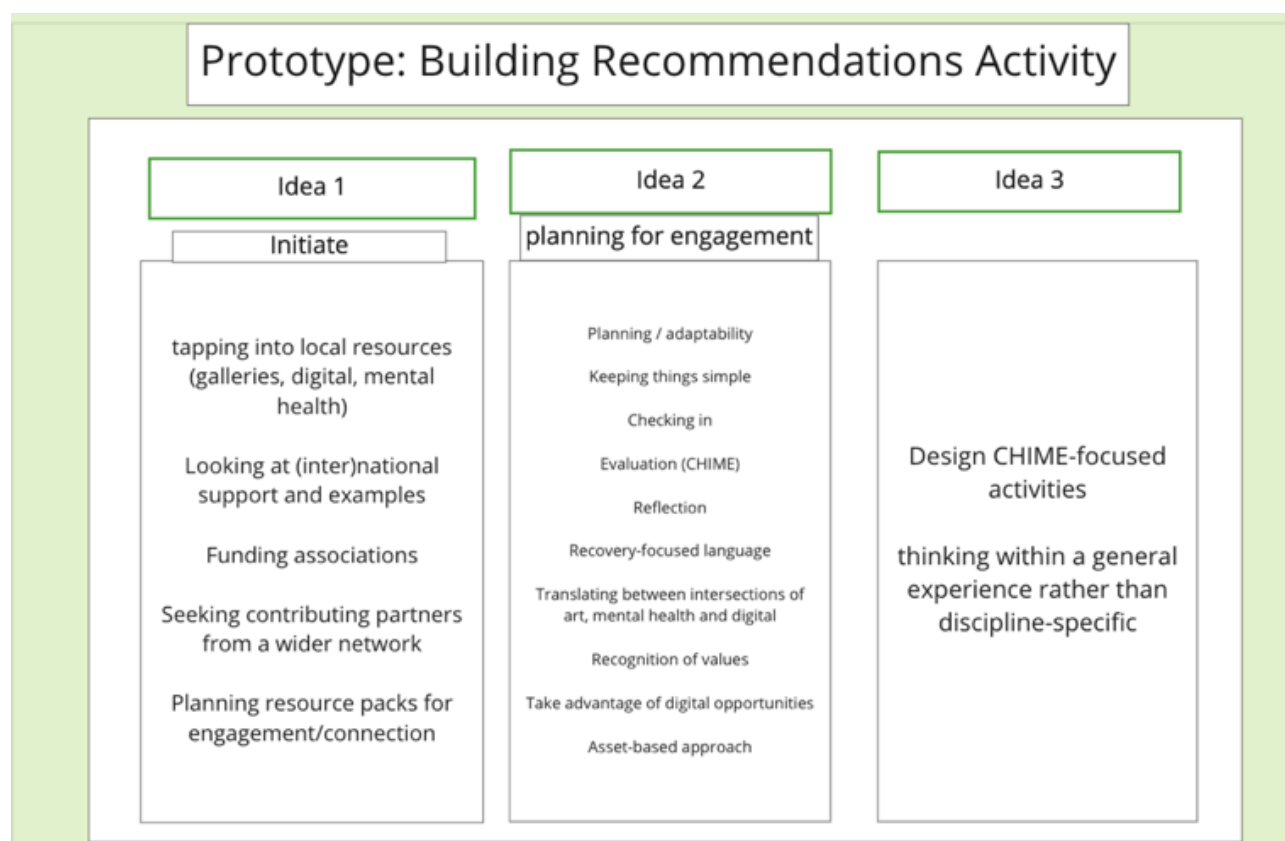


Figure 27: Miro Prototype Activity. Source: Author's own

What	Who	Where	Rationale	Reflection	Further Action
Prototyping activity Building recommendations for how galleries can support remote access to mental health support	PTS1 PA PR PTS2	Remotely via Zoom for the verbal discussion and Miro for the visual doing element.	Build and reflect on learnings generated from previous phases to collectively design and decide upon a finalised potential solution and how this would be presented. Adding towards the research question of co-defining how galleries, through collaboration and the knowledge shared by other practices can enhance access to remote support.	<p>"...difficult to engage in live prototyping in an online zoom discussion format as I found it hard to formulate my own ideas while listening and considering all the great ideas everyone else was suggesting. I might have preferred to be paired up with one other person to discuss prototyping ideas together and then feed back to the rest of the group."</p> <p>Having the previous activities recorded in the same space meant that we were able to easily move across the board to review the comments that were previously made in the concept activity to build on for the prototype.</p> <p>The session again formed more as a focus group conversation, I will have to use the analysed data to draw out further conclusions to formally generate the framework comprised of everyone's input.</p>	<p>Reflective, Anecdotal and conversational data will be captured from the miro boards and audio recordings from the activity, which are then transcribed and coded into themes and recurring patterns to understand the design process</p> <p>Schedule reflective engagement in two weeks time.</p> <p>Feedback the potential framework to participants</p>

Figure 28: Prototype Activity Fieldnotes. Source: Author's own

4.3.5 Phase 5: Evaluate

For the final stage of the engagement, the participants were invited back to reflect on the engagement process. It was decided amongst the curated team of practitioners that we would wait two weeks after the previous phase to allow some time to ruminate and reflect individually on the process before coming back together.

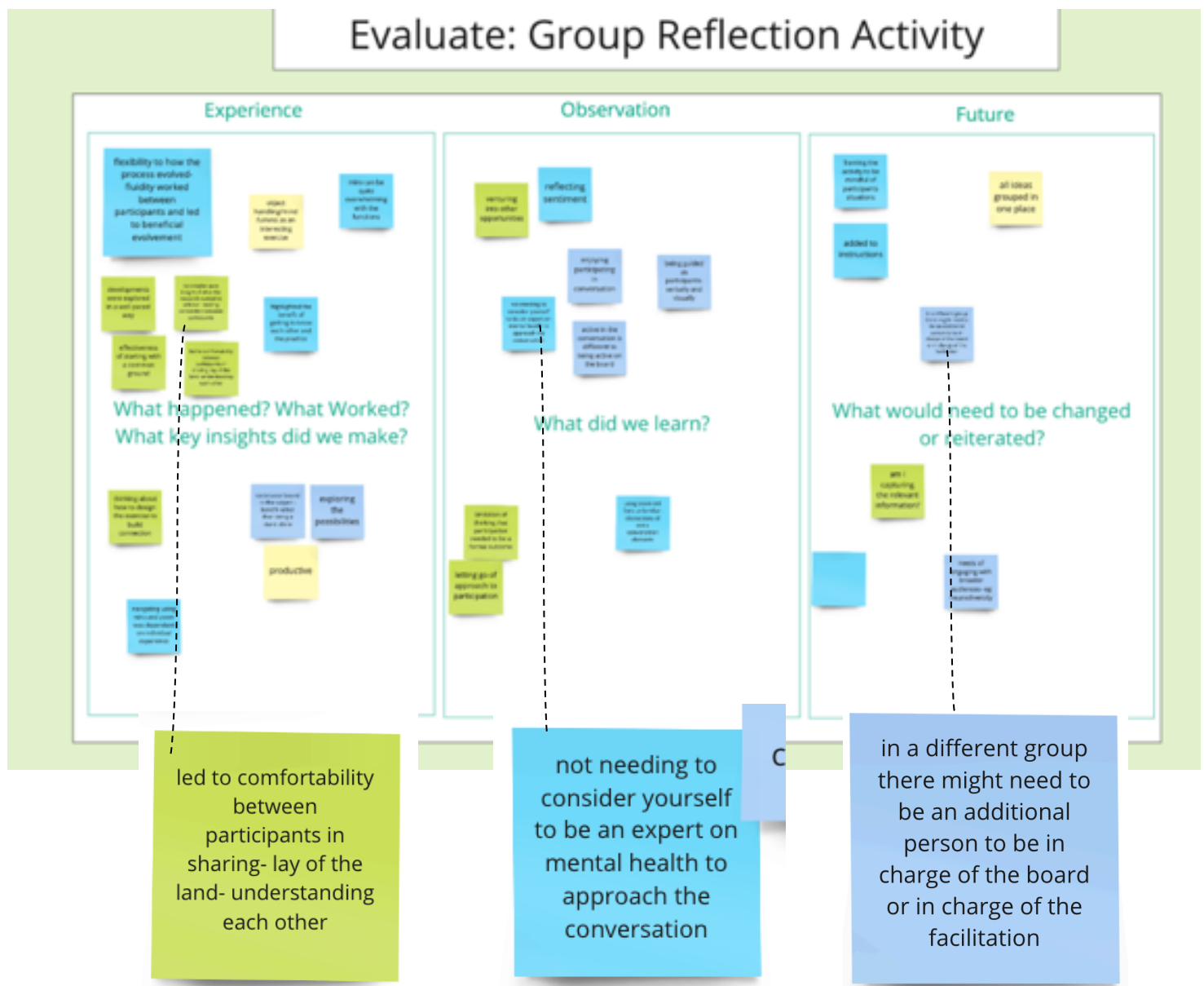


Figure 29: Miro Reflection Activity. Source: Author's own

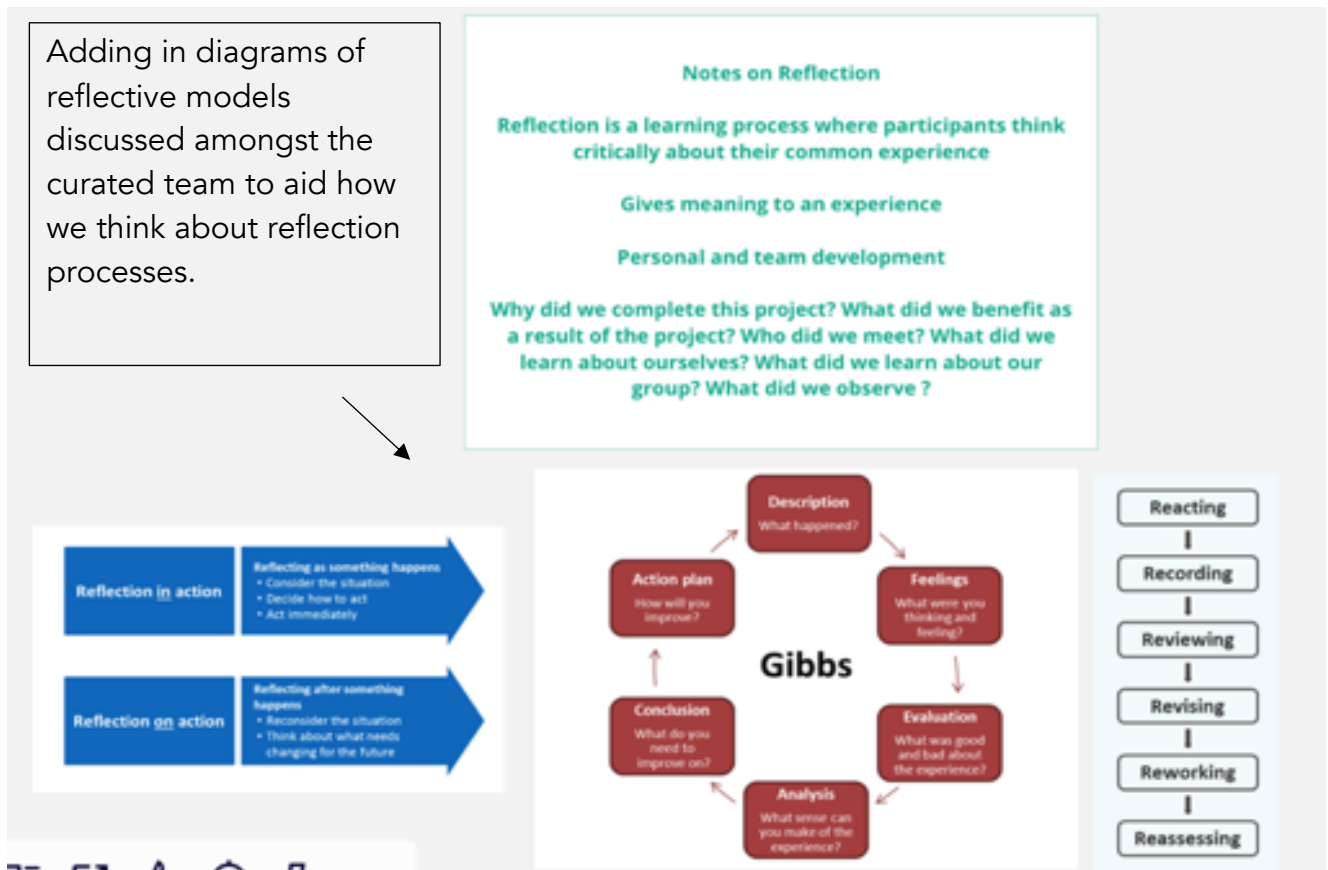


Figure 30: Miro Reflection Activity extra detail. Source: Author's own

The engagement was set up in the same Action Space on the set of Miro boards where I had outlined three categories of reflection: Experience, Observation and Future with corresponding questions: What happened? What did we learn? And What would need to change? To help the curated team get into the mind frame of a reflective exercise I had added some additional information to the grey area of the board (fig, 30).

The Evaluate engagement was joined by PTS1 and PA through Zoom video meetings and a short while later by PR, who dialed into the meeting with audio only by using a traditional phone call.

As always the curated team were quick to engage in the topic of reflection, despite initial delays and technical difficulties. The conversation naturally started by sharing recent experiences of reflection activities in remote settings. PR commented on a playful self-monitoring tool they had recently taken part in, where a colour wheel was sent in the post allowing for a sense of involving something analogue and tangible in an otherwise digital setting.

The idea of balancing the digital and tangible in online reflective sessions was commented on further with the difficulties of the process of thinking and doing. As we had found in previous activities, comments were being lost in the multi-tasking nature of navigating Miro and Zoom simultaneously, so I was nominated to keep track of the group's comments. I used the sticky note function and kept in line with the colour coding we had previously used on the board. The curated team began to have a discussion focused on the prompt questions on the board: What happened? What did we learn? What would need to change?

Due to signal issues with PR dialing into the meeting, they decided to use the chat function to make clear what they were saying. The nuances of facilitating the dynamics of the conversation across different platforms eventually became complicated. Once I had used the screenshare function on Zoom, to show what was taking place on Miro, I lost the ability to view comments in the chat function and the other participants had to then relay the information for me to transcribe to Miro.

Fortunately, as the curated team had maintained the same participants throughout, we were comfortable to manage the challenges and make light of the situation. This hiccup in remote working further highlighted some of the issues that may occur within remote support settings. We reflected on the need to have multiple facilitators in online group sessions:

“...in a different group there might need to be an additional person to be in charge of the board or in charge of the facilitation.”

Comments were related from the start of the research, focusing on the object handling session to the way in which we performed our roles within the group, leading PA to ask, “am I capturing the relevant information?”.

After an hour of reflecting the task came to a natural end. I gave my appreciation to the curated team for their work, insightful conversations and time they committed to the project. I followed up with PTS2, who was unable to attend, by email to share a brief outline of what had taken place during the reflective session and to let them know that they would be able to add any further comments to the Miro board.

What	Who	Where	Rationale	Reflection	Further Action
<p>Group Evaluation</p> <p>A session design to critically reflect on what had taken places based around three prompt questions:</p> <p>What worked? What did we learn? What would need to be changed or reiterated?</p>	PTS1 PA PR	Remotely via Zoom for the verbal discussion and Miro for the visual doing element.	<p>build and reflect on learnings generated from previous phases to understand what worked as a curated team and to evaluate the delivery of the remote engagements</p> <p>This session further adds towards answering the research question by reflecting on how the activities and the curated team were designed and orchestrated through curatorial and interpretive practices.</p>	<p>The curated team decided that it would be best to reschedule this session for two weeks after the previous engagement in order to collect their thoughts and ruminate on the proces.</p> <p>For this session we decided, from previous experience, that one person would be nominated to write on the sticky notes as the others spoke to limit distractions and make the most of the time we had.</p> <p>PR dialled into the session which meant there were some signal problems and the chat function had to be used.</p> <p>PTS2 was unavailable to attend the session so the evaluation felt incomplete without full input from the curated team.</p> <p>We reflected on both the process and the outcomes we had created.</p>	<p>Anecdotal and conversational data will be captured from screen and audio recordings which are then transcribed and coded into themes and recurring patterns to understand the design process and the participant's own evaluation of the research they had taken part in.</p> <p>Update key insights on the Reflective Space Miro board.</p> <p>Present findings or reiterate the session with multiple groups of professionals, including curators and health workers.</p>

Figure 31: Reflection Activity Fieldnotes. Source: Author's own

4.3.6 Opportunity for continual feedback

It was been decided that the Miro boards will remain live for two more months following the engagement. Doing so would allow participants to comment on any further reflections or insights while also being able to access their own findings. I used the Reflection Space on the Miro boards to present research data back to the

participants to check that insights and key themes were correct and consistent with their experiences. However, due to personal schedules the participants didn't feel the requirement to return to the space after the engagement activities had been completed and were not pressured to do so.

4.4 Summary

The participatory fieldwork took place between July 2020 and September 2020, with an extended period of reflection open until November 2020.

The 5 key phases explored with participants enabled me to connect with a wider set of values from the mixed professional backgrounds of the curated group. Phase 1, Initiate, allowed the curated team to start with a common ground before building connections and introduced a way of understanding gallery and museum-based methods. Phase 2, Explore, highlighted the benefit of gaining understanding on each other's practices within the context of research. Phase 3, Define, explored interpretational techniques as a catalyst for talking about health stories while additionally highlighting the greater quality productivity as a group happened in the live collaborative sessions. Phase 4, Design and Prototype, explored the possibilities of co-designing a framework of recommendations for galleries to enhance access to support for mental health. Finally, in addition to the continual reflections as per the

PAR process, Phase 5, Evaluate, gave the opportunity to formally reflect on the engagements by asking three basic open-ended questions: What happened? What did we learn? What would need to change?

The fieldwork allowed for three different types of data to be collected:

i) conversational, captured through audio recordings to analysis the research focus how the participants worked together and their expertise on delivering support; ii) visual, through the activities that took place on Miro to evaluate the choreography of engagement created in the context of curatorial practice; and iii) observational, which took place in the reflections to understand how the remote mode of delivering the activities affected the conditions of participation.

Chapter 5:

Analysis

Chapter 5: Analysis

5.1 Introduction

This chapter provides an analysis of the data collected during the fieldwork and discusses the process and insights generated during the participatory engagement through a curatorial lens.

To make sense of the data and insights, the analysis has been organised into three sections responding to the broad research question and the two sub-questions.

Breaking down the analysis by research question allows an in-depth exploration of the distinct aspect of each question:

Broad Research Question – Enhancing the design support through curatorial practice:

How can curatorial practice enhance multi-disciplinary approaches to designing alternative forms of community-based support for mental health through remote engagement?

Sub Question 1 – The quality of remote engagement:

How does the quality of a curated, remote space change or enhance the quality of engagement and sustainability of engagement?

Sub Question 2 – Multi-disciplinary engagement with the curated team:

How can multi-disciplinary practitioners be supported by curatorial practices to collaborate for improved exchange of knowledge, practices and resources across mental healthcare and cultural institutes who adopt curatorial practices?

The data from fieldwork have been analysed through thematic analysis (fig, 32), where the colours represent initial codes and themes, and the dots on the left hand image show the frequency of which they occur within the transcribed text.

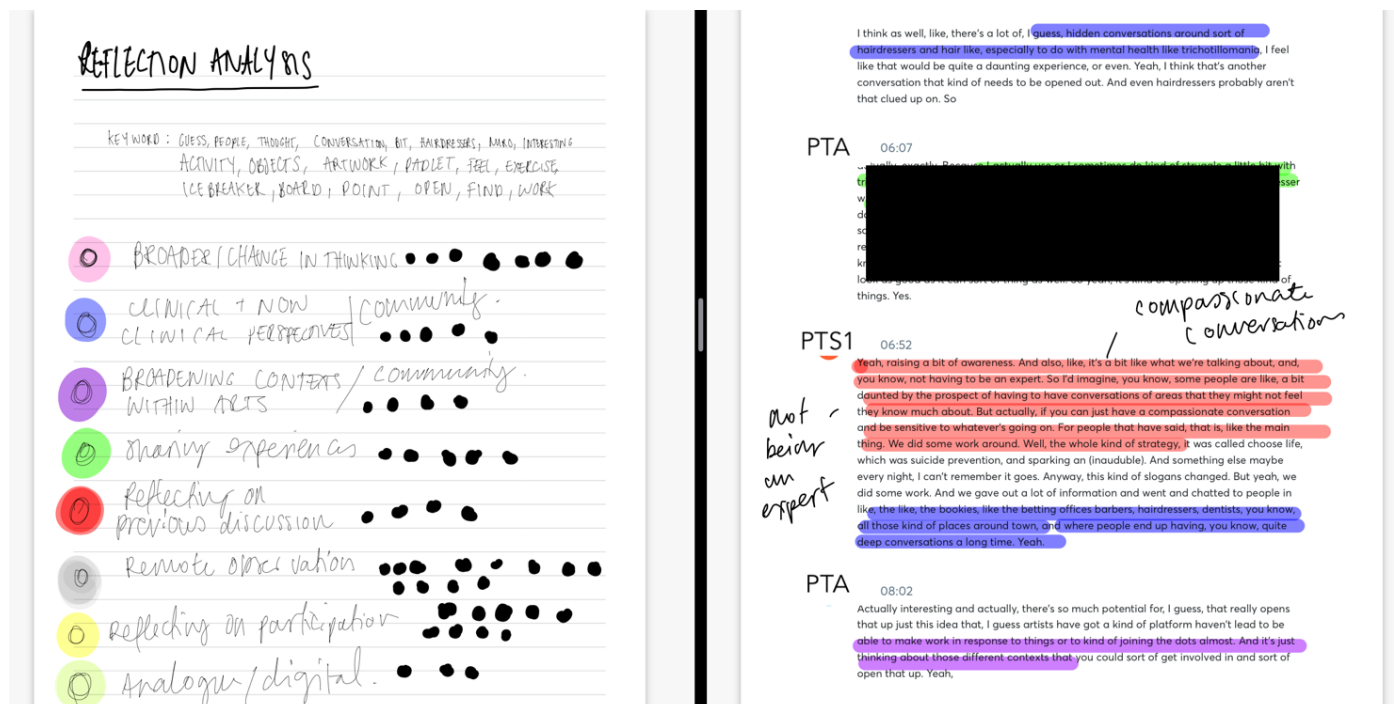


Figure 32: Example of immersive phase and coding of transcribed data. Source: Author's own

The key insights emerging from each step of the analysis (fig, 33) have been distilled into a set of recommendations, which form the final outcome of the research project. These recommendations are presented before the discussion of findings placed in the wider context of the research study.

5.2 Analytical Framework

Thematic analysis was implemented through the stages of immersion, generating initial codes, searching for themes, reviewing themes, defining and naming themes and producing a report, recommended by Braun and Clark (2006).

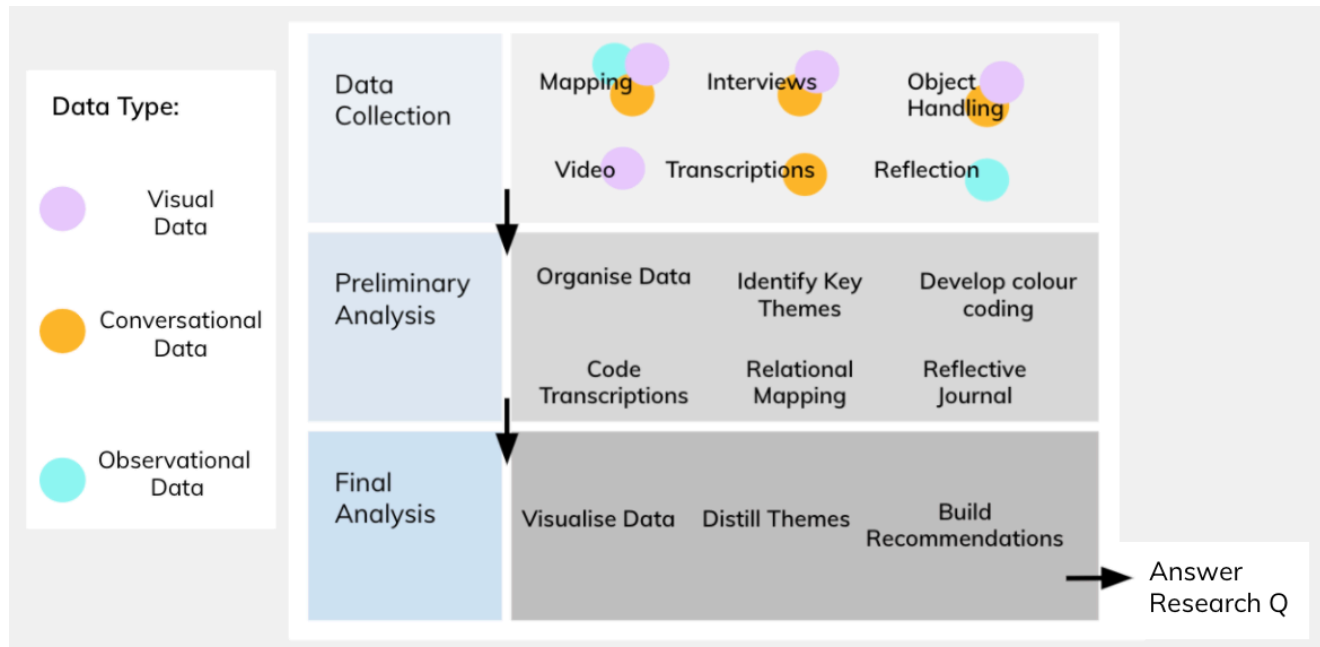


Figure 33: Example of thematic analysis process. Source: Author's own

The Thematic analysis approach allowed for analysis to take place over the three different sets of visual, conversational and observational data and provided a large

quantity of rich insights to be gathered and understood in relation to what questions each data type answers within the research.

5.3 Research Question

The first set of themes presented are related to the broad research question:

The first set of themes presented relate to the broad research question focusing on enhancing the design of support through curatorial practice.

How can curatorial practice enhance multi-disciplinary approaches to designing alternative forms of community-based support for mental health through remote engagement?

Insights have been drawn from analysing transcribed conversational data generated through the process of the Initiate, Explore, Prototype and Design, and Evaluation phases.

The themes within the following section relate to approaches of using curatorial and multi-disciplinary engagements to apply to the design of alternative forms of support for mental health and wellbeing. The following themes have been

constructed from the perspectives, experiences and knowledge of the curated team (fig, 10), which was shared and uncovered through the engagements.

5.3.1 Theme 1: 'I'm Not an Expert, But' – Supporting the Facilitator

The theme of not needing to be an expert was highlighted throughout all participatory phases of the fieldwork. It was initially brought into the conversation during a reflective conversation that had naturally occurred at the start of the second session coming together as a group. The Third Sector practitioners felt confident in bringing up the concept that you don't need to be an expert in order to approach the conversation, however the arts background practitioners continued to make the distinction of their perspectives:

- *PTS1 "so I was reflecting on our conversation, you might have mentioned something like 'I'm not an expert in mental health' or something like that, which is a really common, I think, experience and lots of people think facilitating opportunities, running things sometimes feel like they're not an expert in mental health and so they don't really feel comfortable going there... I think we are all experts, actually, in our own way. And I think its more about being compassionate and having confidence in having conversations and to communicate... but I feel like it gets kind of blocked by this feeling of not being*

the expert in mental health, and whereas I don't think that's the important thing."

- *PR "I suppose it goes back to that question about what level of competencies are required and in a sense not to go beyond, not to create back holes to fall into."*

The conversation soon shifted to frame this as a way in which practitioners or facilitators delivering support workshops needed to be supported themselves for both factors of talking about mental health and talking about the subject in an online environment:

- *PTS1 "I think there's a real opportunity to explore what's best to support people to feel more confident in what they're doing, but I think sometimes people get too focused on the diagnosis kind of detail."*
- *PTS2 "You can tell me if I'm on the right track or not, was something about boundaries."*
- *PR "so I suppose what I'm thinking about is how do you support the practitioners delivering this sort of work online? And how to make sure that they don't get out of their depth?"*

Interestingly in a later session an idea was prefaced with '*I'm not an expert, but*' and then led on to suggestions building on their own expert experiences to relate and make connections from a non-clinical perspective:

- PR *"I don't know enough, nearly enough about mental health. But I suspect that actually... its all about a shift to process the terminology of what the practitioner is all about.... Some of the making stuff might be performative and quite open ended... So in a way I think there's a trajectory through this and managing the trajectory and understanding has got to have a relationship with mental health somehow."*
- PA *" It would be interesting to see whether, because from my point of view, and again, I'm not an expert on mental health by any means, but I could also see an argument for spending time in the divergent thinking, you know, and getting people to just be really open where there's no right or wrong. It's just all about exploration and development."*

The way in which both PR and PA revert to underplaying their knowledge of, or interest in, developing support for mental health, without explicitly suggesting so, builds on the idea that there needs to be support for practitioners to feel confident in how their knowledge and practice can be a contribution into the non-clinical

aspect within the research context. PTS2 then offers for this to be built into the recommendations in the prototype phase:

- *PTS2 “ I suppose maybe when it comes to the recommendations, it’s just making sure that the gallery staff are supported to know that there is lots of resources out there to draw on. So they don’t have to reinvent the wheel. Yeah each time they do something, that if something comes up where there’s a specific barrier or challenge... then the chances are someone else has thought about it. And sourcing a few examples to start helps get the sense of what’s out there, doesn’t it?”*

The participants found it useful to have an open conversation about being an expert on mental health from a supportive recovery-focused creative practitioner level rather than from a clinical perspective. The notion of not having to reinvent the wheel reinforces the value of drawing on experiences and other resources.

5.3.2 Theme 2: Partnerships and Pathways

The value of partnerships and pathways became a focal point that was discovered through mapping the connections between practitioners, who all had experience

working with or across different organisations. Partnerships and pathways were seen as important for learning, strengthening and connecting both perspectives of potential service users and providers.

- PR *"So I actually think the important thing in terms of mental health is that there's a pathway, whether it's one session or a block of sessions I'm very much in favour of not assuming that one sort of participation is better than another... how do you offer stage 2 and stage 3?... I do think this thing about understanding the sort of modes of participation and increasing agency so that people go from something which is a quick win into something which meets their aspirations for greater agencies."*
- PTS1 *"I wonder about pathways and I think there's probably a real role for strengthened relationships with other community based organisations and opportunities."*
- PTR *" you don't have to deliver it all, signpost it. I absolutely couldn't agree more signposting, especially from local to national."*

This theme strengthens the role of curatorial practice of bringing different but relevant resources together, while building on the previous theme of supporting the facilitator by providing a directory of alternative and exemplary routes for guidance.

PR felt that the current information, in particular surrounding arts and health movements that is out there, needed to be better organised and updated:

- *PR "So the culture health and well being alliance has a, I think the problem is it's a constantly evolving land... the truth is there's just more shit out there than any of us can possibly ever understand what's out there, let alone what's useful. Funders and professional associations are absolutely key knowledge exchange vehicles and so I would think that encouraging them to recognise new categories of material like this."*

It is evident in the way in which conversations between the participants from professions of third sector and archives drew on each other's expertise that Theme 2 also asserts the asset-based approach to thinking about partnerships. In addition, this affirmed the value of multi-disciplinary and collaborative working:

- *PTS1 "I think drawing on each other's assets. So maybe the gallery and other partners, but what have each of you got to offer, maybe there's an organisation that they might work with, and there might be a worker within that organisation who can also support facilitation... to enable them to feel confident in their online delivery."*

Furthermore, the advantages of partnerships and pathways were explored within the context of remote working, where PR felt that national and international resources have become more easily accessible alongside what is available locally.

- *PR "there is tapping into local resources, so knowing in a way, if you're an arts person then understanding what the local third sector interface is or who can support you with digital. So we are going back to the three intersecting areas... so there's tapping into local resources. And then there's looking at national examples, or even international."*

The benefits of including national engagement is relevant to the way in which the curated team were brought together.

- *PTS1 "you know, like the cards, because in a sense if you only looked at your local networks, then you'd never come across the cards and they look really interesting, I'm gonna order a pack."*

It's also worth noting that the remote aspect of the research study enabled participation more broadly across Scotland. Bringing communities together meant that knowledge that was relevant to projects in the North East of Scotland was shared with participants who were located more centrally.

5.3.3 Theme 3: *Balance between open space and keeping positive boundaries*

When considering how to approach a set of recommendations for cultural institutes to engage in providing support for mental health in the Design and Prototype Phase of the fieldwork, the participants reflected upon their own experiences of delivering workshops. PR felt that there needed to be clear boundaries on what the role of facilitator can and can't do in a workshop:

- *PR "I've done some research into failure in the aspect of creativity... And when we started doing it, somebody said, 'what about the mental health implications?' And I kind of went, 'no, I'm not dealing with it.' And so from front end I say, 'if there are mental health implications go get help.' No point of me saying failure is useful for the creative process is any use to somebody who's actually got a mental health challenge."*

PTS2 had agreed with setting boundaries but constructing them in a positive way where those attending the workshop have a mutual responsibility over what happens in the session:

- *PTS2 "if you're delivering workshop sessions, if that's the case, then having a group agreement... it doesn't have to be called that but that sorts of helps you*

have boundaries in a positive way... you know, check in and say, 'do you like these rules, do they sound good to you?' Get that consent from everyone... And in a way, if you're going to a physical space right now, you have to actually adhere to rules that are black and white. So it's okay to sort of reference that we've got these rules online to help us feel safe and comfortable."

Theme 3 highlights the importance of thinking about how online engagements are structured, where communication and reflection are valued to enhance the overall approach to managing expectations in the remote or online context.

5.3.4 Theme 4: Balance between analogue and digital

The final theme that relates to the broad research question is reflected by PR who felt that there needed to be an acknowledgement around the sustainability and challenges of engagement when it came to the remote experience and the nuances of social interaction:

- *PR "surely, in a sense, some of the value is toggling between the analogue and the digital. I was very happy to turn the screen and the sound off and just listen to Fiona directing my attention"*

- PTS2 "I just think there's something about the human, you know, our big challenge with the digital and the problem of increased social isolation and loneliness is how do we keep it feeling like a human experience?"

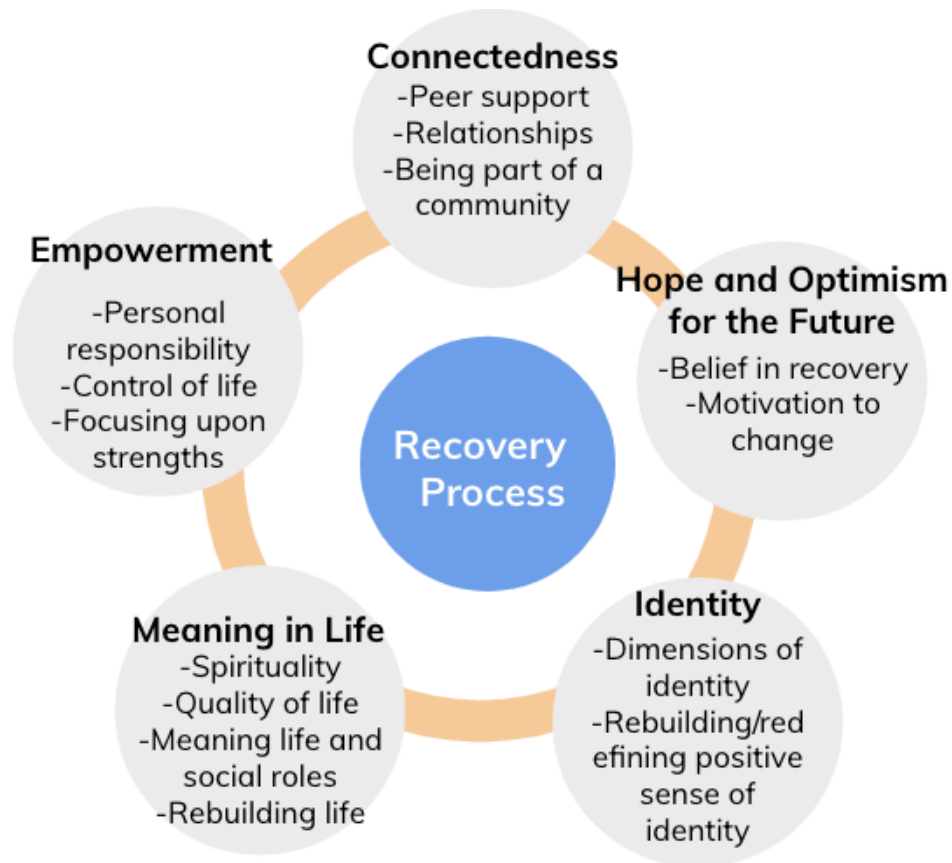


Figure 34: CHIME Recovery Process. Source: Author's own

In the Concept Design activity PTS1 had brought up the CHIME framework (fig, 34), which PTS2 was also familiar with in her practice as they worked in similar organisations. PTS2 had a pack of physical CHIME cards that are used to hand out to groups, which she had shared on screen with the group. The curated team were inspired by the physicality and simplicity of the cards and began to think about the value of physical and digital resources:

- PA *"I was thinking it would be so good if there could be materials as part of a pack like that... just different kind of tactile materials kind of if you were doing sort of mindfulness exercises but again, I don't know how that would be digitally possible?"*

Theme 4 promotes thinking about digital and analogue limitations that different disciplinary perspectives must be made aware of to think about a more general experience of what might make it possible for someone to participate.

5.4 Sub Question 1

This next set of themes relates to the Sub-Question:

How does the quality of a curated, remote space change or enhance the quality of engagement and sustainability of engagement?

The themes in this following section draw on the quality and the experience of online working situations and how certain conditions can have impact on remote engagement and other aspects of social isolation.

Insights in this section have been drawn from the analysis of conversational data from the transcribed recordings, reflective data and observational data from the Miro space.

5.4.1 Theme 1: Being Aware of Stimuli

Common experiences among the curated team were that there was a lack of stimuli that they were getting from their everyday lives while in lockdown.

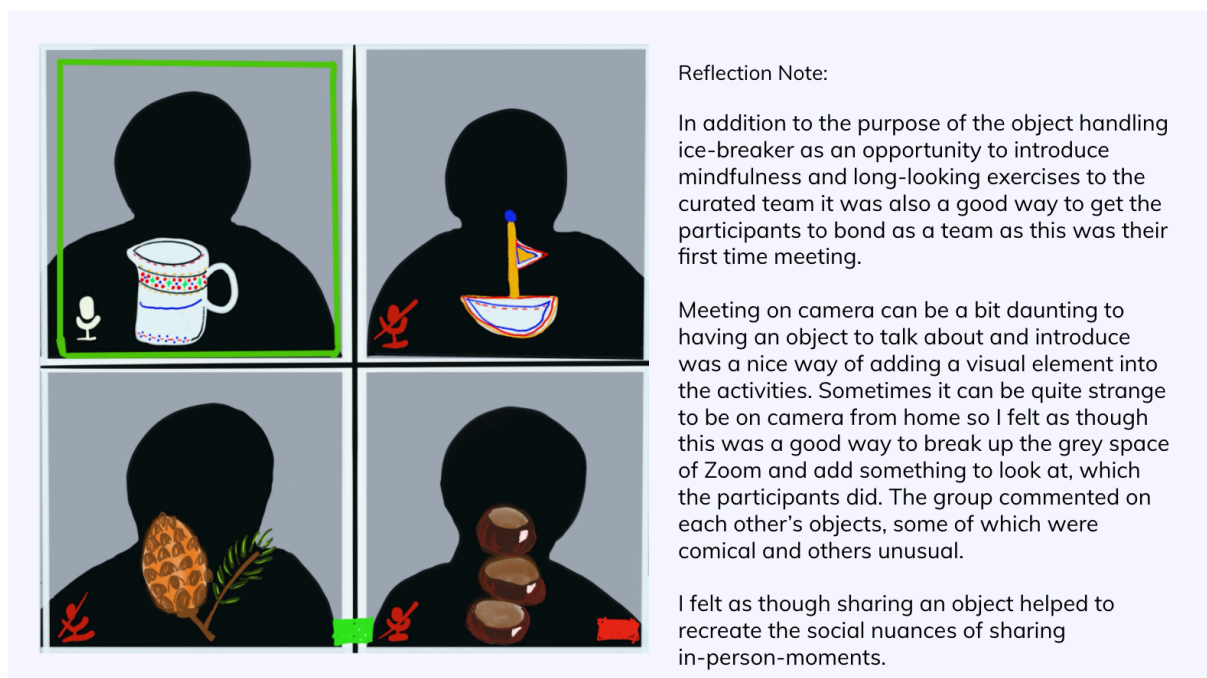


Figure 35: Object Handling Researcher's Reflective Notes. Source: Author's own

The observation of the need and benefit of stimuli was initially recorded in the researcher's reflective journal as part of a re-cap of the object handling ice-breaker (fig, 35). Participants were invited to share objects from their regular environments,

which allowed them to look at things differently from a selection aspect. While the participant's were aware that they would be joining the research as practitioners, it was also interesting to see what objects they had chosen to share on-camera with the rest of the curated-group.

People's social and work lives were being moved into the online realm with video calls becoming the norm and trips outside were limited. PR reflected on the uniqueness of the situation:

- *PR "Well, I think it's quite, you know in a sense, part of the weirdness is that we're not moving. So in a sense, we're exposed to less stimuli in a funny way. So I sit in meetings with my colleagues a lot and they're always in the same place. The sameness of us being in the same places, but it's the sameness of the people we're talking to on Zoom regularly, also being in the same places. And the frame, meaning that we see them you know, the sameness is exaggerated by the screen frame."*

PR further stated that:

- *PR "in a sense having the sort of flip that's gone from, we were all obsessed with our screens before, but we were also going places and doing things and having, you know, real world stimuli. "*

This theme highlights the importance of the social engagements and bringing in creativity and different ways of thinking which might serve as a welcome break from the monotony of screen-based activities.

5.4.2 Theme 2: Creating focus

To build on Theme 1, when reflecting on the Ice-Breaker session the curated team felt as though the structure of the session not only helped to ground the activities in the curatorial aspect of the research but also guided them to focus in the moment.

- *PTS2 "the opportunity to connect with the object as a focus. And that being a really supportive process regardless of how long you can focus for and just having the tool is a really supportive thing in itself and to distract from other chaos."*
- *PTS1 "I think its nice having a tool or focus to connect with one another and I miss so much for being with people, like this kind of thing in person. So I was going to say maybe more important within the virtual space, its great having a focus to just connect and make people feel comfortable meeting new folk."*

The theme of creating focus was also highlighted as an important issue where it related to certain barriers to accessing remote engagements, specifically when it comes to engaging with visual arts online:

- *PR “the problem with the Google arts and culture is the swipe left problem of the being an infinite number of things in the digital realm.. but the infinite choice doesn’t actually help”*

By creating a focus around a specific subject within an activity or session not only enhanced the engagement with the session in the online setting but it also allowed for greater accessibility when thinking about the types of audiences that might need to be catered to within multi-disciplinary working.

5.5 Sub Question 2

This final set of analysis is framed by the second sub-question:

How can multi-disciplinary practitioners be supported by curatorial practices to collaborate for improved exchange of knowledge, practices and resources across mental healthcare and cultural institutes who adopt curatorial practices?

This last set of themes will be framed as observations as they relate more to how the curated team worked as a group of multi-disciplinary practitioners and how the remote participation was experienced.

5.5.1 Observation 1: Action Needs to Happen in the Moment

Reflecting upon the the success of each phase of the research by looking at the productivity of each section on the Miro board, it became evident that the least engagement took place on the Interpretation Activity and the Mapping Activity, which relied on the participants filling out and repending to prompts in their own time. In contrast, the activities which took place when the curated team were together looked like hives of activity.

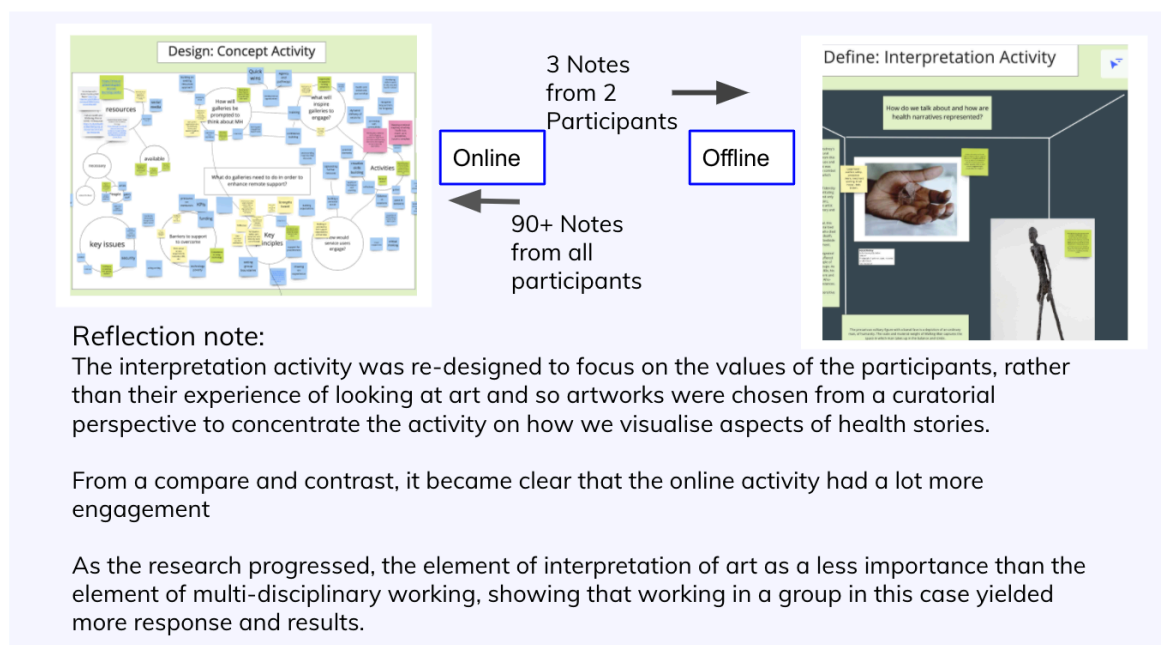


Figure 36: Passive and Active Participation from Researcher's Reflective Notes. Source: Author's own

From the Reflective Journal (fig, 36), it shows the way in which the Interpretation Activity had been adapted and moved to an offline activity to suit the curated team, following interests as indicated in the semi-structured interviews. Yet, it was observed that although adjustments were made there was less active participation on this offline activity compared to when the curated team came together.

The level of participation was brought up as a topic within the Evaluation Activity and the participants had reflected on how they felt about the offline activities:

- PA *"Miro could potentially be quite overwhelming, if it's kind of open."*

Further reflecting on these activities, PA had brought up at the end of a session about what would happen to the Interpretation activity:

- PA *"just before we wrap up because I know that you had put up those artworks... have you moved away from that because I guess that's maybe something that we didn't focus on as much."*

This observation aims to highlight that not every engagement needed to be necessary but helped to determine different methods of what does work in order to

focus on what is more important to the collaboration of the curated team in the moment while working across unfamiliar digital applications. While sustainability of engagement was an important factor in the study, it was also important to acknowledge that there will be moments of passive and active participation.

5.5.2 Observation 2: Flexibility and Structure

In order to capture rich discussions that were happening in the moment, it was observed that keeping the structure of the activities flexible and agreed upon by the curated team was important. Being able to tailor certain sessions to the participant's needs enabled more meaningful engagements. An example of changing sessions within the consensus of the group was when PR brought up their preferred way of reflecting rather than it being imposed upon:

- PR: *"in a funny way the tomorrow's session was meant to be an Evaluate session, I wonder whether it would be better to make an evaluation session sort of two weeks away after we've done tomorrow's piece of work? It takes me a while to work out what matters, what did I really get out of it? And it might be better to have a reflective session further away from the intensity of this process?"*

- PA *"I think that would be helpful, a rumination period."*

Due to the nature of remote working during the Covid-10 pandemic, which felt uncertain and in constant review, allowing collaborative decision-making gave the curated team ownership over the study. It became a broader observation that collaborative-decision making is important for ownership in all contexts of collaborative working. The flexibility of the fieldwork gave reassurance to a research perspective that what was being captured was of interest to all involved parties.

5.5.3 Observation 3: Setting the Tone for Feeling Connected Remotely

What happens outside of the engagements mattered too and acknowledging the remote environment was important. From the previous discussions it was evident that stimuli were an important consideration to aid the sustainability of engagement. The notion of having visual prompts within the grid of a video conversation helped to keep things interesting. It was important to understand that not everyone will have the same regular environments they will be remotely joining from, or the same means to accessing technology, so keeping it simple is key.

In one instance a pet cat had spontaneously come into the room and was visible on camera as the curated team were having what felt like a heavy conversation in the

middle of a session. This fleeting interaction felt like a break in tension of the online realm for the participants as they had all shared similar reflections:

- PTS2 *"you're inviting people to engage their brains and think perhaps a little bit differently than they have before. Like you invited us to see something familiar to us in a way that we hadn't seen before. And that will be enjoyable, but can also be tiring. So what within the session will help, like at what point do you bring the cat in? so when to get everyone to laugh? And how do you do it? Like how much does everyone feel bonded over your cat? Now we all feel involved in the story. It's just so real, and its lovely. When you're getting people to practice mindfulness, it could mean people getting left on their own and they're not happy... so I supposed its something like the balance of the session and the little bits that help, just kind of have a little laugh or have that relief to let go.*
- PTS1 *"I'll be interested to hear what you think about this, its not really about what the activity is as such, like there's so many different things... but its more about how well it's planned, and how well it's facilitated and how well it's communicated and the kind of considerations given. You know what you were saying earlier, the consideration given, and then what actually happens, you know, but its more by the kind of planning and the process and the values that underpin it all.*

The observation of setting the tone and feeling connected is integral to creating the nuances of social interaction with an online space. The cat incident was just a quick moment that brought the participants back together and reminded us of the everyday moments which we miss in the online and remote realm.

5.5.4 Observation 4: Exchanging Values

This final observation captured the imperative nature of sharing values that the research study aimed to highlight.

PR had shared an understanding of how resources should be built upon, suggesting that in new and evolving landscapes practices involved in supporting mental health and wellbeing should look to each other for guidance:

- *PR " actually what we're talking about is, is working at the intersection of gallery education and mental health and the digital. So in a sense, there are three things you need to think about... What's good practice in terms of gallery education, what's good practice in terms of digital and what's good practice in terms of mental health... regardless of any specific resource, you should be looking for what constitutes best practice in those areas ... you might not find the thing that sits on all three of them... but you should find things that are*

straddling each of the pairs... giving people a way to understand the hybrid space they're in is also useful."

This observation (fig, 37) captured what the research study aimed to achieve, an exploration of multi-disciplinary approaches to support at the intersection between art, health, and digital by bringing these contexts together.

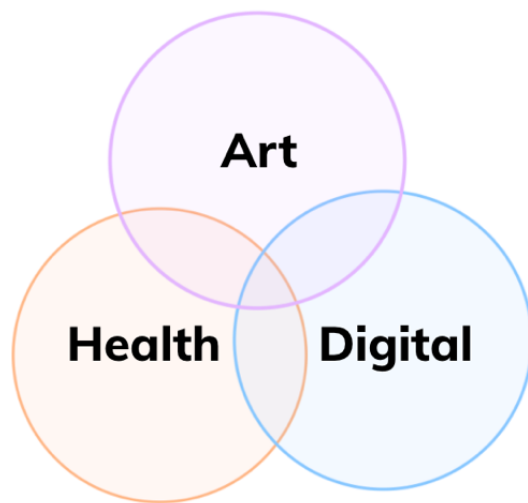


Figure 37: Intersections between Art, Health and Digital from Researcher's Reflective Notes. Source: Author's own

Building on the discussion of understanding the advantages that come from multi-disciplinary working can have, PTS2 added:

- PTS2 *"the values that really matter... cross reference those values to find that intersection point. But you might have your own, Glasgow School of Art might have its values but you may be interested in all sorts of things, we reckon we're going to bring that into the recommendations somewhere because that's kind of world we want to be part of building... to get the feeling we're taking a bit of the special stuff from each perspective"*

This observation aligns with the constructivist epistemology where not only are the participants representing a specific field of professionalism but they also come with their own values which are made up by their experiences and additional interests.

In the final Evaluate phase the participants had shared how they felt after being part of the curated team and working in collaboration with other professional disciplines:

- PTS1 *"I've been opened up to like, a different area of thinking around galleries and participation and like the work I do with mental health recovery."*
- PA *"I think just the chance to reflect on what we all do and share some of those ideas as well. About how we can sort of tap into those different ideas, we've all got different areas of expertise. And we all had interest before coming to this, but just to be able to link all that up, we can actually bring some of it into what*

we do already. If you're working in mental health or in a gallery setting and you haven't had the opportunity to have these kind of conversations or do any of this work? This opportunity to walk through it had really reframed all of that for me."

The participants had stated that they had been made aware of other ways of thinking, which draws on the strengths of multi-disciplinary working as a way of building connections and opportunities.

5.6 Findings

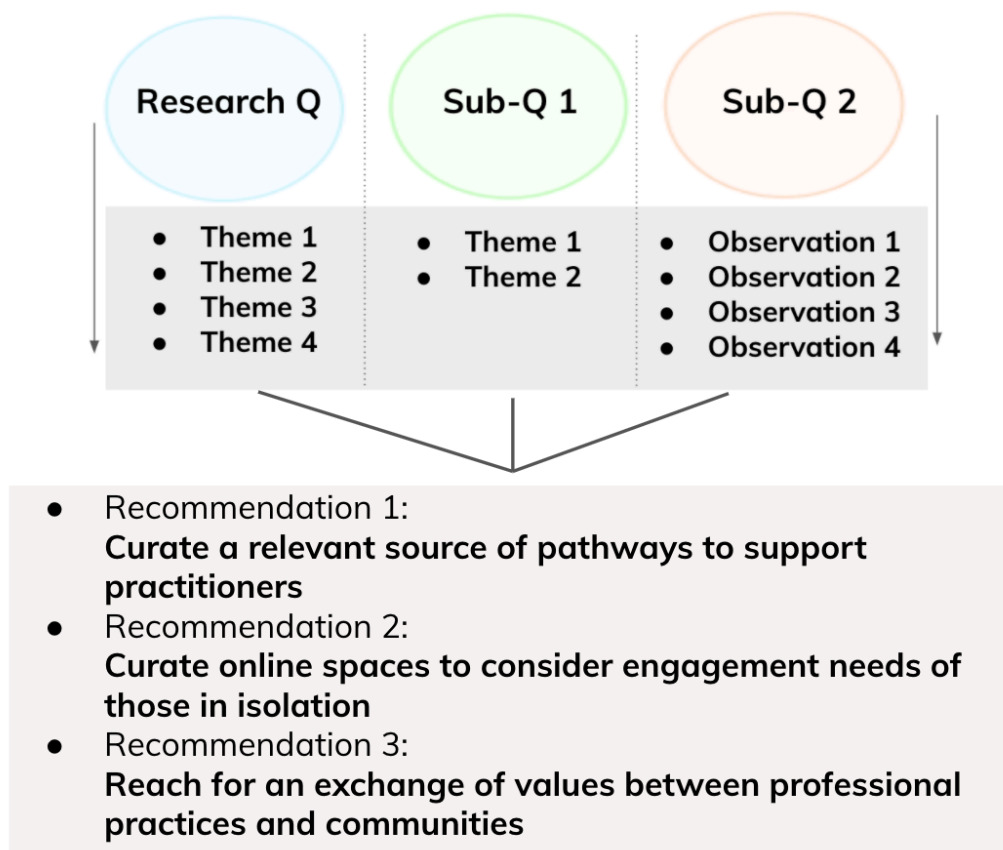


Figure 38: Distillation of Themes to Recommendations. Source: Author's own

The findings from each iteration of the analysis has been refined into a set of sensibilities to be further tested. The recommendations are aimed towards cultural institutions and arts practitioners as a starting point to engage in remote support for mental health and wellbeing.

1. Curate a relevant source of pathways to support practitioners.
2. Curate online spaces to consider engagement needs of those in isolation.
3. Reach for an exchange of values between professional practices and communities.

An explanation outlining the recommendations are provided in the following Discussion Chapter.

5.7. Summary

In this chapter, three iterations of thematic analysis were conducted in relation to answering each research question. From these themes a set of recommendations emerged:

1. Curating relevant source of pathways to support practitioners.
2. Curating online spaces to consider engagement needs of those in isolation.
3. Reaching for an exchange of values between practices and communities.

The recommendations were then discussed in relation to the wider context of the research study to demonstrate how curatorial practices as a mode of inquiry can be further enhanced for academic research.

Chapter 6:

Discussion

Chapter 6: Discussion

6.1 Introduction

The initial aims the research study sought to achieve were to create an understanding of how curatorial practice can be used as a method for research beyond the formal realm of the exhibition to wider communities for enhanced access to mental health support. By curating a team of multi-disciplinary practitioners, a small community had been formed to discuss some of the challenges of delivering and accessing engagements remotely. From the exchange of knowledge facilitated through the fieldwork activities, rich discussions and data was captured and analysed into themes. From the themes a further set of recommendations were created.

These recommendations are suggested as a set of key learnings to be used as a way for curatorial practices to contribute further within academic research and ways of including other practices within the context of support for mental health and wellbeing to create a community of experts.

6.2 Recommendation 1

Curate a relevant source of pathways to support practitioners

Based on Themes 1 and 2 from the broad research question analysis and Observation 4 from the Sub Question 2 analysis.

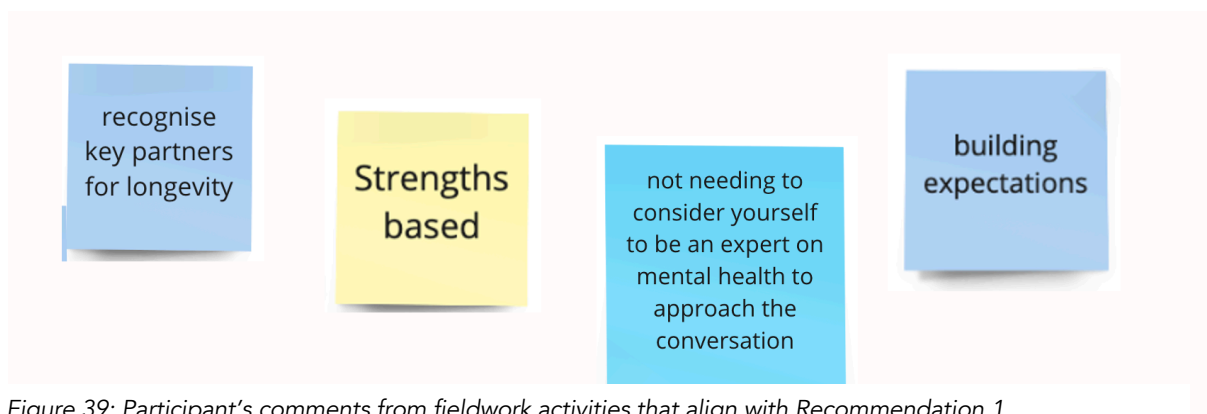


Figure 39: Participant's comments from fieldwork activities that align with Recommendation 1

This recommendation relates to the strengths of curatorial practice, which were demonstrated earlier in the thesis, of being able to creatively mediate and present information. It was important in this study that practitioners and service users of mental health support are supported with further avenues and opportunities to access resources for building on support, opportunities and relationships within the intersections of contexts (fig. 37) to strengthen community relationships between practice, sectors and citizens.

It is recommended that this be taken forward by both curatorial and third sector mental health support workers as research and development.

This is contextualised within the wider research study, where a gap in being signposted to relevant and appropriate information and communities for positive support outcomes was acknowledged. This recommendation addresses the additional need for signposting to a framework of recommendations of how to conduct remote engagement within non-clinical settings in section 2.4 of the thesis.

6.3 Recommendation 2

Curate online spaces to consider engagement needs of those in isolation

This recommendation is based on the insights provided by Theme 3 and 4 of the broad research question analysis, Theme 1 and 2 of the sub-question 1 analysis and observation 3 from the sub-question 2 analysis.

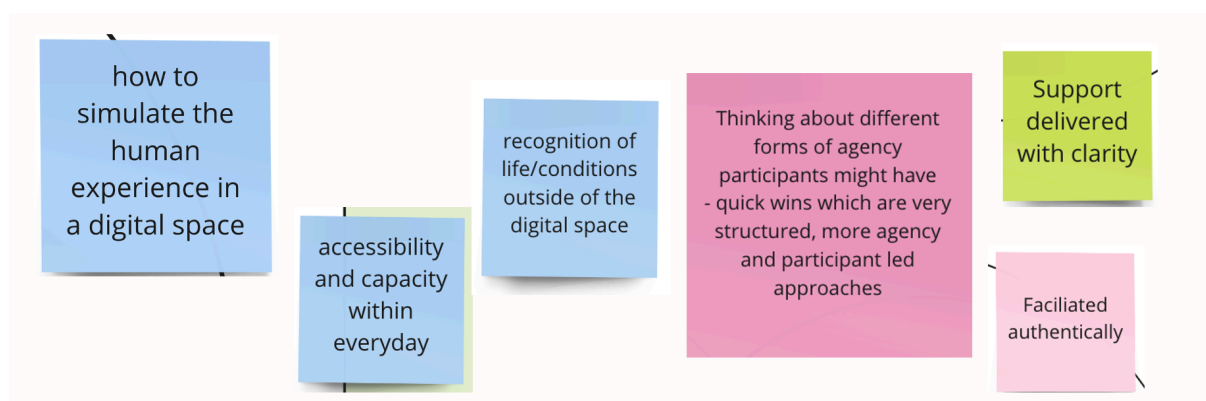


Figure 40: Participant's comments from fieldwork activities that align with Recommendation 2

Connectedness has reoccurred throughout this thesis as an imperative value in creating meaningful remote engagement. Replicating the nuances of social interaction as a strategy to cope with isolation was addressed as an immediate concern for people's mental health and wellbeing in social isolation (Cowan, 2020:11).

Working remotely has further highlighted the need for creating stimulating spaces for multi-disciplinary working for both professionals and potential service users. The curated team felt that including analogue resources and setting positive boundaries would increase the accessibility and sustainability of engagement for all audiences while creating agency and ownership of the process.

The knowledge shared between the curated team of what social support can provide highlights the benefit of engaging with wider professionalisms in addition to the medical science disciplines. This aligns with the call for multi-disciplinary working to provide frameworks of care for mental health and wellbeing in relation to the Covid-19 Pandemic (Holmes. A, O'Connor. R, 2020:2).

There is scope to connect with participation from groups of individual's with a lived experience of social isolation and user experience designers to further explore the underdeveloped insights of specific activities and settings to engage across.

6.4 Recommendation 3

Reach for an exchange of values between professional practices and communities

This recommendation is based on Theme 1, 2 and 3 from the broad research question analysis and Observation 3 and 4 from the sub question 2 analysis.

This recommendation relates to the broad research question of how curatorial practices can enhance multi-disciplinary approaches to produce inter-disciplinary values, knowledge and practices. By orchestrating the curated team, values were connected and exchanged across sectors and disciplines. Further research exploration in this area would validate the progression of knowledge shared across the curated team towards the development of a community of practice , where knowledge is strengthened through the experience of learning with others (Wenger, 1998).

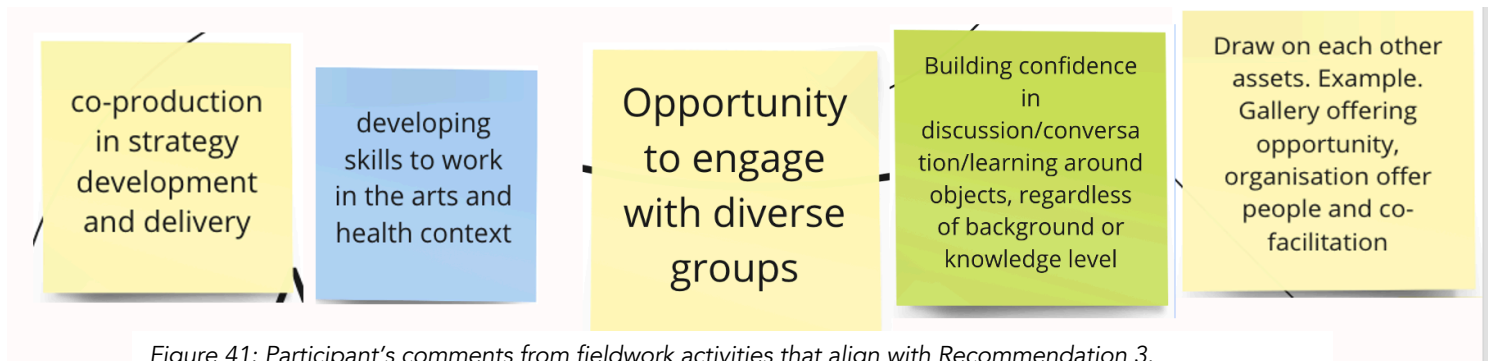


Figure 41: Participant's comments from fieldwork activities that align with Recommendation 3.

Through meaningful engagement, participants have contributed from their performed role of the institutional perspectives they belong to, and autobiographical perspectives of individual experiences. There is value where the curated team have created a multi-centric dialogue as suggested in section 2.5.1 of this thesis, and it is recommended that the recruitment criteria for further research include multiple participants from within each disciplinary background.

The socially engaged and shared decision making allowed for topics such as recovery, connectedness and partnerships discussed beyond just one individual or institution.

6.5 Further suggestions for validating the recommendations

To further validate this set of recommendations additional steps would need to be taken:

- Duration of field work:

Facilitating workshops over a wider period of time would allow for a better observation on the development of multi-disciplinary practice and inter-disciplinary to create trans-disciplinarity between the curated team and how the participants may take on knowledge created into new roles and new communities of practice.

- Long-term Evaluation

Including a long-term evaluation of the participating practitioner's experiences would provide further insights as to how any inter and trans-disciplinary perspectives created had impacted their practice and contexts.

- Engagement with wider groups:

It would be necessary to prove the success of the curated teams to see how different groups of practitioners would respond to the activities and what additional resources and themes would emerge. Bringing in clinical perspectives would contribute knowledge about how additional support would complement and enhance access to treatment for mental health and wellbeing. Similarly, it would be important to include participants with a lived experience of social isolation to understand their mental health support needs and goals.

- Further analysis of the quality of remote engagement:

As stated in the Methodology chapter, it was intended that observational data initially collected through the semi-structured interviews would be strengthened through Interpretational Phenomenological Analysis (Eatough and Smith, 2008). It would be beneficial for a longer research study to include this extra layer of analysis and a further set of interviews to produce more in-depth analysis and mapping of the changes of the individual participant's experience of knowledge gained and interpreted through the process of social learning.

"The values that really matter... cross reference those values to find that intersection point. But you might have your own, Glasgow School of Art might have its values but you may be interested in all sorts of things, we reckon we're going to bring that into the recommendations somewhere because that's kind of world we want to be part of building... to get the feeling we're taking a bit of the special stuff from each perspective".

-PTS2

Chapter 7:

Summary of Research and Conclusion

Chapter 7: Summary of Research and Conclusion

7.1 Introduction

This chapter provides my reflection on the research process, and a concluding overview and summary of the process and the outcomes of the research project.

This thesis has outlined a contextual introduction to the Covid-19 pandemic and its impact on mental health and the relevance for conducting a remote enquiry. In a review of literature, the current state of accessing mental health treatment and support in Scotland was addressed to support the need for research to be undertaken in this area by non-clinical practices. Curatorial perspectives were explored by looking at performative frameworks of Garoian and Dewey to rationalise the benefit of adopting a curatorial lens to the research study in order to explore current gaps in knowledge on how to enhance multi-disciplinary working in this area.

A Participatory Action Research methodology was adopted to undertake participatory engagement with a curated team of practitioners. The fieldwork phase of research was analysed through thematic analysis to refine a set of recommendations.

7.2 Reflections on Research

In reflection there were elements of the initial research design, such as the semi-structured interviews and the interpretation activity, which supported the curatorial practice element that was integral to shaping the curated team, but ended up being less of a focus and not used to provide data for the thematic analysis. These activities helped to shape the scope of research, but due to time and the progression of the initial thematic analysis stages, it became more important for the research to explore the rich and emerging insights for a clearer direction of recommendations.

Furthermore, the use of practice within this study highlighted that the valuable but subtle aspects of the curatorial role came from the group work, which emphasised the importance of multi-disciplinary working in this context. The curated team were less informed by the curatorial activities, for example the Interpretation phase, than they were by being guided by the curatorial practice as a whole. From a researcher point of view, this shows the value of the Participatory Action Research as a meaningful methodology where the participants have ownership over the data created rather than trying to create a focus around *only* curatorial practice.

7.3 Limitations

The year in which this research study was undertaken was turbulent and with little reassurance of when life would go back to normal for citizens on a global scale.

The research project aimed to respond to the Covid-19 pandemic and the subsequent government enforced lockdown as a way to explore emerging challenges to mental health. Social distancing and lockdown contributed to the direction of research into remote working because it became unfeasible to meet people in community settings.

However, there were further limitations and challenges which had an effect on the research, such as:

- Recruitment – Small sample size of participants for fieldwork due to:
 - Furloughed staff within the arts and cultural sector due to closures.
 - Health and Social Care professionals directing their focus towards the health crisis and not wanting to add more commitments to cause stress or burden.
 - Work and personal lives being moved to the online realm meant that people were far more reluctant to add another remote engagement to their lives.

- Scheduling-
 - The rapid developments of lockdown restrictions and people being out of office meant that participant's time became difficult to plan for fieldwork availability.
- Data and confidentiality
 - Conducting and participating research from home meant extra care had to be taken for GDPR and confidentiality.

7.4 Implications

The recommendations provided by this research will be of interest and value to institutions who apply curatorial practices and others who wish to reach a broader set of perspectives and values. It is also important to consider these recommendations in-line with taking an accessible approach to promoting mental health and wellbeing.

This research study has provided an interesting discussion between the curated team of practitioners included in the fieldwork, as scope for the study to contribute to expanding the curatorial field into the intersection between arts, digital practices

and mental health. In addition, the study builds on an area of academic research for ways of organising multi-disciplinary projects through a curatorial framing.

Furthermore, the research responded to the necessity for remote forms of engagement during the Covid-19 pandemic. However, the recommendations can be applied to support other areas of the impact of social isolation on mental health and wellbeing, for example: rural communities, inaccessible public spaces, individuals who are isolating for other health reasons and individuals who work irregular hours.

Taking a creative approach to the challenges of accessing support for mental health aims to provide value and a space to mitigate the effects of current clinical pathways that result in long waiting lists and delayed assessments for those who seek help.

7.5 Sharing and Disseminating Research

I intend to explore opportunities to share the research amongst clinicians and gallery coordinators. In terms of accessibility, there is the potential to provide different creative forms of relaying the key outputs of the research, for example, through presentations and pop-up events.

Discussions with other DHI funded students from GSA and the University of Strathclyde, who have engaged in a common theme of mental health in research, have taken place to explore the potential of organising a student showcase to widen the reach of individual research projects to a common pool of clinicians and industry specialists for further advice and feedback

7.6 Future Research

The set of recommendations are aimed to be used within future research. In addition to the recommendations, suggested steps for supplementary, more rigorous validation of these points have been offered in the section 5.7 of the Analysis and Discussion chapter.

Future research would benefit from repeated iterations of the fieldwork in order to capture more cycles of planning, action and reflection within the participatory action research methodology.

7.7 Concluding Remarks

This study aimed to explore ways in which curatorial practice could enhance access to remote support to answer the question:

How can curatorial practice enhance multi-disciplinary approaches to designing alternative forms of gallery and community-based support for mental health and wellbeing through remote engagement?

By developing a curated team, the research study explored ways in which knowledge can be meaningfully shared and presented between a mix different disciplines towards a shared goal of supporting mental health and wellbeing, specifically during periods of social isolation.

The Covid-19 pandemic presented the challenge of creating connectedness across participants where in-person engagements could not take place. Consequently, it was necessary that the research study took place remotely online, which led to a participatory inquiry and analysis into the delivery of meaningful remote engagements.

This thesis provides an insight on the ways in which curatorial practices can be used as a critical mode of enquiry within socially-minded practices outside of the traditional gallery and museum role. It is hoped that curatorial practice can promote and mediate the beneficial relationship between the arts and health movement, especially for recovery-focused mental health initiatives.

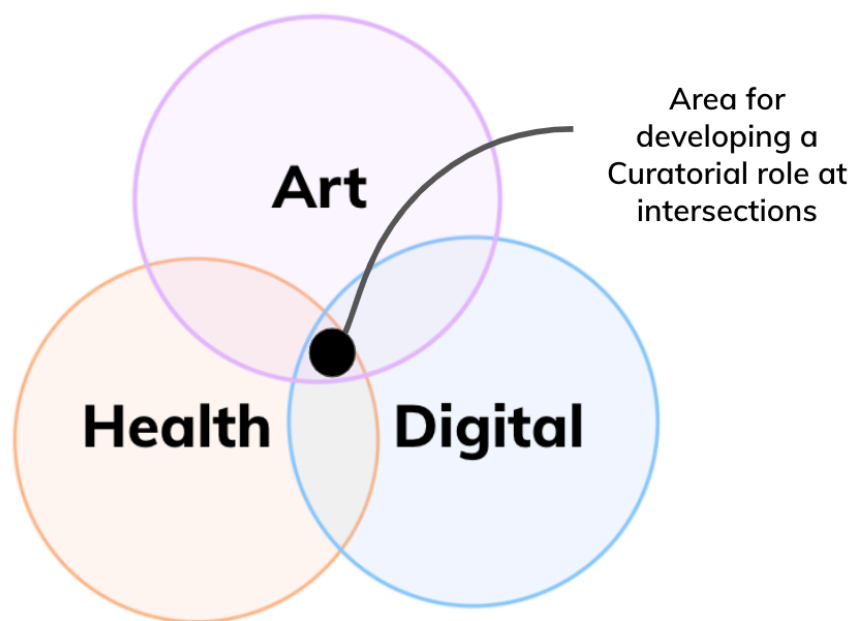


Figure 42: Role for communities of practice at intersections between Art, Health and Digital. Source: Author's own

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