Mental health via cultural citizenship?

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‘My time as a performer and writer hasn’t just changed me, it’s saved me’

(Kevin McCabe, 2007)

Introduction

This brief article presents three different voices commenting on the benefits of engaging with arts practice for an explicitly social recovery from mental health problems. It also speculates on the role of the arts in facilitating versions of citizenship characterised by experiences of belonging, as in feeling included as part of ‘something else’ beyond the self. This contribution, an attempt to discuss a particular kind of ‘public mental health’, involves appreciating how the arts can facilitate a more public life for those otherwise isolated by mental health problems, while simultaneously helping to foster improved societal understanding of mental ill-health. To elaborate, this public life might involve connective social experiences which link arts participants with others, including representatives of the wider community, in ways suggesting a new kind of citizenship characterised by a deepening of social and cultural capital (a key aim of recent government policy: refs).

The three voices commenting below are ones located within particular arts practices and experiences, and relate to our respective positions as project manager and artist (Rosie), project user and artist (Kevin) and academic (Hester). We write this article together because we have an already established working relationship through Hester’s research on and with an organisation called Art Angel, a voluntary-sector mental health-for-arts organisation which facilitates a range of artistic practices by and for people with mental health problems, including art, writing, performance and film-making. Hester’s participative social science research with Art Angel, feeding into academic writing about the arts and mental health (Parr 2006a; 2008, ch.5), has itself involved a measure of arts practice; in this case the making of a film, Recovering Lives, distributed under the umbrella of the Scottish Executive’s ‘Healthy Living’ initiative (see http://www.dundee.ac.uk/geography/news_events/inclusion/; also Parr 2006b). This film presented and evaluated four different arts-for-mental health projects in the lives of mental health service users, highlighting the many benefits flowing from people’s involvement in such projects. It was primarily, but not exclusively, in this context that Hester worked closely with Rosie and Kevin, creating the triangle of perspectives now presented in this article.
We will not rehearse the central messages of the film – which promoted the positive implications of arts practice as well as its drawbacks – but rather write about the implications of arts participation for positions of belonging in what some call ‘mainstream society’. More specifically, we will speculate on the notion of ‘cultural citizenship’, pointing how this term might usefully encapsulate how people with mental health problems may participate in public life, and experience social inclusion, via arts activity. From our different vantage-points, we emphasise how arts participation enables people with mental health problems to achieve a form of social recovery significantly different from stereotypical pictures of individuals coping with isolated (and isolating) ‘illness’ experiences. We also consider the extent to which such arts participation enables wider societal understandings of mental health problems as much more than simply a person’s ‘enclosure’ away from the rest of the social world.

Rosie’s voice and the role of the arts

As manager of the Art Angel, an arts and mental health project, I have had the privilege of seeing how the arts can transform peoples’ lives and see them start to flourish, grow and recover hopes, dreams and wishes, a testimony to their strength and determination. I have often used the following words about how Art Angel works: confidence, self-esteem, self-development, self-expression, empowerment, well being, inclusion, exploration, support, advocacy, creativity, communication, coping and recovery. This is because I have witnessed the changes in participants and seen for myself how the arts can work for mental health and well-being. Many of the people who first come to the project have had life-long debilitating mental health problems and have been robbed of many of the aspects of life that most people take for granted: they are afraid of the world. They have come to a point (and Art Angel) where they feel they have nothing to lose and need to engage in something that will perhaps give their lives some meaning and hope. Most of them have not done any art since school and are sceptical, finding it hard to imagine how messing around with paints, taking photography or writing something could help them in any tangible way. With high quality, specialist arts workers supporting and encouraging this work, however, people begin to build their confidence and self-esteem, and start to realise that the arts are a powerful tool for expressing themselves as a form of communication with their peers and the outside world.

Beyond helping people understand themselves and their problems, the arts helps people make contributions to the community beyond projects like Art Angel, advancing societal understanding of mental health issues through exhibitions, films and publications. These opportunities provide an enjoyable but sometimes challenging experience and involve exhibiting high quality art work in mainstream art galleries.
By building transferable skills and abilities, the success of artists can also be taken out into a more mainstream setting (there are examples of Art Angel participants working in other community projects facilitating creative writing workshops and photography groups). Because these artists have experienced mental health difficulties, they have a greater understanding some of the issues others in the community face; they can identify with whom they are working and provide peer support, inspiration and hope. By encouraging others in the community to realise the potential of the arts in terms of self-expression, communication, inspiration and advocacy, they also enable other potential participants to come forward and get involved. Art Angel, and other similar projects, contribute to the community by building the health and well-being of people with experience of mental health difficulties and reduce the revolving door of constant hospitalisation for those receiving treatment. We also know that many participant’s relations, husbands and wives have also seen tangible improvements in their loved ones’ health, giving them all many more choices for the future.

Getting involved in something new is always risky, and getting involved in the arts is perhaps particularly risky. Many are surprised to find themselves exhibiting, performing or facilitating their own groups, some of which means exposing elements of their past lives to some degree, but they are now able to see that taking the risks has led to cathartic, therapeutic, exciting and inspirational opportunities which help to form new and powerful relationships with other project artists as well as the public. Participants at Art Angel have been involved in giving gallery tours to the public, speaking about their work at conferences and training medical students, psychiatric nurses and psychology students, and have moved from being extremely isolated to engaging and contributing to their community as artists. Many wish to go on working as artists, no longer exploring past events but looking into a new and hopeful future which shirks off their previous label.

Kevin’s voice and the benefits of art participation

For me being an artist has given me new life, new horizons and has allowed me to put my mind in a positive mode if I’m expressing feelings that may cause distress. It would have to be impossible for me to have found a place in society, where I felt wanted for what I bring to the table. So now, able, with many skills and a will that’s filled with a passion to write, as I fight my corner, I’m honoured to have my say, my way, as I play with the spoken word through rhyme.

I love the label stuck in my heart, each with a new start.
The part I hold dear, a chance to dance with the pen, over and over again,
listening to my poetry dance on the page takes some of the rage;
helps me deal with a character of my own as I’ve grown,
In a way it’s been a liberating experience, a journey of self-discovery trying to understand the many different sides of my nature. Coping with danger is common currency, as you never know how folk will react if unsure of the facts. Being backed by people who care has been the greatest feeling of joy a wee boy from the ‘schemes’ could ever feel. Real people, with real concerns for my well-being, have allowed me to gain confidence inside. I now have a contented pride that fills my frame, that looks on my experience with the label of being insane as part of my education. I’m out the other side, where I hide from nobody, least of all myself: a sort of enlightenment that’s my mental health. Feeling more included has been the most rewarding and most helpful feeling in my recovery. Also the self worth gained by how I trained my mind to express and address whatever I feel. Real respect has been shown as I’ve grown in so many ways. The risk of failure and rejection always stands close, so I suppose the fact that folk who really don’t like what you’re about can be off-putting. But I look on that as a challenge, where I give as good as I get. My time as a performer and writer hasn’t just changed me, it’s saved me.

Hester’s voice and different citizenships

In academic and policy circles it is common to discuss citizenship in relation to questions of social inclusion and mental health (Parr, 2008, ch.2). Although rights-based citizenship and the place of the citizen with mental health problems set in relation to the national state and international law is an undeniably important arena of debate, the testimonies above have deliberately focused on other sorts of belongings. The words of Rosie and Kevin hence contribute to appreciating how arts and cultural activity form an important part of achieving what some have called ‘cultural citizenship’; in other words, how ‘we identity and associate ourselves and the ways in which others identify and feel associated with us’ (Lewis, 2004, pp.20-21, her emphases). This claim indicates how cultural citizenship might best be envisaged as an unstable process of ‘becoming’ for people with mental health problems, rather than a static condition fostered on universal and group identities that are always clearly marked and presumed unchanging. Those who do not readily self-identify as ‘client’ or ‘survivor’, or any indeed with other new post-patient figuring recognised in rights-based discourses, are arguably still engaging in profound processes of attachment-making, attention to which, and to the possible embedded role here for the arts, is vital.

An unproblematic and uncomplicated experience of belonging is not straightforwardly achieved through the linking of the arts and mental health. Rather,
the testimonies of Rosie and Kevin point to how involvement in arts practices may open doors towards attaining states of relative social and psychological stability, a crucial outcome if people with mental health problems – which commonly serve to disorientate the self – are ever able to begin experiencing senses of belonging. Such instances of stability, however fragile, might then be cultivated through participation in creative and cultural spaces. Such stabilities, it can be argued, enable artists in mental health-for-arts programmes more effectively to connect with themselves, with other artists experiencing mental health problems, with their immediate social networks (perhaps principally of others with mental health problems), with wider interest communities in other spaces (specifically other arts-based groupings), and even with the still wider community (ie. society at large or, in another vocabulary, ‘the public’).

The words used here – connections, social networks and communities – all suggest a depth model of social life, as well as indicating an experiential citizenship, that can be brought to life in ways that substantively ‘fill out’ policy ambitions for social inclusion. Arts participation as discussed by Rosie and Kevin above indeed suggest a particular kind of cultural citizenship; one in which arts participation facilitates a more public life in project spaces, galleries, films and events, and also one energising social networks and setting in train positive ‘ripple effects’ reaching out into families, neighbourhoods and even wider society. Cultural citizenship here could be cast as something involving inclusion, feelings of belonging and esteem, connectivity and reciprocity; elements explicitly woven through artworks and artistic workings. Understanding more about what this process involves and how it happens, and perhaps how it can be fostered more often and in more places, is an important element of current state agendas for the arts and social inclusion, particularly in Scotland; and listening to the different voices of embedded experience is one appropriate starting point.

Conclusion

Being arts practitioners (artists) in public spaces (galleries, exhibitions, events, cultural quarters of cities) means that a group of people previously stigmatised and hidden away from the public gaze/consciousness are (potentially) integrated into society in new ways. An important part of the concept of citizenship is not just about rights and obligations but belonging, relations and reciprocity, and cultural citizenship through the arts enables the latter dimensions to be realised, although of course in quite particular ways. Public mental health and cultural citizenship need not only be about people with mental health problems and their recoveries of and in the public, but also it may have implications for wider population health and certainly society’s overall understanding of mental health problems. Arts practices by and about people
with mental health problems can render new proximities to mental difference in ways that explode stereotypical myths and prompt sustained reconceptualisation of such difference. This ‘bringing closer’ of mental difference should result in empowering outcomes for people with current mental health problems, some of whom (like Kevin) may even now choose to treat their diagnostic labels as less of a stigma and more as an opportunity, signalling a positive difference that can be a profound source of artistic insight. There should also be significant ramifications for the general population in an age where rates of diagnosed mental health problems are rising, depression is on the global agenda of the WHO and the UK hosts numerous anti-stigma campaigns. Public mental health – and the role of the arts here – may therefore herald implications for those who are ill and recovering, for those not currently affected, and even for those who will never themselves slip into mental ill-health.

References