

Let's all play 'Stigma'! Learning together using forum theatre in collaboration with mental health service users and nurse lecturers

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Abstract

This paper shares the experiences of a group of University lecturers and mental health service users who collaborated in the use of an experiential theatrical technique, forum theatre. The aim of the project was to jointly develop a forum theatre that would be performed to all fields of student nurses in their second year within a classroom setting. This was achieved through a session that employed a theatrical technique to bring staff and service users in order to 1) stimulate student analysis around the complexities of communication and 2) raise awareness about the damaging effects of stigma in mental health. Findings showed that service user/carer involvement issues can be presented using interactive theatre techniques. The method facilitated innovative and educationally stimulating engagement between the students and the service users' personal narratives without losing the impact of the experiences being articulated; this process also brought about a collaborative service user-lecturer initiative.

Introduction

Service user involvement in curriculum teaching of healthcare professionals has gained growing momentum within the UK over recent years (Tew et al., 2004). This paper describes the findings and some of the issues that have arisen from a joint collaboration between mental health service users and lecturing staff that explored the use of an interactive theatrical teaching method. The specific theatrical teaching method used was called forum theatre. The completed project was presented to student nurses at a conference style event within the second year of their preregistration nursing programme. This collaborative venture explored ways of incorporating mental health service user's personal narratives about their experiences of stigma in health care. Service users' views of care were able to be explored and given theatrical form demonstrating to the students the multi complex conflicts faced by users and

professionals. In this paper, the student learning experience of the interactive theatre is explored. Finally, issues of future involvement and replication of this method in higher education is discussed and recommendations are made about the way forward for user involvement in education

Service User Involvement in Health and Social Care Education:

The history, growth and development of the service user movement now include a wide network of organisations, consultants and researchers. The profile of service user involvement has become embedded as an important aspect of health and social care education in the UK context (Branfield, 2009; Taylor et al., 2009). It is acknowledged that service users should have a wide remit of involvement in activities such as the selection of nursing students, the design of educational programmes, their teaching and learning, their educational assessment, the quality assurance processes and preparation for practice learning (Nursing and Midwifery Council, 2008, 2010). The rationale for such involvement is that the everyday experiences of service users are recognised to be fundamental in equipping the emergent healthcare prac-

tioners with key aspects of knowledge and expertise needed to maintain and improve high quality services (Anghel & Ramon, 2009; Beresford, 2000). Rudman (1996) reported the advantages of service user involvement in nurse education being enhanced student understanding of individual experiences and increased respect for individual differences. It has been argued that students development of self-awareness and communication skills is enhanced by the inclusion of service users (Skilton, 2011), and particularly regarded as being important for students in the early stages of their training (Cooper & Spencer-Dawe, 2006).

Promoting service user collaboration in nurse education can perhaps aim towards facilitating change in a number of important attitudinal and learning outcomes for future nursing students. The growing pool of talent that champion the service user agenda has been harnessed to enhance the learning experience of the undergraduate student. Within healthcare education, Morgan & Jones (2009) have demonstrated that the most common method employed to showcase service user engagement in delivering the curriculum was the formal lecture. The format of the formal lecture often included one or more service users telling their stories in a facilitated environment by a lecturer.

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Using this format, Butterworth and Livingston (1999) described that some service users felt their contribution had value and Costello and Horne (2001) reported that the process was cathartic. However Jackson et al (2003) reported that some service users and students expressed feelings of embarrassment, apprehension and anxiety prior to, and during sessions. Hanson and Mitchell (2001) identified that having service users in the classroom creates a positive student learning experience. However Ottewill et al. (2006) have noted that the formal lecture style encouraged a more passive role in the students, and furthermore Turner et al. (2000) showed that the learning experience became secondary when service users became tearful, upset or expressed imbalanced opinions. Initiatives that explored a joint interactive theatrical approach between lecturers and service users in nurse education were limited. Frisby (2001) reported that the sessions which employed a more interactive approach indicated that service users had enhanced feelings of empowerment, less censorship from tutors and that involvement enhanced the student learning about users' perspectives. Turnbull and Weeley (2013) have reported the great value in the service user presenting their personal narratives and detailed that it had a positive impact in enhancing student awareness of the need to treat individuals with dignity and respect in practice. Speed et al. (2012) has highlighted a number of barriers that face service users as they tell their story. While being afforded the ability to offer a valued contribution to student learning, there remains a careful negotiation between the sharing of incidents which may be personally distressing and the inclusion of material which may be overly controversial or inflammatory. Providing the service user the platform to be free to present their own perspective of reality without barrier has to be balanced against whether 'learning' and 'enhancing the quality of care in practice' is the primary goal. In a formal setting, the articulation and the sharing of very personal details to a varied audience of strangers will rely on an individual's oratory talents.

The creation of the interactive theatre: Lets All Play 'Stigma'

The Faculty of Health Sciences has established links with local mental health service user groups and invited volunteers from the local service user networks to prepare and perform in a forum theatre play to be presented to a large student nurse audience at a conference event in November 2012. In August 2012, seven service user volunteers joined together with two members of lecturing staff to begin the production process of the forum theatre. Lets all play 'stigma' was constructed using the group's collective experiences and narratives of stigma in mental health. The planning process enabled a supportive camaraderie between service users and the staff where critical discussions occurred about the stories as they were recreated. After the creation of the main storyline and the acting roles had been decided upon, there followed a period of rehearsal which allowed everyone to offer their feedback which promoted the on-going shaping and ownership of the material being presented.

The ethical principles created by Rifkin (2010) underpinned and informed this theatrical work.

Rifkin (2010) Ethical principles for participatory theatre work

- Choice: participants' agenda not pre-empted.
- Respect: developed via creative process.
- Equality: with groups having little experience, through creative process.
- Safety: focus on present/future, no requirement to disclose.
- Tutor competence: support and training, shared perspectives.

The decision to use a forum theatre approach facilitated the theatrical blending of singular or multiple sets of narratives which ensured anonymity due to the audience being unaware which of the service user's recreated story is on show at any given moment. The forum theatre production was grown and blended using the experiences from everyone involved rather than a single

personal narrative. The story of the play was driven by the desire of the group to share their experiences in a way that facilitated the telling of a collective story rather than being singularly exposed to a large student group.

Forum theatre was originally conceived by Dr Augusto Boal (1979) where a theatrical performance is presented to an audience as an intellectual game between the actors and the spect-actors (a neologism describing the audience transition from being a passive spectator to becoming actively involved in changing the course of the play as an invited actor onto the stage). Forum theatre starts as if it were a conventional play and Lets all play 'Stigma' depicts the main character (protagonist) as a student nurse who encounters the actions of the other actors (antagonists) who deploy an arsenal of stigmatising and oppressive tactics against her. The audience witness the detrimental effects the acts of the antagonist's stigma has on the protagonist along with the (unfortunate) life choices that she makes. The play depicts her decline into mental illness with the story concluding in her admission into a psychiatric unit. This form of theatrical debate is often designed in such a way that the play concludes in an unsatisfactory way for the protagonist. Feldhendler (1994) stated that a forum theatre production is creative place to debate and rehearse change with the aim being to use theatre as a way of informing the audience about the difficulties people face and moving them from being passive members of society into active transformers of the dramatic situation.

"A Forum is a question posed to the audience, seeking answers. The question has to be clear. If the spect-actors are to be able to intervene and offer alternatives, and if the Forum is to enrich our understanding, the central idea must be perceptible to all" (Boal, 1998)

Following the first run of the play, the audience will discuss between themselves the issues that arose. The play is then re-enacted by the actors. It is during this second-run of the play that students are invited to shout 'stop' at a point where they feel a different course of action could be taken. The individual is

then invited to replace the main character in the play. In essence the audience is encouraged to leave the passivity of their seats, enter the stage area and step into the role of the protagonist and demonstrate an alternative solution. Middlewick et al. (2011) reported that this can provoke some lively debate as there are typically several different ways to progress the scenario at a 'stop' point. It is the student's personal identification and perception of the unfolding drama that ignites group discussion due to each individual observing different elements of the play. The play immerses the students and stimulates problem solving and thinking about better ways to 'steer' the scene towards a more successful conclusion. All student interventions are welcomed onto the stage and seeing their solutions brought to life created a keen anticipation in what was going to happen next. Solutions generated by the students mostly demonstrated the professional behaviour expected of a healthcare audience as well as providing some great moments of humour. Unpredictable solutions (however well-intentioned) can have the effect of inflaming situations rather than solve them. An intervention that did not go to plan provides students with instant feedback and the opportunity to analyse or adjust what aspect did not go so well. Once the spect-actor feels that their solution has come to a natural conclusion or they have had enough then it is their choice to take their seats once again and the play moves on. As well as actors, a forum theatre is presided over by a host facilitator character called the 'joker' (akin to the wild card within a deck of cards and not to be confused with Batman's enemy!). The joker plays a special role in explaining the rules, encouraging debate, inviting participation and acts as the conduit between the stage and the audience.

Stigma in mental health:

The focus of the forum theatre play was decided on by the group and it centred on the theme of stigma in mental health. The stigma of mental illness and discriminatory behaviour ensuing from it have been widely recognized as serious obstacles to the life chances of people with mental illness and access to mental health services. In the past decade, a

number of national and international projects (e.g. 'time to change') have been launched in efforts against the stigma of mental illness. Sartorius (2004) stated that stigma has been found to have substantial public health implications such as it may exacerbate stress and its health consequences, reinforce differences in socio-economic status and associated health risks, delay appropriate help seeking, or terminate treatment for treatable health problems.

Schulze (2007) states that while largely successful in beating stigma and discrimination, programmes tackling stigma towards mental illness have, in part, been critiqued to be largely uninformed by the lived realities of people with mental illness and their families. The forum theatre approach that was applied meant that the play was constructed directly from the narratives of the service users and played directly to the student audience.

The Student Learning Experience:

Department of Health (2012) reported that teaching students to develop the chief nursing officers 6 C's in healthcare education is vitally important if best practice is to be achieved. These skills have often been seen as challenging to successfully develop via didactic methods. Middlewick et al. (2011) states that forum theatre offers a fuller and more involved opportunity to rehearse and hear the 'student voice'. Sternberg and Zhang (2001) has stated that adult learners consistently report that an experiential approach helps them to learn more effectively and therapeutic communication is a practical skill that benefits from rehearsal before engaging with the service user. The action of a 'spect-actor' supports Benner (2001) by providing the opportunity to 'pose and test' situations which links into the active experimentation stage of Kolb (1984) four stage learning cycle. Forum theatre provides a concrete experience that lets an audience decide their own method of engagement. This could be in the form of physically becoming involved as a 'spect-actor' and experiencing the instant feedback provided by trying out a solution. Alternatively, not everyone may have the opportunity or desire to be a 'spect-actor' and be engaged in a

more reflective, contemplative state by mentally problem solving a situation as it unfolds. There is an opportunity to explore what is happening and how different interventions impact (reflective observation) as well as considering how theory links to the practical application (abstract conceptualisation). By creating an environment for emancipatory pedagogy, the play opened up a space for the participants to critically reflect on their own perceptions of how society portrays people experiencing mental health problems as a subculture. Through praxis, a symbiotic relationship between theory and action, the students involved in this play have awakened in themselves a critical consciousness, described by Freire (2003) as essential for personal and social change.

In the forum theatre, the actors were both the lecturers and service users. This deliberate choice not to use professional actors allowed the group to freely hone, tweak and maintain ownership of the performance. The lecturing staff involved had a depth of personal and/or professional experience working in the health service and this was invaluable to draw upon during the re-running of the play when required to improvise responses for the marauding 'spect-actor' assault onto the stage. Student evaluation highlighted that 'Having the service users playing the acting roles within the play added a greater level of authenticity'. The impact of seeing a real service user playing the acting part in the story added to the depth of credibility and plausibility of the events being depicted. This encouraged a different kind of watching empathy from the student audience who could readily identify, connect, see and interact with the characters being portrayed in the play as opposed to the different listening experience of an individual monologue. Our experience of developing the forum theatre in this collaborative way was highly evaluated by the student nurse audience.

The themed written comments in the evaluation forms following the event included the powerful effect of the visual performance and the engaging story. Many students commented that the stigma they observed in the play:

Could happen to me (identified aspects of their own life that mirrored the play)

Has happened to me (recognised the behaviour of the characters in the play)

This is what I will do differently (as a healthcare practitioner)

To the Future

Whilst the quality of service user involvement may vary, universities now accept that service user input is integral to the education of nurses and allied health practitioners.

Service user involvement can take many forms and can be done in many different ways and there is no single solution to fit every situation. The use of forum theatre in this venture provided an interactive method to share personal narratives in a powerful and engaging way which enhanced the student experience within the classroom.

The service users involved in the project cited numerous personal benefits such as increased levels of confidence in speaking to a large group and when acting with the staff they felt it was more of a collegiate connection working as equals rather than a staff and service user tokenistic liaison. When the play was showed to the student group, it was the presence of the service users in the classroom that provided the authentic educational learning object to interact with. The forum theatre approach provided an opportunity to re-enact service user's stories whilst maintaining anonymity and offered a uniquely interactive element which presents extra learning opportunities for the students.

This collaborative style of meaning making in health and social care classrooms can be usefully replicated for other projects and cover a variety non-mental health topics. This project centred on stigma however the method would equally be attributable to subjects such as Dementia care, end of life care, enhancing compassion, assertiveness, delivering significant news and so on.

The use of interactive theatre for this event provided a window into the mind, the soul, the heart of humankind and the study of this should arguably be the aim of nursing in higher education. For our students, the interactive theatre brought a story to life and brought life to learning.

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