

**Love is in the Earth 2:  
*The Nourishment of Research***

**Bruce Howard Bayley, Ph.D.**

Presented at the Joint BADth/Sesame Research Day,  
Conway Hall  
London  
June 2011

## **The Nourishment of Research.**

*(This paper was presented at the Joint BADth/Sesame Research Day in June 2011)*

My approach to this theme is rooted in my own personal mixed-cultural identity and position that I described in the paper "Love is in the Earth" which I presented at the BADth Conference in 2009 and is influenced much by my work in the area of Carnival, Motley and what I have referred to in previous presentations as the "Mix". I will also offer to share with you a view of Research as Nourishment – as Food – not simply because, I believe, that Research is in fact vital to the development of our profession but also because I am of the firm belief that a way to the heart is often through the stomach. I am not going to present this piece in a scholastic or academic manner in order to seek to persuade but rather in the spirit of "questions", "points" and "signs" suggesting ways forward in the spirit of the Motley Fool or Clown playfully seeking some serious truths.

My own thoughts and practice as a dramatherapist and in my life have been involved in seeking to find a place in which spirituality, psychology and politics may be brought together to develop clinical practice that is seen as working *with* people rather than working *on* people. That has been a major research project of mine.

Identifying Love as our Desire to seek mutual nourishment by growing together and the Joy we derive therefrom, I suggest that it is a *major* integrating factor not only in bringing people and cultures together in collaborative, practical action, which is symbolized for me by the Earth but also a major integrating factor in the therapeutic process when it is earth-ed in grounded practice which I suggest goes hand in hand with theory and research together.

If we start by looking at what we may (or may not) understand by the term research, the first item on my menu would be the question –

### *How do we feel about it?*

Often, the way we treat Research lands us in a place which can feel cold, clinical and more akin to Duty than to Joy. The words often used – Assessment, Monitoring, Evidence, Evaluation, Outcomes - do not line up looking like a very appetizing Table Buffet. Often, too, the knowledge that evidence is necessary to demonstrate the achievement of targets and outcomes in order to secure funding contributes little to our desire to comply with what can often feel like the voice of a somewhat Dickensian Authority insisting that we are compelled to "sing for our supper".

Often, too, we feel that much of what we do in our work as dramatherapists lies outside the realm of such evidence, in the inner landscape of the Psyche – or Soul, if I may use that word, and that to measure the invisible is not only impossible and inappropriate but, also, somehow an assault on it – How can we measure the immeasurable? Can we evaluate the Unconscious? This can then lead us to feel that such a process is contrary to what we would like research to be and this, in turn, can lead us to assume the somewhat false separation between theory and praxis, between the work at the heart of our practice and something outside it called

Research. Often, we may also feel intimidated by the thought of Research and lose ourselves in labyrinthine musings about the status of what we think of as Research, feeling that what we may do in our usual practice with our clients would not be worth writing about, or that we are not confident about doing so.

Perhaps, at this point it may well be worth considering some distinctions – one between evidence of clinical practice, evaluation of work undertaken, outcomes (some of which may be targeted, some not) and research that may be considered to be academic and scholastic, a seeking for something yet unknown and unproven but that may be knowable at the end of the search. The difference here would be like the kind of food we prepare according to tried and tested recipes and that which we cook from our own sense of desire and creativity. We are nourished by both sorts of food in different ways and just as the more creatively approached dish may well become someone's favourite recipe (tried and tested) so, too, can creative and academic research contribute to evidence of clinical practice and vice versa. The two may be different but they are not necessarily mutually exclusive and both nourish us, our work, our knowledge base and the development of dramatherapy.

### *Motley*

Moving on to consider the next item on my Menu, perhaps it would be both useful and playful to look at a precedent in literature, theatre or history that may contribute to our perceptions of Research and I suggest that we may find one in my special area of interest - Jesters, Fools, and Clowns – the wearers of motley.

The actual motley garment made of a multicoloured fabric of mixed threads seems to have emerged in England in the 14<sup>th</sup> Century and became the recognizable costume of variegated colours made up of multi-coloured patches or diamonds which was worn by the professional Court Fool or Jester. Hence, the term “motley” comes to be used for the Jester or Fool as well as the clothing. It also comes to mean making something more diverse and varied or discordantly composite. Rather than representing a state of fragmentation or chaos, as it has often been interpreted, it may also be seen as representing a state of being which contains multiples within a whole. It also has a sense of marking the wearer as someone who stands apart from everyone else, someone with a particular sort of function to fulfil.

We relate to ourselves and “know” ourselves through an enormous variety of filters and models - psychological, genetic, biological, spiritual and racial and so on. To add to the mix, there are also various degrees of experiences – external and internal, material, emotional and spiritual – through which we experience ourselves as being who or what we are and by and through which we relate to others. Our work with our clients contains the same dynamic mix and research into and the evaluation of that work can, perhaps, be best served by a multi-coloured, multi-layered view of research – like an enormous selection of *meze* or a very expansive Indian *thali* – a collection of dishes within a single large tray.

The nourishing thing about research and evaluation of evidence in the practice of the arts therapies is that we can use a multi-coloured approach.

Random Controlled Trials (RCT) are important as far as they are the prioritized form of evidence and the general thinking seems to be that the more RCT evidence there is the more valuable the evidence. Systems like CORE (Clinical Outcomes for Routine Evaluation) were primarily designed for counselling and other psychological therapies to measure outcome and provide for service audit, evaluation and performance management can give a shared assessment involving both the client and therapist, can show a clear progression and does allow us to benefit from the “tick-box” approach which can show a degree of clarity that is valuable to get clarity in the development of the therapy and the progression of the client as well as of the therapy process.

The Outcomes Star System is adaptable to almost any area of work. Developed by St Mungo’s and used extensively in Homelessness it has proved remarkably adaptable and is being applied in an increasing variety of work arenas including Alcohol Recovery, work with the elderly, mental health and Music Therapy. The National Grid for Learning, Cymru, which is funded by the Welsh Assembly Government, has even used the sensory evaluation Star profiling system to test a fruit salad. The ppt presentation *Sensory Evaluation of a Fruit Salad* can be downloaded from the NGfL website. The Star here has five rays – General Appearance, Texture, Aroma, Flavour and the 5 a day Goal with 5 grades along each ray. I mention this simply because it keeps in with my theme of Nourishment but more seriously because it illustrates that how adaptable the Outcomes Star system can be.

We can also, however, apply assessments based in the art form and drama and creative expressive play alongside systems like CORE. We have already heard from Charla, Madeline and Zoe illustrating a variety of creative and soulful approaches to practice and research. I wish to mention two Assessments here primarily to illustrate my point as they have been fully presented elsewhere by the people who devised and developed them.

In the Clinical Comment Section of the latest issue of *Dramatherapy*. Vol33 No.1 Sue Jennings has presented her Play and Story Attachment Assessment (PASAA) which

*Involves observation, information gathering, discursive questionnaires and story sharing. PASAA mainly focuses on attachment based Neuro-Dramatic Play in order to determine attachment needs that could be addressed in dramatherapy or play therapy....The PASAA explores a child’s capacity to be playful, to use their imagination and to enter into role-play.*

(Jennings, 2011)

The Assessment involves a Whole Landscape, as it were, drawing on memories that parents, family members and friends may share about the time around the child’s birth, as well as the child-client’s responses to sensory play, story sharing and story

building within the sessions.

The Dramatic Ability Assessment Grid (DAAG) is a tool devised and used by Salvo Pitruzella in his work at the Centre for Adolescents with Personality Disorders in Palermo, Italy, Disorders in Palermo, Italy. It aims at observing systematically the level of people's dramatic abilities and their development along the dramatherapy process.

*My purpose was to record the starting points and the possible variations of clients' dramatic behaviour, in order to compare them with other observations made by my colleagues in the Centre (music, art and dance therapists, educator, psychologist and neuro-psychiatrist). The joint assessment we make once a week focus both on symptoms' reduction and on the general adjustment of our young clients to their world....*

(Pitruzella, 2010)

While the DAAG is an assessment involving observation and the grading of the client as a "subject" along a system of points the criteria under consideration are those that arise in the dramatic situation within the therapy sessions themselves and include gesture, facial expressions, use of space, body movement as well as other social dynamics such as the degree of involvement, communication, co-operation and the client's responses to and performance of Role such as focus, coherence and elaboration.

*I noticed that clients' improvement of balanced dramatic abilities usually matches their healthy development. The three areas considered are: Interaction, Expression, and Role. An improvement in the first area is generally connected with a growth of interpersonal skills; the second area with emotional balance, and the third with the growing ability to discern the various frames of experience and behave adequately.*

(Pitruzella, 2010)

Salvo's article can be found in *Dramatherapy vol32 No.2*

May the Motley or the Multi-coloured Coat, then, serve us as a metaphor for a creative approach to Evaluation and Research? Contemplation of the Fool can be valuable in providing us with opportunities to reassess our perceptions of ourselves, our work and our approach towards Research. Motley reminds us that the world is not fixed and unchangeable. The topsy-turvy qualities of the Fool symbolize for us the questioning of assumptions and expectations and holds before us our belief in the authority of horizontal time, fixed parameters and the possibility of "final solutions", prescriptive and predictive outcomes and mocks them, showing us the changeable, multiple possibilities – and that this is actually healthy. Motley also tells us that there are a variety of ways in which we can conduct research or evaluate our work or monitor outcomes and that we can use them alongside each other.

We work as dramatherapists with inner worlds and manifested presenting behaviours and conditions, with the Psyche, or soulfully, as well as with the Body. I, for one, have never supported the notion that there is a separation between the two. The Inner and Outer are parts of the same Life. If we are not able to demonstrate in measurable terms the inner workings of the psyche we may certainly do so with regard to external signs and the performances of the client in the outer world. We may consider that the one reflects or expresses the other. To evaluate visible changes in the Outer is also, therefore, to evaluate inner, less perceivable changes. Research into the realms between the Outer and Inner and into development of models and ways in which this research can be undertaken would, I believe, be important research that will nourish us and our clients.

(Research Words)

### *The Healing Space*

It is, perhaps, useful at this point to consider that if therapy provides a healing space that can nourish; a space in which clients feel that they can “speak the unspeakable”; a space in which that which separates is struggled with in a spirit of mutual nourishment – a collaborative working in which the client is not seen as an object to be worked on but as someone the therapist is working with – then how can this mutuality be reflected in evaluation and the research that comes out of that practice.

Too often, therapy comes to be regarded as something that the client “receives”, that the therapist is supposed to “do” something to the client to “fill in” something that might be missing. It is as if the medical model of working with diagnoses and solution-based treatments often requires the therapist and client to know beforehand what needs to be fixed. Often it seems that the vision of nourishment is then perceived to be the fixing of the problem, working with what may be the symptom and the process becomes one of achieving the target which then seems, all too often, to be understood as being the removal of the symptom. When this is the case where do we go with research? While a solution-based treatment approach is appropriate for certain kinds of illness and conditions, we may ask whether it is always appropriate within the Arts Therapies?

When we work within this cultural context we are faced with notions of Health that leave little room for exploration, for the client to discover themselves with a sense of their own integrity. Often in this context, the client’s own spiritual dimensions and personal stories are subordinated to a programme prescribed for them as if to providing them with a tool-kit for what is seen as the successful achievement of a healthy state and the outcomes & evaluation processes often simply reflect this. Then we may feel as if this is not what we signed up for as dramatherapists and this, too, may contribute to a resistance to evaluate or undertake research which then begins to feel like no more than producing promotional literature rather than a quest for knowledge and insight.

I referred earlier to my identification of Love as being a possible integrating factor – Love being for me the desire for mutual nourishment, the desire to work together for a psychological, spiritual and physical flourishing. This may not at first sight seem like much of a strategy but it requires a notion of Love which sees the work that we do as being fuelled by the Desire towards a mutual collaboration between practitioners/researchers and clients/patients in the development of relationships.

One area in which working through Love can be grounded in practice (which I have previously referred to as the “Earth”) is in the context of research. Too often, evidence-based research consists of research on people, again, either as “case-studies” or as quantitative phenomena. One area of research which embodies the identification of Love as being the desire for mutual nourishment is Action Research – collaborative research where enquiry is undertaken *with* people rather than *on* people. Co-operative or collaborative enquiry is a serious, robust process with action followed by reflection, periods of on-going mutual questioning checking for continuing validity, missing factors, what might have been overlooked, what might be being overstressed, the goal of which is accountability – collectively, co-operatively.

Alongside Action Research, we may also consider the Tidal Recovery Model of practice and research which has developed over the last decade internationally as a key model in mental health nursing and treatment. ‘Recovery’ here refers to the reclamation of something lost – lost lives, lost opportunities, lost potential, lost status, etc. Here, there is a sense in which when people become ‘clients’ or ‘patients’ or ‘service users’ that they experience a loss of their personal sense of identity and the Tidal Recovery Model seeks to facilitate this process of recovery/reclamation. To reclaim their sense of personal identity and their own lives there is a need for people to reclaim their own personal stories in their own voices - stories of who they are as people as well as the stories of how the problems they are dealing with arose in their lives and of how they can explore possibilities of moving on in their future pathways. This journey of ‘discovery’ as well as ‘recovery’ is Research within Practice. The practice is itself valuable research nourishing both client and therapist.

### *Conclusion*

The importance of research – academic, scholastic, theory-based or practice-based – is immense. It is the nourishment of us as dramatherapists therapists and it is the bed-rock of our profession from which we can develop our knowledge base. In real and, perhaps, somewhat discomfoting terms it is essential that we develop our clinical practice evidence base in order to safe-guard the profile and status of dramatherapy in an economic and political climate where we will be asked more and more to “sing for our suppers” in order to make our work commissionable in the new vision of the Health Service and even in the voluntary and community arenas. I don’t wish to come across as being overly apocalyptic but we need to increase our clinical database to ensure our employability – certainly in the public sector. In this regard I would say – “Write It Up!” It is invaluable for anyone representing dramatherapy in the political arena to be able to cite clinical evidence of work undertaken and documented by dramatherapists wherever and with whatever client

population they may be working. So, I would further urge – “Write It Up!” If you feel that you are newly qualified or a student and would do so but feel you haven’t got the confidence or necessary skills, BADth will be holding an event later on this year to encourage and promote writing for the Journal, for instance. Even if you might describe your work – as people have done - as simply “routine”, or not of any particular academic interest I would say that you would be quite wrong to say so. It is the staple food of our clinical practice. It is how we can show to ourselves, and to the world, the variety of our dramatherapy Table–Buffet; what we have ‘cooked’, are in the process of ‘cooking’, the ‘recipes’ that we are exploring, no matter if the recipes did not turn out as well as you had hoped - we can learn from it what ingredients we could best utilize in the future. Whatever can be considered “tried and tested” was once part of “suck it and see”. The fundamental pioneering work that grew out of what was essentially practice-based research around specific case studies into the established doctrines of psychoanalysis and analytic psychology were undertaken by Freud and Jung when they were “sucking it to see”. Today they are regarded as self-evident truths. Research is our Nourishment - so let’s make it a large part of our supper.