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Personal storytelling for wellbeing; form, content and process

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Personal Storytelling for Wellbeing; Form, Content and Process

Julie Hathaway Walters

A thesis submitted in partial fulfilment of the requirements of

Sheffield Hallam University

for the degree of Doctor of Philosophy

C3Ri

The Cultural, Communications & Computing Research Institute
Faculty of Science, Technology and Arts

September 2019

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Abstract

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A thesis submitted in partial fulfilment of the requirements of
Sheffield Hallam University
for the degree of Doctor of Philosophy

entitled
**Personal Storytelling for Wellbeing;
Form, Content and Process**

Nature and scope: This enquiry examines personal storytelling in the form of the practice of digital storytelling. Digital storytelling is seen as a *craft*, a creative making practice. The enquiry examines what impact engaging in this practice has on wellbeing.

It is a practice based enquiry which draws on art and design research methods and considers the many facets that the author brings to the table, including her identity as a maker and occupational therapy educator and especially, the way her own engagement with making enabled personal, transformational learning and recovery from mental illness, shame and grief. The purpose of the enquiry is to bring these new insights back to occupational therapy and science.

Contribution to knowledge: Knowing through making, as conceptualised through art and design research methodologies, has the potential to enable occupational therapy and occupational science to realise the original intentions of its founders.

A study of the collaborative process of digital story telling has offered a worked example of this. Comparing and contrasting digital story telling with other collaborative making practices uncovered what digital story telling is and what it is not.

Digital story telling is a high-status craft. The key to understanding its potential impact on wellbeing is to understand it as a craft – a making practice. Further, the potential impact on wellbeing is determined not by the process or properties of digital story telling itself, but by the care and attention to the detail of the experience and how connections between the people involved are made. A digital story telling workshop is a non-generalisable event, unique to that time and place and those people.

What digital story telling is not, is an ideal method of co-production. Its uses as a participatory arts-based research methodology has been well documented, but I contend that the ideal collaboration is one where the team is assembled first. I propose *The crystal model of transformational scholarship in human health and wellbeing* which sets out how this may be accomplished.

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I end with this lovely quote from theologian Nadia Bolz-weber, which I hope reflects the heart and intention of this PhD.

“And this is it. This is the life we get here on earth. We get to give away what we receive. We get to believe in each other. We get to forgive and be forgiven. We get to love imperfectly. And we never know what effect it will have for years to come. And all of it ... all of it is completely worth it.” (Bolz-Weber, 2015, p. 72)

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Introduction

This practice-based PhD builds understanding of making as a collaborative creative practice for the purposes of influencing health and wellbeing. The heart of the enquiry is an interest in the digital storytelling (DST) process developed by (Lambert & Hessler, 2018) and colleagues. Digital storytelling is a multimodal form. It involves the making of short films, comprising video, still photography, stop motion animation, music, sound and narration within a facilitated small group process.

My enquiry has also branched out into other collaborative making practices which have, at key points informed my thinking about a) the nature of collaboration and b) what can be learned by making.

I am an Occupational Therapist, and accordingly my research adopts a method of research through making as a way of knowing. Occupational therapists are most often concerned with making as an everyday creative activity, practiced by non-elite non-professional makers. Occupational Therapists employ the core skill of activity analysis to understand the sequence, pattern and demands of an activity, and my research explores how activity analysis, specifically occupation based activity analysis, can be used as a way of thinking and a method to understand what a process of making is and how it can be used in the context of promoting wellbeing. I have, in particular used this skill to unpack the properties of a digital story making workshop which took place in October 2018.

I am a designer, in that I was once trained as one, and situating my enquiry in an art and design research centre, was an attempt to re-claim and re-examine how I was made a designer and maker.

I am an expert by experience of mental distress. A survivor of the psychiatric system, who became in the 1990s a patient advocate and activist involved with the Mad Pride movement. My making has enabled me to learn from, make sense of and

communicate some very difficult and upsetting life events including complex bereavements, for example the suicide of my sister in 2002, and some very strange and ineffectual episodes of mental health care.

I bring these different facets of myself together in my work as an educator of health professionals. As a senior lecturer in Occupational Therapy I design learning experiences for my students that aim to promote the dignity and worth of every individual and that build the complex reasoning skills needed to work collaboratively with patients to enable us to accomplish what we want and need to do. In my job, I try very hard to influence the attitudes and behaviours of the next generation of health professionals. So that they understand that their own humanity is their greatest asset.

I use the word patient, because patient is what health and social care service users need to be. Patient and forgiving with services which are often fragmented and ineffectual. Patient and forgiving of our own vulnerability and shame. Anyone who has been seriously ill or who has accompanied a loved one who is seriously ill knows this, and we know this viscerally and urgently.

This is a broad, interdisciplinary enquiry and my contribution to knowledge offers new insights to health-care professionals, in particular occupational therapists, as well as: Practitioners engaged with arts in health; social prescribing and the health humanities; the digital storytelling movement and those engaged with arts based collaborative research.

Many researchers who have written about Digital storytelling have situated their enquiry within ethnographic traditions such as visual ethnography (Pink, 2013, 2014). Others have drawn on the work of education theorist and activist, Paulo Freire, whose work provides a seminal consideration of oppression and liberation (Freire, 1972, 1998) . A consideration of the work on power within institutions by philosopher and historian Michael Foucault underpins any work about mental illness and health care (Foucault, 1967, 1973) and Donald Schön's work on reflection (Schön, 1987) is also much cited, especially, by DST practitioners working in health care education. Psychodynamic theory, although currently unfashionable in health care, underpins the

creative arts therapies, and can be seen in the approach to activity analysis employed by early occupational therapy theorists (Fidler & Fidler, 1963). Other authors have discussed the challenges of occupational therapy as a female dominated profession, with the feminine concerns of caring, connectedness and relationships achieving less prominence within the dominant scientific rationalist world view. This tension is a central concern of feminist philosophy. (Hammell, 2011; Pollard & Walsh, 2000)

It is acknowledged that the applied discipline of Occupational Therapy stands on the shoulders of all of this work and more. However, I have chosen to situate my enquiry within the central concerns of making and doing, and I speculated that art and design disciplines may have something new to bring to Occupational therapy's concern with doing. My approach is therefore an Art and Design research approach and my enquiry is a *practice based enquiry*. (Barrett & Bolt, 2014).

The French word Bricolage simply means collection of objects that are to hand. (Yardley, 2008) In some sense my PhD is a bricolage of ideas and theoretical materials. This mirrors what a multimodal form such as DST is – a collection of elements that together make up something that is more than the sum of those parts. Bricolage is a term that has been applied in a number of fields including art and design research, and education.(Yardley, 2008).

I begin my thesis with a description of the personal and professional context of the work, with an account of how I became interested in Digital Storytelling. I then provide a consideration of each of the key words in my title, namely: Personal storytelling, wellbeing, form, content, process. This chapter ends with a brief consideration of the applied disciplines of Occupational Therapy and Design.

Digital storytelling

My interest in Digital Storytelling began in 2007 with a chance encounter with the work of Cambridge based social enterprise Pilgrim Projects. Pilgrim Projects are digital storytelling practitioners Pip Hardy and Tony Sumner (Hardy & Sumner, 2011, 2014). I took part in a weekend workshop, with a group of people I had never met, at their home and with their help made my first digital story.

To explain the impact of making my first digital story, I shall quote myself from the chapter in Hardy and Sumner's edited book, published in 2014 – (second edition in 2018).

“I arrived in bedraggled fashion at a large comfortable house and was warmly welcomed at the door. I was led through to the sitting room. The introductions had already started, but I was in plenty of time for the story circle. Thus began my first digital storytelling workshop.

The story I thought I was going to tell sits in the middle of the finished story – it's the part about going psychotic. I had gone into hospital for help and sanctuary, but found that I had put myself in the most dangerous place I could possibly be. It seemed to me that I barely made it out alive. This was the story I told in the story circle – an illness experience so dark and horrible, so jumbled up, a sticky tangle of emotions of stigma, grief, misunderstanding, loss, anger and madness. During the workshop my story was carefully listened to, and with help and encouragement, I made sense of, processed and presented it. It was therapy by presentation – years and years of therapy packed into one intense weekend. The process was transformative, cathartic – a release. The product was an emotionally powerful piece of communication. But much of my outpouring was left on the cutting room floor because, through the facilitated group, I came to understand that I needed to tell another story – the grieving story about my sister. That was the bigger story.” (Walters, 2018, p. 201)

I wrote this in 2012, and since, have developed a more critical reflection on this first experience of DST. The reader is directed at this point to the 20 minute presentation presented on the USB stick (folder one) and photobook (p.10), which sets out this critical reflection and includes my first digital story, entitled *Surviving*.

I went back to work after the weekend workshop absolutely evangelical about digital storytelling. In my role as an occupational therapist and educator I was excited to know how DST may be used as a therapeutic tool for occupational therapists and a

communication tool for patients involved in health care education. I was successful in applying for service user engagement funding to invite Pilgrim Projects to come to Sheffield and run a workshop for a group of service users and carers involved in learning and teaching activities at the Faculty of Health and Wellbeing in 2008. This project is documented in my publication (Walters, 2018) which includes quotes from the storytellers at the time of the workshop and 5 years later, on the impact of the workshop and what they have done with the stories since.

In 2008 I was also lucky enough to be sponsored by Sheffield Hallam University to undergo the one and only facilitator training course in digital storytelling that Pilgrim Projects ran, in collaboration with Joe Lambert from Storycenter.

The process of digital storytelling

It is the book (Lambert & Hessler, 2018) first published in 2002 and now in its 5th edition, that is the key resource for the DST movement. It contains an account of the leading practitioners work in the field and offers a practical manual of how to go about digital storytelling within what has become known within the movement as the “classic” model.

A classic DST process involves a small group of 6-8 storytellers with two trained facilitators who have committed to spending 2-3 days together to produce digital stories. It begins, after welcome, hospitality with a lecture.

This didactic lecture is known as the seven steps of digital storytelling. Each step is illustrated by an example digital story, and I have learned that the selection of these stories is very influential in the way that storytellers approach the making of their own story. When I was trained in DST, the first of the seven elements that was considered was the script, but in the latest version presented in (Lambert & Hessler, 2018) it is acknowledged that a more successful approach is to encourage storytellers to visualise and hear their story – what it looks like and how it sounds, along with who they might show it to, before getting down to writing.

Following a discussion of ground rules, each storyteller then has space and time, in turn to speak without interruption and then to receive a response from the group, about the story they want to tell. This is known as the Storycircle, and it is the engine of the whole process. Before the workshop, storytellers are invited to prepare by writing approximately 250 words about their story and to think about images such as personal photographs, to inform what they present at the storycircle that they might want to include. Storycircles can go very deep, so it is necessary to have facilitators who understand about small group processes and principles of therapeutic engagement, in order to be able to hold the space and create an environment of safety.

The rest of the workshop proceeds with a series of contrasting stages – (Lambert & Hessler, 2018, p. 76) describe these as: Individual support on script, image selection and storyboard, voice over recording, Software tutorial, image selection and import, Rough edit, individual support in final design and production and finally the screening of films.

An important consideration is that storytellers are the ones driving – the technical tutorials are designed to enable them to be at the controls, so it is their hands that are putting together the sequence.

My digital storytelling practice

The experience I had in Cambridge has led to over a decade long desire to gain understanding, training and practice with DST. Accordingly, I have facilitated workshops that have been 1 day, 2 days or 3 days duration or spread over 6 weeks. I have worked with storytellers who are students, older people, people with mental health needs, service users and carers involved in health care education, academics, children, members of my faith community, friends. I have facilitated workshops with other occupational therapists, students, an anthropologist, lunch club facilitators, experienced DST practitioners, and my husband Rog Walters. I have made my own stories, either as part of workshops facilitated by Pilgrim Projects, or not, but never in isolation. I have facilitated or made digital stories with Apple iMovie, Adobe Premiere

Pro, Adobe Premiere Elements, Windows Movie Maker, Microsoft Photo Story 3, and Microsoft PowerPoint on Macbooks, laptops, desktops and notebooks.

Along the way I also became interested in stop-motion animation, and have engaged in the level 1 and level 2 short courses in the Re-animation approach developed by children's Occupational Therapist and entrepreneur Helen Mason (Mason, 2011). I have made stop motion animations using the basic, exploratory techniques I gained from learning about the re-animation approach, with among others, students and people with learning disabilities, using Stopmotion pro and a range of free or low cost apps with tablets, phones and laptops.

This illustrates the depth and breadth of my experience with these technologies. Accordingly the practice element of my submission documents a selection of the making practices I have been involved in over the 7 years of my registration (part-time). It consists of selected digital media on a USB memory stick and accompanying photobook.

Personal story telling for wellbeing: Form, Content and Process

I will now consider each of the words that make up the title of this thesis, to further illuminate the scope of my enquiry, namely, a) personal storytelling, b) wellbeing and c) Form, content and process which will be considered together.

Personal Storytelling

At the heart of digital storytelling is the need to craft a personal narrative, to share your story. Storytelling is a fundamental human practice that spans all cultures and ages. Chamberlin, (2006) offers that telling stories is necessary to hope and to belief – for example to dare to believe that a child will grow or spring will come or the bread will rise, that stories are about faith, strangeness and surprise, and that hearing someone else's strange story makes us recognise the strangeness of our own story. Stories connect and stories divide, and citing McLuhan (McLuhan & Fiore, 1967) says

that by connecting a meaningless sign with a meaningless sound we create meaning in the world. That is what storytelling is.

Mattingly (1998) states that

“Attention to human suffering means attention to stories” and that “The need to narrate the strange experience of illness is part of the very human need to be understood by others.” p1 (Mattingly, 1998).

It was my urgent need find a way to sick up, or get out of me, and thus make sense of, some very difficult personal experiences and trauma that compelled me to make my first digital story.

Whilst my research focuses on digital storytelling I recognise that there are many creative forms which incorporate personal storytelling, for example creative writing, poetry, journal writing, oral history, drama. In particular two autobiographies concerning mental health issues and trauma, James Rhodes’ autobiography ‘Instrumental’ (Rhodes, 2014) and Katherine Littlewood’s ‘Cultivating Madcow’ (Littlewood, 2015) are compelling examples of storytellers who wrote due to an overwhelming imperative to be heard. Rhodes faced considerable obstacles in publishing his memoir (Cobain & Booth, 2015), yet he persevered.

These examples link to the assertion by Mattingly above, however the form which contains the narrative is up to the author. These storytellers are articulate and educated and have chosen the form of writing. Both authors highlight the importance of not only writing their story but writing it for an audience, the story must be told to others, shared. Other examples of media forms used effectively to communicate illness narratives will be explored in the thesis.

Wellbeing

This practice based PhD builds understanding of making as a collaborative creative practice for the purposes of influencing health and wellbeing. Wellbeing is therefore a key concept that needs to be unpacked.

Wellbeing is a complex state. Hammell & Iwama (2012) recognise it as a multi-faceted concept. In addition to identifying wellbeing as state of contentment or harmony with one's physical and mental health the authors also recognise emotional/spiritual health, self-worth, a sense of belonging and relationships, personal and economic security and opportunities to engage in meaningful and purposeful occupations as important and necessary dimensions.

The highly influential Foresight report, (Foresight, 2008) on Mental capital and wellbeing defines mental wellbeing as

“a dynamic state, in which the individual is able to develop their potential, work productivity and creatively, build strong and positive relationships with others, and contribute to their community.” (Foresight, 2008, p. 10)

The project group commissioned NEF, the New Economics Foundation (Aked, Marks, Cordon, & Thompson, 2008) to identify five ways to wellbeing based on an extensive review of the research evidence. NEF have a long standing interest in wellbeing beyond life satisfaction and economic growth and they have described wellbeing as “the dynamic process that gives people a sense of how their lives are going, through the interaction between their circumstances, activities and psychological resources or ‘mental capital’” (cited in Selwyn & Wood, 2015, p. 3) The five ways to achieve this proposed by NEF are to Connect, Be active, Take notice, Keep learning and Give.

A comprehensive literature review on wellbeing is offered by (Selwyn & Wood, 2015) They found that there is no agreement on how the concept of wellbeing should be defined, or indeed if it should be defined at all, and many objective and subjective measures exist. Importantly, there is general agreement about the elements that contribute to a sense of well-being, but which of these is the most significant will vary from individual to individual.

Further more, legislators around the world have in recent years paid close attention to wellbeing. New Zealand, for example has become the first western country to design its entire budget around wellbeing priorities (Government of New Zealand, 2019).

Creative making and engagement with the arts to promote wellbeing

While the work defining and measuring wellbeing cited above does not specifically discuss creative making and engagement with the arts as a way to wellbeing, there is a growing body of work that does make this link. For example the work of the UK's all party parliamentary Group for Arts, Health and Wellbeing (APPGAHW, 2017, 2019) the London arts in health forum (London Arts in Health Forum, 2010) the arts council (Arts Council of Wales, 2017) and the work of NOAH in the US (Betts, 2017). Also the research outputs of the arts in health movement (Clift & Morrison, 2011; P. Crawford et al., 2018) and the creative arts therapies (M. J. Crawford et al., 2010; Perruzza & Kinsella, 2010) all make contributions to the knowledge of the potential for creative making to positively influence health and wellbeing.

Alongside this work there is a body of literature that gives voice to the perspective of individuals living with and recovering from mental distress. For instance a community arts publication curated by Bradshaw, Haley and Szrama (2019) is a collection of writing and art-work created by individuals living with mental health needs. They state in their editorial that

“art, poetry and sharing personal experiences have the power to communicate, educate and reduce the isolation, marginalisation and stigmatisation of mental ill health.....As artists/curators, we are not mental health professionals but we do have first hand experiences of mental health [issues] and we use our art as a way to express ourselves, to communicate and cope.” p2 (Bradshaw, Haley, & Szrama, 2019)

This, and similar publications suggest that a state of wellbeing is achieved when not only there is absence of mental and physical pathology but also when there are opportunities for meaningful engagement with other people and activity. As (Bradshaw et al., 2019) state above, people who have been diagnosed with mental health issues are some of the most marginalised and stigmatised groups in society.

Stigma, shame, marginalisation and mental illness

If wellbeing is a concept that requires unpacking, then so does the opposite of wellbeing.

Stigmatisation and shame are mechanisms which marginalise and discriminate against people diagnosed with mental illnesses. Stigma occurs when negative emotions such as fear or anger give rise to stereotypes and prejudice. Shame is self-stigma or internalised stigma. I would concur with Thornicroft et al., (2016) assertion that stigma and discrimination have worse consequences than the conditions themselves, as it is my belief that my sister died not because of her Bi-Polar diagnosis or its symptoms but because of shame. This is one of the themes of my first digital story entitled *surviving* (p10 photobook, USB stick folder one).

In a study undertaken by Eldal et al., (2019) 14 mental health patients were interviewed whilst they were in hospital and then 3 months after discharge. The article illustrates the dehumanising experience of hospital admission and how power-dynamics between staff and patients are played out to pathologize and reject, leading patients to internalise feelings of shame. They propose that an important aspect of recovery from mental illness is the ability for services to keep at the forefront the fact that hospitalised people are people first, and that a vital component of recovery and for the persons experience be listened to and heard. This in turn can build self-efficacy and agency. Conversely, being silenced is a key mediator in the development of shame.

There is a growing body of evidence to show that a further key mediator in the reduction of stigma is that of social contact. Indeed, in Thornicroft et al's (2016) review of possible interventions to reduce stigma, social contact was found to be the most effective type of intervention to improve knowledge and attitudes towards mental illness, at least in the short term.

According to the "contact hypothesis" proposed Allport, (1954) and developed by Hewstone, (2015) and colleagues (West, Hewstone, & Lolliot, 2014) fear and avoidance are central features of the stigma associated with mental health difficulties (p222). Contact hypothesis has been proposed and tested in the field of psychology and it has

been shown that when facilitated meetings between the stigmatised and the people who are in fear and avoidance, are organised by researchers, the stigma and the fear are reduced.

A typical contact hypothesis experiment involves a *facilitated* meeting, which is mediated by an *activity*, such as a shared goal. In the original concept set out by Allport (1954) this facilitated meeting creates the ideal conditions for such contact to occur. However, much of this research has relied on self-report survey data, and a lack of attention to the quality of the interactions and how they are influenced by the type of activity and way the interactions are facilitated may not be getting into the heart how social contact works.

My interest in Digital storytelling arose from my observation of its effects to decrease the silencing and shame and stigma that I felt as the recipient of mental health care and my support as carer to others going through the process. For me it is a technique, mediated through a facilitated meeting/process that can give voice to individuals and can cultivate a sense of agency - one potential way to promote wellbeing. However, whilst there is growing interest in DST, my question was, why would someone choose to make a Digital story, as opposed to another form, such as writing a memoir or a poem or performing a dance etc?

As I approached this enquiry it seemed to me there was little understanding of what the facets of digital storytelling are which promote this sense of agency. Whilst attention has been given to the content of stories created, it seemed that less consideration has been given to form and process of DST.

I will now consider DST in terms of the three related elements of it, its form, the content of digital stories and the process of making a digital story.

Form Content and Process

DST is a digital form. In 2007, when I started making digital stories, the fact that this making practice was “digital” was novel and apart from more physical making practices. During the 7 year course of this PhD, the word *digital* has become so ubiquitous that it has ceased to mean very much at all. Recognising this, the “center for digital storytelling” even changed its name to Storycenter. (Storycenter, n.d.)

However, technology in the form of personal computers and mobile devices has allowed for a democratisation of media production, and despite its documented misuse (Gauntlett, 2018). There are many positive and life affirming things that can be done with all these tools, as Gauntlett, (2018) assures us. Making digital stories is but one.

For (Gauntlett, 2018) digital making is no different from any other kind of making, and he conceptualises this as a craft. Digital making is not “hands on” in that you can’t actually press your fingers into the material in the way you can with, for example, clay, but it is still craft,

“...making online video.....is a messy process of creating a range of material which you then cut, select and edit to craft a finished object.” (Gauntlett, 2018, p. 93)

Citing Richard Sennett, (Gauntlett, 2018) suggests that for a crafts person, feeling and thinking is part of making – a unity of body and mind. And accordingly, this realisation, that digital making is a craft that is not separate from other crafts lead to the inclusion of other making practices of drawing and pottery in the presentation of work in the practice submission element of my thesis.

The decision to engage in a craft form, however, is influenced by a person’s identity, what their knowledge of that craft form evokes and if they can see themselves doing it.

Digital storytelling could be seen as a desirable high-status craft. It is high status, compared with traditional crafts such as basket weaving and pottery because of its association with the film industry and technology, and by implication the male gender.

(Pollard & Walsh, 2000) offer a consideration of the gendered nature of occupational therapy and its association with domestic and creative activities, and how this has affected its status as a profession allied to medicine.

Canadian philosopher and writer McLuhan (McLuhan, 1964; McLuhan & Fiore, 1967) emphasises the importance of attending to the properties of a form (or medium), as distinct from the content of that form (or message), and being able to conceptualise that we are shaped by the means we use to communicate, as well as the content of such communication.

Nelson's paper, (Nelson, 1988) Influenced the development of one of the most widely used Occupational Therapy conceptual models of practice (Taylor, 2017) and conceptualises human occupation as the relationship between two things – Occupational form and the occupational performance of that form. An occupational form however is distinguished from a medium. To Nelson, a medium is a hypothetical set of circumstances, whereas an occupational form is a specific environmental context. For example. The two day digital story workshop held in October 2018 in my house, with those particular people, is an Occupational form, where as Digital storytelling in general is a medium. Nelsons Occupational Form then, is distinguished from McLuhan's understanding of "Form".

Within Digital storytelling (Alexandra, 2017) acknowledges that DST

“is a practice [that] has tended to place less emphasis on the finished artefact – the co-created digital story” (Alexandra, 2017) p168.

She goes on to claim that traditionally more emphasis on the process of making digital stories. Further, that the images and sound aspects of a digital story are often seen as secondary concerns. To Alexandra, the form of DST has potential as a means of inquiry and exchange through audio-visual practice. She conceptualised the digital story as a kind of embodied object., as It embodies a particular moment in time for the storyteller. For Alexandra, attention to form is missing from the body of research on DST.

Tim Ingold's book *Making* (Ingold, 2013) is about what it means to make things. He says that

“Even if the maker has a form in mind, it is not this form that creates the work. It is the engagement with materials, and it is therefore to this engagement that we must attend if we are to understand how things are made” (Ingold, 2013) p22

For Ingold, how a making practice turns out is generated by the relations between the maker and the artefact, as well as where the making is taking place and who else is there.

To conclude, making digital stories is a craft and while it is important to understand the form, the process and the content of digital stories, its not useful to separate out those elements or ignore the context in which digital stories are made and shown. Writers about digital storytelling, until recently have tended to privilege the spoken and written aspects of stories over the multimodal elements of it.

I will now provide an introductory consideration of the two disciplines I am situating my enquiry.

Occupational Therapy

Occupational Therapy philosophy and theory states that people are occupational beings for whom engaging in meaningful occupation has a vital role to play in recovery from illness. As Mary Reilly, an early occupational therapy theorist, states,

"Man, through the use of his hands, as they are energized by mind and will, can influence the state of his own health." (Reilly, 1962) p 2.

Occupational therapists see health as more than absence of organ pathology according to (Yerxa, 1998), rather, the more useful concept of *wellbeing* as a positive, dynamic state which reflects adaptability, quality of life and satisfaction in one's own activities.

An occupational therapist understands occupational performance as a transaction between the person, occupation and the environment. (Mary Law et al., 1996)

Occupational Therapists work with people to select and adapt things they want to do so they can recover from whatever it was that happened. However, it has been argued

by (Hammell & Iwama, 2012) and see also (Hammell, 2017) that it is not possible to do this without also considering human rights and the barriers to meaningful occupation that human rights violations create. Indeed (Hammell & Iwama, 2012) offer a critical consideration of Mary Reilly's statement above, highlighting that it promotes a view of a person's agency as existing outside of the environmental contexts which constrain what someone is able to do.

"In reality... many of the world's population have little or no choice, control, or opportunity to exercise their will to affect their lives." "Opportunities for social participation and occupational engagement are constrained by inequalities political oppression, geographical displacement, natural disasters and wars" (Hammell & Iwama, 2012, p. 388)

Furthermore (Mirza, Magasi, & Hammel, 2016) assert that occupational therapy should concern itself with social justice and activism. They note a growing interest amongst prominent voices in the profession in societal inequalities and for interventions to be guided by a social justice framework.

Design

I experienced 5 years of art and design education in the 1980s, and through this developed a way of thinking about complex problems. I did not know what theoretical materials underpinned this way of thinking but I knew that it came from relearning how-to-see through drawing, observation and making. Making, refining and honing solutions and ideas through feedback via "the studio crit" (Blair, 2006). The studio crit is something that will be entirely alien to anyone who has not been through an art and school education.

The ubiquitous nature of the word *design* makes defining the field difficult. Traditionally there have been discrete design disciplines, for example my undergraduate degree at Staffordshire University was one of the few multi-disciplinary Design courses available at the time, and it gave me a grounding in Ceramics, Textiles, Glass, Graphic Design and illustration, Industrial Design, Photography and Audio-Visual Design.

Rodgers & Bremner, (2017) offer the argument that since the 1950s the conventional design disciplines have gradually dissolved as the scope of design has expanded and design now extends from the design of objects and spaces to

Cities, landscapes, nations, cultures, bodies, genes, political systems, [and] to the way we produce food, the way we travel, build cars and clone sheep....formulate business and more recently, think..... Thus, design today is characterized by fluid, evolving patterns of practice that regularly traverse, transcend and transfigure disciplinary and conceptual boundaries. (Rodgers & Bremner, 2017)

Rodgers and Bremner have called this *Alterplinary* – a portmanteau of alternative and disciplinary and that design is now in a position where methods are no longer discipline based but issue or project-based.

I now provide an overview of the structure of this submission.

Overview

The chapter provides a summary of the aims of the enquiry and an overview of the structure of the thesis.

Summary of the aims of the enquiry

The original questions of the doctorate are as follows

- What is the effect of creating personal stop-frame animation and digital storytelling activities for the storyteller?
- Do the specific material and methods with the associated sense of time embedded in stop-frame animation and digital storytelling processes have an effect on well-being?
- Does the process of facilitation (by facilitators) colour the process for the storyteller?
- How does the exposure of personal digital storytelling activities to an audience affect the way the work contributes to storyteller's wellbeing?

And the aims of the work were expressed thus:

- To develop an understanding of both explicit and tacit aspects of a facilitated personal storytelling process with a focus on using digital storytelling and/or stop motion animation to present illness narratives.
- To understand fully the form of digital storytelling and stop-frame animation and to ascertain whether these might contribute to storytelling in different ways.
- To explore the different ways facilitation happens and its impact on the works and on the storyteller.

As my enquiry progressed I became interested in the following:

- What are the specific properties of DST?
- What can an art and design enquiry bring to occupational therapy?
- Can the occupational therapy skill of activity analysis illuminate the explicit and tacit aspects of a collaborative making practice for example DST - With particular focus on the less well understood multi-modal aspects?
- What knowledge does my enquiry generate about co-production?
- What new knowledge/understandings do the three types of collaborative practice generate that may not have been revealed through other research approaches?
- How does this knowledge speak to health care professionals – for example and in particular my profession occupational therapy and also anyone interested in promoting wellbeing through creative activity/doing

Structure of the USB stick and photobook

I present my practice as a USB stick consisting of three folders and an accompanying photobook. In the practice part of my submission I have intentionally foregrounded 3 different types of collaborative media making. These are...

One: I took part in a collaborative making process that others had framed, for example, Digital Storytelling with Pilgrim Projects and Stop motion animation with Helen Mason. This work is set out in part one of the photobook and folder one of the USB stick.

Two: I framed a collaborative making process and asked others to step into that frame. This work comprises of the digital storytelling workshops and other media making workshops that I have facilitated. An example of this is the formal research study which is discussed in the findings chapter and also set out in part two of the photobook (folder two of the USB stick). The people I invited into this frame were my research participants Mark Taylor and Tallulah (pseudonym) and our supporters Rog Walters (my husband) and Eric (Tallulah's husband).

Three: *Equals finding common ground*. Through evolving relationship and then responding out of this creative, critical dialogue and taking advantage of the opportunities presented to us, we collaboratively made a frame and invited others to take part. Pathway Busters, Double Agency and Critical Arts in Health network Events are outputs from these conversations between myself and fellow doctoral candidates Sarah (Smizz) Smith and Debbie Michaels. These practices are set out in Part three of the photo book

Structure of the thesis

The thesis is organised in the following way:

Contextual Review

This chapter consists of a consideration of the history and development of three related fields. These are Occupational therapy and science, the arts in health movement and a consideration of participatory research methods. I then present a consideration of papers relating to Participatory *Arts based* research, of which DST is one example. This is followed by a scoping review of the Digital storytelling research from 2008 – 2019.

Following a brief look at what occupational therapists have written about DST, I conclude with setting out the gap in knowledge that my enquiry seeks to fill.

Methodology

This chapter describes my epistemological standpoint as *knowing through doing* informed by art and design research methodologies and the theoretical position of constructionism from the field of learning theory. It then sets out the methods I have employed to conduct my enquiry, situating my practice as film-making and relating the aims of my enquiry to concerns with the 3 categories of collaborative making that I have engaged in. Following a consideration of Reflexivity, it goes on to set out the

methods of part two of my enquiry, the two day digital storytelling workshop. The other two parts of my enquiry are considered in the USB stick and Photobook.

Findings

This chapter presents the results of part two of my enquiry, the formal research study of the digital storytelling workshop I facilitated in October 2018. The data is presented as a series of long quotes from the two participants of this research as well as contextual notes. Part one and part three are considered in the USB stick and photobook wherein I have presented a selection of pieces that I have critically reflected on.

Discussion

This chapter is arranged in a number of themes which are as follows: 1. Occupational therapists: re-finding our identify as makers – this section also includes a discussion of the findings from part two of the enquiry. 2. Reframing knowledge and challenging what counts as legitimate ways of knowing. 3. Understanding collaboration. 4. The ethics of digital storytelling. The chapter ends with a summary of my contribution to knowledge.

Conclusion and Recommendations

This chapter offers some closing thoughts and an indication of future directions and areas of research.

Contextual Review

Introduction

I begin my contextual review of literature with a consideration of the history and development of three fields which are related to my enquiry: These are: Occupational Therapy, The arts in health movement and Participatory research methods.

I then present a consideration of papers relating to Participatory *Arts based* research, of which DST is one example. This is followed by a scoping review of the Digital storytelling research from 2008 – 2019.

Following a brief look at what occupational therapists have written about DST, I conclude with setting out the gap in knowledge that my enquiry seeks to fill.

Occupational Therapy

This section will consider the profession of occupational therapy and occupational science, it also considers activity analysis, the core skill of occupational therapists. And goes on to consider the contribution to knowledge by occupational therapy about creative media and in particular creative digital media

In her opinion piece in the British Journal of Occupational Therapy, (Youngson, 2019) considers the role of crafts in occupational therapy in the context of the growing craftivism movement, which combines crafts such as knitting and quilt making with social and political action. The activities of yarn bombing and guerrilla gardening were also included in (Walters, Sherwood, & Mason, 2014), the chapter about creative activities that sits within the UK textbook on Occupational Therapy and Mental health. (Bryant, Fieldhouse, & Bannigan, 2014) Youngson points out that

“there is a danger that occupational therapists could get left behind in this current recognition of the value and therapeutic potential of craft, and if we do not stand up and declare our heritage and philosophy in the value of doing.”
(Youngson, 2019) p384

A consideration then, of the heritage and philosophy of occupational therapy is warranted, and I set this out below.

The beginnings of the professional organisation of Occupational Therapy is connected with the need for treatment of shell-shocked soldiers at the end of the first world war. (Laws, 2011). It was by occupational therapists working in military hospitals during this period who started using *activity analysis* in their treatment of service personnel. (Creighton, 1992) provides a history of activity analysis and its use within Occupational Therapy.

According to Creighton, (1992), most influential were the works of two American Mechanical Engineers, Taylor and Gilbreth. Taylor's work in 1911 concerned the standardisation of work tasks to improve productivity. This led to the practice of the observation and timing of workers in shops and factories throughout the USA. Frank Gilbreth was the first to use the term *analysis* in the context of the study of work tasks, and Gilbreth's 1911 book on Motion Study considered three aspects: the characteristics of the worker e.g. physical build/temperament; characteristics of the surroundings (e.g. lighting/tools) and characteristics of the motion involved with the task e.g. direction, length. Gilbreth also discussed how a motion study could be used to adapt a work task to make it efficient. Gilbreth used these techniques within their bricklaying business and his wife Lillian as a methodology to manage the home and raise their 12 children, while she worked on her doctorate. The Gilbreths travelled widely to promote activity analysis and in 1917 they presented their work at the first occupational therapy conference in New York, and subsequently Activity analysis was included in the curriculum of the early occupational therapy training courses.

Early pioneers of Occupational therapy were also influenced by the Arts and Crafts movement, (Laws, 2011; Liu, 2018).

It is striking how similar the occupational therapy theorist (Reilly, 1962) assertion that "man, through the use of his hands, as they are energised by mind and will, can influence the state of his own health" (Reilly, 1962, p. 18) is to this passage from a lecture given by William Morris in 1884

“But a man at work, making something that he feels will exist because he is working at it and wills it, is exercising the energies of his mind and soul as well as of his body....If we work thus we shall be men, and our days will be happy and eventful” William Morris 1884 ‘Useful Work versus Useless Toil’ quoted in (Gauntlett, 2018, p. 51)

Reilly (1962) makes no reference to William Morris or the arts and crafts movement in her address to the American Occupational Therapy association, she simply asserts that “a small group of people” (Reilly, 1962, p. 6) with a common belief in the power of occupation were responsible for the birth of the profession.

This “small group of people” stand on the shoulders of Romantics such as John Ruskin and William Morris, who’s ideas about everyday creativity which brought meaning to work were influential in the US as well as the UK. This call to continue to value the hand made and autonomy of makers occurred within the background of Victorian era, and the rise of the industrial age. (Hocking, 2008)

Between the wars, work was undertaken to classify and analyse crafts by the American occupational therapy association, indicating the central place that making still had. For example “crafts requiring active motion with strength” were listed for each body joint. This 1928 publication of craft analysis remained a standard reference for occupational therapists working with physically disabled patients. (Creighton, 1992).

So on the one hand, the early occupational therapists adopted ideas from engineering to improve the efficiency of the production line, on the other, they were rooted in romanticism, a movement which found the idea of forcing a craftsperson to make things to fixed specifications abhorrent.

In the history of occupational therapy, the period between 1930 and 1965 has been described as the Mechanistic period or the Mechanistic paradigm. During this time the profession is said to have abandoned concern for occupation in the context of the environment and adopted the dominant philosophy of medicine, focusing on reductionistic concerns of body systems. (Turpin & Iwama, 2011) this period is also characterised by the loss in status of traditional crafts such as ceramics, weaving and basketry due to mechanisation and mass production (Laws, 2011)

Through out the 1960s, due to calls from theorists such as (Reilly, 1962) Activity analysis became once again a central part of the practice of Occupational Therapy. See for example (Fidler & Fidler, 1963) who, influenced by psychodynamic theory, highlight that what makes occupational therapy unique in the health professions is the use of activities or objects. However (Laws, 2011) analysis of the history of therapeutic work, argues that this influence turned the purpose of making inward, where making became diagnostic of inner conflicts and dysfunctional behaviours, rather than mastery of a craft as a vocational skill.

In the 1970s and 1980s, Occupational therapy theorists began to delineate frames of reference e.g. developmental, biomechanical behavioural, and according to (Creighton, 1992) each of these required a different type of activity analysis. It was the 1970s and 1980s that the occupational therapy conceptual models of practice such as the Model of Human Occupation (Taylor, 2017) gained prominence. And by the 1990s when I trained as an Occupational Therapist, it was the conceptual models of occupational therapy that dominated the curriculum, not activity analysis.

A distinction is made by many authors within occupational therapy between activity analysis and occupation based activity analysis. For example (Thomas, 2015) citing *the framework*, (American Occupational Therapy Association, 2014) describes Activity analysis as concerning the typical sequence, components and demands of an activity where as occupation-based activity analysis takes into account a particular individual and their interests, goals, abilities and contexts, as well as the demands of the activity itself.

Mackenzie & O'Toole, (2011) address the debates within the profession about terminology which make texts on this subject complex – namely the relationship between the concepts of Occupation, Activity and Task. Their book seeks to address a perceived bias in the literature towards publications which address activity analysis rather than Occupation Analysis, and widening the focus enables occupational therapists to consider the needs of the whole person, as they argue, it is occupation that is associated with personal meaning, action and feelings, not activity. It may be that many texts published since 2011 address this seeming imbalance however – for

example the 3rd edition of *the framework* (American Occupational Therapy Association, 2014).

Mackenzie & O'Toole (2011) also offer a more global perspective on the topic of terminology which tends to be dominated by American authors, the book is an edited book by Australian Authors with contributors from Australia, Ireland, UK and Canada

Occupational therapy has been described as a profession in adolescence (Turner, 2011). Its legitimacy and confidence in its own realm of concern under threat by our failure to articulate the contribution to health and social care of occupation based practice.

Could the lack of attention and failure to embrace and celebrate activity analysis, be the reason why occupational therapy has struggled throughout its history to articulate its legitimacy with confidence? Acts of making have not been seen as fitting well with the broader 'scientific' medical view of the profession. Activity analysis moved out of favour during the mechanistic paradigm, and never really regained it.

The profession may have lost the connection between *making* and *doing*.

Tubbs & Drake, (2017) however does provide evidence that at least some part of the profession is still interested in making as a treatment modality. This US Occupational therapy text book, now in its 5th edition, offers that

“...the retention of crafts as an occupational therapy method is viewed with scepticism.....It could be that occupational therapy has held the key to recovery all along, but the allure of more technical methods has led us astray.” (Tubbs & Drake, 2017, p. 3)

This indicates that a somewhat reluctant and fringe interest in crafts (aka making) within the profession still prevails. The book offers a detailed consideration as well as practical tools to support the activity analysis of crafts, illustrating the importance that activity analysis plays in the use of crafts within occupational therapy practice, and offering examples including needlework, cooking, beading and paper craft projects. No examples of the use of *digital* crafts are included in the text.

Nearly 30 years has gone by since Cynthia Creighton's article on the history of activity analysis (Creighton, 1992) this coincided with the early years and foundation of the discipline of *Occupational Science*. Occupational science is considered below

Occupational Science

The aim and scope of the Journal of Occupational Science is "to bring important work about the form, function, performance, and meaning of occupation to a wide international audience". (Journal of Occupational Science, 2019)

An international think tank on Occupational Science wrote in 2006 a vision for occupational science quotes as follows

"in 2016, occupational science will be a cohesive, dynamic and diverse science which transforms practice, is mainstream, is socially and ecologically responsible with innovative partnerships, and which is socially and politically influential" (Wicks 2006 p11) quoted in (Wicks, 2012) p173

However Occupational science remains a small undertaking without recognition beyond the profession of Occupational Therapy and with access to limited funds. (Wicks 2012)

Clare Hocking, the editor of the journal of Occupational Science called in 2009 for greater emphasis on generating research about occupation itself, rather than peoples engagement in it (Clare Hocking, 2009) However a search for the keyword "form or "occupational forms" within the Journal of occupational science since this time brings up only 4 articles. The original vision for Occupational Science was that it would be an interdisciplinary science, however the authors who publish in Occupational Science journals are almost exclusively Occupational Therapists, (Wicks, 2012) and their focus and interest has not aligned with occupation itself, but with peoples engagement in occupation. Occupational injustice and addressing marginalisation of different people groups has received attention, but not occupation itself, one of the original aims of the discipline.

Clare Hocking (2009) p142 calls for research that “supports the development of in-depth descriptions of human occupations”, and lists 8 things that these descriptions should encompass. All of the 8 things she listed, it could be argued, are things that a comprehensive Occupation-based activity analysis would include.

So, where is activity analysis in the academic discourses within Occupational Science and Occupational Therapy? I would argue that it is there, as part of everyday clinical practice and as part of their professional reasoning that guides occupational therapy practice – it is just not being framed as research, despite the calls of occupational scientists to return to the roots of the profession and to engage in research which is actually about Occupation. Hocking, (2009) also offers a consideration of research strategies, and the value of including interdisciplinary perspectives. Human geography is mentioned, as is sociology, population studies, environmental planning and anthropology. Methods mentioned include Observation and Physiological measurement . Art and Design research methodologies are notably absent.

Whiteford, Townsend, & Hocking, (2000) discusses a renaissance of occupation. A paradigm of thought focused on occupation that arose following the identity crisis of the profession which occurred in the 1970s and 1980s which preceded the call for occupational science – yet, it could be argued that the vision for occupational science has not yet been realised and has, despite its inclusion in all pre-registration training throughout the world, garnered little interest or support outside of the profession of occupational therapy.

Pierce, (2014) offers a compendium of the contribution of occupational science to occupational therapy to date. It organises the research into 4 levels, each being said to build on the other. The first or base level is *describing occupation* and if my research was to be situated within occupational science, this is where it would sit. Pierce states that although occupational science originally set out to describe occupation as one of its most pressing contribution to occupational therapy, the research that has been completed is “not extensive”. (Pierce, 2014, p. 17).

Seemingly in response to Pierce (2014), the paper (Benjamin-Thomas, Laliberte Rudman, Cameron, & Batorowicz, 2019) has recently been published in the Journal of Occupational Science (August 2019), which explores the potential contribution of three participatory digital methodologies, one of which is DST.

“As such, moving forward in enacting participatory, transformative scholarship in occupational science needs to combine methodological expansion, such as participatory digital methodologies, with thinking deeply about what we are doing and what we are saying about what we do” (Benjamin-Thomas et al., 2019, p. 572)

I offer that this methodological expansion could be accomplished by paying attention to this connection between doing and making, because the participatory digital methodologies discussed in Benjamin-Thomas et al 2019 involve *making*.

Arts in Health

There is a strong tradition of recognising that the arts have an important role to play in enhancing and fostering wellbeing, and a selected summary of papers from the fields of ‘arts in health’ as well as a consideration of social prescribing is presented.

The arts in health movement is broad in scope and has evolved separately from the creative arts therapies (such as, for example the regulated professions of Art psychotherapy and Music Therapy) It brings together those interested in the impact of the arts on health and wellbeing outside of the traditional therapy contexts. In the UK, the movement supports two dedicated peer reviewed journals: *Arts & Health: An International Journal for Research, Policy and Practice* launched in 2009 and the *Journal of Applied Arts and Health* launched in 2010. (Stickley et al., 2017). In recent years the field has recognised the need to consider links with creative arts therapies and the health humanities, and to

“develop conceptual and theoretical frameworks for understanding the processes through which the arts may exert their benefits” (Stickley et al., 2017, p. 18)

In the UK, the all party parliamentary group on Arts Health and Wellbeing was formed in 2014, with the aim of improving awareness of the benefits the arts can bring to

health and wellbeing. (APPGAHW, 2019) It published findings based on 2 years of evidence gathering in the sector in 2017. The report is very wide ranging and consists of case studies and reported outcomes. A consideration of occupational therapy and the profession's contribution to the arts and wellbeing agenda is notably absent.

Phillips, (2019) *An Art Psychotherapist*, provides a constructive criticism of the 2017 report, questioning the approach to evidence taken and calling for scientific rigour in reporting arts and health outcomes. Phillips (2019) highlights the marked increase in the number of projects promoting arts in health care since 2004, but calls for the arts not to be seen as a panacea.

“The realm of arts and health could benefit from greater discernment regarding which aspects of the arts might be useful in particular contexts, and an occasional reminder that the improvements in quality of life can be achieved via various routes.” (Phillips, 2019, p. 22)

She goes on to question the lack of attention in the report to the tension between measuring health/wellbeing outcomes while at the same time allowing engagement in the arts to allow for the challenge of social and health inequalities.

Boydell, Gladstone, Volpe, Allemang, & Stasiulis, (2012), in their scoping review of 71 arts based health research studies question the methodologies utilised in arts-based research, how impact is measured, and decisions offered for choice of genre. Only a few of the reviewed studies examined explicitly what the impact of doing the art was for participants in the research, and most of the studies included in the review did not justify why they had used a particular art genre as opposed to another one. Similarly (Perruzza & Kinsella, 2010) raise questions in relation to how it is possible to compare different genres of arts activities. Perruzza and Kinsella, (2010) includes peer-reviewed original articles published from 2000 – 2008. although this review is now dated, and only included 23 articles, it succeeded in clustering the therapeutic benefits people gain from engaging in creative arts into some useful categories. It names painting, drawing, creative writing, music, textile arts and crafts as the forms of creative arts practice under review. Digital forms such as video/film and photography are notably absent. The qualitative themes identified as benefits of engaging in creative arts are: a) enhanced perceived control, b) building a sense of self, c) expression, d)

transforming the illness experience, e) gaining a sense of purpose and f) building social support.

Clar et al., (2014) in their review of the use of digital media in public health contexts highlight that,

" Research gaps were identified relating to community-based research, participation and empowerment, active media use (especially with respect to visual media and use of specific visual methodologies) ..." (Clar et al 2014 p1066).

They conclude that the field is dominated by studies relating to ehealth, telehealth and social marketing with a particular focus on individual behaviour change.

Katherine Boydell and colleagues have been prolific in the field of knowledge translation within art-based health research (ABHR), and DST is one of the methods they employ. Their DST research will be considered as part of the review of DST research later in this chapter, but the team has published widely within the arts in health field about ABHR. For example Boydell et al., (2016) explore the tensions regarding academic legitimacy in the use of ABHR by interviewing 36 Canadian practitioner-researchers about their experiences. The paper argues for a reconceptualization of what counts as knowledge within the academy. Hodgins & Boydell, (2013) call for a move away from the descriptions of the form and content of specific projects to focus on a more critical examination of theoretical and methodological depth. Lenette et al., (2018) highlights the specific ethical challenges of digital research methods such as photography and digital storytelling, calling for ethics committees to use a situated approach when assessing research protocols that use visual methods

Social prescribing and arts on prescription

Social prescribing has been described as a way for general practitioners to make non-medical referrals. It is a way of linking patients in primary care with sources of support in the community (Bickerdike, Booth, Wilson, Farley, & Wright, 2017). Art activities are among those "prescribed". Bungay & Clift, (2010) reviewed the use of Arts on

Prescription in the UK, making the point that such initiatives provide access to artists and musician lead interventions outside the scope of formal creative arts therapies.

In the UK, the 2017 report (APPGAHW, 2017) and other policy drivers, have led to social prescribing programmes being widely advocated, however, according to Bickerdike et al., (2017), who conducted a systematic review of 15 evaluations of social prescribing published 2000 – 2016, there is not currently enough research evidence to indicate their effectiveness. They advocate that future evaluations must be comparative by design and consider when, by whom, for whom social prescribing works and at what cost.

Smith, (2019) outlines the work of Royal College of Occupational Therapists to input into the social prescribing agenda, however, it is clear the national body is *responding* to the agenda, not *leading* it. Occupational Therapists have begun to consider the rigour of social prescribing and the training and support needs for practitioners (known as link workers), however. The Social Prescribing Hub at University of Salford, which is co-directed by occupational therapy educators Sarah Bodell and Rachel Martin, is seeking to provide training for link workers on the principles of occupational science, and particularly to enable them to determine when a client’s needs are too complex. (Howarth, Bodell, Gibbons, Lawler, & Martin, 2019).

It is clear that the contribution Occupational Therapy could make to social prescribing and the arts in health movement is not well understood outside of the profession.

Participatory research methods

Participation and involvement of service users in health care research is at the forefront of policy (Cook, Atkin, & Wilcockson, 2018). Rose & Kalathil, (2019) in their paper about the evolution of coproduction in mental health, set out the beginnings of this policy agenda. In the UK, INVOLVE, the public involvement arm of the National Institute for health research, supports active public involvement in health and social care research and was established in 1996. In the beginning, there were three types of “service user involvement” Consultation, collaboration and user-controlled (Rose &

Kalathil, 2019) this builds on the work of Arnstein's, (1969) ladder of citizen participation, which cites "citizen control" as the top level of the ladder where the patient (or citizen) has the most control within the collaboration. True collaboration though, has been hampered by cultural and power differences, which privilege some types of knowledge over others, and unwritten conventions about what can and can't be said within academic and governmental spaces. Fricker, (2007) conceptualises these mechanisms as epistemic and hermeneutic injustice. Rose & Kalathil, (2019) offer an example of how these injustices can play out, where the second author, a user/survivor researcher, was asked to share a platform with psychiatrists – effectively being asked to

"speak about my personal experience alongside others who write about people like me as damaged human beings, with a corrupt morality and a disordered personality" (Rose & Kalathil, 2019, p. 3)

I have plenty of my own examples of epistemic and hermeneutic injustice from my years of working as a patient advocate and employee of Hackney Patients council in the late 1990s and since, and my treatment at the hands of psychiatry explored in my first digital story, (p10 of the photobook and folder one of the USB stick) which attempts to express the screaming silences (Serrant-green, 2011) and terror of not being trusted or believed whilst in a vulnerable state.

For participatory research methods to realise their stated intentions of collaboration, attention to power and privilege and the unwritten rules about knowledge production needs to be addressed, regardless of if such collaborations are called co-production, co-design, co-creation, participatory research or participatory action research. That is the only way the realities of oppression and marginalisation can be addressed and a Freirean transformation can occur (Freire, 1972, 1998; Lilyea, 2015).

Thankfully there is much excellent work being done in this arena, in particular by the International Collaboration for Participatory Health Research (ICPHR). This group have, since 2009 worked together to strengthen Participatory Health Research (PHR) in terms of quality and credibility as well as its impact on policy and health and social care practice. The group have published a number of position statements, for example

Position Paper 1 (ICPHR 2013), which sets out a definition of PHR and the 11 characteristics it should comprise of.

Benjamin-Thomas et al., (2019), in their recent paper on the contribution of participatory digital methodologies to the expansion of occupation science, highlight that participatory methodologies are particularly relevant in enacting a transformative intent for research participants, in keeping with characteristic 5 of ICPHR (2013) however they do not make a distinction between participatory research and participatory *visual* research, my question is therefore, what is it about the visual aspect, other than having the potential to foster enjoyable engaging spaces for research participants, that makes it worth going to the trouble of making things in a participatory research context? A consideration of Participatory *visual* methodologies is therefore warranted.

Participatory visual methodologies in health research

DST has been described as: A participatory digital methodology (Benjamin-Thomas et al., 2019), an innovative participatory method (Lal, Donnelly, & Shin, 2015) a participatory media genre (Alexandra, 2015) a participatory visual methodology (PVM) (O'Donovan et al., 2019), and an arts-based research method (de Jager, Fogarty, Tewson, Boydell, & Lenette, 2017; Rieger et al., 2018). Furthermore DST has been described as a participatory arts research method and as a model for co-production or co-design (de Jager et al., 2017; De Vecchi, Kenny, Dickson-Swift, & Kidd, 2016; Guse et al., 2013; Hardy & Sumner, 2018; Lal et al., 2015)

This section considers the place of DST as situated alongside other established research methods that use the art of photography and video with participatory, transformative and emancipatory intent.

Participatory video

Cain (2009), defines participatory video as a practice which uses film/video as a tool for change. She describes the origins of participatory video as a project on Fogo Island,

Canada in the 1960s, where it grew out of a community partnership with the National Film Board that involved Islanders creating short films about life on Fogo. (Benjamin-Thomas et al., 2019) however, cite its origins back to the beginnings of film in the 1900s. The collaborative nature of filming differentiated itself from other genres during the 1960s, as 'subjects' of the film participated in the creative process of development. According to Sitter (2015) The approach draws on principles of collaboration, community organization, and de-centring the notion of 'expert'. Sitter (2015), used Participatory video techniques with people with learning disabilities to make media about sexual health. Sitter distinguished participatory video from other forms of visual genres as it combined group work with the video work and participants take on the role of co-filmmakers. Benjamin-Thomas et al., (2019) considered participatory video as one of their 3 approaches for advancing transformative occupation-based research with children and youth.

Photovoice

Photovoice is a visual research method developed by Caroline Wang and Ann Burris in 1997. (Wang & Burris, 1997) A scoping review of the Photovoice method by (Lal, Jarus, & Suto, 2012) published in the occupational therapy literature, defines it as a participatory action research method which combines photography and group work to allow people to record and reflect on their daily lives. Through photovoice, cameras are given to research participants "with lived experience from marginalised groups" (Macdonald, Dew, & Boydell, 2019, p. 187) and this allows an insider perspective to be captured, and shared, through small and large group discussion and also the hope is that this knowledge also reaches policy makers. There are many research approaches which use photography in some form (e.g. photo elicitation, participatory photographic research from an array of different disciplines including sociology, anthropology and education. For example Claire Craig (Craig, 2009) explores photography as a means for self-expression and a vehicle for communication in her work with people living with dementia, using techniques drawn from Photovoice methods.

It is argued by Lal et al., (2012) that photovoice stands out from other visual research methods because it is associated with well-established participatory research principles. (Bryant, Tibbs, & Clark, 2011) discusses the main health and social care research approaches which use photography, including photovoice, but don't align their own use of photography (with people using mental health day services) on any one of these approaches. Catalani & Minkler, (2010) conducted a systematic review of the peer-reviewed literature on photovoice in public health conducted before Jan 2008. They found that where projects included a high level of participation, photovoice contributes to an enhanced understanding of community assets/needs and to empowerment.

Macdonald et al., (2019) offer a photovoice scoping review which focuses specifically on its use with people with disabilities. They clustered their review of 30 Studies between 2008 and Feb 2018 around the topics of representation and knowledge translation.

O'Donovan et al., (2019) conducted a scoping review of Participatory visual methodologies (PVMs) used to evaluate Community Health Worker programmes between 1978 and 2018. Of the 12 studies included, 6 studies using photovoice and 5 using digital storytelling. This study highlights that PVMs can help promote a trusting environment between participants and researchers and are often used in research which seeks to include marginalised groups.

To conclude, participatory video, photovoice and DST can be seen as the main examples of PVMs being used by researchers. However, DST is not just a visual methodology, it is a multi-modal tool. A consideration of how DST has conceptualised in research follows:

Digital Storytelling

In 2016 (updated in 2019) I carried out a scoping review across art, design, education and health related databases. The principles and process of scoping review methodology (Arksey & O'Malley, 2005) are to be found in the Appendix at the back of this thesis. The scoping review aimed to answer the following question:

- What has been published in the peer-reviewed literature about digital storytelling and stop motion animation which is relevant to this doctorate?

The search strategy used a number of different searches depending on the focus of the database, as documented in Table 1

Database	Search terms	Filters	results
CINAHAL complete	Digital storytelling or digital story	Limited to title 2008-2019	81
CINAHAL complete	Digital storytelling or digital story (in title) AND therapy or treatment or intervention in Abstract	Limited to title, t Limited to therapy or treatment or intervention in Abstract 2008 – 2019	16
MEDLINE	Digital storytelling or digital story	Limited to abstract 2008 - 2019	110
MEDLINE	Digital storytelling or digital story	Limited to abstract Full text available Exclude duplicates from previous searches 2008 - 2019	24
Art Full text	Digital storytelling or digital story AND health or Wellbeing or well being or well-being or quality of life	Limited to abstract Full text available Exclude duplicates from previous searches 2008 – 2019	1
ERIC	Digital storytelling or digital story AND health or Wellbeing or well being or well-being or quality of life	Limited to abstract Full text available Exclude duplicates from previous searches 2008 – 2019	3 (1 excluded due as DST not its main focus) 2

Film & Television Literature Index	Digital storytelling or digital story AND health or Wellbeing or well being or well-being or quality of life	Limited to abstract Full text available Exclude duplicates from previous searches 2008 – 2019	2
Applied Social Sciences index and Abstracts (ASSIA)	Digital storytelling or digital story AND Wellbeing	5 results but 1 not relevant and 4 duplicates Limited to abstract Full text available Exclude duplicates from previous searches 2008 – 2019	0

Table 1: search strategy

In order to find relevant papers about stop-motion animation, The searches were repeated replacing Digital storytelling with Animation. Only three relevant papers were found. (Linstead & Brooks, 2015)(Mason, 2011)(Eckersley, 2017) These will be considered later in the chapter

Until recently, most of the material about digital storytelling was to be found in edited books, for example (Dunford & Jenkins, 2017b; Hardy & Sumner, 2014; Hill, 2014) and some of this makes reference to health and wellbeing outcomes, mostly write ups of small digital storytelling projects. Joe Lambert was, until recently careful to play down any “therapeutic” benefits of making digital stories, in the most recent editions of his book (Lambert, 2013; Lambert & Hessler, 2018) he has acknowledged that making a digital story “allows some shifts in perspective” (Lambert, 2013 p12) and that this may be beneficial in work with identity. In (Lambert & Hessler, 2018) he includes a whole chapter about the work of Pilgrim Projects, who within this chapter make bolder claims about possible wellbeing outcomes, while being careful to emphasise their consideration of ethical and safety concerns, for example: Their engagement of an experienced counselling supervisor to support their digital storytelling work and keeping the group size small and the psychodynamic counselling and group therapy training their facilitators have undergone, which enable them to facilitate the stories of vulnerable groups. They discuss the close links that there are between learning, reflection and healing in the effect of undergoing the digital story process. Pilgrim

Projects further discuss their therapeutic work in digital storytelling with people with mental health difficulties in (Hardy & Sumner, 2017)

In recent years, DST has been more systematically examined in the peer reviewed literature. When I refreshed my literature review in 2019 I found 4 systematic or scoping reviews and 1 protocol for a systematic review had been published about digital storytelling since 2016. These 5 studies will be considered below.

De Vecchi et al., (2016) is a scoping review, conducted by Australian authors, which examines how digital storytelling is used in Mental Health. It is of peer reviewed literature published between 2000 and 2015. 15 articles met the inclusion criteria of the review. Four broad areas were identified that were said to describe the current use of digital storytelling in mental health. These were: educational interventions, learning skills, learning about other people's lived experience, and learning about personal lived experience. The authors identify a gap in the literature which they would like filled with digital story projects which concern the use of digital storytelling with stakeholders in mental health services, only 6 of the reviewed 15 studies concerned DST with people using mental health care services. The authors wish to use DST to support the development of empathic relationships between stakeholders of mental health services. The review was very broad and did not report on the purpose of each of the reviewed studies, or why DST was chosen over another arts-based enquiry method or therapeutic approach. The authors of the review advocate further research to be conducted on

“the collaborative use of digital storytelling in mental health services” (De Vecchi et al., 2016, p. 191).

Further clarity on what the authors mean by this would have improved this paper.

de Jager et al., (2017) is a systematic review about digital storytelling in research. Also conducted by Australian authors from The Black Dog Institute (“The Black Dog Institute,” n.d.), it located 23 discrete studies which utilised DST as an arts-based research method. This paper includes an important section on the therapeutic benefit of Digital storytelling, particularly commenting on the number of studies where it has

been used with marginalised or vulnerable groups. They conclude the section by noting that most of the examples they cite, DST is facilitated by trained health professionals , and that

“Further research is required to establish how DST creation compares to other therapeutic methods” (de Jager et al., 2017, p. 2551)

The other benefits of DST discussed in the article are: *Potential for Knowledge Translation* – (i.e the sharing of resulting digital stories); *Preservation of cultural heritage*; *Education, training or professional development* (i.e. to develop reflective skills, digital literacy, writing and language skills) and lastly *Community development*.

This is a very thorough review, study authors included in the review were contacted about how much they adhered to the principles of DST during the study and what had happened since publication. de Jager et al., (2017) also contains a section where benefits and disadvantages mentioned by DST participants have been extracted from the 23 reviewed studies. The benefits were categorised as: Collaboration/building relationships, the value of arts-based research, the therapeutic/reflective benefits, and the impact on the wider community. Advantages heavily outweighed disadvantages, but these were described as the risk of re-traumatising for participants and the concern that participants would be further stigmatised if they public viewed the stories. The paper concludes that DST engages participants on a deeper emotional and relational level than more traditional interviews.

There is a small section in the paper on the utility of DST as a *sensory*, visual research method, valued for its ability to

“represent experiences that are inadequately captured in verbal interview and text alone” (de Jager et al., 2017, p. 2573)

Visual and auditory components of DST allowed participants with cultural traditions which favour those modes to express themselves.

Finally, although the paper has highlighted a range of benefits of DST, it offers that there is not enough research that has been done on the process or components which link particular aspects of DST to beneficial outcomes.

Moreau et al., (2018) is a systematic review of DST in health professions education between 2004 and 2016., conducted by Canadian authors. 16 articles met the inclusion criteria. Half the studies involved undergraduate nursing students, 5 studies were about the learning from listening to patient stories only – not actually making stories. The focus of the review was on what contexts and purposes DST had been used and what impact it had on the learning and behaviours of health professionals. They found that the creation of digital stories positively enhanced learning, but viewing stories already made had minimal impact on learning. Few of the cited studies reported changes in behaviour as a result of the learning. They conclude that additional high-quality research on the use and impact of DST in health professional’s education is needed.

Rieger et al., (2018) is a protocol for a systematic review of Digital storytelling as a method in health research, conducted by Canadian nursing academics. This will be a wide ranging review, which will scrutinise papers from 1990 and the focus of the review is: 1) the purpose, definition, use (processes) and contexts of digital storytelling, 2) the impact of DST on the research process, knowledge development and healthcare practice 3) the key ethical considerations. This review protocol cites all the other reviews I summarise here apart from (de Jager et al., 2017) the most closely related review to their study.

Botfield, Newman, Lenette, Albury, & Zwi, (2018) is a scoping review by Australian authors, of digital storytelling used to promote the sexual health and well-being of migrant and refugee young people from 2010. The aims of the review were to

“better understand the potential benefits and associated challenges of using DST to promote the sexual health and well-being of migrant, refugee and other culturally diverse young people and to identify key gaps in knowledge.”
(Botfield et al., 2018, p. 737)

28 papers met the inclusion criteria (which did include papers about a range of digital methods, not limited to classic DST) and the results of the review were presented in two analyses. 12 papers concerned digital stories as social activism, 6 papers used digital storytelling as a research method. Positive aspects mirror that reported in other reviews. Challenges, limitations and ethical considerations were listed as

- recruitment issues due to the time required to make a digital story when young people have many other commitments,
- Young people limiting the scope and details of their stories as the media would be shown to the general public.
- Participant inexperience with media production and generating ideas for stories slowed progress and caused anxiety
- Consent and safety: e.g. when stories featured people other than its author, and in relation to preventing information misuse. Identifiable images and telling stories that may make others uncomfortable or expose themselves to harm
- Consent to use stories – it is not always feasible to anticipate how and for how long the stories can be used in the future.
- Imbalance between the priorities of participants and project coordinators
- Facilitators imposing their own agendas and helping shape the narrative to produce stories that would resonate with audiences
- Considerable investment of time, resources and training
- Using material for research that was not originally produced for that purpose
- Data being analysed by researchers who had little involvement with the creative production process

The rest of the literature review on Digital storytelling

Given the ground covered by the systematic and scoping reviews described above, only papers published between 2016 and 2019 are further considered.

Table 2 contains a list of papers retrieved by my literature review published between 2016 and July 2019 and their main contribution to the themes of my thesis

Citation	Title	Scope
(Lenette et al., 2019) School of social sciences at university of NSW and, Public health Queensland and NSW, Australia	'Better than a pill': digital storytelling as a narrative process for refugee women	Discusses the content of 3 digital stories made in a DST project in 2015 in Brisbane

Citation	Title	Scope
(Fiddian-Green, Kim, Gubrium, Larkey, & Peterson, 2019) Massachusetts USA First author is a Public Health educator and researcher	Restor(y)ing Health: A Conceptual Model of the Effects of Digital Storytelling	Offers a conceptual model of the effect of DST on socioemotional well-being and a map of what a DST process is by utilising 4 frames: Narrative Theory, Freirian conscientization, Multimodality and Social Cognitive Theory. Uses illustrations from Puerto Rican study – see (Fiddian-Green, Gubrium, & Peterson, 2017)
(Laing, Moules, Sinclair, & Estefan, 2019) Alberta Canada, Nurse researchers	Digital Storytelling as a Psychosocial Tool for Adult Cancer Survivors	10 adult cancer survivors made DS. Paper reports on interview data post workshop - the meaning of the process for participants and its effects.
(Chen & Schweitzer, 2019) Queensland, Australia	The Experience of Belonging in Youth from Refugee Backgrounds: A Narrative Perspective	High School based research. 30 students and 5 parents were interviewed using a “digital storytelling research approach” about belonging – it seems that it was just the f/u focus groups that were the subject of this study – not the DST itself which is part of a larger study
(de Castro & Levesque, 2018) Nursing, University of Washington	Using a digital storytelling assignment to teach public health advocacy	DST as an academic assignment for Nursing students
(Bellamy, 2018) La Trobe University Melbourne	Creative health promotion methods for young LGBTIQ+ people	About a range of life writing methods including DST and their benefits.
(Gauld, Smith, & Kendal, 2018) Brisbane Queensland Australia	Exploring the impact of sharing personal narratives of brain injury through film in Australian Indigenous communities	Participatory Action Research approaches used to produce personal films – not DST

Citation	Title	Scope
(Rice, Chandler, Liddiard, Rinaldi, & Harrison, 2018) College of Social and Applied Human Sciences University of Guelph Canada – third author is from University of Sheffield School of Education	Pedagogical possibilities for unruly bodies	8 disabled trans people made media within a project involving DST and drama workshops as part of a Project Re-Vision which started in 2012 and has generated an archive of 200 Digital stories. This had its own approach to theory and content generation. - not a classic DST process. The content of the stories are examined in the paper and the power of sharing these with a view to disrupt stereotypical understandings of disability and difference is explored
(Nicklas, Lane, Hanson, Owens, & Treitz, 2017) Colorado School of Medicine	Using Digital Stories to Reflect on the Culture of Overuse, Misuse, and Underuse in Medicine and Enhance the Patient-Provider Relationship	Med school education – 10, Single image digital stories with medics working in Paediatrics were made the content of the stories was discussed in the paper
(Fiddian-Green et al., 2017)* Dept of health Promotion and policy University of Massachusetts USA	Puerto Rican Latina Youth Coming Out to Talk About Sexuality and Identity	Presents selected findings from a 2 year project called “lets talk about sex”. Discusses the strengths of DST as well as themes from the stories. Two case studies from the project are presented in the article. Project consisted of three 4 day DST workshop 10 participants recruited for each.
(Briant, Halter, Marchello, Escareño, & Thompson, 2016) Cancer Research Centre Seattle USA	The Power of Digital Storytelling as a Culturally Relevant Health Promotion Tool	DST with Hispanics/Latinos– 3 day train the trainer workshop trained 9 “promotores”, in 2013 who then facilitated 2h weekly meetings for 5 weeks to produce health related DST. Post workshop interviews were conducted about the meaning of the process for participants
(Burnett, Ott Walter, & Baller, 2016) Harrisonburg VA USA	Blackouts to Lifelong Memories: Digital Storytelling and the College Alcohol Habitus	A content analysis of students Digital stories about college alcohol culture. 71 stories made as coursework

Citation	Title	Scope
(DiFulvio, Gubrium, Fiddian-Green, Lowe, & Del Toro-Mejias, 2016)* Dept of health Promotion and policy University of Massachusetts USA	Digital storytelling as a narrative health promotion process: Evaluation of a pilot study	Reports on the findings from the mixed methods study of the Puerto Rican Latina project. 30 participants enrolled on a 4 day DST workshops. 29 completed a DS – focus is on the quantitative results which were from self report quantitative questionnaires administered just before the workshops, just afterwards and then 3 months afterwards. Paper concludes that “the development of a culturally relevant, validated scale assessing the DST process is critical for conducting a generalizable assessment of the impact of this approach on participants” p 36
(Gubrium, Fiddian-Green, Lowe, Difulvio, & Del Toro-Mejías, 2016)* Dept of health Promotion and policy University of Massachusetts USA	Measuring Down: Evaluating Digital Storytelling as a Process for Narrative Health Promotion	Methods paper Examines the effect of DST in the work with the Puerto Rican Latina project which are described as : positive impacts on self-esteem, social support, empowerment and sexual attitudes and behaviours, these findings came from the qualitative methods used but not the quantitative ones
*Three papers about the same research study		

Table 2: papers published between 2016 and 2019

The review found that the main centres of health and wellbeing related academic enquiry about Digital storytelling are:

USA:

- University of Massachusetts, School of Public Health and Health Sciences. See for example: (DiFulvio et al., 2016; Fiddian-Green et al., 2017; Gubrium et al., 2016; Wexler, Gubrium, Griffin, & DiFulvio, 2013)
- Storycenter/Silence Speaks, Berkley California USA See for example: (Hill, 2014; Lambert & Hessler, 2018)

Australia:

- Black dog Institute at the University of New South Wales Australia. See for example (de Jager et al., 2017; Lenette et al., 2019)
- La Trobe University in Melbourne Australia, for example (D’Cruz, Douglas, & Serry, 2019; De Vecchi et al., 2016)

UK:

- Patient Voices programme, in collaboration with Nurse academics, for example (Hardy, 2016; Hardy & Sumner, 2017; Stacey & Hardy, 2011; Stenhouse, Tait, Hardy, & Sumner, 2013)

Canada:

- Some significant papers from researchers active in different parts of Canada include: (Lal et al., 2012; Mah, Gladstone, King, Reed, & Hartman, 2019; Moreau et al., 2018; Rieger et al., 2018)

To summarise the literature review of DST, research is starting to be done about the transformational and health promoting benefits of DST, and particularly its utility with marginalised groups and young people. This literature review with “wellbeing” as a search term highlighted there are 3 distinct but overlapping strands of DST research – 1) DST for wellbeing/therapy 2) DST as participatory arts research method, 3) DST in education – particularly its use health care education to facilitate reflective practice.

Katherine Boydell’s team are arguing that

“ there is a paucity of process or component research linking particular aspects of DST to beneficial outcomes.” (de Jager et al., 2017, p. 2575)

but this paper indicates that the team take a pragmatic view. They argue that despite the lack of attention to process or the different component research, it is in fact known (if a pragmatic view is adopted), what each component of the DST process needs to be to obtain the benefits and avoid the ethical pitfalls and drawbacks.

As Katherine Boydell writes, one of the main challenges for arts-based research is how knowledge gained from such research is valued as legitimate:

“We argue for the need to reconsider what counts as knowledge and advocate attending to experiential knowledge, pragmatic knowledge, and cultural knowledge in addition to evidence-based research knowledge. knowledge should be viewed as being created, constructed, embodied, performed and collectively negotiated .” (Boydell, 2019)

Boydell goes on to state that notions of evaluation and rigor need to be reconceptualised in order to support the production and dissemination of arts based research.

In the US however, Fiddian-Green et al., (2019) have built a conceptual model of DST – they recommend the next steps should be “empirical application and analysis of their model” and also advocate mixed methods research and randomised controlled trials of DST. I would argue that this is playing straight into the hands of the very systems and structures that Boydell is advocating need to be reconceptualised, in order for arts-based research to establish itself as a legitimate form of knowledge generation.

Occupational Therapy and Digital Storytelling

Six papers were found that were authored by Occupational Therapists and these are discussed below.

McDonough & Colucci, (2019) reviews a DST workshop which involved 10 male refugees/migrants with mental health issues in Australia in 2014. The first author of the paper is an Occupational Therapist based in Melbourne, and the review involved half of the original storytellers and the co-ordinators. The paper focuses on the content of the 10 stories and how they have been utilised in the subsequent years to positively influence policy, community opinion and service provision, as well as the other benefit of building self-belief and community solidarity for the storytellers. Storytellers involved in the review continued to regard the process personally empowering and safe three years later. In its discussion, this paper begins to consider

DST as a form and the ‘meaning-making’ (McDonough & Colucci, 2019, p. 17) inherent at the different stages of a DST process.

D’Cruz, Douglas, & Serry, (2019) is a write up of a DST project which was part of a larger study exploring narrative storytelling. 8 adults with acquired brain injury made stories. The participants were interviewed twice following workshop. Results of the analysis of the interviews reveal

“the therapeutic potential of narrative storytelling when coupled with an altruistic opportunity to help others through story sharing” (D’Cruz et al., 2019, p. 1).

The paper reports that storytelling could potentially be used to assist clinicians with negotiating meaningful goals for their clients, although no distinction is made between the benefits of DST and other forms of narrative storytelling as they are reported to be the same.

Mah, Gladstone, King, Reed, & Hartman, (2019) is also about DST with brain injured participants and is a research informed theory/opinion paper. DST is used as part of a project using arts based methods with children. The project was still underway at time of writing of the paper and therefore no data is reported, but the paper suggests that disabled children are doubly silenced by research methods which are driven by researchers’ perspectives rather than the children’s. Especially given the dearth of research studies that report on the perspectives of children recovering from brain injury.

Skarpaas, Jamissen, Krüger, Holmberg, & Hardy, (2016) reports on a DST 2 day workshop with 34 Occupational Therapy students in Oslo. This Occupational Therapy School has used DST as reflections on practice placement experience. Students worked in groups of 3 or 4, with detailed instructions, rather than working with a facilitator. This is somewhat different from the “classic” DST model (Lambert & Hessler, 2018) where DST is facilitated by at least 2 trained facilitators and takes place in a small group. The follow up questionnaire used in the study does begin to explore the importance of reflecting using images and sound – drawing comparisons with more traditional ways of reflection using text only, and asked participants about the value of

using a narrative form to reflect. The students who completed the questionnaire reported benefits from listening to their peers' experiences and the multi-media aspects of DST but not so much the narrative structure. However only 34 out of 57 students who were present at the start of the workshop completed and filled in the questionnaire, and nothing is known about why those 23 students chose not to complete the workshop. The study reveals that taking part in a digital story process had benefits for those students who chose to undergo the process. A limitation of the study is that 23 students "voted with their feet" and did not complete the workshop - for unknown reasons.

Only one Occupational Therapy paper has been published which explores (in part) the therapeutic potential of digital storytelling. Lal et al., (2015) written by Occupational Therapy academics based in Canada, considers the potential for digital storytelling in occupational therapy practice, education and research. It considers the possible role of digital storytelling as a therapeutic tool to promote self-expression, personal reflection, patient education and for connecting people with other individuals who have experienced similar health conditions. Lal et al., (2015) provide some examples, not all of them involve the process of making media, however. According to Lal et al., (2015) although the multi-media aspects of digital stories e.g. photos, music are important contributors to the impact of the digital story, the *power* of the digital story remains in the *content* of the story and how it is expressed

"with less preoccupation with the actual visuals, lighting, background, and sound effects" (p56).

I would argue that it is possible that a *writer* will attribute the most significance to the most readily understood aspects of the technique. As only a few authors are *writing* about digital storytelling for therapy and by definition these people are *writers* rather than visual artists or designers, they may not be aware of the bias towards the script or oral aspects of digital story making they are exhibiting. Indeed, evidence that it is not necessarily the oral/written aspects which are the most important for storytellers can be found in one of the papers (Wexler et al., 2013) cited by Lal et al (2015).

Finally, Benjamin-Thomas et al., (2019) Is written by occupational therapy researchers based in Ontario, Canada. Their literature review considers the potential for 3 participatory digital methodologies (DST being one) that have potential to enable critical examination of the *situated nature of occupation* and enact *transformative* research agendas, therefore addressing the need for *methodological expansions* within occupation science. They do not indicate who is calling for methodological expansions in occupational science or what the context for this call is, nor do they differentiate the benefits of *participatory* research methodologies from *arts-based or visual participatory* research methodologies, however, the review allies itself with critical frameworks such as occupational justice that highlight the situated and political nature of occupation.

To summarise, only two papers about DST have been published within Occupational Therapy focused publications, both of these are literature reviews, and there is no evidence that these occupational therapy authors are writing about DST out of their own DST practice of making and facilitating digital stories. There do not seem to be any Occupational therapists based in the UK who are writing about DST.

Occupational therapy and stop motion animation

The searches were repeated replacing Digital storytelling with Animation. Only three relevant papers were found: Eckersley, (2017); Linstead & Brooks, (2015); and Mason, (2011) These will be discussed in turn.

Linstead & Brooks, (2015) offers one of the few published research studies on the therapeutic application of stop-motion animation. This piece of primary research uses the Re-Animation approach developed by Helen Mason (Mason, 2011) and the intervention was delivered 1:1 by an Occupational Therapy technical instructor trained in the technique. Linstead and Brooks (2015) used mixed methods to evaluate the impact of the re-animation approach with three patients living in a forensic mental health unit in the UK. They report some very positive findings relating to a) filling time in a meaningful way, b) losing oneself in a relaxing creative activity c) learning skills

which both help with articulating thoughts and feelings and act as a precursor to marketable skills such as computer skills.

It is important to note that participants in this study were engaging with level one of the re-animation approach, which is a sensory exploration of the materials used in animation and is designed to enable participants to grasp the basic techniques of animation using modelling clay and paper and start to think about simple story arcs. They are not using animation to tell stories about themselves, but are beginning to explore basic story structures. What the study highlights is how much the media making was valued by participants, when it is tailored to the individual. Patients in forensic units are often very difficult to engage, but there is something about this form of media making which captures enthusiasm and excitement. One participant stated “Its more than just an activity to fill my timetable, it’s a real interest” (Linstead and Brooks 2015 p411). An exploration of what it actually is about doing animation which promotes this interest was beyond the scope of the article, but it does offer an interesting consideration of the health and wellbeing benefits of engaging in creative activity generally.

Eckersley, (2017) concerns animation as a methodology for understanding and making meaning of loss for a group of adults with learning disabilities. Insights from the authors doctoral work is presented. Eckersley, who is an animator rather than a health professional, begins to discuss animation as a “distinct language” (Eckersley, 2017, p. 73) – with application in art therapy (even though she is not, herself an art therapist) her work is however one of the rare studies that I found that considers form, or the properties of a media practice.

Conclusion

Occupational therapy is concerned with promoting health and wellbeing through meaningful activity. The founders of the profession recognised that through acts of goal directed making, people are able to gain a sense of purpose and experience wellbeing. Occupation based activity analysis is a method by which a meaningful activity can be understood, however the profession of occupational therapy had failed to harness this as a research method. The history of Occupational Therapy has been such that instead we have gone down the ratio-technical route and allowed ourselves to be confined by narrow views of health and wellbeing. Acts of making have not been seen as fitting with the broader 'scientific' medical view of the profession. Furthermore, making as a way of knowing - as espoused by the Romantics who were so influential in the foundation of the profession - has been subsumed not only by positivist ratio-technical epistemologies but also by Interpretivist epistemologies favoured by the social sciences.

However, outside of the profession there is a growing recognition of the relationship between wellbeing and creativity, evidenced by the prevalence of the arts in health movement and the advent of social prescribing: meeting growing societal needs in terms of wellbeing.

Furthermore interest in participatory research methods has flourished within health care related social science, due to the political imperative to involve service users in health research in a way that shares power. In parallel there is growing interest in participatory *visual* research methods, and DST has been discussed as an example of a participatory visual research method. (or methodology) But DST is much more than a visual tool, rather, as recognised by (Fiddian-Green et al., 2019; Skarpaas et al., 2016) it is a *multi-modal* tool, and little attention has been paid to what the use of a multimodal tool adds to a participatory research project, other than it makes the research more fun and/or engaging for hard to reach marginalised groups. How and why the use of an *arts based* participatory tool is transformational and what informs the choice of one arts-based method over another one, is absent from both the

participatory research literature and the literature that looks at the use of arts in health and the arts for therapeutic benefit.

Methodology

This chapter describes my epistemological standpoint(s). It then goes on to describe the methods I used to conduct this enquiry.

Knowing through doing

Within the introduction chapter of this thesis, I set out the different facets of myself that I bring to this enquiry. These different facets have informed my epistemology which is rooted in the way I think and learn.

I live with dyslexia. My speaking is not fluent or ordered. My mind flutters from one thing to another. I am a big picture thinker – I can see the connection and the map but not so much the detail. I see the image – often a moving image and then I have to translate that into words so others can understand what I mean. But words are not enough to articulate all I learn through doing, trying things, practical things, thinking in pictures and visual metaphors. This is articulated in my 2012 digital story, documented on p 12 of the photobook and in USB folder one.

My engagement with DST has been personally transformative and emancipatory, as the contextual review shows, the roots of the practice of DST sit in community engagement and DST has been conceptualised as both a participatory and emancipatory research method.

Epistemologies that resonate with my own experience of thinking and learning come from several different disciplines. These are explored in the following paragraphs.

Learning theory

Constructivists such as Jean Piaget (Piaget 2013) and Lev Vgotsky (Vgotsky 1930) see learning as the process of *creating meaning from experience*.

Piaget arrived at his theory of cognitive development in part by observing his own young children at play. According to (Flores, 2016b) he noticed that children actively

construct their understanding of the world via sensorimotor interactions with their environment, they are not simply “empty vessels into which adults pour knowledge” (Beisser and Gillespie 2003 p246). To Piaget, the construction of new knowledge occurs in both physical and cognitive ways by the action of the same sensorimotor pathways in and out of the brain. Learning happens through a process of assimilation and accommodation as children (and adults) successfully contextualise new information which becomes part of their schema. Piaget saw the promotion of this kind of learning as a way to develop creative and innovative minds. However, although constructivists agree that learning occurs through the learners own experience, (regardless of if that occurs through social interaction (Vygotsky) or activities such as play (Piaget) the process happens through thinking – it is mental construction.

Seymour Papert’s *constructionist* learning theory is seen as a development of Piaget’s work. For Papert, learning happens more effectively when people are active in making tangible objects in the real world. (Papert & Harel, 1991)

“the learner is consciously engaged in construction of a public entity, whether it’s a sand castle on the beach or a theory of the universe” Parert and Harel (1991 p1).

Papert was a teacher of maths and early computer programming, and in Papert and Harel (1991) he tells a story about how he yearned to make maths class more like an art class. It was the delight in the making and the value of the artifacts made in a soap-carving class that captured his imagination. His theory is, it appears, inspired by the process of creative making. He went on to design engaging tools to use in the classroom such as the LOGO programming language. His work with the LEGO corporation ultimately resulted in the development of LEGO SERIOUS PLAY (LSP), which employs physical construction of tangible LEGO building blocks to enable transformational learning, and has been used to enable creative problem solving and reflection in many different sectors. See Peabody and Noyes (2017) for an example of how LSP has been used within Occupational Therapy education.

It has been argued [see for example Zafran (2020)] that the “active ingredients” of Mezirow’s transformative learning theory (Taylor 2008) are the experiential and

meaning oriented aspects of it. Mezirow goes a little bit further than the constructivists in that he assumes that adults change the way we interpret our world as our frames of reference are challenged. For a change of perspective to occur, a period of uncertainty, a stepping into the unknown needs to be facilitated.

A dualistic understanding of the mind and body is rejected – as phenomenologist Merleau-Ponty (1908-1961) pointed out, learning happens through the transaction between our selves, what we are doing and in what context, through the lived body – embodied knowledge gained from the perception of an encounter with the world. For me, this resonates with the Person-Environment-Occupation model of Occupational Performance (Law et al 1996), a common conceptual model of practice in Occupational Therapy.

Learning is both transformative and emancipatory in the Freireian sense (Freire 1972) when it is consciousness raising and allows learners to use knowledge for their own active efforts, hence Paulo Freire’s ideas have been influential in the development of participatory, community based and collaborative research methods such as participatory action research (Lilyea 2015).

Practice as Research

This practice-based research, draws on the well-established epistemology of *practice as research* Barrett & Bolt, (2014). That arises from the fields of Art and Design. It is an embodied enquiry, in which the acts of a maker engaged in a creative process of making is seen as research *in itself*, without the need for translation into another form (Frayling, 1993; Gaver, 2012; Nelson, 2006, 2013). (Candy & Edmonds, 2018) contend that within practice-based research,

“research questions arise from the process of practice, the answers to which are directed toward enlightening and enhancing practice.” (Candy & Edmonds, 2018, p. 63)

And that often the only way to generate new knowledge about practice that informs practice may only be obtainable by adopting a practice-based approach.

An example of this way of thinking is Lucy Lyons, a medical artist, who uses drawing to offer insight into under-appreciated aspects of our lives. For example, her work on the stigmatised object of the Rollator walking frame, offers new insights through the process of drawing (Lyons, 2013) , which Lyons calls *delineation*.

Practice as research also concerns the ability of the artefact-that-is-made to connect. This is explored by Wallace et al., (2013) which involved the collaborative making of digital jewellery with people living with dementia. The jewellery artefact-that-is-made was found to act as a bridge between the inner self and the outer world, a memory of the making context and as a focus for both reflection and comfort.

Frayling, (1993) discusses the problems faced by the art and design disciplines that arise out of the way government funds higher education and looks at the history and definitions of “ research” both with a big R and a small r” in the quest to establish what counts as research in the academy. He discusses three types: Research *into* art and design, research *through* art and design and research *for* art and design, and ends by stating that what constitutes research in art and design

“needs a great deal of further research” (Frayling, 1993, p. 5).

Furthermore, Gaver, (2012) contributes to this evolving understanding of research through design, by discussing its role in the field of human-computer interaction.

Occupational Therapy

Attention to *making* resonates for me with the area of concern of occupational therapists and occupational scientists, who see people as occupational beings (Wilcock, 1999) who can influence the state of their own health through engaging in meaningful or purposeful occupations (Reilly, 1962). So as both a maker and an occupational therapist I am attending to “doing” i.e. what can be learned through a making practice. And here I am also linking what is *learned* through *making to healing* – a link that has been made by Digital storytelling practitioners, for example (Hardy & Sumner, 2017).

The catalyst for my creativity is collaboration. Making that I try to do on my own never seems to amount to anything, but I come alive when I am collaborating with others. According to occupational scientist Anne Willcock, the core concepts of occupation are doing, being, becoming and belonging (Hitch, Pépin, & Stagnitti, 2014) this recognises that the things we do are connected with our evolving identity. Belonging relates to connectedness to people, places, cultures, communities and times. Media studies theorist Gauntlett, (2018) offers that making *is* connecting, not only because making often involves a social dimension, but also because

“through making things and sharing them in the world, we increase our engagement and connection with our social and physical environments”
(Gauntlett, 2018, p. 10)

An insight that resonates for me with Willcock’s ideas (Hitch et al 2014).

Anthropology and design anthropology

Anthropologist Ingold (2013) describes “Knowing from the inside” (Ingold 2013 p5). For Ingold, the only way one can really know things is through a process of self-discovery – that is, experientially. In this way, to understand making is to engage in a process whereby the maker grows into the making and lets the making grow into them, so that making becomes a part of the very essence of who a person is. (Ingold 2013).

Levick-Parkin (2018) studied the craft practices of women. She describes design anthropology as being concerned with a persons engagement with crafting and re-shaping materials, systems of experiences which can allow for co-creative methods.

In the light of the above, the aims of my research are re-visited below:

The aims of the research

This practice-based research study seeks to:

- To develop an understanding of both explicit and tacit aspects of a facilitated personal storytelling process with a focus on using digital storytelling and/or stop-motion animation to present personal narratives.
- To understand fully the forms of digital storytelling and stop-motion animation and to ascertain whether these might contribute to storytelling in different ways.
- To explore the different ways facilitation happens and its impact on the works and on the storyteller.

Methods

My practice is film-making, and I am using this practice to 'know from the inside' (Ingold, 2013). This has facets of auto-ethnography but should not be mistaken for auto ethnography, as it concerns the generation of insights and knowledge *through making*. My methods are therefore the *making of the media* and *systematic reflections* of this making. The practice submission USB stick and accompanying photobook, document these two forms of data – i.e. the digital artefacts and my reflections on these. My practice also reflects three categories of collaborative making. These are:

a) Making together when someone else frames it

Part one of the photobook and folder one of the USB stick includes media made by *attending* media making workshops with Pilgrim Projects (Hardy & Sumner, 2011) and on the Re-animation approach (Mason, 2011) I am taking part in activities that have been framed by others.

This relates to the aim of my enquiry to understand fully the forms of digital storytelling and stop-motion animation and to ascertain whether these might contribute to storytelling in different ways.

b) Inviting others to make with me – I am doing the framing

As a facilitator I invited people to make media with me, in this work my position is that of facilitator rather than maker. This 2 day workshop is the study for which I gained ethical approval in March 2018. It is presented below and also in part two of the photobook and folder two of the USB stick. Based on this making I engage with others in a process to enable and support *their* making. Again this sits within a broader participatory approach and offers another way to reflect on the process and understand my experiences in the context of others. This relates to the following aims of my enquiry:

- To develop an understanding of both explicit and tacit aspects of a facilitated personal storytelling process with a focus on using digital storytelling and/or stop-motion animation to present personal narratives.
- To explore the different ways facilitation happens and its impact on the works and on the storyteller

c) We make our own frame

The USB stick and photobook include, in part three, my reflections on working with two other PhD students – Sarah (Smizz) Smith and Debbie Michaels. This work arose out of relationship and creative dialogue about the synergies to be found between our individual making practices. The work presented is a response to this. The learning from these practices is compared and contrasted with the learning from the DST work and illuminates many aspect of the aims of this enquiry, particularly those connected with the effect of facilitation on DST.

The value of practical wisdom and the single case study as method

Also influential in my methods is to recognise the value of generating knowledge which is situated both temporally and geographically. Bent Flyvbjerg's work on the value of the case study as a qualitative research method, is illustrated by his analysis of the

reasons why the mega project to construct the channel tunnel went over budget. (Flyvbjerg, 2011). Flyvbjerg contends that in the current climate, case study as a methodology is held in low regard or is simply ignored, as is *phronetic social science* which is concerned with practical wisdom (Flyvbjerg, Landman, & Schram, 2012).

Occupational Therapy activity analysis as method

My consideration of the history of occupational therapy in the contextual review section of this thesis lead me to re-consider the place of activity analysis in the academic and theoretical discourse of the discipline. Activity analysis plays a vital, if largely unacknowledged, role in the daily practice of occupational therapy. It enables occupational therapists to understand the sequence, process and demands of an activity and to adapt and grade the activity so that engaging in it will require just the right level of challenge for a patient. (Thomas, 2015, AOTA, 2014). I wanted to discover if activity analysis had anything to offer a research process, and therefore included it in part two of my enquiry as discussed below.

I speculated that an activity analysis would provide a thorough description of the process of the two day digital storytelling workshop, and it would offer a structured way of capturing the sequence and pattern of events that made up the workshop. An Occupation-based activity analysis as conceptualised by Thomas, 2015) could potentially help unpack how each participant *experienced* that specific workshop and what it meant to them. The aim was to explore the potential of activity analysis and occupation-based activity analysis (as conceptualised by Thomas, 2015) to act as data capture tool and data analysis tool respectively, within a research process.

Reflexivity

Reflexivity involves paying attention to the ways in which I, the researcher and intersubjective elements effect and transform research (Finlay, 2002). Furthermore, it recognises that research is a joint endeavour and the result of the relationship between myself and my participants. Finlay (2002) offers *intersubjective reflection* as one of 4 types of reflexivity. Intersubjective reflection attends to the mutual meaning emerging within the research relationship and how this is situated and negotiated. *Reflexivity as social critique* offered by Finlay is concerned with attending to the ways in which differing power relationships between the researcher and those being researched plays out.

In the spirit of reflexivity, and in keeping with my standpoint, I intended, in part two of my enquiry to focus not on analysing the content and subject of the media made in the workshop. Rather I was seeking to understand the experience for participants by asking them about what they have made and what the process of making was for them at key points. In practice, it was not easy to separate the process of making from the content of what was being made. This will be considered further in the discussion chapter.

In my approach to analysing the data generated from the workshop, I aimed to articulate the attributes of the process of media making using the Occupational Therapy core skill of Activity analysis. This is a method of analysis commonly used by Occupational Therapy to understand meaningful activity and the skills required to carry out that activity. Activity analysis is not generally framed as research within the occupational therapy profession.

I now present in detail part two of my enquiry, which comprised of a two day DST workshop.

Part two of my enquiry: Two day digital storytelling workshop

Ethics and governance

The site file for this study can be found on the USB stick in folder two. Ethical approval was gained in March 2018 via the ethics committee of Sheffield Hallam University's Faculty of Science, Technology and Arts.

Recruitment strategy

The target population was individuals who expressed an interest in making personal stories. The aim was to find a homogeneous sample, in that participants would have some sort of shared experience, and it was not thought necessary to recruit from a so called "vulnerable" group. As the focus of the research is on the nature and form of the making practice, not the subject of the stories that could potentially be made.

I had a number of networks I could have utilise to recruit participants, for example:

- People attending the ArtHouse social enterprise which is a community arts organisation in the centre of Sheffield which runs creative classes in Art and Ceramics
- Health and social care students
- A faith based co-hort from my Christian networks
- A cohort already involved with an existing research project run by my director of studies

It was decided that I would recruit 3 women from my church networks to be invited to the workshop. Individuals were purposefully selected and the people approached were individuals who the author thought would be interested and enjoy taking part in the workshop. The recruitment strategy was informed by a desire to give people an opportunity who were less well known to me who did not necessarily put themselves and their views forward readily when part of a group.

In the event I recruited a man and a woman, both in their 30s. A third person initially consented and then had to drop out of the study due to work commitments.

It was more difficult than I anticipated to recruit, and this was largely because people who are not from a so called “vulnerable group” are often busy with many demands on their time. Participants were asked to commit to two interviews and an intense 2 day workshop with the option of an overnight stay, and this is a large commitment, so I am grateful to my participants that they were able to afford the time to take part.

As I had known the participants for 3-4 years, it was not necessary to provide an introductory event, so this part of the primary study was conducted before and during the base line interview by email and in formal face to face contact.

Phase 1

Face to face and email contact, to gain informed consent took place following ethical approval. The site file for this study, including the participant information and signed consent forms and the record of the ethics approval as well as all the data can be found in folder two of the USB stick.

Informed consent involved a discussion about the structure of the workshop, confidentiality and anonymity and consent around usage and sharing of the media created.

As set out in the participant information sheet, the participants had the option to be known by their real name and acknowledged as author of their digital story or to remain anonymous. Mark (his real name) and Tallulah (not her real name) both consented to their photographs to be taken and included in the thesis. Tallulah elected to use the pseudonym of her choice within the thesis and in the media she produced.

A 1:1 informal interview was conducted with each participant. The purpose of this was to develop rapport and trust and find out what their level of confidence was with technology and creative practice. I invited each participant to tell me what they hoped to get out of the workshop and discuss initial ideas for the story they would like to tell. I invited them to prepare for the workshop so that they were ready to share their

initial ideas early at the workshop. The consent form was completed and signed at the interview.

I carefully chose existing digital stories as examples of what might be feasible for the participant to make during the workshop. I was careful to avoid emotive personal stories as I did not want to raise an expectation that my participants were to make themselves more vulnerable than they might have felt comfortable doing.

Data collection: I made some notes as a record of these interviews and also take a photographic portrait of the participant.

Phase 2: 2 day workshop/media making event

The intensive 2 day workshop was re-scheduled twice, once at the request of one of the participants and once due to a family emergency of my own. It took place on 26th and 27th October 2018 in my own home and comprised of: an orientation; the chance to test out different media making methods; storyboarding and story development. It followed the principles of “classic” DST (Lambert & Hessler, 2018), although much of the content of the 7 steps lecture was introduced at phase 1 rather than taking up time in the workshop. Instead, our time began with a period of sung Christian worship and prayer, this is a familiar practice in my faith community, and it offered the same function of allowing participants time to arrive and mentally orientate that the 7 steps lecture would have done. Both participants elected to stay over night. Tallulah’s husband joined us for the first evening and second day at her request. The husband (Eric) also signed a consent form and read the participant information sheet, although he did not make a story himself, he did contribute ideas and performed music for the stories. In keeping with the principles of “classic” DST, A celebratory showcase at the end of the two days provided the opportunity for participants to share the film they have made within the group and reflect on the process.

Data collection strategy:

These were the forms of data that I anticipated would be collected at the 2 day workshop:

- The films themselves that participants would make
- I would be asking the participants for their reflections on their creative process (what they are making and why) at key points within the two days. These conversations were to be audio recorded.
- I would audio record my own reflections at key points within the two days.
- I would set up an unobtrusive fixed camera (e.g. a go-pro) in the room where the workshops will take place which will record the entire two days as a timelapse.
- I would take still photographs at key points during the workshop

I recorded less in the way of reflections during the workshop than I anticipated however I did have several conversations with one or both of the participants which I recorded. These recordings were transcribed by my support worker, who's name is Rachel. Timelapse footage of the entire workshop was recorded on three different cameras to capture the main areas of the house.

Phase 3: Post production

Following the workshop, I remained in frequent contact with each participant for a period of several months. This happened naturally as part of the on-going relationship I have with my participants as we are part of the same faith community. I also met with each of them individually during this time to finish off the editing of the films.

This contact time also gave participants the chance to de-brief and process what can often be an intense experience - to help the person integrate anything that occurred for them during the workshop.

Mark was happy for his finished story to be uploaded to a video sharing site (unlisted). Tallulah elected to store her story on a flash drive and it does not exist on any video sharing site.

Phase 4: 3 month follow up

A 1:1 individual follow up interview was planned for 3 months following the de-brief and post production period.

The follow up interviews were completed in May 2019, 7 months after the workshop. This was due to my own time constraints and the need to have transcribed the recordings and make the media which was to support the follow up interviews.

The interview was a conversation to build understanding of what the process has meant for that individual, how they felt about the film they made and who they have shown it to, as well as if they intend to make any more films themselves. It was audio recorded.

I made a personal reflective film about the workshop from my point of view, which included photographs taken at the workshop. This was shown to each participant at the end of the interview and was about closure and acknowledging and celebrating the experience.

I intended to take a second photographic portrait of the participant at this interview. I did this with Mark but not for Tallulah.

Data analysis methods

The follow up interviews were considered alongside all the media that was generated by the workshop. I also partially conducted an activity analysis, to further inform the data using the framework provided by the Occupation-based activity analysis developed by (Thomas, 2015). The choice of activity analysis format was informed by a scoping review of Occupational Therapy texts. (see Appendix at the end of this thesis) and this informed the choice of Thomas (2015). Its was chosen as it was the most fully articulated and detailed consideration of activity analysis found and it was based on a key text, AOTA (2014), the Occupational therapy practice framework: Domain and process (3rd edition) which aligns itself with the International classification of functioning, disability and health (ICF) (World Health Organisation, 2001)

To aid the process of data analysis, I considered each storyteller/participant in turn, and arranged the data in three themes for each participant. The aim of this was not to compare the data generated by each participant, rather to understand and illuminate each individual's experience.

I intended to complete two Occupation-Based Activity analyses using this resource – one for each participant. Each analysis would have included the complete sequence and timing of the whole workshop as well as the object, space and social demands. A different small section of the workshop was chosen for each participant to define the required body functions, structures, actions and performance skills.

Findings

A critical commentary of pieces from part one and three of this enquiry can be found in the USB stick and accompanying photobook.

Findings from part two

The rest of this chapter mainly concerns the findings from part two of this enquiry, the formal research study of the digital storytelling workshop. This comprised of a single two day digital story workshop, facilitated by myself, which took place on 26th and 27th October 2018 at my home. Two people made stories, Mark (his real name) and Tallulah (pseudonym).

Who else was there?

Eric (Tallulah's husband – not his real name)

Tallulah asked in advance if Eric could join the workshop, he arrived as we were finishing the first day. He took part in the evening workshop discussion and supported both storytellers on the second day of the workshop. He played guitar on Marks soundtrack. He helped Tallulah with the editing and recording of video footage.

Rog

My husband Rog was present for the storycircle and discussions. He did the recording and sound engineering for both storytellers and supported Mark with editing his sequence on the final day.

Flo

My 16 year old daughter Flo was present in the house while we were conducting the workshop. She ate with us and helped with the hospitality. She was aware of the timelapse cameras in the house and can sometimes be seen in this footage, as well as in some of the photos. She did not contribute to any discussions, but she consented to

be a part of the workshop and also agreed to feature in several aspects of my DST work over the years. In the light of this, she completed a consent form.

How the data analysis was carried out

Data analysis was an iterative process of reviewing the following data:

- transcripts of the conversations which took place during the workshop- alongside the original recordings
- Transcripts of the follow up interviews alongside the original recordings
- The timelapse footage of the workshop
- Photographs of the workshop
- Fieldnotes made at the time of the workshop
- The 3 digital stories: “Faith is a Journey” and “The dream” made during the workshop and “frames” made just before the follow-up interviews.

Using this data I made a detailed schema of the sequence of the two day workshop for each participant, and the schema plus the other data informed an occupation-based activity analysis.

As I reviewed each transcript I made reflective notes as annotations – relating what the participant was saying with other data, I also added context to help the reader, recognising that my participants know me as an insider – they are talking with me in the interviews as someone who is part of the same faith community and so my participants talk to me using the shorthand of our shared knowledge and culture.

On reflection, It was impossible for me, in the process of analysing the data, not to view my participants as whole people who I know and are part of my community and to think about the content of their story and its place in the context of my knowledge of their life. The follow up interviews are conversations rather than interviews, conversations between people who have journeyed through time and had many conversations and been part of shared activities, who are part of a shared culture. As I reviewed the interviews, it became clear that it was impossible for me to consider this data outside of the context in which I know these participants. That being said, I have

been as reflexive about it as I could, and some of my reflections are presented at the end of the findings chapter.

I present below a summary of key results of my analysis for each of the two storytellers. In order to preserve the integrity of the data, I have presented the interview data as selected long quotes, with contextual notes. The transcriptions of the interviews and all the other data are to be found in the USB stick folder two which accompanies the photobook.

Tallulah.

Tallulahs digital story

Tallulah made a film about a time in her teenage years where Jesus came to her in a dream. By the end of the storycircle her script was pretty much fully formed. She used her own black and white pencil drawings to illustrate her story, which she sat on the sofa and made during the workshop.

She recorded her own music, playing the piano and singing a piece of improvisation which she composed. She directed our sound engineer Rog to apply vocal effects to create a soundscape, to evoke the feeling of the heavenly music she had heard in the dream.

The film ends with a long video sequence – which takes up about half of the entire 3 and half minutes of Tallulah adding colour to one of the drawings. This was filmed during the workshop by Tallulahs husband Eric, on his smart phone.

Below I present selected extracts from the data concerning Tallulah, presented in three themes: “Time”, “Cringe” and “Creative with others”.

Time

One of the major themes of Tallulahs follow up interview was Time. The word “time” is used 21 times in this interview. Tallulahs film is about a specific moment in time – a time in her childhood when she experienced a vivid and memorable dream.

The story is about the first *time* she ever really experienced love (para 64 from follow up interview).

“I think [when] I watch the film, like I can see it’s like a past memory, but it’s almost like because I made it now, the age I am now... .. And I couldn’t have created those things when I was that age, when I had the dream, because I wasn’t that person at that age. And it’s like, almost the person I’ve become with walking that journey with Jesus along the way, that’s enabled me to create a video with like the music and stuff and the art. Kinda like a positive thing, ending. So, it feels like a mix of a timeline. It was about a story in an isolated timeline, but when I look at the video it’s not just about that isolated timeline, its about the whole, it brings in the whole thing to make it about the present and the past. “ (Para 14 from follow up interview)

For Tallulah the film acts as an aid to remembering an event from the past in the present – in the context of the life journey she has been on between then and now. That is what she is meaning by “it feels like a mix of a timeline”

She liked the drawings she made for the film, but she would have liked to have spent more *time* on them, to make them more polished than they were. (para 34 from follow up interview)

What she valued about the experience of the workshop was the *time* and attention placed on her – something she was not necessarily used to having.

“And I guess there was a thing, so saying I’m a person that feels uncomfortable having the spotlight on me, but there was a nice thing about it. This is all about me and Mark, where we get to have more *time* on us. So, I think in group dynamics, its not natural for me to be the first person to speak. I think I will speak actually, when I do open up. And I think Mark is the same. When he opens up, he’ll speak a lot. But, I kind of always have a tendency to let someone else speak first, or its just the natural go to. So, it was quite nice to have that space..” (Para 90 from follow up interview)

She valued the space and *time* that a group of people that she knows and trusts put aside to listen to her and to support her, even though that is not always comfortable.

She also talked about the way in which setting aside this *time* enables the creative process – and this is something that is needed - other peoples encouragement - to enable this attention - this value -as she would not have valued herself enough on her own to spend all this *time* on herself and her own process.

“When you commit to do something with other people it makes it so much easier to do, if you know what I mean? Because you’re like, well we’ve set this *time* aside, this is what we’re doing with this *time*. It’s like what you were saying about value, like we valued our selves - our own stories because the space was created for us to do that. I think on my own I would struggle to, even though I would have enough *time* to do it, I think I would struggle to create the discipline and the value for myself.” (para 119 from follow up interview)

Tallulah is valuing the encouragement to invest in her self, to value herself and her process that the workshop afforded.

“Just the supportiveness was good, the sharing. We had a lot of *time*. I mean it was kind of rushed in some ways, but we still had a lot of *time*” (para 97 from follow up interview)

Conversely, the workshop was rushed – there was a lot of *time* focused on her, but there was a lot to do in that *time*.

“And, I think one of the other things I found quite....hard, was that I did feel under a sense of *time* pressure. Like with the drawings especially, I think I wanted to make them better, and I knew I only had a limited amount of *time*. So, that felt a bit frustrating to me. Also, like, I can be a little bit perfectionist about things. If I was gonna be a perfectionist I would have wanted to do the narration over again until I felt it was.. like... perfect enough. So, we didn’t kind of have that *time* to do those things. “ (para 101 from follow up interview)

Cringe

Tallulah uses the word “cringe” 15 times during the follow up interview. Tallulah uses this word to denote the uncomfortableness for her of watching back her film.

“I actually haven’t watched..... I haven’t watched it in ages. I think probably about two or three, [times she has watched it] so not a lot. And partly because I think there’s something in me that finds it a little bit ‘*cringe*’ [embarrassed laugh], watching a video I’ve made about something – that’s a story.... There is something about it that I find a little bit *cringe*. So, I think that’s probably the main reason [that she has not watched it]” (para 3 from follow up interview)

She had not showed it to anyone else – also because of “cringe”

“I thought I would want to show it to people, but I think there is an element of ‘*cringe*’ there which makes it uncomfortable. And I don’t think I’m naturally a person that likes to... it’s not a comfortable thing to....., it feels very personal. So, it doesn’t feel that comfortable. It’s quite a vulnerable film, I think. So, part of that is.... the reason” (para 10 from follow up interview)

I thought at first that Tallulah was expressing antithesis to the film she had made, in its entirety – but this reveals to me that it is the *vulnerability* that is “cringe” she is not comfortable with exposing herself in the way that showing the film would do, and that is why she has kept it private.

Creative with others

Tallulah is a creative person. She said during the interview that creative expression she would “just call it processing” and when she needs to process she may express this using her music or by painting or she will “just write – write it down” (para 18 from follow up interview) and although she found it uncomfortable to watch her digital story back, she did demonstrate that she valued the process and the opportunity to make a digital story, both during the workshop and at the follow up interview. What she also valued was the opportunity to spend time with people she knows as part of

the faith community and going deeper with those people. Its not “other people” but “the other people”

“I thought I was good. The combination of people was good. It felt like both Mark and I had space. Enough space to talk, and to have questions about what we shared.” (Para 3 from workshop group discussion transcripts)

“I think I really liked the idea of being given that space to be able to process something to do with me. That feels like a bit of a contradiction but... and to be able to think more deeply about an area of my life and faith as well, which is really important/significant to me. And, because I’m really *creative*, I like the idea that it was really *creative*. I get to make a video, I’ve never done that before. So, I get to learn new things about that which was really good. And, I think like that idea that I was doing it with *the other people* as well. Like, it seemed quite an interesting deep process of exploring a story. It’s something you don’t get to do every day.” (para 16 from follow up interview)

“And it’s very easy, it’s a really simple technique. And its really interesting that Its like something that wasn’t very, it was encouraging because it can make something look quite good that’s maybe not that good by itself.” (Para 3 from workshop group discussion transcripts)

The effect of being facilitated and the impact of others on her creative process she commented on during the workshop when she and I were having a conversation on the sofa in the late morning of the second day.

“I think if I did it all my own way, I have like self-doubt. Or I’d not be sure. But I’ve not done video techniques before so it’s kind of helpful to have someone else say I think you should do it this way, because at the end of it. It doesn’t feel like 100% my responsibility. I can just be like ‘oh well’. I guess, hold it a little bit lighter, that its doesn’t have to be so kind of perfect video.....If we were completely left to our own devices it would probably feel pretty scary or overwhelming. With creative stuff, if you don’t have a framework, if you don’t have a structure, you can just end up like a big mess”. (Para 31 and 35 Workshop group discussions)

Eric commented over lunch on the second day of the workshop:

“I think it’s the fact that you have more people around you can almost make progress quicker because other people can remind you that there are other things we need to do as well, to get it all together at the end. To make a film by the end of the day” (para 69 worship group discussions) .

The aspect of the film that Tallulah feels most comfortable with was the making of the music, and that was because of the ease of working with Rog – whom she knows and

trusts. He has a lot of really good mics and equipment for recording music and he is a skilled sound engineer:

“But I think actually the best part of the workshop for me was getting to record some of my music in that context. It was so much, I love that kind of thing, it was so much fun. And it was super easy for me because Rog is so good at what he does. I didn’t have to try and figure anything out myself, I just sang. Then, it turned out really good. [laughs] So that was probably the most enjoyable thing” (para 99 from follow up interview)

This highlights that one of Tallulah’s most important forms of creative expression is her music and she is expressing appreciation of this expertise being at her disposal.

The timelapse footage on the Saturday shows Tallulahs concentration in the intense final few hours in the afternoon as we are putting the sequence together. We are working from 3.30 until about 6pm, to put the sequence together in video editing software. Eric is sat with us and actively making suggestions also from 4pm.

There is a time when Tallulah stands to stretch, (see figure 1). The sense of purpose, and the ownership of what is being made, and that the process means something, is evident in her body language. After this, as the film comes together in the edit, Eric puts his arm over her shoulder. Protectively? Proudly? Aware of the emotional cost of it? And then you see Tallulah returning this intimacy and Eric puts his head on her shoulder.



Figure 1: Still from the timelapse footage Saturday around 4pm.

At the end of the workshop Tallulah acknowledges both the emotional cost and how sharing the emotional cost with others helps.

“I was saying it has been good doing it with other people, all doing it together. And technically it’s been really helpful. Emotionally it felt good to process it with other people. But also, it has been very taxing on my body. I’ve felt a lot of body pain, exhaustion, partly to do with just going through the process..... but it’s not literally conscious, so I’m not sat here crying or reacting emotionally, but I think sometimes when it is emotional it can affect your body, and it doesn’t affect your emotions.” (para 119 workshop group discussion)

Mark

Mark made a film about his entire faith journey since childhood in broad brush. He uses family pictures to convey the centrality that faith has had in his life and the importance of family and community to him. He expresses the thankfulness he feels to have been brought up in a Christian household. The story is a mix of visual styles and includes a piece of stop motion animation he made during the workshop, and video of a candle burning in the darkness. The story ends with a series of words which emphasise the themes of the video. For the soundtrack, he performs the song “bright eyes” on flute, accompanied by Eric on guitar.

Below I present selected extracts from the data concerning Mark, presented in three themes: “Doing it with other people”, “what it looks like and stuff” and “all the elements”

Doing it with other people

One of the major themes of Marks follow up interview was the value he placed on the DST workshop as an out-working of his calling to community life. The workshop entailed spending time with other members of his faith community. The time spent with these people was more significant to Mark than what we were actually making. Although Mark enjoyed the novelty of the DST process, what he valued about it over and above making a digital story was the time spent with others and the opportunity to serve these people as well as receive from the experience.

“Yeah, listening to each *other*, it’s an important part of the process isn’t it? When I’ve been able to respond to something someone’s got and pull out those threads and those things that are maybe in the story that need highlighting.” (para 19 Workshop group discussions)

“It’s been a really nice journey of collaborating, it resonates with the journey I’ve been on the last couple of years in terms of *community* and elements of that”. (para 52 workshop group discussions)

“Yeah, it really feels like the last 4 years of doing *community* has been a collaboration and learning to let go of control of what I have, and actually be more spontaneous and be a little bit more free in it. So, I feel like in this process I’m able to do that. I don’t feel like it all has to be in my hands, but that I can actually let *everyone else* be involved It’s been a real freeing space for me rather than it’s got to be this and its gotta be that. So, the control element for me, God has definitely took me on a journey in that.....” (para 71 workshop group discussions)

“I enjoyed the process because it was *doing it with other people*. Other people who maybe had those other giftings. I really enjoyed the input. I really enjoyed the *collaboration*. So, I think it does, it reminds me of that incredible process and that *time together*” (para 40 follow up interview)

Mark talked about other people a lot during his interview. For example Tallulah is mentioned 25 times. This reflects his concern for others and the value he placed on doing the Digital story with others and what they brought to the process

“So, it’s been nice to do that I suppose, because I also chatted to Tallulah. It was a month or two after the thing and we kept asking each other ‘have you shown anyone?’” (Para 16 follow up interview)

“Yes and it has come into lots of conversations. Actually, last week, so Tallulah and Eric were there at the [a faith Community members] house doing worship and were asking holy spirit in the process of something he could show us. And Eric was in the room, he remembered the digital workshop and he was like, oh maybe it would be good for you to go back to the first time where you gave your life to Jesus and when you got baptised, because he’d seen the film and that first editing process. And it was really good, because its kind of opened that up.....” (para 22 follow up interview)

“I enjoyed the process because it was doing it with other people. Other people who maybe had those other giftings. I really enjoyed the input. I really enjoyed the collaboration. So, I think it does, it reminds me of that incredible process and that time together and then actually, what the end product is. So even though that’s amazing, I think the process is equally as important to me.” (para 40 follow up interview)

“For me, it [DST] was new but the best part was *doing it with the people I did it with*. So, when you asked me and you asked Tallulah I was already in a place of, well this *feels like family*, it feels like a safe place. I can do this journey. So actually, Tallulah being there and Eric coming in for some of it and having you and Rog. I think that’s what really made it for me. Even those times, even sharing food together, the whole day you’ve got all these elements what goes on in the day. You know, we started off with a bit of prayer that morning So yeah, having the people there, and then learning something new in that space really made the actual workshop for me.” (para 65 follow up interview)

Mark reflects on the animation activity we did as a warm up on the first day of the workshop, and what he highlights about it is the collaborative nature of the activity.

“I look at it and I still remember learning the process. When me and Tallulah kinda did the first one together and kind of brought our bits together.” (para 47 follow up interview)

The activity analysis of the stopmotion warm up underlines this point. Mark can be observed responding to Tallulah’s contributions in the way he is animating – the colours he chooses and the way in which he lets her take the lead. Each time Mark draws or moves or places something on the paper, he is responding and mirroring something that Tallulah has done.

And below he is reflecting on his own emotional responses as well as being attentive to Tallulah’s

“I reflect on watching mine back, and Tallulah’s, and actually that emotional side where it linked into family or something that had happened. I’m one of those people that’s quite happy to be creative and sit in my own space and be contemplative in a room by myself. At the same time, I absolutely loved the process [of the workshop]. Maybe more on the emotional side because I read emotion in people quite well, so even in the process I would have picked up the emotion of what was going off with Tallulah, as I was also creating my own film.” (para 72 follow up interview)

Mark is indicating here is concern and value for the people involved in the workshop, as well as his own creative practice.

What that looks like and stuff

Mark used the film as a shorthand to communicate what was going on with him in his internal world, and to explain what the lifestyle of prayer and worship he has adopted actually is. – literally “*what that looks like*” What it looks like is represented in the film by the trope of footprints and the trope of the candle in the darkness, but mostly by the words used by Mark in the digital story, which are emphasised by the fact that they feature both as printed text on the screen and in the narration.

“But yeah, I think for me it has been really nice to look back at it and for people that have seen it, they’ve kind of seen just a little bit more into my inner world

and maybe understand what I do with my time and *stuff* like that. Because it's very easy to say I'm doing prayer and worship right now, you know, but *what actually does that look like* and what has your journey been". (para 4 follow up interview)

"I wouldn't be doing a lot of the prayer *stuff* I'm doing now without my Dad" (para 84 follow up interview)

"Because I'm doing a lot of prayer room *stuff* and Burn *stuff*, and my brother doesn't quite understand or maybe ask questions about it" (para 8 follow up interview)

"God's been doing a lot of healing in the process and in the prayer room and *stuff* like that. So, yeah, I think it's opened up a lot of conversation and it's been nice to share that. Because if you're introverted sometimes it can feel quite private, So, it's been nice to do that..." (para 16 follow up interview)

"There is a vulnerability to it, about sharing your journey, and putting *stuff* out there" (para 72 follow up interview)

At the workshop I was aware that Mark had brought along personal photographs of his family. With this in mind I encouraged him gently to talk about his Mum, in the safe space of the storycircle who I knew prior to the workshop died during his late teens. I worked with him on ways in which he could incorporate or not incorporate this into his story.

Mark discloses in his Digital Story that God has carried him through hard times, and that his mum "passed away". This happens during the final sequence, and is done by putting the disclosure as text over the background of the candle (figure 2)



Figure 2: Still from Marks Digital Story entitled *faith is a journey*

In the follow up interview I asked Mark if he had shown it to anyone who had commented on the disclosure in it or asked any more about his mum, given that there are pictures of her in his story. For Mark, the central importance of his family and the impact they have had on his life journey are themes he conveyed strongly in the narrative of his story, yet the emotion of grief associated with the loss of his mum is held in the story symbolically, in the candle video and also the sound of the flute, and people who perhaps knew him less well, might easily miss that this life event occurred.

“Yeah, I think the biggest person was [close personal friend]. To have seen that and you know, even just see a picture of my Mum. He has met my Dad and had so many chats with him. So, I think he probably spotted that more. I think, again, most people that I’ve shared it withprobably have known me quite well and [know] that I’m quite a big family person anyway. So, I don’t think any elements really shocked them of that. I think they’ve understood that. In terms of doing community, I think there is that understanding of what family *looks like*. But not many people picked up on [it]. They picked up on the emotion of the sound. Obviously, people love the sound of the flute. But for me there was that process of just sharing it in that small move in the film. It was definitely emotional for me. But I feel that sense of family, what that represents. But I don’t know if there’s more of a story in me where it would be nice to share

maybe more. More about Mum. And *what that's looked like* and the journey that God's took us all on as a family. Because I had pictures of my brother and my sister and my Dad. So, it just felt nice to even have that element in." (para 84 follow up interview)

It is interesting to reflect that despite the importance of family in his life, he did not choose to share his finished digital story with his family.

During the workshop Mark also reflected that the words he uses in the digital story are insider words, and he speculates on if they would make sense to anyone not familiar with Christianity.

"Yeah, in terms of an audience, I feel like I can share this with a wide amount of people and somewhere in the process as well in terms of the language and how I did it, what audience would it reach? Would secular people be able to understand it? I feel like there is a simplicity to it as well where people would be able to catch the heart of it, even if they didn't understand the entirety of the wording, that they would still be able to understand part of the journey that I've been on. Because I always have this thing where like 'oh, so you're doing this house of prayer, so what's a house of prayer? Do you just pray in a house?'. And it just gives you a little bit more of a reflection of *what my life looks like*, as opposed to 'what ARE you doing with your life?'. " (para 185 Workshop group discussions)

At the follow up interview however, it is apparent that he did not show the story as widely as he expected to.

Mark reflects on a time when he showed his story to a group of Christians he did not know well, in the context of a bible study small group and thinking about the Christian journey:

"When we were talking about the cost and sacrifice that comes with it, they could very clearly see because they knew my journey, they could very clearly see *what that looked like*" (para 12 follow up interview)

But Mark has mainly watched his story on his own – over the 7 months between the workshop and the follow up interview he viewed it 20 times, so the shorthand of the DST acted as a point of clarity for Mark and helped him think about the purpose of his current "lifestyle of worship and prayer" and citing synergies with fasting, he sees contemplating on his digital story and re-watching it as a form of spiritual practice.

“I think its been good and I think the seven months has just been an ongoing process of *what does it look like*. But I think clarity is a big word. It’s almost like it gave me a visual thing that I could look at. Like sometimes when you do scheduling and you just need to get a whiteboard and get a visual thing to actually understand more or link things together.So yeah, I guessit’s brought me to an even greater place of clarity, of specifically what God is asking me to do in this season. You know, what it’s gonna look like. Fasting we receive even more revelation as well.” (para 14 follow up interview)

So Mark has used the watching of his digital story both as a spiritual practice and also as a way of holding a memory in the artefact of the digital story, but he hasn’t used it as a piece of communication with others as much as he thought he was going to.

All the elements

In the follow up interview Mark reflects a lot on the form of a digital story as a collection of *elements* and how these come together in the edit. For Mark this perhaps could be seen as mysterious and surprising process.

“yeah, *all the elements* worked”I think those elements really brought it together.... , you know the process you’re going through, *the different elements*..... all the elements really came together..... I remember it being new and trying to work all the elements out” (paras from follow up interview)

Mark also brings into this consideration of the multimedia aspects of DST the effect of the time constraints. Here he is talking about the way time is simultaneously compressed and expanded in a DST workshop and time constraints are a big motivator to get something finished. Forced is a strong word and not one that he has used else where in his interview – but he qualifies this by saying this is forcing in a good way.:

“You’ve got this set amount of time, you’ve got this window in, so it really homed me in and forced me to bring those elements together in a really good way.” (para 70 follow up interview)

My reflections

Differences between my own first experience of DST and that of my participants.

Mark and Tallulah are both quite private and contemplative people who do not generally assert themselves in a group situation. And this is one of the reasons why I approached these individuals and invited them to take part. Of our faith community they are the people whose stories are less well known. They also are people who had the time, as taking part in a DST workshop is a big investment of time.

It was surprising to me to see how little they each chose to share what they had made with other people in the months following the workshop, and I think that is down to them just being very different people from me with different motivations.

It also speaks to the reason why they decided to take part in the workshop. This was a very different reason than the reason I got involved with digital storytelling. This is unpacked in the next section.

Degrees of agency

DST is not a form of self-expression that either of my participants would have chosen on their own. They took part because I asked them to.

I was *compelled* to get involved with digital storytelling, I asked to go on the first workshop I ever went on, therefore there is a greater degree of agency involved with my continued engagement with DST than with my participants. Will my participants go on to make more digital stories? They both said they would be open to it – *if the opportunity presented itself* – but would they seek out these opportunities? I don't think so – because Tallulah will prioritise other forms of creativity over DST. She is a musician and a singer, and it is this form that she will pursue, rather than making digital stories. The DST did give her encouragement in this direction, as Tallulah's music making was a strong feature of the story she made in the workshop.

Mark got a lot out of it, but it is obeying God through seeking opportunities to connect and to serve, this is what motivates him, and the form of this connection and service – it did not need to be DST. For example, he valued the meals we shared together as much as the activities of the workshop and it was the way the DST worked as a facilitator of engagement that he particularly valued.

This particular project to make digital stories sits within the wider project of doing life together as a Christian community. For Mark and Tallulah, although the DST process was novel and interesting to both of them, the activity itself acts as a conduit to deepen and enhance the existing relationships between members of a faith-based community. The DST workshop was a shared experience in the context of many shared experiences we have had together.

For me, the audience for the DST is as important as the process. For these workshop participants, the *process* was more important, and what the finished Digital story represented as a memory of that process. Other than this, the form of DST is not significant enough for my participants to continue to be drawn to – enough to go to the effort of making more stories.

So the distinction between my experience of DST and my participants experience is the reason why the stories are being made and the context in which a workshop occurs. That then shapes the meaning the story has in itself – separate from the meaning the DST as an artefact that comes from the memory of the process.

What I chose to show my storytellers

I purposefully did not show my participants the first story I made, the very emotive and disclosing story I made about suicide and bereavements – because I know that any digital stories that are shown to prospective storytellers have a great impact on the decisions they make in the workshop about their own stories. Instead, I wanted to create a safe space at my home for people to be vulnerable should they choose to.

What has also gone unsaid is the fact that I presented the opportunity to my participants as an opportunity to express something of their faith within the academy – the opportunity to express the meaning of a Christian way of life to academics and others who may not be familiar with Christian ways of thinking.

The form of the follow up interview/conversation

My reflections on Marks follow up interview are that the form of a verbal conversation did not allow him to elucidate, explain or expand on the themes of his digital story. The conversation remained “broad brush” A more carefully crafted set of words might have helped him get into more detail about what it meant to him, or perhaps to make a second digital story about the process of making the first one would help him to articulate this.

But Mark is working in DST within a skill set that has not included the kind of visual literacy that comes with an education in art and design. His story is attempting to convey some ephemeral aspects of a faith journey which is impossible to convey in words. However, he was limited in his ability to do this by his level of education in visual and multimodal literacy.

Thoughts about facilitation

I did create a positive experience for my participants which was for them an immersive, intense making process which had significance and meaning for the people who took part in it. The significance and meaning came out of the relationships, not necessarily DST in itself – DST did however, act as a conduit and facilitator of the relationships. I contend that it was attentiveness to the details and the needs of each individual during the process of the workshop and afterwards rather than the activity itself which was key to the reasons why it was a positive experience.

Watching the time-lapse footage of the workshop enabled me to observe the detail of my actions during the workshop. How I was constantly in motion, setting up spaces for particular activities and moving from one storyteller to the other, as well as communicating with the people helping, Rog and Eric. Attending to the detail of the experience for each individual, managing the hospitality and also collecting data at the same time. It was really enjoyable but absolutely exhausting, and if I was to do it again, I would have arranged more help. In particular, the 3 time-lapse cameras became somewhat neglected as we focused on the activities of the workshop, especially on the

second day, and a review of the time-lapse footage shows the missing data where the camera turned off due to its memory card being full.

Mark and Tallulah had a different response to my facilitation. Mark entered uncritically into the frame I created, with total trust - and everything I showed him and spoke to him about – all the techniques I taught him, made their way into his story in one form or another – like a mirror – reflecting back.

I was much more directive of Mark than I was of Tallulah, and that was because of the scope of what Mark was trying to do, to tell a very big story. On reflection I wonder if I could have used more strategies to help him focus his story on a particular event. It had been many months since the last time I had facilitated digital stories, and had I been more in the flow of this type of activity, I may have been able to be more affective in this regard. Lambert & Hessler, (2018) is full of techniques that I could have used, had I reviewed this text before the workshop. As I mention in the “frames” DST I made (see folder two of the USB stick and p30 of the photobook), October 2018 was a very busy time for me and just to have got the workshop done, in the context of everything else happening for me at the time, was an achievement.

With Tallulah, I was much more confident of the approach that could be adopted. As she spoke about her ideas in the storycircle, I had a very clear picture in my head of how her story could look visually, for example, I drew this sketch for her (Figure 3), to show her what I had seen in my mind as she spoke.

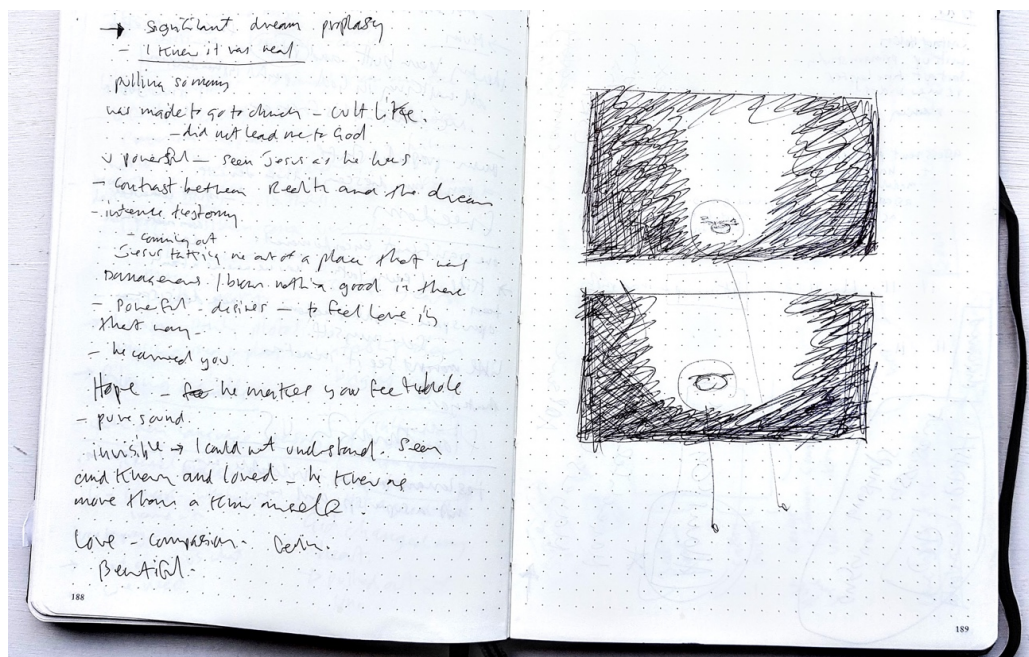


Figure 3: Sketchbook page

Tallulah was more confident than Mark in her own creative processes and perhaps this is why she approached the new form of the digital story with more reservation than Mark did. Some of the suggestions I made about aspects she could incorporate she rejected; it was clear that she had a palette of ideas about how her story could be conveyed too. The mental picture I had of her story was very alive to me, so I felt I needed to check with her that I was not wielding power too much and that she did feel able to say no and to challenge me. An example of how we dialogued about this can be seen in the recorded workshop conversation between myself and Tallulah on the second day. Tallulah reassured me that to share the responsibility of the development of her story, helped her to hold it more lightly than if it was a solo act of creation and that this made the process easier for her, she did however still feel that the story was *hers*.

Discussion

Introduction

This chapter will consist of a number of themes, each of which will be discussed in the light of the learning from this doctorate, which has been about bringing the many facets of myself to an engagement with 3 different kinds of collaborative making practices, all of them through the lens of the practice of digital storytelling. The themes are:

Occupational therapists: Re-finding our identity as makers. This section starts by considering occupational therapy and science and offers new insights into how the profession may go about realising the original intentions of its founders, using a discussion of selected findings from my research to illustrate.

Reframing knowledge and challenging what counts as legitimate ways of knowing. This section critiques the DST literature in the context of what has been written about participatory arts methodologies, offering insights into how the field needs to be reframed and offers ideas about the direction of further research. It then returns to occupational therapy and occupational science and sets out new insights into the nature of research that can be utilised by the discipline and offers a new vantage point that can support the field to conceptualise knowing through making. It ends with a consideration of academic legitimacy.

Understanding collaboration. This section offers insights gained through the three types of collaboration that my practice comprises. My contribution here is to unpack the way power acts within participatory arts research and to add to the voices in the literature about what constitutes ideal collaboration.

The ethics of digital storytelling. This section highlights ethical issues and ethical dilemmas when working with DST, presenting examples from part two of my enquiry.

I conclude my discussion by presenting a summary of my contribution to knowledge. This is represented as a new theoretical model which I have called **The crystal model of transformational scholarship in human health and wellbeing**.

Occupational Therapists: Re-finding our identity as makers

The original tenets of occupational therapy are “unashamedly Romantic” (Hocking, 2008, p. 147). Romantics Ruskin and Morris celebrated people as playful, creative, inspired and unruly beings who are to be valued as autonomous makers, alive with the desire to make and share things (Gauntlett, 2018; Hocking, 2008a). However, these Romantic notions were held in tension with the widespread adoption of *rationalism* over the same time period. Rationalistic thought builds on Descartan notions of uncovering the “truth” through systematic observation and rigorous thinking, and as this way of thinking dominated the medical sciences, aligning itself with the philosophies of medicine was necessary for the status and very survival of the profession (Hocking, 2008b). The practice of Activity analysis has its basis in rationalistic thinking, as its purpose is to organise and standardise and quantify activities. If this is applied to the use of crafts, as was the case in the 1930s-1960s, adapting and grading of a craft activity allowed for the prescription of crafts to be organised and standardised. However, Occupational therapists began to lose touch with the Romantic ideals of making, as Hocking points out;

“Inevitably, this increasing rationalism affected the ways in which the more Romantic aspects of occupational therapy were viewed.” (Hocking, 2008c)

Since the 1960s occupational therapy scholars have made continued and repeated calls for the profession to return to its roots and to make occupation its central concern (Townsend, Wicks, van Bruggen, & Wright-St Clair, 2012; Turner, 2011; Whiteford & Hocking, 2012; Whiteford et al., 2000; Wicks, 2012) .

Aldrich, Gupta, & Rudman, (2018) offer a content analysis of all the occupational science doctoral degrees gained in North America. They state that the purpose of occupational science is to “develop knowledge about occupation and humans as occupational beings” (p273). Their analysis of 101 dissertation abstracts published between 1994 and 2015 found that only 40 of the 101 studies make a direct contribution to knowledge about humans as occupational beings. Without a focus on a core purpose, the authors ask if this lack of cohesion poses a problem for the discipline.

Hammell, (2011) calls the profession to resist cultural imperialism, and that an intellectual consensus cannot be realised until the discipline is drawing from a diversity of cultural perspectives, recognising that it is only a small minority of the global population that is involved with occupational therapy knowledge generation i.e. a privileged English speaking western minority informed by neoliberal assumptions about what is valuable (Hammell, 2019). The political ideology of neoliberalism, as articulated by Hammell,

“embraces individual freedom and self-interest, espouses individual choice and responsibility, promotes independence and self-reliance, [and] blames people for their ill-health and social problems” (Hammell, 2019, p. 15)

De-colonization and a critique of the dominant neoliberal assumptions within the theories and models of occupational therapy is an important and necessary process for the profession, and builds our understanding of humans as occupational beings in context, but I argue here that what is *also* needed, in order for us realise our original intention, is to continue to engage in enquiry about occupation *itself*. Research which concerns occupation *itself* is not well developed in the professional literature. (Pierce, 2014)

One way of doing that, and the method I explored in this doctorate, is to understand ourselves (occupational therapists) as makers. The way to understand a process of making is to engage in it, and to do it while holding all those Romantic notions of the benefits of artistry and craft for the maker in mind, as the founders of our profession did.

I therefore propose in this doctorate that one of the reasons why occupational therapists have not realised the potential of the profession is that we have lacked the bravery to declare the value of learning through making and to remember our identity as makers.

A way to analyse a process of making is activity analysis and Occupation-based activity analysis, although imperfect, is a tool we already have and could potentially be re-purposed for use in a research context.

Further, the concern of occupational therapists has centred around everyday occupations, occupations which are imbedded in daily or weekly routines. See for example (Huot & Rudman, 2015). Framing my Part two research data using occupation-based activity analysis, allowed me to be reminded that human occupation is made up not only of routines and habits, but also special events, such as holidays, and celebrations. I realised that a DST workshop is what I have called a *special occupation* – where we decide to come out of our normal routines for a specific purpose. Special occupations are the things we take photos of, the events we post on social media, the times we remember, and perhaps it could be argued that it is the string of these across the life span which form our identity, just as much as the pattern and context of our everyday doing.

My occupation-based activity analysis of Mark engaging in the DST workshop shows that this special occupation cannot be categorised as selfcare productivity or leisure – it is none of these and also all of them. So contributes to calls in the profession to revise these categories (Hammell, 2009; White, Lentin, & Farnworth, 2019) Further, it highlighted the poor fit of the activity analysis tool which, it could be argued, comes out of a neoliberal, individualistic ideology about occupations. Mark's engagement in the DST workshop was instead, a reflection on the importance to him of his faith community and the relationships therein. For Mark, the importance of the DST workshop was about its place in the unfolding narrative of his faith journey in the context of others – not an individualistic pursuit. It uncovered the collective and collaborative nature of the activity.

These observations about the utility of occupation-based activity analysis as a research tool are summarised in Table 3. The reader is also invited to refer to appendix 2, which sets out the Thomas (2015) applied to participant Mark in full.

Strengths of Occupational Based Activity analysis used as a research tool.	Limitations, imperfections and problems of using occupation-based activity analysis as a research tool.
<p>Foregrounds doing and the material aspects of the workshop</p> <p>It gave me a structure and a language to talk about doing – both by recording my observations of my participants and also categorising what they said about what different aspects of the doing meant.</p>	<p>Self care, productivity and leisure are problematic categories</p> <p>It is traditional in occupational therapy to describe distinct categories of occupations. In Thomas (2015) these categories are Activities of Daily living, Education, Work, Play, Leisure and Social Participation. The tool invites the user to decide which of these categories the analysed activity fits into. I contend, along with other occupational therapy scholars that these categories need revising.</p>
<p>Values, beliefs and spirituality associated with participation section allows for thick description</p> <p>This section of the form gave me an opportunity to summarise what the workshop meant to the participants from the data gathered from the interviews as well as my own observations in a holistic way.</p>	<p>Values, beliefs and spirituality associated with participation section</p> <p>Just as easy to get this data from the coding of an interview.</p>
<p>Contexts and environments section</p> <p>Provides a useful set of prompts to consider the environment or context in a comprehensive set of ways, namely cultural, Personal, Temporal, Virtual, Physical and Social. The Personal section prompted me to consider Mark in ways that did not come out of any of the other data.</p>	<p>Contexts and environments section</p> <p>The tool prompts the user to decide if different aspects either support or inhibit the occupation. I preferred to consider context without the categories of support or inhibit and merged the two fields</p>
<p>Performance Patterns section – allowed for new insights</p> <p>This section prompted an insight that I might not have had, which was that Occupational Therapy largely concerns itself with everyday occupations –</p>	<p>Performance patterns section – revealed the drawback and limitations in the way Occupational Therapists are trained to think about “doing”</p> <p>Are we only interested in the humdrum daily grind? What about high days and holidays, rituals, special activities, trips away?</p>

Strengths of Occupational Based Activity analysis used as a research tool.	Limitations, imperfections and problems of using occupation-based activity analysis as a research tool.
<p>Objects and their properties required section</p> <p>Offered an opportunity to carefully consider what items would be needed and how the space should be arranged and how the participant would interact with the items.</p>	<p>Objects and their properties required section</p> <p>If the form was being used as part of an occupational therapy process, the therapist would need to be thinking about this in advance, yet this section is section 5. If it was used as a research tool this section would need to be at the start – its really an “ingredients” list which would have to be assembled before we start “cooking”</p> <p>I added in Preparatory demands, as this is not included in the Thomas format – but it was still completed after the workshop – to be of use, this could have been done to prepare</p>
<p>Space and social demands section</p> <p>Prompted me to think about different way Mark interacted with others during the workshop</p>	<p>Space and social demands section</p>
<p>Sequence and timing section</p> <p>I used this section to scrutinise the time-lapse footage and really describe what Mark was doing at different points in the two days.</p> <p>I was able to observe his body movements and noted that often he prefers to respond to others rather than take a lead– the amount of time he spends talking is small compared to others at the workshop. This was also evident in the way he approached the “doing” of the stop motion activity – this was really interesting to me and I don’t think I would have noticed with out doing the analysis of the sequence</p>	<p>Sequence and timing section</p> <p>It took me a very long time to set out the sequence and timing of all the activities in the two day workshop, and the task was hampered by the missing data (particularly on the Saturday)</p>
<p>Sections 8-11 are as follows: Muscular analysis, body functions including mental, sensory, movement and neuromusculoskeletal functions, body structures, performance skills including motor, process and social interaction skills</p> <p>I did not complete these sections as this level of detail was not needed.</p>	

Table 3: The pros and cons of occupation-based activity analysis (Thomas 2015) as a research tool.

We need to account for the way connection and relationships influence meaning making of doing in the developing of our theories and tools. See for example White et al., (2019) who's paper about the occupations of adults living with chronic conditions offers new insights into the importance of connection within meaningful occupations.

With the above in mind, I will now unpack some of the learning gained from my enquiry.

Time/process Liminality

DST is about *time travel* – in two different ways: firstly, the time travel that occurs within the process of the workshop and secondly, the way that the finished “embodied object” ((Alexandra, 2017) means to the storyteller acts as a *time capsule*.

The workshop itself

A DST workshop is about compressing time. It is a very tight, short story form. The experience of the two day workshop is compressed through the editing down of the narrative and also video editing, which involves making decisions about what will be included and what will be left on the cutting room floor. DST can be seen as a *distilled* story form. A story separated and concentrated by foregrounding what is deemed in that time and space the essence of an aspect of a person's life experience.

But It is also about expanding time by slow looking – attending to and spending time. Lyons, (2013) considered what is gained by spending time to examine and attend to stigmatised objects in her study of rollators. Lyons used drawing to do this. DST, because of the time it takes to do, also has the same effect.

DST, in common with many making practices, is a process that takes time. Two full days at the bear minimum. So, the intense period of time can be seen as a compressed expression of time and through that compression, the storyteller is “forced” (the word Mark used in his f/u interview) into a state of *liminality* and out the other side. It is the entering into the uncertainty of the liminal state and coming out of the other side of it that is key to how new revelations and understandings can occur through a process of

making. And this is a feature of many creative activities which all involve the act of bringing something new into the world.

The concept of liminality has been described by Fortune & Kennedy-Jones, (2014) as a space between two thresholds – that of *not knowing* and that of a *new transformed understanding*. The concept, which arose from anthropology and is adopted by learning theorists, has been discussed in the art and design literature (Lam et al., 2018) and organisational theory in the context of the work-place (Bamber, Allen-Collinson, & McCormack, 2017) as well as the education of occupational therapists (Fortune & Kennedy-Jones, 2014)

The artefact (form) embodied object as a time capsule

A digital story holds a memory – not only of the events depicted in the story that was made, but also of the workshop itself. In that way it acts as a *time capsule* for the storyteller and for anyone who shared the experience of the workshop with the storyteller. An example of this can be seen in my first digital story, made in 2007 about events that took place in 2002 and my subsequent analysis of it in 2018. 2007 was when the time capsule was put together, and then in 2018 I re-opened the time capsule to put new reflections in it.

A photographic snap shot is also a time capsule, but to a lesser extent. A digital story is different from a photograph in that a photograph captures a single moment in time. A digital story is crafted and laboured over. Not only does it take time, but the embodied object that is produced takes time to watch. Like many creative practices it is a process made up of a series of stages and transformations. The production of ceramics is another example of a creative practice which involves a series of stages and transformations.

In summary – insights about time.

DST is a pattern of activity, a variety of different activities strung together in a sequence. It is an activity that is done together. It is influenced by the context. What is shown, what is shared, what other people do, how each individual operates are in the space.

The pattern of activity that a DST workshop comprises has been examined in this thesis via an Occupation based activity analysis, and what informed this analysis was reviewing the time-lapse footage of the workshop which in itself encapsulates the pattern and nature of the different activities and stages of the workshop. A review of this data informs an understanding of the connected and relational nature of the activity, and acts as a way that the time participants spent talking and making together can be quantified. This time spent together engaged in collaborative making, builds relationship and connection. I argue that it is this time spent together, supporting each other to move into and out of a liminal space which is key to any transformation and impact on wellbeing. A consideration of the form of DST is therefore warranted, and is considered in the following section.

Form

Digital stories are short first-person multimodal narratives. But, in order to enable transformational learning and positively influence wellbeing, the choice of creative activity is not as important as the careful attention to the way the experience of making the form is designed. It does not really matter *what* the form is.

Conversely, what *is* important, is to understand what a form *is* and what it *is not*. DST is a multimodal form. When I began to interrogate the literature about digital storytelling and meet its practitioners, what struck me was how little was being discussed or written about it as a multimodal form, As I have expressed elsewhere in this thesis, my question was: *Why make a digital story as opposed to another form of storytelling or indeed do another creative practice? Why not write a book or make a pot for example? What does making a DST do that making a pot wouldn't do?*

What I have found through the interrogation of literature, especially since 2016, that those involved in writing about DST have, at the same time I have been conducting my enquiry, *also* begun to address questions concerning the nature of DST as a form. For example, Alexandra, (2017) writes about DST as an audio-visual means of expression. To Alexandra (Alexandra, 2015, 2017) DST is increasingly seen as more than an innovative way to collect data or represent research findings. In her doctoral work with

migrant and refugees in Ireland, she connects DST to ethnographic and documentary audio-visual practices, drawing on the work of film maker Jean Rouch, she offers that DST involves existential discovery and provides implication for how we might *think* through *image* and *sound*. Furthermore, she echoes the findings of this thesis around temporality and spatial concerns, and states that

“Audio-visual compositions are – through temporal and spatial continuities and ruptures – sensorially embodied.” (Alexandra, 2017, p. 178)

Darcy Alexandra is a social anthropologist living in Switzerland, however it is perhaps relevant to this enquiry to note that her website indicates that she is also a dancer and a singer and that her husband is a documentary film maker. In making this observation I speculate that conversations between a documentary film maker and an anthropologist/dancer/singer may have offered rich insights about *making* that may have informed her enquiry.

I argue that it is when *makers* (as opposed to writers) have got involved in DST that the sensory and temporal and multimodal aspects of the practice begin to receive attention. I bring to my enquiry my identity as a maker, instilled in me through my art and design education, and I contend that it is this perspective that could be part of the next wave of new insights into DST.

DST is a new media practice which is no longer new. I am one of a community of researchers who are now moving into a more sophisticated understanding of what it can offer – moving beyond the novelty of the form and realising that it is a creative practice alongside other creative practices such as drawing or pottery or other arts based research methods, or any other creative/ art forms or other creative therapies.

The occupational therapy separation between occupational forms and the performance of those forms is useful here. (Nelson, 1988; Taylor, 2017) The occupational therapy concept of an occupational form is a set of actions which happen for a specific person in a specific context (ie. With specific people in a specific time. Thus a form cannot be separated from its context to retain its meaning.

Another insight that came to light as a result of my practice, is the way that DST is often used with people who are new to this form of communication. This may be part of the reason why the written elements have received greater attention in the published literature, and also why the reach of the films themselves remains limited and seldom goes beyond the end of a particular project (Dunford & Jenkins, 2017a)

As an example of this, my participant Mark did not have the words but nor did he have the visual literacy to explain what *a lifestyle of prayer and worship* is and what it means. In his DST the image of the candle in particular, is a place holder for that which could not be expressed, things which Mark was not able to communicate in the storycircle or in the film, namely the impact of God taking him through hard times and the central importance to him of his family and the values they instilled in him as a child. Despite this importance, Mark chose not to show his story to his family, the people who featured in his story, rather, he used the personal viewing and re-viewing of his story as a spiritual practice. Similarly, Tallulah did not choose to show her story to anyone, which indicates to me that it was the process and not the product that was valuable to her. She did not feel the need or desire to use what she had made as a form of communication. Tallulah expressed discomfort with her finished story, using the word “cringe” to denote a complex set of feelings about being uncomfortable with the vulnerability it embodies but also the amateur folksy nature of the visual aspect of end product. I wonder if she would have expressed less “cringe” if the production values had been higher for the visual aspects of her story, i.e. the allocation of more time for her to polish her drawings.

In part two of my research, the digital story workshop, I was aware I was taking my participants through a process that was novel for them. Developing skills in documentary and visual storytelling takes years and even with skilled facilitation, if the intention is to produce compelling communication, then ‘classic’ DST is probably not the right tool to use. For my participants the process was everything, and while the form was novel, I would contend that their decision to engage in it was as much to do with the *ongoingness* of our community. Ongoingness, defined as the flow and often unspoken tacit, sensory experience of an ongoing life, is something discussed by

anthropologist Pink, (2014). The workshop was a single event which enhanced our understanding and appreciation of each other, just as the many other activities and collaborations we have been involved in together have over the years.

As I have said elsewhere in this thesis, the participants in part two of my enquiry reflected very differently on their first encounter with DST than I did. For me the experience was transformative and cathartic, a life changing moment of revelation and healing. For them it was a weekend out of their normal routine in which they got to try something new, and to spend some quality time with people they knew and trusted.

To conclude the section above about form

A multimodal form such as DST has the potential to illuminate aspects of experience that cannot be expressed in words. Tacit understandings of the mystical and ethereal, which scholars have described as a sensuous scholarship or as *existential discovery*, can be expressed (Alexandra, 2017) (Lam et al., 2018) (Ingold, 2013). This expression of embodied knowledge, of multimodal thinking, can be facilitated by DST and is particularly suitable for youth and marginalised groups who may prefer these more ephemeral forms of communication to written ones, however, the potential for a DST artefact to be an effective form of communication is realised fully only when extensive training and practice in media making has taken place. This is beyond what can be facilitated within a single DST workshop. I contend that it is when *makers* get involved in facilitating DST – makers who have gone through a process of visual and multimodal literacy development such as that which is fostered through an art and design education, that DST forms can realise their potential as effective and affective pieces of communication.

Reframing knowledge and challenging what counts as legitimate ways of knowing

This section will consider my contention that knowledge production about creative practices and their influence on wellbeing needs to be re-framed.

Hitchcock's screen writer Angus MacPhail (Stollery, 2014) coined the term *MacGuffin* to indicate an object, device or event, which is necessary to the plot or the motivation of its characters in a film. A MacGuffin can be intriguing, but it is essentially a plot device and is insignificant, unimportant or irrelevant in itself in the context of the story.

What makes a good movie is not the MacGuffin, but the skill of screenwriting is to use the MacGuffin to get us, the audience to care about the films characters and how they interact with each other and connect with each other and jump off the screen as believable characters that resonate and connect with the viewer.

I offer here that DST could be seen as an intriguing MacGuffin, not to be confused with the ongoing ness and unfolding plot of a person's life journey. As a plot device, it has the ability to move the plot along, perhaps DST does what any meaningful making practice does. Namely, to a) provide an opportunity to connect with others, b) be supported to enter a liminal state between two thresholds and c) offer the potential opportunity to enter into flow states (Csíkszentmihályi, 1997, 2002; Wright, Sadlo, & Stew, 2007).

DST is a facilitated making practice and what is being made is short multimodal personal films using freely available computer and mobile technology, but it is worth remembering that what makes DST beneficial is not *what* it is, but *how* it is done. The care and attention utilised in the design of the experience is all.

As Phillips, (2019) critique of APPGAHW, (2017) points out

As forms of enquiry, expression and communication, [the arts] provide ways of engaging with and responding to the world. There is a risk that attention becomes directed at the finger pointing to the moon, instead of the moon. (Phillips, 2019, p. 22)

Phillips is echoing here (using a different metaphor), my point about MacGuffins above.

My review of DST literature revealed, perhaps, that enough research has been done about what DST can be used for and what it does for people who take part in it. This is reflected in, for example de Jager et al., (2017) who's review of DST in research concludes that

“it is entirely possible to conduct DST in a manner that is not greatly or at all beneficial to participants” (de Jager et al., 2017, p. 2575)

I would contend that it is already known what the “active ingredients” of DST are, and so efforts to develop a conceptual framework of it, for example that proposed by (Fiddian-Green et al., 2019), seem miss-placed. What matters is the *purpose* of using DST. It follows therefore that DST is therapeutic in the hands of *therapists* and that DST is research in the hands of *researchers*.

I offer that DST can be conceptualised as a craft, a making practice, and it is *that* which is central to understanding the power of it. David Gauntlett's book (Gauntlett, 2018) is helpful here. His central tenet is that making is connecting, and his exploration of the social power of creativity, from craft and knitting to digital everything, offers an insightful overview.

An activity such as DST acts as a conduit for connection and relationship. But we could equally be making mud pies. This analogy only works though if we are making mud pies because we love making mud pies and we are delighting in it and each other while we are doing it. It is important to recognise however that DST, unlike mud pies, is a high status craft, which because of its association with technology and the media forms of cinema, has the potential to engage people who would not want to be associated with traditional and gendered craft forms.

For Occupational Therapists to reclaim our identity as makers, a re-orientation of research epistemology needs to take place. Paradigms of health care research are often expressed as a spectrum between the two dichotomies of interpretivist and positivist world views, See for example (Allsop, 2012). However I contend here that a third epistemology is needed, which recognises that research about a making practice, such as the making practices explored in this thesis, is legitimate research *in and of itself*. An approach that fits neither in an interpretivist or positivist world view. Research in *doing* using, for example, art and design research methods, offers a new direction for the theoretical underpinning for the profession. Knowing through making is a third way, a third way that completes a triangle. Perhaps, as we have viewed the dichotomy line of Interpretivism and Positivism, we did not realise that what we are looking at is an *edge*. A new vantage point (figure 4) reveals the line is actually a shape - a triangle. Sousanis, (2015) calls this *unflattening*, In his graphic comic, he shows through drawing, how fresh insights can be found, by literally finding a new angle.

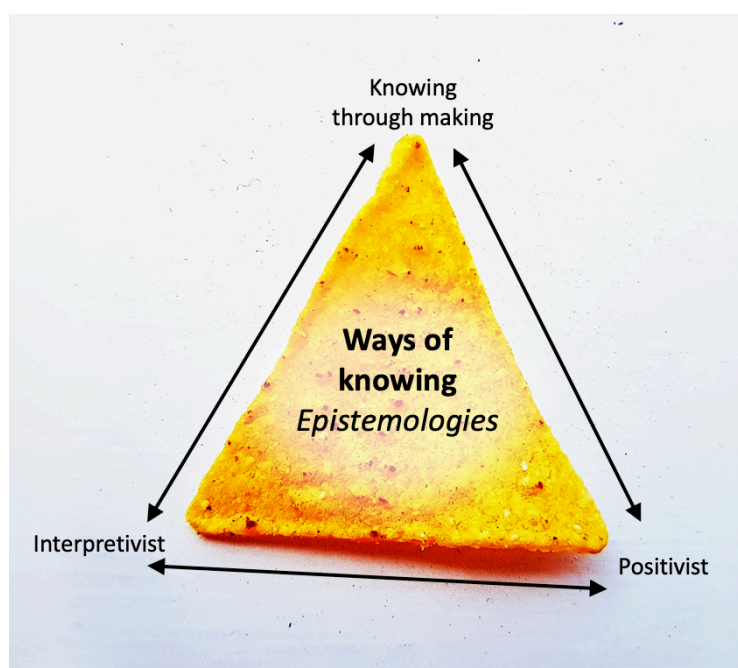


Figure 4: ways of knowing as a triangle

Without this re-conceptualisation, I offer that occupational therapists are engaging in research with one hand tied behind our backs – we are as much cowed by the discourse of the social sciences which gives rise to qualitative methods, as we are by

the ratio-medical dominant discourses which give rise to quantitative ones. I am claiming within this thesis that epistemology which includes knowing through making, such as the epistemologies I have encountered through engaging in an enquiry based in art and design have much to offer occupational therapy and occupational science and the development of our theoretical base.

In the academy, ways of knowing through doing, through making, are still seen as of lesser status than ways of knowing. This is a problem that has been extensively explored by Creative Arts researchers such as Nelson, (2006, 2013) Barrett & Bolt, (2014) and Frayling, (1993) and is very much about developing theoretical tools which incorporate Doing/practice. For example, to Finnish design researcher Maarit Mäkelä, (Mäkelä, 2007), an object [for example a digital story] made by an artist-researcher is an artefact. Giving voice to the artefact involves placing the artefact in a suitable theoretical context and interpreting the artefact. In that way the artefact reveals its story and the knowledge it embodies. Bolt, (2016) offers that Art as an academic discipline has traditionally sat outside of research frameworks because artistic freedom was protected by the *aesthetic alibi* – a special kind of artistic freedom. The move to an education and research model in art and design education has changed how art and design are framed and regulated. This creates some ethical issues which are discussed in the next section.

In the next section of this discussion, a consideration of the learning within my thesis about collaborative making practices is offered

Understanding collaboration

DST is often referred to as co-production (Hardy & Sumner, 2018) a co-creative practice (Alexandra, 2015), a co-construction (Owens, 2018), a participatory digital methodology (Benjamin-Thomas et al., 2019) and a participatory arts based method (de Jager et al., 2017).

As explored elsewhere in this thesis, health services researchers are increasingly encouraged to 'co-produce' knowledge with service users amongst other stakeholders. (HSRUK and the NIHR Knowledge Mobilisation Fellows, 2018).

As many authors have highlighted, co-production efforts are hampered by unequal power relationships. The mechanisms of this are explored in depth by service user researchers in (Rose & Kalathil, 2019) and in the field of design in (Pierri, 2018). And in the context of visual research methods by (Mannay, 2015).

So the question is: To what extent is DST co-production? The following quote illustrates the role of the facilitator in a DST workshop which can illuminate the issues with power inherent in the practice.

“...the professional listening of the facilitator is a critical part of the digital storytelling process. As one facilitator, involved in the Capture Wales project, commented:

If you are getting someone to make their own story in a workshop, it's still a collaboration [with] a facilitator ... because, what you show them as examples, how you give them feedback on what they've written, and all of that is your hand. You can't avoid that.” p108 (Lewis & Matthews, 2017)

This highlights the way that DST is framed by facilitation, and even when facilitators work sensitively and ethically, the power issues can't be avoided.

Jackson and Greenhalgh state however, that health care research is moving into more ecological ways of solving problems, rather than the one size fits all.

“Rather than “Here is one I have cooked earlier, now eat it”, researchers may increasingly say: “Here's the kitchen, let's choose the ingredients and method, make the meal, sample and refine it together, and shoot for Masterchef”.
(Jackson & Greenhalgh, 2015)

Jackson and Greenhalgh are aware that researchers need to revisit the methodology of research impact and their own *relational connection with end users*. (Jackson & Greenhalgh, 2015)

My thesis highlights 3 different kinds of collaborative making and power is expressed differently in each

- 1) I am entering into someone else's frame, for example, taking part in workshops lead by pilgrim projects and re-animation therapy. A set process has been pre-determined, and I decide to submit to this process. My making is constrained and afforded by the frame that has been set by someone else (part one of photobook). Entering into someone else's frame works well when I am a novice or feel underconfident about a making practice. I am trusting the facilitator to hold not only the practical aspects of making, but also group dynamics and to manage a learning process in a way that feels supportive and safe.
- 2) I invite others into a frame I have made, for example, inviting my 2 research participants to take part in a set process that I have determined. They do it because they know me and they trust me and they want to help me out. (part two of photobook). As a facilitator I was aware that despite careful explanation, my story tellers did not have a clear schema of how video editing was accomplished. Without this knowledge, a lot of trust was indeed required on their part. I reflected on the different amounts of direction I gave my two storytellers and how this reflected principles of constructivist learning theory *and* the accurate grading and structuring that is possible with activity analysis in occupational therapy. This resonates with taking someone through *liminality* and out the other side, tolerating the discomfort of not knowing and being able to hit that just right challenge [or as Vygotsky (Connery et al 2018) would call it, *scaffolding* the learning experience so the learner remains in the zone of proximal development]. Its all involved. However, it is through creative making, constructionism, knowing from the inside, that a transformation is most likely to happen. The responsibility on the facilitator weighs heavily.
- 3) We find common ground within a shared frame which we decide to respond to together because we want to, we enjoy each other, and we trust each other. This trust is built over time because of our ongoing relationship. What we are doing is a product of this relationship, for example the three projects set out in part three of the photobook and folder three, with Debbie Michaels and Sarah (Smizz) Smith. (part three of the photobook) This was the lightest and most fun

form of collaboration in my doctorate and my reflection is that I would like to do more of this.

These insights, that all my making practice has been collaborative, and it represented three distinct types of collaboration in which power is expressed differently, came out of the collaborative making practices I engaged in during my doctorate. and echo the sentiments of the quote below

“Therefore, participatory visual approaches that make central the premise of giving voice need to address the power relations that construct not only the research relationship but also, importantly, the wider social context. Artefacts do not exist in a vacuum; they are based on the background experiences and feelings of the person that created them and, importantly, on the power relations that surround them. Consequently, it is important to explore what we mean by ‘the participatory’ and the interplay between researchers, participants and the wider community.” (Mannay, 2015, p. 63)

It is interesting to note that trust was central to the success of all three of the collaborative making practices above. Careful attention to the quality of relationships, adopting principles of ethical safety and also engaging in a reflexive process can all help to minimise power imbalances that can be present in participatory research methods such as DST. The most enjoyable and playful aspects of my practice however are within part three, where power is the most equally shared.

I therefore offer, echoing the sentiments of (Jackson & Greenhalgh, 2015) and others, that the most powerful, interesting and sensitively done endeavours, involve *getting the team together first*, and then collaboratively working out the direction of travel and the methods that will be used to get there.

I contend that DST, although it *can* be seen as a participatory arts-based research method is *not* the highest most desirable form of co-production, because the methodology of DST has been already decided because researchers are inviting participants to step into a pre-determined frame.

True collaboration is costly because trusting relationships take time to build. This is the case regardless of if these are research collaborations or therapeutic alliances.

The ethics of digital storytelling

DST is an ethical minefield and the ethical issues have been considered extensively by a number of authors, either specifically (Gubrium, Hill, & Flicker, 2014; Hill, 2014; Mannay, 2016; Storycenter, n.d.) or as an example of an arts based research method (Bolt, 2016; Lenette et al., 2018) and this has been extensively studied and is well understood.

Many authors e.g. (Boydell et al., 2016; Lenette et al., 2018) make calls for the academic legitimacy of arts based research to be re-considered. There are calls for ethics committees to adapt their assessment frameworks when considering research protocols which include visual methods. Bolt, (2016) offers that ethics committees are often mystified by artistic research which does not conform to the more familiar forms of research data which arise from qualitative and quantitative research methodologies. An example of how this plays out in DST is that, while it is important to protect the personal data of research participants, there is a danger that the authorship of creative works made by participants is unable to be acknowledged and in that way undoing efforts to 'give voice'. I am grateful to the ethics committee that my research was approved without issue.

In my study Mark was happy for his actual name to be used within this enquiry and the authorship of his story to be acknowledged using his full name. Tallulah was less comfortable with this. The design of part two of my enquiry allowed for these two perspectives on anonymity to co-exist within the same study. While Tallulah chose not to have any images of herself in her story and chose her own pseudonym, she was happy for pictures of herself to appear in the photobook and thesis, and although I cropped out her face in the pictures of her in the 'frames' digital story, she said on viewing this digital story that she would be happy for it to be re-edited so that she becomes identifiable. This example from my own research adds weight to the growing number of researchers working with participatory arts-based methodologies who highlight these tensions. Warr, Waycott, Guillemin, & Cox, (2016) discuss two dimensions of research ethics, namely *procedural ethics* and *ethics in practice*.

Procedural ethics concerns the formal regulatory systems that guide institutionally based research such as the initial ethics and governance approval my part two study gained. Ethics in practice concerns the on-going and often unpredictable ethical issues that may arise at any stage of a research process. This involves upholding key ethical principles throughout the process to ensure ethical safety. The DST movement has evolved to the stage where robust ethical guidance exists, for example (Hill, 2014; Storycenter, n.d.) which covers both the wellbeing of participants and confidentiality within a workshop, gaining permission to publicly share stories, issues of anonymity for both the storyteller and any other person featured or discussed in a DST, transparency about the goals of the DST project and issues of copyright of music and online images.

Conclusion

My contribution to knowledge comprises of the following insights

Knowing through making, as conceptualised through, for example, learning theories and art and design research methodologies, have the potential to enable occupational therapy and occupational science to realise the original intentions of its founders.

A study of the collaborative process of DST has offered a worked example of this. Comparing and contrasting DST with other collaborative making practices uncovered what DST is and what it is not.

DST is a high status craft and the key to understanding its potential impact on wellbeing is to understand it as a craft – a making practice. Further, the potential impact on wellbeing is determined not by the process or properties of DST itself, but by the care and attention to the detail of the experience and how connections between the people are made. A DST workshop is a non-generalisable event, unique to that time and place and those people.

What DST is not, is an ideal method of co-production. Its uses as a participatory arts-based research methodology has been well documented, but I contend that the ideal collaboration is one where the team is assembled first, not where collaborators are being asked to step into a pre-determined frame such as DST.

In conclusion therefore, I offer a contribution to knowledge which I have called *The crystal model of transformational scholarship in human health and wellbeing*. A description and explanation of this model is presented below.

The crystal model of transformational scholarship in human health and wellbeing.

My model is an upended triangular pyramid. The apex of this pyramid sits on a circular base. The base represents my thinking about collaboration and participatory work. The pyramid represents the knowledge that may arise out of this participatory work. The model sits in a container, which represents the context of the participatory work. The crystal model is inspired by the potential of a saturated solution, given the right conditions, to produce a mineral crystal.

The reader is invited to physically construct the model using the following instructions.

How to construct the crystal model of transformational scholarship in human health and wellbeing

You will need: 1) This page and the next one printed out on white paper or thin card. 2) A pair of scissors (or a craft knife and cutting board) 3) Paper glue e.g. Pritt Stick or double sided sticky tape. 4) A container, such as a kitchen mixing bowl or pan.

Instructions: 1. Fold the paper at the dotted lines and cut out the three figures 5,6 and 7 with scissors or a craft knife. 2. Make the crystal by gluing the side flaps and folding the figure into a triangular pyramid. (don't glue the end flaps yet). 3. Place the two circles on top of one another, the one with the writing on top. 4. Ease the apex of the crystal through the centre aperture of both circles. 5. glue the end flaps of the crystal to the base of the bottom circle. 6. place the model in the bottom of a kitchen mixing bowl or pan. Figure 7 consists of photographs of these instructions to help you.

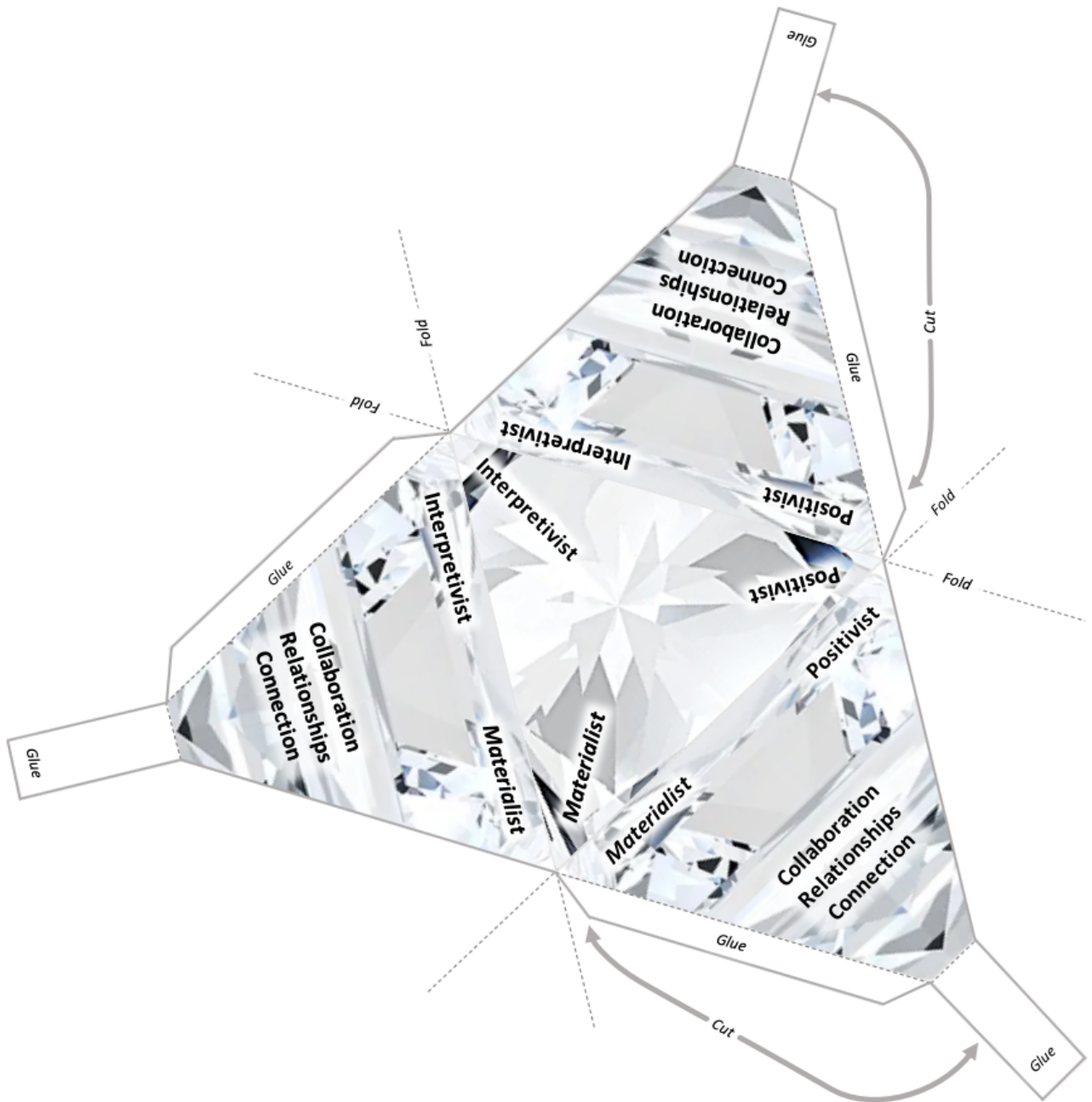


Figure 5: The crystal

Figure 5: Top base

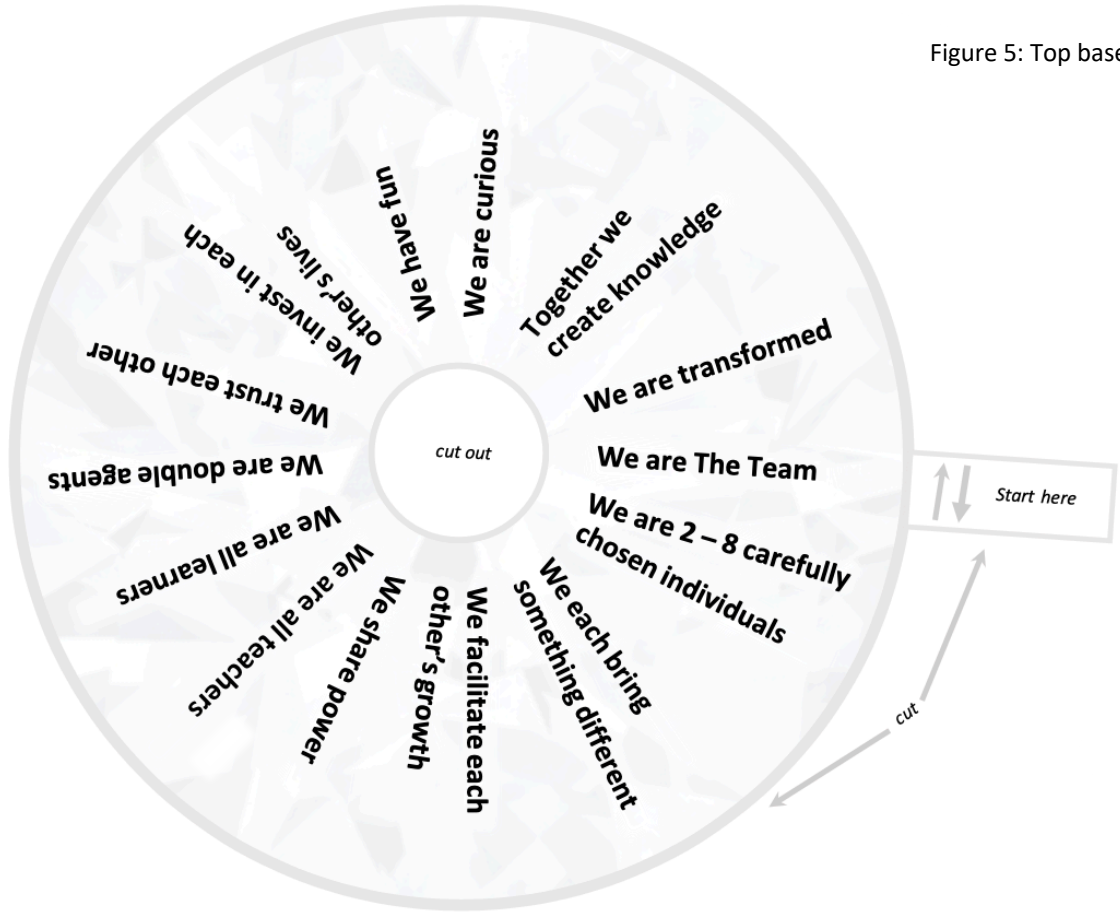
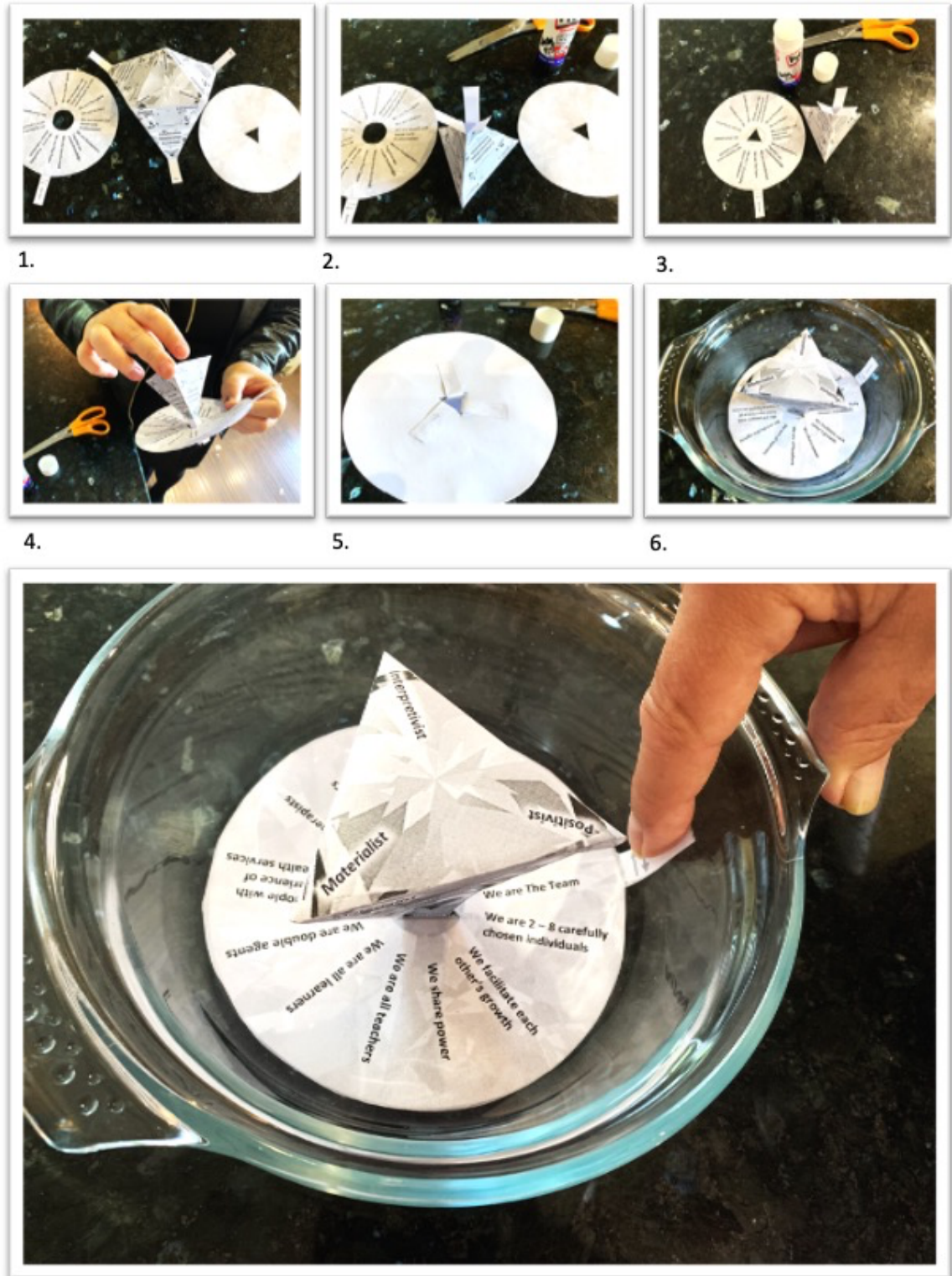


Figure 6: Bottom base



Figure 7: Photographs to illustrate the instructions for constructing the crystal model of transformational scholarship in human health and wellbeing



The development of the Crystal Model of Transformational Scholarship in Health and Wellbeing

As discussed earlier in this chapter, a common conceptualisation of health and social care research places the interpretivist and positivist epistemologies arranged on a spectrum or line. See for example Allsop (2012) . Sousanis, (2015) concept of *unflattening* took me from thinking about a line into thinking about that line being the edge of a 2 dimensional shape (a triangle) and to the conclusion that a consideration of epistemology involves three spectrums or three lines, not one. For a long time, I presented this insight using a corn chip or Dorito (See figure 4) and I even used these triangular shaped snacks as a prop in a talk I gave about my research at an occupational therapy conference in 2018. The three points of the triangle represent my argument that there are three broad *ways of knowing* (epistemologies), that are relevant to anyone interested in human health and wellbeing, not just two.

However, the later insights gained in my doctorate about collaboration and participatory work are not captured in the two dimensional Dorito with its three epistemologies.

A further consideration of Sousanis, (2015) prompted me to incorporate the 3rd dimension into my conceptual model. Sousanis (2015) reminds us that our two eyes afford the depth perception needed to appreciate that a line can be the edge of a triangle and that a triangle can be one side of a pyramid when our position in space is altered relative to it.

“Pivoting from the cycloptic to seeing from two or more points at the same time, what we once only knew in one way, as being flat – having approached it head on, from a single side – we now come to recognize in its multi-facetedness. The dimensionality of objects means we can move around them.... We can look...from other sides, turn things over and upside down, changing our standpoint reveals unseen aspects that open new possibilities and expand our understanding.... (Sousanis, 2015, p. 43)

The reader therefore is invited to enter into this process of *unflattening* and to use the assembled physical model to understand the multifaceted nature of the concepts represented.

What do I mean by transformational scholarship?

This model resonates with the aims and intention of participatory approaches to research such as participatory action research (Cook et al., 2018), participatory health research (ICPHR, 2013), and also teaching and learning which uses a constructionist (Papert, 1980) and constructivist (Piaget & Cook, 2013) (Vygotsky, 1930) mindsets as well as Freirean (Freire, 1998) ones. All of these include discussions on how transformation can be enabled in individuals, communities and societies. It could equally be said that the purpose of occupational therapy is to enable transformation through facilitating participation in the valued activities of everyday life that people might otherwise not be able to take part in due to illness or injury (WFOT, 2012).

The components of the model are each unpacked in the following sections.

The upended triangular base of the crystal

The three ways of knowing are

1. Positivist
2. Interpretivist and
3. *Materialist* – I am not sure this is quite the right term, in the earlier iteration of the Dorito it was named “knowing through making”. The word in the latest iteration of the model is therefore *italicised*.

Each of these three broad ways of knowing is associated with a *range of world views* (paradigms/ontological standpoints) and a *range of tools and techniques* (methods) which can be used to generate data.

With **Positivist Epistemology** we may be measuring things and using quantitative research methods such as statistics and using research designs such as randomised controlled trials. We might have a reductionist or biomedical world view.

With **Interpretivist Epistemology** we may be gathering data by listening to each other and codifying what is being said or written down in words. We might be drawing on phenomenological ways of thinking or ethnographic ones. We may be observing humans move through space and time and recording in words some insights about this.

With **Materialist Epistemology** we are concerned with what Barbara Bolt calls *material thinking* - the making of objects/artifacts -physical, tangible or ephemeral, digital or analogue. We are paying attention to insights gained from the *process of making* and the *context of making* and how both are formed by and dance with each other. (Ingold, 2013, 2018) We may be doing “practice as research”(Barrett & Bolt, 2014; Nelson, 2013). We may have a new materialist or a critical materialist world view. We may resonate with the identity of Maker (Flores, 2016b) and feel an affinity with Papert’s theory of constructionism (Papert, 1980; Papert & Harel, 1991). We could be Design Anthropologists (Levick-Parkin, 2018; Pink, 2014).

The process of transformational scholarship may involve one or more of these epistemologies or it might move between them all at different stages of a project. This can be seen in the sides of the “crystal” where different combinations of the ways of knowing are in play.

The apex of the crystal

Each member of the team brings to the transformational scholarship their unique identities, skill sets and world views that are explored through connection, collaboration and relationship. It is this connection that enables the knowledge to be created and in fact is *an aspect of* the knowledge.

The container/bowl

The container represents the context in which the transformational scholarship may take place. Occupational Therapy Conceptual Models of Practice such as the Model of Human Occupation (Taylor, 2017) and the Person-Environment-Occupation model of occupational performance (M Law et al., 1996) would term this *the Environment*. The Environment is the socio-political, cultural, economic, institutional and physical context which constrains and affords the transformational scholarship. The milieu. The bowl is a reminder of the finite resources of the physical world. (Ingold, 2018) argues in his reflection on his 40 years working as an anthropologist, that science has increasingly lost its ecological bearings – the respect and wonder at the natural world replaced by the hard science of the laboratory. (Ingold, 2013) reminds us that all our

activities are a form of correspondence with the world. Further, the container indicates that this specific piece of transformational scholarship happens during a specific place and over a specific time period.

The base of the model

The *process* of transformational scholarship is a *team endeavour*. The team is represented by the base of the model, which can be moved around the crystal by holding the tab marked “start here”.

The team is a carefully selected group of individuals, who each bring something different to the transformational scholarship project. My thinking about the team was inspired by the three types of collaboration foregrounded by this doctorate, and particularly the work documented in section three of the photobook with Sarah (Smizz) Smith and Debbie Michaels.

“The team” are *double agents* - everyone has lived experience of health care and has experienced suffering, loss and distress – there is no distinction made between researcher or participant, therapist or client, teacher or learner. However, to produce fully formed transformational scholarship, the team needs to consist of a mix of people who between them are able to inhabit all three epistemologies. In my model, the team should *include* people who are Makers. People who have gone through a training in some sort of making, whether this is through formal education or otherwise. People who have learned to Make have had to un-learn and re-learn. They develop an “eye”. Musicians develop an “ear”. Makers bring an embodied, sensory way of knowing, which in my model is *essential* to the work.

The team is a defined circle and it is flat. It is flat because hierarchy is resisted here – as soon as power is acknowledged it is shared, through a process of critical reflexivity. It is a defined circle because the team are a small group of specific individuals, a closed group in which trust and rapport can be built. The team can be two people or it can be up to 6 or 8 people. This model does not work with a team of one person. There would be no base, no substrate, for the crystal to grow out of. Too many people will inhibit the creativity and decision making ability of the team.

The International Collaboration for Participatory Health Research offer a number of position papers created by the finest collection of thinkers working with participatory research methods in health and wellbeing. Established in 2009, it seeks to bring together and consolidate existing knowledge about principles and common terminology. (ICPHR, 2013) It is therefore useful to compare what this body considers best practice with my own contribution to knowledge about collaborative, participatory research.

Position paper 1 (ICPHR, 2013) defines 11 characteristics of Participatory Health Research (PHR). For research to be seen as participatory, it must actively involve the people whose life or work is the subject of the research. Applying the ICPHR characteristics to the projects in section three of the practice submission photobook and USB stick reveals many shared characteristics between my research and the 11 ICPHR characteristics. Namely: That the research should be grounded in the reality of daily life and work in a specific place and time; that the process is collective and non-hierarchical and involves shared decision making; that projects are collectively owned; that projects promote critical reflexivity and critical health literacy; that multiple ways of knowing are promoted, that for production of knowledge to occur, trust needs to be maintained and values of dignity, respect, mutuality and reciprocity need to be nurtured; that power issues need to be paid close attention to; that the quality or validity of the research should be measured by the quality of the relationships.

My approach diverges from the characteristics of PHR in two ways: The *way in which the knowledge is described* and *What happens to that knowledge*. I will unpack these two ways in the following paragraphs

Ways in which *what happens to the knowledge* differs from the 11 characteristics of PHR

In my model, the crystal structure represents *the knowledge*. It is *attached* to the team and it *grows from* the team. The crystal structure represents the potential of a multifaceted body of knowledge to be generated. However, just as if a mineral crystal will stop growing if it is removed from the saturated solution, in my model of

transformative scholarship, the knowledge stays with the team. I am not concerned if the knowledge is transferable or upscalable, because the results or the action is for *the benefit of the team*. It is *they who are transformed* by the *process* of being part of the team and what ever the team decides to do.

Transferability and upscaling the findings of PHR are seen as a problematic area for ICPHR which is “yet to be resolved” (ICPHR, 2013) p 19, while credible workarounds are presented, I contend that the knowledge and insights generated in my model of transformational scholarship *are the process of the collaboration and the product of the relationships*. The work is then about documenting the process and disseminating this documentation, in the way I have learned to do through being exposed to art and design research methods.

How *the way knowledge is described* differs from the 11 characteristics of PHR

PHR is said to “incorporate both qualitative and quantitative methods” (ICPHR 2014 p19). However in the crystal model of transformational scholarship *also* includes methods that arise out of a *materialist* epistemology. I contend that including a materialist mindset helps with *the mess* which is seen by ICPHR (2014) as a characteristic of the dialectical process of PHR. This is because in my model the process of the research or scholarship is not just dialectical, it is also material.

The need to account for the mess involved in participatory research has been acknowledged. For example Cook, (2009) argues that mess in participatory action research creates new “constructions of knowing” that lead to “transformation” (Cook, 2009 p2). Using an action research project about the concept of “inclusion” in early years and childcare services as an example (Cook, 2004), she discusses the temptation of researchers not to report periods of mess and uncertainty in the descriptions of the process of their research. For Cook, the mess is an opportunity for exchange of views and beliefs, where a small group of people with different experiences and perspectives can meet in a “place of co-construction where strands of knowledge and learning are unearthed and critiqued” (Cook 2009 p7).

Cook (2009) draws on inspiration from artists David Hockney as she considers how different ways of seeing lead to different ways of presenting information in her action research project. However Cook's co-construction seems to be a mental process - nothing material is actually being made. The artist is cited because his art considers multiple perspectives. However, thoughts about *artist as maker* and insights gained through the messy process of *making* are absent. I wondered what the material aspects of Cook's data collection were? What was the space like? How was the room arranged? The participants in the action research, with their different perspectives - What did they do together? Did they just talk? Or was there any *making* involved?

Cook (2004) is a write up of the project in question. In the methodology section of the paper, one line gives a clue that there was more going on than talking and listening.

“practical activities, games and scenarios were employed to help mentors and participants.... delve beneath.....to gain a new perspective.....” (Cook, 2004, p. 10)

Adding in a *materialist* epistemology into the mess might have prompted a more detailed description of the practical activities. My model could act as a framework in which to discuss the influence of “doing” in the transformation that came about. Did Cooks 2004 data collection involve physical construction using materials? How might those activities enable the insights gained by the group of research participants and the facilitators? How was the facilitation organised?

The above paragraphs offer an example of how a *materialist* epistemology would at least prompt participatory researchers to write more about the data collection *activities* they might employ in their publications. Further, as my workshop data showed, not everything has to be explainable *in words to be of use*. For example In section two of my research, the digital story workshop, Mark made a digital story in which a video of a flickering candle strongly featured. As discussed in the findings chapter, Mark did not need to articulate in words the meaning of the flickering candle video in order to use the digital story he had made in the way he chose, which was to watch and re-watch the story within his routine of personal meditation and prayer.

Law (2004) invites us to consider that in order to embrace mess, researchers need to be prepared to step into the unknown and learn in new ways.

“if we want to think about the messes of reality at all then we’re going to have to teach ourselves to think, to practise, to relate, and to know in new ways. We will need to teach ourselves to know some of the realities of the world using methods unusual to or unknown in social science.” Page 2 of (J. Law, 2004)

I contend that there is nothing new or unknown about this at all. It is Makers who know about this. They do it all the time through engaging in the process of making and have done so since the ancient times when humans started to use tools and make things with them.

A modern example is the Design Process. The *Design Squiggle* is a simple depiction of the design process made by a designer Damien Newman as an aid to explain the design process to his clients. Damien Newman (Newman, 2002) says on his website that

“The illustration seems to accurately convey the messiness and uncertainty in the creative process as well as the goal of focus and clarity.” (Newman, 2002)

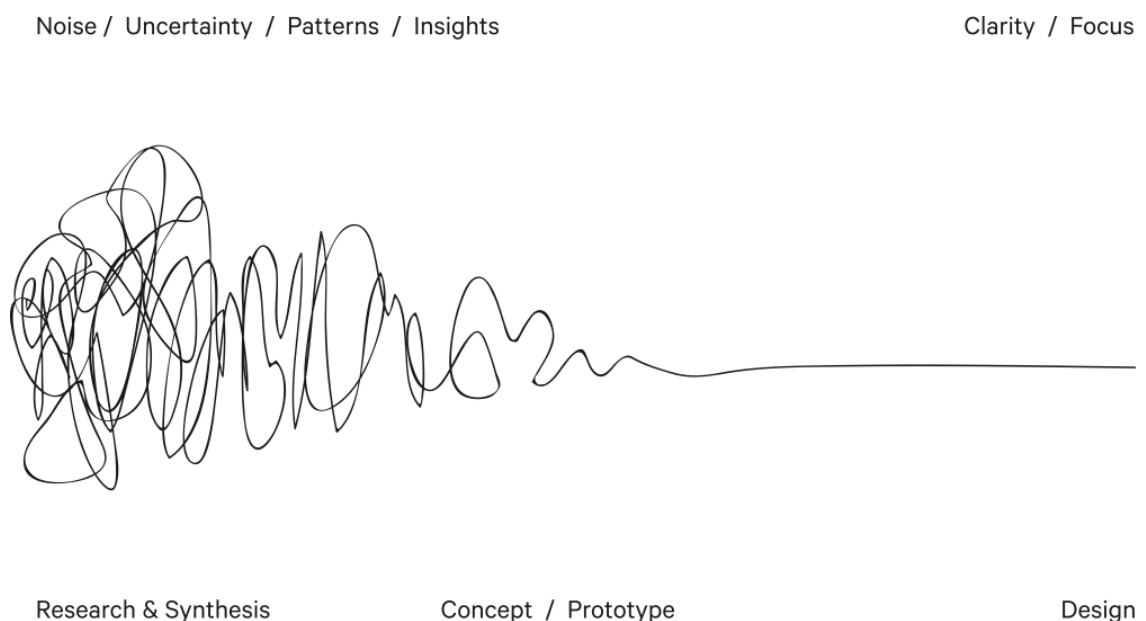


Figure 8: The Design Squiggle (Newman, 2002)

So in conclusion, we can call it mess, it can also be called entering into the discomfort of a liminal state and coming through this into a place of clarity via a threshold, see for example Lam et al (2018). It can also be called tacit knowledge or embodied knowledge, but what we are really talking about is the generation of knowledge through the creative process of Making, Making which, as Ruskin insisted in the Victorian era, should not ever be divorced from the design process. (Waithe 2015)

I am reminded of the kinds of teams and small groups that are formed for music making. A choir is formed out of a balance of people with different kinds of voices, for example, Soprano, Alto, Tenor and Bass. For the love of singing. A rock/pop band often consists of a drummer, guitarist and bass player. For the love of playing. A rock/pop band (or a choir) develops their unique sound by committing to long hours of practice and rehearsal, in which the members of the band come to know each other through the acoustic space each of them operate in. A band that has become “tight” is one that is so well rehearsed that the musicians play as if the band is more than a collection of instruments, rather it is one organism. Accordingly in the crystal model of transformational scholarship, the team is shown as existing within a closed circle, and made up of carefully chosen individuals who agree to enter into a relationship for the purposes of the transformation project.

Once the Beatles split up, there were no more Beatles songs. There are Beatles cover bands but they are not quite the same. The individual members of the Beatles went on to create more music after the split, but it was not quite the same.

I use these musings about collaborative music making above to foreground that transformational scholarship that is non-generalisable and non-upscalable are valid and worthwhile endeavours.

I will end these insights with a quote from a Maker and a constructionist teacher of science from Fablab:

“This is what maker education can be about – the joyous convergence of wonder, discovery, problem solving, creation and collaboration. And most of all, the sense of how interests can be connected to and supportive of others, and of our universal humanitarian obligation to help make the world a better place for everyone” Steve Davee’s forward in (Flores, 2016b, p. xi)

Just as bringing making into schools is a way to create powerful, meaningful experiences and lasting memories, (Flores, 2016a). My findings suggest that bringing making into any scholarly endeavour and any therapy relationship has the potential to do the same thing.

Conclusion

This thesis marks the end of a 7 year process of enquiry.

In common with many, I found engaging in a sensitively facilitated DST process a personally helpful and emancipatory experience.

I used it in my ongoing journey towards the accommodation with and recovery from some very difficult life experiences concerning mental health care and suicide bereavements. It was helpful to make digital stories and it was helpful to show what I had made to others.

As my study progressed, I found that I am one of just a handful of Occupational Therapists who have examined digital storytelling. No other UK based Occupational Therapist has published anything about digital storytelling, and I am not aware of any other UK occupational therapists involved in the movement. To me this seems surprising, given the potential that I saw in the practice as a meaningful occupation that had so positively influence my own sense of wellbeing.

As I interrogated the literature on DST, I found a vibrant and diverse international community of practitioners and researchers. However, what seemed to be an under researched area was attention to the multimodal aspects of a digital story. A key question that informed my research became: Why make a digital story as opposed to something else, for example a blog, or a poem or a song or even a pot? What does making a digital story do that making a blog or a poem etc doesn't do?

It came as quite a surprise to find that as I put together the photobook and analysed my research data in the final stages of the PhD, that *collaboration* became such a central concern. A key discovery is that it is *connection* that positively influences wellbeing. DST is one of many conduits for *connection*. It is through showing our love and care for one another that we enable each other to be our best selves, and that is what was being enabled within all the collaborative making practices I engaged in.

My initial interest in the *form* of DST took me on a journey towards the realisation that DST supports wellbeing because it is an act of creativity, an act of making. Making practices influence wellbeing in two seemingly contradictory ways. The first way is through the ability of making to facilitate the optimum human experience of *flow*, a highly pleasant state conceptualised by Csíkszentmihályi, (2002). The second way is through the ability of making to facilitate the uncomfortable, unpleasant process of liminality. i.e the process of entering into a place of uncertainty and struggle and then having that ah ha moment and crossing over the threshold into a resolution that is the hallmark of serious Making. Skilled facilitation is key to any transformation that may take place.

Attention to the form of DST *has* started appearing in the literature, particularly in the last 3 years. It has become apparent that I was not the only DST researcher who realised the gap in knowledge about form, and I hope I have included enough of this literature for the reader to make sense of it . However, I speculate that it is when makers (as opposed to writers) get involved with DST research that the focus shifts from the written, and spoken aspects of DST.

I have considered DST in the context other participatory arts-based research methods, other creative practices and the arts and health movement, and in doing so recognise the large overlap between the aims of participatory arts-based research, and collaborations that are meant to be therapeutic, e.g. the therapeutic alliance between a therapist and their patient. At the end of the day, its all about learning, and it is that which connects these fields together.

I am bringing what I have learned through this doctorate back to Occupational Therapy. I do that in my role as an educator of Occupational Therapists by advocating a greater emphasis on activity analysis and building confidence of students in creative making in my pre-registration curriculum. The first piece of writing that will build on this doctorate is already underway. It is a book chapter about creative activities for Occupational Therapist working in mental health, which I am working on with two other authors.

That aside, what follows is a set of recommendations for future directions that could build on the knowledge gained from this PhD.

Recommendations

What I would like to do next, along side my role as an educator, is to seek out opportunities to be involved in mental health research that is based around the type of ecological co-creation advocated by Jackson & Greenhalgh, (2015)

Next steps advocated by the DST and participatory arts worlds are as follows:

“What is now required are large longitudinal studies of such arts-based health research projects that focus on what works, for whom and in what conditions” (Boydell, 2019)

I would agree that longitudinal studies would be helpful, but I contend that it is already known what works for whom and in what conditions. To do more of this type of research would be to confuse the MacGuffin with the Plot.

Boydell also makes calls in the same paper as follows

“.....the need to move beyond descriptions of form and content to grapple with the unique methodological, theoretical, and ethical challenges of working with research participants, artists, and audience members engaging in this work” (Boydell, 2019, p. 19)

I agree that descriptions of form and content have been covered, however I am not sure what Boydell means by her use of the word unique. My enquiry contends that each collaborative making project is unique in its context of space and time and the individuals who are involved. It is an unrepeatable, ungeneralizable event. The ethical challenges have been well articulated in literature now. What I concur with, in Boydells call above, is the need to develop theory.

My enquiry has explored DST as an example of a creative making practice and I would contend that it is to further develop theory about the sensory, felt-in-the-body, ephemeral, mystical, tacit, difficult-to-articulate-in-words aspects of creative making that would be useful. Further research using art and design epistemologies such as practice as research and research through design is warranted. The growing disciplines

of *design/social/visual anthropology* and *ecological* approaches might be great places to situate further research in and it will be interesting to see if further research outputs come out of the university of Aberdeen's 5 year ERC funded project entitled *Knowing From the Inside*, which is being lead by Tim Ingold. There are many resonances between this body of work and the enquiry contained in this thesis.

I end this thesis with a call to establish meaningful research collaborations about arts and wellbeing which are cross-discipline. My Crystal model of transformational scholarship indicates the richness of a carefully chosen team of double agents who can dance around, betwixt and between three epistemologies – knowing through making (or materialist epistemology as I have called it) being equally as important as the better known ways of doing research in health.

This recognises that the current available research tends to be siloed within disciplines, the Arts in Health movement for example, has not really engaged with the knowledge generated by creative arts therapists. Social scientists are doing great participatory arts-based research, which tends to be more theoretically rich than the arts in health literature but could do with being informed by the perspective of makers.

Finally I observe that for my own profession of Occupational Therapy and Science, that now is the time for us to claim our expertise in the meaningful occupation of creative making and to find ways to frame this expertise as research. My work with Activity analysis could be seen as a potential starting point to develop suitable tools which prompt *materialist* ways of thinking as we continue to develop our theoretical and philosophical base.

Appendices

Appendix 1 comprises of a description of the scoping review method that was employed for both the review of the DST literature and the review of the literature on activity analysis. The table of results from the scoping review of occupational therapy texts which informed my choice of activity analysis method is then presented. (Table B).

Appendix 2 is the completed Occupation-based activity analysis for participant Mark that was used to inform the presentation of the research findings of part two of the enquiry.

Appendix 1

Much of the literature on *activity analysis* exists in Occupational Therapy academic books and book chapters aimed at students undergoing pre-registration training and practicing occupational therapists. No existing relevant literature review of activity analysis literature within Occupational Therapy was found. A scoping review methodology was chosen for the review. A scoping review is an appropriate approach to literature review where the intention is to “map” relevant literature in a broad field of interest (Arksey & O’Malley, 2005) in order to determine key concepts and the main sources and types of evidence available. Scoping reviews are useful when the relevant literature exists in a variety of formats for example grey literature. It is also a literature review method which is gaining popularity (Pham et al., 2014), particularly in the consideration of health research (Levac, Colquhoun, & O’Brien, 2010) for example Juckett & Robinson, (2018) scoping review of evidence-based Interventions with community-dwelling Older Adults, which was conducted by USA based Occupational Therapy researchers. And O’Donovan et al., (2019) which is an example of a scoping review of participatory visual methods with community health workers.

Arksey & O’Malley (2005) propose the following framework for a scoping study:

Stage 1: identifying the research question

Stage 2: identifying relevant studies

Stage 3: study selection

Stage 4: charting the data

Stage 5: collating, summarizing and reporting the results

And a parallel element “consultation exercise”

Stage 1: Identifying the research question

Primary research question.

The following question guided the selection of relevant sources:

- What has been written within the international occupational therapy literature, about activity analysis – with a focus on sources published in the last 10 years?

Secondary research questions.

- What key concepts/terms/models inform each source?
- What practical tools are associated with each source?
- What variation is there from country to country about how activity analysis is considered within the profession?

Stage 2: Identifying relevant sources and stage 3: study selection

Initial Inclusion/exclusion criteria – the focus is on publications in English since 2008 including books, book chapters, journal articles within peer reviewed journals, grey literature with a focus on that published by occupational therapy professional bodies. Only the latest edition of each source was considered.

I used the CINAHL electronic database of nursing and allied health to find relevant peer reviewed sources as well as Google Scholar.

I used Sheffield Hallam University library search and also the Royal College of Occupational Therapists library to locate the basic Occupational Therapy texts. I carried out a hand search of these to find the chapters within edited books, with attention paid the most recent edition of each book considering activity analysis. I also used Google and Amazon to find books with Activity analysis or Occupation Analysis in their title. Anything written outside of the Occupational Therapy profession was excluded

Search terms:

- Activity analysis and occupational therapy
- Occupation Analysis and occupational therapy
- Task analysis and occupational therapy
- Occupation based activity analysis

I attempted to find literature from a range of different areas of the world, however, a limitation of this review is that it only contained sources that are easily accessible in English so there will be a bias towards the literature published by developed countries and that published in English.

Stage 4: Charting the data.

The landscape table in the next section sets out the data retrieved. This is presented in under the following headings: *citation and date reviewed, About the authors, a description of the source, definition of key terms used, theories, models and tools associated with the source ad finally a description of any practical tools provided within the source.*

Stage 5: collating, summarizing and reporting the results

As other authors have pointed out, there is no universally accepted method of activity analysis. The terminology used to describe the skill also varies.

The development of a coherent terminology for OT is a project invested in by several theorists and groups, often lead by national professional bodies. The work of Jennifer Creek and ENOTHE to work towards a unified terminology across the European nations is noted as part of the Tuning project. This work was published outside of the date range of the scoping review so is not included in detail here. - it also seems to have limited influence on the profession (although it is difficult for me to tell as I have not been able to interrogate the literature from the non english speaking world)

Of greater influence in the texts including detailed consideration of activity analysis has been the development of “the framework” published by the American Occupational therapy association (American Occupational Therapy Association, 2014).

The AOTA published the Universal Terminology III (UT-III) in 1994. In 1998 a committee began revising the document to include clarity on the scope for Occupational Therapy practice as well as terminology. The first edition of this new document was published in 2002, the 2nd in 2008 – each revision adapting to developments in the profession. Now in its 3rd edition, it offers a comprehensive and detailed consideration of the realm of concern of occupational therapists, as practiced in the US. Its approach to concepts and terminology has been highly influential in occupational therapy text books considering activity analysis since 2014, both within the US and those texts aimed at an international audience. The sources that make reference to *the framework* include (Curtin, Egan, & Adams, 2017; Pendleton & Schultz-Krohn, 2018; Taylor, 2017; Thomas, 2015; Tubbs & Drake, 2017).

Curtin et al., (2017) contains no less than 5 chapters that met the inclusion criteria for this review, and the latest edition of Kielhofner's Model of Occupation (Taylor, 2017) maps the Model of Human Occupation concepts against both *the framework* and the International Classification of functioning, Disability and Health (ICF). (World Health Organisation, 2001)

The framework has gained in influence internationally because the most recent edition bases its approach to the terminology of the ICF. The ICF classifies health and disability in a way that acknowledges that illness may arise from socioeconomic and environmental factors as well as disorders that are biological or medically defined (Thomas, 2015; World Health Organisation, 2001). And thus is seen as a good fit with the realm of concern of occupational therapy within the profession.

The way the framework is set out indicates that its authors' conceptualisation of occupational therapy concerns mainly work with individuals, this is in contrast to the growing body of literature within occupational science and occupational therapy which calls for a more collective understanding of occupation which includes the perspectives of a more diverse sector of the population. For example (Hammell & Iwama, 2012; Hammell, 2019). However, the 3rd edition of the framework does include health promotion and occupational justice as two out of eight possible outcomes of an occupational therapy process.

Although *the framework* has contributed significantly to the consistency of the use of terminology, finding consensus among occupational therapy authors about how to use terminology within this area remains a challenge. Table A below outlines the different approaches to terminology that have been noted within the sources reviewed:

Description	What this is called by the sources in the scoping review
Breaking down a “doing” into its steps and component parts (e.g. making a cup of tea) in order to understand what is involved- this is as it may typically be done and without a specific person or context in mind	Task Analysis (Creek, 2010) Activity analysis (most authors)
The reasoning skills that a therapist uses to design an experience for a specific person which intends to match a specific set of meaningful actions to a specific person in a specific context and to plan this experience so it is at the just right challenge for the person – not setting up the person to fail or making it so easy that it would be boring and meaningless. The strengths difficulties and preferences of the individual are taken into account, as is their specific context.	Activity analysis Activity synthesis and Occupational Mapping (Creek, 2010) – when this is done in partnership with the client Occupation Analysis
The observation by an occupational therapy practitioner of a specific person in a specific context actually doing a specific set of things with a view to working out where any problem areas or difficulties are.	Occupation analysis Occupation-based analysis Performance analysis Analysis of occupational performance (Chard & Mesa, 2017)

Table A: approaches to terminology

Conclusion of Stage 5

In the light of the findings of this review, I select the occupation-based analysis format from Thomas, (2015) as the basis for my consideration of activity analysis. This source is based on *the framework* and includes comprehensive descriptions and guidance about how to conduct the analysis. This will be used to analyse the data from part two of my enquiry, the digital story workshop.

Parallel consultation exercise

I wish to acknowledge the following people who have helped me gauge current thinking about activity analysis and current trends of thought on this topic within the field of occupational therapy practice and education.

I am grateful to the editorial team of the 6th edition of Creeks occupational therapy and Mental health text book for sharing their insights on activity analysis with me as they prepared their re-write of the relevant chapters to activity analysis in that publication. In particular Wendy Bryant, as well as my co-author Helen Mason working with me on the Creative Activities chapter.

The Royal College of Occupational Therapist librarian was also very helpful with identifying search terms. As was my director of studies Dr Claire Craig and the Occupational Therapy team at Sheffield Hallam university, particularly Margaret Spencer and Maureen Coleman, who are involved in teaching activity analysis at undergraduate level and also Bev Bird and Carol Duff at University of Lincoln.

Table B on the next page is the results of stage 4 of the scoping review.

Citation Source and date reviewed	About the authors	Description of source	Definition of key terms used (Task analysis/activity analysis/occupation analysis/occupation-based activity analysis)	What theories/models/tools are associated with this source	Description of practical tools provided
<p>(Kielhofner & Forsyth, 2009)</p> <p>Sheffield Hallam university library 15/10/2018</p>	<p>Kielhofner was the Chicago based author of the widely known model of human occupation (MOHO) Forsyth is the UK collaborator for MOHO, based in Scotland. Duncan is also an academic and educator based in Scotland. He is the editor of Skills and also Foundations for Practice - a well known UK textbook</p>	<p>Skills for Practice is a UK text book covering the basic skills of an Occupational Therapist from the perspective of an international set of chapter contributors.</p>	<p>"Activity analysis is the process for finding and/or adjusting an occupation to achieve some therapeutic benefit or allow a person to engage in a former or new occupational role" p91 . Only describes an analysis in relation to an individuals needs. emphasises the importance of a theory driven approach to activity analysis</p>	<p>offered structure: Physical, sensory/perceptual, cognitive, social, emotional and cultural demands. Suggests that a practice model should be selected to guide the analysis, namely MOHO or Biomechanical Model, Motor Control Model, Cognitive and Perceptual Models or Sensory Integration Model - offers case study to illustrate each practice model.</p>	<p>none.</p>
<p>(Kielhofner, 2009)</p> <p>Sheffield Hallam university library 15/10/2018</p>	<p>as above</p>	<p>in this, the 4th edition of Kielhofner's text book, he seeks to redress a perceived imbalance from previous editions away from the practical application of occupational therapy and the everyday work of occupational therapy practitioners .</p>	<p>follows the same concepts structure and tone of Skills for Practise - with more detail and examples. Describes Activity Analysis as a "critical component of therapeutic reasoning~" p308 Note: The 5th edition of this book (Taylor, 2017) does not include a specific consideration of Activity Analysis and neither Activity analysis or Occupational Analysis are present in the index</p>	<p>as for Skills for Practice chapter</p>	<p>none.</p>
<p>(Miller Kuhaneck, Spitzer, & Miller, 2010)</p> <p>Royal College of Occupational Therapists library 19/11/2018</p>	<p>lead author is a Connecticut based associate professor with stated interests in Autism and sensory processing. Spitzer is an OT in private practice based in California</p>	<p>Positions Play as meaningful occupation for Children and states that the key to success of OT interventions is the meaning of the activities that are used with clients. Purpose of book is a specific text for work with children to address the need to enable students and novice therapists to apply activity analysis to paediatric interventions to create a fluid, playful atmosphere. the work of Jean Ayres is acknowledged as a key influence for the authors.</p>	<p>offers the following definition of activity analysis: "a process of examining the essential elements of a task or activity to identify both its fundamental requirements and its opportunities for therapeutic use. Justifies the non-use of the term occupation quotes Fidler & Fidler 1963 p75 in that the stated purpose of activity analysis is to "arrive at an understanding of the activities inherent qualities and characteristics, its meaning in and of itself, irrespective of a performer" uses Fidler and Fidler's (1963) Outline for Activity Analysis Overview</p>	<p>work of Jean Ayres - sensory integration. Fidler and Fidler (1963) Outline for Activity Analysis Overview. Suggests that activity analysis needs to be combined with a chosen frame of reference and clinical reasoning employed to allow the therapist to find the "just right". Frames of references discussed are: Occupation-Based, Neuromaturation-based and Jean Ayres Sensory Integration.</p>	<p>offers template "general activity analysis format with explanations" along with several worked up examples and</p>

Citation Source and date reviewed	About the authors	Description of source	Definition of key terms used (Task analysis/activity analysis/occupation analysis/occupation-based activity analysis)	What theories/models/tools are associated with this source	Description of practical tools provided
<p>(Pool, 2012)</p> <p>Royal College of Occupational Therapists library 19/11/2018</p>	<p>Jackie Pool is a leading Occupational therapist in the UK specialist in dementia care who formed her own organisation, Jackie Pool associates which specialises in resources for leadership and workforce development in dementia care.</p>	<p>the PAL is a tool to help match abilities with activities in dementia care, which take account of individuals life histories. the PAL instrument is recommended for the activity of daily living skills training and for activity planning by NICE as it is in the National Clinical Practice Guideline for Dementia (NICE 2006)</p>	<p>this book and its PAL tool is a practical resource to be used not just by Occupational therapists. It does not offer any theory or definitions, but takes a step by step approach to assessing the activity level of the person and then selecting appropriate activities. Activity analysis is clearly behind the development of the PAL, but it has been simplified as to be useable by those without specific training</p>	<p>Activity levels are: Planned, Exploratory, Sensory and Reflex</p>	<p>Tool free to download or copy from book - comprehensive guidance given and case stories</p>
<p>(Thomas, 2015)</p>	<p>USA author.</p>	<p>A whole book dedicated to Activity analysis. Now in its second edition</p>	<p>Makes distinctions between Occupation-Based Activity analysis and Activity Analysis. Citing Crepeau (2003)p192, she defines Occupation-based Activity Analysis as analysis which "takes into account the particular persons interests, goals, abilities and contexts, as well as the demands of the activity itself"</p>	<p>Follows the concepts and structure of the Occupational Therapy Practiced Framework 3rd Edition AOTA 2014</p>	<p>Proformas and worked examples for both Activity Analysis and Occupation based activity analysis</p>
<p>(Mackenzie & O'Toole, 2011)</p> <p>Sheffield Hallam university library</p>	<p>Australian editors with contributors from Australasia, Britain and Canada.</p>	<p>Seeks to widen discussion about it outside of western centric understandings of activity analysis for the novice practitioner or student of occupational therapy</p>	<p>uses term occupation analysis to put emphasis on meaning, action and feelings. This is essential to a person centred approach. Addresses the different definitions and understandings among different authors about the relationship between Occupation, Activity and Task</p>	<p>discusses all the main occupational therapy models e.g. PEO, MOHO, KAWA CMOP-e, a couple of Australian models and how each considers occupation analysis also the ICF is considered in its own chapter written by the editors.</p>	<p>the book contains many learning consolidation exercises to assist the reader with their comprehension of the text. it is a book designed to stimulate thought and discussion however there is a resource section at the back which contains a range of forms associated with each chapter.</p>

Citation Source and date reviewed	About the authors	Description of source	Definition of key terms used (Task analysis/activity analysis/occupation analysis/occupation-based activity analysis)	What theories/models/tools are associated with this source	Description of practical tools provided
<p>(Crepeau, Schell, Gillen, & Scaffa, 2014)</p> <p>Royal College of Occupational Therapists library 19/11/2018</p>	<p>US authors</p>	<p>the 12th edition of this major OT textbook sets out the core knowledge of the profession from a USA standpoint. The first edition was in the 1940s however this edition is pre the 3rd edition of "the framework"</p>	<p>follows the format of the 2nd edition of "the framework". makes distinction between "occupation" and "Activity" - Occupation analysis is "the analysis of a specific occupation the client wants or needs to do in the actual context in which these occupations are performed." - A customized approach - that OTs use distinguishes the analysis OT does as opposed to the many other professions who carry out activity analysis such as engineers and vocational educators. "Activity analysis" is an analysis that happens in the abstract or general sense. - quotes Peirce (2001) definition of activity "an idea held in the minds of persons and in their shared cultural language. An activity is a culturally defined and general class of human actions.... An activity is not experienced by a specific person; is not observable as an occurrence; and is not located in a fully existent temporal, spatial, and sociocultural context" p139 offers a box containing a comparison of different sources proposing to nest the subunits of occupations within the broader category - concludes that there is lack of agreement - makes the chapter somewhat confusing. introduces the term "orchestration of occupations".</p>	<p>2nd edition of "the framework".</p>	<p>offers table 21.2 analysis format for Activities and Occupations with worked example.</p>

Citation Source and date reviewed	About the authors	Description of source	Definition of key terms used (Task analysis/activity analysis/occupation analysis/occupation-based activity analysis)	What theories/models/tools are associated with this source	Description of practical tools provided
(Creek, 2010)	Jennifer Creek is a UK author and theorist.	This book arose out of the ENOTHE terminology project which took 8 years to reach consensus across Europe on a systematic approach to understanding OTs professional terminology "it is a structure for the organisation of professional knowledge, not a framework, not hierarchical - a dynamic, complex structure that can accommodate the flexibility of expert occupational therapy practice. chapter 12 seeks to define the three terms: task analysis, activity analysis and occupational mapping - which is used instead of occupational analysis as it "better describes the collaborative process by which the client and therapist move towards recognition and understanding of the individuals unique pattern of occupations" p207	says that the term "activity" fell out of favour in the 1990s however European definitions are: Task analysis = breaking up an activity into its task sequence. Activity analysis is breaking up an activity into the components that influence how it is chosen, organised and carried out in interaction with the environment. "Occupational mapping is a collaborative process between the therapist and client through which the persons subjective experienced of occupation can be explored"	Fidler and Fidler has been cited revealing the interest the author has in psychodynamic frame of reference. e.g. chapter 5: "deciphering the message." And the activity analysis in. the section on Activities, reality and symbol.	

Citation Source and date reviewed	About the authors	Description of source	Definition of key terms used (Task analysis/activity analysis/occupation analysis/occupation-based activity analysis)	What theories/models/tools are associated with this source	Description of practical tools provided
<p>(Perlman & Bergthorson, 2017)</p> <p>personal collection 27/11/2018</p>	<p>Contributors from all over the world including many of the professions leading theorists. editors are from Australia, UK and Canada respectively. Chapter authors are both from Canada.</p>	<p>this is a key UK text book, formerly titled Occupational Therapy and Physical Dysfunction, first published in 1981 and now in its 7th edition. the book is aimed at early career occupational therapists and students. it is interesting to note that this book contains no less than 4 chapters devoted to various kinds of activity analysis.</p>	<p>defines task, Activity and Occupation Analyses. citing Thomas 2015 and Mosey (1986). discusses them as a continuum and uses grocery shopping as an example to illustrate the various concepts outlined in the chapter. i.e. Task, Activity and Occupation.</p>	<p>It discusses the PEO model as a "foundational conceptual framework for occupation analysis as it facilitates an understanding of how an individual, group or community may choose meaningful occupations." and then offers grocery shopping examples to illustrate application of chosen aspects of CMOP-e and MOHO when conducting an Occupational Analysis</p>	<p>illustrations using grocery shopping of the concepts outlined in the chapter.</p>
<p>(Martini & Kessler, 2017)</p>	<p>Canadian chapter authors</p>	<p>Dynamic Performance Analysis (DPA) began as a method of task performance of children with developmental coordination disorders. Developed by Canadian Paediatric Occupational therapist and educator Polatajko et al (2000) it forms part of the CO-OP approach (Cognitive Orientation to daily Occupation to daily Occupational Performance) which is a group therapy for children living with motor coordination difficulties. ref: Polatajki, H.J., Mandich, A., & Martini, R (200) Dynamic performance analysis: A framework for understanding occupational performance. American Journal of Occupational Therapy, 54, 65-72</p>	<p>DPA focuses on the observation and analysis of actual performance of an occupation or activity by a specific individual. The therapist looks for performance problems or breakdowns in completing a task and then working collaboratively with the specific individual analyses the possible causes and strategies for overcoming the breakdowns. Occupational Performance is thought of as a hierarchy of levels which are Occupation/Activities/Tasks/Actions and Movements or mental processes. The focus is on the activity and its various levels - not the persons impairment - and here is how DPA differs from Activity analysis. The chapter authors state that "when the focus is on the person's impairment and activity demands, the tendency is to identify problems with respect to how a person would typically do a task, rather than pay attention to the fit between the occupation and environment and the person's abilities, skills and actions" p209</p>	<p>DPA is said to be a non-standardised tool for occupational performance analysis as contrasted with Standardised performance analysis tools such as AMPS (Assessment of Motor and Process Skills) . "Fundamental to DPA is a rudimentary theory of occupational performance that views Human Occupation from an Ecological Perspective (HOEP). An amalgam of behavioural, cognitive, and contemporary motor theories, HOEP views performance from a top-down perspective as described by Fisher and Short-DeGraff (1993) and Trombly (1993)." Polatajko et al (2000) p67</p>	<p>Detailed decision tree which guides the DPA process. worked examples (practice stories) making Tea and putting on a Buttoned Shirt - worked example of decision tree for each practice story</p>

Citation Source and date reviewed	About the authors	Description of source	Definition of key terms used (Task analysis/activity analysis/occupation analysis/occupation-based activity analysis)	What theories/models/tools are associated with this source	Description of practical tools provided
(Chard & Mesa, 2017) 17/12/2018	Gill Chard is a retired Irish based Occupational Therapist and educator. Sue Mesa is UK based.	Chapter justifies the importance of occupational performance analysis and then focuses on how to perform the core skill of occupational performance analysis. Occupational performance analysis is defined and described in the context of the doing of a task.	Distinction made between task, activity and occupational performance analysis. performance skills in motor process and social interaction are defined and described. "Occupational performance analysis extends the activity analysis process, examining a person doing an activity, which has meaning and purpose to them, within a specific environment and context....[the focus of the chapter is] the analysis of an observed event of a person doing an occupation	Definitions and Terminology taken from the 2014 ATOA framework. Two outcome measures - the assessment of Motor and Process Skills (Amps) and the Evaluation of Social Interaction (ESI) are used to illustrate/demonstrate in the worked examples (practice stories). authors also bring in the Internal Classification of functioning (ICF (WHO, 2001) - distinguishing between the ICF with its focus on body systems and occupational performance skills as is the focus in analysis of occupation performance	uses the taxonomies of the AMPS and the ESI to list performance skills. Provides some short vignettes and longer Practice stories to illustrate

Citation Source and date reviewed	About the authors	Description of source	Definition of key terms used (Task analysis/activity analysis/occupation analysis/occupation-based activity analysis)	What theories/models/tools are associated with this source	Description of practical tools provided
<p>(Chapparo, Ranka, & Nott, 2017) 17/12/2018</p>	<p>Chris Chapparo and Judy Ranka are Australian occupational therapy researchers/academics</p>	<p>"The Perceive, Recall, Plan and Perform (PRPP) System of Task Analysis (Chapparo & Ranka, 1996, 1997), is a standardised assessment tool that is based on task analysis methodology. It simultaneously enables observation of task performance, contextual influences and the client's component abilities. With training, it provides a structured way of assessing a person's cognitive abilities in any occupational performance task and guides subsequent intervention. The PRPP System consists of a two-stage analysis." REF- Using the Perceive, Recall, Plan and Perform System to assess cognitive deficits in adults with traumatic brain injury: A case study Kerrie Fry Leanne O'Brien First published: 08 November 2002 https://doi.org/10.1046/j.1440-1630.2002.00337.x</p>	<p>Task analysis is a term used to break down an occupation into steps for the purpose of identifying errors. Source distinguishes between two stages in the PRPP model - stage one a behavioural task analysis and stage two a cognitive task analysis. The cognitive task analysis consists of 4 processing quadrants - which include for example, attention, sensory perception, memory, response planning and evaluation</p>	<p>PRPP is described as an ecological standardised measure of cognitive strategy use. An observational assessment</p>	<p>uses practice story of Jonas to explore a range of information processing problems that people may experience.</p>

Citation Source and date reviewed	About the authors	Description of source	Definition of key terms used (Task analysis/activity analysis/occupation analysis/occupation-based activity analysis)	What theories/models/tools are associated with this source	Description of practical tools provided
<p>(Tubbs & Drake, 2017)</p> <p>Sheffield Hallam university library</p>	<p>Margaret Drake was the author of previous editions and is an art therapist as well as an occupational therapist who has travelled the world. Carol Tubbs has been involved in editions over the last 10 years. both are based in the southern States of the US</p>	<p>now in its 5th edition. this US book has been around for 20 years. for The latest edition, one of the changes has been to the activity analysis form, which has been revised to better justify the therapeutic benefit of the activity. Carol Tubbs says in her introduction "this book has been a labour of love.....I have found it distressing to see occupational therapists abandon creative approaches in favour of monotonous exercise and physical agent modalities." She says that as therapists we must remind ourselves that we are a profession dedicated to empowering clients to be their own and best change agents. we are about helping individuals find their own path to living their lives with fulfilment and meaning. This looks different for every individual. It is not driven by protocols or techniques, but by self discovery and skilled guidance in building a framework for successful occupational engagement."</p>	<p>does not offer its own definitions but summarises the history of activity analysis and the different schools of thought about terminology.</p>	<p>grounds its terminology firmly in the 3rd edition of the framework, highlighting the influence of the ICF on development of the framework. Offers a consideration of the distinction between grading and adapting - relating the terms to a compensatory/adaptive approach or grading/remediation approach.</p>	<p>provides case examples and a flow chart and a sample therapeutic activity analysis form as an appendix, which is based on the framework 3rd edition</p>

Citation Source and date reviewed	About the authors	Description of source	Definition of key terms used (Task analysis/activity analysis/occupation analysis/occupation-based activity analysis)	What theories/models/tools are associated with this source	Description of practical tools provided
(Creek, 2014) personal collection 17/12/2018	Leading UK based theorist and Occupational Therapy practitioner, now retired.	UK basic text book about occupation therapy in mental health. Contains chapters on the breadth and scope of OT practice - mainly UK authors. The approaches to practice chapter contains a brief section on Activities as therapy.	Activity analysis is defined as "breaking up an activity into the components that influence how it is chosen, organised and carried out in interaction with the environment" which is a definition published by ENOTHE (European network of occupational Therapists in higher education)in 2006. Other terms used are Activity synthesis - for example where a craft activity is done in a group. Activity adaptation, Activity grading and Activity sequencing. Chapter 6 is signposted	none	none.
(McCullough, 2014) 17/12/2018	uk based occupational therapist working in acute psychiatry	this chapter discusses activity analysis in the context of the OT process.	Discusses Activity as a form of therapeutic intervention as central to occupation therapy practice. Discusses Task Analysis as the analysis of steps or sequence in a task. this chapter is an update of the same chapter in a previous edition of the book (Creek and Bullock 2008) and this is extensively quoted. Only Activity analysis is considered - there is no consideration of Occupational analysis or occupation-based activity analysis	states that the format presented for activity analysis is based on several different frameworks citing Fidler and Fidler 1963, Llorens 1976, Mosey 1986; Hopkins and Tiffany 1988. Now rather elderly sources to be drawing on.	none - not a lot of detail is presented

Citation Source and date reviewed	About the authors	Description of source	Definition of key terms used (Task analysis/activity analysis/occupation analysis/occupation-based activity analysis)	What theories/models/tools are associated with this source	Description of practical tools provided
<p>(Molineux, 2017)</p> <p>Sheffield Hallam university library 18/12/2018</p>	<p>Matthew Molineux is a UK based occupational scientist and educator</p>		<p>Actions: A set of movements that form a recognizable pattern.</p> <p>Task: A collection of actions. A combination of tasks becomes an activity.</p> <p>Task analysis: Examination of a task to determine what actions are required to complete the task and where changes could be made to enable completion.</p> <p>Activity analysis: The process of identifying the required steps, processes, and abilities required to complete an activity. Developments in knowledge and professional language have led to the term largely being replaced by occupational or occupation analysis. Activity analysis is now used to refer to an analysis which focuses on an activity in an abstract or hypothetical sense, rather than a particular person engaging in a particular occupation in a specific time and place.</p> <p>Occupation analysis: The process of examining an occupation and identifying all its constituent parts, including, for example, purpose, meaning, stages involved, tools and materials required, perquisites, demands in terms of occupational performance components or body structures and body functions, antecedent and consequent activities, as well as actual or potential variations in each of these elements. The precise use of the term varies within occupational therapy and so it can be used to refer to the analysis that occurs when an occupational therapist observes a client undertaking an occupation. It can also be used to refer to a more abstract analysis of how an individual might undertake the occupation, although this might be more accurately called activity analysis. Occupation analysis is an important occupational therapy skill and can be</p>		

Citation Source and date reviewed	About the authors	Description of source	Definition of key terms used (Task analysis/activity analysis/occupation analysis/occupation-based activity analysis)	What theories/models/tools are associated with this source	Description of practical tools provided
			<p>used as an assessment method, using either standardized or non-standardized tools, or it can be used in treatment planning. Understanding an occupation in this depth can be useful to monitor client progress, plan for therapy, and identify required resources. There is no universally accepted method of occupation analysis, as the purpose of the analysis will partially dictate how it is performed. All methods should, however, cover all three key aspects of person, environment, and occupation.</p> <p>Performance Analysis: A process of assessment that focuses on an individual's ability to perform an occupation, or part thereof. An outdated term that has been largely replaced by occupation analysis.</p>		
<p>(Clifford O'Brien, 2018)</p> <p>Sheffield Hallam university library 18/12/2018</p>	<p>Jane clifford O'Brien is a Portland, Maine USA based Occupational Therapy educator</p>	<p>North American book aimed at Occupational Therapy assistants, students of OT or those deciding if this is the career for them. original author was Barbara Sabonis-Chafee who wrote it in 1989 because there was no text aimed at OTAs to support a US based occupational therapy assistant programme of study. Section 4 contains a consideration of Activity analysis presented as part of the occupational therapy process</p>	<p>Activity analysis is "the process by which the steps of an activity and its components are examined in detail to determine the demands on the client" p155 and drawing on two position papers from AJOT from the 1990s.</p> <p>Activity synthesis. - this term is used to articulate the process of grading and adapting an activity to provide the "just right challenge" "synthesis requires that the practitioner use knowledge of the client's condition the client's individual goals and narrative, and the activity demands</p>	<p>draws on "the framework" two ways of carrying out an activity analysis: 1) link activity analysis with frames of reference e.g. biomechanical or developmental. OR 2) by following "the framework" - which is illustrated using the example of a 72 year old woman with an interest in gardening</p>	<p>case examples illustrate an Activity analysis of brushing teeth and an application of Activity synthesis using the framework</p>

Citation Source and date reviewed	About the authors	Description of source	Definition of key terms used (Task analysis/activity analysis/occupation analysis/occupation-based activity analysis)	What theories/models/tools are associated with this source	Description of practical tools provided
<p>(Pendleton & Schultz-Krohn, 2018)</p> <p>personal collection 21/08/2019</p>	<p>All chapter authors are from USA - of the 70 listed contributors 43 are based in California</p>	<p>8th edition of this standard North American text book. 1241 pages long</p>	<p>The 8th edition of this book aimed at Graduate Ots and practitioners is framed around the OTPF-3 "the framework". And adopts its terminology and structure. However there is no specific section about Activity Analysis or Occupational Analysis and the term is notably absent from the text. However the skill of activity analysis is at the heart of the entire book - its the "elephant in the room"</p>	<p>"The framework"</p>	<p>none - no guidance about how to conduct activity analysis.</p>
<p>(American Occupational Therapy Association, 2014)</p>	<p>The American association of occupational therapists</p>	<p>Now in its 3rd edition, the framework has influenced many of the most recent text books particularly the US ones who have aligned their consideration of occupational therapy with its definitions of the domain and process of the profession</p>	<p>Activity analysis is defined using the definition from Crepeau 2003 p 192 "the typical demands of an activity, the range of skills involved in its performance, and the various cultural meanings that might be ascribed to it" Activity analysis is described as an important process occupational therapy practitioners use to understand the demands a specific activity places on a client. Within the framework, it is acknowledged that the terms occupation and activity are sometimes used interchangeably by practitioners to describe participation in daily life. The framework makes reference to scholarly works that propose that the two terms are different. It then defines occupation as "life engagements that are constructed of multiple activities" (AOTA 2014 p56) Crepeau, E. (2003). Analyzing occupation and activity: A way of thinking about occupational performance. In E. Crepeau, E. Cohn, & B. A. Boyt Schell (Eds.), Willard and Spackman's occupational therapy (10th ed., pp. 189–198). Philadelphia: Lippincott Williams & Wilkins.</p>	<p>The WHO international Classification of Functioning, Disability and Health (ICF)</p>	

Citation Source and date reviewed	About the authors	Description of source	Definition of key terms used (Task analysis/activity analysis/occupation analysis/occupation-based activity analysis)	What theories/models/tools are associated with this source	Description of practical tools provided
(Schell, Gillen, Blesedell Crepeau, & Scaffa, 2019) 21/07/2019	Largely US contributors with some international		<p>Describes Occupational analysis and activity analysis as systematic frameworks to understand exactly what each person wants or needs to do. "Occupational analysis refers to systematically analysing what and how a person or groups of people actually do an activity. Activity analysis refers to considering a more general idea of how things are usually done. " Like the 12th edition, Also uses the term "Occupational orchestration" which is used in no other textbook. "Occupational orchestration reflects the capacity of individuals to enact their occupations on a daily basis to meet their own needs and the expectations of the many environments in which they are required to function. "</p> <p>summarises the debates in the profession about terminology in a box which has been simplified for the 13th edition</p>	The "framework"	Table 25-2 provides an Analysis format for Activities and Occupations using the example case study of James, a 32 year old single male, making a sandwich. This is very similar to the format presented in Thomas (2015).

Table B: results of stage 5 of the scoping review of activity analysis

Appendix 2

Mark's Occupation-Based Activity Analysis

1. Occupation:

This analysis concerns Mark Taylor's engagement in the Digital Story telling workshop which took place on 26th and 27th October 2018

It applies the Occupation-based activity analysis process set out in (Thomas, 2015) which is based on the 3rd edition of Occupational Therapy practice framework: domain and process (American Occupational Therapy Association, 2014). This in turn draws on the ICF (World Health Organisation, 2001)

Area(s) of occupation for Mark Taylor Defined by (Thomas, 2015).

- Activities of daily living**
- Instrumental activities of daily living**
- Education**
- Work**
- Play** – defined as any spontaneous or organized activity that provides enjoyment, entertainment, amusement, or diversion (American Occupational Therapy Association, 2014) (Thomas, 2015) only considers play in the context of child play, not adult play.
- Leisure** – defined as a nonobligatory activity that is intrinsically motivated and engaged in during discretionary time, that is time not committed to obligatory occupations such as work, self-care or sleep. (American Occupational Therapy Association, 2014). It is interesting to consider this category with Mark, who has decided not to engage in paid (or unpaid) work, and instead pursue a lifestyle of prayer and worship". Is a lifestyle of prayer and worship a work or a leisure pursuit?
- Social participation – Subsection: Community.** Defined as engaging in activities that result in successful interaction at the community level (i.e. neighbourhood, organizations, workplace, school, religious or spiritual group (American Occupational Therapy Association, 2014) However, for Mark, Community, Family and Friends/peers – these categories of social participation blend into each other, and don't sufficiently take account of how Mark, a member of an intentional faith community develops strong bonds which transcend these categories and mean more than mere "participation". (White, Lentin, & Farnworth, 2019) call for a review of these established categories used in occupational therapy and their study of adults living with chronic conditions provide empirical support for new categories - namely connecting, contributing and caring - these new categories would seem to have more resonance with the meaning and purpose Mark makes with his engagement with others.

2. Values, beliefs, and spirituality associated with participation:

Mark sees taking part in the digital story workshop in two ways:) 1) as a way of deepening his relationships in his faith community – all people at the workshop are members of the same faith community and so by spending time together and working together this deepens the relationships between us. For Mark, everything about the workshop – the eating together and chatting – what part of him living out his faith and his lifestyle of prayer worship and intentional community. "this feels like family" Para 65 2) as a way of communicating to others about his faith. Not only in sharing his story, but

also the realization that his expression of faith would be part of my PhD and in that way would expose people how may not have had much to do with faith to an authentic and personal faith journey.

3. Contexts and environments: Indicate how each supports or inhibits participation in this occupation:

I found it really hard to put these into categories of supporting or inhibiting – they just are – so I merged the two fields to indicate that there is not a clear distinction between aspects of the environment which inhibit or support participation in this occupation

	Supports	Inhibits
Cultural (Customs, behavior standards, activity patterns and beliefs)	<p>We are mashing together a research culture and a faith culture. In my home there is a culture of hospitality and welcome. As we are all members of a faith community we include prayer and worship in the pattern of the activity</p> <p>This is a new occupation for Mark. He has never made a DST or done any kind of video or media work.</p>	
Personal (aspects of the person that are not health related such as age, gender, education level and socioeconomic status.	<p>Mark is a faith community member seeking to live out a lifestyle of prayer and worship.</p> <p>Mark is in his late 30s. He is educated up to secondary school level. He has a younger sister and an older brother. He is really close to his sister and followed her into this current season of focusing on a spiritual path rather than work. His younger sister is also part of our faith community. His Mum lived with multiple sclerosis throughout his teens and died when he was in his early 20s. His Dad worked as a biochemist researcher at a university. And is now retired.</p> <p>He is taking a season out of work or productive activity – which meant he was able to afford the time to attend a two day intense process. Of the DST workshop. In the past Mark has worked as a barista in a coffee shop and as a nursery assistant. Mark currently lives with two females as part of an intentional Christian community.</p> <p>He plays flute and sings and is also a deeply spiritual person. Mark is a great listener and reflector. Mark describes himself as an “introvert.”</p>	
Temporal	<p>The time that the workshop takes place</p> <p>We only have two days to complete a complex set of activities that comprise a DST workshop. This both supports and constrains. It allows for flow and concentration and immersion in the activity but also adds pressure. The workshop took place on Friday 26th and Saturday 27th of October 2018. As Sunday is often a day of doing church activities and seen as a day of rest for Christians, we chose not to run the workshop on Sunday.</p> <p>The act of making a digital story</p> <p>Spending the time thinking about his life up until now is like an expansion of time – slow looking and crafting something – valuing himself and his own process. A digital story is also a distillation – a condensing of time because a lot that is said in the workshop does not end up in the finished film.</p>	
Virtual	<p>Mark is not an experienced user of technology. He does not continuously check email or social media and did not do so during the workshop – where as everyone else did. The activity is supported by technology however.</p>	
Physical	<p>The space the workshop takes place is my house. This is a big house, there is enough room for Mark to stay over night, which helps with flow of the workshop. The space is warm and comfortable and familiar</p>	

	to Mark. There is separate space for sitting comfortably or being at a table. We have high quality video editing software and recording equipment for him to use.
Social	With Mark are Tallullah (fellow storyteller) Eric her husband, me and my husband Rog. All these people Mark knows well and has known them for at least 3 years. We are part of his intentional faith community

4. Performance patterns:

Parts of this occupation have elements of which of the following? (check all that apply):

Pattern	Describe
Habits (“Acquired tendencies to respond and perform in certain consistent ways in familiar environments or situations – automatic behaviours or action that are performed repeatedly and are part of everyday life”) (Thomas, 2015)p52	Attending the workshop is a special activity, outside of Marks normal routines and habits. This occupation of attending the DST workshop is not an everyday activity – it is everyday activity that is normally the realm of occupational therapy .
Routine	DST does have a pattern and a flow but this is outside of Marks daily or weekly routine.
Rituals	Marks normal habit is to pray and worship, and we did incorporate this ritual into the pattern of the workshop. DST as a ritual – DST could be seen as an enactment of a ceremony, this is what makes it a special occupation which happens at special times.
Roles	Marks role in the context of the workshop is “research participant” friend and community member – which is a closer relationship to friend – more a mixture of friend/co-worker and family member

5. Objects and their properties required:

Tools/supplies/equipment – these were all provided for Mark

Ergonomic workstation including chair, keyboard and mouse to support long hours working at a computer. Software and hardware for video editing (industry standard software so as to allow for ultimate flexibility – adobe premiere pro selected). Scanner to scan physical images, adobe lightroom to process the images. stock footage (royalty free) sound recording and editing equipment – microphone, cables mixing desk, sound mixing software. Mark worked in Rogs home studio to produce his digital story.

Note pads and paper, storyboard template, plan of the workshop – which I stuck up on the wall in the kitchen.

Equipment for stop motion animation – including ipad, tripod, external shutter, lighting, paper, objects to animate – this was potato printing so we needed paint as well as a potato stamp, masking tape and blutak – to keep the paper still while we were animating.

Hospitality – food and drink for the weekend, taking account of Marks preferences.

Preparatory demands – preparation is not included in the activity analysis – so this has been added by me.

Preparation for Mark: Mark was asked to bring 250 words roughly as a starting point for a script, and some images and music he might like to think about using in his story.

Preparation for Rog: Rog worked with Mark on the assembling of his sequence in the video editing software Adobe Premiere Pro – which meant that Rog had to familiarize himself with it in advance of the workshop. This he did the day before the workshop started.

I was already familiar enough with the tools we were using

Space demands/size/arrangement of objects in space/lighting/temperature/noise/humidity/ventilation

As the space is a family home we could control all of these elements and adjust accordingly. Rogs home studio is in regular use and set up already for the sound editing and various types of media editing.




6. Social demands:

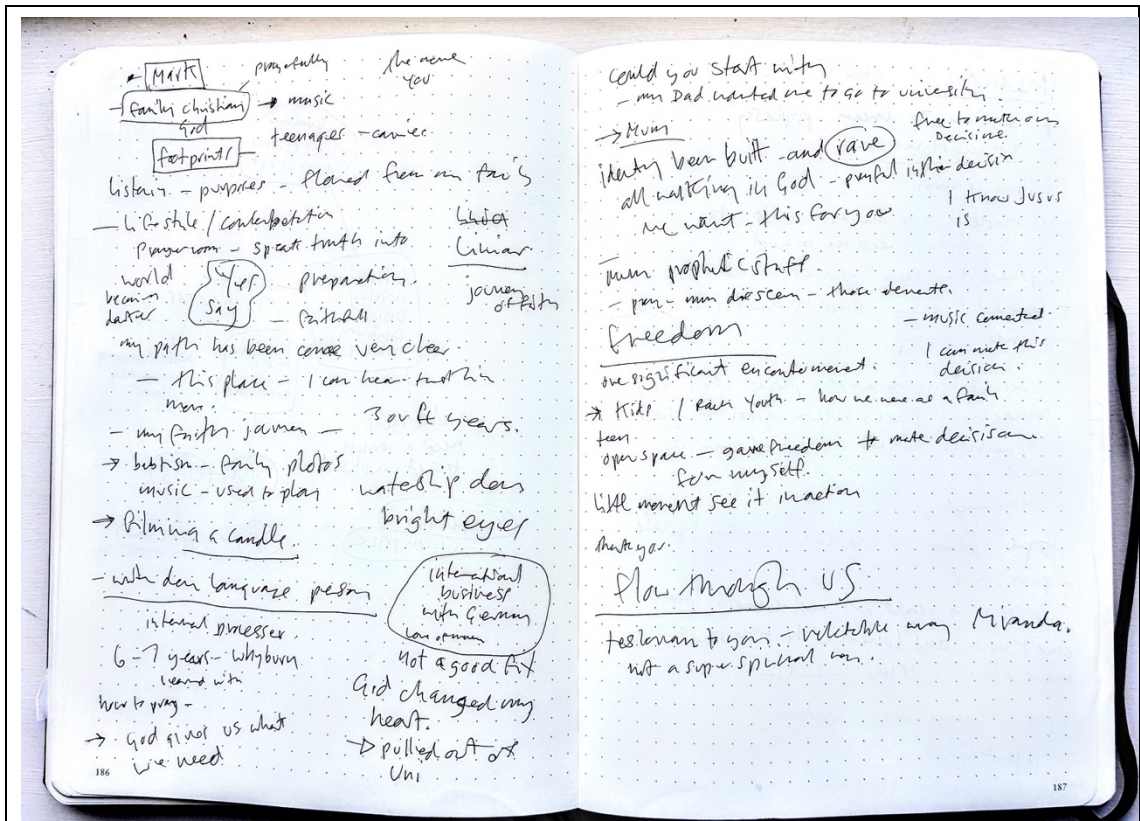
This is a group activity. Mark was able to express himself in the small group, listen to others and support others with their processes, and learn from the others in the group. Mark absorbed everything he saw and learned about, and incorporated many of these new skills into his digital story.


7. Sequence and timing:





Presented below is the entire sequence of activities in broad brush that the 2 day workshop consisted of for Mark. This sequence is based on the transcribed interviews and also the timelapse capture footage of the workshop. I have included images where appropriate.





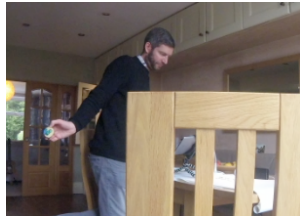

Friday 26th October


Time	Activity	photo
9.30	Mark arrives with Tallullah, dropped off by Eric on the way to work.	
	We gather in the lounge for a period of prayer and worship	
10am	We gather in the kitchen and make a drink. Mark sits on a stool at the breakfast bar. He talks to Tallullah who is sat next to him and also to Rog who comes and stands between him and the camera	
10:30	The storycircle begins. Mark listens to the ground rules and the explanation of the two days from Julie. Mark is drinking a cup of tea and nods attentively.	
10:38	Mark goes out of the room and comes back with a plastic bag. He takes his flute out of the bag and puts it next to him. Then he takes out a note pad and sits back down. He came with several aspects he wanted to include in his faith journey, Bright eyes – a piece of music that has significance to him, the poem “footprints”, family photographs, and the idea of a candle flame in the darkness. Marks hands are very animated as he speaks. He starts by reading the footprints poem off his own copy of it I wrote these notes as he was speaking	



10:47	Mark has only spoken for 10 minutes or so. He then listens to each person in the room respond to what he has said. The timelapse camera shuts off at this point and the data is missing	
	For the rest of the story circle he listened attentively to Tallullah and her presentation of her early story ideas.	
11:40	We have a coffee break and I take this picture of Mark in the kitchen	
12 - 12:45	<p>We go back and sit in the lounge and I talk and Mark listens and watches. We look at What makes a good digital story? Some thoughts and examples.</p> <p>Mark watches the introduction to the 2008 movie WALL-E, to point out how much storytelling can be done without dialogue.</p> <p>Mark watches as I show my digital story "dear hospital". I purposefully did not show my more personal and emotive digital stories because I did not want to raise expectations that this amount of disclosure was expected.</p>	
12:45	We have lunch around the dining room table	

<p>1:30</p>	<p>Stop motion animation warm up exercise. Mark sits on the bench as I demonstrate the first few frames and show the illusion of movement. Mark then and collaborates with Tallullah to make a stop motion animation. Tallullah initiates with the remote shutter and places the first objects, Mark holds back until Tallullah starts drawing, and then he begins to place some scraps of blue fabric on the paper – these mirror the colours Tallullah has chosen. His hand is in shot quite a lot and he is just placing the blue fabric, not moving it. He then draws some blue lines with a pen – a complete blue line each shot – Tallullah responds with blue lines of her own and it begins to look like a sea scape. Now Mark begins to animate the scraps of blue fabric he placed earlier for 3 frames. He goes back to pens and makes a complete figure each shot. I sit with them for a time and also animate a button towards Mark. They combine their scraps of fabric in the middle and then Mark begins to animate some blocks of colour – filling in some of his earlier lines.</p> <p>The bottom picture is taken at 15:07 of the completed animation. Marks work is towards the right and Tallullahs to the left</p>	
<p>15:10</p>	<p>We leave the table and go into the living room. I introduce them to storyboarding. Mark sits on the sofa and works on the script of his digital story – I am not sure if he produces a storyboard or not. He does pick up the footsteps poem and look carefully at it. Tallullah is sat next to him.</p>	
<p>4:30pm</p>	<p>Tallullah goes and records her narration and while she does that I sit with Mark and help him craft his story. I am quite directive as he is wanting to fit a lot of his lifestory in. He shows me his personal photos and I begin to scan these at about 5pm</p> <p>Mark goes for a walk in the park and then helps set up for dinner</p>	
	<p>Dinner is take away curry and Eric, Tallullahs husband joins us.</p>	
<p>9pm</p>	<p>After dinner we sit on the sofa and I record mark and Tallullahs thoughts about the day. Mark spoke first and said he really enjoyed the stop motion animation -he liked the way the two parts flowed in together. Once we started talking about the talking and listening he said. Para 19: <i>“Yeah, listening to each other, it’s an important part of the process isn’t it? When I’ve been able to respond to something someone’s got and pull out those threads and</i></p>	

	<i>those things that are maybe in the story that need highlighting”.</i>	
	Saturday 27 th October	
	After breakfast we begin with prayer and worship led by Eric	
10.00	Story circle – sharing progress so far - very quickly	
	Records his narration with input from Julie and rog	
	Mark rehearses Bright eyes on the flute in the sitting room. The second pic is taken at 10:29	 
	Records his music with Eric on guitar	
	Lunch	
	Works with Julie to make his footprints animation. The footprints animation was my idea and I did all the set up, worked out how to do it myself and then demonstrated it to Mark so all mark needed to do was actually make the prints. This he did on his own. The second pic was taken at 14:06	 
	Break	

15:08	Mark eats a banana sat at the end of the table with Tallullah having been set up to do her sequence. Mark watches the process of Tallullah learning and then me doing the sequence.	
	Rog and mark work together in his studio to put together his sequence. He is there from 15:08	

Sections 8 -11 were not completed as I decided that the work involved would not add any significant information relevant to this particular piece of research. The blank sections are left here so the reader can understand what the Thomas (2015) format offers. In order to use the format usefully I would have needed to specify a small aspect of the workshop – perhaps just one body movement or one small activity to analyse.

8. Muscular analysis:

Muscle	Not used	Minimally challenged	Greatly challenged
Shoulder flexion			
Shoulder extension			
Shoulder abduction			
Shoulder adduction			
Shoulder internal rotation			
Shoulder external rotation			
Elbow flexion			
Elbow extension			
Wrist supination			
Wrist pronation			
Wrist flexion			
Wrist extension			
Thumb flexion			
Thumb abduction			
Finger flexion			
Finger extension			
Trunk flexion			
Trunk extension			
Trunk rotation			
Lower extremities			

9. Identify body functions required:

Function	Not used/ minimally challenged / Greatly challenged	How it is used
<i>specific mental Functions</i>		
Higher-level cognitive: judgment, concept formation, metacognition, executive functions, praxis, cognitive flexibility, insight		
Attention: sustained attention and concentration; selective, divided, and shifting attention		
Memory: short-term, working, and long-term memory		
Perception: discrimination of sensations—auditory, tactile, visual, olfactory, gustatory, vestibular, and proprioceptive		
Thought: control and content of thought, awareness of reality, logical and coherent thought		
Sequencing complex movement: regulating speed, response, quality, and time of motor production		
Emotional: regulation and range of emotion, appropriateness of emotions		
Experience of self and time: appropriateness and range of emotion, body image, self-concept		
<i>global mental functions</i>		
Consciousness: awareness and alertness, clarity and continuity of the wakeful state		
Orientation: orientation to person and self, place, time, and others		
Temperament and personality: extroversion, introversion, agreeableness, and conscientiousness; emotional stability; openness to experience; self-expression; confidence; motivation; self-control and impulse control; appetite		

Energy and drive: motivation, impulse control, appetite		
Sleep: physiological process		
<i>sensory functions</i>		
Visual: quality of vision, visual acuity, visual stability, visual field		
Hearing: sound detection and discrimination, awareness of location and distance of sounds		
Vestibular: position, balance, secure movement against gravity		
Taste: qualities of bitterness, sweetness, sourness, and saltiness		
Smell: sensing odors and smells		
Proprioceptive: awareness of body position and space		
Touch: feeling of being touched, touching various textures		
Pain: localized and generalized pain		
Temperature and pressure: thermal awareness, sense of force applied to skin		
<i>neuromusculoskeletal and movement-related functions</i>		
Joint mobility: joint range of motion		
Joint stability: structural integrity of joints		
<i>muscle functions</i>		
Muscle power: strength		
Muscle tone: degree of muscle tension		
Muscle endurance: sustaining muscle contraction		

Function	None, Minimally challenged or Greatly challenged	How it is used
<i>movement functions</i>		
Motor reflexes: involuntary reflexes– involuntary contractions of muscles automatically induced by stretching		
Involuntary movement reactions: postural, body adjustment, and supporting reactions		
Control of voluntary movement: eye- hand and eye- foot coordination, bilateral integration, crossing midline, fine and gross motor control, oculomotor control		
Gait patterns: movements used to walk		
<i>cardiovascular, hematological, Immunological, and respiratory System</i>		
Cardiovascular system: blood pressure, heart rate and rhythm		
Hematological and immunological systems		
Respiratory system: rate, rhythm, depth of respiration		
Additional functions of the cardiovascular and respiratory systems: physical endurance, stamina, aerobic capacity		
<i>voice and speech; digestive, metabolic, and endocrine systems; and genitourinary and reproductive systems</i>		
Voice and speech: rhythm and fluency, alternative vocalization functions		
Digestive, metabolic, and endocrine systems		
Genitourinary and reproductive systems: urinary, genital, and reproductive functions		
<i>Skin and related structures</i>		
Skin: protection and repair		
Hair and nails		

10. **Body structures required:**

Body structure	Required (✓ if yes)
<i>nervous system</i>	
Frontal lobe	
Temporal lobe	
Parietal lobe	
Occipital lobe	
Midbrain	
Diencephalon	
Basal ganglia	
Cerebellum	
Brainstem	
Cranial nerves	
Spinal cord	
Spinal nerves	
Meninges	
Sympathetic nervous system	
Parasympathetic nervous system	
<i>eyes, ears, and related structures</i>	
Eyeball: Conjunctiva, cornea, iris, retina, lens, vitreous body	
Structures around eye: Lachrymal gland, eyelid, eyebrow, external ocular muscles	
Structure of external ear	
Structure of middle ear: Tympanic membrane, eustachian canal, ossicles	
Structures of inner ear: Cochlea, vestibular labyrinth, semicircular canals, internal auditory meatus	
<i>Voice and speech structures</i>	
Structures of the nose: External nose, nasal septum, nasal fossae	
Structure of the mouth: Teeth, gums, hard palate, soft palate, tongue, lips	
Structure of pharynx: Nasal pharynx and oral pharynx	
Structure of larynx: Vocal folds	
<i>Cardiovascular system</i>	
Heart: Atria, ventricles	
Arteries	
Veins	
Capillaries	

Body structure	Required (✓ if yes)
<i>Immunological system</i>	
Lymphatic vessels	
Lymphatic nodes	
Thymus	
Spleen	
Bone marrow	
<i>respiratory system</i>	
Trachea	
Lungs: Bronchial tree, alveoli	
Thoracic cage	
Muscles of respiration: Intercostal muscles, diaphragm	
<i>digestive, metabolic, and endocrine systems</i>	
Salivary glands	
Esophagus	
Stomach	
Intestines: Small and large	
Pancreas	
Liver	
Gall bladder and ducts	
Endocrine glands: Pituitary, thyroid, parathyroid, adrenal	
<i>genitourinary and reproductive systems</i>	
Urinary system: Kidneys, ureters, bladder, urethra	
Structure of pelvic floor	
Structure of reproductive system: Ovaries, uterus, breast and nipple, vagina and external genitalia, testes, penis, prostate	
<i>Structures related to movement</i>	
Bones of cranium	
Bones of face	
Bones of neck region	
Joints of head and neck	
Bones of shoulder region	
Joints of shoulder region	
Muscles of shoulder region	
Bones of upper arm	
Elbow joint	
Muscles of upper arm	
Ligaments and fascia of upper arm	
Bones of forearm	

Wrist joint	
Muscles of forearm	
Ligaments and fascia of forearm	
Bones of hand	
Joints of hand and fingers	
Muscles of hand	
Ligaments and fascia of hand	
Bones of pelvic region	
Joints of pelvic region	
Muscles of pelvic region	
Ligaments and fascia of pelvic region	
Bones of thigh	
Hip joint	
Muscles of thigh	
Ligaments and fascia of thigh	
Bones of lower leg	
Knee joint	
Muscles of lower leg	
Ligaments and fascia of lower leg	
Bones of ankle and foot	
Ankle, foot, and toe joints	
Muscle of ankle and foot	
Ligaments of fascia of ankle and foot	
Cervical vertebral column	
Lumbar vertebral column	
Sacral vertebral column	
Muscles of trunk	
Ligaments and fascia of trunk	
<i>Skin and related structures</i>	
Areas of skin: head, neck, shoulder, upper extremity, pelvic region, lower extremities, trunk, and back	
Structure of skin glands: Sweat and sebaceous	
Structure of nails: Fingernails and toenails	
Structure of hair	

11. Identify the performance skills required:

Skill	Demand – None /Low/Mod/High	Examples of how skill is used
<i>motor skills</i>		
Aligns		
Stabilizes		
Positions		
Reaches		
Bends		
Grips		
Manipulates		
Coordinates		
Moves		
Lifts		
Walks		
Transports		
Calibrates		
Flows		
Endures		
Paces		
<i>process skills</i>		
Paces		
Attends		
Heeds		
Chooses		
Uses		
Handles		
Inquires		
Initiates		
Continues		
Sequences		
Terminates		
Searches/locates		
Gathers		
Organizes		
Restores		
Navigates		
Notices/responds		
Adjusts		
Accommodates		
Benefits		

Skill	Demand None / Low / Mod / High	Examples of how skill is used
<i>Social interaction skills</i>		
Approaches/ starts		
Concludes/disengages		
Produces speech		
Gesticulates		
Speaks fluently		
Turns toward		
Looks		
Places self		
Touches		
Regulates		
Questions		
Replies		
Discloses		
Expresses emotion		
Disagrees		
Thanks		
Transitions		
Times response		
Times duration		
Takes turns		
Matches language		
Clarifies		
Acknowledges & encourages		
Empathizes		
Heeds		
Accommodates		
Benefits		

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