



Allied Health Professional case studies: Dramatherapist

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The Get Going Group: dramathrapy for people with learning disabilities and mental ill health

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The hybrid dramatherapeutic use of paper airplanes during the time of COVID-19 with a group 5 young people aged 11 to 12

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The Get Going Group: dramatherapy for people with learning disabilities and mental ill health

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Description

The Get Going Groups were developed following the Department of Health's national bed closures in 2015, with the intention of reducing institutionalised care and improve community provision. Patients on specialised Assessment and Treatment Units, designed for people with learning disabilities are first introduced to the Get Going groups when preparing for their discharge and then supported to attend post-discharge. The aim of using this process was to allow people's care to be monitored in the early stages of moving back to communities and to highlight concerns about their transition in the early stages. We know that people with learning disabilities and mental ill health find it difficult to integrate into the community (Mental Health Foundation, 2021) particularly after psychiatric admissions. These groups provide facilitated spaces to meet similar people who understand what they have experienced. This process is important in reducing isolation and loneliness once people leave hospital, as loneliness can be a significant driver of poor wellbeing among people with disabilities (Emerson et al, 2021).

The dramatherapy groups with the use of storytelling and drama methods such as role play provide people a space to meet new people. Dramatherapy is a psychological therapy that offers people with limited cognitive ability a way to communicate and express themselves when written or verbal communication is challenging. It is particularly suited to people where language acquisition and cognition is impaired, as it offers alternative ways of engaging (Beail, 2016). The Get Going groups allow people with learning disabilities an opportunity to communicate and engage with their peers, share their experiences and build friendships outside of hospital.

Context

Approximately 1.4 million adults in the UK have a learning disability defined as a significant reduced ability to understand new or complex information, to learn new skills (impaired intelligence), with a reduced ability to cope independently (impaired social functioning), which started before adulthood (Mental Health Foundation, 2021). Approximately 40% of people with learning disabilities experience psychological distress and mental illness, which is more than double the rate of the general population (Bourne et al, 2020). Co-morbid health conditions and challenging behaviour can mask mental health problems and complicate treatment, which has meant this population have a

history of institutionalisation and unnecessary hospital admissions (Mental Health Foundation, 2019).

In 2011, the 'Winterbourne View Scandal' revealed people in a private inpatient unit were experiencing abuse from staff (Delamothe, 2013). The subsequent review highlighted the lack of progress in services and the government made a commitment to transform care and build up community capacity by March 2019; which included a national bed closure of 35% to 50% of in-patient beds with the aim that people should be moved to local communities with individualised packages of care. Eight years on the BBC's Panorama again exposed abuse and mistreatment of adults with learning disabilities and Autism at another privately-run NHS funded unit, Whorlton Hall; with video footage revealing staff intimidating and mocking patients, unnecessary restraining of patients and 'psychological torture'. There was a recognition that community provision was deficient, in terms of both quality and access there was a fundamental need for changes in provision of care. More recently the Covid 19 pandemic has once again highlighted inequalities in health care for this population.

Historically people with learning disabilities have not received much in terms of psychological treatment (Beail, 2016). Recent Government policies were set to improve services by prioritising research into the prevention of mental illness and core policies stating the importance of people with a learning disability accessing all forms of psychological treatment. The National Institute for Health and Care Excellence's (NICE, 2016) guidelines for psychological interventions for people with a learning disability and mental illness suggests when delivering psychological interventions, treatment should be tailored to their preferences, understanding, strengths and needs. Unfortunately, current mainstream services are not always appropriate or equipped; with traditional talking therapies difficult to engage with, even after adaptations (Bourne et al, 2020).

Cumbria, Northumberland, Tyne and Wear NHS Foundation Trust (CNTW) developed two dramatherapy groups as a proactive approach to provide support to people with a learning disability after a hospital admission. People are first introduced to the groups, when preparing for their discharge and then supported to attend once they move to local communities. This approach allows their care to be monitored in the early stages of leaving hospital and any concerns highlighted about their transition.

The Get Going Groups have been running for five years, they are part of a Trust's discharge pathway from an Assessment and Treatment Unit (ATU). 'A Shinning a light' award was awarded to the group by the Trust for its mutual support approach.

Method

Adults with a learning disability diagnosis and a mental health condition were engaged with this service.

Questionnaires were delivered at the start of treatment and repeated after the intervention (The Rosenberg Self Esteem Scale, The CORE LD, The Glasgow Anxiety Scale and The Glasgow Depression Scale).

The dramatherapy groups were delivered over twelve-weeks with sessions lasting 90 minutes. The community dramatherapy group is a manualised complex intervention with a large component following a mutual and peer support model. Mutual support is a model of peer support by and for people with learning disabilities with involvement of non-disabled people as allies. Peer support is a system of giving and receiving help founded on key principles of respect, shared responsibility and

mutual agreement of what is helpful. At the group the expectations include support staff forming part of the group, which brings a new dynamic and understanding between participant and care staff. This mutual support model offers a space for positive relationships to be built, which extend out into further community activities.

The session structure was familiar each week, to help with feelings of uncertainty: all sessions included a welcome, familiarised warm up game, story making and an ending with reflections. The group content and structure were based upon story development using 'the six-part story' method (Hackett & Bourne, 2014) which has component parts of a story: a character, a place or land, a goal, an obstacle, with some help to overcome the obstacle. This approach generates stories about a situation where a character or characters face a challenge and then requires some support. These stories form the basis for discussions at the groups as people are invited to debate how characters experienced help and what the nature of the help was (Hackett & Bourne, 2014). The stories offered insight into a person's difficulties so that constructive dialogues could be opened up and appropriate support identified. As the weeks progressed and stories developed, the story re-enactment stage was introduced which offered a brief role play, where people witnessing and discussed people's stories which helped enable peer and mutual support (Bourne et al, 2020).

Outcomes

Evaluation shows the groups offer clinical benefits.

Findings from twenty people over a two-year period show:

- **Significant improvements** in self-esteem (mean = pre-intervention 21.35) following the intervention (mean = post-intervention 24.75), with a P value of $p < 0.01$.
- The CORE LD (covering well-being, problems, life functioning and risk to self and others) shows a **mean reduction** from 10.95 to 7.63.
- 'The Warwick-Edinburgh Emotional Wellbeing Scale' (WEMWBS) shows a **mean score increase** of 7.1 post group, indicating improvements in mental well-being.
- A **decrease in anxiety** (Glasgow Anxiety Scale - GAS) with a mean reduction of 4.8 post-group.
- A **mean decrease in depression** symptoms (Glasgow Depression scale -GDS) of 5.53 with a P value of $p < 0.2$ indicating a significant statistical difference post-group.

Qualitative data (Bourne et al, 2020) from support staff who supported a person with a learning disability to attend the dramatherapy Get Going groups found the groups beneficial particularly the link with professionals.

P3..... "I think she's coming to a dip and I think coming to the Monday group when she's coming to a dip I've got somebody to talk to, so I will mention it to somebody".

P2..... "I've worked for the Trust for thirty years now and its very different world to when I started, and you see groups like this getting together and people working together with clients and you don't have an 'us' and 'them', everybody is looking after each other. I think its brilliant – it's all coming together."

Key Points

Manual-based psychological treatments have significant impact on clinical research and practice, advantages including; efficacy, less reliance on intuitive clinical judgment, a greater ease in training and the supervising of therapists in specific clinical strategies and techniques. Theory- driven, manual-based treatments are a defining feature of evidence-based treatments due to their robust evaluation process, particularly in RCTs. In the future we plan to run a Randomised Controlled Trial (RCT) methodology to test the effectiveness of the manualised dramatherapy groups. Given the psychological clinical need for this population an RCT would result in a tested dramatherapy group-work manual for practice and an intervention identified for this population.

We have adapted the group during the Covid 19 pandemic and delivered it online. Pilot evidence suggests that the group was still able to support people during this difficult time. We hope to continue delivering groups remotely and gather further data to evidence the dramatherapy manualised group work for this population can continue to be accessible.

Benefits & Learning

- People with a learning disability and mental illness find it difficult to integrate into the community after a psychiatric admission and need facilitated spaces to meet.
- Dramatherapy groups can be used to help support people back into the community after a long hospital stay.
- The Get Going groups allow a person's care to be monitored and concerns highlighted to the wider professional care team.
- Using a mutual support model can help people to feel valued and supported.
- Storytelling, play and role play can help people to share experiences when verbal communication is difficult.
- The Get Going Group manual can be adapted to be delivered online when people cannot get to a designated venue.

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Title: The hybrid dramatherapeutic use of paper airplanes during the time of COVID-19 with a group 5 young people aged 11 to 12

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Description

This case study explores the use of paper airplanes used in a dramatherapy group delivered to five young people (aged 11-12) attending a UK secondary school.

The group of children were put together for dramatherapy in the autumn of 2020 when the schools were returning to in-person teaching following the first lockdown. Due to individual circumstances, some children were still unable to attend school in person and so the sessions were held in a hybrid fashion (i.e. both online and face to face).

As the dramatherapy sessions had to incorporate the children who were in the room as well as those who were on screen, it was important to find ways to cooperate and share with each other in a safe and therapeutic way.

Many different activities and ideas were suggested by the group members. The first one was making and playing with paper airplanes as this was something that was accessible for all. Making and flying paper airplanes provided a creative outlet, which everyone could do, whilst also creating a talking point. In particular, the activity provided humour and allowed the group to bond and build relationships with each other. (Malik, 2021)

Context

The overall aim of the dramatherapy group was to help a group of Year 7 children (aged 11 and 12 years) to develop peer relationships as they returned to full time education. It is important to note that the children had not had the 'usual' transition to secondary school due to the first COVID-19 lockdown of 2020.

As we know COVID-19 and the subsequent closures of schools had an impact on children's mental health. (Kauhanen, et al., 2022) The school identified children who were at risk of poor wellbeing and would find the transition to secondary school more challenging. The children were selected by the pastoral team at the school based on information from their primary schools. Some had family members who were vulnerable to COVID-19 and others had English as their second language. They wanted the children to begin to build relationships with their peers through the therapeutic process.

The school was a respected state-run school of approximately 900 children. Their enrolment criteria meant that children attended from various parts of the county. Most children who started at the school in year 7 did not attend the same primary school as others in their year group and so building healthy relationships for the students was an important task of the first term.

The group was made up of 5 children, 2 of whom were boys and 3 of whom were girls. A total of 12 dramatherapy sessions were offered to the group. The children had a range of social and economic background demographics. The school's pastoral team had ascertained that these children were more marginalized based on information from their primary schools. One child did not want to attend school because of the risk of passing COVID-19 to her vulnerable mother. Another had parents who were front-line workers and thus, were unable to bring their child regularly into school as the school transportation system wasn't functioning properly. It was for these reasons that the group was required to be hybrid.

Before the group got underway, each child had been assessed individually, with support of the school's pastoral team, to ascertain if they would benefit from a 12 week dramatherapy group. Through discussion with myself and the team around the children we agreed that the objectives of the intervention were -

- social interaction and bonding with peers.
- have a creative outlet for emotional expression
- explore anxiety and stress related to the COVID 19 pandemic

As the children had not met before, they did not know anything about the other group members. Having activities each person could be involved in was of paramount importance, as was being able to do the activities online. In this assessment, it was agreed that each child would have access to paper and pen if they were online and that this would be provided for those who were at school. As such, making paper airplanes as a suggestion during the first dramatherapy session and were deemed an accessible activity for all.

Method

The first session was attended by all children with 3 children being in the room and 2 online. We began with brief introductions of each person, including myself as the therapist. The idea of making a paper airplane was introduced straight away by myself. The group discussed their experiences of making and throwing paper airplanes. I showed the group in the room and those online the basic way to fold a paper airplane. Everyone had a go and showed us how far their plane travelled. This led to a discussion on different ways to fold the paper to improve the distance travelled.

One boy, who was attending the group online, demonstrated to us a different method to fold the paper. We all tried to follow his instructions, and this encouraged clear communication, which could have been difficult due to the hybrid nature of the group. It also led to miscommunication, where some of the planes did not look the same as the one the boy online had created. This made the group laugh and they shared their positive and negative experiences of origami.

The group were beginning to bond and laugh with each other. Developing the session, I suggested we start adding art work or words to the planes they had made. I asked the children to think about parts of their life before the lockdown they would like to keep and what they would like to leave behind and to represent this on their planes. At the end of the session each child agreed to share their plane and artwork with the rest of the group.

Outcomes

At the end of the session, I asked the group what they would like to do with their paper planes. All of the children decided to keep them. One particular boy, who attended the group online, consistently displayed his paper airplane on his shelf behind his desk and it was always on display every time he attended one of our sessions; thinking therapeutically, this may indicate that he valued the sessions. One girl, who had been present in the room during this first session, had managed to throw her plane out through the crack of the external door and it floated into the car park. This became a joke within the group that if there was something that had come to an end, they would suggest that we 'just throw it out of the door'. This became an 'in-joke', and a metaphor within the group. This built common connections and group language, giving the clients a way of bonding (El Bitar, 2022). This creative expression helped to support the groups bonding. Another child had decided to give their paper airplane a name and it became personified by the client. Personification of an object is considered an important part of dramatherapy. (Jones, 2007). During each subsequent session someone in the group would ask how the plane was doing. We subconsciously created an imaginary member of the group. The child would tell us a story about something that had happened during the week that the paper plane had witnessed. This brought great humour and helped the group to bond with someone who was not always able to attend the group in person. Humour in dramatherapy can help the building blocks of a therapeutic relationship (Vávra et al, 2020). This was the case with the dramatherapy group. The imaginary member of the group, the 'in joke' comments, and the airplane character added more substance to the therapeutic relationship. The metaphor and symbolism of them helped the bond the group, create a community language and develop valuable healing during a challenging time. (Mann, 1996).

Key learning points

The lockdown relating to the COVID-19 outbreak has given dramatherapists a new way of working. (Christiana, 2024) . This case study is an example of how hybrid dramatherapy work can be effective. Working with a group of children to build relationships with each other during a vulnerable time and being able to make them feel included when they were both online and face to face is not an easy task. However, using simple creative activities such as paper airplanes can develop initial bonds which, ultimately, bolster the beginning of a relationship.

Through this activity, the group developed their own shared language, relating to their paper airplanes following this session. This included personifying an airplane, and using the experience of throwing one to describe other events which emerged throughout the therapy. Through these shared experiences the group members were able to make each other laugh and communicate with each other in a way that only they understood.

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The school year post lockdown for these young people was made less stressful due to the intervention of this dramatherapy group. They were able to make new friends in their new school even when not meeting face to face.

The client demeanour changed from appearing to be anxious and nervous about this new way of working to engaged and actively participating in activities in both the therapy session and at school. The pastoral team at the school, who referred the children to the group, noticed a marked improvement and enthusiasm for coming into school even during the continuously stressful time of lockdowns and COVID outbreaks.

This case example relates to the practice of dramatherapy and hybrid working. It demonstrates that, embedding creativity into clinical practice, no matter how simple the activity, can be an effective means for relationship building and for, ultimately, reaching therapeutic and clinical goals.

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