

Using play and story-telling in a clinical setting to improve well-being for people with long term conditions.

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Preface

This critical appraisal is original and contains independent work by the author Jane Bourne.

The published works contain original retrospective works by Jane Bourne as an author and co-author as named in the publications.

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Abstract:

This critical appraisal explores nine published works and discusses how they informed and developed the author as a clinician, researcher and teacher over an eight-year period. As a dramatherapist, in clinical practice, working in different clinical settings with several populations, the 'works' use art forms, such as storytelling, role-play and performance to support therapeutic change. The demands of delivering influential research and evaluation in healthcare settings, through innovative methods, and approaches including treatment manuals to support intervention efficacy is described. The challenges of conducting research using main-stream methodologies, such as systematic reviews, and feasibility studies, whilst congruent with arts therapies practice is also considered.

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Introduction

The body of work under scrutiny includes nine published 'works', undertaken to comprehend the impact of the arts therapies on individuals who have long-term mental and/or physical health conditions. This critical appraisal includes an analytic reflection of the 'works' themselves and in order to do this, the context of the research will be elaborated. For reference, the arts therapies, described by the Health & Care Professions Council (HCPC), is a form of psychotherapy that uses creative means such as, art, music or drama, as a way to enable a person to communicate in a safe and supportive environment, whilst gaining perspective on their challenges or emotional distress (HCPC, 2022). The author of this critical appraisal is a dramatherapist and her preferred therapeutic modality is drama, which includes techniques such as story-telling, theatre and projection (Jones, 2007). Dramatherapy described by the National Health Service (NHS) in the United Kingdom (UK) uses 'role play, voice work, movement and stories to explore and solve personal and social problems' (2023).

The main aim of this appraisal was to meet the requirements of Route 4 for Ph.D. by 'Published Works', in identifying key level 8 works, combined with a critical appraisal that contextualises and reflects upon the 'works' (University of Derby regulations, 3.4.1). Although the author accepts there is no one clear 'single golden thread' across the 'works', as considered by Smith (2015) in relation to published 'works', they believe there is still a 'thread' and clear direction of the 'works' with evidence indicating how each study is advanced upon, in terms of research question, study design and methodology.

This is a retrospective collection, and the author did not have an initial intention, when first conducting the research, to use the 'works' within an appraisal award. As a result, they have adopted Kuhn's (1971) tradition of identifying a research paradigm to support their philosophical orientation and help understand the impact of each study as well as the collective. The employment of Gelo's (2015) pragmatic approach, which incorporates both positivism and constructivism and uses a combination of quantitative and qualitative research methods to support and generalise a data set is also drawn upon. Key themes and properties found from the

'works' are placed within a logic model (see appendix J) to provide direction, towards an intervention. Clear dramatherapy 'ingredients', as described by Kieller et al (2023), are also identified, to validate the benefits and uniqueness of dramatherapy within a psychotherapy practice model.

The research questions below were developed and addressed over chronological years and relate to both policy and practice current at the time of each publication (examples of these include, Department of Health 2015; 2020). They consider the act of researching, researcher and clinician with an aim to provide a set of concepts and relations to understand collective research outcomes (O'Gorman and MacIntosh, 2015):

1. Can dramatherapy interventions address clinical need, support a person's care and reduce excessive service use.
2. What are the most beneficial components used to support a person with intellectual disabilities, when delivering a psychosocial intervention and how do we implement these.
3. What are the important factors of delivering and evidencing the arts therapies and how much does the researcher impact on their outcome.
4. Can the same research designs and methodologies used as standard in medical research, be effectively used to evidence the arts therapies.

This appraisal starts by reviewing a publication (Hackett & Bourne, 2014) developed as a clinical response to national policy changes of care for people with a dual diagnosis of an intellectual disability and a mental health difficulty (Department of Health, 2015; 2017) (for reference, people with intellectual disability (PWID) will be used interchangeably with people with a learning disability (PWLD) throughout this appraisal as both global terms). This publication recognises how social isolation, under occupation and barriers to accessing meaningful community provision, contribute to re-hospitalisation (Postrado & Lehman, 1995; Reynolds et al., 2004; Desplenter, et al, 2010). Together with another study (Bourne & Hackett, 2021), it considers therapeutic metaphors, imagination and storytelling as methods to support discharge transitions, empower participants to challenge pre-existing experiences, whilst restructuring new concepts (Jones, 2007). Both papers present an intervention manual that focuses on research benefits found in 'transitional discharge models',

where preparation and gentle exposure is utilised to reduce re-hospitalisation (Reynolds et al., 2004). A systematic review (Bourne et al., 2018) is also included in this chapter undertaken to value the benefits of group dramatherapy in supporting well-being. Evidence from this research is compared with the author's previous work to determine recommendations for future working.

The research emphasis shifts focus in chapter two, and considers psychological and psychosocial group interventions, specifically delivered to PWIDs. A systematic review (Bourne et al., 2021), discusses themes in detail, across psychosocial group interventions, evidenced as beneficial for this population. The studies in chapter two support learning from chapter one, and help understand key 'ingredients' (Kieller et al, 2023) used for working with PWIDs. At the time of publication this research was unique, as no other systematic review had compared published research on psychosocial group interventions' structures, activities, aims or outcome measures used for working with this population (PROSPERO, 2020). A second publication, is then scrutinised, 'The Book Group' (Bourne, 2018), which explores an intervention centred on improving well-being through adjusted picture books, as communication aides ([www.booksbeyondwords](http://www.booksbeyondwords.com), 2022). The innovative nature of this work will be explicated, alongside exploring the benefits of health literacy tools (Rowlands et al. 2013). The final paper in chapter two, is a service evaluation, undertaken during the Covid 19 pandemic (Bourne et al., 2022). Noteworthy aspects are explored on the topic of adaptations needed to clinical services when face-to-face appointments are reduced (Department of Health, 2021). Chapter two underlines the advantages of using patient and public involvement (PPI) in research, to understand the benefits of interventions, whilst also highlighting vital adaptations. A Logic model (appendix J) prepared from findings across studies is also discussed as a framework for working with PWIDs.

Chapter three critically appraises two final published papers. The first, (Wigham et al., 2020), a systematic review, with the intention to demonstrate the effectiveness of arts-based therapies for children with long-term-conditions. The author's contribution, based on quality assessing and bias screening is discussed and reviewed as a mechanism to improve research efficacy. The second paper, an externally funded multi-site feasibility study, shares findings from an art therapy manual when

delivered as an individual treatment to male adults detained in a secure hospital (Hackett et al., 2020). This research, funded by the National Institute of Health Research (NIHR), in preparation for a randomised controlled trial (RCT) (NIHR ICA program, 2022), demonstrates current national interest in improving the evidence base for arts therapies interventions. It also shows how methodologies, mostly used in medical research, can be used in arts psychotherapy practice to demonstrate benefits and outcomes.

Chapter four is a summary of the appraisal. It sets out how as a researcher the author is situated in the published 'works' and how their contribution has added to the theory and practice of the dramatherapy profession. Ethical dilemmas are discussed and highlight future considerations to maintain quality and appropriate ethical standards in the delivery of intervention research. The thread between studies is also discussed alongside the 'works' limitations. Finally, the author's future research plans and aspirations are revealed.

Ethics was granted by the University of Derby and no new research or extra data was collected for this retrospective appraisal of published 'works'. The author acknowledges the drive to politically and socially include all people in research, so as to address the notion of consent, autonomy and best practice, whilst recognising the challenge this can be for PWIDs. They discuss the need for research to support this population's voice through improved processes and the proposal of creative adaptations. A collection of the 'works' can be found in Appendix D.

Chapter 1 – Dramatherapy as a group intervention

There is recognition that psychotherapy treatments are effective in reducing mental health problems (Swartling & Nemirovski, 2019). This chapter considers dramatherapy groups as a psychotherapy treatment option.

The following papers are appraised:

Hackett, S., & Bourne, J. (2014). The Get Going Group: Dramatherapy with adults who have learning disabilities and mental health difficulties. *Dramatherapy*, 36(1).

Bourne, J., & Hackett, S (2022) The Get Going Group: dramatherapy groups supporting adults with learning disabilities and mental ill health after discharge from Hospital. Edited by Milward, H., Seymour, A., *Dramatherapy and Learning Disabilities: Developing emotional growth, autonomy and self-worth*. Routledge

Bourne, J. Anderson-Warren, M. Hackett, S (2018) A systematic review to investigate dramatherapy group work with working age adults who have a mental health problem. *Arts in Psychotherapy*. V 61, pp 1-9.

1.1. Approach and Design – The development of a dramatherapy manualised approach.

Two groups (Hackett & Bourne, 2014) were developed, following an NHS Trust's response to the National Health Service's (NHS) Transforming Care Agenda (Department of Health, 2015; Tingle, 2018). This 'Agenda' set the importance of moving PWIDs from hospital back to their local communities, reducing unnecessary hospital admissions and making effective community psychological provision a priority (MENCAP, 2022). The groups had the intention to provide a creative space for people to share and process their lived experiences, whilst managing anxieties due to changes in provision and social care. This first paper discusses processes in developing a clinical group intervention and manual for practice (Hackett & Bourne, 2014); produced in line with procedures for developing complex interventions (Skivington et al., 2021). It contains a framework with core principles, and structured sessions, so outcomes can be monitored, tested, and evaluated repeatedly. The primary purpose of the manual was to standardise treatment in line with the 'manualized treatment revolution' (Rosner, 2018) so as to improve evaluation and efficacy, reduce a reliance on intuitive clinical judgment (Wilson, 2006; Forbat et al., 2016), as well as identifying active ingredients in line with complex intervention development (Skivington et al., 2021).

1.1.2 Research Outcomes

The development of psychotherapy treatment manuals has reformed psychotherapy research, whilst provoking controversy around their function and value (Carroll & Rounsaville, 2008; Strupp & Anderson, 1997; Garfield, 1996; Westen et al., 2004). Some critics argue, manuals are too prescriptive, 'difficult to apply to real-world clinical practice, antagonistic to clinician intuition, harmful to therapeutic alliance, and detrimental to the impactful delivery of therapeutic skills and techniques' (Wislocki et al., 2023. P.1). By contrast, supporters highlight how psychotherapy manuals establish an evidence-base, provide a protocol to test and evaluate treatment efficacy, a way to disseminate new and emerging treatments to practicing clinicians and provide a structure to support and adhere to treatment (Mansfield & Addis, 2001). Since manuals are also used to learn or improve practice (Wislocki et al., 2023) this first paper (Hackett & Bourne, 2014) was presented at a dramatherapy conference (Colchester University, Sept 2014) to an audience, containing health care practitioners and dramatherapists unfamiliar with this manualised approach. The rationale for gaining practitioners' feedback was to gain opinion, make improvements to the manual, whilst understanding its acceptability within the delivery process. This process is based on the Health Research Authority's advice (HRA) (NHS, Health Research Authority, 2023) on Patient and Public Involvement (PPI). The HRA suggests regularly involving patients, or people with relevant experience, to contribute to how treatment and research is designed, conducted and disseminated, to improve patient outcomes (2022). Feedback from the workshop was positive and strengthened the manual's structure, evaluation and theory, which consequently assisted in formulating it further for practice and publication. Some concerns emphasised within the feedback related to the misuse of the manual by untrained practitioners. However, reassurance was given in the fact the author has 'Intellectual Property' over the manual's use due to legislation (Act, 2014) (Legislation.gov.uk, 2014), which means its use is only licenced to facilitators approved by its author. On reflection the support and feedback from the practitioners highlighted the benefits of involving PPI in research to improve treatment delivery. This process also provided clinicians with a perception that they too can develop complex interventions and treatment manuals to improve standardised practice and evaluation if considered appropriate (Skivington et al., 2021).

Core policies (NICE, 2016; Beail, 2016; Department of Health, 2011, 2015) state the importance of PWIDs accessing validated psychological interventions, which should be tailored to their preferences, understanding, strengths and needs. The dramatherapy manual which incorporates storytelling and role play as primary to the intervention are universal accessible methods used to help people make sense of their world (The Health Foundation, 2016). It also encourages the notion of 'projection', as defined by Jones (2007), which can involve an individual taking on a fictional character and projecting aspects of themselves onto this dramatic material. This approach, key to dramatherapy, has been shown to bring about therapeutic change (Jones, 1991) and is useful when cognitive approaches are difficult to engage with. From a clinical perspective, evidence showed participants' stories, developed at the group, also provided insight to professionals on the difficulties people were experiencing. This then generated constructive dialogues across multi-disciplinary teams so appropriate support could be identified and implemented when and as necessary (Hackett & Bourne, 2014; Bourne et al., 2019).

Within intellectual disability research, there is recognition that crisis teams have little experience of working with people who have cognitive impairments and may struggle to facilitate appropriate early interventions or communicate successfully to those in a crisis (Hassiotis et al., 2020). A beneficial finding was by providing weekly access to clinical professionals who understood participants' clinical need, during transitions in their clinical care, it provided consistent support to their well-being. Having continuity and a professional contact weekly throughout the discharge process eased patient's anxieties whilst providing their wider multi-disciplinary teams with updates on their progress. Consequently, the overall effect was a reduction in crisis interventions, or General Practitioner (GPs) appointments (Bourne et al, 2019), which potentially meant a reduction in care costs and a decrease in burden on the healthcare system. An economic evaluation would be helpful within future research to understand this outcome further.

1.1.3 Research Impact

Prior to the Covid 19 pandemic, this group intervention was part of the 'learning disability specialist services' discharge pathway within a National Health Service

Trust. Its impact was as a response to a national requirement to reduce institutionalised care (Gamie, 2018) and provide a bridging pathway from hospital to the community through transitional support (Hackett & Bourne, 2014). It aligns with the Quality Network Standards for learning Disabilities (QNLD), which emphasises a need for improvements in appropriately resourced community services (Royal College of Psychiatrists, 2021), particularly following the national closure of numerous in-patient beds (Department of Health, 2017). The initiative and development of this intervention, resulted in its authors receiving the prestigious 'Shinning a light' award at the National Health Service Trust's annual event for 'service user involvement' (2014). This award underlined the benefits of creative means, drama techniques and non-verbal communication as a form of engagement for PWIDs in supporting their mental health (Chesner, 1994). Its impact resulted in endorsing the arts therapies within the Trust particularly when working with PWIDs. It also emphasised the importance of the art form and its appeal to this population through active participation and engagement specifically when talking methods are challenging to engage with. The effective benefits of the intervention development led to collaborations with multi-disciplinary teams and further research activity across modalities with academics (Bourne et al., 2020; Bourne et al., 2021; Bourne et al., 2022; Wigham, 2020; Keiller et al, 2023; McKenzie et al, 2022; Salonen et al., 2022). The authors of this paper were invited to provide workshops, training and supervision to clinicians, allied health professionals, psychologists, nursing staff and students on the benefits of the art therapies, which resulted in an increase in patient referrals. To meet demands a recruitment process was undertaken and arts therapists were interviewed and placed on the Trust's bank system (NHS Professional, 2023). This process usually for nurses and medics, opened up job opportunities for arts therapists and in theory increased patient choice.

1.1.4 Professional Impact

The Royal Society for Public Health (RSPH) (2023), endorse innovative programmes and service designs that have a positive effect on public health. This intervention was chosen as best practice and highlighted on the RSPH website. It is currently described and categorised as 'innovative across the sector' (RSPH, 2023) and is the only case study on their site representing dramatherapy. Professionally this

highlighted the author as a pioneering clinician, who is active in responding to national health agendas and public health needs through developing interventional research that meets standards and changes in care. It recognises the need for clinicians to produce innovative practice and research in a response to public health needs and the willingness from the RSPH to validate dramatherapy as a possible treatment option. The benefits of manuals as described by Wislocki et al., (2023) as a means for clinicians to measure and improve practice is also endorsed for the first time within dramatherapy research.

1.2. Approach and Design – A Systematic Review of group dramatherapy

Systematic reviews, are one of the highest forms of evidence, due to their conclusions based on a rigorous critical appraisal of secondary research on a specific topic (Koch et al., 2008; Fernandez et al., 2013; Linares-Espinós, et al., 2018). They are often used in policy making and can guide clinical practice (Clarke, 2011). There are a limited number of systematic reviews which evaluate dramatherapy interventions, so this review (Bourne et al, 2018) was central in its contribution to the profession. It was undertaken following the impact of the Get Going Group intervention (Hackett and Bourne, 2014), discussed in chapter one, so as to see if further studies were comparable in their delivery with similar outcomes. This review demonstrates the value of dramatherapy group interventions in supporting mental health and highlights a rationale for undertaking systematic reviews to inform practice and consider current research within specific populations.

1.2.2 Research Outcomes

For many people mental health challenges include struggles with mood, anxiety, repetitive unhelpful thoughts, emotional distress and the inability to maintain motivation in daily tasks (Leamy et al., 2011). Relationships can often be affected through social isolation, associated stigmatisation, confidence, self-esteem and communication. A strength found in the review was the diversity in which dramatherapy groups supported and built relationships through self-expression, creativity and non-verbal means of relating (Jones, 2007). Two papers (Ramsden, 2010 & McAllister, 2011) discuss how methods of theatre and role-play, in a secure

care setting, enabled participants to make connections with their crimes, whilst empathising with their victims. Three papers with PWIDs (Hackett & Bourne, 2014; Folostina, 2015; Gardner-Hynd, 2010) found storytelling offered a shared lived experience through performance, projection and therapeutic theatre. All papers show improvements in social interaction, and four a reduction in maladaptive behaviours. The research concurs with Ezhumalai et al (2018) findings in how group therapy helps people with their mental well-being through a shared mutual experience. With Keyes (2012) who believes groups offer the realisation that our experiences are not unique, and global researcher, Yalom (2018) who believes groups offer: acceptance, self-understanding, disclosure, skill-development, interpersonal action, and a recognition that people are not alone with their frightening or unacceptable problems.

1.2.3 Research Impact

The recovery elements proposed by the CHIME conceptualised framework (Connectedness, Hope and optimism about future, Identity, Meaning in Life and Empowerment Dimensions) (Leamy, 2011) is paired with and discussed in, the systematic review (Bourne et al., 2018). CHIME a standardised and tested framework used to evaluate personal recovery forms a basis for future recovery-oriented research and practice. It provides a starting point in developing an evidence base to simultaneously help mental health professionals support recovery. The benefits of pairing the review's findings with the established CHIME framework determines how the two projects provide similar values, aims and outcomes within a mental health recovery framework. CHIME is currently advocated within NHS Recovery Colleges, across the UK, to support wellbeing and the self-management of mental health difficulties (Recovery place, 2023). The theory of aligning the systematic review with the CHIME model, potentially endorses dramatherapy interventions as a means to support a person's mental health.

1.2.4 Professional Impact

This review had an impact on the author's profile and led to awards and funding opportunities (see appendix I). The local Clinical Research Network (CRN) recognised the author's profile and invited them to be part of a steering group for PPI

involvement (National Institute for Health and Care Research, 2021) which consequently provided a platform to discuss further research and deliver PPI in future studies (Hackett et al., 2020). Academically, the review, the awards, and PPI involvement, increased the author's knowledge in research methodologies and projects. It progressed collaborations on studies with a focus, on intellectual disabilities (McKenzie et al., 2022; Wigham et al., 2022) systematic reviews (Salonen et al., 2023) and dramatherapy interventions (Keiller et al., 2023). It resulted in further evidencing the arts therapies, alongside identified research gaps and a clearer understanding of dramatherapy as an intervention, and the ingredients that make it unique and beneficial (Kieller et al, 2023).

There are a number of limitations within the review, which include papers only accepted in the English language, due to translation difficulties, and including all study designs rather than those based on their quality. Case studies, with no effective data and containing therapists' opinion was also included in place of empirical data in some of the studies. It is therefore necessary to continue developing robust research alongside clinical practice, to further understand dramatherapy, its benefits, 'key ingredients' and 'active components', (Keiller et al, 2023).

The following chapter looks at group-work, specifically for people with an intellectual disability and the processes involved in recognising current psychosocial interventions in supporting this population. Comparisons with this chapter's evidence on group-work is advanced upon and the knowledge gained is incorporated into a theoretical framework for future practice.

Chapter 2 – Understanding groups for people with intellectual disabilities

The Equality Act (2010) places a duty on services to provide reasonable adjustments for PWIDs to ensure they are not disadvantaged compared with their non-disabled peers. The National Institute for Clinical Excellence's (NICE) clinical guideline [CG155] (2016), recommends research should identify psychological interventions that can improve a person's quality of life. This chapter's studies link with the appraisal's aims to understand the dramatherapy principles which support PWIDs and their well-being, alongside identifying and providing clinical recommendations. The published 'works' considered in chapter two are:

Bourne, J., Leigh-Harison, T., Wigham, S., Morison, C. J., Hackett, S., (2021). A Systematic review: Psychosocial interventions for adults in the community with an Intellectual disability and mental ill health. *The Journal for Applied Research and Intellectual Disability*.

Bourne, J., & Hackett, S. (2017). A story of recovery: Book Group. ACCESS: Journal of Public & Mobile Libraries Group. Spring (15), 20-23.

Bourne, J., (2019). Co-producing a story of recovery for people with learning disabilities. In Newbury- Birch, D & Allen, K. (Eds). *Co-creating & Co-producing research evidence: A guide for practitioners and academics in Health, Social Care and Education*.

Bourne, J. et al (2022) Advances for future working following an online dramatherapy group for adults with intellectual disabilities and mental ill health during the Covid 19 Pandemic: A service evaluation for Cumbria Northumberland Tyne and Wear NHS Foundation Trust. *The British Journal of Learning Disabilities*.

2.1 Approach and Design- A systematic Review looking at group psychosocial interventions

The review (Bourne et al., 2021) sets out to comprehend current community provision for adults with intellectual disabilities and their well-being as there is a limited number of validated studies reporting on psychosocial interventions with this population (Bouvet & Coulet, 2016), despite evidence showing benefits (Beail, 2016). This research aimed to establish beneficial mechanisms for group-working with this population, including using creative techniques to improve well-being. Findings from this review are incorporated in a 'Logic Model' (Appendix J), alongside other studies within this appraisal to guide future dramatherapy group practice.

2.1.2 Research Outcomes

Psychosocial interventions emphasise psychological, social and behavioural factors that can offer benefits such as inter-personal and informative activities, which target behavioural, cognitive, emotional, interpersonal, social or environmental factors to improve a person's well-being (Glover et al, 2020). Yet, there is limited evidence on psychosocial interventions with PWIDs (Cooper et al., 2017). NICE guidelines (2016), and the British Psychology Society (Beail, 2016), recommend psychological therapies are adapted with reasonable adjustments specific to a person's ability and preference. Therefore, identifying and publishing a set of group recommendations to use in clinical practice, was an objective of conducting the systematic review on psychosocial interventions with PWIDs (Bourne et al, 2021). Findings revealed groups which include a creative element, with multiple activities, facilitated over short periods of time, helped participants' concentration. Whilst groups offering regular breaks (each thirty minutes) and a co-produced set of rules, have improved outcomes over groups which don't integrate any of these elements (Bourne et al, 2021). Conclusively, findings from the sixteen studies provide a set of beneficial ways of working with this population. These benefits alongside being published in a peer review journal have been used to influence the prepared theoretical framework (shown in Appendix J) to improve clinical practice for this population.

2.1.3 Research Impact

As part of the dissemination process the review's findings were presented at a National Learning Disability Senate meeting. This was in preparation for revisions to the Quality Network Learning Disability Standards (QNLD). The Senate, made up of advanced clinical professionals, are influential in the field of intellectual disabilities (British Institute of Learning Disability (BILD, 20). The presentation, focused on the discovered benefits of group-working and how offering creative approaches can improve clinical outcomes. Without this research to authenticate creative tools, activities and their benefits in psychosocial interventions, it would have been questionable to present the view to include arts therapies within intellectual disability services. Consequently, following an extensive consultation by stakeholders, including those on the Senate, this review (Bourne et al., 2021) effectively contributed to the QNLD revisions' fourth edition. These standards, currently identify

arts therapies (Art, Music, Drama & Dance movement) as beneficial when working with this population, and recommend arts therapists are included within both community and in-patient multi-disciplinary teams (QNLD, 2021). This research had the desired impact through dissemination in demonstrating creative approaches to engage people and a means to improve patient outcome.

2.1.4 Professional Outcomes

Continuing the success from presenting at the Learning Disability Senate (BILD, 2023) further presentations were shared nationally and internationally (Conferences held at, the University of Derby, 2022; Budapest University, 2021; Vienna, 2021). Dissemination, integral to any research activity increases the visibility of outputs, and innovation (Marín-González et al, 2017), whilst effective dissemination is about getting the findings of research to the people who can make use of them, to maximise their benefit (NIHR, 2023). This review's findings of 'active ingredients' as described by Beresford (2018), in terms of intervention components responsible for clinical change, was limited elsewhere in the literature specifically with PWIDs. The author therefore wanted to effectively disseminate the review's findings alongside benefits of dramatherapy approaches (Bourne et al, 2018) and linked these with Government guidelines on improving community provision through accessible psychological interventions (Department of Health, 2015; NICE, 2016). By packaging the presentation in a format of, practice, theory and policy, it offered a context for clinicians and researchers to adopt these recommendations and endorse the use of more creative approaches.

2.2 Approach and Design – The book groups

The book group' (Hackett & Bourne, 2017, Bourne, 2018) was delivered at a community library and initiated for people residing in an in-patient Treatment and Assessment Unit (ATU). It allied with national policies in improving community integration and psychological provision alongside decreasing medication use (Department of Health, 2015; 2017; Shankar & Wilcock, 2018). The 'book group' used a collection of picture books from the 'Books Beyond Words™' series (booksbeyondwords.co.uk) as communication aides. These allowed individuals and professionals to work together and explore situations using illustrated pictures.

Research on the book group was published in a library journal (Hackett & Bourne, 2017) and a book on co-production (Bourne, 2018).

2.2.2 Research Outcomes

Having an intellectual disability is associated with multiple morbidity, sensory disabilities (Emerson et al, 2016; Cooper et al., 2007), higher rates of mental and physical health challenges, all which can contribute to significant premature mortality (The Healthcare quality Improvement Partnership, 2018). Recently these increased health vulnerabilities have been highlighted as a national priority (Perera et al., 2020; William et al., 2021; Pouls et al., 2021). Evidence suggests improving health literacy improves a person's physical and mental health (Parker & Ratzan; 2019; Wigham et al., 2022; Slowie et al., 2014). The 'book group' was initiated to support well-being, improve health literacy and offer community provision alongside government proposals to decrease institutionalised care for PWIDs (Department of Health, 2015; Wigham et al, 2022). Findings show participants' knowledge, confidence and well-being, improved; evidenced through feedback and self-reported questionnaires. Further groups have since been developed at several North East library sites. These groups now offer a regular community provision, for PWIDs to meet similar people, whilst learning about their health through visual aids and comprehensible material.

2.2.3 Research Impact

Texts on health, are often written at levels which exceed the average public reading age making it disempowering for PWIDs to comprehend (Rowlands et al., 2015). The 'book group' demonstrated the importance of finding innovative ways to reduce the mismatch between a population's skills and what is accessible health material. Participants shared how they were often unsure if something should be a concern for them or not, due to their lack of understanding around their own health and symptoms. Research shows that low health literacy is associated with a greater use of medical services, less preventive care, greater difficulty managing long-term illnesses and higher mortality (Rowlands, et al 2015; Wigham et al., 2022). The participants who attended the book group, were a high-risk group in relation to their health problems, so sharing accessible material about their health was important and

empowering. This concurs with Latteck & Bruland (2020) who have found improving PWIDs health literacy, through accessible texts, potentially supports them to make informed decisions about their health.

2.2.4 Professional Outcomes

The book group was developed as a partnership model between a health service and a local public library provision. Its impact meant the author was nominated for a 'Partnership Award', as part of their NHS Trust's prestigious 'Shinning a light' awards. Subsequently a further 'book group' was developed, with funding allocated from a community charitable Arts Fund (£1200) for additional book titles, on improving physical health. These groups, increased the author's profile, as an advocate for PWIDs and health outcomes, which has resulted in further collaborations with academics. Recent published studies by the author not included in this appraisal, focus on the importance of 'improving access to annual health checks' (Wigham et al, 2022) and preparing 'screening tools in primary care' (McKenzie, et al., 2022) to improve health outcomes for PWIDs.

2.3 Approach and Design – Online groups

During the COVID-19 pandemic most community face-to-face groups ceased and people's well-being declined, with some semblance of normality and productivity only possible through the advancing use of technologies and the practice of remote platforms. During this period, the manualised dramatherapy group (Hackett & Bourne, 2014), discussed in chapter one, moved online (Bourne et al, 2021). The aim was to support people with their mental health, whilst testing the acceptability of modifying a face-to-face manualised story-telling group with PWIDs and limited digital skills to online. This study was produced as a service evaluation.

2.3.2 Research Outcomes

Today in the UK, national restrictions which were applied during the Covid 19 pandemic have been reduced, but the notion of having therapy through digital platforms has been normalised (Zubala et al., 2021). At the height of the pandemic, the Department of Health (2020) recognised one fifth of the UK's population lacked

basic digital skills. A large portion of this population was people with an intellectual disability. When this service evaluation was first initiated, digital platforms were under researched and a new concept for those with an intellectual disability diagnosis (Bourne et al., 2022). The study was small, n = 5, due to challenges sourcing low-cost digital technology for this population, during a pandemic, but retention was good, as everyone completed the study. Retention demonstrates participants found the intervention beneficial and were able to adapt to the online platform. However, limitations are acknowledged in the small participant numbers making the study difficult to generalise. Future research is needed to understand if outcomes from delivering this form of group online are similar to outcomes to when delivered face-to-face.

Awareness learnt from delivering this group during a pandemic was how this population can adapt and are able to navigate digital platforms successfully, over time with the right support. The author, also found the benefits of coaching the use of technology, as part of the intervention, provided secondary gains for patients. By empowering people to use digital platforms, it meant they were able to interact and engage remotely with family, relatives, friends and care workers outside the group setting. More evidence is still needed to understand if findings from this evaluation, which suggests isolation and anxiety, can be reduced when engaging in online group-work (Department of Health, 2020).

2.3.4 Professional Outcomes

The literature, national guidelines and policy changes, identify the need for PWIDs to have access to psychological and psychosocial interventions in community settings, particularly after a hospital admission. Findings from the studies discussed in chapter one and two, are incorporated into the logic model to provide direction, clarity and a matrix-based planning tool (see appendix J). Based on providing an expected theory of change, logic models offer the details of processes, activities and expected results. The logic model shows how using key components identified across the studies, allows us to recognise how dramatherapy as an intervention within a group context, particularly with participants who have intellectual disabilities, and how it can improve their communication, self-esteem, and offer a place to develop friendships and build confidence.

Ethically at times, there is an absence of participants' authentic experiences. The author acknowledges within their commitment to intervention research, aimed at benefiting PWIDs this should not be at the risk of their voices being heard. Mietola, et al., (2017) discuss the importance of hearing from PWIDs stating how, 'finding a balance between the integrity of research and the commitment to examining the mental health of PWIDs'. They also highlight the importance of understanding people with profound disabilities' needs and how making a good life for them with their needs met, is fundamental. For future research the author will engage people with intellectual disability at every stage of the research process and keep in mind how a proxy voice, in terms of staff and/or only carers' voices might not be enough to represent this population's true perception, experience or reality.

The following chapter, looks further at manualised treatment interventions that support the use of the arts as a way to engage therapeutically. It also highlights ways to measure change using standardised research methodologies often believed to be difficult to conduct within arts therapies practice.

Chapter 3 – Improving outcomes for future working

The two final ‘works’ advance on the previous chapters, through promoting a discussion on improving research methods and designs to measure treatment outcome within arts therapy interventions. The ‘works’ considered are:

Wigham. S., Watts. P., Zubala. A., Jandial. S., Bourne. J., Hackett. S, (2020) Using Arts-based Therapies to Improve Mental Health for Children and Young People with Physical Health Long-term Conditions. A Systematic Review, *Frontiers in Psychology*. 11:771

Hackett, S.S., Zubala, A., Aafjes-van Doorm, K., Chadwick. T., Harrison. T. L., Bourne. J., Freeston. M., Jahoda. A., Taylor. J., Ariti. C., McNamara. R., Pennington. L., McColl. E., Kaner. E., (2020) A Randomised Controlled Feasibility Study of Interpersonal Art Psychotherapy for the Treatment of aggression in People with Intellectual Disabilities in Secure Care. *Pilot Feasibility Study* 6, 180.

3.1 Approach and Design – Systematic Review

There are significant gaps in the evidence base identifying interventions supportive to children and young people psychologically (Knight et al., 2019). This gap increases for those with long-term conditions (LTC). LTC can be described as conditions that last a year or longer, impacts a person’s life, requires on-going care and support and can profoundly affect a person’s psychological functioning (Burns, 2009; Anderson et al, 2018). Current arts-based provision, although recommended by NICE guidelines, for children with psychosis (NICE, 2016) [Guideline CG155] are not routinely available in children and young people’s services, for those with LTC (Cruikshank et al, 2016). Systematic reviews are useful tools when gathering research on a rare specific topic, to support evidence-based policy making (Wilson, 2006). This reviews aim was to understand if arts therapies were beneficial in supporting this under researched population as well as informing future guidelines for practice.

3.1.2 Research Outcomes

The author’s contribution to this study was through quality assessing and bias screening (Fernandez et al, 2013). This process can be seen as a form of peer review functioning, to encourage high standards whilst controlling the dissemination of biased research. In using a grading system, and appraisal tool (Critical Appraisal

Skills Program, CASP, 2022), it strengthened and verified the appraisal process to produce clear evidence-based reviews with rationalised recommendations. It meant weak studies were eliminated, and differences between evidence and assumption distinguished. Systematic reviews are often part of the preparation process for future studies, and seen as a form of comprehensive assessment (Perrier et al, 2015). This review is in line with this practice, and has supported the development for a further study with funding allocated (2020) (See Appendix I) and an aim to understand if arts therapies can support children with arthritis.

3.1.3 Research Impact

Heterogeneity, described as a variability across studies, can make results unclear (Higgins & Green, 2008). Methodological heterogeneity (Cherry, 2020), was found in this review, which meant the differing study designs, methods and outcome of assessments used across studies caused a difference in intervention effects. As a consequence, these limitations formulated the final results inconclusive. These limitations are acknowledged and important for future studies, with recommendations communicating a need to improve research designs and methodologies so as to enable a meta-analysis to be conducted in future systematic reviews (Bowers et al, 2014). Comparing different interventions across a collection of studies particularly in an under researched area can be challenging. The authors of this review separated out each intervention method (n = 16), and presented each study in its own context for clarity. Collective themes across studies were also pooled to recognise and highlight any benefits; which included a reduction in anger and depressive symptoms. As this is an under researched area, this study enhanced the knowledge base and has the potential to impact the design of future studies with this population.

3.1.4 Professional Impact

Evidence from this review was incorporated by the author into an arts therapies' response to a NICE guideline consultation, for, Social, Emotional and Mental Wellbeing in Primary and Secondary Education (Guideline NG223), (NICE, 2022). This consultation process highlights the need to increase arts therapies research and the impact of systematic reviews potentially supporting treatment guidelines.

3.2 Approach and Design – Feasibility study

This study's aim (Hackett et al., 2020) was to assess if delivering a future trial was possible, by measuring feasibility outcomes such as recruitment, retention rates, manual adherence and improvements in observed aggression. The study's results informed all outcomes were met and this trial has been placed on the trial registry (clinicaltrials.gov). Trial registration number: ISRCTN14326119.

3.2.2 Research Outcomes

Evidence from randomised controlled trials (RCTs) play a powerful role in the healthcare industry (Bradt, 2012; Friedman et al., 2015) as they are seen as one of the most acceptable ways of judging treatment benefit and clinical effectiveness (Bowers et al., 2014; Lawrence et al., 2015). This individual art therapy, RCT, feasibility study, was the first of its kind in the UK, conducted with adults with intellectual disabilities in secure care settings. Its design met methodological standards, described by Gaglio et al., (2020) to ensure the trustworthiness of research results in health research. It demonstrates the possibility of achieving gold standard research designs to strengthen the evidence base and inform the health and healthcare decisions made by clinicians, and other stakeholders to improve patient care.

3.2.3 Research Impact

Meeting key requirements of the RCT, including recruiting homogenous samples with intellectual disabilities, a treatment method, and delivering a therapist training package was only possible due to the developed structured manual (Hackett et al., 2020). A manual can be seen as a research tool, to understand outcomes (Wilson, 2006). Without it guiding treatment practice, across different study sites, comparing treatment effect would be difficult to establish. The effect of developing a universal manual to guide efficacy and understand treatment and outcomes was essential for this study's feasibility process. Its impact demonstrated a route for other arts therapists wishing to outcome interventions on a large scale rather than the usual case study format. By establishing a way to achieve what policy makers describe as 'gold standard research' in the form of an RCT (Bowers et al., 2014), this study

provided a realistic means for clinicians and researchers to initiate future clinical trials to verify clinical effectiveness.

3.2.4 Professional Impact

Feasibility RCTs play a critical role in evidence-based policy making through providing an objective assessment to understand what works and what does not as a treatment (Bowers et al., 2014). Since RCTs are seen as the most definitive tool for evaluating the effectiveness of an intervention (Friedman et al., 2015) conducting arts therapies studies using this form of methodology is important in evaluating and proving treatment effectiveness. This study demonstrates across clinical modalities and multi-disciplinary teams that RCTs, using arts therapies are possible to conduct. Using a manual to provide adherence to treatment and mirror the intervention across multiple clinical sites, means treatment effectiveness can be easily measured. This study was funded through an awards program, which underlines opportunities for arts therapists to be supported in developing and delivering clinical research, by research academies such as the National Institute for Health Research (NIHR) (see Appendix I).

At a professional level, this study enabled the author to develop their research experience, in training site therapists in manual use and running focus groups to understand therapists' opinions on the manual. Over recent years their profile has increased as a researcher. Being involved with studies such as this, has allowed them to experience using multiple research methods, designs and data collection tools which can be used in their niche field. As a result, they have been invited to facilitate training, on research methods at universities delivering Master's dramatherapy programs, offered research supervision and been included on awards and funding research bids to advance studies on developing intervention practice.

Chapter 4 - Summary

The author's rationale for using the research methods

This appraisal recognises a gap in validated psychological interventions specifically appropriate for meeting and supporting the needs of PWIDs. The author's published 'works' aimed to find ways of developing complex interventions suitable to bridge the gap in services when talking therapies might not be suitable. Unfortunately, the arts therapies are often undervalued professionally, due to a limited number of clinical trials confirming their efficacy (Yotis, 2006) and a lack of peer-reviewed journals within medical research that guide their effectiveness (Ruddy & Dent-Brown, 2007). Quantitative methods parallel to medical or psychological provision, are usually required over qualitative case study designs, typical in appraising arts therapies' practice. The hierarchy structure of research evidence, currently influencing policy making (Fernandez et al, 2013) can be challenging for psychotherapists, particularly arts therapists to adopt into practice. This appraisal explores the dilemma of evidencing interventions in line with medical research, but congruent with arts therapies' clinical practice and demonstrates that effective methodologies used in medical research are still feasible for arts therapists to use in their research designs.

A treatment manual is highlighted alongside the benefits of manualised psychotherapy models, for the purpose of determining an evaluation process and standardising practice. Its impact within the world of arts therapies, particularly dramatherapy is innovative and discussed as a pathway towards evidencing and evaluating clinical practice. Three studies are specifically used as examples: a manualised dramatherapy intervention (Hackett & Bourne, 2014), a feasibility art therapy study (Hackett et al., 2020) and a solution to heterogeneity and in-conclusive findings in a systematic review (Wigham et al., 2020). Each provide a rationale for adopting a treatment manual for practice, and all have a collective focus on improving data collection through routine evaluation and a reduced reliance on clinical judgement. The author's own contribution to the body of knowledge and advancement to the dramatherapy profession is an evidenced-based manual for group-working with PWIDs alongside a delivery framework. The author does acknowledge that manuals have their place and might not be suitable to implement in all clinical settings.

Conducting 'robust' research in line with medical methods, is emphasised as being challenging for arts therapists, with systematic reviews discussed as being instruments to manage this effectively. Three are exemplified in this appraisal, which pose different scientific viewpoints with differing populations and clinical dilemmas. Systematic reviews are versatile, and through a process of gathering evidence from several studies, allows for an understanding of a specific under-researched population or novel intervention, to guide clinical practice and influence policy making. One review (Bourne et al, 2021) used to influence changes in clinical care for PWIDs, is discussed in depth in chapter two, this highlights the value of systematic reviews and how influential they can be. Recommendations within this appraisal suggest clinicians use this approach more often to evaluate specific populations and complex interventions within arts therapies practice.

Dramatherapy as a psychological treatment option

Research gaps in evidencing dramatherapy and the use of creativity in practice is highlighted. As is, the importance of gathering evidence routinely within regular clinical activity. This appraisal aimed to understand beneficial elements and themes when delivering the arts therapies, specifically dramatherapy, to improve patient care. Key principles were found across the published 'works' which highlight therapeutic change, and include methods of storytelling, embodiment, performance and art. These principles are described as being distinctive to dramatherapy and enable participants to be less dominated by their cognitions and more engaged with their inter-relational patterns and emotional responses. The use of drama techniques such as role play, and the process of witnessing others role play, was also highlighted due to them offering and facilitating a process of reflection. This was discussed as being particularly beneficial within a group context where both peer and mutual support offers verification to normalise difficult experiences.

The logic model

As part of this appraisal and original contribution to the dramatherapy profession is a dramatherapy group intervention developed with its inner components, shared relationships and significant elements from across the published 'works'. It is presented as a theoretical framework and although specifically focuses on group-work with adults with intellectual disabilities and mental health challenges, it could be

tested and transferable with other populations. This framework is visually presented in a logic model as an intervention program with inputs and expected outcomes for group-working. The author hopes to advance on this research by sharing it alongside a practice manual to training institutes and universities, at conferences and by conducting further research including a clinical trial.

The impact of Dissemination

The dissemination process of the published 'works' have influenced dramatherapists, and other allied health professionals. They have also been adopted to make changes to national standards such as the QNLD and NICE guidelines. The impact of disseminating this research has promoted the author nationally and internationally as a clinical researcher, who has developed novel empirical evidence to advance the profile of the arts therapies. It also exhibits how as a researcher their contribution has added to the theory and practice of dramatherapy, particularly in group settings with PWIDs.

Limitations

As this was a retrospective study and not a specifically planned-out process in terms of building on each piece of research, the golden thread between studies is not as strong as the author would have liked. Although there are advancements in terms of building on the research methods and informing knowledge within practice, the collection has no central argument as an overarching meaning to the collection.

Ethical considerations are limited within the collection of 'works' and need to be advanced upon in future research. No extra data was collected from participants for this appraisal due to the research being secondary, which presented a clear process from an ethics position. Improving ethical standards with key areas focusing on the relationship between patients, facilitator and researcher and the use of creative techniques and adaptations to engage participants in research processes is needed. The author acknowledges that in a number of their works their role was as both the researcher and facilitator and this has the ability to cause bias in terms of enabling free speech for participants. Recommendations for future studies includes adopting a research assistant to collect data, specifically when collecting qualitative data from participants.

Confidentiality and privacy risks are also not discussed regularly across studies, particularly in relation to anonymising data. Without this, future dissemination could be impacted, as re-consenting at a later date can cause challenges. Within the 'works' author did consider confidentiality and anonymised data, but acknowledges in future research this needs to be specifically stated to reduce any ambiguity.

Plans for the future

The author plans to continue developing complex interventions, manuals and research methods which can adequately demonstrate the arts therapies, as effective treatment options, specifically dramatherapy. Current projects include two systematic reviews and a multi country feasibility study looking at arts-based groups to support child workers. The logic model as a framework for working with PWIDs will also be distributed and disseminated at platforms including conferences and training institutes. The author is working with Newcastle University and the NIHR in developing a grant application as part of the Integrated Clinical Academic (ICA) Programme; the Advanced Clinical and Practitioner Academic Fellowship (ACAF) scheme competition. Their plan is to use the training, development and feasibility work demonstrated in this appraisal to be able deliver the first UK based multi-site randomised controlled clinical trial, as part of this fellowship program. A long-term goal is to become a clinical trials expert in their field.

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Appendix A

The collection of Published works.

A.1	Hackett, S., & Bourne, J. (2014). The Get Going Group: Dramatherapy with adults who have learning disabilities and mental health difficulties. <i>Dramatherapy</i> , 36(1), 43-50.
A.2	Bourne, J., & Hackett, S. (2017) A story of recovery: book group. <i>ACCESS: Journal of Public & Mobile Libraries Group</i> . Spring (15), 20-23.
A.3	Bourne, J. Anderson-Warren, M. Hackett, S (2018) A systematic review to investigate Dramatherapy group-work with working age adults who have a mental health problem. <i>Arts in Psychotherapy</i> , 61, 1-9.
A.4	Bourne, J. (2019). Co-producing a story of recovery: A books beyond words book group. In <i>Co-creating and Co-producing Research Evidence</i> (pp. 78-90). Routledge.
A.5	Wigham. S., Watts. P., Zubala. A., Jandial. S., Bourne. J., Hackett. S, (March, 2020) Using Arts-based Therapies to Improve Mental Health for Children and Young People with Physical Health Long-term Conditions. A Systematic Review, <i>Frontiers in Psychology</i> , 11.
A.6	Hackett, S.S., Zubala, A., Aafjes-van Doorn, K., Chadwick. T., Harrison. T. L., Bourne. J., Freeston. M., Jahoda. A., Taylor. J., Ariti. C., McNamara. R., Pennington. L., McColl. E., Kaner. E., (2020) A randomised controlled feasibility study of interpersonal art psychotherapy for the treatment of aggression in people with intellectual disabilities in secure care. <i>Pilot Feasibility Study</i> 6(1) 180-195.
A.7	Bourne, J., Leigh-Harison, T., Wigham, S., Morison, C. J., Hackett, S., (2021). A systematic review: Psychosocial interventions for adults in the community with an intellectual disability mental ill health. <i>The Journal for Applied Research and Intellectual Disability</i> , 35(1), 3-23.
A.8	Bourne. J., & Hackett,. S (2022) The Get Going Group: dramatherapy groups supporting adults with learning disabilities and mental ill health after discharge from Hospital. Edited by Milward, H., Seymour, A., <i>Dramatherapy and Learning Disabilities: Developing emotional growth, autonomy and self-worth.</i>
A.9	Bourne, J., Brown, C., Corrigan, D., Goldblatt, P., & Hackett, S. (2022). Advances for future working following an online dramatherapy group for adults with intellectual disabilities and mental ill health during the COVID-19 pandemic: A service evaluation for Cumbria, Northumberland Tyne and Wear NHS Foundation Trust. <i>British journal of learning disabilities</i> , 50(3), 376-384.

Appendix B

List of co-authors and contributions

Contribution As a percentage	Publications
70%	Bourne, J. Brown, C. Corrigan, D. Goldblatt, P. Hackett, S (2022) Advances for future working following an online dramatherapy group for adults with intellectual disabilities and mental ill health during the Covid 19 Pandemic: A service evaluation for Cumbria, Northumberland, Tyne and Wear NHS Foundation Trust. Reference: SER-20-089 Northumberland Get going Group. The British Journal for Learning disabilities 10.1111/bld.12462
65%	Bourne, J. , Leigh-Harison, T., Wigham, S., Morison, C. J., Hackett, S., (2021) A Systematic Review: Psychosocial interventions for adults in the community with an intellectual disability and mental ill health. The Journal for Applied Research and Intellectual Disability.
75 %	Bourne. J & Hackett. S., (2021) ' <i>Dramatherapy groups with adults with LD and mental illness</i> ', Edited by Helen Milward and Anna Seymour. Dramatherapy and Learning Disabilities: Developing emotional growth, autonomy and self-worth. Routledge.
5%	Hackett, S.S., Zubala, A., Aafjes-van Doorm, K., Chadwick. T., Harrison. T. L., Bourne. J. , Freeston. M., Jahoda. A., Taylor. J., Ariti.C., McNamara. R., Pennington. L., McColl. E., Kaner. E., (2020) A randomised controlled feasibility study of interpersonal art psychotherapy for the treatment of aggression in people with intellectual disabilities in secure care. <i>Pilot Feasibility Study</i> 6 , 180. https://doi.org/10.1186/s40814-020-00703-0
10%	Wigham. S., Watts. P., Zubala. A., Jandial. S., Bourne. J. , Hackett. S, (March, 2020) Using Arts-based Therapies to Improve Mental Health for Children and Young People with Physical Health Long-term Conditions. A Systematic Review, <i>Frontiers in Psychology</i> .
100%	Bourne, J. , (2019) <i>Co-producing a story of recovery for people with learning disabilities</i> , in Co-creating & Co-producing research evidence: A guide for practitioners and academics in Health, Social Care and Education. Edited by Newbury- Birch, D and Allen, K.
80%	Bourne, J. Anderson-Warren, M. Hackett, S (2018) <i>A systematic review to investigate dramatherapy group-work with working age adults who have a mental health problem</i> . Arts in Psychotherapy. https://doi-org.ezproxy.tees.ac.uk/10.1016/j.aip.2018.08.001 .
50%	Magazine: Bourne, J. , & Hackett, S. (2017) A story of recovery: book group. ACCESS: Journal of the Public & Mobile Libraries Group. Spring (15), 20-23.
30%	Hackett, S., & Bourne, J. (2014). The Get Going Group: Dramatherapy with adults who have learning disabilities and mental health difficulties. <i>Dramatherapy</i> , 36(1), 43-50.

Appendix C

Ethics Approval

Kedleston Road, Derby
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Dear Jane

ETH2122-5123

Thank you for submitting your application to the College of Arts, Humanities and Education Research Ethics Committee, which has now been reviewed and considered.

The outcome of your application is:

approved.

Feedback on your application is available [here](#).

If any changes to the study described in the application are necessary, you must notify the Committee and may be required to make a resubmission of the application.

Please note that ethical approval for this application is valid for 5 years

On behalf of the Committee, we wish you the best of luck with your study.

Yours sincerely

Jonathan O'Donnell

Research Student Office

Vice-Chancellor Professor Kathryn Mitchell
Incorporated in England as a charitable limited company
Registration no 3079282



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Appendix D

Paper summaries

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Research Gate: <https://www.researchgate.net/profile/Jane-Bourne>

D.1 The first publication (2014) reports on a community dramatherapy group as part of a discharge pathway to support people leaving hospital. It is co-authored and was published in the journal, 'Dramatherapy'. The contribution to the knowledge is an intervention manual used in supporting people with intellectual disabilities. The approach offers dramatherapists a developed intervention using dramatherapy techniques such as storytelling, play and performance to work through difficult experiences and concerns.

<https://doi.org/10.1080/02630672.2014.909981>

D.2 In 2017, an article discussing a 'book group' was published in an online library journal. The book group for adults with intellectual disabilities visited a local library weekly, to read books together which only had pictures. The group was beneficial and evidenced through self-reported questionnaires, showing reduction in anxiety and improved well-being. The initiative highlighted a need for community provision and the benefits of health services linking with community libraries.

D.3 In 2018, a systematic review was completed and published in the journal 'Arts in Psychotherapy'. The focus was dramatherapy groups for adults with mental health challenges. It was the first in its field. The studies n =12, covered different settings and population groups, with collective results informing improvements in communication, self-esteem and well-being. A systematic review as a methodology, to evidence dramatherapy and its benefits contributed to the knowledge on arts therapies. This research highlighted the need for more reviews to continue building the evidence base.

<https://doi.org/10.1016/j.aip.2018.08.001>

D.4 In 2019, a book was published by Routledge, on co-production. It was aimed at practitioners and academics in health, social care and education settings. Edited by Dorothy Newbury-Birch, a Professor of Alcohol and Public Health Research at the School of Social Sciences, Humanities and Law at Teesside University and Keith Allan a Consultant in Public Health. The 'Book group', is presented as chapter eight and shares the process of setting up a group for people with intellectual disabilities with the support of a local library. The 'book group', facilitates patients from a psychiatric hospital to attend a group held at a community library. It informs the benefits of health care professionals working alongside community provisions such as libraries to support vulnerable adults. <https://www.routledge.com/Co-creating-and-Co-producing-Research-Evidence-A-Guide-for-Practitioners/Newbury-Birch-Allan/p/book/9781138579019#>

D.5 In 2020, a systematic view was undertaken with a focus on children suffering with long term conditions and arts therapies, as an intervention to support well-being.

The review was novel with an under researched population. Results were difficult to conclude, due to heterogeneity across study designs and methodologies but positive outcomes show a reduction in anger and depression.

<https://doi.org/10.3389/fpsyg.2020.01771>

D.6 In 2021, a feasibility study was conducted and published. This was a multi-site, 1:1 randomised controlled feasibility study, with participants being randomised to either interpersonal art psychotherapy plus usual care or usual care with delayed treatment (waiting-list). The acceptability and feasibility outcomes were met. A multi-site trial is now being delivered across the UK. <https://doi.org/10.1186/s40814-020-00743-6>

D.7 In 2021, a Systematic review on psychosocial interventions for people with intellectual disabilities in the community was published in the Journal for Applied Research into Intellectual Disabilities (JARID). It aimed to understand what interventions were being delivered in the community and benefits. It contributed to the evidence base by producing a list of future recommendations for working with this population.

<https://doi.org/10.1111/jar.12919>

D.8 This study is in press and part of a book, 'Dramatherapy and Learning Disabilities'. There has been a delay in publishing with Routledge, due to the COVID 19 pandemic. Final edits are with the editors, Helen Milward and Anna Seymour. Publication is expected in 2023. This study is presented in chapter thirteen, and details a dramatherapy group developed to provide community support to people with an intellectual disability. It is an advancement from the research summarised at D.1 (Hackett & Bourne 2014). It adds to the knowledge base in providing evidence on using an interventional manual.

D.9 In 2022, a service evaluation was published, its aim was to assess the acceptability of moving a face-to-face dramatherapy group, for people with intellectual disabilities, to an online group during the COVID 19 pandemic. This study contributed to the research knowledge through informing how clinical benefits were still possible for an online dramatherapy group when face-to-face contact limited. Benefits include: friendship building, improved skills in technology, emotional well-being and a reduction in anxiety.

<https://doi.org/10.1111/bld.12462>

Appendix E

Publication Details

E.1 Dramatherapy Journal

Dramatherapy is the journal of the British Association of Dramatherapy. It is a double-blind peer reviewed journal and covers all aspects of theory practice and dramatherapy research. It has an impact factor of 0.3 which means it is in the top 25% of journals. Impact factors can be used to elevate the importance of a journal in its field, and measure the frequency an article is cited from the journal. SAGE' (the journal's publishing house) sharing policy states that a 'final published PDF version of the article can be included in a dissertation or thesis, and where the dissertation or thesis will be posted in any electronic Institutional Repository or database'.

<https://journals.sagepub.com/description/DRT>.

E.2 Arts in Psychotherapy

Arts in Psychotherapy is an international peer-reviewed journal which encourages articles in the fields of art, dance/movement, drama, and music psychotherapy. The journal has an impact factor of 1.87 (up dated 2023). Elsevier the journals' publishing house, gives permission for authors to share their works for scholarly purposes including thesis or dissertations. <https://www.elsevier.com/about/policies/copyright>

E.3 The Journal for Allied Research in Intellectual Disabilities (JARID)

The JARID, is an international peer-reviewed journal published by Wiley. The journal disseminates valued lifestyles for people with intellectual disabilities. It has an international, multi-disciplinary readership, with an impact factor of 2.162 (up dated 2023). Wiley gives permission for authors to share their work for scholarly purposes including a thesis or dissertation. <https://www.wiley.com/en-us/network/publishing/research-publishing/trending-stories/how-to-clear-permissions-for-a-thesis-or-dissertation>

E.4 The British Journal for Learning Disabilities (BILD)

The British Journal of Learning Disabilities is an inter-disciplinary international peer-reviewed journal and leading in the field of intellectual disability. Wiley is its publisher. The journal is a sister to the JARID (E.3) and it has an impact factor of 1.19. Wiley gives permission for authors to share their work for scholarly purposes including a thesis or dissertation. <https://www.wiley.com/en-us/network/publishing/research-publishing/trending-stories/how-to-clear-permissions-for-a-thesis-or-dissertation>

E. 5 Pilot and Feasibility Studies

Pilot and Feasibility Studies, operates an open peer-review system, where the names of reviewers are included on reports for authors. The journal encourages all aspects of the design, conduct and reporting of pilot and feasibility studies in bio-medicine. With published research intending to influence future clinical trials. This

journal has an impact factor of 1.555. All articles published in Pilot and Feasibility Studies are freely and permanently accessible online without subscription. All authors are the copyright holders and have the right to use, reproduce or disseminate their article.

<https://pilotfeasibilitystudies.biomedcentral.com/about>

E. 6 Frontiers in Psychology

Frontiers is the 3rd most cited journal, and open access publisher. It has a high impact factor of 4.232. All articles once published are immediately and permanently accessible online and free of charge. Research is community driven and peer-reviewed by editorial boards over 202,000 top researchers. Frontiers permits unrestricted use and reproduction provided the author is credited.

<https://www.frontiersin.org/about/open-access>

E. 7 Book Chapter, Routledge.

The book, Co-creating & Co-producing research evidence: A guide for practitioners and academics in Health, Social Care and Education, contains my chapter on the 'book group'. The book was edited by Dorothy Newbury- Birch and Keith Allen. This guide discusses co-producing research. It looks at the evidence for co-produced research and outlines theoretical underpinnings. Published by Routledge (2019). <https://www.routledge.com/Co-creating-and-Co-producing-Research-Evidence-A-Guide-for-Practitioners/Newbury-Birch-Allan/p/book/9781138579019#>

E.8 Public Libraries Group

The book group was shared in Access: The Journal of the Public and Mobile Libraries Group. It is a quarterly e-journal going to public and mobile library sector professionals. The journal No sharing restrictions and can be found:

https://www.cilip.org.uk/members/group_content_view.asp?group=201310&id=689188

E.9 Book Chapter, Routledge.

The book containing chapter 13, 'The Get Going Group: dramatherapy groups supporting adults with learning disabilities and mental ill health after discharge from Hospital' is edited by Helen Milward and Anna Seymour. It currently is in press with Routledge and focuses on Dramatherapy with people with learning disabilities through clinical examples. [In Press].

Appendix F – Scientific Research Poster



Using play and story-telling in a clinical setting to improve well-being for people with learning disabilities and long term conditions A PhD by Publication

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Keywords: Arts Therapies, Mental Well-being, Intellectual Disabilities, Story-telling

Introduction and background

There are over one million individuals with a learning disability living in the UK, around 193,700 are school children, just under half have experienced mental ill health. Up until the 1990s, the emotional lives and needs of people with learning disabilities were ignored and any difficulties observed were assumed to be either organically mediated or environmentally contingent. It was believed that people with learning disabilities did not experience the same range of emotions as those without difficulties and maladaptive behaviours resulted in people with learning disabilities being institutionally segregated.

Core policies now state the importance of people with a learning disability, being able to access mainstream services, but traditional talking therapies are often difficult to engage with even after adaptations have been made. For those who are severely impaired, talking therapies are often impossible.

NICE, suggests when delivering psychological interventions for mental health problems in people with learning disabilities, treatment should be tailored to their preferences, level of understanding, strengths and needs; with formulations developed through assessment to understand how a person expresses and describes emotions or their distressing experiences. Over the last six years I have looked at effective complex interventions to support people with learning disabilities and mental ill health. Nine of these publications are being used for a PhD by publication. All link in terms of using the Arts Therapies as complex interventions to support people with learning disabilities and long-term conditions. This poster sets out the early stages.

Aim: To produce a critical narrative of collective publications when using the Arts therapies in a healthcare setting, with recommendations, an action plan & logic model.

Study design: Nine studies collated in a critical narrative, reporting outcomes developed using a PICO framework (Participants, intervention, comparisons outcomes). Areas of interest include:

- Outcomes related to mental health
- Outcomes related to quality of life
- Barriers and facilitators in psychosocial interventions.

Quality Assessment: Studies will be assessed using a CASP checklist to assess their quality (CASP – Critical Appraisal Skills Program, 2018).

Methods: An exploratory critical narrative of 9 publications, 49 article sources and n = 1483 participants.

A 'Framework Analysis' process will be used to sift through the data and sorted in accordance with key issues and themes in a five-step process:

- (1) Familiarisation;
- (2) Identifying a thematic framework;
- (3) Indexing;
- (4) Charting;
- (5) Mapping and interpretation.

A systematic indexed data table will show descriptive themes, identify patterns (similarities and differences), to generate analytical themes so as to interpret the dataset as a whole.

Conclusion and Implications: Findings will be used to devise a 'Logic Model', with short, medium and long-term outcomes. A Logic Model is a road map that presents the shared relationships among data, outputs, outcomes, and any impact. The Model will depict relationships and intended effects for future clinical working.

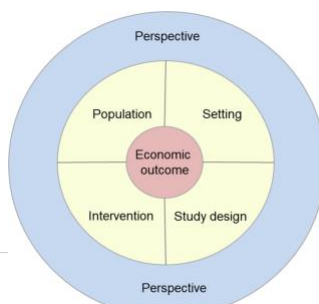
Recommendations: Will be made for future practice and research in an action plan formulated for creative working in healthcare settings with people with long-term conditions and learning disabilities.

Data processing

"I am not happier than I used to be".

"I like meeting my friends at the group and look forward to it every week".

"I feel like I have more confidence, like to do the games and plays it is a good laugh".



Online Group's outcomes

Participants	Glasgow anxiety scores for ID		Glasgow depression scores for ID		CORE-10		Reinforcing adapted Self-Esteem measure	
	Pre	Post	Pre	Post	Pre	Post	Pre	Post
1	33	26	24	25	11	15	16	15
2	35	29	25	24	16	13	16	15
3	17	20	11	13	7	5	27	26
4	19	19	8	0	0	4	20	22
5	24	22	26	14	10	7	16	16
Mean Scores	25.6 v	23.6	18.8 v	15.2	8.8 v	8.0	19.4 v	18.8

Note:
v=versus

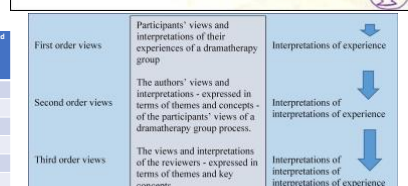
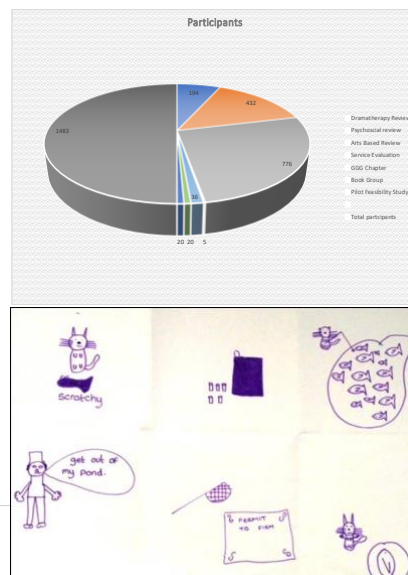
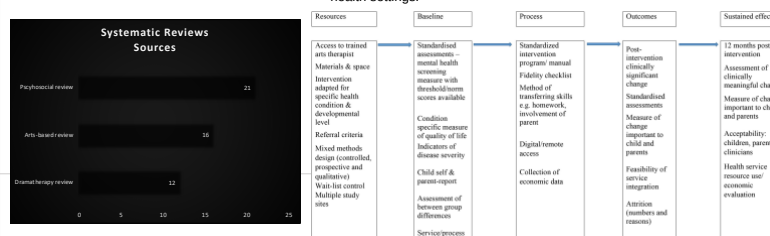


FIGURE 3 | Conceptual model of characteristics evaluating effectiveness of arts-based therapies for mental health and well-being in pediatric physical health settings.



Publications

1. Bourne, J., Brown, C., Corrigan, D., Goldblatt, P., Hackett, S., (2021) Running a community online dramatherapy group for adults who have intellectual disabilities and mental ill health during the Covid 19 Pandemic: A service evaluation for Cumbria, Northumberland Tyne and Wear NHS Foundation Trust Reference: SER-20-089 Northumberland Get going Group.
2. Bourne, J., Leigh-Harison, T., Wigham, S., Morison, C. J., Hackett, S., (2021) A Systematic Review: Psychosocial interventions for adults in the community with an intellectual disability and mental ill health. The Journal for Applied Research and Intellectual Disability. June DOI:10.1111/jar.12919
3. Bourne, J. & Hackett, S., (2021) 'Dramatherapy groups with adults with LD and mental illness', edited by Helen Milward and Anna Seymour. Dramatherapy and Learning Disabilities: Developing emotional growth, autonomy and self-worth. Routledge. [In Press]
4. Hackett, S.S., Zubala, A., Aafjes-van Doorn, K., Chadwick, T., Harrison, T. L., Bourne, J., Freeston, M., Jahoda, A., Taylor, J., Ariti, C., McNamara, R., Pennington, L., McCall, E., Kaner, E., (2020)
5. Wigham, S., Watts, P., Zubala, A., Jandial, S., Bourne, J., Hackett, S., (March, 2020) Using Arts-based Therapies to Improve Mental Health for Children and Young People with Physical Health Long-term Conditions. A Systematic Review, Frontiers in Psychology.
6. Bourne, J., (2019) Co-producing a story of recovery for people with learning disabilities, in Co-creating & Co-producing research evidence: A guide for practitioners and academics in Health, Social Care and Education. Edited by Newbury- Birch, D.
7. Bourne, J. Anderson-Warren, M. Hackett, S (2018) A systematic review to investigate dramatherapy group work with working age adults who have a mental health problem. Arts in Psychotherapy. <https://doi.org.ezproxy.tees.ac.uk/10.1016/j.aip.2018.08.001>.
8. Bourne, J., & Hackett, S. (2017) A story of recovery: book group. ACCESS: Journal of the Public & Mobile Libraries Group. Spring (15), 20-23.
9. Hackett, S., & Bourne, J. (2014). The Get Going Group: Dramatherapy with adults who have learning disabilities and mental health difficulties. Dramatherapy, 36(1), 43-50.

Appendix G

Gibb's reflective cycle (1988) used to review the papers

	Description What happened?	Feelings What were my feelings?	Evaluation What did or did not go well?	Analysis What sense can I take from this?	Conclusion What did I learn from this?	Action Plan Is there anything I would do differently?
Hackett & Bourne (2014)	A community group developed following national policy changes to support people in the community after discharge from an assessment and Treatment Unit (ATU)	We were building an intervention and developing a manual which could be used as a provision to support people's discharge, which seemed positive.	The group was slow recruiting but once people new about the group we were inundated and had to develop a sister group. Retention was good but also problematic in signing posting to other groups was not always appropriate.	There is a need for community provision for people with learning disabilities and mental ill health in local communities.	Recording outcomes is important for future group development. We regularly did a battery of questionnaires but could be a challenge for people to complete.	Reducing the number of psychometric questionnaires specific to the aim of the group intervention would be easier to manage change and less difficult for this population.
Bourne & Hackett (2017)	We were invited to share the group intervention with the library services using the books beyond words series.	We were proud of the intervention development of a group held at a library for people still admitted on a psychiatric ward. The relationships between the library, the care staff and patients were really positive.	The building of the group with different partners and stakeholders was important. The library offered a safe place for people to go once discharged from hospital.	The paper was a discussion about the process of the intervention and what happened at the group. Some results and outcomes for people who attended was missing.	Recording outcomes and getting qualitative feedback from people who attend would have helped understand the clinical benefits of the intervention rather than a description of what happened.	Recording people's experiences of attending the group and identifying if the safe place message was utilised once discharge had happened would have been beneficial data to disseminate.
Bourne et al (2018)	A systematic review looking at dramatherapy group-work. This was registered with	At times I felt lonely & was overwhelmed with the data and I aware the review was an important	I was isolated, two other authors were involved, but I felt I was holding the	I recognised the importance of this work for my profession and community,	I needed more help, there was a gap in finding international papers which needs to be	I would have liked to have repeated the literature search twice. Search for more international papers, include more authors and incorporate supervision regularly.

	PROSPERO and followed training on Systematic reviews at York University. I didn't know anyone else who had completed this form of study within arts therapies. This was a non-funded piece of work.	piece of research for my profession so it needed to be managed methodically.	process on my own.	so I put pressure on myself. Findings made me wonder if this form of complex intervention was helpful for all people with mental health problems rather than only those with impaired cognitions.	thought about in the future.	
4. Bourne (2019)	A book group to support people in hospital and prepare them for their discharge. It used storytelling and books with pictures developed for this population.	This kind of group-work was really helpful and similar to the Get going Group it offered people a chance to be with similar people in a community setting. Really useful when people have had long term hospital admissions as a way to prepared for their discharge.	More data could have been collected to understand this kind of group's real benefits. The did offer people to learn new skills and share a story together.	I have run this form of group online again with positive outcomes. I would like to test the intervention further.	People with intellectual disabilities find it hard to meet people in the community particularly when they have a mental health difficulty too. Community groups such as this can offer a place for people to meet supported by professionals	This group was a great idea and really helpful that the library was on board. More of these groups could support people weekly in the community. Further testing of the outcomes would help with funding.
5. Wigham et al, (2020)	This was a learning experience, in terms of offering my opinion and contributing to the edits but not actually completing the systematic process of	Felt a little stepped back from this review and its process which I felt was positive. This role from an observer and critical prospectus and I was able to use this knowledge	In hindsight having a bias checker role in a review would have been a good first step rather than setting out as first author as I had done.	This is an important form of research and a researcher's role, since systematic reviews are recognized as one of the highest forms of evidence alongside	As a consequence of this learning process and my contributions to this systematic review, I have been invited to co-author on further reviews.	To continue developing my knowledge and reviews on dramatherapy and/or the arts therapies as a way to appraise current healthcare evidence.

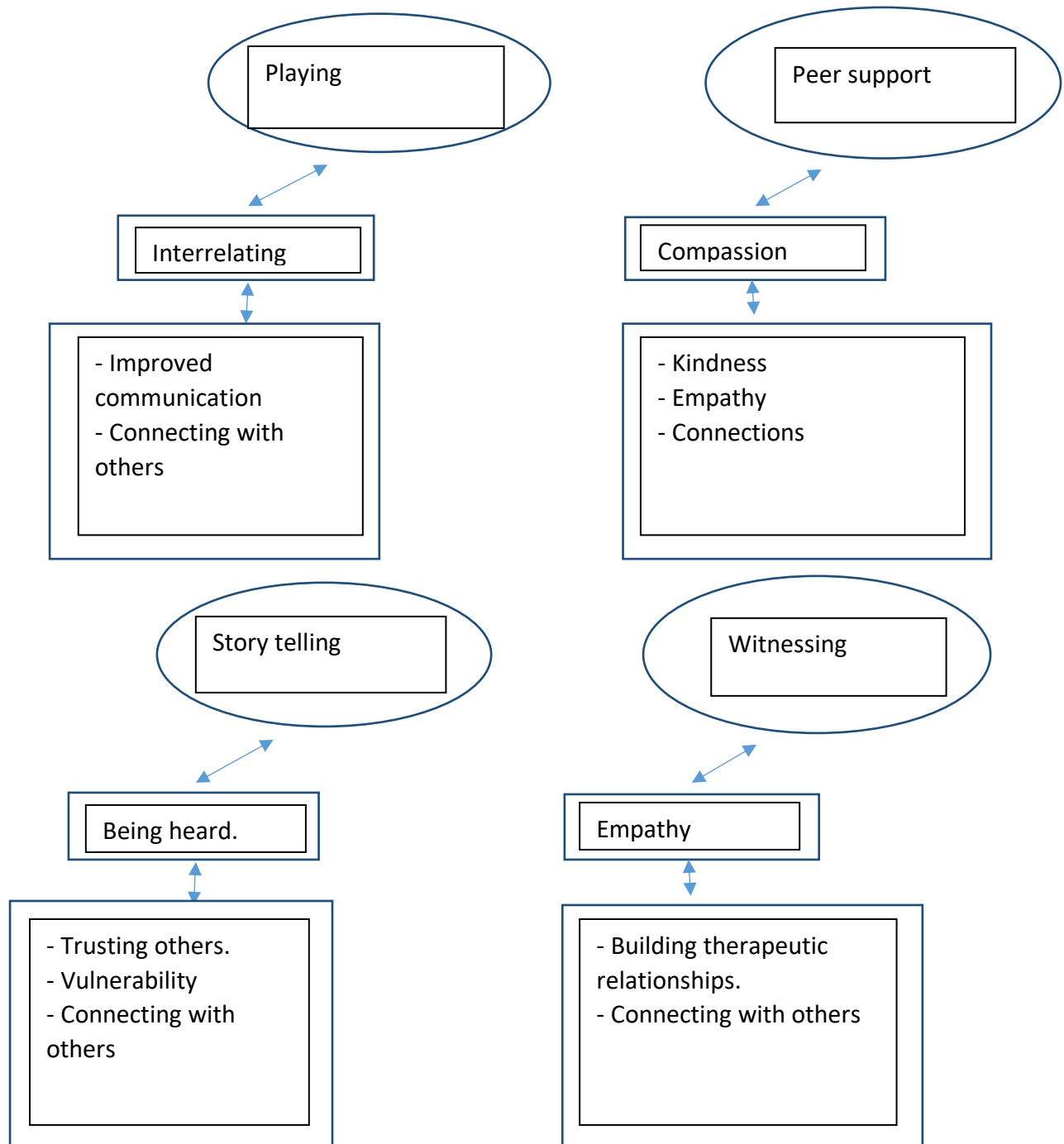
	gathering the literature.	for my next review.		meta-analysis and randomized controlled trials.		
6. Hackett et al (2020)	For this feasibility trial I was part of the manual development and so helped with the intervention training of the therapists. I was also invited to appraise the study report before it was submitted for approval.	I was pleased to have been asked to be part of the project in preparation for the larger trial. I am still involved with this today.	This was a great study, completed well with positive results. There were only 20 participants which is usual in feasibility trials.	I was not leading on the study so felt I was learning as we progressed through the different stages of feasibility testing.	The manual development was helpful to understand the delivery was the same across all the sites. Adjustments made were necessary to test out the intervention in preparation for the definitive trial.	This process confirmed to me the importance of multi-site studies, manual based treatment to offer focus, and the testing out new interventions for clinical development and practice
7. Bourne et al (2021)	This experience as first author on this review was easier and far more contained with extra support.	I felt more competent and was able to be directive with the other authors.	It was helpful to look over other primary research with similar objectives to my own research and make connections in terms of delivery. This helped with the direction of my own research.	There are similar mechanisms across all successful groups which are helpful to consider when developing further interventions and manuals.	This research process was useful to identify what is needed clinically to support this population.	There is real importance in this form of research to evaluate and analysis previous findings.
8. Bourne & Hackett (2022)	This piece of work was written before the pandemic but has still not been published. It discusses the manualised intervention for people with intellectual disabilities, with a case	I was pleased to be invited to write a chapter in a new dramatherapy book on intellectual disabilities. I am disappointed that this is still not published.	The chapter discusses the group, the intervention, a single participant as an example as well as group findings in the form of questionnaire outcomes and qualitative feedback.	It is important to share this group with other people within my profession who work with this population. Sharing interventions can be positive.	Due to this not currently been out in print and a delay in editing for the book, I am a little stuck in getting the data about this intervention into the healthcare domain.	I am looking forward to this being published

	study and extra data					
9. Bourne et al (2022)	This discusses the face-to-face group I delivered but how it needed to be transitioned online during the Pandemic (2020)	This was a difficult transition from a face group to an online group but the benefits were still the same so feel pleased we continued to develop this as an online group	This group has continued to be delivered online which makes it more accessible for people who cannot travel.	We were restricted to who could attend the group as people were dependant on having smart devices and WIFI. It would be positive for this to be seen as a group where devices are given to people to attend.	This evidence continues to add to the other evidence around the group intervention.	I hope to deliver a randomised controlled trial in the future of this group. The data collected will contribute to this.

Appendix H

Themes from the manual intervention

Four main themes from the Get Going Group qualitative data.



Appendix I - Awards and funding over recent years to support research activity

2023 – SHINE Fund award £900 – for staff training on working with people with intellectual disabilities.

2022 – Research Award - £59,439.72 - Hackett, Wigham Bourne et al., Understanding and addressing the cycle of housing instability for people with intellectual disabilities in NENC: A whole systems evaluation of knowledge equality.

2022 – Research award - £20,000 - Hackett, Wigham Bourne et al., Evidence review to understand the impact of allied health professionals on public mental health (mental wellbeing of the public). PHE

2021 – Research award - £11,000 - Hackett, Wigham, Bourne et al., A Scoping review of factors associated with the identification of mental health conditions by primary care providers in people with intellectual disabilities. Research Capability Funding CNTW.

2021 - £100 - Academic research poster Award.

2020 – Research Award £36, 557.00 - Hackett, Wigham, Bourne et al., Group Art-Psychotherapy for Anxiety and Depression in Children with Juvenile Idiopathic Arthritis: A proof-of-concept evaluation of an online family/carers supported intervention. Newcastle Hospitals Charity.

2020 - Research Award £25,355.10 - Hackett, Wigham, Bourne et al., Improving Primary Access for people with Intellectual Disability. North East Commissioning Support. Research Capability Funding.

2020 - £7,000 - Charitable funds supporting COVID 19 initiatives.

2020 - £3,000 - Capability funding - supporting research training.

2020 - £1,300 - WELLS Newcastle and Gateshead Arts fund - the purchase of picture books and pilot study.

2019 - Research Award £2,500 - Green shoots award from North East and Cumbria Research Network.

2019 - Research Award £5,000 - Research Internship, Cumbria Northumberland Tyne and Wear NHS Trust.

2018 - HEE/NIHR ICA fellowship award £56,000 - to support training in a clinical research masters at Leeds University as part of a Clinical Research fellowship.

2017 – Travel Grant - £1,000 - NIHR & Council for Allied Health Professions Research CAHPR at 'The Nurses, Midwives & Mental Health Workers' Annual Regional Conference.

2016 – NIHR Internship program - £6,000 - HEE/NIHR ICA program.

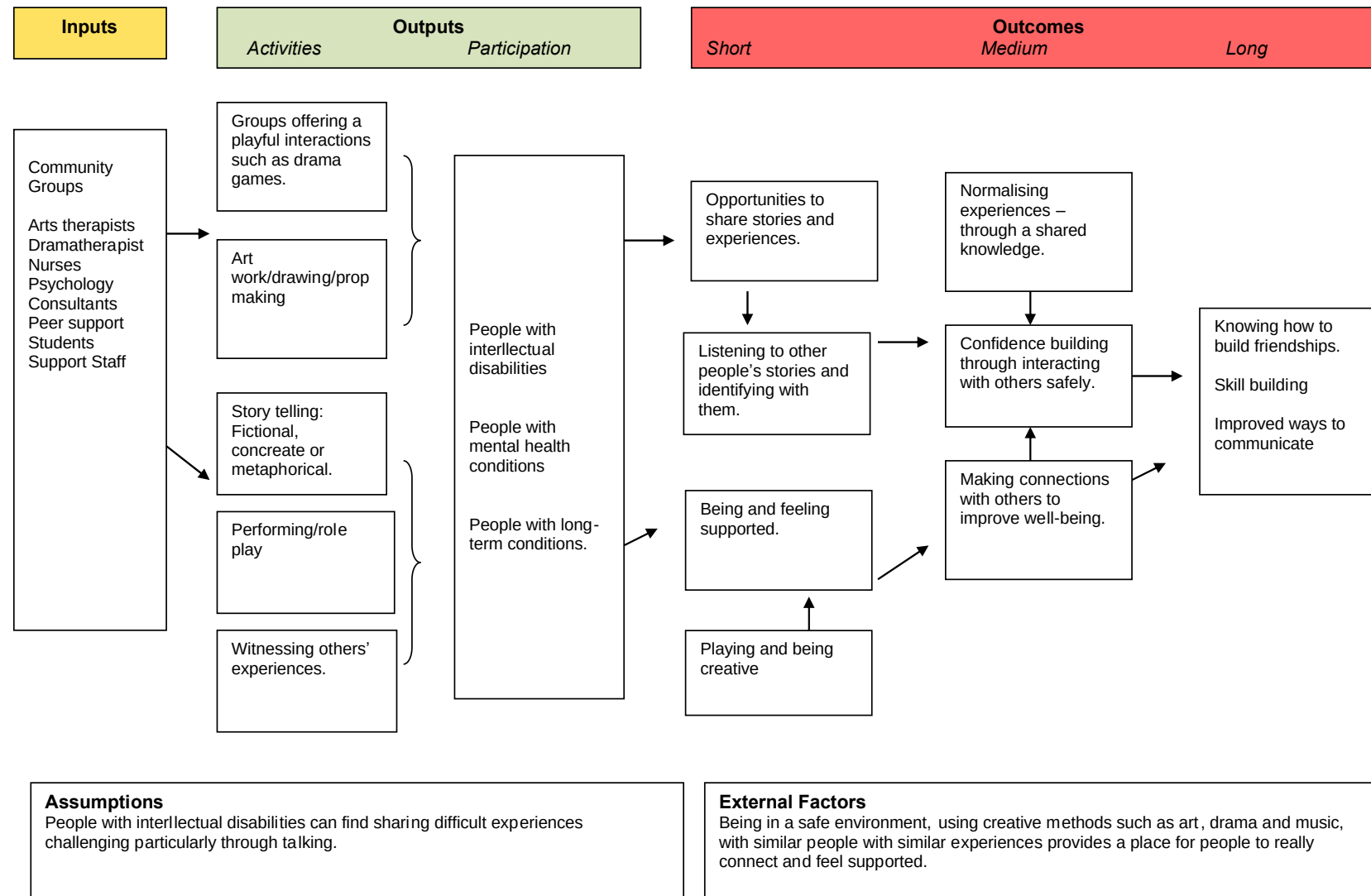
2014 'Shinning Light' Award for service user involvement from Cumbria, Northumberland Tyne & Wear NHS Foundation Trust.

2013 'Shinning Light' Award for The Get Going Group from Cumbria, Northumberland Tyne & Wear NHS Foundation Trust.

Appendix J - A prepared logic model

Developing Dramatherapy Groups using story telling: Program: A Logic Model

Situation: People with long term conditions such as an interlectual disability need improved community psychological provision. Group work can be helpful for people to meet similar people. Groups which offer a creative aspect can help people communicate their difficulties and challenges.



Appendix K

Papers appraised individually under methodology

Appraised Systematic Reviews

Systematic Review Articles appraised.	Did the review address clearly focused question?	Did the authors look for the right type of papers?	Do you think all the important relevant studies were included?	Did the reviews' authors do enough to assess the quality of the included papers?	If the results of the review have been combined was it reasonable to do so?	What are the overall results of the review?	How precise are the results?	Can the results be applied to the local population?	Were all important outcomes considered?	Are the benefits worth the harms and costs?	Comments
Bourne, J. , et al. (2021) A systematic review: Psychosocial interventions for adults in the community with an intellectual disability and mental ill health.	Yes To understand what psycho-social interventions were delivered	Yes	Yes A number of data bases used and the searches were completed by a librarian twice 12 months apart.	Yes Papers were assessed using the CASP appraisal tools.	Yes The papers were either, mixed method, quantitative or qualitative and displayed clearly.	Groups using creative methods had better outcomes Changing activities, having breaks and group rules were seen as helpful	Results Were precise as much as they could be, although there was some missing data on some of the studies.	Yes There were 21 studies included with n= 432 participants and a range of different modalities.	Yes	Yes Benefits are clear and should be adopted in future research and interventions with this population.	There were no RCTs found that met the inclusion criteria. No unpublished papers, non- English were excluded. Limited international papers.
Wigham. S., Watts. P., Zubala. A., Jandial. S., Bourne. J. , Hackett. S, (March, 2020) Using Arts-based Therapies to Improve Mental Health for Children and Young People with Physical Health Long-term Conditions. A Systematic Review.	Yes The aim of the current review is to inform preparation for a feasibility trial of arts-based therapies.	Yes	Yes	Yes None of the studies had global ratings of high quality, 13 studies had a moderate global rating, and 3 studies had weak ratings of quality. Assessment by the (EPHPP) Quality Assessment Tool (Thomas et al., 2004).	No Quantitative pooling of results across studies or health conditions was not always possible and caused a challenge.	Yes The heterogeneity of existing research limits conclusions about the effectiveness. Suggestions made to inform the design of future studies to help build a robust evidence base.	Yes	Yes There were 16 studies included in the review.	Yes All the outcomes seem to be considered and feeds into the recommendations.	Yes Improvements were seen in articles: including, improved quality of life, coping behaviours, self-concept, improved mood, and reduced anxiety.	Arts-based therapies may require tailoring for children with different physical health LTCs. Design characteristics are important to incorporate when developing future trials for commissioning.
Bourne, J. et al (2018) A systematic review to investigate dramatherapy group-work with working age adults who have a mental health problem.	Yes To understand the benefits of dramatherapy group-work.	Yes	Yes A number of data bases used and the searches were completed by a librarian	Yes There was recognition that the studies were not robust and limitations were found across most studies.	Yes Most the studies used a qualitative method so it was easy to combine the results.	Yes – Findings showed improvements in friendship building, communication, empowerment and well-being.	Yes Similar themes were linked with the populations studied. Data collection seemed to mirror this.	Yes 12 studies included n = 194 participants. The studies included different populations with similar outcomes.	Yes Seems to have been achieved but the research papers themselves were limited.	Yes No harm identified just group benefits. There was	There were no RCTs found that met the inclusion criteria. No unpublished papers, non- English were excluded

Appraised Randomised controlled Trials

RCT Articles	Did the study address clearly focused question?	Was the assignment of participants to interventions randomised?	Were all participant entered accounted at its conclusion?	Blinding Participants ? Investigators ? Researchers ?	Were study groups similar at the start of the intervention?	Did each study group receive the same level of care?	Were the effects of the study reported comprehensively?	Was the precision of the estimate of the intervention effect reported?	Are the benefits worth the harms and costs?	Can the results be applied to your local population?	Would the experimental intervention provide greater value to the people in your care than the existing treatment?	Any other information
Hackett et al (2020) A randomised controlled feasibility study of interpersonal art psychotherapy for the treatment of aggression in people with intellectual disabilities in secure care. Pilot Feasibility Study.	To test the feasibility of conducting an RCT evaluating interpersonal art psychotherapy in an NHS Secure care, setting.	Patients with ID in secure care were randomised to either Inter-personal art psychotherapy or delayed treatment. Simple randomisation used to generate an allocation sequence using (IBM SPSS Statistics version 25 ©).	Yes and this is displayed on the CONSORT diagram.	Participants could not be blinded due to intervention but research assistants were blinded to allocation and discussed.	Yes n = 20 recruited n=10 per arm.	Yes and as this was a delayed treatment both arms were given the intervention eventually.	The reports of the study were clear and covered all areas appropriately linked to the aim of the study.	Yes	Yes, no harm identified. People with intellectual disabilities in secure care require adapted psychological treatments. Treatment used creative art making approaches which reduced sole reliance upon verbal interactions.	Yes	Interpersonal art psychotherapy was found to bring about improvements in observed aggression and distress related to mental health symptoms in adults with intellectual disability in secure care.	This was a multi-site, 1:1 randomised controlled feasibility study, with participants being randomised to either interpersonal art psychotherapy plus usual care or usual care with delayed treatment (waiting-list).

Five Appraised Qualitative/Quantitative Studies

Author(s), Title & Year	Was there a clear statement of the aims of the research?	What is the methodology used?	Was the research design appropriate to address the aims of the research?	Was the data collected in a way that addressed the research issue?	Has the relationship between researcher and participants been adequately considered?	Have ethical issues been taken into consideration?	Was the data analysis sufficiently rigorous?	Is there a clear statement of findings?	How valuable is the research?
Bourne, J. et al (2021) Advances for future working following an online dramatherapy group for adults with intellectual disabilities and mental ill health during the Covid 19 Pandemic: A service evaluation for Cumbria Northumberland Tyne and Wear NHS Foundation Trust	Yes to understand if an online group could be delivered to this population.	Quantitative self-reported questions were used and qualitative feedback.	Yes it showed clinical improvements and participant feedback to understand any benefits.	Yes - self – reported questionnaires were used pre and post intervention. Questions were asked at the end of the session and the final group session.	No	This was service used evaluation and the Trust’s Research and Design service accepted the proposal to complete this research. Consent was given by the participants.	The data was assessed with the use of P values and a T – Test.	Yes there is a clear statement of findings.	Numbers were small but retention was good. It would be worth repeating the group a number of times.
Bourne & Hackett (2021) Dramatherapy groups with adults with LD and mental illness’, In the new book edited by Milward and Seymour. Dramatherapy and Learning Disabilities: Developing emotional growth, autonomy and self-worth. Routledge.	Yes	Quantitative self-reported questions were used and qualitative feedback.	Yes it seemed appropriate.	Yes	No	Ethical approval was not applied for. This was case discussion for a book chapter. Consent had been gained.	To some extent but could be improved/	Yes	This needs to be repeated with larger participant numbers.
Bourne (2019) Co-producing a story of recovery for people with learning disabilities, in Co-creating & Co-producing research evidence: A guide for practitioners and academics in Health, Social Care and Education. Edited by Newbury- Birch, D.	Yes	Quantitative self-reported questions were used and qualitative feedback.	Not discussed	Yes	No	Ethical approval was not applied for. This was case discussion for a book chapter. Consent had been gained.	Can’t tell	Yes a clear statement of outcomes	It can contribute to the evidence base but has limitations.
Hackett & Bourne (2017) A story of recovery: book group. ACCESS: Journal of the Public & Mobile Libraries Group. Spring (15), 20-23.	Yes	No methodology discussed	No this is not set out in the article.	Any data collected was not discussed – the paper was a discussion of the intervention.	No	No participants were discussed in the paper	Can’t tell	No	A good and interesting resource with positive aspects but not robust research.
Hackett, S., & Bourne, J. (2014). The Get Going Group: Dramatherapy with adults who have learning disabilities and mental health difficulties.	Yes	No methodology discussed.	No this is not set out in the article.	Any data collected was not discussed – the paper was a discussion of the intervention.	No	No participants were discussed in the paper	Can’t tell	Yes	This is a good resource but not robust research.

