A Realist Evaluation of Participatory Music Interventions for Wellbeing: what works, for whom and in what circumstances?

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A Realist Evaluation of Participatory Music Interventions for Wellbeing: what works, for whom and in what circumstances?

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ABSTRACT

Background: The connections between music and wellbeing are well recognised. In the current climate of economic austerity, there is a growing demand for more robust evidence of the benefits of music-based interventions to make the best use of limited arts and health resources. **Aims**: To explore the connections between participatory music activity and self-defined wellbeing concepts. In particular, this study seeks to identify mechanisms that connect specific types of group music activity with specific wellbeing outcomes for people with mental health issues and/or learning disabilities. **Research question**: What are the mechanisms that connect music and wellbeing for people in challenging circumstances? What works, for whom and in what circumstances?

Design: A Realist Evaluation approach was used to identify and explore generative mechanisms in social music programmes that give rise to specific wellbeing outcomes. Two music programmes were investigated and a focus group was carried out with a third programme for validation purposes. Participant-observation and semi-structured interviews were used to identify programme theories (theories that explain outcomes), which were further developed and refined through iterative data accrual. **Findings**: Six programme theories were identified. Song writing and recording projects that involved both technical and artistic choices had an engaging effect, leading to outcomes of praise, hope and self-advocacy (with a corresponding sense of empowerment). Forms of musical improvisation tended to affect energy levels and consequently mood and perception, yielding both immediate effects (expressed as a sense of 'balance') and subsequent effects (described here as resilience). Activities involving pre-existing songs or styles (e.g. cover versions) engaged notions of identity and memory, which affected mood and increased wellbeing.

Conclusion: The programme theories identified here have the potential to inform and improve music for health programmes in other contexts. Useful similarities and significant differences between service user groups were identified, enabling more specific questions to be asked of music programmes and indicating directions for future inquiry. These findings may enable similar interventions to be better tailored to their client base, making them more effective and more cost-effective.

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Dedicated to Jasper, who was a better person than I am even though he was a cat.

DECLARATION

I declare that the work contained in this thesis has not been submitted for any other award and that it is all my own work. I also confirm that this work fully acknowledges opinions, ideas and contributions from the work of others.

Ethical approval was granted by the Faculty of Health and Life Sciences on 8th October 2014 and by the Northumberland, Tyne and Wear NHS Foundation Trust Research and Clinical Effectiveness Department on 18th November 2014. Following this, a favourable ethical opinion was given by the National Research Ethics Service Committee, Hampstead on 9th January 2015 (REC reference: 14/LO/2075). Ethical approval to carry out research at a second study site (Chilli Studios) was granted by the Faculty of Health and Life Sciences on 23rd February 2015.

I declare that the word count of this thesis is 83,429 words.

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Signature:

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CHAPTER 1: INTRODUCTION

1.1 Background

As a major component of the cultural landscape, music plays a significant role in everyday life. The idea of playing or listening to music for pleasure has an obvious connection with wellbeing and there is a long history of music being deliberately used to influence health outcomes. Much of the general reading carried out for this study opens with a history of music for health from the ancients to the present day. The connection is almost undeniable. Evidence runs throughout history and across cultures, from early 'sound healing' techniques using rhythms and drones (Bruscia, 1998), through ancient Greece (Cook, 1981; Tame, 1984; Beck, 1990) to biblical references: "Whenever the spirit from God came on Saul, David would take up his lyre and play. Then relief would come to Saul; he would feel better, and the evil spirit would leave him" (1 Samuel 16:23, NIV). Music therapy emerged in the latter half of the 20th century (Biley, 1999) and ideas around this continue to be explored today (e.g. Clift *et al.*, 2008; MacDonald *et al.*, 2012a; Daykin *et al.*, 2016). In view of this long history of both anecdotal and academic evidence, the present study therefore begins with the premise: The connection between music and wellbeing is well-known.

However, these connection(s) are multiple, complex and subjective. Attempts have been made to categorise such research (Figure 1) and within this, increasingly narrow bands of inquiry are counterbalanced by calls for more widely applicable research. DeNora's (2000) work on music in everyday life for example, has broadened the focus to investigate the effects of music on a more general population. This opens up potential relevance but also brings about inevitable challenges associated with researching a wider populace.

Against this backdrop, my research question seeks to identify the *mechanisms* that connect music to wellbeing in the social world. The role of culture in social life is complex, so to remain anchored in present debate, this study takes a theory-driven approach, in which programme theories (PTs) (intended or hoped-for outcomes of the music programmes being investigated) are tested in real-life situations. Here, the line of enquiry is guided by the emerging data, rather than by a rigid question, enabling a bagatelle-like arrival at the findings, rather than a 'silver bullet'. This 'realistic' approach is more aligned with social life and its findings are expected to have wider applicability than more clinical designs.

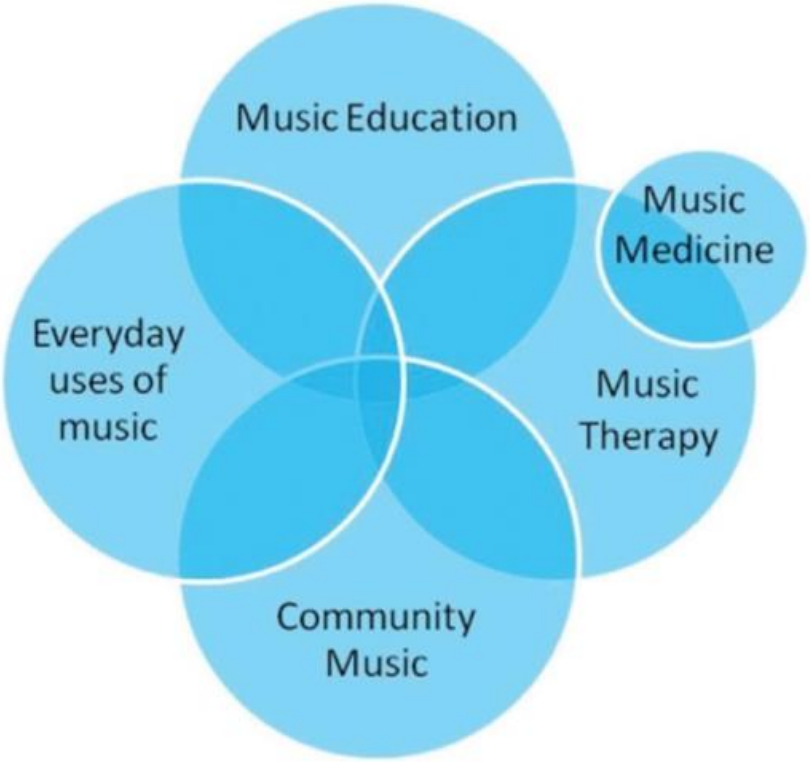

Figure 1. Conceptual framework for music, health and wellbeing (MacDonald, 2012)

Framed within the highly contingent and not always transparent world of UK health and social care policy, the use of music for wellbeing takes on an economic aspect. Securing increased funding for cultural resources to improve health is unlikely; according to The King's Fund, NHS funding currently does not keep pace with the demand for services (Dunn *et al.*, 2016, p. 1) and, despite broad agreement that 'culture' is of great value to health and wellbeing, healthcare funding still heavily favours interventions with a more empirical evidence base. On the arts side however, Culture Secretary Karen Bradley recently said "the arts can do wonders for mental and physical health as well as for people with long-term conditions like dementia and Parkinson's" (2016), whilst Arts Minister Matt Hancock notes the intrinsic and instrumental values of the arts; "By their nature many modern advances, both digital and artistic, aren't measured in GDP" (2016). The benefits of arts are well recognised in government, but the inherent difficulty in measuring these makes it unlikely that funding for arts-based health interventions will increase soon. Consequently, what there is must be preserved. Better evaluation and more specifically targeted funding not only enables improved outcomes, but also demonstrate that it is possible to use those funds intelligently in a field many people consider non-essential. To ensure continued funding, it is important to show that these types of intervention are an efficient and effective use

of public money with tangible health and wellbeing benefits. This research seeks to show that arts interventions can be better evaluated and to demonstrate that health or social care money given to such programmes can be spent more effectively.

1.2 Policy context

Arts therapies including art, drama, music, and dance movement psychotherapy are established in health and social care as regulated professions,[1] but are not as widely used as other psychological interventions designed to treat specific conditions (e.g. CBT for depression). Nevertheless, arts therapies are recommended by the National Institute for Health and Care Excellence (NICE) for the treatment of some mental health and behavioural conditions such as psychosis and schizophrenia (NICE, 2014). Music therapy, defined as therapy which uses musical qualities and "the musical components of rhythm, melody and tonality to provide a means of relating within a therapeutic relationship" (British Association for Music Therapy (BAMT), No date) is a significant group within the arts therapies and its status as an allied health profession gives it some credibility in comparison to informal or community-based music programmes. Part of the challenge is therefore to do with perception; it might be considered economically 'safer' to fund accredited healthcare interventions than to provide money for community groups which have similar aims. It has been reported that the NHS could save £345m by reducing 'enhanced community-based treatments', although the same report also quotes Dr Tim Ballard, Vice Chair of the Royal College of GP's council, who notes: "Too much healthcare is now overmedicalised" (Campbell, 2014). The issue of alternative, community-based interventions versus medical intervention is evidently contested.

Focussing on mental health, the systematic review by Daykin et al. (2006) concluded that the key health policy drivers that support an increased role for the arts are: Reducing inequalities and addressing social exclusion through participation in the arts; the impact of physical environments and building design on patient outcomes; patient and public involvement; and strengthening the evidence base for arts-based approaches. A subsequent DoH working group further underlined the significance of the arts in healthcare policy, calling for a prospectus to be written. This was produced in partnership with Arts Council England (ACE), who further endorsed the issue by calling for "integrating arts into mainstream health strategy" (DoH with ACE, 2007, p. 14).

[1] Only registered arts therapists can practice in the NHS using protected titles such as Art Therapist / Art Psychotherapist etc. Further details can be found on the HCPC webpage http://www.hcpc-uk.org/aboutregistration/protectedtitles/.

However, little was done to achieve this in the following years (Clift *et al.*, 2009) and, despite being discussed in parliament, the subject was relegated in favour of projects such as the London 2012 Olympic Games. Since then, funding cuts across the board have resulted in arts for health being marginalised. The health driver was quietly dropped from ACE's (2013) strategic framework, which now mainly focuses on funding, although passing mention is given to the mental health, happiness and wellbeing benefits of arts participation.

The implication here is that the health perspective that includes the arts needs to be rejuvenated and there is some possibility of that happening. The Health and Social Care Act (2012) gives local authorities increased responsibility for their own populations and also seeks to involve patients more. If existing arts for health services can demonstrate improved outcomes through careful and effective evaluation, this may generate the evidence required to influence an increase in the commissioning of arts for health interventions. Public Health England (PHE) recently published *Arts for health and wellbeing: an evaluation framework* (Daykin & Joss, 2016), which also calls for more robust evidence of the effectiveness, impact and costs of arts for health programmes. If better evaluation of these 'alternative' public health approaches can be properly achieved, then the evidence base may strengthen the argument for arts in health to be considered seriously at a government or policy level.

Nevertheless, the NHS does make some investment into arts programmes. Northumberland Tyne and Wear (NTW) NHS Foundation Trust provides mental health services in Northeast England and specialist services to children and young people nationally. It has an annual budget of over £300m (NTW NHS Foundation Trust, 2016) and was rated as 'outstanding' overall by the Care Quality Commission (CQC) (CQC, 2016). One of the sites covered by the Trust is Ferndene, an inpatient unit for children and young people with mental health issues and/or learning disabilities. The unit uses a range of therapeutic techniques including creative therapies such as music, drama and art, and has specialised rooms for these therapies. The wards at Ferndene are accredited by the Quality Network for Inpatient Children and Adolescent Mental Health Services, and the unit and its practices were positively reviewed during its most recent routine CQC inspection (CQC, 2013).

1.3 Economic context

Investment in arts and culture has declined in recent years. The Department for Culture, Media and Sport recently had its budget cut by 7% (HM Treasury, 2013, p. 10); Newcastle City Council is reducing its spend on arts services by 53% from 2013-2016 (2013); the Joseph Rowntree

Foundation expects culture spending to continue to fall (2013); and ACE claims that arts engagement in the northeast is low, calling for more strategic funding (2011, p. 24). The typical reason given for this trend is that in the context of austerity, core services must be protected at the expense of discretionary services such as heritage, culture and sport (Hastings *et al.*, 2013).

Some claim this to be a false dichotomy and that cultural activity and participation in the arts can be a determinant of social and public health. West (2014) argues: "The arts are very good for physical and mental health; for making people less lonely" , a point that fits into the broader debate on cultural activity and health. Matarasso (1997) suggests that by understanding the mechanisms through which arts interventions operate on wellbeing, a dwindling arts budget could be focussed to improve health outcomes, potentially reducing pressure on other services.

Sage Gateshead, which already serves a large community agenda, has seen year on year cuts since 2010 (Robinson & Collins, 2014). In 2013, Sage Gateshead's council grant shrank by £30k and its ACE funding was frozen, resulting in greater reliance on charitable donations. Nevertheless, it increased spending on Learning and Participation – of which 70% takes place in community settings – by £800k, reflecting the value placed on that agenda (Sage Gateshead, 2012, 2013a).

Sage Gateshead has been involved in a number of projects working with people in challenging circumstances. Individuals have benefited directly, through involvement with one-off or ongoing projects; and indirectly, as a result of the research data generated. One recent project with broad impact is 'Loud and Clear: Foster Family Learning' (2013b), which significantly improved the lives of looked after children and their foster carers. Positive outcomes included: improved confidence, social and emotional development, and musical learning. Activities that reveal connections between music and wellbeing are an important component of Sage Gateshead's learning and participation agenda; as well as positive outcomes for individuals, research/evaluation that demonstrates health benefits of musical participation is valuable in a climate where funding for cultural activity increasingly relies upon demonstrating broader returns on investment.

It is also suggested that ACE's willingness to back arts in health "may also be related to the fact that participation in, or even just consuming, art is regarded by arts organisations as a good in itself and does not need to be justified by an evidence base" (Macnaughton *et al.*, 2005, p. 337).

In public health, the wellbeing agenda appears to be expanding, potentially indicating a shift towards a wider range of positive, more salutogenic approaches. Health and Wellbeing Boards have been established to increase public involvement in decision making around commissioned services. Various health inequalities are identified in the northeast, where poverty and mental

health problems are significantly higher than the UK average. The Newcastle, North and East Clinical Commissioning Group (NNECCG) states that: "With levels of unemployment likely to rise, the already higher than average prevalence of depression may increase" (2012, p. 16). One strategy the NNECCG is heavily involved with is 'Wellbeing for Life', a collaboration that aims to encourage and promote partnership working with a range of organisations, seeking to "deliver changes in the city with the overall aim of making sure everyone lives happy, healthy and long lives" (2014). This aim is timely, in terms of both the health and economic agendas.

Partnership with a 'range of organisations' includes those from the charity sector. Chilli Studios, supported by the Big Lottery Fund and Northstar Ventures, provides creative-based services for people with mental health problems. Studio members have full access to equipment and workshops and are encouraged to produce artwork for sale or exhibition. Chilli Studios recognises absolutely the link between creativity and mental health, and seeks to connect service users with creative opportunities. It has been running successfully since 2004 and is a well-known presence in the North Tyneside arts community.[2] Arguably, services like Chilli Studios are one of the long-term consequences of 'Care in the Community', the largely successful policy of mental health deinstitutionalisation that some have argued was an attempt to save money (Patients 4 NHS, 2016). Regardless, its members view Chilli Studios as an essential resource (Armstrong, 2014).

In summary: mental health and wellbeing are currently being heavily promoted by the government, but arts and culture funding is generally being reduced. Consequently, there is a strong economic argument for demonstrating the effectiveness and transferability of publically funded arts and wellbeing programmes.

1.4 Research question formulation

The policy and economic contexts for arts-based health interventions indicate a strong need for better evaluation of such programmes to generate robust evidence that more clearly demonstrates the health and social benefits of arts investment. Realist Evaluation (RE) (Pawson & Tilley, 1997) is a relatively new approach that is gaining traction in public health research. It has high appropriateness for evaluating real-life cases and can reveal mechanistic explanations for the success or failure of social programmes by prompting increasingly specific questions around what works, for whom and in which circumstances. By iteratively refining data in this way, RE enables useful understandings of what makes a programme work in one setting but not in another. The

[2] The studio is dependent on annual funding applications; its 2015/15 expenditure was £141K

broad research question is a realist question based on the overarching theory that music participation increases wellbeing:

What are the mechanisms that connect participatory music activity with increased wellbeing?

Here, 'participatory music activity' refers to: actively engaging in some form of music generating endeavour within a group, as opposed to passive listening or playing alone.

By seeking to establish the *mechanisms* by which the music interventions at both study sites worked (or didn't work), the question seeks also to uncover the contextual factors that might trigger these mechanisms. It is based on the realist idea that a number of potential mechanisms may be active but will vary across different contexts (hence the use of two study sites). This question enables a theory-driven approach, in this case realist evaluation, which develops programme theories iteratively in response to the emerging data and articulates these in terms of 'Context Mechanism Outcome Configurations' (CMOCs). Organising data in this way allows comparison of findings from different study sites to identify the musical and contextual factors involved in the triggering of different wellbeing mechanisms. This study also seeks to address the following sub-questions:

- What does wellbeing mean to research participants?
- How can music interventions be designed to maximise increased wellbeing?

1.5 Music and wellbeing

Having introduced the research question, I will turn my attention towards a more recent history of music for health, followed by a brief discussion of the terms 'wellbeing' (revisited in the literature review) and 'challenging circumstances', which is used in this study to describe the range of barriers faced by participants, including social stigma or marginalisation, difficulties with learning, trouble navigating health or social care services or other specific problems.

As mentioned previously, music therapy became established as an allied health profession in the UK around the mid-20th century, not least due to the work of Nordoff and Robbins. Since then, it has become codified, institutionalised and marketed. It is available on the NHS, but music-based interventions are reported to lag behind other arts therapies in terms of acceptance (Lakhani, 2011). Connections between music and wellbeing however, extend beyond the realm of music therapy. Other disciplines that have a wellbeing component can also involve music, such as music

for education and community music. Since 2000, studies of music in everyday life have also gained prominence, spearheaded largely by the work of sociologist Tia DeNora. By using a methodology that accounts for complex social contexts, this study is more closely aligned with community music programmes than with the more individualised and clinical interventions of music therapy.

This study recognises that the wellbeing benefits of music participation (i.e. actively playing music in a group, as opposed to passive listening) are multiple and that the mechanisms these connections work through are activated under different circumstances for different people. Limiting the study to music therapy contexts would narrow the field of investigation to some already well-studied mechanisms. This research is interested in participatory musical situations designed for people who have experienced *challenging circumstances*; music programmes which aim to improve people's lives in some way, but do not follow a specific therapeutic agenda. These non-clinical situations are flexible and may use a number of musical approaches with greater or less facilitation, depending on the ability of the participants. The groups have a wellbeing agenda but this is not strictly defined, as wellbeing means different things to different people. Consequently, the programmes were evaluated in terms of the extent to which wellbeing is achieved for individuals, i.e. what wellbeing means to each participant personally and how aspects of the music activity helped them approach this goal. Critically, none of the sessions were mandatory; all participants attended voluntarily. This is important; it means that each participant used their own reasoning in deciding whether or not to attend and this can be explored to identify mechanisms that connect music activity with individual wellbeing outcomes.

This study is therefore participant-centred, theory-driven and amenable to different music programmes. It is designed to yield specific data relating to the study sites, but also seeks to make modest claims for the generalisability of its findings. This flexibility places the research in a useful position between the limitations of using specific study sites and the need to inform knowledge beyond just those study sites. In the broader milieu of music and wellbeing research, this is a valuable balance to aspire to.

1.5.1 Wellbeing

Variations in wellbeing are perceived in different ways by different people. Specific mental health difficulties such as depression or anxiety do not affect everyone in the same way and in many cases are responses to challenging circumstances. These can include issues around social stigma and marginalisation, reduced opportunities, poverty, difficulties navigating health and social care services, relationship difficulties or legal problems. These challenges bring about different

combinations of outcomes, but all have a significant effect on each person's wellbeing. Consequently, 'wellbeing', as used in this study, is subjective and is influenced by a range of cognitive, physical and social factors. The combination of these is important and has influenced the choice of a methodology emphasising context and configuration.

Various approaches to defining wellbeing are described in the literature review (p.12), which found a conceptual emphasis based around the idea of 'balance'. This was reflected to some extent by the participants (who were asked what wellbeing meant to them and who gave a range of meanings – including balance – that were of personal significance). Critically, participants could identify when their wellbeing had increased and how this was connected with a musical activity, which formed the basis for interview discussions. Defining wellbeing was therefore problematic, but it also lent flexibility to this study. After several interactions, it was found that discussing music and wellbeing on participants' own terms (i.e. without me proposing a fixed definition) enabled more intuitive, naturalistic conversations, potentially yielding better data.

1.5.2 Challenging circumstances

This study is interested in the wellbeing of people in challenging circumstances. The National Foundation for Youth Music, which funded the FYMP, has a particular focus on helping young people in challenging circumstances, including: "Children with disabilities. Kids struggling with drugs or alcohol, or with their mental wellbeing. Toddlers with communication difficulties. Young carers. Teenagers in trouble with the law. Young people excluded from school and society" (Youth Music, 2016). The second largest sub-group of Youth Music participants is: children with Special Educational Needs (SEN) (Youth Music, 2015b). Youth Music believes that music is one of the many things that children in challenging circumstances miss out on.

A number of music programmes (across age ranges and at national and regional levels in the UK) aim to improve the lives of people in challenging circumstances. The ecosystem for this type of research therefore already exists and would stand to benefit generally from further study, including formative and process evaluation (Daykin & Joss, 2016, p. 9). After exploring the music resources available in the northeast and identifying potential study sites, it was decided to focus on people with mental health problems and/or learning disabilities. In spite of their age differences, participants at both FYMP and Chilli Studios have experienced these difficulties, which can involve mood-related issues, behavioural problems and further issues such as social exclusion, poverty or substance abuse. Consequently, all participants in this study have their own experience and configuration of challenging circumstances, which could potentially benefit from involvement in music-based interventions.

1.6 Translational research

This research not only offers a different methodological perspective on the benefits of music to wellbeing, but the findings have implications for similar music intervention programmes. This is particularly important in the current climate (see policy and economic contexts, p.3 and 4), in which impact must be demonstrated to both justify alternative health interventions (such as those using arts or music) and to raise the profile of their research and evaluation.

It is critical that the positive outcomes from this project have the potential to inform policy and practice. These are described in the discussion and conclusion chapters. Moreover, the importance of contributing to a body of research that supports creative and arts interventions for wellbeing is vital to ensure that these approaches are not marginalised under increasingly difficult funding conditions. It is absolutely right that public money is spent wisely and that more alternative approaches to health and wellbeing should be accountable, but the progressive position should focus on better research and evaluation, rather than treating them with circumspection or as lightweight approaches.

Therefore, this research aims not only to establish knowledge that can be used in similar interventions, but also to explore a potentially useful evaluation approach that acknowledges the difficulties in measuring wellbeing and the effects of music interventions, lighting the way for more specific questions and exemplifying a framework for these questions to be generated and asked within.

1.7 Personal background

My background is in musicology. This opened my eyes to ways of listening, questioning art and looking at how culture shapes society and vice versa. I was able to experiment creatively and the academic setting prompted reflexivity in this pursuit, which brought immense wellbeing but few career options. Following this, I worked in HE admin and continued to make music. Over time, the work increased and music-making opportunities decreased, and my wellbeing decreased correspondingly. My criteria for accepting this PhD studentship were simple: it had to involve active music making in a social setting. At this point, I had no experience in social research and, despite grasping some of the more established ideas, my academic background was in cultural rather than social theory

I also have some understanding of the insidious way that mental ill-health can manifest and have used mental health services for about six years. This experience adds an extra layer of complexity to an already complex world and interacting with services can also be bewildering. One of the most difficult aspects of navigating this area of care is to describe feelings and experiences to people who can help, and there were moments when I would have been more comfortable playing a piece of music than trying to articulate myself verbally.

Identifying policy drivers, sourcing figures and quotes about mental health and the importance of culture, and finding positive data about music and health is relatively straightforward – but having a personal interest is also critical to good research. My background as an arts graduate gives me a natural bias towards arts interventions. Nevertheless, there is enough evidence to show that the arts are taken seriously in health and social care contexts, so even beyond my own preconceptions, this is a valid and important research path.

1.8 Disclosure

An opportunity arose to carry out evaluation research with a funded programme, the Ferndene Youth Music Project (FYMP). The project was run by Dr Simon Hackett (my third supervisor). I was not obliged to work with this group, but the participants and the programme activities matched the selection criteria for this study. The chance to work in an NHS setting with people who are normally difficult to gain access to (young people with mental health issues and/or learning disabilities) was a rare opportunity. I was careful to ensure that this PhD remained discrete and, although some findings contributed to the FYMP, both projects were treated as separate endeavours. A second study site was chosen for its similarities and differences with the FYMP, so although aspects of the FYMP influenced some initial study decisions, the project did not define this PhD. The Ferndene project was funded by grant money awarded by the National Foundation for Youth Music, https://www.youthmusic.org.uk, whose broad mission is to invest in music making projects for children and young people in challenging circumstances. The funding included some expenses for qualitative evaluation and I have drawn from this for conferences, transcription costs, equipment and travel expenses.

CHAPTER 2: LITERATURE REVIEW

2.1 Chapter structure

The main challenge in approaching the subject of music and health is the volume of research already carried out. Attempts to provide an overview of the field offer useful insights into the prevailing issues and directions for further research, but it is nevertheless a broad subject.[3] This chapter will focus on ideas around defining wellbeing, research on music and wellbeing, and the policy climate for arts and wellbeing. It is noted that, to date [late 2016], no realist evaluation has been carried out on participatory music programmes for wellbeing.

1) **Wellbeing** definitions have been the subject of considerable debate. Common multi-perspective understandings are yet to be achieved. Measuring wellbeing is also problematic, leading to this study developing its own way of determining the wellbeing aspects that are important to participants (see study design, p.92).
2) Broad literature on **music and wellbeing**: Frameworks exist which distinguish between music therapy, music for education, community music and other applications. This study will be located in relation to these broad areas and attention will focus on programmes that seek to bring about the positive benefits of music participation.
3) The UK **arts and health policy context** in which the research takes place has significant drivers for better evaluation of music for wellbeing programmes.

These areas emerged as significant during the planning of this research. Aside from the obvious areas of wellbeing and music-based health interventions, the policy context is also important, as this is the milieu in which the programmes being studied take place and indicates the 'direction of travel' for future music-based interventions.

2.2 Wellbeing

The term 'wellbeing' is increasingly used in political discourse, as well as in areas with health-related dimensions, such as arts and culture.

Wellbeing is an evolving concept in many areas of society and its meaning is widely debated. Some participants have difficulty expressing what wellbeing means to them and many studies

[3] As of October 2016, The Cochrane Library listed 45 systematic reviews on music and health, covering nearly 10,000 published research studies.

therefore identify several 'dimensions' of wellbeing to help guide participants' descriptions of their experiences (Wren-Lewis, 2014; Lenette *et al.*, 2015). A number of wellbeing measures have been developed and applied across various health contexts (Bowling, 2004), but this remains a contested issue (Angner, 2011; Taylor, 2014; Wren-Lewis, 2014). The range of definitions and proposed ways of measuring wellbeing has resulted in a trend towards more individual-focussed research. Looser classifications of wellbeing allow for more incisive explorations of its nature. This 'trade-off' has faint echoes of the enduring debate surrounding quantitative vs. qualitative methods.

2.2.1 Defining wellbeing

A range of proposed definitions exist and more recently, a number of papers have explored and compared these (McAllister, 2005; White, 2008; Diener & Ryan, 2009; Dodge *et al.*, 2012; Warr, 2012). Historical health definitions have tended to subsume wellbeing. The World Health Organization (WHO) defines health as: "A state of complete physical, mental and social well-being…" (WHO, 1946, p. 1) and tends only to refer to wellbeing in the context of: 'health and wellbeing'. This later developed into "Health is a positive concept emphasizing social and personal resources, as well as physical capacities. Therefore, health promotion is not just the responsibility of the health sector, but goes beyond healthy life-styles to well-being" (WHO, 1986, para. 2). That being said, the WHO, whose primary attention and mandate is related to health, recently clarified its position on wellbeing as follows: "Well-being exists in two dimensions, subjective and objective. It comprises an individual's experience of their life as well as a comparison of life circumstances with social norms and values" (WHO, 2012, p. 9). More culturally diverse definitions also conflate wellbeing with health: Bircher (2005, p. 335) defines health as "a dynamic state of well-being characterized by a physical and mental potential, which satisfies the demands of life commensurate with age, culture, and personal responsibility"; Saracchi (1997, p. 1409) suggests health is "a condition of well being, free of disease or infirmity, and a basic and universal human right"; and Awofeso (2005) draws on the Australian Aboriginal definition of health within the context of communities, noting: "…Health does not just mean the physical well-being of the individual but refers to the social, emotional, spiritual and cultural well-being of the whole community".

Though ostensibly a holist term, wellbeing is routinely associated with mental, rather than physical health. Academic definitions of wellbeing tend to come from the field of psychiatry (Learmouth, 2015) and use of the term outside of this is often prefixed, e.g. economic, social or physical wellbeing. To this end, it is also worth distinguishing between psychological and

economic approaches to wellbeing, as discussed by Layard (2006, 2010) and Helliwell et al. (2015), who acknowledge the differences, but also the inextricability of the two.

Again, the WHO positions wellbeing *within* its definition of mental health: "[mental health is] a state of well-being in which every individual realizes his or her own potential, can cope with the normal stresses of life, can work productively and fruitfully, and is able to make a contribution to her or his community" (WHO, 2011 (updated 2014)).

Academic definitions have tended to centre on concepts of balance. 'Set-point theory' (Brickman & Campbell, 1971), 'dynamic equilibrium' (Headey & Wearing, 1989), 'the lifespan model' (Hendry & Kloep, 2002) and 'effect of life challenges on homeostasis' (Cummins, 2013) all take a 'balance' perspective. In consideration of these, Dodge (2012, p. 230) proposes a balance-centred definition of wellbeing as: "the balance point between an individual's resource pool and the challenges faced". This maps on to a range of life events, dynamics or contexts, which offers a useful, yet somewhat binary understanding. Nevertheless, the concept of balance was important to programme theory development for this study, e.g. initial ideas around 'energy levels' were refined into a balance model.

The positive psychology movement has significantly influenced general perceptions of wellbeing. More progressive models, such as 'Flourishing' (Seligman, 2012) also use a balance concept: "To flourish means to live within an optimal range of human functioning" (Fredrickson & Losada, 2005, para. 1). Here, flourishing is measured mathematically, as a ratio of positive to negative affect. Taken from the same school, Csikszentmihalyi's (1991) concept of 'Flow' develops this, but dispenses with ratios in favour of a range of named mental states, of which 'flow' is optimal. This idea of dimensions is critical, ultimately informing the visual elicitation component (p. 92) used in this study's interview protocol.

Wellbeing appears to sit somewhere in what Geertz (1973, p. 5) might deem a 'web of significance', in a state of flux and driven by a network of dynamics spanning multiple contexts. Flow and flourishing come close to acknowledging this, arguing that mental health is not defined by an absence of mental illness, but rather, is "a separate dimension of positive feelings and functioning" (Horwitz, 2002). This idea of a 'separate dimension' moves the debate away from 'something to be cured' and towards the concept of 'something to be developed, maintained and nurtured', implying a salutogenic configuration, which focuses more on factors that support human health and wellbeing rather than factors that cause disease (Antonovsky, 1979, 1996).

The term 'wellbeing' is used throughout Staricoff's (2004) systematic review of medical literature on arts in health in reference to various dimensions including senses of 'control', 'narrative' and 'hope' (2004, p. 26). However, the question of what is *meant* by wellbeing was not addressed; instead, it was used as a generically positive term, often in conjunction with other qualities. The review concluded that 'the arts' increase communication ability and open up new modes of expression, which in turn enhances self-esteem.

Dimensions of wellbeing are important. Wellbeing measures such as the Warwick-Edinburgh Mental Wellbeing Scale (WEMWBS) are designed to generate a quantitative score based on a set of pre-defined dimensions such as confidence, ability to work with others, optimism, etc. Combining these dimensions gives a qualitative overview, but begs the question: which dimensions and in what proportions? Two individuals with the same overall score may have vastly different sub-set configurations. Such configurations are also context-dependent. This study eschews the idea of quantifying or scoring wellbeing in this way, although the idea of dimensional configurations is closely reflected in the use of Realist Evaluation.

The present study takes a broadly agnostic position but is informed by the above literature, acknowledging that most popular approaches to defining wellbeing are based around a 'balance' model, which accommodates a range of perspectives and dimensions. Therefore, instead of asking participants to discuss wellbeing within a defined parameter that may not match their own, this enquiry is designed to elicit and work around participants' own ideas about what wellbeing means to them.

2.2.2 Evidence-based approaches

A recent Chief Medical Officer's report claims "…well-being does not have a sufficiently robust evidence base commensurate with the level of attention and funding it currently receives…" (Davies, 2014, p. 14). "[Wellbeing] has contested boundaries and terminology, and presents challenges in achieving a common understanding that can be applied in everyday practice by the NHS, government departments and executive agencies, service users, patients and funders, as well as by users of research" (p. 22). Davies recommends that "Wellbeing interventions should not be commissioned in mental health as there is insufficient evidence to support this" (p. 313). The report relies heavily on Evidence-Based Medicine (EBM), which tends to consider Randomised Controlled Trials (RCTs) as the 'gold standard' for health research (Meldrum, 2000 and many others). However, the subjective nature of wellbeing and the inherently fluid nature of creative/artistic activity – particularly in non-clinical or social settings – generate so many variables that RCT approaches are inappropriate for arts in health research.

In relation to music and wellbeing, Wigram (2011), and Wigram and Gold (2012) describe evidence-based practice as a "religious doctrine" (p. 164). They find several problems with this approach, including terminology, patient reporting, evidence hierarchies and the complexities introduced by funding priorities. After describing evidence around music therapy interventions for people with autistic spectrum disorder, they conclude that for such disorders, where there is no surgery and few pharmacological treatments available, early interventions using 'alternative' approaches can yield significantly better results. However, such interventions use different categories of evidence, which are more personalised, case-based and subjective.

As formal music therapy interventions are used to treat an increasing variety of mental health conditions (Moore, 2015), there is a corresponding call for more evidence to support this. Silverman (2010) notes that evidence quality for psychiatric music therapy is low, leading to mixed perceptions of music therapy, especially in mental healthcare. Clinical evidence often takes the form of Randomised Controlled Trials (RCTs). Whilst undoubtedly a good design for many clinical situations due to their control and minimisation of known or unknown confounding factors, RCTs have low external validity (results are not necessarily transferrable to other contexts), take place in non-naturalistic clinical environments (not easily relatable to everyday life), are complicated and expensive (Reeves, No date). The 'gold standard' status has been challenged by researchers in medicine (Cohen *et al.*, 2004), social science (Marchal *et al.*, 2013), philosophy and policy (Cartwright & Hardie, 2012). On the pros and cons of RCTs vs. observational studies, Kovesdy and Kalantar-Zadeh (2012) note: "It is thus naive to look at RCTs as a universal panacea that will always tell us what is right or what is wrong; as it is also simplistic to question the validity of observational studies merely because of their non-experimental and non-randomized nature" (p. 13). Harrison *et al.* (2010) carried out an RCT on the effect of a music intervention on social engagement of people with dementia. Whilst claiming greater methodological rigour than other music intervention studies, it only measured a single quality of life aspect, using a narrowly defined musical intervention protocol. Other wellbeing studies, including the present one, seek to assess wellbeing across a range of dimensions to provide a more 'three dimensional' result.

Critically, in the hunt for mechanisms, RCTs are inappropriate, as they tend to focus on 'what works', rather than 'how?' They also rely on levels of control that are harder to achieve in social environments. RCTs evidently have their place, but there is a gradual shift from this 'gold standard' idea towards increased acceptance of alternative forms of evidence that can account for more complex situations. For these reasons, RCTs are considered less useful in social situations where context takes a more prominent role (Campbell *et al.*, 2000). Realist evaluation, the methodology used in this study, explicitly acknowledges the role and importance of context. Not

only are RCTs and more 'formal' evidence types inappropriate to social studies such as this one, they also do not sit well with realist evaluation. On RCTs, Pawson explains:

> The idea [of RCTs] is to create (by randomisation or matching) two identical systems into one of which a new component is introduced. Observations are then made of outcome differences that occur between the experimental and control conditions and should a change occur, it is attributed to the one difference between them, namely the introduction of the experimental stimulus. The manipulation does not require any understanding of why the control situation behaves as it does and why the introduction of a new component might change it. The findings are expected to speak for themselves (2013, pp. 4-5).

2.2.3 Values-based approaches

More broadly, yet emerging initially from a clinical backdrop, values-based approaches might be better suited to complex social interventions, enabling a more methodologically fluid position from which to understand the processes that connect creative practice with wellbeing (Fulford *et al.*, 2012). By emphasising individuals and contexts, values-based methods correspond to a more devolved approach in terms of health and social policy. The National Service User Network (NSUN), an independent mental health service user/survivor-led organisation, provides an insight into values-based commissioning, having found that "there continues to be comparatively little [service user] leadership, or joint decision-making in relation to service design and delivery" (Perry *et al.*, 2013, p. 7). The NSUN Review concludes that the concept of self-determined recovery remains a vexed issue and that despite efforts, true democracy in this field is not yet achieved. These findings appear commensurate with the need to allow individuals to discover and determine what wellbeing means to them.

Realist Evaluation sits comfortably within a values-based context. Its principal strength is that the direction of the research is guided by ongoing participant responses to a programme, rather than by the sole aim of finding out if that programme works or not. Although RE uses literature and policy documents as its starting points, the evaluation is steered by service users and their contexts. That is to say: initial programme theories are based on prior research, policy and intervention design, but their development is governed by service user voices, aligning with a more democratic and values-based approach.

Social prescribing

In light of the difficulties in defining and measuring wellbeing, initiatives are emerging that are not based on a single, concrete 'health outcome' but instead reflect a more values-based approach. 'Social prescription' has been outlined as "a very different type of conversation that focuses on

collaborative planning, shared decision making and a dynamic of partnership between a patient and practitioner working together towards common goals" (Nesta, 2013, p. 8). Signposting to pre-existing resources may enable patients to interpret or make use of those resources in a manner more consistent with their own concept of wellbeing. Social prescribing is offered by GPs in Newcastle upon Tyne and is a core tenet of 'Ways to Wellness', which seeks to "…enhance patients' abilities to manage their illness, through [among other things] increased community participation" (Bridges Ventures, 2015). However, despite its values-based grounding and potential to offset cost burdens to the health service, social prescribing has had relatively little uptake among general practitioners. It is thought that this might be due to accountability (Friedli *et al.*, 2007, p. 30). GPs are reluctant to refer their patients to unregulated services that might cause harm, which would be traced back to the referring clinician.

The broader appeal for better evidence around the benefits of creativity-based interventions also implies a need for deeper and more individually focussed evidence. The values-based ethos sits comfortably with this call and has therefore had some influence on the methodological and practical decisions made in this study. One such resource for social prescribing in Newcastle is Chilli Studios, a user-led creative studio service for people with mental health problems, which aims to improve wellbeing through a range of arts-based opportunities. Service users can be referred to the studio by their GP, social worker or mental health advocate, thereby rendering Chilli Studios into a 'wellbeing resource'. This was one of the factors that made the studio an appropriate study site for the present research project.

Wellbeing in Northeast England

In response to a recent mandate to establish Health and Wellbeing Strategies, Local Authorities have had to define 'wellbeing'. Learmouth (2015) examined five Local Authorities in Northeast England – where this study takes place – whose definitions of wellbeing range from being strictly focussed on mental health to much looser definitions. The following example from North Tyneside is quite vague, although this gives it flexibility:

> Health and well-being are concepts which are often defined in different ways by individuals themselves, by groups or by policy and decision makers when assessing local health needs. "Health" as a term includes physical, mental and social health and well-being or quality of life. Promoting health and well-being and improving health is about enabling individuals and communities to reach their full potential – ideally through their own actions and collective activity (North Tyneside Council, 2013, p. 12).

At a policy level, Learmouth recommends "some simple rules such as building mental health and well-being into the widest possible definition of public-facing roles and responsibilities" (2015), to

yield wider economic, health and social benefits. This was pre-empted by a Government Foresight Report that states: "[improving] the average level of wellbeing across the population would produce a large decrease in the percentage with mental disorder, and also in the percentage who have sub-clinical disorder (those 'languishing')" (Government Office for Science, 2008, p. 21).

2.3 Perspectives on arts in health and wellbeing

Fraser and al Sayah's (2011) systematic review concludes that arts-based methods in health research have merit, particularly in elucidating more subjective concepts around wellbeing. Reflecting Staricoff, they note: "It is clear that arts-based methods are situated within the qualitative paradigm… and are most often used in conjunction with other qualitative research methods" (p. 140), and call for more methodological clarity in using arts-based methods. The review identified a paucity of theoretical underpinnings for research into arts-based methods and calls for more scholarly dialogue in this area.

Morse *et al*. (2015) also discuss wellbeing 'dimensions' in their study on the effects of creative museum outreach sessions for mental health and addiction recovery service users. Here, they use an 'asset-based' model, which draws on aspects from the positive psychology movement and salutogenesis (Antonovsky, 1979, 1996). The study also describes the 'recovery model' – prominent in addiction research – which shares many characteristics of the asset model, noting:

> Recovery-oriented practice in MH and addiction services share many common elements such as a person-centred and long term approach, and like the asset-based model, they focus on strengthening individual factors (e.g. confidence, well-being and motivation)… In both models, recovery is an individual process with the goal being an ongoing quest for a better life, which is often expressed through ideas of independence and resilience (Morse *et al.*, 2015, p. 233).

The recovery model has given rise to the idea of 'recovery capital' (Cloud & Granfield, 2008), which draws on the economic ideas of Bourdieu. Recovery capital has been subdivided into: the social, physical, human and cultural resources which are necessary to begin and maintain recovery (Best & Laudet, 2010, p. 4). In acknowledging individuals' configurations of 'resources' in different dimensions, the idea of recovery capital resonates strongly with that of Realist Evaluation, a configurable, individualised approach which may go some way towards addressing the methodological weaknesses in arts and wellbeing research.

2.3.1 The arts and health diamond

The *arts and health diamond* (Macnaughton *et al.*, 2005, p. 337) (Figure 2) seeks to organise the typologies of arts and health interventions, 'mapping out' the research landscape to generate a visual cue without strictly compartmentalising the literature. This thesis falls into the top left-hand quadrant, with some blending into the top right-hand side.

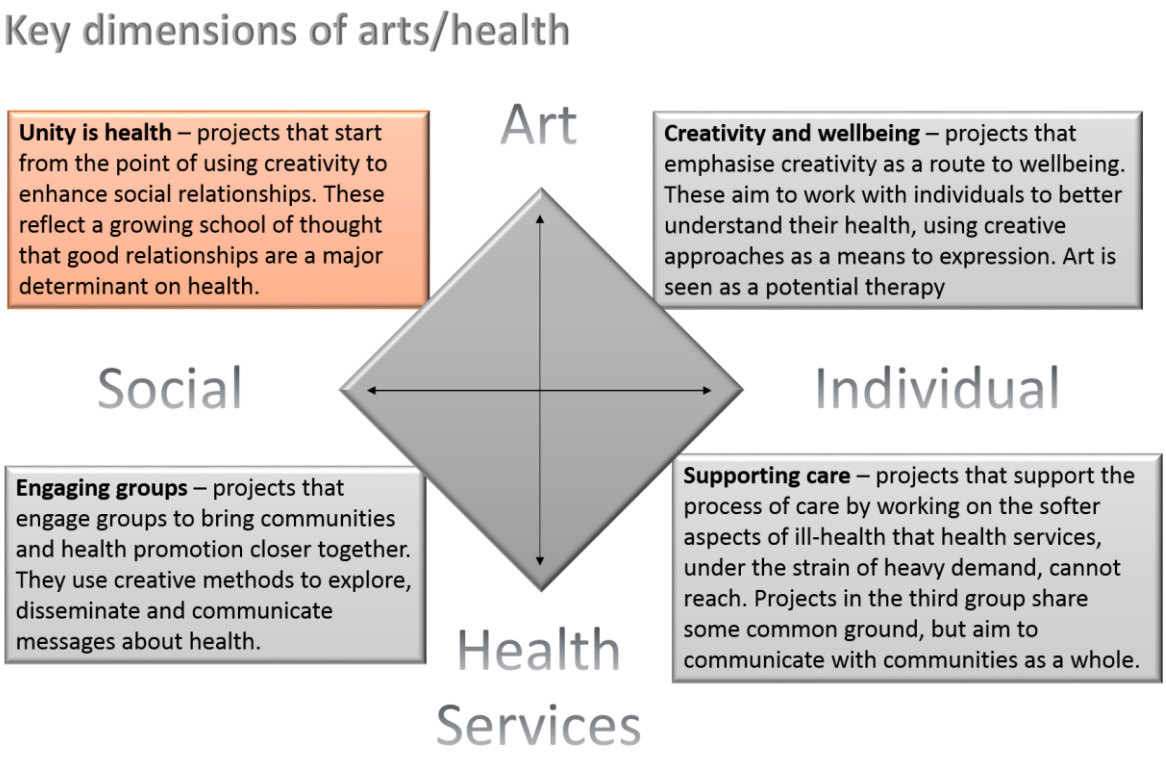

Figure 2. Arts and Health Diamond (Macnaughton et al., 2005)

Creativity and wellbeing. Maintaining an individual focus, this relates to bringing the principles of music therapy into a more accessible context, outside of health services. It may lack the acuteness of music therapy or the personal transactional depth of the client/therapist relationship, but being comparatively easy to implement, it is no surprise that arts-based interventions are on the agenda for many agencies including prisons, care homes and community centres.

Unity is health. Art is inherently social, in that it is received by others even when it is created in isolation. MacNaughton (2005, p. 332) notes that most artists "instinctively locate their work as having value within a social model of health where improvements in social inclusion and social cohesion are important indicators which may go on to lead to long-term improvements to the health of the community in which they are working". Citing Bevan's (1948) call for collective commitment to preventative medicine as evidence of the NHS's cultural base, White (2009)

constructs health as being both a social and a cultural issue. He goes on to note the increased prevalence of arts in health since the turn of the century and the recurrence of health and wellbeing as a key discussion point in the role of arts in society. This broader acceptance of – or interest in – the role of arts in health signals an increasingly holist approach, characterised not only by the absorption of a range of complimentary, non-medical or environmental factors, but also by the drive to create true value in an increasingly pressurised health and social care system through focussing on preventative healthcare. This is the concern of public health and wellbeing, and is the location of participatory community music.

Complementary and alternative therapies support health with varying levels of approval from the medical community. In terms of wellbeing, where clinical medicine is not always appropriate, the blurred lines afforded by alternative approaches may have more 'everyday' value, which is critical to the idea of public health's preventative role. In social environments, the dynamic arts (music, dance, drama) yield not only therapeutic but also social outcomes. Again, borrowing from Bourdieu, Putnam (2001, p. 22) refers to bonding vs. bridging forms of social capital and, whilst certain participatory music activities would certainly be considered 'bonding', their accessibility and availability in communities promotes 'bridging'. By examining participatory music programmes, this study will explore these creative-social relationships in terms of the benefits yielded to personal wellbeing.

Referencing MacNaughton's arts and health diamond (p.20), Aston (2010) outlines a typology of arts and health in the UK, identifying specific areas where arts and health fit (or don't fit) with government policy. Specifically, she mentions both mental health and social prescribing:

> **Arts in community and mental health**. Generally aimed at groups rather than individuals – this is one way in which arts and health differs from art therapy. Some crossover with Arts on Prescription (see below). Local authorities take an interest because of their social inclusion/community cohesion goals. Projects generally funded from arts/charitable/local authority sources (and NHS Section 64 grants). Individual Budgets,[4] where service users are given control of their own support budgets could change this? Has health, social and productivity benefits…
>
> **Arts on Prescription**. Supported by Primary Care Trusts through commissioning, also through Invest to Save (Treasury/Cabinet Office) and through the Transformation Fund (NIACE/DBSI – adult informal learning). Aim: reduce money spent (fewer drug prescriptions, fewer GP visits); improve employability and skills; improve health (reduced anxiety and

[4] Personal Budgets, which were introduced in October 2014, can be used to pay for membership at Chilli Studios (£10 per month).

> depression, improved physical fitness). Has economic, productivity and health benefits (Aston, 2010).

Bungay and Clift (2010) assess Arts on Prescription (AoP) as being particularly successful in helping people recover from psychosocial distress through creativity and increasing social engagement. However, their review noted a distinct lack of literature on academic databases and so focussed on 'grey literature' and primary data. Most of the success stories were based on "striking testimony" (p. 279) and on established wellbeing measures such as WEMWBS. Peer-reviewed evidence was scant, although the authors point out that "If schemes continue, however, they will eventually accrue a more substantive body of data" (p. 279). They concluded that AoP had overwhelmingly positive outcomes, however "The mechanisms involved are as yet uncertain…" (p. 279), indicating the need for further research in AoP schemes and similar programmes.

This has implications for evaluation methodologies, as acknowledged by Clayton et al. (2015) in relation to AoP programmes:

> Understanding the cause (or causes) of any improvements following arts on prescription-style programmes can be difficult, particularly as there are many aspects of the programme that could potentially affect the outcomes for the participants. In medical terminology arts on prescription-style programmes are a "complex intervention", meaning that they have several interacting components that may be difficult to standardise, affected by the local context, and difficult to research and evaluate using traditional methods (Clayton *et al.*, 2015).

2.4 Music and wellbeing

Many theories on the development of early music, including communication, ritual and religion, and pleasure relate to wellbeing. The communicative aspects of partaking in or listening to music emphasise an inherent social dimension and its use in religious practice (to formalise worship; to communicate at a higher level; or to bring about an altered mental state) emphasises spiritual wellbeing. More recently, the meditative aspects of music listening have been used in a range of self-care approaches, e.g. as part of mindfulness practice. Ideas linking music and health are long-established. Hippocrates explicitly acknowledges the role of art as being therapeutic and specifically the use of music and drama as management tools for mental illness (Kleisiaris *et al.*, 2014). These ideas were rejuvenated in the 20th century, via psychoanalysis. Barale and Minazzi (2008) point out that although Freud focussed on the representational and visual, many of his contemporaries incorporated musical dimensions into their theorising such as Reik, one of Freud's

students, who "described the analyst's unconscious as a musical instrument – as a kind of Aeolian harp" (p. 938).

2.4.1 Music and wellbeing in the UK

Debates around the value of music are perennial and have been raised recently in parliament. Citing the German Socio-Economic Panel, David Warburton MP noted:

> Music improves cognitive and non-cognitive skills more than twice as much as sports… Children who take music lessons have better school grades and are more conscientious, open and ambitious. The study of music strengthens the motor cortex… It improves working memory and long-term memory for visual stimuli. It helps people to manage anxiety and enhances self-confidence, self-esteem and social and personal skills. Studying music improves reading and verbal skills, and helps children to get good marks in exams. It raises IQ, encourages listening and helps children to learn languages more quickly. Some studies have even suggested that it slows the effects of ageing, just as being a Member of this House has precisely the opposite effect. The moral effect of the arts is also critical. Only through art can we emerge from ourselves and know what another person sees. It is testimony to the unifying moral power of music that both the Taliban and ISIS, or Daesh, have banned it, just as one or two past Popes banned polyphony, then the interval of the tritone, and then excessive musical decoration... (Hansard: Commons, 2016).

This quote relates not just to education but also to a number of wellbeing indicators. It could be said that summarising the evidence for the benefits of music in this way might give the impression of a panacea, leading to unrealistic expectations. Equally, sources that report harmful effects of music are rare and those that do focus on the lyrical content or subject matter of the music itself (McCraty *et al.*, 1998). This is reflected in media perceptions, e.g. gangsta rap is often associated with violence and misogyny; goth music with self-harm; and pop music with sexualisation. Whilst these valid concerns inspire some worthy debate, there is consensus – including at parliamentary level – that the benefits of music and music education outweigh the drawbacks.

The National Foundation for Youth Music, funded by Arts Council England and the National Lottery, is a significant funder of participatory music programmes for children and young people in challenging circumstances. Through these projects, the organisation seeks to establish what music making activities are right for which people (Youth Music, 2015a). Their primary outcome, identified in their recent impact report (2014/15), was to be "an intelligent investor in high-quality music making…" indicating an impetus to gain strong evaluation data about what works, for whom and in what circumstances. The foundation's quality framework – the title itself (*Do, Review, Improve…*) echoing a cyclical/iterative approach to programme development – adopts an 'outcomes approach', enabling projects to "plan effective evaluation activities and measure the

impact of their provision" (Youth Music, 2013, p. 4). This is with a view to assist in the planning and ongoing evaluation of Youth Music-funded projects and draws on evidence gathered by the foundation since 1999. The FYMP draws general guidance from this document and will also contribute to its evidence base.

Youth Music is a significant gatekeeper for the funding of community music programmes and the FYMP and its requirements required careful planning to ensure that this study remained objective and independent. Funded research is an issue to be mindful of in arts interventions: "A common problem in arts in health evaluation is the tension between an instrumental approach, that sees the arts activity as a tool to fulfil funders' policy objectives, and a transformational approach that trusts in the arts process itself to deliver outcomes" (Macnaughton *et al.*, 2005, p. 336).

2.4.2 Music therapy

The concept of prescriptive music therapy was explored in the aftermath of World War Two[5] and was formalised in the late 1950s through the work of Nordoff and Robbins, whose model is widely used today. However, it has been criticised for over-reliance on psychodynamic theory and for being too self-oriented and individualised (Ruud, 1980). One music therapist involved in this study perceived the Nordoff-Robbins approach as having become 'institutionalised'. Biley (1999) characterises music therapy as a distinct, tightly defined branch of art therapy, whereas this study takes a broader non-clinical perspective of active music making with a view to identifying specific mechanisms that may overlap with some music therapeutic principles. Biley characterises this as 'music *as* therapy', which is less structured and has a far longer history than music therapy (music as therapy does not necessarily involve active participation, although in this study, it does). Given the clinical setting for most music therapy interventions, there is also a large volume of literature which aims to measure its outcomes, including 33 Cochrane reviews and 59 other systematic reviews.[6] Less measurable is the gradual shift towards more holistic approaches to health and wellbeing. This may be related to the increased prevalence – or reporting – of stress and anxiety-related disorders, particularly among young people. Research has been carried out on the effects of music in relation to stress variables. The systematic review by Fancourt *et al*. (2014) found that both music making and music listening reduces stress via a number of physiological and psychological mechanisms. Such is the range of potential mechanisms, interventions that are

[5] After WWI and the initial recognition of 'shell shock' (now known as PTSD), alternative psychological therapies were explored, including 'music in hospitals'. There is evidence that music played an important role on the front line, when gramophones were transported to the trenches to maintain morale (BBC Radio 3, 2014).

[6] As of November 30th 2016, using the search term 'music therapy' in title, abstract or keywords on the Cochrane Database.

more accessible, more holistic and less clinical, such as 'music as therapy' (as opposed to 'music therapy'), are gaining recognition. Therefore, aside from the need for better evidence within the field, a broader climate of acceptance of more 'alternative' approaches is emerging, making this study a timely piece of research.

2.4.3 Recent studies

Having located this research on the arts and health diamond, it is worth acknowledging some of the writers whose work has influenced the inception and direction of this study.

Music, health, and wellbeing (MacDonald *et al.*, 2012a) is an edited collection of current research from the fields of public health, music therapy, psychology and medicine. This book not only gives a broad outline of the state of music *as* therapy (primarily in the UK), but also contains several chapters under public health and 'everyday use' headings. Useful to this study was this text's coverage of music interventions in non-clinical settings, including formative and process evaluations of community music projects. There was no mention of realist evaluation, indicating a research opportunity, but perhaps also reflecting the broad range of evaluation methods already available and appropriate to different music interventions. The need for better evaluation is reiterated throughout the volume, especially by Daykin, who says:

> Research and evaluation is a key issue. Those competing for scarce healthcare resources are under pressure to justify the effectiveness and impact of their work, but to evaluate rigorously requires resources and skills that are beyond the scope of most arts projects. One of the dangers is overclaiming the impact of arts in response to demands for 'magic bullets' and quick solutions to complex problems. Greater knowledge and understanding of research and evaluation, including social models of research, is therefore needed across the emergent arts and health field (Daykin, 2012).

The plea for greater knowledge and understanding of research and evaluation is widely echoed and emerges as a common thread in much of the literature around arts and health.

The concept of 'flow' (Csikszentmihalyi, 2004) has close links with music and wellbeing. The idea emerged from Csikszentmihalyi's conversations with creative people, including a leading American composer who described the ecstatic feeling that ultimately came to be known as 'flow'. MacDonald and Wilson (2014) identified four unique characteristics of musical improvisation which connect strongly with 'flow' experiences: Unconscious expression; creative expression; creative social interaction and emotional expression. These characteristics involve 'tensions and resonances' brought about by group performance contexts as well as personal contexts that each performer brings to the group.

Matarasso has written widely on the impacts of community art, including music projects. In a report specifically targeted at policymakers, his conclusions align with the aims of this research project; to understand what works, for whom and under what conditions, with a view to designing better music interventions elsewhere. His review of the social impact of arts participation concludes:

> The frameworks within which the arts operate and which support them are within the control of policy-makers and planners. If it is not possible to foresee the outcomes of a participatory arts project in detail, it is possible to create the right conditions for success (Matarasso, 1997, p. 92).

At a symposium at Sage Gateshead (2014), he said: "The benefits of music participation aren't delivered; they are enabled", aligning with the core philosophy of realist evaluation: that the mechanisms connecting music participation with wellbeing already exist; they simply need to be triggered by the right contextual conditions – aligning with this study's research methodology.

Many studies seem to overlook the concept of enjoyment. Theories connecting music and wellbeing do not work in a vacuum and participants' enjoyment is also critical. Matarasso notes: "Lest it be thought that this study takes an unremittingly worthy view of the arts, restricting them to dutiful service in the alleviation of mankind's problems, a place should be made for hedonism" (1997, p. 78). He points out that the top evening class subjects in London in 1996 were – by some distance – practical art (690), followed by music (669), followed by French (476). These figures demonstrate that apart from the health and wellbeing benefits of music, the demand for musical participation is also driven by educational and most likely pleasurable motives.

Matarasso noted that evaluating arts programmes has much to do with 'defining values'; quoting the audit commission, he says "the art of evaluation lies in ensuring that the measurable does not drive out the unmeasurable" (1996, p. 1). This summarises the challenges inherent to arts evaluation and corresponds with this study's focus on wellbeing, which seeks to understand individual participants' specific experiences of music activity using a framework that can be applied in similar music programmes. Matarasso's work has been challenged; Merli (2002) criticises *Use or Ornament* for generalising and for having no internal validity, whilst Belfiore (2006) accuses Matarasso's impacts of arts engagement of being "vague" and "Arguably, not all of these impacts are susceptible to easy measurement by a realistic and feasible evaluation process" (p. 25). These methodological criticisms have some validity, but also serve to highlight the problem Matarasso identified in 1996 and seeks to challenge. It is difficult to argue with Merli and Belfiore's challenges on their own terms, but Matarasso is at least optimistic in his attempts to

move the debate forwards. The present study also recognises these difficulties and seeks to explore evaluation methodologies and theoretical ideas around generalisation.

Daykin (who co-wrote the PHE paper calling for better evaluation of arts and health) and Stickley suggest that the range of qualitative evaluation methodologies available might be baffling to practitioners. Their paper, *The role of qualitative research in arts and health* (2015), claims that although many methods can establish if a desired health change has occurred, measuring and understanding less tangible outcomes (e.g. increased wellbeing) is less easy. Critically to this study, they say that "qualitative research is useful for exploring experiences and perspectives. This can include examining apparent associations and generating theory" (p. 73). Whilst numeric/quantitative results from arts and health interventions are often held as 'proof' of their beneficial effects, a deeper understanding of the mechanisms that produce those numbers is also necessary. The present study is therefore also focussed on generating or refining theory. The idea of *measuring* outcomes was considered, but in this light and the broader aims of RE, qualitative measurement is deemed to be of greater value to the aims of this study.

2.4.4 Intervention studies

Music interventions are wide-ranging; from physiological, e.g. singing and COPD (McNaughton *et al.*, 2016) to mental health, e.g. music therapy for depression (Choi *et al.*, 2008; Erkkilä *et al.*, 2011), to more complex issues that combine both psychological and physiological factors, e.g. music and pain (Bernatzky *et al.*, 2012; Mitchell & MacDonald, 2012; Spintge, 2012). There are also many types of music activity, broadly divided into active participation and passive listening (Maratos *et al.*, 2008), with multiple combinations in between. Add to this the range of contexts in which such interventions occur; from highly controlled environments such as clinics, prisons and schools (Baker & Homan, 2007), to semi-controlled, such as organised community groups (Ansdell & Pavlicevic, 2004; Maratos, 2004; Ansdell & DeNora, 2012), to completely naturalistic, such as ethnographic studies of music in everyday life (DeNora, 2000). This has resulted in a great deal of literature describing positive connections between music and wellbeing, some of which is collated in general readers (MacDonald *et al.*, 2012a) or in systematic reviews (Daykin & Byrne, 2006; Maratos *et al.*, 2008; Fancourt *et al.*, 2014; Cain *et al.*, 2016; Daykin *et al.*, 2016).

Among these, a large number of intervention studies share their focus on outcomes relevant to the present study, including (to name a few): attention and distraction (Huron, 2001; Jackson, 2003; Rickson, 2006; MacDonald *et al.*, 2012b; Diaz, 2013); participation and socialisation (Huron, 2001; Rilling *et al.*, 2002; Barrett & Smigiel, 2007; Kopiez & Lehmann, 2008; Kirschner & Tomasello, 2010); expression and emotional induction (MacDonald & Miell, 2002; Juslin, 2005;

Ockelford, 2013b, 2013a); personal, (e.g. self-esteem) and physical (e.g. skills acquisition) development (Staricoff, 2004; Overy & Molnar-Szakacs, 2009; Wiltermuth & Heath, 2009; Bungay & Clift, 2010); and other factors that have meaning for participants, such as spirituality (Bates *et al.*, 2013, p. 11) and even aspects of synaesthesia (Brougher & Zilczer, 2005). This study focuses on people with mental health issues and learning disabilities that cause them to have difficulties in some of the above areas and to experience challenges in their day-to-day lives. It is therefore worth examining some recent music intervention studies for people in similarly challenging circumstances to draw lessons that can inform the present study.

Noting that "an increasing focus on how arts activities such as song writing, recording, and music performance can contribute to social health and wellbeing for marginalised groups" (2015, p. 1), Lenette *et al*. carried out a narrative study on the impact of participatory music making on social determinants of health (SDOH) and wellbeing for refugees in Brisbane, Australia. A key component of this exploratory research was to map health and wellbeing outcomes of music participation using an existing SDOH framework (Schulz & Northridge, 2004). In this framework, wellbeing is separated from health and is determined by six factors including hope/despair, life satisfaction, happiness, etc. (these are subjective compared to the health category, which lists conditions e.g. diabetes or cancers and also includes 'mental health'). The intervention, which involved song writing, singing and performance, yielded three identity-related wellbeing outcomes that didn't fit the framework: cultural expression, connection with others, and consolidation of personal and social identity. This is one reason why the present study avoids relying too heavily on frameworks, as these can misalign with the data and therefore fail to capture the nuances of participants' thoughts on wellbeing.

Findings in Lenette *et al*. that did not align with the SDOH framework mostly related to ideas around mental wellbeing, identity and agency within a wider community:

> Participants frequently described music as having an effect on their mental wellbeing. Specifically, they noted feelings of happiness or relief, but in speaking about their relationship with music, they also referred to concepts of identity and agency. Closely related to the ideas of expression and communication discussed above, 'self and social identity' as a concept appears to contribute greatly to health and wellbeing outcomes, yet it too is absent from the SDOH continuum (ibid., p. 12).

More broadly, Lenette *et al*. highlight the unresolved role of music in all cultures and the importance of understanding music philosophically, as well as the complexity of measuring 'happiness'. So whilst reinforcing the call for a global push for the arts (particularly music) to become a significant arm of health and wellbeing policy, Lenette *et al.* also highlight that

measurement issues problematize this endeavour. By way of a solution, they propose amending the SDOH framework to accommodate their findings. That seems pragmatic for a single study, but in the broader context of cross-cultural and cross-musical activity, it could be an endless task. The present study, anticipating cultural expression and identity as being significant (see discussion chapter), therefore uses a more open-ended and participant-led framework.

Although my study focuses on music *interventions* (covering a range of activities in non-clinical contexts) rather than music *therapy*, it is reasonable to assert that therapy is an intervention and that interventions can be therapeutic. Daykin (2012, p. 69) discusses this in terms of 'professional issues', whilst Clift (2012, p. 113) defines non-clinical research as "excluding MT". The relationship is clarified somewhat in Trondalen and Bonde's (2012) taxonomy of the different therapeutic uses of music in various contexts, both inside and outside of formal music therapy. Numerous musical situations sit outside of the clinical domain but can incorporate a clinical mechanism (e.g. festival attendance and community music therapy). In the complex social world, it is likely that multiple therapeutic mechanisms work simultaneously and the taxonomy captures many intervention situations without drawing an explicit line between clinical and non-clinical musicking. This reveals a more values-based approach to capturing the nuances of music for health activities.

Noting that most music and wellbeing research has a clinical rather than a community focus, Daykin (2012) explores social models of wellbeing using a community arts approach in an inpatient setting (similar to the FYMP study site). In framing a hospital setting as a community, her study recognises the role of music participation in promoting subjective experiences of wellbeing, and enhancing communication and relationships. The study found that participatory music making is often seen as 'empowering' and has implications for self-esteem, social capital and representation. Citing Osborne *et al.* (2009), Daykin links social capital with increased access to services, reduced inequalities and increased control, but acknowledges that these specific mechanisms are hard to quantify. Issues of empowerment also arose in the present study, especially in relation to opportunities to showcase music/art. Outcomes for Daykin included social action and resistance; themes also observed in the present study and which contributed to a programme theory based around representation. There were some significant comparisons between Daykin's and the present study:

> In this particular setting, forms of participation were complex and diverse. While some participants were able to engage with arts activities such as drumming for sustained periods, the presence of others was more fleeting. Some individuals were clearly able to 'shine'. However, participation in group activity was affected by individuals' healthcare

> needs, including mental health conditions, severity of symptoms, and the impact of medication on mood, concentration and energy levels (Daykin, 2012, pp. 70-71).

Murray and Lamont (2012) explore 'social representation' and identity; the presentation and orientation of a group of people (with shared characteristics or challenging circumstances). They directly connect music with empowerment and go on to discuss working with communities to promote social change. This mechanism further informed the present study's programme theory around representation, which also predicted that this is likely to be more a concern for adults than children. Citing examples from festivals to local community groups, Murray and Lamont identify shared features (challenging negative perceptions, focussing on the local, energising impact, organisers and social impact) that contribute towards empowering those groups, increasing their sense of social wellbeing. This concept is not heavily focussed on in many music and wellbeing studies, but undoubtedly has particular relevance for those in marginalised communities.

Pavlicevic (2012) focuses on *group music therapy* (the present study solely involved group music making) and in particular, the 'magic moments' that occur. It is likely that most musicians will understand what these are, but Pavlicevic uses Stern's (2004) definition of 'magic moments', which "…despite lasting no more than seconds, appear to signal participants' experiences of shared meaning, pleasure, dignity and collective belonging in 'the present moment'." The mechanism here is a focussed shared experience that confirms belonging. Such 'magic moments' are common in music activities and it is anticipated that these will occur during the present study. Whether these can be independently cited and described by participants in terms of specific pathways towards wellbeing is less clear. 'Magic moments' (in my experience) are palpable, but not tangible or easy to describe.[7] The proposed mechanism to wellbeing in this case would be the benefits yielded by being connected through music to a positive shared experience, which couldn't be achieved through any other means.

Rimmer (2012) explored three UK-based community music initiatives designed to involve 'at risk' young people in the decision making that affects them. The aim was to increase participation and empowerment, in turn leveraging the benefits these can entail, such as self-esteem. The study found that using 'cultural forms' to engage young people wasn't always convincing, especially to those who felt excluded by broader society. Careful consideration had to be given to the needs and interests of young people just to get them through the door (and stay). This highlighted the

[7] In this study, 'magic moments' were most explicitly acknowledged by the CMS group, whose activity schedule had evolved to maximise the chances of creating these moments of shared energy.

need for providers and funders to take such interests seriously and to acknowledge the potential tensions created "if they are seen 'to promote an unhealthy, confrontational and sometimes illegal subculture'" (p. 345).[8] Rimmer concluded that YP's decisions should be taken seriously and not be seen as an academic exercise; working 'with' their subcultural preference and responding to the ways music functions as a 'badge' (Frith, 1981). This resonates with the subculture and memory PTs in the present study, where participants' musical choices and preferences must be acknowledged within the music programme for the wellbeing mechanism to work.

2.4.5 Systematic reviews

Systematic reviews critically analyse multiple research studies in one area or type of intervention. Most systematic reviews on music and health focus on specific health conditions such as depression (Maratos *et al.*, 2008), behaviour changes in specific settings (Daykin *et al.*, 2012) or are based around established frameworks, such as SDOH (Cain *et al.*, 2016). Nevertheless, they are useful for identifying common mechanisms as well as methodological issues to be mindful of.

Cain *et al.* (2016) reviewed six intervention studies of participatory music programmes in culturally and linguistically diverse communities, where it is claimed there is a lack of research. As with Lenette *et al.* (2015), the review drew on Schultz and Northridge's (2004) SDOH framework, describing this more usefully as: "…a structure for understanding health disparities caused by social conditions in combination with the physical environment. [Schultz and Northridge's] framework highlights how social, economic and political factors impact the environment, and contribute to community and individual health and well-being". The studies reviewed tended to define health and wellbeing benefits in terms of a *reduction* in pre-defined negative indicators (anxiety, depression etc.), again reducing the idea of wellbeing to a set of discrete categories. Despite mentioning both short and long term outcomes, Cain *et al*. acknowledge that long term effects are less well known, due to the limitations in the scope of the review. Further, there is a paucity of general of explorations of the long term effects of music participation. The present study sought to carry out multiple interviews with individuals, to both refine the programme theories and to establish changes over time. However, this was difficult for practical reasons. Instead, participant-observations were carried out over several months to verify outcomes over a longer period. Both Cain *et al*. and the present study therefore recognise the difficulty in identifying longer term effects of music participation.

[8] This was reflected to a small degree in the present study; one participant expressed an interest in hip-hop with explicit lyrics, deemed inappropriate for the younger children. Another cohort in the Youth Music Project (but not part of this study) had to be carefully managed due to participants expressing violent sentiments through their own hip-hop lyrics.

The review by Cain *et al*. found the following success factors: 'Respect for mentor and facilitators' (which relates to PT1 in the present study) and 'culturally relevant music' (PT4), notably "findings also highlight that accounting for young people's perspectives about music, specifically, building programs with their musical taste and interests in mind, became an important factor that contributed to young people's engagement in such programs" (2016, p. 117). In reference to the work by Rimmer (2012, cited previously), Cain *et al*. observe that "very few studies relate to the important role of young people's decision making within participatory arts projects" (p. 109). The review concludes: "Qualitative evidence suggests that participation in music programs assists in reducing isolation, supports diverse young people's ability to develop positive social connections, and encourages them to participate more competently within their community. Additionally, such programs have been instrumental in increasing participants' confidence and self-esteem, supporting more socially acceptable behavior in academic settings, and promoting positive mental and physical health outcomes" (p. 117).

Daykin's (2012) review of 63 music intervention studies in youth justice settings found that all yielded positive results. However, the majority were criticised for lacking detail on selection criteria, methodology or for having small sample sizes. This leads to an important observation: there is no shortage of studies that find music to be good for wellbeing, but credibility is difficult. Numerous different measures are useful, but these do not always correspond to individual needs, especially in complex situations. This aligns with the call for 'better evidence' in arts and health policy generally.

Fancourt *et al.* (2014) reviewed studies on the psychoneuroimmunological effects of music, focusing on stress-related variables. Whilst very biological-oriented, there is some overlap with the concept of resilience. The term 'resilience' is not mentioned in the review *per se*, although it does propose "a framework for developing a taxonomy of musical and stress-related variables in research design, and tracing the broad pathways that are involved in its influence on the body" (p. 15). Some consideration is also given to long term effects: "Only one of the studies selected involved a follow-up investigation to see whether changes in psychological state persisted in the weeks following an intervention. Sakamoto *et al*. (2013) showed promising evidence of the sustained impact of music, finding that improvements in the Behavioral Pathology in Alzheimer's Disease Rating Scale (BEHAVE-AD) persisted for 3 weeks following the end of a 10-week intervention where patients listened to recorded music selected from memorable periods in their lives" (p. 17). The study by Sakamoto *et al.* (2013) does connect music and memory, which is relevant to PT6 in the present study, but the outcomes measured (behaviour change in people

with Alzheimer's disease) are different to this study's (increased wellbeing via positive associations with music).

Reflecting wider issues around studies that measure subjective experiences, Fancourt points out the difficulty around terms such as 'stress', which has different meanings for different participants. She also notes a tendency in some studies to distinguish between 'recorded music' and 'music making' but without providing further detail. Given the range of different modes of music making, activities should be described more precisely to identify mechanisms. The review notes: "This approach means that the simple term 'music' is in fact hiding a number of key variables any one of which could be responsible for psychoneuroimmunolooical changes, such as musical content, physical engagement, social involvement and personal response" (2014, p. 22).

Maratos *et al.* (2008) reviewed five studies on the efficacy of music therapies with standard care compared to standard care alone for depression. Participants who received music therapies exhibited a greater reduction in symptoms of depression than those who received standard care. However, the review criticised the general level of methodological quality, primarily in terms of statistical rigor and the scant detail given on randomisation procedures (p. 8). The review distinguished between active and receptive music therapy approaches.

> Active techniques might be used when participants cannot articulate difficult feelings. Here the therapist uses clinical techniques to connect with the patient in an improvised dialogue, which can then act as a springboard to emotional awareness. Receptive techniques involve the use of precomposed music for relaxation, reflection, guided reminiscence and change of mood state (Maratos *et al.*, 2008).

The present study, whilst not a 'music therapy' intervention, focuses on *active* techniques. The activities will be described, because distinguishing exactly which categories of music activity have what effect on which participants is important to the realist evaluation sentiment of 'what works, for whom, in which circumstances?' MacDonald and Wilson (2014) cite the above study in their call for more precise delineation of which intervention activities specifically cause what effects. This is a reasonable cue for researchers to more accurately describe music activities, enabling "separation of effective components for research purposes" (p. 12). Whilst MacDonald and Wilson focus on musical improvisation and the inherent activities within that practice, the present study includes a range of activity that involves some improvisation – including free improvisation – as well as more programmed activities. These will be described within the programme theories, as the mechanisms to wellbeing emerge.

MacDonald and Wilson (2014) reviewed various contexts in which music improvisation (which was a significant part of the music activity in this study) had positive health outcomes across both

physical and psychological domains. They made use of Cochrane (systematic) reviews on music therapy for autistic spectrum disorder (ASD) (Gold *et al.*, 2006) and for depression (Maratos *et al.*, 2008) to identify mechanisms that suggest how improvisation might be helpful in these contexts. It was noted that the interpersonal (as opposed to a solely musical) exchange enabled during therapeutic music improvisation can enable insights into personal qualities, which can help both the therapist and the client to infer meaningful emotional insights that might not otherwise be accessible. This is of particular relevance when working with children with ASD or others who struggle to communicate verbally. MacDonald and Wilson also point out that improvisation can involve visual communication between musicians, which may yield progress in establishing therapeutic relationships with children with ASD. Such mechanisms were evident with some of the young people at Ferndene, although none explicitly discussed music improvisation activities during their interviews.

Types of music activity

MacDonald and Wilson (2014) call for increased separation of music therapeutic components to gain a more specific understanding of exactly what activity leads to which effect. Music activities were diverse in the present study. At Ferndene, these were mixed with some non-musical 'icebreaker' games/exercises and at Chilli Studios there was a lot of conversation between the music activities. These factors may have had some additional effect. However, I encouraged interviewees to distinguish which musical activities they felt had a bearing on their wellbeing. The young people were keen to state which sessions they enjoyed the most, whilst older participants were more able to explain exactly what element of the music activity they felt had influenced their wellbeing.

Categories of music activity varied and most sessions involved several types, especially at Ferndene, where frequent changes of activity were deployed to maintain interest. Music therapists list a range of activities that either directly involve or are related to music, that they use as part of a wider 'toolkit' for use in a range of contexts, depending on factors such as ability or engagement.[9] Three main categories of activity were identified in this study: 1) Song writing and recording, which involved the least 'music playing' and incorporated conversations around ideas, lyrics and meaning, and some technical recording activity. This study focuses on the variation within this broader project-based activity and the idea of having a defined end-goal to achieve. 2) Learning and performing cover versions of songs that held meaning for the participants was

[9] One such example (of many) can be found at: http://www.musictherapytunes.com/wp/21-types-of-music-therapy-activities/

popular at both study sites. A key aspect of this activity was the amount of choice or musical preference given to participants, who pleasure from the ability to learn or perform a favourite song, which carried some meaning for them in terms of either identity projection or memory. And 3) Improvisation, which is broadly defined by MacDonald and Wilson as "performing music together that is spontaneously created in some or all respects" (2014 para. 13), although the practice has multiple other characteristics that have therapeutic potential. Improvisation was introduced by the facilitators in a relatively prescribed way at Ferndene (e.g. turn-taking or sound layering exercises), whereas improvised 'jamming' was more of a default activity at Chilli Studios, where participants had more experience of this type of music making. The range of activities covered at both study sites made it difficult to investigate the effects of one particular element of musical participation for this study, although I have attempted to specify these within the programme theories described in the findings and discussion chapters. No particular music therapy 'exercises' or approaches were *explicitly* used, although all of these activities can be drawn upon within music therapeutic contexts.

2.4.6 Identity

Many studies focus on niche groups, often people in challenging circumstances or who have found themselves in a different culture or community than they originated in (e.g. refugees). Such contexts emphasise the importance of identity to wellbeing. Most participants in the present study are geographically local, but have nevertheless experienced marginalisation, having been deemed 'different' (enough to require inpatient care) in relation to mainstream society.

Literature around music and identity is extensive. Whilst not always discussed in terms of health and wellbeing, identity issues are often a factor in individual psychological wellbeing. It is worth distinguishing between personal and social identity, the latter of which has particular relevance to marginalised groups, such as those in challenging circumstances.

> …research in the area of music sociology has made clear the connections between music activities, such as sharing, listening and music making, with the formation and consolidation of personal and social identity, such that music can become representational of the self… Other studies indicate that a shared social identity within minority groups can also have positive wellbeing effects… (Lenette *et al.*, 2015, p. 13).

Broader conceptions around identity relevant to the present study include: Becker (1997), whose explorations around finding meaning in a disrupted world draws heavily on people's use of art as a means to make sense of their own challenging circumstances; Hall and Du Gay (1996), who explore the idea of people reconfirming or adopting identities from specific genres, from classical chamber music to disco and electronica; Bennett (1999, 2000), whose research on youth musical

subcultures draws on Maffesoli's concept of *tribus* (tribes) to reassert that youth identity is more fluid and constructed than previously thought; Frith (1996), whose exploration of musical identities focuses on the link (or lack thereof) between aesthetic and social values; and MacDonald *et al.* (2002), who draw together perspectives on music psychology and musical communication, and their complex relationship with developing identities. One programme theory in the present study focuses on (sub)cultural allegiance and identity, and this is explored further in the discussion section (p.175)**.**

An observation on 'cultural capital'

Many papers exploring complex determinants of health and wellbeing in relation to arts refer to cultural capital (Jeannotte, 2003; Kim & Kim, 2009; Hampshire & Matthijsse, 2010; Clift, 2012; Lenette *et al.*, 2015). Clift defines cultural capital as "access to culture-based resources" (p. 121). However, my own understanding deems 'cultural capital' to be a more personal cache of social credibility based on the amount or type of culture one is familiar with (being 'culturally literate'). The resource idea is linked to Putnam (1995, 2000), whereas my (related) interpretation is rooted in an undergraduate arts degree. Intervention studies tend to use a more pragmatic approach and realist evaluations also speak of 'resources', so Clift's definition has more relevance here.

2.5 UK Policy context

It is noted that "policy-makers favour as evidence quantitative evidence, which in turn puts economics in a privileged position within the social sciences…" (Imrie, 2016, p. 122). The existence of 'health economics' as a specific economic/policy branch inextricably links wellbeing to health within political discourse (Currie & Stabile, 2007). As we have seen, defining wellbeing in qualitative terms that are also economically useful is more challenging, particularly in the context of arts and health programmes.

2.5.1 National context

Arts Council England (previously The Arts Council of Great Britain) has informed some UK health policy over the last 70 years (ACE, 2016), but formal policy recognition of arts interventions in health is historically scant. Despite being used for hundreds of years, 'medical humanities' has only recently been formally incorporated (as an option) into medical training (Crawford *et al.*, 2015). Participatory arts programmes and arts on prescription have begun to attract marginally more attention and funding as the evidence base for their benefits grows. A significant development in this area therefore is the establishment of the All-Party Parliamentary Group on Arts, Health and Wellbeing (APPGAHW) in 2014.

In November 2015 the APPGAHW launched a two year Arts, Health and Wellbeing Inquiry in collaboration with King's College London and in partnership with Guy's and St Thomas's Charity and the Royal Society for Public Health Special Interest Group on Arts, Health and Wellbeing. One of the inquiry's primary aims is to build on recent work in evaluating the costs and benefits of arts interventions and support the development of evaluation frameworks for measuring their cost effectiveness (APPGAHW, 2015). This study, rather than pursuing an agenda to secure more funding, is responding to that call for better evaluation.

The APPGAHW expects to report in 2017 with a view to advising and developing policy, and in collaboration with the Department for Culture, Media and Sport (DCMS), has an overall aim to:

> [Make] the case for integration of the arts into the delivery of public services throughout the life course, access to the arts will be massively increased. At the same time, funding for the arts will become more sustainable as cultural attendance and participation become integral to wider strategies aimed at improving the health of the nation" (Coulter & Gordon-Nesbitt, 2016).

The group has discussed the evidence base for music interventions on health and wellbeing, with particular reference to children's socio-cultural development, but speaks of mental health, learning disability and social exclusion only in general terms. However, it does cite an Australian study, which claims: "people engaging the most with culture are found to have better mental wellbeing than those engaging less often" (Davies *et al.*, 2016).

The difficulty is in making these arguments stand up to economic scrutiny. A report by the All-Party Parliamentary Group on Wellbeing Economics (APPGWE) focuses on four policy areas, one of which is arts and culture (APPGWE, 2014b). The report's website claims: "Wellbeing evidence gives a robust means of measuring the value of non-market goods. Arts and culture play an important part in all our lives, and wellbeing data will help make the case for spending in these areas" (APPGWE, 2014a). This more holistic, less health-centric approach indicates changing ideas around the meaning of wellbeing in society. The DCMS also identifies the need for more individualised wellbeing definitions in its report, noting that wellbeing measurement is an increasingly prominent part of policy discussions and that "since May 2013, the ONS's annual reporting of national wellbeing has also included measures of cultural engagement" (Fujiwara *et al.*, 2014, p. 7).

Public Health England (PHE) also calls for more robust evidence of the effectiveness, impact and costs of arts for health programmes. Whilst acknowledging the growing evidence base for the use

of arts in public health, the document claims that this is not readily accessible to those who commission or develop services:

> To date, there are no clearly established evaluation frameworks for arts in health and wellbeing. Evaluation draws on methodologies from arts practice, humanities and social sciences as well as healthcare. Artists, health professionals, policy makers, economists and researchers bring different perspectives and approaches to the task of evidencing impact and value. Artists can find it challenging to navigate the terrain of evaluation and to access the language and frameworks that are required in order to develop robust evidence that will ensure that their programmes are understood and are eligible for funding… This framework does not assume that 'one size fits all' in arts for health and wellbeing evaluation. Instead, it acknowledges that a range of approaches and methodologies will be needed to assess complex arts in health interventions (Daykin & Joss, 2016, p. 5).

Not only does this seek to bridge the gap between the vast amount of arts and health research and health commissioners, it also recognises the complexity of measurement, indicating the need for a more bespoke evaluation model and making recommendations on the evaluation of group-based arts projects. Much of the recent literature on arts and health also calls for further research or better evaluation. MacNaughton et al. (2005) point out that "…those who are responsible for providing funding for arts in health are increasingly demanding results that indicate a measurable health gain from the projects".

PHE identifies 'Theory of Change' as a particularly useful theoretical basis for evaluation. This is a similar theory-driven approach to RE, differing in that it tends to be used in project planning, whereas RE uses outcomes to identify causal mechanisms. PHE claims that whatever framework is used, its outcome measures need to be sensitive to the participants. These calls for better evaluation are well-supported and constitute strong drivers for the present research study.

The Royal Society for Public Health (RSPH) recently established a Special Interest Group for Arts, Health and Wellbeing that aims to collate, organise and systematise research with a view to influencing government policy. The group is still young, but has considered issues including the role of music in dementia and post-stroke rehabilitation, which emphasised the growing need to place musical interventions in health and social care on a secure scientific foundation (Särkämö, 2016), and the kinds of creative activities that NHS commissioning groups might consider (Payne

& Clayton, 2015).[10] It is clear that music and wellbeing are becoming more widely debated, but that the lack of adequate evidence remains the primary stumbling block.

2.5.2 Regional context – projects in Northeast England

In 2001, the Tyne and Wear Health Action Zone commissioned 'Common Knowledge', an initiative to improve health through arts interventions in a broad range of healthcare settings. Out of 50 interventions studied, 14 involved music and all of these yielded positive benefits for participants (Smith, 2003). In 2006, Sage Gateshead was opened, providing a base for much of the Northeast's music activity, including mainstream classical (Northern Sinfonia), folk (Folkworks), higher education courses and groups for people in challenging circumstances, such as those with learning disabilities, physical disabilities, mental health problems, the elderly, looked after children and people living in poverty. Of Sage Gateshead's programming expenditure, 80% is community-based, serving a health, social or education mandate (Sage Gateshead, 2015). The organisation is continuously seeking to evaluate its work effectively to demonstrate its economic, health, social and community impact.

Northeast England has an established local network for arts and health programmes (including organisations such as Equal Arts, Chilli Studios and Sage Gateshead)[11] and it is clear that the value of arts, including music, is well recognised in the region. Many of these organisations rely on ongoing government or charity funding and, in light of the increased competition for such monies, seek to better understand their own impact through evaluation exercises in order to strengthen their cases for renewed funding. Chilli Studios' most recent evaluation (Armstrong, 2014) cited a decline in mental health service provision in the Northeast, despite an increase in need. This, combined with evidence indicating that involvement with arts and culture can significantly improve a person's mental health and sense of wellbeing, forms the basis for Chilli Studios' and similar organisations' bids for funding and for increased attention from health and social care commissioners. Such evaluations can therefore have a direct impact on individuals.

[10] Both of these were recorded as webinars and are available to RSPH members online at: https://www.rsph.org.uk/resources/special-interest-groups/arts-health-wellbeing/arts-health-and-wellbeing-webinars.html.

[11] A list of such organisations, filtered by region, is available on the National Alliance for Arts, Health and Wellbeing website: http://www.artshealthandwellbeing.org.uk/directory/results?page=2&order=field_where_based_value&sort=asc&keys=&region_operate[0]=North%20East.

2.5.3 The need for better evaluation

Clift et al. (2009) note that the problem of assessing and evaluating the volume of literature on arts and health to provide an overview is considerable, and that due to the complexity of the undertaking as well as the range and variety of arts programmes, their account is unavoidably selective. However, a number of approaches are mentioned in their discussion of theoretical frameworks for arts and health, including Realist Evaluation:

> In the English context, it is notable that several recent research initiatives have drawn explicitly on the "realistic evaluation" framework developed by Pawson and Tilley (1997) in developing models of how engagement in arts activities lead to health benefits. Their perspective is based on an endorsement of a realist philosophy of science and a strident critique of positivistic notions of causality and the use of standard experimental designs in evaluation research. For Pawson and Tilley, the 'real' challenge facing evaluation research is to construct and test models involving "context–mechanism–outcome" configurations, which take seriously the need to understand "what works for whom in what context"… Such an approach is very significant as it begins to offer the prospect of identifying and distinguishing mechanisms which are specific to particular forms of arts involvement, and others which may be more generic, arising in a similar way in a wide range of arts activities and even non-creative pursuits. It is also possible that particular forms of arts participation bring into play a distinctive profile of generative mechanisms with respect to well-being and health (Clift *et al.*, 2009, p. 19).

The report concludes that the creative arts have a strong role in health promotion and healthcare settings, and calls for further research and stronger evaluation. Arts for health projects are well established across England, but many are short-term and have little resource for evaluation, so there is still some way to go in convincing policymakers. It is worth noting that Clift's report was written and researched during an arguably more politically and economically optimistic time, at the tail end of the Blair era and before the UK austerity programme was implemented in 2010.

More recently, the Arts and Humanities Research Council (AHRC) published *Understanding the value of arts and culture* (Crossick & Kaszynska, 2016), which still calls for better evaluation and stronger evidence. The report "[starts] with the individual and works outwards to broader society and the economy" (AHRC, 2016). A number of potential wellbeing factors are referred to, such as personal reflectiveness and social wellbeing. Emphasising their specifically individual approach, the authors state:

> What emerges from the project is the need to make first-hand, individual experience of arts and culture central to our understanding of their value. To fully appreciate the impact of culture on the economy, on cities or on health we must start with understanding the individual experience, whether this is in helping people to become more reflective about

> themselves and others or more imaginative and innovative as members of society. So many other benefits flow from that (AHRC, 2016).

Crossick & Kaszynska acknowledge that research design should be commensurate with the methods preferred by policymakers in order to form closer relationships between 'arts and health' and government. They believe frameworks should be used that are appropriate to the complexity of the issue, making specific reference to Realist Evaluation as "an approach that is both sensitive to context and explanatorily powerful" (2016, p. 121).

A major study, commissioned by DCMS and DH, found robust benefits for participants at 102 arts in mental health projects in England (Secker *et al.*, 2007). The report ascertained the scale and scope of participatory arts work in England; examined outcomes data from two large projects; developed indicators and measures for use within an evaluation framework and tested these in six of the projects under review. However, the two scales used (the Clinical Outcomes in Routine Evaluation (CORE) scale and an unnamed measure of empowerment that included questions on self-worth and confidence) are open to accusations of considerable subjectivity. The paper highlighted therefore the difficulty in using self-perceived wellbeing measures and this had a direct influence on the present study's approach to discussing wellbeing with participants. The systematic review by Leckey (2011) summarises neatly the inherent challenge:

> Results from this review indicate that creative arts may be one way of promoting social networks in conjunction with improving psychological and physical well-being although there appears to be no clear evidence to support this claim. *A major factor seems to be a lack of clarity of the concepts (well-being, mental illness/health and creative arts)…* It appears that there are many interpretations of the concepts that impact on the effectiveness of the creative activities that individuals engage in. This review highlights the need for further research into the effects of creative arts and to clearly identify what is meant by mental well-being in a more systematic structured way (Leckey, 2011 - emphasis added).

2.6 Realist evaluation and the gap in research

Realist evaluations of arts and health projects are rare, indicating a gap in the research landscape which this study seeks to address. Studies that do combine the subject area/methodology include:

- A theory-driven evaluation of a dance/physical activity programme for health promotion (Sridharan & Nakaima, 2012), which aimed to identify the pros and cons of theory-driven evaluation designs. ToC rather than RE is used in this case, although the questions raised, such

as “what is a ‘good enough’ programme theory?” are shared by many theory-driven approaches and have been useful guidance for the present study.

- Galloway’s (2009) paper on the social impact of the arts focuses on the problems of causal attribution, which are an issue not only for arts impact research, but also social research in general. Galloway concludes that a different understanding of ‘generative’ causality is required by theory-driven approaches.
- The ‘evidence dossier’ for arts on prescription (Clayton *et al.*, 2015) mentions RE in passing, saying that it can be used to explore generative methods of the outcomes seen, but giving no examples of previous studies using this methodology.
- A study on cultural attendance and public mental health (Froggett & Roy, 2014) claims to have effected a Realist Evaluation by virtue of examining three tiers of a programme, but does not give any further detail. This is tantalising, but seems like a footnote: “…a micro, meso, macro analysis allows an understanding of the interaction between various components of a system and hence a realist evaluation of mechanism and context (Pawson and Tilly, 1997), rather than an exclusive focus on outcomes” (p. 16).

As yet, there is no proposed recommendation for using RE in arts and health research, despite calls for more effective evaluation and more theory-driven approaches. A set of reporting standards for RE is under development and expected to be published in 2016 (Greenhalgh *et al.*, 2015). This may lend more formal structure to the framework, encouraging arts evaluators to embrace the methodology more widely.

2.6.1 Realist evaluation and this literature review

Realist evaluation is a theory-driven methodology that uses retroductive reasoning to establish causal explanations. To identify explanations about how the interventions in this study worked, mechanisms with explanatory potential were triggered and observed in the study sites. Once these were identified, findings-specific literature was examined to shed light on the relevant mechanisms. In other words: RE’s filtering process meant that some more specific literature was examined *after* the data collection, in response to the data and developing programme theories, and is described in the discussion chapter.

2.7 Summary

The term ‘wellbeing’ is increasingly referenced in political, health, social and cultural sectors. Attempts have been made to define and quantify wellbeing, but these rely on a shared

understanding of its meaning, which can be problematic at both a policy level and for local arts and health programmes. Arts interventions designed to increase wellbeing use different approaches in gathering evidence of their effectiveness. However, approaches that encourage more individualised wellbeing definitions are becoming more popular.

Definitions and use of the term wellbeing change according to the contexts in which arts for health programmes are delivered, and in response to wider political and social debates. To this end, more research is needed to fully understand 'context' in relation to 'wellbeing' as an outcome for arts in health programmes. The present economic climate – of increased competition for resources – has resulted in calls for more rigorous evidence and more robust methodologies from both the culture and health sectors. This is particularly relevant in competitive funding environments, where the health and wellbeing benefits of arts programmes are inevitably compared by funders and the public to other interventions. As Jenkins bluntly notes: “if you’re competing with hospitals, you’ll lose” (2015).

The lack of RE studies in this area, combined with a trend towards more values-based evaluation indicates a need for more appropriate and innovative methodological options. RE’s flexibility towards values-based methods and its fluidity in allowing wellbeing to be explored from both individual and broader perspectives makes it an appropriate framework for use in this study. It is amenable to a range of wellbeing definitions and can be adapted to either more subjective, or to more social/economic wellbeing studies. The present study is interested in personal wellbeing, but these findings have the potential to inform other music-based interventions at various outcome levels, thereby increasing the potential for broader wellbeing improvements.

Daykin and Joss (2016) identify some of the challenges associated with measuring arts interventions for wellbeing and set out a potential framework for addressing this. In their terms, this project constitutes a ‘formative and process evaluation’, which “takes place during projects with the aim of improving practice” (p. 9). Northeast England has a flourishing arts scene and stands to benefit greatly from evaluation research into the wider health benefits of such activities. The challenge faced by artists and arts project facilitators navigating the complex evaluation landscape represents a clear need for useful frameworks, and the present study is expected to address that specific need. The wider call for better evaluation of complex public health interventions is clear, but there is also a need for more specific data that seeks to address personalised views of wellbeing. Iterative and theory-driven methodologies such as Realist Evaluation are emerging as being particularly useful for uncovering individual data (satisfying a more values-based agenda) to generate programme data. This backdrop has influenced the

research question itself; ‘what are the mechanisms…?’ which seeks to uncover data around why programmes work for individuals and how those mechanisms might inform similar programmes.

CHAPTER 3: METHODOLOGY

3.1 Chapter introduction

This chapter will connect the underpinning philosophy of realism to the origins and development of Realist Evaluation (RE), the framework used in this study. The key terms and concepts will be described, followed by a discussion of the main issues in RE that influenced this study's design. There will follow an exploration of some of the debates around realism, causation and generalisation, and the chapter will conclude with a worked example of the use of RE in this study.

3.2 Realism in social science

The realist 'mission' is to reveal and increase our understandings of the explanatory mechanisms that can account for social phenomena. In doing so, realism offers new perspectives on the tensions between interpretive understanding and causal explanation (Manicas, 2006).

> Many explanations in the social sciences, as in natural science, take the form of postulating possible mechanisms to explain observed or presumed facts... To understand such effects has little to do with testability and prediction in the Laplacean sense and much to do with enriching our understanding of the kinds of mechanisms in play in complex processes… [Realism] is concerned with the implications of this approach, notably for the relations between agents and social structures (Outhwaite, 2007, p. 858).

The ability to incorporate both interpretive and empirical positions goes some way towards bridging the gap between the subjective outcomes of creative therapies and more objective requirements for making policy recommendations, so realism has been chosen as the paradigm for this study.

3.2.1 Ontological basis of realism

Ontology concerns the form and nature of reality, and consequently what can be known about it (Guba & Lincoln, 1994). Realism means "a belief in the independent existence of reality" (Joseph, 2007, p. 345) and that reality is ontologically independent of human thought (Flew, 1984). I.e. there exists a single 'reality' irrespective of differences in perception caused by moral beliefs, language, ideology, etc. Within this paradigm, Flew argues that at least some of our sense data (observations, perceptions) describe the external world as it really is (p. 81). This 'some' is critical, implying that all knowledge (epistemology) is contextual and partial. In this study, musical phenomena are therefore considered 'real', but perceptions of these and their influence wellbeing are contingent on individual values and perspectives (Altheide & Johnson, 2011).

Bhaskar addresses realism in terms of the philosophy of science, asserting that phenomena are caused by underlying generative mechanisms (1975/2013). Pawson (2013) summarises this - in terms of the natural sciences - with great clarity as follows:

> Bhaskar's moment of glory lies in showing that the laws of physics are not discovered through observational routines, nor through the mechanical application of measuring instruments. Rather, laboratory work attempts to reproduce a set of processes that we expect theoretically will give rise to an empirical regularity. Scientific experiments trigger a hypothesised mechanism in a known set of conditions in order to see if the expected uniformity comes to pass... Experiments are made by designing rather than observing a closed system, the design being informed by theory. The results of the manipulations are foreshadowed and interpreted by theories of underlying generative mechanisms which organise the observable properties (Pawson, 2013, p. 4).

Bhaskar's later works increasingly address the social sciences and humanities, adapting the 'take home' concept of the generative mechanism for social contexts. This is formalised into an evaluation framework in Pawson and Tilley's *Realistic Evaluation* (1997), in which the objective is to identify, develop and refine such mechanisms with a view to achieving the best possible explanation for the social phenomenon under investigation.

3.2.2 Epistemological basis of realism

Reality therefore, as an independent entity, cannot be perfectly understood (Mark *et al.*, 1998; Tang, 2011) and to this end, our knowledge of it is always partial. Hammersley, citing Blumer, argues that "…our accounts of the world are regarded as substantially reliable, yet incomplete and erroneous" (1989, p. 125). Yet, knowledge is also emergent, meaning that "over time one might contribute to what is understood" (Salter & Kothari, 2014, p. 2), "to uncover processes in social life" (Hammersley, 1989, p. 162).

Realism has been located within a range of anti-empirical epistemologies (e.g. conventionalist, instrumentalist and pragmatist) bit it does not reject empiricism outright (Outhwaite, 1987). Broadly, realism falls somewhere between the two poles of the empirical and the theoretical, thereby accommodating both objectivist and interpretivist insights within accounts and explanations of social phenomena to enable a more nuanced understanding of "complex systems [programmes] thrust amidst complex systems [society]" (Pawson, 2006, p. 168).

As described in the previous section, studies that use RE are informed by one of two main epistemological standpoints: Critical Realism or Empirical Realism (also known as Scientific Realism) (Archer *et al.*, 1998/2013; Bhaskar, 2013). Critical Realism assumes "an overabundance of explanatory possibilities" (Pawson, 2006, p. 19), leading the researcher to be persistently

critical of potentially false or mistaken explanations (Bhaskar, 1979/2014). Conversely, Empirical Realists acknowledge the need to 'draw a line' and select explanations in spite of the fact that further potential explanatory mechanisms may be uncovered (Pawson, 2006) – what Bhaskar calls the TINA (there is no alternative) aspect (2013, p. 16). The latter is a more pragmatic approach, especially given the call for better and more useable evidence by both policymakers and funders.

Critical Realism

Both Harré and Bhaskar have contributed significantly to the development of Critical Realism, which reconciles the strict empiricism of scientific realism with a 'mind-dependent' real world that cannot adequately be proven using empirical means. Harré advocates the idea that plausible theories (those powerful in prediction and retrodiction) can be assumed to denote real things and that on this basis, it is reasonable to pursue those things (Harré, 1986). This 'policy realism' appears to anticipate the beginnings of programme theory, hinting at the language of RE. Within this, Harré also proposes 'convergence realism' as "the view that the increasing empirical adequacy of science as a whole implies the convergence towards better and more accurate theories of the world" (New, No Date).

Bhaskar, who was supervised by Harré, further contributed to the Critical Realist project, notably through his 'stratified ontology' model (1975/2013, p. 13), which posits that reality can be disambiguated into three separate domains: The *Real*, which is the unknowable milieu that contains 'generative mechanisms' (powers and liabilities of things, which endure even if they are not acting); the *actual*, which contains 'events', triggered by those generative mechanisms; and the empirical, in which those events cause detectable human experiences (figure 1).[12] Byrne and Ragin articulate this most succinctly and poetically, stating that: "The *empirical* existence of the sun rising and setting is related to the *actual* 'event' of the earth's orbit around the sun. Both in turn are explicable by the unobservable [yet *real*] 'mechanism' of gravitational force" (2009, p. 73). The value here lies in the idea that the theoretical (gravity) and the empirical (the sunset) are linked and explained within a single model.

[12] Harré also distinguished three ontological realms (1986), but Bhaskar's model became the more widely adopted among proponents of Critical Realism.

Ontological Dimensions / Entity Level	Domain of Reality	Domain of Actuality	Domain of Factuality
Mechanisms	√		
Events	√	√	
Empirical Experiences	√	√	√

Figure 3. Bhaskar's three ontological domains for scientific investigation (Adapted from Bhaskar 1975/2013, p.13).

If all knowledge is contextual and partial, the objective of critical realism is therefore to get as clear a picture of ontological reality as possible through increasingly refining the enquiry. In a humorous nod toward the infinite regress paradox, Kurki (2007) describes Critical Realism as '…Causes All the Way Down'.[13] Pawson takes a slightly harsher tone, accusing Critical Realism of being "a strategy with no use whatsoever in applied social enquiry" (2013, p. 71). The present study seeks to identify theoretical explanations that connect music participation with increased wellbeing by revealing their underlying mechanisms. In its aim of identifying mechanisms, with a view to applying these rather than forever increasingly refining them, this study takes an empirical realist approach, rather than a critical realist approach.

Empirical (aka scientific) Realism

If all knowledge is contextual and partial, the 'truth' (if it is to have any use, e.g. in policymaking) must be pursued to a reasonable level then accepted as a form of reality. This is the more pragmatic position taken by empirical realists such as Putnam and Boyd et al. Chernoff (2007, p. 399) explains: "the core philosophical doctrine of SR [empirical realism] claims that the principles of our best scientific theories are true and that we are warranted in accepting the entities they postulate into our ontology". The keywords here are 'our best scientific theories' – the best theories available based on scientific/empirical evidence are accepted and used, with the

[13] The infinite regress paradox is often described in the following anecdote: Following a lecture on astronomy, an eminent scientist is challenged by a 'little old lady', who claims that the earth is in fact a flat plate supported on the back of a giant turtle. The scientist asks what the turtle is standing on, to which the lady replies "it's turtles all the way down".

acknowledgement that further explanatory potentials may remain and that better theories may emerge (Pawson, 2006).

When presented with multiple potential mechanisms to explain a single outcome, Empirical Realists use 'abductive reasoning' or 'inference to the best explanation' (Lipton, 2003) to decide between mechanisms, choosing whichever has the most explanatory potential in spite of the knowledge that in an open system, further explanatory potentials may exist. Multiple mechanisms may lead to multiple outcomes (as in this study), but Empirical Realists do not seek to perpetually question mechanisms *ad infinitum*. Empirical Realism therefore seeks to position itself as "a model for scientific explanation which avoids the traditional epistemological poles of positivism and relativism" (Pawson & Tilley, 1997, p. 55).

One criticism of sociology is that it "fails to establish constant conjunctions between any two types of social event" and that the very nature of social events precludes any possibility of this (Menzies, 2014, p. 123). Therefore, any claim to establishing scientific laws that are applicable to social life cannot be substantiated. The realist philosophy of science attempts to meet this objection head-on by seeking to identify positive generative mechanisms (causation), which remain influential even if their outcomes differ due to contextual variations. Expressed as a logical premise, sociological hypotheses are tendency statements which can be articulated in terms of: *A* leads to *B* "in the absence of interfering conditions" (Gibson, 1960/2013, p. 18). Realists agree that in most sociological research, a law (cf. CMOC) or hypothesis (cf. PT) may be proposed within certain contingent contexts; either that external contexts can be ignored or, in the case of RE, that *A* leads to *B* in society [context] *C*. This scientific approach to social events emerged from Empirical Realism, which generally considers scientific knowledge to be the closest man can get to describing the 'real' world.

This study

Starting from the reasonable assumption that individuals connect music with wellbeing in a wide variety of ways, and that wellbeing itself means different things to different people, this study will identify multiple distinct explanatory mechanisms, rather than critically eviscerate a single mechanism. To this end, it identifies most strongly with the Empirical Realist approach. Where Critical Realists seek to always question the assumptions made about mechanisms in the pursuit of increasingly specific explanations and in-depth explorations of a single mechanism or programme theory, this study begins with a long list of PTs to be filtered down based on iterative data accrual. It will eventually decide on the most likely mechanisms which explain the observed outcomes.

It is worth noting that in adopting an empirical realist approach, the present study does not explicitly reject critical realism. Porter has argued that there is a place for critical realism within RE, based on the interrelationship between structure and agency; he rejects Pawson's (2013) dismissal of critical realism, contending that "…evaluation of interventions needs to focus on both the social mechanisms they entail, and the responses to these by the actors affected by them" (2015, p. 79). This, Porter argues, allows for a more critical understanding of the extent to which participants experience the interventions that act on them. Despite this convincing argument, the present study, in its aim to select from a range of alternative programme theories that might have potential in similar music programmes, is still more suited to the empirical approach.

3.3 Origins and development of Realist Evaluation

The following timeline describes key developments leading to RE becoming established within the evaluator's toolbox, particularly in health and social care.

1860s-1950s. Antecedents of philosophical realism include Peirce (1839-1914), who championed 'scholastic realism' as an alternative to nominalism; James (1842-1910), whose 'epistemological realism' claimed that the things exist innately and independently of our perceptions; and Dewey (1859-1952), whose 'pragmatic realism' argues that the mind is part of the real world and so aims to reconcile perception and reality.

1970s-1990s. Now well established in social sciences, realist philosophy is further explored by scholars including Harré (1975), Bhaskar (1975/2013), Outhwaite (1987) and others. From this emerged the approaches of critical realism (Fay, 1990; Yeung, 1997; Archer *et al.*, 1998/2013; Bhaskar, 1975/2013) and scientific realism (Pawson, 1989; Hedström & Swedberg, 1998).

1990s-2010s. Discussions around critical realism and empirical realism (Carter & New, 2005; Archer *et al.*, 1998/2013) influence the development of Realist Evaluation (Pawson & Tilley, 1997; Pawson, 2006, 2013), a methodological orientation that quickly gathered momentum in both policy and academic circles.

2010s-Present. RE gains prominence in policy and academic circles; emergence of groups such as the Centre for Advancement in Realist Evaluation and Synthesis (CARES), Realism Leeds and the NIHR-funded Realist and Meta-narrative Evidence and Synthesis: Evolving Standards (RAMESES) I and II projects; increased commissioning in response to economic conditions and the need for more rigorous evaluation of social programmes; consequent increased discussion of the methodology.

Given RE's relative youthfulness, there is ongoing debate around its implementation (see the RAMESES project website, http://www.ramesesproject.org/, for examples of this). This has enabled some interpretive flexibility, allowing researchers to navigate their own route between more orthodox RE studies and more creative interpretations. This situation has led to a variety of approaches that have claimed to be – or are classed as – realist evaluations (see p. 56). At the time of writing, reporting guidelines and procedures were being developed (Greenhalgh *et al.*, 2015), so the variety in realist evaluations may reduce somewhat.[14]

3.4 Realist Evaluation

Realist Evaluation (RE) is a theory-driven evaluation framework developed by Pawson and Tilley (1997), and Pawson (2006, 2013). Emerging from the realist traditions in sociology (Outhwaite, 1987; Sayer, 1992; Bhaskar, 1975/2013), RE identifies, develops, tests and refines Programme Theories (PTs) to provide explanations (or theories that have explanatory potential) as to *why* a programme or policy works or doesn't work. Instead of establishing *if* a programme or policy works, RE seeks to gain insights into the mechanisms that underpin programmes by describing what works, for whom and in which circumstances. Over time, PTs become refined to express "ever more detailed answers to the question of *why* a programme works, for *whom* and in *what* circumstances" (Pawson & Tilley, 1997, p. xvi). Initial PTs are derived from a range of sources including academic literature, policy documents, anticipated programme outputs, observation and elicitation. These are then supported and developed, or refuted, through the iterative accrual of data. Some may be discarded because they are not triggered within that programme. This does not render the PT invalid; it just wasn't actualised in the context being studied.[15] Other PTs may emerge more strongly than had been anticipated, meriting further investigation.

In accepting both positivist and interpretivist evidence (treating formalised programme outputs and participant experiences with equality), programme theories can be developed that shed greater light on the complex systems inherent within social programmes. The success of any intervention in a social context depends on the extent to which the Programme Theory/Theories predicted or controlled the spiral of ideas and changes that occur as a consequence of that

[14] This has now been published (Wong *et al.*, 2016), albeit subsequently to this study's reporting.

[15] For example, ideas around music and spirituality were discussed during preliminary meetings at Chilli Studios and have a strong literature base. Spirituality therefore became a candidate programme theory (see appendix 1, p.225). However, the subject was not raised again during interviews or observations at either study site, so the PT was discarded. It remains a valid theory, but is not relevant in this study.

intervention. There may be multiple expected and unexpected outcomes. If these are accurately predicted (or captured and developed were they not expected), then the intervention may be considered a success. Unexpected outcomes can be investigated further and changes made, but predictability indicates a level of consistency and therefore a successful intervention design.

RE treats policies and programmes as 'theories incarnate' (Pawson & Tilley, 2009, p. 3), which can be tested and refined through evaluation. In other words, PTs are fluid models describing fluid situations, but to be useful, they must be refined to a point where they can describe 'demi-regularities' (see p.52) - although they always remain open to further refinement. The inherently fluid nature of the social world gives rise to two analytic approaches: *synchronous* approaches measure and describe 'snapshots' of a particular moment in time, while *diachronous* approaches identify changes over time. In RE, programme theories develop over time by combining multiple snapshots to develop a sharper image. Programme theories are dynamic – if one component (e.g. context) changes, so do the others – so to make a viable contribution to knowledge, enough data 'snapshots' must be taken for that PT to be considered reasonably reliable. The process is one of fine-tuning to a point where a certain level of predictability can be expected. This is the basis of Realist Evaluation which has developed over the last 20 years to become a useful and popular method for evaluating complex social programmes.

3.4.1 Key Terms used in Realist Evaluation

RE involves some specific terminology. A brief glossary is included here.

Candidate Programme Theory (cPT). An undeveloped programme theory; at the level of hypothesis, but prior to any data being collected to support it.

Chain of implementation. When the outcome of one CMOC becomes the context for another CMOC.

Context Mechanism Outcome Configuration (CMOC). A construct that incorporates the components important in realist evaluation, often used for articulating programme theories.

Demi-Regularity. "Semi-predictable patterns or pathways of programme functioning" (Dieleman *et al.*, 2012, p. 27). When the same (or similar) outcomes can be explained by the same mechanisms, a regular pattern begins to emerge. The existence of demi-regularities strengthens the likelihood of a PT being applicable in a different intervention.

Middle Range Theory (MRT). Theories that are less specific than programme theories but more specific than 'grand theories'. At a policy level, MRTs generalise across a 'family of services' (e.g.

creative arts therapies). The level of abstraction at which MRTs exist is a topic for debate among some realist evaluators.

Programme Theory (PT). A 'unit of explanatory potential' or discrete hypothesis about what is happening in an intervention, often articulated in terms of 'context', 'mechanism' and 'outcome' configurations (CMOCs).

Realist Synthesis. Realist Synthesis focuses on literature rather than primary data to develop programme theories, which might then be tested using realist evaluation. Realist syntheses are often carried out as a precursor to realist evaluations.

3.4.2 The CMOC construct

CMOC is a heuristic device used to increase understandings of programme theories, describing them in terms of their context, mechanism and outcome, and the configuration in which these components sit. By formalising programme theories into CMOCs, RE seeks to address the consistency problem that has historically dogged social sciences. Applying the CMOC construct, programmes are successful (in their 'outcomes') only in so far as they introduce the appropriate ideas and opportunities to groups in the appropriate social and cultural conditions ('contexts'), thereby triggering a 'mechanism'. RE 'flows' from this explanatory preposition, identifying or developing theories (through synthesis of ideas and resources), then testing and refining these through the intervention. The data, which may be collected using various methods, is then used to verify or formalise individual PTs, which can be articulated as CMOCs.

The CMOC construct was used in this study, which identified several PTs that needed to be reported in a consistent format if they were to be used to inform other interventions. CMOCs enable disparate programme theories to be described on more equal terms, using similar language and a similar structure. Section 3.6 (p. 62) contains a more detailed description of the terms context, mechanism and outcome as they are used in this study.

Stratified ontology and CMOs

Returning briefly to Critical Realism, it is possible to map the CMOC construct onto Bhaskar's stratified ontology model (p. 48) as follows (figure 2):

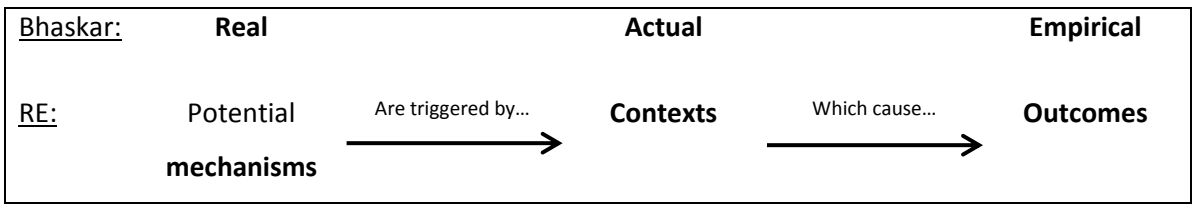

Figure 4. Mapping the components of RE onto Bhaskar's stratified ontology model.

This relationship is clarified by Jagosh in his (2015) iceberg metaphor (figure 3).

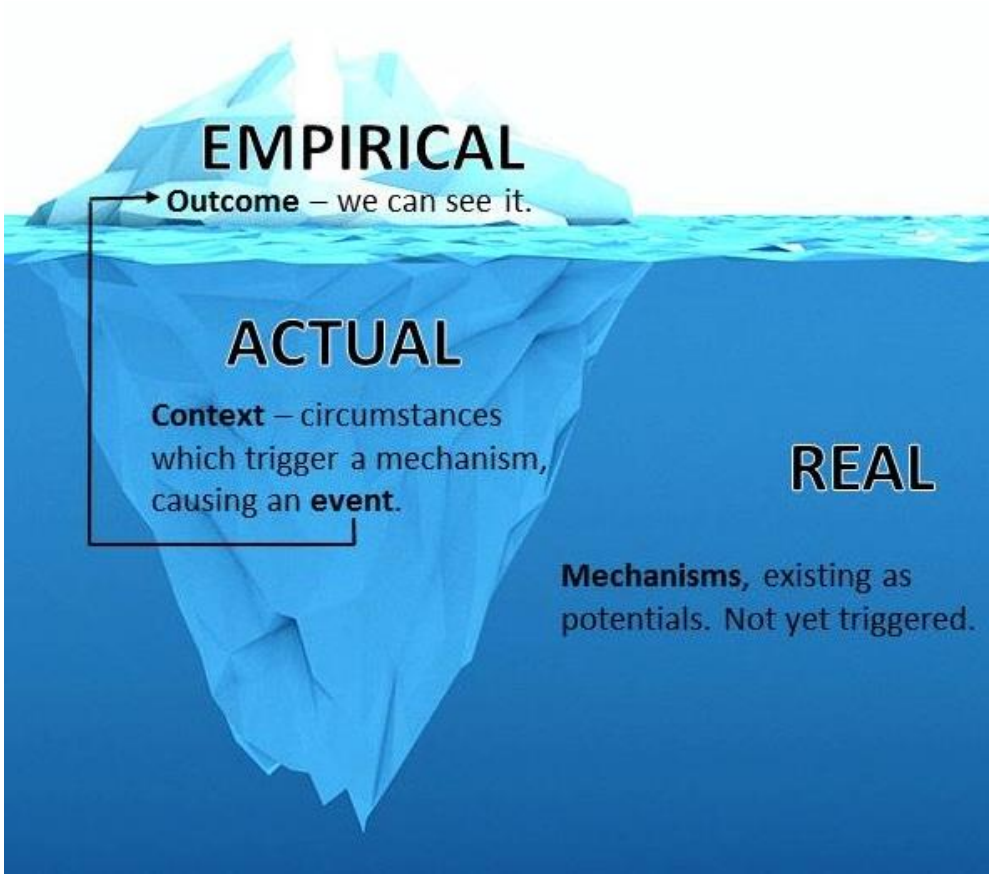

Figure 5. Iceberg metaphor for Bhaskar's stratified ontology (Jagosh, unpublished, presented London, July 2015).

This connection with Bhaskar's stratified ontology gives RE significant epistemological validity. By combining the empirical, the actual and the real into a reporting framework, RE enables social systems to be described more easily in terms of the "mechanics of [their] explanation… leading to a progressive body of scientific knowledge" (Pawson & Tilley, 1997, pp. 55-56).

Continuing the iceberg metaphor, it has been said informally that Critical Realists tend to "swim around in the water [of the real]" (Jagosh, 2015), seeking refuge in the theoretical. Critical realism has been called "a philosophy in search of a method" (Yeung, 1997, p. 51). By contrast, the debates around empiricism are equally vexed outside of the 'hard sciences'. By conferring on them parity and shared space within a discrete complex (e.g. a CMOC), RE bridges the gap between the empirical and the real by way of the actual. In response to the charge of 'swimming in theory', Jagosh (2015) advises realist evaluators to always ask: 'Why?' thereby establishing an anchor point to the 'actual', without becoming cast adrift in the theoretical. In other words,

contexts and outcomes fluctuate, but the mechanisms connecting these endure – and realist evaluators strive to identify the *active* mechanism in a given situation.

3.4.3 Data that can be used in Realist Evaluation

"The data used to develop and test explanations can be either quantitative or qualitative. Realist evaluators are generally agnostic with respect to types of data" (Mathison, 2005, p. 361). This study uses qualitative methods: participant observation informs an understanding of the context and dynamics of the activity, whilst semi-structured (realist) interviews shed light on the reasoning being used in response to participatory musical activity. The aim is to identify and explore generative mechanisms that connect music activities with increased wellbeing. Quantitative data (e.g. wellbeing measures such as WEMWBS) might also reveal a change in wellbeing but would not elucidate the mechanism causing that change.

3.4.4 The decision to use Realist Evaluation

Public health interventions are almost always complex and are rarely controlled. Consequently, RE has gained traction in public health and social research (Manzano, 2016, p. 5), and such studies are increasingly commissioned to provide more specific data on state-sponsored initiatives. These provide a framework to unearth and expose the aforementioned mechanisms (the whys and hows), to marshal explanations of (famously) "What works, for whom, in what respects, to what extent, in what contexts, and how?" (Pawson & Tilley, 1997, p. xvi). This addresses the concerns of both policymakers and researchers, as articulated in both the introduction and the literature review.

Given the vast canon of music and wellbeing literature – both academic and grey – I already had 'candidate' programme theories (cPTs) and, prior to settling on RE, had been treating these as separate potential research routes. For example: would this research focus on the social inclusion element of group musical activity or the cathartic effect of creative expression? The literature, personal experience and realist paradigm all point towards multiple mechanisms that do not work in isolation. RE offered the chance to explore multiple theories and, though an iterative process, allows these to be refined or developed in a manner sympathetic to their context. 'Real life' always contains these multiple theories. As Byrne (2011, p. 29) notes: "In our discussion of a realist version of causality, we should consider that there are multiple mechanisms which can generate the same outcome" – the outcome in this case being increased wellbeing. The concept of multiple mechanisms was a primary driver for this study's use of RE. Furthermore, RE is an actively discussed methodology with local and national support networks. Finally, the commissioning of realist evaluations by statutory bodies and government departments, such as

NICE and DFID, indicates that this approach is deemed useful in addressing specific policy and research concerns.

Potential alternatives

Creswell (2007/2013) outlines five established qualitative approaches, of which Interpretive Phenomenological Analysis (IPA) was an initial candidate for this study. MacDonald, a prominent researcher in music and wellbeing has said: "IPA is particularly useful in the context of music and health as it has a focus on personal lived experiences and how participants make sense of their experience" (MacDonald, 2013, para. 1). This at first seemed promising to the aim of exploring wellbeing in relation to the phenomenon of music. However, finding personal meaning-making processes would not necessarily reveal mechanisms that could be generalised more widely beyond individual experience. A theory-driven approach on the other hand would be more effective in identifying mechanisms that might have wider applicability, which would be eminently useful given the policy origins of this research.

Approaches to defining wellbeing, including by academics, commissioners and service providers, are discussed in the literature review. This study considers participants to be experts on their own wellbeing and therefore explores outcomes that are largely chosen by those participants. By discussing wellbeing in a way that can inform future music programmes, it must therefore strike a balance between 'nomothetic' (generalisable) and 'idiographic' (specific) approaches (Diener & Fujita, 1995). Realism is concerned with structures and the causes these generate, rather than explicitly nomothetic or idiographic approaches to causality (Archer, 1995; Sayer, 1992/2010). Therefore IPA would have been overly idiographic, whereas a programme evaluation approach is inherently more generalizable.

3.4.5 Variations within Realist Evaluation

RE is gaining popularity, having been commissioned in a range of policy sectors. This has generated increased discussion, opening up debates around the methodology. Different interpretations and approaches in RE have been caused by several factors, including (but not limited to) the variety of potential study designs and methods available; different epistemological standpoints (CR or ER); and debates around terminology. These differences are often reflected in the reporting, which has led to a great deal of variation in the literature base (although this may change, following the recent publication of reporting standards (Wong *et al.*, 2016)). However, such factors have also yielded creative implementations of the RE framework, which have in turn driven its development. Some recent examples from health and social care follow, showing a range of different reporting styles.

- Goicolea *et al.* (2015) sought to identify mechanisms that trigger a good healthcare response to intimate partner violence in Spain. Using a single programme theory, 15 case studies were compared to describe in detail the attributes for a positive outcome. Contexts, mechanisms and outcomes were carefully delineated in a table (p. 5), but little acknowledgement was given to complex configurations. By contrast, the present study used a range of PTs, commensurate with the range of potential wellbeing outcomes of music participation.
- Ablett-Spence *et al.* (2012) also used a single 'programme theory', although the report identified numerous separate contexts, mechanisms and outcomes, resulting in a 'mix-and-match' table (p. 154) using the format: C_1, C_2, C_3… → M_1, M_2, M_3… → O_1, O_2, O_3… These were narrowed down from a long list but again, separate configurations received little attention. The same programme was evaluated a year later (Ablett Spence *et al.*, 2013), this time discussing CMOCs on a 'per case study' basis, indicating a more detailed approach. Together, these reports form something closer to my understanding of a realist evaluation; the 2012 report identified contexts, mechanisms and outcomes, while the 2013 report described configurations of these in different case studies.
- Using similar methods to the present study, Rycroft-Malone's (2009) study is "theoretically informed by realistic evaluation… a case study design using ethnographic methods was used. Two sites were purposively sampled… Within each site, data collection included observation, post-observation semi-structured interviews with staff and patients, field notes, feedback sessions and document review. Data were inductively and thematically analysed." However, although context is referred to, the CMOC construct is not used and the findings are reported in the form of a logic model.
- Petchey also uses case studies and interviews in his (2008) RE of central policy and local action in community cancer care. However, his report makes no mention of mechanisms or outcomes. Discarding CMOCs, but influenced by the philosophical and methodological underpinnings of RE, Petchey uses his own reporting style. Conversely, the present study uses CMOCs as a reporting framework capable of organising a broad range of data.
- In justifying the use of RE, Dalkin *et al.* (2012) refers to the 'inner potential' of a system and the likelihood of an outcome occurring under certain conditions. Dalkin *et al*. use CMO configurations and conjectures, suggesting the job of RE is to identify the most likely combinations of contexts and mechanisms to produce given outcomes, both intended and unintended. This aligns more closely with my own understanding. Dalkin (2014) also follows this reporting model, initially identifying a broad range of programme theories before gathering data and narrowing these down to a handful of evidenced CMOCs, which are

discussed. The present study took a similar approach and the audit trail of programme theory development or abandonment is detailed in appendix 1 (p.231).

- The realist synthesis by Carr *et al.* (2014) identified one of the main barriers to accessing health services for traveller communities to be the level of trust between outreach workers and individuals. Following this, Lhussier (2015) described the findings graphically in terms of three CMOC 'levels' linked to the depth of the relationship between the outreach worker and travellers. Each level contained different potential mechanisms, corresponding with the likelihood of a positive outcome. Similarly to Abblet-Spence *et al.*, this seems both comprehensive yet specific, i.e. information was synthesised to generate CMOCs, the most important of which (trust) was identified then tested in different configurations. The present study will refine information in a similar way, but will examine more than one CMOC. In this regard, the study will be closer to Dalkin (2014), which also used several different CMOCs.
- A literature search on realist evaluations of community (non-clinical) arts interventions yielded few results (see literature review, p.41). Miles and Clarke (2006) suggest RE as a potentially valuable tool in evaluating prison arts interventions designed to reduce reoffending. More broadly, the use of theory-based evaluation has been examined to measure the social impact of the arts, which "considers the alternative generative understanding of causation that underpins theory-based evaluation (TBE) approaches, favoured recently in the UK as part of the "What Works?" agenda" (Galloway, 2009). Other literature around arts and health, and music and wellbeing has suggested RE as a potentially useful way forward in this research area (Clift *et al.*, 2009, p. 19).

Reporting styles and approaches remain disparate, so there are few consistent models on which to base research designs, although methodology papers are emerging in response to ongoing debates (Wong *et al.*, 2013; Dalkin *et al.*, 2015; Greenhalgh *et al.*, 2015), as well as the recently published reporting standards (Wong *et al.*, 2016). The essential concept of the CMOC is particularly useful and has been adopted by this study.

3.5 Realist Evaluation and this study's research question

The idea that music increases wellbeing is widely accepted. In RE terms, it is an overarching programme theory – a principal connection with multiple outcomes, whose individual mechanisms will be examined through more specific programme theories defined by this research. Thus, rather than seeking to establish a positive correlation (to *test* the overarching programme theory), this study aims to identify the specific contexts, mechanisms and outcomes

that connect music and wellbeing, to explain the overarching PT in more detail. This knowledge is expected to inform similar participatory music programmes by revealing information about the rationale used by different people in different contexts. The research question is:

- What are the mechanisms that connect participatory musical activity with increased individual wellbeing?
    - What does wellbeing mean to research participants?
    - How can music interventions be designed to maximise increased wellbeing?

In seeking to identify mechanisms that connect music activity (context) to increased wellbeing (outcome), the research question is undeniably a realist one. The CMOC construct is particularly suited for reporting findings in a way that addresses primary question in terms of explanatory mechanisms (embedded in contexts with tangible outcomes).

The first sub-question arose early in the research, when a definition and measurement of wellbeing was required. This caused significant distraction to the process of identifying a methodology, but resulted in the choice of using qualitative methods and eventually in the use of visual elicitation (see p.92). The question could be a separate research project in itself, but is specifically located in a participatory music context and was incorporated into the interviews to a) shed light on individuals' reasoning (understanding participants' concepts of wellbeing gives some insight into their drives and motivation) and b) to streamline the interview process (if a specific wellbeing outcome is deemed important early on, then questions about the music activity can focus on that outcome).

Sub-question two concerns translational potential, which is partially addressed by the recommendations generated from this study's findings. There is also some discussion around generalisation in both this chapter and in the discussion chapter – although the primary concern of this study is to explain, rather than to generalise.

3.5.1 How to measure wellbeing

Programmes that use music participation to improve health outcomes or increase wellbeing are not new. However, individuals' experiences of personal wellbeing and their perceptions of music activity are highly subjective and the contexts in which these programmes exist are diverse, so the

mechanisms that connect music and wellbeing are likely to be manifold.[16] In developing the study design, two challenges became apparent:

a) How to measure wellbeing
b) How to attribute changes in wellbeing to a musical activity

After debating 'how to measure wellbeing' with colleagues and supervisors, it was decided to take a broad agnostic approach, allowing participants to define wellbeing for themselves, then connecting this to the music activity using visual elicitation and semi-structured interviews. This enabled discussion around wellbeing to focus on the programme itself rather than on the gap between a predetermined wellbeing definition and the participant's own understandings, thereby retaining the musical focus of the conversation, i.e. what is it about *this music activity* that makes you feel [balanced, calm, sociable, etc.]? However, this approach was at the expense of using a fixed wellbeing definition, which may have enabled a more consistent measurement.

By asking 'what does wellbeing mean to you?' and 'how does your participation in music affect this?' this study uses qualitative types of question that resonate with the motive of realist evaluation, which seeks to elicit: what works, for whom and in what contexts?

3.5.2 Realist Evaluation of arts for health interventions

Of the many calls for better evaluation of arts and health programmes, Staricoff most closely reflects the benefits of RE by pointing out: "the value of evaluating the effect of the arts in healthcare resides in providing to all involved in designing, implementation and funding, the knowledge *of what*, *when* and *how* to introduce different art forms to achieve the most effective results" (Staricoff, 2006, p. 116).

Clift et al. (2009) identified the need and increasing trend for new coherent frameworks to increase understandings of this area of arts and health, describing 'realistic evaluation' as being particularly well adapted to the complex and complicated interface between arts and wellbeing. Reference is made to realist approaches to arts and health by teams at several UK universities (p. 26), as well as recent studies that have begun to focus on the causal mechanisms that connect singing to increased wellbeing:

> Such an approach is very significant as it begins to offer the prospect of identifying and distinguishing mechanisms which are specific to particular forms of arts involvement, and

[16] This directly influenced the decision to filter down from a broad range of programme theories, rather than to focus on the persistent refinement of one single programme theory.

> others which may be more generic, arising in a similar way in a wide range of arts activities and even non-creative pursuits. It is also possible that particular forms of arts participation bring into play a distinctive profile of generative mechanisms with respect to well-being and health (ibid., p. 19).

Clift also argues that there is a need for more robust measurements of both wellbeing and the benefits of arts participation, and goes on to discuss non-clinical studies into singing and health, which focus on different dimensions of wellbeing (pp. 113-114). Building on Clift's call for alternative theoretical frameworks, Baden and Wimpenny suggest a shift from more traditional forms of evaluation to more holistic methods, which may incorporate artistic principles, stating "…the values implicit in these kinds of evaluations become explicit, through the creative process which in turn enables the evaluator to shape the evaluation" (Baden & Wimpenny, 2014, p. 11). It is worth noting that both arts-driven and realist evaluation seek to expose underlying mechanisms within artistic practice. Just as Baden and Wimpenny value the idea of creative practice driving the direction of evaluation, RE shares a similarly organic approach in allowing for ongoing participant-led developments within programmes to govern the enquiry.

This study uses realist evaluation to not only identify the benefits to individual wellbeing yielded by participatory musical activity, but also to identify what wellbeing means to those individuals in the context of that musical activity. There were preliminary indications (based on informal conversations and study site observations) that adults and children have significantly different ideas around the meaning of wellbeing. Consequently, the mechanisms connecting music activity to increased wellbeing also differ. For children, it is linked with physicality, energy levels and optimism; for adults, music activity was linked to feelings of control and, to a lesser extent, social aspects. By exploring fluid wellbeing definitions and fluid mechanisms for increasing wellbeing through music activity, interventions can be designed that are more specifically tailored to the contexts and individuals they seek to benefit.

In 2013, Pawson noted: "At the time of writing there are over a hundred published studies utilising realist evaluation and more than a score of realist syntheses" (2013, p. xiv). The reason for this surge in popularity is partly to do with the economic climate of austerity, in which accountability is critical. Rather than simply evaluating the extent to which an intervention has (or hasn't) worked, it has become prudent to ask: "what is it about this intervention that works for these people in these circumstances?" Not only does this provide richer information to improve the intervention, it also increases translational potential to other contexts. RE's iterative and crystallising nature, combined with its growing popularity is also a strength; as the framework develops, it becomes an increasingly sophisticated evaluation tool for health and social policy.

RE's 'method neutrality' allows it to be used in a wide range of situations, including those involving harder to measure concepts such as creativity and wellbeing.

RE has received little attention in the journal Arts and Health. However, anonymous feedback in response to a paper I submitted to that journal noted that Pawson's 'realist synthesis approach' is "almost certainly the way to go in all kinds of evaluations" (personal communication, March 3, 2016). This suggests that a) RE is becoming increasingly well-known and b) it is seen as a potential way to address the weaknesses in some current evaluation methodologies.

3.6 Reporting

3.6.1 Reporting process

This study's findings were written before the RAMESES II group published its reporting standards (Wong *et al.*, 2016). Consequently, the following conceptual framework is used to report and discuss the findings:

- A spreadsheet of initial PTs was devised (appendix 1, p.231), listing supporting evidence from programme documents, literature or initial observations.
- Individual interviews were carried out.
- Six PTs were identified as being active, or having credibility within the study groups, based on observed and early interview data.
- Each PT is described as a 'candidate PT' (cPT) in the findings chapter, which is divided into six sections accordingly.
- This is followed by evidence from each study site, then any observations or further evidence from the focus group (a third music programme, used here to verify or validate developing programme theories).
- In light of the data, a refined PT is described using the CMOC construct, alongside a diagram to illustrate resources and reasoning.
- These refined PTs and issues arising from their development form the basis for discussion and recommendations for similar music programmes.

Arranging the findings in this way was a logical and rational reflection of my own understanding of the process. The use of the CMOC construct allowed for a consistent approach to what developed into a disparate range of PTs.

3.6.2 Context

RE does not deem programme contexts to be uncontrolled variables or unwelcome noise. Rather, context is integral to the object of study. “The success of an intervention depends crucially upon its location in an appropriate context” (Pawson, 2013, p. 36). Mechanisms and outcomes always happen within a context. An outcome is the product of both a context and a mechanism working as a system. The mechanism that yields a specific outcome is contingent on a fluid context and therefore cannot be relied upon to provide fixed or consistent outcomes (Sayer, 1992/2010, pp. 122-125). For this reason, realist approaches take contextual data heavily into account and the methods used in this study reflect that, particularly the observational component, which seeks to capture contextual data that may not be captured by the interviews.

Contextual factors, from the personal to the global, are relevant only if they have a bearing on mechanisms or outcomes. ‘Global’ factors might include the instruments available, which would affect all participants. Personal factors may include each individual participant’s mood or reasoning, which may be intrinsic, or influenced social factors within the group. As Pawson and Tilley point out: “In social interventions, the stakeholders’ capacity for choice making is, of course, subject to social constraint” (1997, p. 216). It was therefore important to record as much contextual data as possible. Under RE, a context is only a context if the mechanism is triggered within it – so although the contextual data in a CMO might be highly specific, the relevant contextual information cannot be ‘pre-decided’; it emerges as the CMOC develops. Participant observation enabled the researcher to capture rich contextual data to maximise the chances of the relevant factors later being identified. Inevitably, much of this data was found to be irrelevant – but that could not have been known in advance.

3.6.3 Mechanism

In RE, the term ‘mechanism’ relates to the properties, powers or potentials of a system which cause an event to occur. These comprise both the reasoning of individuals and the resources offered by the programme. ‘Mechanism’ is the dynamic interplay between people and resources, whereas ‘context’ refers to the conditions which enable those resources to be available to those people. Certain contexts enable certain mechanisms to be triggered. It is the combination of both context and mechanism that leads to an outcome: C + M = O.

The mechanism provides an explanation of what it is about a system that makes things change (Pawson, 2006). As with Byrne’s (2009) sunrise example provided earlier, the generative mechanism is not observed (we cannot ‘see’ gravity, just as we cannot ‘see’ reasoning processes), but it explains an event or outcome. Identifying mechanisms is therefore about explanatory

potential. In the social world, mechanisms may be based on common patterns of reasoning or 'tendencies', rather than 'laws' such as gravity. For this reason, RE does not assume a straightforward causal relationship between resources and outcomes. Instead, it recognises human agency, divulging less mechanical, more nuanced causal relationships. Mechanisms will therefore be discussed here in terms of resources and reasoning. Resources are provided by the intervention and are affected by contexts (although arguably, cognitive resources also influence reasoning), whilst reasoning is brought by the participant. Pawson and Tilley (1997) conceptualise mechanisms as a combination of resources offered by the social programme under study and stakeholders' reasoning in response. Both programme resources and participant reasoning are examined in the findings chapter of this study and are reported within the CMOC articulation of programme theories.

3.6.4 Outcome

Intended programme outcomes may be described in the programme documents and can form the basis for programme theories. They may also be unanticipated but observed, thereby indicating new programme theories. However, outcomes alone are not sufficient to establish causality (Pawson, 2006). Just as mechanisms and contexts do not exist independently of one another, outcome data does not necessarily indicate its own origins or if it could be replicated in a different programme. In reference to the model described on p. 54, merely observing the part of the iceberg that is above the waterline does not give away much useful knowledge about the characteristics of the iceberg as a whole. Nevertheless, under realism, the 'observed' is a vital component of the real, so outcomes are a vital component of programme theories. Using CMOCs as a heuristic construct with which to understand and articulate programme theories, RE takes as much of that whole picture into account as possible.

3.6.5 Configuration

Contexts, mechanisms and outcomes exist in a dynamic *configuration*; if one changes, so do the others and this fluidity means that outcomes are not necessarily replicable. This is critical for realist evaluators, who "…appreciate that sequences of evaluations oriented to one another can improve the understanding of CMO configurations. Rather than replicate interventions in anticipation of the same results, the realist evaluator sees subsequent trials as an opportunity for CMO *configuration focusing*" (Pawson & Tilley, 1997, p. 217 - italics in original). This is the essence of programme theory refinement; small changes in C, M or O revealed in the data indicate configuration changes, so the programme theory evolves according to the programme it is tested in. Consequently, the aim of RE is not to seek outcome *regularities* (replicability), but rather to examine outcome patterns in order to develop a more comprehensive understanding of the

generative causal mechanism (Salter & Kothari, 2014). For example, in the present study, a pattern around energy change was recognised. This data was grouped together (using NVivo) and explored further. Through sensitive enquiry during interviews, combined with observational data, a common motivation of 'using music activity as a means to move from a less desirable energy state to a more desirable energy state' was established, which became the basis for the resulting programme theory. Critically, the outcomes for each participant were different – they didn't replicate – but recognising this pattern allowed for greater understanding, enabling the PT to be developed in a way that explained a group of energy-related outcomes.

There was a lot of data around the energy theme, but limited time and access opportunities prevented deeper exploration of this, so the PT was developed and described based on the available data. It may have been possible to explore more specific theories within this, but due to the practical limitations of the study, the PT is described at a level of specificity that explained the outcomes for my own participants. Pawson and Tilley refer to this principle as "configuration abstraction… the creation of middle range theories which provide analytic frameworks to interpret similarities and differences between families of programmes" (1997, p. 217). Configuration abstraction is determined partly by the data available. Its flexibility is one of the benefits of RE, meaning that "the same programme will often work in different ways in different circumstances…" (ibid.). Not only do such configurational differences contribute to theory development, they are also important when considering the translational potential of RE studies, i.e. similar causal mechanisms might be found in other programmes with only minimal configurational adjustment.

3.7 Challenges of establishing causation from qualitative data

RE seeks to explain phenomena by identifying generative mechanisms that only fire when the context is conducive (Marchal *et al.*, 2014). This contingent approach to causality cannot therefore claim universality, but can be abstracted from specific PTs to Middle Range Theories (MRTs), which generalise across a 'family of services' (e.g. arts and health), but stop short of substantive theories or 'grand narratives' (e.g. the psychodynamic theory underpinning much of music therapy) (Jagosh *et al.*, 2012, p. 316). The ability to connect with these broader concepts whilst preserving the integrity and specificity of CMOCs therefore has a considerable bearing on whether results from this study can be extended to other music and wellbeing programmes.

RE is method neutral; it is equally amenable to qualitative and/or quantitative data depending on the requirements of the question (Pawson & Tilley, 1997, p. 182; 2009; Marchal *et al.*, 2014). The

positivist/empiricist position is that qualitative methods alone cannot be used to generate causality and that an *experiment*, which uses quantitative methods and may also draw on qualitative methods, must be conducted (Maxwell, 2004).

However, determining causality from qualitative data is commonplace; one (anonymous) academic compares this to the Victorians' attitude to sex; "nobody talks about it but everybody's at it", whilst Williams (2002a, p. 126) also claims that scholars are "doing it and denying it". Nevertheless, some studies have used solely qualitative data to achieve significantly translational results, including some "guided by Pawson and Tilley's (1997) formula for the process evaluation of programmes, viz: *mechanism + context = outcome*... as a framework for identifying factors that might influence the success of [other] peer education programmes in achieving [a specific] desired outcome" (Campbell & MacPhail, 2002, p. 335).

3.7.1 Interpretivism

Denzin and Lincoln (2005) take the narrow view that qualitative research is characterised by an interpretive approach, whilst others suggest that interpretivism and qualitative research are different, albeit with some overlap (Williams, 2002a, p. 139). This study accepts that all qualitative data is refracted through the subjective lenses of both the researcher and the participant, and therefore some level of interpretation is inevitable (e.g. of language, thought and action), deemed by some as "the inevitability of interpretation" (Roy, 2007; Wiesing, 2014, p. 27). There have been attempts to justify interpretivism. For example, Kerdeman notes:

> According to post-positivists, the inevitability of interpretation does not doom observation to being biased. The fact that we cannot "remove" our interpretive lenses does not mean that interpretive lenses necessarily circumscribe or dictate ways of seeing. If interpretive lenses influence observation, so interpretive lenses also can be clarified and, if necessary, corrected through critical examination and reflective reason (2015, p. 23).

Critical realism has been designated as a strong form of post-positivism (Cruickshank, 2011, p. 2), which itself holds the idea that context-free experimental design is insufficient. In embracing context and accepting qualitative methods, RE signals at least some level of comfort with interpretivism in spite of the overarching idea of an ontologically independent reality.

Ethnographic methods are inevitably subjective and therefore vulnerable to criticism when claims to causation are made. This study collected a large amount of field data based on participant observation in an aim to maximise objectivity. Notes were written in 'omniscient narration' form, which is described by Marcus and Cushman as "The unintrusive presence of the ethnographer in the text" (1982, p. 31). In 'realist writing' (Van Maanen, 1988/2011), no symbolic meaning is

drawn from the data; only the facts are described, to present as uncoloured an observation as possible.

3.7.2 Qualitative approaches in a complex social world

Byrne claims that positivism in science has been replaced by a "more or less realist programme" (1998, p. 37), suggesting that due to its inadequacy at describing social phenomena, positivism must therefore be replaced with a philosophy that can delve deeper, albeit at the cost of some level of objectivity. Social systems are complex in that they are composed of multiple parts, interrelating and arranged in many possible ways, and they also contain humans, whose agency adds an element of unpredictability (Waldrop, 1993). Byrne argues that analysing complex situations using quantitative methods is "linearity and order… being forced on a world which isn't really like that" (1998, p. 3). In spite of their inherent scientific value, Byrne characterises the exclusive use of quantitative analyses as insufficient and reductionist, and claims that "for much of reality, quantitative is merely qualitative which has not yet become qualitative" (p. 175). In other words, the difference is one of granularity.

Participants' challenging circumstances combined with the range of perspectives on ideas about creativity and wellbeing make for a complex realist question. Byrne claims that "illnesses of the mind can only be understood in a non-reductionist way" and that "genetic liabilities are only expressed under specific stress conditions. Such aetiological explanations involve complex causes and emergent properties" (1998, p. 4). This is reflected in the present study, which embraces a qualitative approach, allowing the flexibility to uncover mechanisms within these complex settings.

The convergence of realism and complexity under Bhaskar's ontological framework has been described as an approach "which treats nature and society as if they were ontologically open and historically constituted, hierarchically structured, yet interactively complex, non-reductive and indeterminate, yet amenable to rational explanation…" (Reed & Harvey, 1992, p. 359). Critically, no claim for *logical* explanation is made here, but rather 'rational' explanation, implying that the study of human systems should only be explained using human rationale, rather than more objective logical terms, such as those which dominate the positivist standpoint. This aligns with ER, which provides a rational alternative to 'causes all the way down'.

Complexity theory is eminently relevant to realist approaches. Byrne acknowledges Bhaskar's scientific realism as providing a "philosophical ontology which fits pretty well exactly with the scientific ontology underpinning the complexity programme" (1998, p. 35). More recently,

Westhorp has argued that complexity theory and realist evaluation are "natural bedfellows" (2012, p. 405) in the evaluation of policies and programmes in complex adaptive systems (dynamic systems that cannot be perfectly understood because they constantly mutate and self-organise). Westhorp explains that attributing outcomes to programmes within complex adaptive systems requires a range of different theoretical 'types' (philosophical, substantive theory, program and evaluation theory). She argues: "Just as a small change in a control parameter can lead to a 'phase shift' in a system (Byrne, 1998: 18), so a small breakthrough in understanding a program system might contribute to a phase shift in understanding the program overall. This might, for example, inform a small refinement to a program which, in true non-linear fashion, might produce markedly different outcomes" (p. 417). This became relevant in the present study when, for example, in my focus on the value of a musical 'product' to the participants shifted to a focus on self-representation in an oppressive world, thereby directing my attention towards a large amount of (already collected) data that related to this. In other words, the complexity of a system can lead to ideas emerging that alter the overall understanding – and therefore the development – of the theory being worked on. Westhorp calls this 'complexity-consistent theory'.

3.7.3 Generalisation

Maxwell (2004) suggests that the emergence of realism as an alternative to both constructivism and positivism/empiricism gives us new ways to approach causality that allow for a redefined form of generalisation. For example, Williams (2002a, p. 139) claims that even with experimental or survey data, one can speak of variables having a qualitative dimension. Distinguishing between the nomothetic (scientific) or ideographic (humanistic) natures of sociology (see p.52), he notes: "an ideographic discipline concerns itself with the understanding of an instance in a unique context" (p. 125). This fidelity to context makes every [social] study unique, causing some scholars to reason that "Generalisations are impossible since phenomena are neither time nor context-free" (Guba & Lincoln, 1982). This has led to the reasonable assumption that one cannot generalise from RE study findings which are by definition context-specific.

Williams addresses this problem by proposing the idea of the *moderatum* generalisation (2000, 2002a), which seeks to bridge the ideographic and the nomothetic approaches to realism.

> Such generalisations can only be moderate, but need only to be so. They can provide testable evidence of structure and outcomes of structure. Their limits lie in the logical problem of inductive inference and in the ontological problem of categorical equivalence. These problems cannot be transcended from within interpretivism and generalisations that go beyond the moderate are objectively unjustified… But of course, these are

> generalisations and as such we have to do something with them. We can let them stand... Or we will want to develop them further (Williams, 2002a, p. 139).

In relation to RE, this broadly echoes Pawson and Tilley's ideas around 'configuration abstraction' (see p.64) and the development of middle range theories, which are generalised to a degree that they can apply to a limited number of similar programmes but are by no means universal. The final clause also hints at the distinction between Critical realism and Empirical Realism; allowing a theory to be 'fixed' and applied, or pursuing it in more depth. It is worth noting also that Williams describes realities as "the outcomes of processes, the evidence of structures existing beyond the individuals investigated" (2002a, p. 138). This idea of 'uncovering processes' strongly echoes RE's mission to reveal mechanisms.

Williams advises researchers to recognise the limits to generalisation (2002b, p. 56): Commonalities (language, physical referents; social exclusion) between my study sites and with me as a researcher allow for "some reciprocity of perspective between the researcher and the researched" (Williams, 2002a, p. 137). However, the sites are not the same. This study's findings, even when framed as *moderatum* generalisations, highlight the differences between adult and children's reasoning in response to participatory musical resources. These differences are examined in the discussion chapter, which explores areas where this study's findings might be generalizable and also the limits of such generalisation, thereby indicating directions for further research. Although RE aims to uncover increasingly specific and refined explanatory mechanisms, the question of being able to apply such findings more widely is also relevant.

3.7.4 Portability of CMOCs

If we are to accept moderate generalisation of findings, then the CMOCs must be applicable elsewhere. Westhorp (2014) describes this as 'portability' of CMOCs:

> Because programmes work differently in different contexts and through different change mechanisms, we cannot assume that programmes can be replicated from one context to another or that they will automatically achieve the same outcomes if they are. What is portable, however, are good understandings about 'what works for whom, in what contexts, and how' (Westhorp, 2014, p. 7).

Fluidity of configuration enables CMOCs to be mapped on to other situations. For example, similar contexts may trigger similar mechanisms with similar outcomes. For example, an institutional context may enable a mechanism that connects musical engagement with improved behaviour and the prospect of recovery or release. Alternatively, a particular set of circumstances might drift into alignment, allowing for a mechanism/outcome to be triggered. For example, a person who

controls their energy levels by listening to music may consider the opportunity to participate in a musical activity to be an enhancement of their energy management toolkit. Contexts might share some features but not others, resulting in a mechanism being triggered to a limited extent, described as a 'continuum of activation' (Dalkin *et al.*, 2015). The choice of two study sites in this research project serves to illustrate the idea that some CMOCs can be triggered 'more strongly' in one study site than in another. Contextual overlap can then be examined to further develop/refine the CMOC(s). These enhanced understandings allow music programmes to be configured to maximise positive wellbeing outcomes.

3.8 Exemplar of programme theory development and refinement

Fluid contexts, participant revelations, and researcher observations and reflections make evident the iterative nature of PT development. The following is a finding from the present study, described here to reveal the 'audit trail' of thoughts and observations leading to the development of a self-contained CMOC, thereby demonstrating the RE process used in this study.

One concept connecting music activity and wellbeing is 'control'. Having a sense of control over certain aspects of one's life can increase wellbeing by reducing anxiety related to uncertainty. Playing an instrument requires – and can bring about – control, and improvising music enables choices, over which the performer has control.[17] The visual elicitation exercise (described on p.92) revealed that adult participants considered 'a sense of control' to be very important to their wellbeing. These combined ideas gave rise to the candidate PT: improvising music can engender a sense of control, which can increase wellbeing. I.e. the resource of a participatory musical activity provides an opportunity to exercise choices and control with immediate observable outcomes. This is articulated as a CMOC as follows:

Context: a 'jam session' in which the participant plays an instrument or sings and is able to make musical choices that perceivably alter the musical output. **Mechanism**: Two types of control are at work here; 1) control of an instrument, which carries some level of personal challenge and reward and 2) control of the music, which is shared by the group and is therefore in a sense, a democratic object. **Outcome**: An experience in which participants can directly influence the musical output, witnessing the consequences of their choices and gaining a sense of control.

[17] In this study, 'improvisation' refers to semi-structured jam sessions usually based around a chord sequence and using idiomatic musical forms.

The more I pondered this PT, the more it fragmented. The musical product could sound (subjectively) good or bad, depending on the decisions made by the group members or the level of playing ability. Some weren't bothered by this, whereas others were. The presence of other members would dilute each individual's level of control, but 'successful' improvisations were marked by musical decisions that engaged the whole group. Responding to others is also an exercise in control. The programme theory needed to be made more granular to accommodate these possibilities, so I began gathering data to further refine these ideas.

One adult interviewee had a diagnosis of bipolar disorder and stated that when he improvised in a group, it raised his energy levels, which were usually low. He explained that allowing himself to become manic outside of the music context would be dangerous for him. The focus and control required to play an instrument (flute and voice) enabled him to increase his energy levels without becoming manic. This was critical, because he felt happier and more productive when he had energy. He reported that he felt heightened energy for "a few hours" after a jam session and viewed this as part of his healthcare regime. Further informal conversations, combined with observations of the jam sessions gave rise to the following more refined CMOC:

Context: a bipolar adult who ordinarily has difficulty controlling their energy levels; improvising flute and vocals in an improvised jam session. **Mechanism**; participation in the session enabled the participant to raise their energy levels in a safe and controlled manner without becoming manic. **Outcome**: they were able to use this increased energy for some time afterwards, making them more productive and feeling more "normal".

Conversely, another adult attending the same improvisation sessions played guitar and sang his own songs with a view to recording an album. He was open to new ideas but had a very specific vision of what he wanted each song to sound like and would (gently and politely) direct others to play in certain ways. It was a group effort, but he assumed the role of 'producer' and became visibly energised, and gained confidence during the recording sessions. When I interviewed him, he said that this album project was "just about the only thing in my life I have any control over". He had complex mental health problems and had been using mental health services for longer than he cared to remember. Sometimes, he would 'zone out' and curl up in a quiet room. However, when 'producing', he was articulate, confident and diplomatic. The CMOC that developed from this was as follows:

Context: an adult with complex mood and social issues; semi-improvised jam sessions which had the aim of recording his songs. **Mechanism**: in being allowed to direct the session, he was able to

realise his song ideas and get them recorded. This gave him a 'product', which was important to him as a means to represent himself. It also positively affected his interactions and relationships with other participants and evidently raised his energy levels. **Outcome**: a tangible musical product, which the participant intends to release online. Also: behaviour change, increased confidence, articulacy and energy. He gained control over the musical product and over his self-representation, as well as his interactions with others in the group.

These examples show how a programme theory based around control can fragment in response to interview and observation data. The refined CMOCs were checked with the participants involved to ensure that they were accurate reflections of their experiences.

3.9 Realist Evaluation and data collection techniques

At this stage, whilst discussing the more conceptual issues around this study, it is worth noting the data collection techniques and briefly summarising the methodological issues associated with these. This final section will function to segue from the theoretical debates in this chapter to the practical discussions in the next chapter.

There is some precedent for combining RE and ethnographically informed methods. Petchey "developed his skills in organisational ethnography and realist evaluation via a series of evaluations of national initiatives in primary and community care" (2016), whilst Van Belle draws more theoretical comparisons, noting that ethnographers usually regard the social world to be objectively 'real' and almost always complex, thereby aligning with a realist perspective and being amenable to complex evaluation (2015). Quoting Geertz (1973), she advises: "…before trashing [sic] about in arguments over whether we must or must not bring causal analysis to ethnography, we should first appreciate how **subtly** and usefully we are already doing it". Manzano (2016) also makes extensive reference to ethnographic methods in her discussion of realist interviewing.

Van Belle (2015) notes further practical similarities between RE and ethnography: both are case oriented, not variable-oriented; both focus on processes, acknowledging the recursive nature of causality; both use retroduction, "looking for what went on before in a sequence of processes that might explain the observed social action"; and both emphasise the importance of context. However, anthropology pays less attention to questions of ontology and epistemology, and unlike RE, ethnography contains no fixed design to proceed from the 'how' to the 'why', as these are too difficult to distinguish (Van Belle, 2015). Other methods in this study, including semi-structured

realist interviews, visual elicitation and focus groups are more common in realist evaluations, but participant observation does not appear to have any methodological clashes with RE.

3.10 Summary

This chapter has discussed the ontological and epistemological origins of RE, which itself stands on the shoulders of more established social science positions to address complex programmes in a complex world. Approaches that offer structures for analysing such programmes with a view to developing iterative understanding and improvement are required to answer the call for better evaluation. Having grounded this research in a realist position to answer the call for better evaluation of arts and health programmes, and having acknowledged the problems of interpretivism, causation and generalisation, the next chapter will describe the techniques and methods used.

CHAPTER 4: STUDY DESIGN

This chapter details the 'plan of inquiry', explaining how the research design was chosen, the methods themselves, their operationalisation within a realist paradigm, a section on reflexivity and a brief discussion of the limitations encountered. In summary, programme documents and other literature were used to develop initial programme theories, which were tested and refined using participant-observation and interviews with key participants. Data from two study sites was analysed, then further verified using a focus group from a third study site. Refined PTs are reported in the findings chapter using the Realist Evaluation format of 'Context Mechanism Outcome Configuration'.

4.1 The research question

The primary research question, 'what are the mechanisms that connect music participation with increased wellbeing' is about a) subjective experience: participants' perceptions of their own wellbeing and b) reasoning: the ways in which participants apprehend and engage with opportunities for musical participation to improve their wellbeing.

4.1.1 Subjective experience

Defining and/or measuring wellbeing is not clear-cut. Various substantive concepts are proposed (Brickman & Campbell, 1971; Headey & Wearing, 1989; Csikszentmihalyi, 1991; Hendry & Kloep, 2002; Seligman, 2012; Cummins, 2013), numerous measurement scales have been devised (Bowling, 2004) and debate on the subject is ongoing (see literature review p.13). It was therefore decided that pre-defining wellbeing might inhibit honest conversation around what links musical activity with wellbeing (i.e. the participant's idea of wellbeing might differ from the study's definition). This research considers wellbeing to be fluid and context-dependent. Consequently, interviewees were asked directly about what wellbeing means to them. Using a pre-defined wellbeing concept would have enabled greater consistency in the data, but acknowledging that participants have differing ideas about what is important to their wellbeing and allowing them to discuss wellbeing on their own terms, rather than on mine was a significant factor in designing the interview protocol. It emerged that different wellbeing aspects were important to different participants, with some even contributing definitions of their own.

The experience of music – both passive (listening) and active (participating) – is also subjective and is influenced by a range of factors such as prior experience, emotional state, self-awareness, other participants and musical content. The music sessions in this study ranged from song

learning to unstructured jam sessions and even some free-improvisation, as well as related activities such as lyric writing, recording and production. Such a range of activities, as well as the highly subjective experience of music participation, adds another layer of complexity.

4.1.2 Reasoning

This study sought to elucidate participants' reasoning in response to musical resources. These cognitive mechanisms constitute 'deeper', more personal data that could only be accessed through one-to-one interviewing, rather than observation alone. Given the subjectivity around wellbeing and musical experiences, a broad range of reasoning was possible. Therefore, a semi-structured approach was chosen so that participants were free to talk about their own wellbeing and the music activity in a way that made sense to them. The semi-structured approach allows the interviewer to pursue specific lines of inquiry whilst ensuring a reasonable level of consistency (Bryman, 2015, p. 468).

4.2 Data sources

4.2.1 Study sites

The study sites were chosen for circumstantial reasons. One of this PhD's supervisors had gained funding to run a participatory music programme for children and young people (CYP) with mental health issues and learning disabilities. Part of the funding requirement was that the programme would be evaluated (Hackett, 2017). In light of the research question, the Ferndene Youth Music Project (FYMP) was considered an appropriate study site. The programme was not part of any pre-existing therapeutic or educational agenda; its primary objective was to increase wellbeing.

A second study site was approached to broaden the available data. I became involved with Chilli Studios, a community arts studio for adults with (or recovering from) mental health difficulties. As a charity, Chilli Studios provides resources (studio space, facilitation and equipment) for a range of creative activities including music. Attendance is voluntary and members drop in any time during business hours. Both sites allowed me access to a discrete population engaging in musical activity of their own volition. Similarities and differences between study sites (see comparison table, p.81) enabled a meaningful examination of differing contextual factors.

About halfway through the data collection, it was decided that a third group would be consulted to test the emerging CMOCs. Community Music Spark (CMS) is a music training programme provided by Sage Gateshead for people with Special Educational Needs (SENs), many of whom face similar challenges to those faced by participants from Ferndene and Chilli Studios. No

primary data was gathered from this study site, but a focus group was assembled (recruited by the group facilitator), whose opinion was sought on a range of themes that had emerged from the other two study sites. This enabled a useful third perspective: if they agreed with a CMOC under discussion, this would increase confidence in that CMOC; if they disagreed strongly, then the CMOC would be examined in more detail and possibly reconsidered.

I have avoided using the term 'case study', since these are concerned with the development of a particular person, group or situation over a period of time (Byrne & Ragin, 2009; Bryman, 2015, p. 60), whereas this research seeks to capture individual perceptions and responses to a shared resource. Nevertheless, as with case study research, the project benefits from having discrete objects of study, with boundaries, enabling greater insight into the particular character of each programme.

The study sites were chosen for their relevance, accessibility and specific, non-clinical wellbeing agenda. Other sites were considered (pub 'sessions', band practices and gigs), but these were too disparate and lacked the wellbeing focus. Moreover, RE is interested in the study of 'programmes'. The FYMP is an intervention package with its own design, timescale and projected outcomes, whilst the Chilli Studios music room is part of a broader programme designed to aid recovery from mental illness through creative arts, i.e. the music activities at Chilli Studios are a resource made available within a programmed environment. The CMS programme had more of an educational agenda (the tangible outcome being an Arts Award qualification), but wellbeing outcomes were also a high priority.

4.2.2 Ferndene Youth Music Project (FYMP)

Ferndene is an NHS inpatient unit for children and young people (<18yo) who have complex mental health needs and/or a learning disability. The unit provides assessment and treatment including art and music therapy. Ferndene's overall aim is to promote "individual mental health, physical health, wellbeing and development…" (Kay & Smith, 2013, p. 4).

The FYMP is a two-year project funded by the Youth Music Network, which in turn is funded by ACE. It delivers weekly music workshops for inpatients at Ferndene in collaboration with Sage Gateshead. The project is managed by a steering group led by Dr Simon Hackett, Head of the Arts Therapies Team at Northumberland, Tyne and Wear NHS Foundation Trust. Music activities are planned and delivered by a Ferndene Music Therapist (though it is not a music therapy project) and a Sage Gateshead Project Leader. The FYMP is independent of this PhD, but it was agreed to share data. The FYMP collected some quantitative data (using the Warwick-Edinburgh Mental

Wellbeing Scale (WEMWBS)) for tracking purposes, whilst this study focussed on qualitative data.[18] Both sources inform the final report to Youth Music.

Participants were aged between 12 and 18. Some are detained under the Mental Health Act, while others have been referred. Their backgrounds vary, as do the circumstances that led to their admission into Ferndene. However, all participants face significant challenges as a consequence of their mental health or learning disability. Participation in the FYMP is optional, but is encouraged as part of a broader treatment programme. Interviewees were selected on the basis of having attended for the majority of a 12-week 'block'. This ensured that they had adequate experience of the project activities and had independently chosen to continue attending. It also enabled me to become familiar to them and vice-versa.

During interviews, many of the Ferndene participants were eager to talk about their experiences with music in general rather than the FYMP activity itself. They were often enthusiastic, but also easily distracted and less able to maintain a focussed conversation. I dealt with this by humouring the conversational tangent for a short time, then asking if they could connect their feelings with the music activity under investigation. This felt like steering the conversation, but I reasoned that this was a more organic route to an emotional response. This strategy was useful in the sense that some children were able to make a connection and talk about the music activity and their own wellbeing, whilst others evidently enjoyed music but didn't get the same pleasure from the Ferndene programme.

A note regarding health diagnoses of children and young people at Ferndene

Ferndene provides inpatient services for children and young people from across the UK with a range of mental health diagnoses or learning disabilities. Among the participants in this study, formal diagnoses included:

ADHD and ADD: DSM-V defines ADHD as: "a set of inattention and/or hyperactivity-impulsivity symptoms" (American Psychiatric Association, 2013), characterised by (e.g.) fidgeting, being easily distracted, having difficulty following instructions, etc. In the UK, surveys of children between the ages of 5 and 15 years found that 3.62% of boys and 0.85% of girls had ADHD (AADD-UK, 2011).

[18] It quickly emerged that the young people at Ferndene were not interested in filling out forms, didn't understand them, or completed them in the most perfunctory manner. Members at Chilli Studios expressed cynicism towards such forms. It was therefore decided that quantitative measures (such as SWEMWBS) would only serve to complicate matters, so they were not used in this study.

Learning disability can be mild, moderate or severe. It is defined by Mencap (a UK-based learning disability charity) as "a reduced intellectual ability and difficulty with everyday activities – for example household tasks, socialising or managing money – which affects someone for their whole life" (Mencap, No date). Public Health England has estimated that approximately 2% of the population of England have a learning disability, including 224,930 children (Hatton *et al.*, 2014).

Referrals were made due to challenging behaviours, such as aggression (Source: Ferndene). However, it should be noted that 'behaviours' and 'behaviour change' are relative terms. Behaviour that may be considered inappropriate by societal standards take on a different meaning within Ferndene. It is important both in this thesis and in mental health services generally, to not define individuals by their condition, but rather to acknowledge their individuality, aiming always to improve their lives and reduce challenging circumstances. There is a strong current of thought among psychologists that diagnostic labels should *describe*, not define. The effects of labelling mental illnesses in terms of stigma are discussed in the field of disability studies and more widely (Rosenfield, 1997). The children and young people in this study are treated as individuals; any diagnostic labels used in this thesis have been taken from Ferndene and are used merely to indicate contexts in which behaviours can be observed.

4.2.3 Chilli Studios

Chilli Studios (formerly Newcastle and Gateshead Art Studio) is a charitable organisation that provides a range of creativity-based services and resources for adults with (or recovering from) mental health problems or who experience social exclusion as a consequence of these. The keyword is 'resources', which are primarily space, equipment and creative facilitators. Chilli Studios comprises two large multi-use art rooms and one small music studio with instruments, recording equipment and professional musicians who offer support and guidance. Members use these facilities to learn, to join in with group activities or to pursue their own artistic projects. Studio members come and go as they please. Most are referred in the first instance through their GP, carers or specialist mental health services. Following an evaluation and a recent funding boost, Chilli Studios has begun to assess members' wellbeing using the WEMWBS.

The music studio is open to all members. There are two guided music sessions per week, focussed on either song writing or jamming. These are often attended by the same people and the activities are very much member-led, so most sessions are quite similar. Members decide which activity to pursue, giving a clear indication of their reasoning in response to the musical resources. As such, some personal projects blend into the guided music groups and members are assisted to develop their own songs or musical ideas, with the option of making a semi-professional

recording if they wish. Within Chilli Studios, music group members are self-selected, based on their interests in music.

After attending these sessions for a short time, three types of participant were identified:

- Core participants: attend most sessions and often also pursue their own projects. However, the studio's democratic ethos is well established and well understood, so most are open to jamming or participating in other people's musical agendas.
- Peripheral participants: regular attendees involved in a range of creative activities, who tend to drift into music sessions and are happy to improvise or join in. They seem to enjoy the activity, but have no particular musical agenda.
- Transient participants: often new members being introduced to the music room and encouraged to participate. Most did not return and it is believed that the 'positive chemistry' in the room may have a slightly exclusionary effect.[19] There were also non-players, who would occasionally drop into the room just to listen.

Only core or peripheral participants, with whom I had formed a musical relationship through participation in the studio activities, were interviewed.

Arguably, Chilli Studios members have more chronic mental health problems than Ferndene participants, so their recovery process is longer. This contextual difference, along with age and experience generally meant that perspectives on wellbeing were quite different between the two study sites. Chilli Studios music participants come from a range of backgrounds and are at different stages in their recovery. Their personal contexts are more varied than those at Ferndene and the age range is wider. However, there are some important similarities: participation in the music activity is voluntary and is a consequence of challenging circumstances related to mental health.

A note regarding health diagnoses of Chilli Studios members

Most Chilli Studios interviewees did not reveal their diagnosis (if they had one). The studio manager commented that the majority of referrals were from Crisis or similar organisations. Where mental health diagnoses were known, these were often multiple and complex.[20] Studio

[19] This has been fed back to the studio manager. I suggested putting a small window in the door to allow people to see/hear what goes on in the room without committing to entering.

[20] As Sir Harry Burns, former Chief Medical Officer for Scotland, aptly noted at a Northumbria University conference in 2013: "most mental health problems tend to involve a 'shit storm' of symptoms".

members who *did* mention diagnoses often described symptoms of depression and anxiety; some had experienced addiction problems, but most had long-term conditions that had ultimately led them to Chilli Studios. Some had been told they had learning disabilities, but as adults, outside of the education system, this had merely led to 'challenging circumstances'. 'Defining' people by their mental health diagnosis was less of an issue here, because very few diagnoses were offered/known. The commonality between both study sites is 'challenging circumstances', not any particular diagnosis.

4.2.4 Community Music Spark (CMS)

CMS is a community music training programme for adults in post-16 education with special educational needs (SEN). Its objectives are to develop confidence, communication and employment skills, helping participants to deal with their challenging circumstances beyond compulsory education. CMS intersects with both Chilli Studios (adults; more self-selected) and FYMP (younger; more 'programmed' activity). All three groups are vulnerable to social exclusion and reduced opportunities due to MH or LD issues.

CMS graduates take on a leadership role and membership comprises of SEN students from MENCAP National College Dilston, Northern Counties College and Dryden School. Attendance is optional within a wider education programme that includes the Arts Award scheme (which is also promoted at Ferndene). Individuals' presence on this programme represents a conscious motivation to address some of the challenges faced, particularly in an employment context, through a music-making activity. CMS offers resources to potentially overcome some of these issues, as well as skills development and confidence building. Being held at Sage Gateshead, the music facilities are excellent, but the key resources are peer support, group working and development of leadership skills.

A focus group approach was used, with questions guided by the CMOCs. If certain CMOCs resonated with this group, this provided grounds to examine shared contextual circumstances more closely. Testing the CMOs here enabled me to explore if/how changes in context alter the mechanism-outcome. This interview/conversation was arguably more 'realist' than the semi-structured interviews with individuals, as it was driven by the programme theories that had emerged from those individual interviews (theory development). In terms of the 'phases' in realist interviewing, the focus group most closely resembled 'theory refining' (Manzano, 2016).

A note regarding health diagnoses of Community Music Spark members

All members of CMS had been identified during their school education as having a learning disability and had been given the opportunity to join this group. The group is part of an

educational context and is designed to equip its members with skills and attributes to lessen the challenges they may encounter once they leave education. Again, learning disability is a descriptor and, particularly in the progressive and positive context of the group, nobody is defined by their ability or disability; to the extent that this has taken on a political dimension (see Findings chapter, p.132).

4.2.5 Comparison tables

Table 1 (overleaf) summarises the main contextual similarities and differences between the two study sites and the verification group. Significant demographic differences were age range and diagnosis, whilst the interventions/programmes differed generally around the level of supervision and how prescriptive the activities were. FYMP and CMS are the most 'programmed'; they are designed and facilitated with planned parameters and well-defined objectives. Chilli Studios is less 'programmed'; it is a group of people who regularly participate in facilitated music activity within an organisation that pursues an explicit mental wellbeing agenda through arts participation. In spite of their inevitable differences, all programmes had an underlying wellbeing agenda designed to increase the wellbeing of individuals in challenging circumstances and critically, all groups were attended voluntarily.

	FERNDENE	CHILLI STUDIOS	COMMUNITY MUSIC SPARK
Overview of project	300 music sessions delivered to 70 participants over two years at Ferndene and another venue (not part of this study). Tailored to the participants, sessions involved song writing, improvisation, drumming/ percussion and musical exercises/games.	Twice-weekly facilitated music sessions available to all studio members. These are part of the overall ongoing delivery of arts workshops at the studio. Sessions are member-led and involve improvised jamming, song writing and personal projects.	Educational programme offered by Sage Gateshead, delivered weekly on a Friday to young people aged 16+. Is themed around music, but objectives are to develop leadership skills and a qualification (Arts Award). Some graduates go on to deliver the course.
Overall numbers involved	~ 45 YP involved in the Ferndene sessions I attended for this study.	~ 20 ppl attended the studio more than once during my time there.	Approx. 12 members in the 2015/16 cohort that I had contact with.
Context	Healthcare (NHS) context	Community context	Education context
Overall age range	Children and young people aged 9-18	Adults aged 18-70	Young adults aged 16-35 (for those of school age, the group was part of their educational programme. Graduates were further developing their skills through leading the programme).
Nature/level of supervision	Heavily supervised; activities are facilitator-led	Facilitated; activities are user-led	Curricular; facilitated; activities are semi-user-led
Programme attendance	Attendance voluntary; closely monitored	Attendance voluntary; not monitored	Attendance voluntary; monitored
Venue / session times	Weekly; alternate Ferndene/Sage	Single venue Newcastle; two 3h sessions/week; or drop-in Mon-Thu 10-5	Weekly; held at Sage
Diagnoses	Moderate-severe MH and/or LD	Mostly MH; some LD	Mostly LD

Table 1. Similarities and differences between study sites

Table 2 shows a similar comparison between study sites, specifically in terms of the participants interviewed and detailing the number of hours I attended as a participant-observer.

	FERNDENE	CHILLI STUDIOS	COMMUNITY MUSIC SPARK
Number interviewed	9	9	3 focus group members + 2 facilitators.
Age range of those interviewed	13-18	29-70	22-34 (graduates of the programme who were mentors/leaders themselves; the YP on the course were too busy).
Gender	6 Male : 3 Female	8 Male : 1 Female Studio is 53:46:1 M:F:T, but music room users were mostly male.	3 Male participants + 2 facilitators (1m : 1f)
Diagnoses of those interviewed	All had been admitted for 'challenging behaviour'. Diagnoses included: ASD (4), ADHD (4), OCD (1), FAS (1) and mild to moderate learning disability (4) – brackets indicate # of diagnoses.	Not all disclosed, but all had med-severe MH issues (that prevented them from working), incl. bipolar, schizophrenia and anxiety/ depression. Many complex long term conditions.	All group members were from a school for people with learning disabilities. Generally ASD, although specifics not disclosed, as focus was on developing skills, rather than on conditions.
No. interviews per participant and average duration	One 1-1 interview per participant plus multiple informal conversations during group activities. Interviews arranged via ward managers. Int. durations were 20 to 55m (varying with diagnosis; e.g. those diagnosed with ASD spoke far less than those with ADHD).	One 1-1 interview per participant plus multiple informal conversations during group activities. Length varied from 45m to 1h34m. Participants were approached directly by the researcher, were interested in the research and keen to talk.	1 x Focus group interview lasting 1h20m, including talk and 'banter' between participants. They were very chatty both with me and among themselves.
Location of interviews	Ferndene classroom or family room + a staff chaperone.	Chilli Studios quiet room or music studio.	Rehearsal space at Sage Gateshead.
No. hours observing	Approx. 80h (attended 40 sessions of 2h each)	Approx. 120h (attended around 40 3h sessions)	6h attending 3 x group sessions.

Table 2 Summary table of participant and project details

4.3 Programme documents

Both study sites had documented intended outcomes, which were the initial source for identifying programme theories. Programme documents usually did not have fully articulated PTs, but described generic wellbeing outcomes. These connected with themes but not specific mechanisms – so PTs were generated from these in combination with other literature and as the data collection progressed. The FYMP funding application stated clear but fairly generic outcomes, whereas Chilli Studios did not have outcomes specifically relating to its music room at all, but rather a collection of policies, funding agendas and other materials relating creativity with wellbeing. It was possible to draw some intended outcomes from these for the studio in general, but music room-specific PTs were elicited by interviewing the studio manager.

4.4 Programme theories – organisation and storage

Programme theories were compared with the emerging data and developed iteratively throughout the data collection. The long list of PTs was retained in a spreadsheet (appendix 1, p.231) with one PT per row and supporting evidence (initially literature, then increasingly primary data) recorded in each column moving to the right. This data storage method was admittedly untidy, but enabled a way of keeping track of a number of programme theories at once. The method allowed me to see which PTs were gaining traction and which were non-starters. I have not seen this method used in any other realist evaluation studies, but personally found it useful, particularly in recording observations and reflections, which could later be pursued during interviews. The spreadsheet quickly became cluttered and benefited from being 'sanitised' for the purposes of being understood and also in the light of clearer PTs and emerging themes. For example, many observations or comments that seemed significant early on were less important at a later point. The method worked well with the iterative development of the findings.

4.4.1 Observation

Contextual data (including events, environment, group dynamics etc.) was captured through participant-observation. Due to the inclusive nature of music activities, it was decided that the researcher should participate in as many sessions as possible in order to gain an authentic experience of that activity. This also built familiarity between the researcher and the participants, improving trust, and enabled the discussion of a shared experience during the interviews. Field notes were spoken into a digital recorder immediately after each music session and were later transferred into a Word document using a pre-defined framework (p.86).

4.4.2 Interviews

One-to-one semi-structured interviews sought to elicit participants' perceptions of their own wellbeing and to discuss their reasons for taking part in the music activity. Being a voluntary programme, it was assumed that participants had used some rationale in deciding to attend and that this was likely to be associated with the prospect of some positive benefit. The interviews were designed to explore participants' decisions to take part and to discuss their reasoning in response to the musical resource (how they were thinking during the activity), with a view to illuminating the mechanism that connected their participation with their personal wellbeing. A semi-structured approach was chosen to allow for a more 'realist' style of interviewing, in which theories can be inspired, explored and developed during the interview process, described by Manzano in terms of three phases, "theory gleaning, theory refining and theory consolidation" (2016, p. 2).

4.5 Data Collection

4.5.1 Participant-observer

Participant observation of the music activities mainly captured 'context' and to a lesser extent 'outcome' data. My own musical experience enabled me to integrate relatively quickly and to gain a better insight into the musical contexts, compared to remote observation. The social nature of these music sessions would have made non-participation difficult.

Interviews entailed deeper conversations about wellbeing, including some discussion of participants' 'challenging circumstances'. This required trust, which was generated to some extent through familiarity, honesty about the research agenda, verbal and non-verbal communication and through my participation in the music activity (Fetterman, 2010, p. 145). Consequently, the sequencing of data collection was critical; at least two months' of weekly sessions were attended before I interviewed anyone from those sessions. The period was an opportunity for me to get to know participants, build that critical level of trust and to select interviewees (see selection criteria, p.87). I participated in as many sessions as possible (weekly for the FYMP and twice weekly for Chilli Studios) between January and December 2015.

4.5.2 Observer as participant / participant as observer

Of the ethnographically informed observation positions described in Hammersley and Atkinson (2007, p. 82), those most appropriate to this study were 'participant-as-observer' and 'observer-as-participant'. The difference is considered moot (p. 85), but my perceived role did differ between study sites:

- At the FYMP, my researcher role was built into the programme and was made clear to all staff and inpatients. From the CYP's perspective, I was considered to be a staff member, most likely on account of my adult status, but also because I was asked occasionally to separate squabbling children and to lead breakout groups. This distinguished me as being different to the participants and therefore closer to that of an observer. So in this study site, my role was more 'observer as participant'. The challenge here was therefore to gain trust as a non-peer, which was successful, but happened over a longer period of time than at Chilli Studios.
- Conversely, at Chilli Studios, all participants were adults. I am also a service user (as opposed to a staff member or volunteer), which places me in the same 'category' as the participants. Music activities were democratically chosen by the studio members, but I was careful not to guide this too much. Again, I made my researcher role explicit, but this did not appear significant to most studio members. Consequently, I felt very much included as a peer and was more 'participant as observer'. Trust was more easily gained, but it became important for me to not be drawn into the activity too much. I was mindful of this while writing my field notes, which were kept as objectively as possible.

The distinction illustrates a subtle but key difference in the way data was collected at both study sites. Viewing me as a staff member, Ferndene participants may have sought to give me the answers they felt I wanted to hear (what Giddens (1987, p. 30) calls a 'double hermeneutic'). To mitigate this, I reiterated my non-staff role during the interviews, emphasising that there were no right or wrong answers and that the more detail participants could give about what mattered to them, the more we could improve the music program for them or their peers. A similar case was made to the Chilli Studios participants, but they were more interested in the research and I felt they gave more honest and thoughtful accounts of their reasons for music participation.

4.5.3 Field notes

Initial observations were spoken into a digital recorder immediately after each session, then typed into a table based on a format developed around several guidelines for recording ethnographic field notes (Sanjek, 1990; Chiseri-Strater, 1997; Emerson *et al.*, 2011). Van Maanen's 'realist tales' (1988/2011, p. 45) was consulted for guidance on maintaining objectivity. However, I did also record my own feelings after each session, following the impulse to capture emotions or strong instincts related to that session. To this nd, a 'double entry' system was used, as described by Holmes, in his meditation on the art of biographical note keeping (Holmes, 2016). Despite 'feelings' being a highly subjective dimension in relation to the activity, this element provided an

aide memoir to indicate if the session felt typical or atypical, if it seemed authentic, or if I felt there was something going on that was not observed.

Date/time	Description (empirical, quotes, conversations, critical incidents)	Analysis (what I made of this)
	Objective description.	*My own feelings, including speculation on emerging PTs, new ideas with potential. Relate to cPT spreadsheet (appendix 1, p.231).*
Location		
Members present		
Pseudonyms		

Table 3. Table format for recording field notes.

Some sessions were more eventful than others, but this format was used for all field notes and every session. A typical example is included in appendix 4 (p.269).

4.6 Sampling strategy and selection criteria

Music programmes were selected based on 1) their suitability to the research question and 2) accessibility. To this end, elements of purposive (or judgement) and convenience (or opportunistic) sampling were used (Burgess, 2002, p. 55). Creswell defines a 'purposeful' sampling strategy as one in which "the inquirer selects individuals and sites for study because they can purposefully inform an understanding of the research problem and central phenomenon in the study" (2007/2013, p. 156). The selection criteria were that projects must involve a participatory music component aimed at improving the lives of people in challenging circumstances (which include mental health issues and/or learning disability). The sites had to be located in northeast England (where this study is based) and would allow me to participate over a time span of at least six months. Given the importance of reasoning in RE, participants' attendance had to be voluntary, as this indicates that their involvement is at least partly based on their own rationale. Initial planning identified five potential sites (the other two being a pub-based open mic night with a regular clientele and a music programme being run in a prison). However, as the study design became more developed, the two main study sites identified here emerged as being the most appropriate in terms of the participants' defined challenging circumstances and their willingness to be involved with research. I was not able to gain access to the prison-based site.

Sampling of individual interviewees was governed by pragmatic issues such as accessibility and group size (Ferndene was limited by safeguarding issues and the number of staff available; Chilli Studios had eight core (weekly) and about 16 peripheral users of the music room, which itself only comfortably holds about six people). Access was easier at Chilli Studios, but arranging to meet participants was often difficult because some did not keep regular hours, were vague about when I could talk to them (e.g. "I'm usually in on a Tuesday; you can catch me then"), or did not write down our meeting times. The relatively small numbers of attendees at both study sites meant that I had to interview whoever was available. Because of these issues, individual interviewees were selected on a convenience basis. I was able to interview about 1/5 of the Ferndene participants and nearly half of the music room users at Chilli Studios. Approximate numbers of potential interviewees are detailed in Table 1 (p.82).

Ferndene interviewees were initially recruited by ward staff with whom they were familiar and all participants (and parents or guardians of those under 18 years old) gave informed consent. Two were not able to be interviewed; one due to recurrent health difficulties and one because they were discharged before the interview could take place. One participant was excluded from interviews because, although an enthusiastic music group member, he had severe communication difficulties and, after discussing the interview procedure with Ferndene staff, it was decided that he would not understand the process.[21] At Chilli Studios, one potential interviewee reacted negatively to my recording one of the music sessions. It emerged that she is not only wary of being recorded, but also had trust issues (although she tolerated my presence as a participant-observer). I had been hoping to interview her as one of the few females who regularly used the music facilities. However, after discussing this with staff members who knew her well, it was felt that her own comfort in using the space should not be compromised. All Community Music Spark members were considered viable focus group participants, but they only convened during timetabled sessions, which were part of a formal educational curriculum that could not be interrupted. After some negotiation, a group (chosen by the project leader) was formed out of course graduates, who were now delivering the programme. These individuals could therefore speak from experience as well as with an overview perspective. As a 'validation' group, this circumstance was considered acceptable.

[21] Interviewees' ability to articulate their thoughts on music participation was also assessed by the researcher and other staff during the observation and at the beginning of each interview, when the research was explained and participants were given the opportunity to ask questions. This preamble gave me an indication of their level of understanding of the purpose of the interview.

During the participant-observer phase of the data collection, the choice of observations, conversational data and other artefacts such as emails and song lyrics to record was informed by principles of theoretical sampling. Data were selected on the grounds that they supported emerging theories, which developed iteratively through the RE process. This corresponds with Glaser and Strauss' definition of theoretical sampling as "…The process of data collection for generating theory whereby the analyst jointly collects, codes and analyses his data and decides what data to collect next and where to find them, in order to develop his theory as it emerges" (1967/2009, p. 45). In practice, the collection, coding and analysis of data was not a simultaneous exercise, each having its own distinct phase. However, the candidate programme theories nevertheless influenced which data were collected. In summary, the choice of study sites was purposive and opportunistic; the choice of interviewees was convenience-based; and observational data were selected on a theoretical basis.

I was explicit about my researcher status from the outset (this involved some repetition when new members joined) and attended each study site for at least 12 weeks before requesting individual interviews. By that point, I was familiar enough to the group members to request a one-to-one conversation. This was relatively straightforward at Chilli Studios, whereas at Ferndene, more formal protocols were observed. My approach methods are outlined in the table below.

	FYMP	**Chilli**	**CMS**
How I found out about the study site.	I was a named researcher on this project, which was initiated and led by Dr Simon Hackett, my third supervisor.	Had researched online and became a self-referred, fully paid-up studio member before commencing study.	Was connected with this programme via Sage Gateshead staff working on the FYMP.
How I approached individual participants.	Requested permission to speak to individuals via their ward manager, who also sought and gained parental consent. Meeting dates and venues were also arranged through ward managers.	After attending and gaining trust for about three months, I asked individuals directly if I could interview them. All agreed, but arranging meeting dates/times was sometimes a little disorganised.	Discussed my project with the programme manager and visited sessions on three occasions. Became known to participants. Requested programme manager to convene a focus group.

Table 4 Summary of approaches to study sites and participants

I had hoped to interview more people, but was constrained by practical issues around access or individuals' circumstances. However, the object of realist evaluation is to develop and refine

explanations, rather than to prove or disprove hypotheses, so the detail gained through in-depth interviewing, observations and informal conversations is more important than having large sample sizes. “For realists, these stories, the accounts of experiences and events… are, instead, opportunities to test and refine ideas, to prove and refute conjectures. Reporting that 1 or 200 cases were collected is not as important as the ways in which insights into events and experiences are used for interpretation, explanation and claims from research” (Emmel, 2013, p. 140).

4.7 Interviews

After about two months of participant-observation, one-to-one interviews were arranged (being under 18 years old, Ferndene participants required the presence of a staff member). Despite interviewees being aware of my researcher status from the outset, the break from my participatory role may have had a ‘double hermeneutic’ effect (see p.86), which became apparent in some cases. Young people in particular seemed to treat me as a staff member and I had a sense that some gave me answers they felt I wanted to hear.

The interview setting may have affected participant responses (i.e. a group musical setting may engender different responses than a one-to-one setting, which may be associated with more clinical experiences). Nevertheless, one-to-one interviews and the focus group were made as relaxed as possible, so that participants felt comfortable discussing their personal feelings around wellbeing and music. Considerations taken included: using a familiar and comfortable room (children on their own ward, adults in the studio); not facing interviewees directly (we sat across the corner of a table); offered tea/coffee or a soft drink; made some initial small talk and explained clearly my own agenda, including the interview process.

The interview context differed from that of the music sessions, enabling the music activity to be discussed more objectively. Hammersley and Atkinson suggest that the ‘artificiality’ of the interview setting may enable us to identify “which aspects of the setting produce particular sorts of response” (2007, p. 108). Douglas (1976) observes that the more ‘active’ method of interviewing (as opposed to conversing) is useful where the aim is to penetrate ‘facades’, which are potentially more active in group settings. There were points where I had to press for more detail and the one-to-one nature of the interviews made this easier for participants to share information without being distracted by their peers, or feeling that they had to ‘perform’.

Interviews were carried out after at least eight music sessions had been attended by both the researcher and the interviewee. Hammersley and Atkinson (2007, p. 109) note that: “When

interviewing people with whom one has already established a relationship with through participant observation, little further work may be required". Trust was a delicate issue both for children (who viewed me as a staff member) and adults with mental health problems (who were sometimes wary of perceived institutional figures). However, all participants were willing to talk about their experiences. The 'flow' of each interview was managed accordingly, using prompts where necessary, such as asking participants to tell stories, elaborate or give examples (see interview schedule, p.94). At Ferndene, staff members were sometimes able to assist, as they had a pre-established relationship with the young people and knew ways of communicating with them or drawing a response. If the conversation slowed down, I returned to the core question; "Music has effect [x] on you; how does [x] increase your wellbeing [y]?" The visual elicitation cards were also useful; if the conversation strayed off-topic, I could refer back the cards on the table. This worked well on several occasions. Mainly, I used established techniques such as listening carefully, being conversationally flexible, and clarifying what the interviewee had said, to confirm my own understanding (Burgess, 2002; Hammersley & Atkinson, 2007; Bryman, 2015).

Some participants spoke of their musical experiences that weren't directly based on the programme, but which revealed a mechanism that could be discussed in the context of the music programme. This was then verified with the participant to ensure I had the correct interpretation. For example, one participant had strong musical memories associated with visiting the beach. I encouraged her to talk about how the musical activities at Ferndene could also help her build positive memories or help her get in touch with similar feelings. She understood the principle and we talked about an activity which involved writing a song about a desert island in which she was able to contribute musical and lyrical ideas that made her feel happy.

4.7.1 Semi-structured interviews

One-to-one semi-structured interviews enable an insight into interviewees' perceptions, and why and how these perceptions develop. They also allow the opportunity to clarify and ask follow-up questions if necessary (Smith, 1995). The semi-structured approach taken in the present study balanced open conversation with the discussion of pre-defined programme theories, using the following structure:

- Preamble and gaining consent
- Visual elicitation stage one: wellbeing (appendix 3.1, p.265)
- Visual elicitation stage two: music activity (appendix 3.2, p.266)
- Semi-structured enquiry based around visual elicitation responses (p.94)

At the beginning of each interview, I made explicit the assumptions that music participation increases wellbeing, but that this happens in different ways for different people. A script was developed (p.94) to ensure consistency between interviews and to help guide the conversation – although the primary focus was on the themes chosen during the visual elicitation stages. These were loosely based on Programme Theories, but it was made clear that any other [wellbeing definition] or [music → wellbeing mechanism] could also be suggested and discussed.

4.7.2 Visual elicitation

To swiftly establish the focus of the conversation within the broad range of pre-defined PTs, a visual elicitation method was used. This has some precedent; variations on the technique have been used in academic studies (e.g. Robson (2015, p. 142), who refers to 'table top assemblages') and by Newcastle and Gateshead Clinical Commissioning Group, whose study uses cards that describe 'scenarios' (Northumbria University (no author), 2016) to elicit responses from participants. Johnson describes such devices as "stimulus materials or projective aids" (1990, p. 36).

My visual elicitation exercise involved placing a non-gendered silhouette of a person in the centre of the table, representing the participant. A set of cards with simple coloured images relating to different wellbeing concepts were then read out by the interviewer and placed on the table. The participant was asked to choose which cards most closely aligned with what wellbeing meant to them. They could choose as few or as many cards as they wished, or suggest their own. There were initially four cards (control, happy and hopeful, able to bounce back, and physically healthy), but two further ideas were added by participants (feeling 'alive' and 'balanced').[22] The chosen cards were then placed over the silhouette, to indicate that these were their 'core feelings' around wellbeing and would be a central concept within the conversation.

A second set of cards was introduced, each with a brief sentence about music (e.g. music changes my energy levels; I can be myself when I do music; etc.). Again, participants were asked to choose one or more cards that resonated with them or that they agreed with. These were then placed in front of the participant, usually directly underneath or adjacent to the silhouette. Presenting interviewees with a range of relatable wellbeing definitions and a number of music-related phenomena not only sped up the process of reaching the crux of the conversation, but also

[22] These terms were implied in the literature, particularly the 'balance' concept. Feeling 'alive' was less sharply defined, but has some relevance in terms of energy levels. They were included in all subsequent interviews.

provided a visual reminder of the interview's subject matter. I encouraged storytelling and divergence, but if the participant strayed too far, I could refer them back to the cards.

The interview continued, using questions such as: what is it about music that makes you feel this way? How would you connect this with [chosen wellbeing cards]? Would you say that music activity increases your wellbeing for these reason(s)? And is this why you do music or are there any other reasons?

The visual elicitation had four advantages:

1) To establish the most significant themes to the participant, forming the basis for a relevant conversation more quickly.
2) To give some variation to the proceedings. This was probably more useful with younger participants, disrupting what might otherwise have been a fairly 'dry' conversation.
3) They were assessed and approved by the Speech and Language Therapist at Ferndene, who deemed them appropriate for use with CYPs who had communication or reading difficulties.
4) Keeping the cards visible throughout the interview served as a reminder for both the interviewer and the participant of the subject (in some instances, the participant reflected during the conversation and changed their minds about their initial choices). It also served as a reminder for me to keep returning to the question (why does *x* lead to *y*?).

NB. The senior manager for health and social care at Sage Gateshead (who also sits on the FYMP steering group) requested a protocol for the visual elicitation method, with a view to piloting this with their youth music programmes. This was duly developed (appendix 3.3, p.267) and has informed evaluation policy at Sage Gateshead – a small demonstration of impact.

4.7.3 Interview script

Preliminary questions around context **0:00 – 5:00**

Brief explanation of this research and go through the consent form.

1. Age
2. What brought you into contact with [the study site]?

Detail of health condition if necessary, but mainly seeking the motivating factor.

3. How do you feel before you enter

Wellbeing **5:00 – 10:00**

Do you know what 'wellbeing means? *If yes, what?*

It can mean different things to different people. I want to know what 'wellbeing' means to you. I'm going to place some cards on the table and I'd like you to choose which one you think is the most important to you. There are no right or wrong answers – what's important is what you think. You can choose more than one, or you can suggest something completely different.

I have wellbeing when:

- I feel in control
- I feel happy and optimistic
- I can deal with – or bounce back from – challenges
- I feel physically healthy
- I feel 'Alive' (suggested by a participant)
- I feel 'balanced' (suggested a participant)

This is a person – and it represents you. I'm going to place the cards you've chosen on to this person, so we know that these definitions of wellbeing are just for you.

We're now going to talk about how taking part in musical activities might improve or increase these feelings of wellbeing.

Music card one (M1): 0:10 – 15:00

When you do the music session here, can you tell me which of these sentences best describes how you feel? You can choose more than one.

- Music activity changes my energy levels
- I feel I can 'be myself' when I do musical activities
- My mood is changed by music activities
- Music activities have a physical effect on me
- I relate to people differently when I do music activities
- Music activities remind me of things
- *Anything else?*

I'm going to put these music cards on the table in front of us and we're going to talk about how these feelings – from the music – help to improve these feelings about wellbeing.

Relate wellbeing and music cards verbally during interview.

Discussion 15:00 – 30:00

Prompts:

- What is it about doing music that makes you feel this way?
- How does [music card] increase or improve [wellbeing card]?
- Talk me through… (And other ways of phrasing specific questions).
- What other things do you do to increase [wellbeing card]? How is music different?
- Do you think you might do music activity outside here to get the same effect?

Answers must indicate why *music activity* increases wellbeing and not another activity

- Are there any other feelings you get from doing this music activity?
- Examples…?
- **Other questions around specific answers – if in doubt, ask *why?***

FYMP only: does visiting the Sage building make a difference?

Chilli Studios only: what changes to the room to improve users' experience?

Further elicitation *to be suggested if participant isn't forthcoming*

Music activity changes my energy levels

- It calms me down
- It distracts me from other things
- It makes me feel energetic

I can identify more when I do music activities

- I feel a sense of belonging
- I can share how I feel about things
- I can tell my story
- It lets me be creative

My mood is changed by music activities

- It helps me if I have low mood
- It makes me feel less anxious
- It makes my mood worse

Music activities have a physical effect on me

- I can learn an instrument or new skills
- It's good exercise
- Doing music makes me feel tired

I relate to people differently when I do music activities

- I feel I can communicate better with others
- I like working with other people on music
- I enjoy hearing other people's ideas

4.7.4 Focus group schedule

Introductory spiel: You have all said that music makes you feel good. I'm trying to answer: why, for whom and in what circumstances? I've interviewed some young people in a music group in a hospital, and some adults in a community-based music studio. Now I want to interview you, because I know you face your own challenging circumstances and are doing something positive about it through music. So I imagine you'll have some interesting views about what is it about doing music that makes you tick.

From the interviews I've done so far, some themes came out about how doing music activity can raise people's wellbeing. I'll briefly describe each one and we'll talk about to what extent do you think it's true (if at all) and why. Speaking either for the group or for yourself, tell me why you agree or disagree with any of these, or any new thoughts, which you think haven't been covered.

- **Get verbal consent to record**
- **Broadly, what is it about music that increases your wellbeing?**
- **Themes [discuss each for around 10 minutes]:**

1. Music activity redirects my excess energy into something more constructive and useful. Different people I've spoken to have given different answers for this, so:

    a. I have excess energy in the form of nervous tension or anxiety, and doing music helps relieve this, makes me feel calmer and more able to deal with other things. In other words: it gives me a way to control my energy levels
    b. I often feel down or depressed and music helps to raise my energy levels. This is about controlling mood - which helps me do more things outside of the music group.

2. Representing myself to the world – many participants had trouble expressing themselves or making their thoughts understood to others – but they felt they could do this through music, either through songs, or through expression alone. What role (if any) does this idea play in your musical activities?

3. Subculture (identity, belonging) – lots of the young people felt more confident when they related with a subculture (e.g. cartoons, Frozen, Star Wars etc.). Many of the adults had a quite a punk attitude, because it's quite rebellious and expressive. Are there any musical subcultures or styles that particularly resonate with this group – and is that important to your music? And how do these thoughts make you feel?

4. Doing music activity changes your perceptions of things or the world, making it possible to do other things, e.g. ride the bus, be less shy, or do other creative things. Do you have any examples like this? How are things different after you've participated in a music session?

5. Music activity increases wellbeing because it's linked with memories of happy times or any memories that change your mood. Do you do music because it brings about specific thoughts, feelings or memories? If so, how does this affect your wellbeing?

4.8 Other artefacts

Other data sources informed the findings to some extent. These were not anticipated and were not part of the study design, but they became available during the data collection and their contribution is acknowledged here.

- Music:
  - Recordings provided valuable mementos for many participants (programme theory 6 – memory) and their existence as a tangible product was also important (programme theory 3 – tangible).
  - Live performance was a factor at all study sites, providing a goal or 'end point' of sorts for some participants. These had some different wellbeing outcomes and I attended live performances in all three study groups, primarily to show support.
- Photographs were used in the FYMP programme report (Hackett, 2017) and in my own presentations throughout the study period. No individuals were identifiable in these.
- Other artefacts:
  - One Chilli Studios member made a 'collage' for this study (unsolicited), detailing various anecdotes and feelings he had about music. He stated that our interview had 'got him thinking' and that I could use the piece for my research. The collage was interesting, but did not particularly address any research questions. However, the method may be of some use for similar research, perhaps for use as a 'jumping off' point for interviews.
  - Another member shared his lyrical and visual ideas for a concept album. He claimed this was to help with my research, but I think he was also seeking feedback.
  - The Ferndene group made some visual art to illustrate their CD inlay. This was given to participants to keep – a tangible product, which informed programme theory 3.
  - One FYMP facilitator made sketches of the children and activities. These were used in PowerPoint presentations due to the ethical issues around using photographs of children.

4.9 Operationalisation within a realist paradigm

Data yielded by these methods was organised in a way that would adequately address the realist research question. That is: in analysing the data, I was less interested in whether a programme had worked, but rather if it had been active and if so: how, why and for whom? Realist Evaluation allows these specific questions to be asked by providing a framework (CMOCs) for reporting such data. While field notes captured much of the contextual data, interviews sought to elucidate the rationale being used by participants in these contexts in response to the musical resources.

Provider rationale was used as the basis for programme theories. This was either explicitly stated in programme documentation (and sometimes from steering group meetings), or was implicit, i.e. it seemed a clear intent of the programme, but was not documented. In these cases, I spoke to programme facilitators and interviewed the manager at Chilli Studios to verify that this rationale was not amiss.[23]

In observing the realist paradigm, I sought to record field notes as objectively as possible, describing activities, participants and events in plain language, with no interpretation, or 'second guessing'. Van Maanen identifies three main styles of ethnographic writing: Realist, confessional and impressionist. 'Realist Tales' are characterised by a "dispassionate third person voice" (1988/2011, p. 45) and aim to give an objective account, based on the principles of realism. Any mood or emotional content was backed by empirical evidence (smiling, crying, shouting, etc.) and in some cases, if a significant event was ambiguous (e.g. unusual behaviours), I asked staff or other facilitators for their professional opinion. Interview transcripts yielded more CMOC data than the field notes. However, the notes described the activities that were being discussed as well as contextual factors (number of other people etc.). In this regard, the field notes also served to verify the interview data, enabling me to understand what activity was being described, or if the perceptions of the interviewee and myself were different in any way. There were no major differences in perception, although during interviews, if participants used metaphors or ambiguous language, I asked them to clarify what they meant or at least explain it in more straightforward terms.

The methods used here are not at odds with realism in the social sciences or with the RE framework. Pawson and Tilley observe: "…in broad terms, research designs for realistic evaluation studies actually follow the same basic logic of inquiry as that underpinning any other area of social science" (1997, p. 84).

[23] For example, nowhere does the FYMP document that music affects energy levels. However, one of the music facilitators explained to me that sessions were deliberately held on a Monday afternoon because this is traditionally a 'low-energy' point in the week. The rationale was that more excitable children would be calmer, but the activity would 'cheer up' the Monday afternoon lull.

4.10 Practical limitations of research methods

This section describes issues I encountered using the above methods. It should not be confused with the methodology section titled 'Data collection techniques' (p.72), which discusses the more theoretical debates around these methods.

Sometimes, a question would occur to me only after an interview had finished. Most of the time, I was able to pursue this in later sessions; the rapport built through by my participation enabled further inquiry where appropriate. However, there were occasions when it was difficult to access the participant again or to broach the subject easily. Due to the vulnerability of all participants, I was careful to observe confidentiality and respected boundaries around too much inquiry. Consequently, there were some occasions where I would have liked to have pursued further information, but this was not possible.

Semi-structured interviews are not all identical. I stuck as closely to the script (p.94) as possible, but the phrasing of some questions changed according to the flow of each conversation. This enabled a more naturalistic discussion, albeit at the expense of consistency. Nevertheless, the semi-structured approach enabled 'realist' interviewing.

The more subjective elements of participant observation may have become increasingly interpreted as conclusions are teased out of the initial observations. I.e. the more developed the PTs became, the more displaced they were from the observational data. Although I sought to record field notes in a straightforward, unembellished manner, this data became embedded in increasingly developed findings. I found myself interpreting the original notes in terms of the updated findings, which may have unwittingly distorted their meaning to some extent. Realism seeks "fidelity to nature in representation; the showing of life etc. as it is in fact" (OED, 1991) and from this, to establish causal explanations, which do not sit comfortably with interpreted data. I endeavoured to remain as faithful as possible to the original observations (though of course, some realisations only become apparent after the fact). That said, I did have opportunities to check and confirm some findings directly with participants. Combined with my own awareness of the issue, this minimised the amount of inadvertent interpretation.

I had no real way of verifying the truthfulness of interview responses (see 'double hermeneutic', p.86) and am aware that testimony from younger people may be less reliable.

Sample sizes were small. It took a long time to arrange interviews, particularly with the Ferndene participants. These limitations are acknowledged. However, the combination of methods and the

verification carried out (further inquiry of individual participants, plus the focus group at the third study site) increased my confidence in the conclusions drawn.

4.11 Data analysis

Thematic analysis of interview data and field notes was carried out using NVivo software. The essential process of reading, re-reading, generating initial codes and themes, then analysing the data was carried out based partially on the candidate programme theories and was informed by Braun and Clarke's (2006) six-step systemic thematic analysis process.

Initial codes were generated from the visual elicitation cards and significant PTs that had been referred to during interviews. An initial pass found that due to the visual elicitation design, much of the interview data fell into one code or another. This was filtered more thoroughly to remove irrelevant or ambiguous data, then mixed with field notes. At this point, it became possible to detect sub-themes within the broader data and to tease these into secondary themes, which formed the basis for nascent CMOCs. This further filtering stage allowed for a more manageable volume of data. By this stage, I had about eight PTs with both literature and primary evidence bases. These were roughly articulated as CMOCs, which I then discussed informally with participants at Chilli Studios and Ferndene.

I made these 'rough CMOCs' the basis for interviews with the studio manager at Chilli Studios and for the CMS focus group. The studio manager was able to connect some of the CMOCs with intended outcomes for the studio (which had been articulated differently, but was clearly reflected by my findings.[24] Members at CMS deemed some of the proposed CMOCs important and this generated a lot of further discussion, crystallising them to some extent. Equally, some theories didn't receive so much attention, suggesting that they were more specific to individuals and allowing me to question the contextual differences that may have caused this response. This secondary level of analysis served to further filter the CMOCs until I was left with six that had enough data from each study site and could be expressed in more confident terms.

The themes evolved during the analysis period, due to the iterative nature of the data collection and the ongoing development of PTs. Strict adherence to more rigid themes would not have

[24] For example, Chilli Studios places a great emphasis on 'play'. This emerged through the importance placed on musical improvisation by studio members compared to Ferndene participants, who gained more from structured activities. The 'play' ethos was not acknowledged in the initial programme theories, but in the context of the data, it made sense of the enthusiasm for improvisation at Chilli Studios.

allowed the flexibility required to develop the findings. Nevertheless, the thematic analysis did help with filtering and collating similar data, thereby allowing programme theories to emerge and develop.

4.12 Reflexivity/positionality

Acknowledging issues of reflexivity/positionality is critical in qualitative research, especially that which involves ethnographically informed techniques such as participant-observation. This section will comment on my own position in relation to the research and therefore takes on a more autobiographical tone.

In spite of clarifying my role to participants at both study sites, there was a perception of me as a staff member and I believe this may have influenced some of the answers given, particularly at FYMP. This is described in the participant-observer section (p.85). I could not hide my non-peer status to the children (and it would have been wrong to do so), but I nevertheless felt that they perceived me as an authority figure and bracketed me alongside ward staff. Some of the staff also treated me as staff, by asking me to 'supervise' some of the young people or to sit between them if they were squabbling. I'd have preferred to take more of a participant role, but this was difficult under the circumstances.

Being considered a peer at Chilli Studios was easier. I am a mental health service user, although I disclosed my researcher status and agenda. The difficulty arose (as I perceive it) during interviews; many participants had been asked numerous questions about their wellbeing before and one even noted that he perceived me as "just another counsellor". I assured him that my role did not involve counselling (unless he became upset during the interview, in which case I could signpost counselling services if necessary). However, he noted that the situation (sitting in a room one-to-one with me asking the questions) was very similar to many experiences he had had. A few participants wanted me to explain exactly how my questions would improve their lives. I struggled here; they were asserting their authority as service users and, although I told them that these findings would add to a body of research that may influence the design of such services, they seemed unconvinced that they would benefit directly. I felt challenged, but emphasised that by advancing knowledge (as a society), small changes could be made to improve society. This was challenged by negative references to (then) Prime Minister, David Cameron. I remained neutral.

Chilli Studios also has a social scene. Some members occasionally went to the pub after a session and would invite me. Not wanting to appear aloof, thereby further distancing myself as a peer, I

attended a couple of times. This was of no great consequence, but it underlined for me the difference between this study site and the Ferndene study site. We played a few games of pool and I avoided drinking by virtue of driving.

Personal biases are a factor. I began this research confident that music participation could increase wellbeing. I don't regret this position and would argue that participants' voluntary attendance supports this theory. My research question asks 'how', not 'if' music increases wellbeing. However, I do wonder if carrying out the research from a more neutral standpoint may have yielded different results. I explained my research to interviewees from this (biased) position, which may have made them feel pressured into offering positive responses (another example of double hermeneutic).

4.12.1 Researcher presence during musical activities

My own presence may have affected the music activities, although I was careful to remain simply a 'participant' and not lead or unduly influence the sessions in any way.

The Ferndene programme had a strongly inclusive ethos, which held that all adults in the music room (e.g. unit staff, trainees, the researcher) should participate in the activity. I.e. no one present could take a passive role (this was not a documented rule, but was promoted verbally by the facilitators). My own role was participatory by design – to build trust for the purposes of this study – so merely observing would not have been an option anyway. This policy of inclusion was intended to reduce the sense of 'us and them' that might have prevailed between inpatients and staff. It enabled me to take part in all activities 'as if' I were an inpatient; following instructions, engaging in the music and receiving more or less the same experience as the CYPs. My ability to play the guitar was drawn upon sometimes, which set me apart from the other staff (although had any of the young people been able to play basic chord sequences, they would have been encouraged to do so). So although I had a reasonably authentic experience, I was differentiated from the study participants both physically, mentally and conceptually – although most did not seem to distinguish much *between* the adults; we were all 'staff' in their eyes. Critically however, my presence had no effect on the music activities, which were delivered by the facilitators according to a pre-planned programme devised around the needs of the group. The young people were used to the presence of adults and I played along in this role, which did not seem disruptive.

As a paying member of Chilli Studios, I was accepted as a peer immediately. On revealing that I was also carrying out research, this piqued some people's interest but didn't seem to ruffle any feathers. Almost everyone had an opinion on music and wellbeing and most were keen to share this. As I became more familiar to the group, attending once or twice weekly, interest in my

researcher status waned (I suspect most just forgot). The 'jam sessions' were guided by a facilitator and, although I led one or two jams, making up bass lines on the spot, this was part of a democratic approach that was carefully maintained by the facilitator. Most group members were guitarists, singers or keyboard players, so I chose to play bass guitar to fill the gap in the ensemble. This differentiated me slightly, but is also a natural approach to group music-making. My presence did not (I felt) change the tone or feel of the group. The facilitator (whom I asked directly) also didn't notice any particular change in dynamics, even though the participants knew they were being observed. I think they either forgot or didn't particularly care. The other music group at Chilli Studios (which I attended less often) had many of the same members and was more project-oriented. To this end, I spent a lot of time listening to other people's music, making the occasional comment or observation when invited. These sessions were designed to be mutually appreciative and constructively critical, so my behaviour was within the parameters of the group ethos. I did not bring my own musical ideas, but did contribute bass guitar to one person's recording project. As the only bass player, it would have been churlish not to.

Overall, I don't believe my presence made any difference to the way music sessions were delivered at either study site. In other words, had I not been there, all music sessions would have gone ahead in a very similar way. The study design and my participant-observer role ensured that any impact due to my presence was minimal.

4.13 Ethical approval

FYMP: Ethical approval was granted from the Faculty of Health and Life Sciences on 8th October 2014 (appendix 2.1, p.247). The Northumberland, Tyne and Wear NHS Foundation Trust Research and Clinical Effectiveness Department approved the study on 18th November 2014 (appendix 2.1). Following this, a favourable ethical opinion was given by the National Research Ethics Service Committee, Hampstead on 9th January 2015 (appendix 2.1).

Chilli Studios: As a member of Chilli Studios, I gained written approval from the manager to carry out research on the premises (appendix 2.3, p.257). Ethical approval was subsequently granted from the Faculty of Health and Life Sciences on 23rd February 2015 (appendix 2.3).

No significant ethical dilemmas were encountered during the data collection.

4.13.1 Informed consent, children and vulnerable adults

Participant Information Sheets and informed consent forms are included in appendices 2.2 for Ferndene (p.251) and 2.4 for Chilli Studios (p.259) respectively.

The involvement of vulnerable children and young people, vulnerable adults, the requirement for informed consent and the use of NHS sites meant that I had to attend some mandatory training courses, including 'Adults Lacking Capacity' and 'Safeguarding Children'. I also applied for (and was granted) a Disclosure and Barring Service certificate, indicating that I have no criminal record and am a suitable candidate to work with children or vulnerable adults.

4.13.2 Confidentiality

All individuals and locations have been given pseudonyms. All audio notes have been deleted from the digital recorder and are stored on a password protected machine along with the interview transcripts and NVivo files.

CHAPTER 5: FINDINGS

Data collection and analysis identified six strong Programme Theories (PTs). To aid chapter navigation, these are organised under the following three broad headings (see fig 6, p. 107).

- **Motivation and energy**. It emerged early on that some music activities had an effect on energy levels. In the case of young people at Ferndene, gaining control of their excess energy resulted in behaviour improvement, which drew praise from staff; at Chilli Studios, participants actively used music activity to mediate their energy levels.
  - Programme theory 1: Praise
  - Programme theory 2: Energy control

- **Identity**. The musical product became an item of value to some participants, with which they could represent themselves to others. Similarly, the ability to associate with a subculture (and its associated meanings) through music also became apparent when these options were made available.
  - Programme theory 3: Tangible product
  - Programme theory 4: Subculture

- **Subjective/emotional wellbeing**. Many adults used the wellbeing benefits of music participation to create positive contexts after that activity had ended. This varied between individuals and I deemed it to be a form of resilience. It was also found that some participants associated music and music activity with positive memories, which made them happy.
  - Programme theory 5: Resilience
  - Programme theory 6: Evocation

For each programme theory, a cPT will be stated. Data from the two study sites will be reported separately, then summarised in terms of 'what worked, for whom and in which context', followed by a refined programme theory, developed in light of the data and articulated in terms of context, mechanism and outcome.

Figure 6. Findings chapter organisation.

PART 1: Energy and Motivation

Initial programme theories were based around the crude understanding that music participation could have either a relaxing or an energising effect. Comments were made at both study sites to the effect: 'music calms me down', or 'I use music to motivate me in other activities', but the reality was more complex. At Ferndene, music activity's ability to either focus energy or to engage hard to reach [in this case, less energetic, less communicative] participants resulted in praise from staff, which served as a motivating factor. At Chilli Studios, energy took different forms and music improvisation enabled a certain amount of control over this, which brought about wellbeing outcomes by enabling participants to shift from a less desirable energy state to a more desirable one, according to their individual circumstances.

5.1 Programme theory 1: Praise and hope

A positive outcome for the Ferndene participants was the opportunity to focus their energy and to demonstrate behaviour improvement. This was characterised by engagement – focussing most of their energy most of the time – in the musical activity, impulse control and the ability to direct their efforts towards completing tasks. Behaviour improvement resulted in individuals receiving praise from staff members, which some connected with potential recovery. Behaviour was less of an issue at Chilli Studios, but opportunities to give and receive praise were maximised in a way that may not be possible in other aspects of participants' lives. At both sites, song writing in particular was found to capture and hold attention, and drew praise from perceived authority figures (staff or parents) or peers. Consequently, praise was identified early on in this study as a means to achieving a wellbeing outcome, giving rise to the following candidate programme theory:

5.1.1 Candidate programme theory

- Group music activity generates opportunities for participants to receive praise, confirming that their efforts are being recognised and potentially leading to increased self-esteem.

5.1.2 Ferndene data

The music programme generated multiple opportunities for the young people to gain praise and this is explicitly stated as a programme outcome:

> Outcome 4: To improve the young people's self-efficacy (i.e. self-esteem, skills, engagement, motivation, and confidence) and resilience to challenging circumstances by developing their musical interests, skills, and giving them **opportunities to receive positive feedback and succeed** (FYMP funding application, 2014 (emphasis mine)).

Music's ability to engage likely causes a 'cascade' of reasoning, triggering multiple outcomes. At Ferndene, one such outcome was behaviour improvement, which triggered praise from staff (who worked within a positive, praise-giving context and were therefore attuned to the young people's behaviour). As inpatients, cast as being 'unwell',[25] the young people already had a positive desire to exhibit behaviour improvement. When this was acknowledged, through praise, it implied a step closer to the ultimate goal of recovery and consequently discharge. Comments made by the young people indicated this line of reasoning.

[25] I use this term cautiously and am not making any value judgements on the relative qualities of being 'well' or 'unwell', or on the nature and meaning of recovery in this respect. However, the fact of being 'admitted' to an NHS unit does position the young people as patients and therefore as 'unwell'.

Of the music activities observed, song writing as a group seemed to generate the highest levels of engagement. At Ferndene, this involved: generating ideas, writing lyrics, forming these into a structure, practicing the song and recording it. The variety of different processes, leading to a clear goal, drew on different individual skills and maintained the group's attention and momentum (discussion point 1.1, p.164). This enabled numerous opportunities for demonstrating and/or modelling good behaviour, and to gain praise. The activity also encouraged interaction, enabling multiple opportunities to engage in pro-social behaviours, which are also a positive outcome in the eyes of Ferndene staff.

Linking praise to recovery – or perceived recovery – relates to the wider concept of 'understanding the rules of the game'. Most Ferndene participants had some awareness of the connection between self-control, behaviour and liberty, and the music activity provided an accessible and enjoyable 'framework' in which to do this. Non-musical opportunities to receive positive feedback also exist (education, meal times…), but the chance to receive praise for something they also enjoyed was recognised; one participant (F8) described group working on a music project as an "easy win" in terms of demonstrating good behaviour. Some young people equated good behaviour and leaving Ferndene with 'normal', which was particularly important to those who could recall a happier time before they were admitted. They knew that the key to returning to that happier time was the ability to control their behaviour, and that receiving praise was an indicator of that. F2 responded particularly well to praise, stating that his goal was to "do rap music and ride around [on my bike] with my mates… without getting into trouble". Staff at Ferndene also acknowledged the progress he had made in terms of behaviour since starting the music sessions.

That the young people responded well to praise isn't surprising. Interview data suggested that praise is reasoned into optimism regarding the possibility of recovery and eventual discharge. Most of the young people indicated a belief in and desire for recovery. Their comments during sessions and in interviews made reference either to "getting out" of Ferndene, or future plans.[26] This link between behaviour improvement, praise and the ability to conceptualise a better future was spoken of in terms I would tentatively describe as 'hope' – a positive feeling or expectation for a particular thing to happen – in this case, discharge from hospital.

[26] Of these future plans, some related to musical activity: two interviewees wanted to write film soundtracks; one wished to become a rapper; one wanted to record his own songs and another had plans to join a music group at Sage.

There were some divergent cases, where the outcome (hope) remained the same, but the reasoning underpinning this differed, revealing an alternative perspective on the programme theory. Most Ferndene interviewees expressed a desire to improve their behaviour in order to achieve 'recovery' and thereby be discharged from the unit, but two participants gave the strong impression that they were not interested in behaviour improvement and instead viewed Ferndene as an unfair obstacle to their personal freedom. Notably, one YP attended several music sessions but was 'unreconstructed' in his thoughts around recovery and viewed Ferndene as the problem. He regarded the unit as "a bunch of people who think they're doing something right for me but are not… They think they know me, but they don't and they think that what they do will help, but it doesn't". He viewed good behaviour as appeasement and as the key to escape, and regarded the music activity solely as a resource for positive feedback, describing it as "doing what we're supposed to do". This type of reasoning was more prevalent among autistic participants, whose more detached approach seemed to correspond with a more instrumental attitude, rather than being motivated by a desire for recovery. It is interesting that 'learning the rules of the game' can lead to either a disingenuous approach or a genuine drive towards behaviour improvement, to achieve the same ultimate goal of leaving Ferndene.

Such divergent cases are useful in that they illustrate the complexity inherent to interventions that take place in social contexts and the fact that measuring outcomes alone would provide a less complete picture. There is also value in identifying this distinction, as it can inform other music intervention programmes according to their participant needs. More generally, divergent cases enable theory development. This programme theory is based on and presented here as being about praise; if it were to be refined further (if the time and resources were available), then details such as this would become critical in exploring the concept of praise and its effect in patients at Ferndene.

There were examples of young people praising one another, but praise from staff (who were perhaps seen as 'gatekeepers' to positive behavioural assessment) seemed to have the most impact. The giver of praise therefore influences this CMOC (discussion point 1.2, p.165).

5.1.3 Individual exemplar: F1

F1 is a sociable 13-year old girl with boundless energy. She enjoys music, is a member of the choir at Ferndene and attended three 12-week blocks of music sessions, one of which involved writing and recording songs from scratch. During the other 'blocks', F1 tried to learn guitar and drums but lacked patience and became frustrated, resulting in arguing, shouting and general impatience with the group as a whole. However, the song writing activities held her attention and she

engaged well with the process of contributing ideas, eventually allowing space for others to do the same. She attended every session of the song writing block, during which her behaviour was significantly less disruptive in comparison to instrument learning or improvisation.

Each idea that F1 contributed to the songs received verbal praise from facilitators, as well as the implicit approbation gained by seeing that idea being used. Once she understood the process, F1 contributed an increasing number of conceptual, lyrical and stylistic ideas. In response, she received positive attention and acknowledgement from staff and some peers. After being written, the songs needed rehearsing. This exercise was carefully facilitated so that it improved each time. Iterative development of the musical product seemed to maintain her interest and this was recognised by staff, who encouraged her with positive feedback.

At one point, F1 and another girl became friends and would distract one another. They were separated several times, but each time F1 received praise from the facilitators, her behaviour improved. Eventually, she found a non-disruptive way to interact with the other girl, showing her how the song should be sung. This peer-to-peer learning was unexpected, but illustrated some reasoning in terms of finding a way to interact that also drew praise from staff members.

F1 likes to flit between short bouts of activity, which keep her occupied and prevent disruptive behaviour. Her comments reflect the idea of linking positive feedback with recovery, indicating a particular form of reasoning in response to praise. On behaving better whilst working with other people during a song writing activity, she said:

> P: *Sometimes I behave bad and good, but… Yeah, in the Island Song [one of the songs written by the group], I kind of forget about it and just talk to people and communicate, so I don't actually think about it... I think about that, 'cos I know sometimes I'm really bad…*

And on the consequences of that behaviour on her own wellbeing, she said:

> P: *I just like to show myself being myself. I don't even know if that made sense.*
>
> I: *It does. So would you say you're happy with yourself and you want other people to see that?*
>
> P: *Yeah. But not get into trouble for it; like when I'm not always being told off for being distracted and misbehaving.*
>
> I: *When you get told that you've been behaving well, does that make you feel good?*

P: *Yeah.*

Through the music activity and guided by praise, F1 – who was admitted to Ferndene because of behavioural problems – was able to explore different ways of behaving and different methods of interacting with others. The praise she received in this context not only made her feel good 'in the moment' (as was the case at Chilli Studios), but also guided her in terms of potential routes to recovery. She spoke in her interview of happy memories (programme theory 6, p.152) from before her time at Ferndene and made clear her desire to return to those times. The last time I saw F1, she was engaged in various musical activities, including 'live sampling', 'beat boxing' and DJing, and commented: "This is the best session I've been to so far". Staff from both Sage and Ferndene spoke highly of her, noting (within her earshot) the great progress she had made since joining the programme. I am not claiming that her behaviour improvement is solely down to the music programme – a range of therapeutic interventions are used at Ferndene – but the mechanism described here (engagement → praise → hope) became apparent throughout her attendance on the music programme and had an observable effect on her wellbeing.

5.1.4 Chilli Studios data

The above mechanism – linking music engagement with praise from authority figures and connecting this with increased hope of recovery – was less apparent at Chilli Studios. Here, participants more commonly gave and received praise among one another. This has wellbeing outcomes, but not the same as those outlined above. Ben, the Studio Manager pointed out that whilst recovery was a goal for some members, praise (though useful in other ways) was not seen as a means to recovery – not least because discharge or release is not a factor in this instance.

However, creative production is an important output for Chilli Studios, and this is motivated and achieved through various means, including praise from other studio members. The studio has a strong ethos of peer support, which is promoted through its emphasis on being user-led. A recent evaluation (Armstrong, 2014) observed numerous examples of peer support.

> *"…learning to work as part of a team and learning about other people and art by talking to other people and we give advice and feedback to other members."* (Anon., quoted in the Chilli Studios 2014 Evaluation Report (Armstrong, 2014)).

In the music room, song writing was driven more by individuals (who were usually the sole authors of their song). However, the shared resource of the music room often rendered the performance or recording of members' songs a group activity. In these instances, peer support was more evident than at Ferndene. Praise was abundant and I suspect most studio members

were aware of its importance, having received little approbation outside of the studio. In this regard, praise is still a resource at Chilli Studios, but leading to more direct wellbeing outcomes, such as increased self-esteem or constructive feedback on their creative endeavours. Although this was observed, it was not mentioned during participant interviews and therefore does not form a large part of this programme theory compared to the Ferndene data.

5.1.5 Focus group data

The Community Music Spark Focus group acknowledged the role of praise in their work, but this was not a focus for them. When I interviewed them, they had recently started working with a new cohort of young people, who they were training to become community music workers. Only when I mentioned it did they acknowledge the role of praise in this. However, this was not expanded upon, as if praise was seen as merely a component of their work, but not critical to its success. Like Chilli Studios, there is no 'inpatient' context in which praise can play a role in generating hope. I did observe instances of praise and peer-to-peer learning during the sessions I attended, but it seemed in this case that praise was simply regarded as part of the ethos, rather than as a specific tool or strategy for achievement.

As with Chilli Studios, praise played a role, mainly between peers. This was observed and is likely to have multiple wellbeing outcomes. However, it was not mentioned by participants in the same way as it was at Ferndene, where receiving praise became part of conscious reasoning and was very much related to ideas around recovery.

5.1.6 What worked, for whom, under which circumstances?

Group song writing provides a framework in which attention/energy can be occupied or diverted, resulting in improved behaviour and positive feedback. At Ferndene, comments from the participants indicated that a connection had been made between receiving positive feedback (praise) from staff members and ideas of recovery and the increased possibility of discharge from hospital. At Chill Studios, improved behaviour is not a factor, but positive feedback is an important component of the programme, connected more directly with esteem. However, this was not explicitly acknowledged by participants. With a focus on Ferndene, the critical factors were therefore:

- Praise must come from staff or authority figures who are perceived as being able to potentially influence the prospect of release.
- Activities with multiple components leading to a common goal (in this case, song writing) were most effective in engaging participants. At Ferndene, this resulted in behaviour improvement.

- The context must be one of explicit recovery indicators (e.g. being discharged from hospital). The idea of recovery is complex – but for the young people at Ferndene, returning to the world outside of the unit was a significant end goal.

Participants' reasoning in response to praise differs according to the institutional or community setting and this study recognises that the outcomes are different at both sites. Theoretically, two discrete CMOCs could be generated from this – but the bulk of the data collected here was from Ferndene. Similarly, a chain of CMOCs could be constructed to illustrate each step in the reasoning that connects praise with wellbeing. However, it was difficult to get the young participants to articulate their thoughts around this without asking significantly leading questions. A pragmatic approach has therefore been taken in recognising praise as the central feature (**Error! eference source not found.**, p.**Error! Bookmark not defined.**). The justification for this approach is that it seeks to establish a level of specificity that is also flexible enough to be adapted to a range of settings, i.e. has translational potential.

This configuration therefore regards group song writing as a context that generates opportunities for *praise*, which then becomes a resource. This resource is then rationalised into wellbeing outcomes (hope of recovery, self-improvement, esteem etc.).

5.1.7 Refined programme theory

The candidate programme theory, combined with the supporting data and following consideration of its potential configurations, gave rise to the following refined programme theory, articulated as a context, mechanism, outcome configuration:

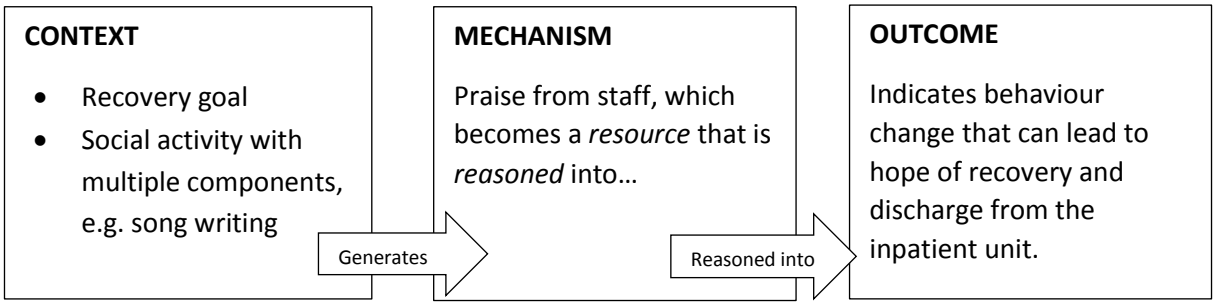

Figure 7 CMOC diagram for praise

5.2 Programme theory 2: Energy control

Energy was significant to all participants. The data crystallised into two predictable directions: energy gain or energy release, both leading to a sense of increased "balance" – the word used by many participants. **Energy release** was described in terms of relief from tension or alleviating nervous energy, whereas **energy gain** is based on the claim by several participants that music activity excites them or makes them "feel alive". The distinction between gain and release was initially treated as two CMOCs, but as data around these became denser, they later merged under the common theme of 'control'. So although the data presented here speak of energy, this CMOC is primarily about control.

5.2.1 Candidate programme theory

One initial PT stated 'music activity enables participants to increase their energy levels', whilst another said 'music participation can have a calming effect'. After a short time observing and talking with participants, both were equally widely reported across study sites, so the following candidate programme theory emerged:

- Participatory music activity can help participants gain control over their perceived energy levels, enabling them to move from a less desirable energy state to a more desirable one.

Energy gain or reduction depends on personal contexts, i.e. whether the participant is anxious (has energy to release) or depressed (needs to gain energy). Anxiety and depression are deeply intertwined[27] and many participants spoke of energy 'balance' or control, indicating a more complex relationship between energy levels and wellbeing. This programme theory could be seen as part of a chain in which increased control of energy levels enables subsequent opportunities for increased wellbeing (see programme theory 5, resilience, p. 180). Nevertheless, the evidence for consciously seeking to release or gain energy was framed by participants as a wellbeing outcome in its own right.

5.2.2 Chilli Studios data

The evidence supporting this CMOC came mainly from Chilli Studios members, who explicitly recognised music participation as a resource for altering their own energy levels. Chilli Studios' mission statement does not mention energy, but does recognise aspects of 'functionality' (such as creativity, interaction, skills development etc.) that depend on energy.

[27] Prevalence of comorbid anxiety disorder and major depressive disorder is thought to be over 50% (Hirschfeld, 2001).

Referring to a Chilli Studios music group he used to run, the Studio Manager emphasised the importance of modifying energy levels (up or down), saying:

> *In the last 15 minutes, we would play some rock and roll, like AC/DC, so that people could cut loose. That is so valuable… For me, it was the last day of my week and I played football on those evenings, so it got me hyped up. For others, I knew it made them feel calmer… Just getting it out, the anger and the tension that had built up. So I don't really know… But it worked.*

He went on to say that 'anything goes' in the music room, no matter how loud or how awful-sounding, because:

> *As soon as you start to impose parameters or a framework on how people express themselves, then you've lost it; you're not going to get that catharsis* (Ben, Studio Manager).

The importance of energy is well recognised at the studio. The manager's ideas around energy and music focussed on energy release and catharsis (see discussion section, p. 171). This was a familiar concept to individuals who had spent time reflecting on their own mental health and was raised in some interviews. Specifically, those who experienced tension or anxiety tended to see 'catharsis' as a wellbeing outcome. In devising the candidate PT, I had initially considered 'primal therapy' (Janov, 1970) to be a factor, but after speaking with the studio manager, the idea of 'play' (Brown, 2008) became relevant, which retains the psychodynamic basis, but without the necessity for a trauma focus. Musical improvisation allows participants to 'play' with language, communication and identities in a socially acceptable format with like-minded people. The jam sessions provide a 'safe' context in which various energy states can be explored or achieved in a way that is meaningful to the individual. For example, one studio member reported that improvising gave him confidence, reducing his anxiety and making him feel calmer. This calming effect relates to the present programme theory:

> *Oh, it can take a lot of the anxiety away; it can put a real kind of superficial confidence into you, the way you do feel that: Oh, I could finish an album; I could maybe get somewhere. I don't know where. Just put it out, get a few nice reviews or something…* (Matt, studio member).

The participant also describes a confidence boost, which enabled him to pursue his desire to use music as a means for self-representation (programme theory 3, p.130) and subsequently talks of

praise (programme theory 1, p.109), indicating that multiple outcomes can be triggered by one context and that these can work in 'chains', discussed in programme theory 5 (p.145).

One concept that emerged as relevant to participants being able to 'cut loose' and to thereby modify their energy levels was the idea of a 'safe space'. The music room is separate from the rest of the studio. It can be made private (by posting a 'Recording in Progress' sign on the door) and is deemed by many studio users as a 'safe space' for conversations as well as music activity. The room itself is a comfortable environment for self-expression and few participants expressed any inclination to perform music outside the studio. Shared musical experiences and shared mental health contexts also contribute to the 'safe space' idea. Furthermore, using the same room for all music activity generates consistency; some participants have spent hundreds of hours in that room, so this represents a significant constant for them (discussion point 2.4, p.170). The context here is therefore one of musical improvisation in a familiar space that is considered 'safe'.

> *Sometimes, I hurry through the rest of the studio to get to the music room, because I don't know any of the other [non-musical] members. The music room is like a haven* (Matt, studio member).

Studio members reported a more nuanced understanding of energy levels, often relating energy with their own mental health, which they talked openly and knowledgeably about. Symptoms of anxiety and depression were commonplace. Some appeared inherent, whilst some seemed to arise from managing complex mental health problems in a 'normocentric' society (the 'us and them' concept was frequently cited as a source of stress – discussion point 2.2, p.169). It must also be noted that many studio members take prescription medicines which can significantly affect their energy levels. MC, who is on medication for schizophrenia, said that he struggles to control the side effects, which either make him too tired or unable to sleep. He said: "if it wasn't for this, I probably couldn't even be arsed to get out of bed". Six of the nine Chilli Studios interviewees spoke of 'nervous energy' (or 'feeling edgy'), whilst two participants reported depression. Seven interviewees said that music instils in them a sense of calmness, although some also claimed that music increased their energy level, suggesting a distinction between specific qualities of energy (discussion point 2.1, p.168).

Participants who talked about energy levels in their interview were mainly those who attended the Tuesday session, a facilitated improvised jam session interspersed with conversation.[28] Mostly the same people attended each week, so they all knew each other and had a strong idea of what the session entailed. In this sense, a context had developed over time, having evolved its own components, dynamics and arguably, a familiar musical communication system. The change in [perceived] energy levels differed between individuals; some gained energy from the session, while others 'let off steam'. During one session, participants reported (and agreed) that they were conscious of the activity's effect on their energy levels and this was one of the reasons they attended, indicating that they viewed that session as a resource.

Various data contributes to this idea and descriptions of fluctuating energy levels painted a rich picture. Some people expressed straightforward energy gain, which they reasoned was due to an 'unburdening' effect of musical activity (discussion point 2.5, p.171).

> *Energy levels, yeah, of course, like I say, I feel a bit like there's a spring in my step when I leave jams. I feel like I'm more sociable, more energetic and a less burdened person. I'm sure I feel like something has been lifted off my shoulders a lot of the* time (Marty, studio member).

Others had energy to 'burn off', which made them feel calm:

> *Erm, actually, that reminds me, for quite some time when I was a little bit manic, I used to let quite a lot of energy out in beat boxing kind of… Like I'd make random noises and beat box and it was something about the noise but also the rhythm which calmed me down… 'Cos there was so much energy to burn off, but erm, there was comfort in doing that* (Colin, studio member).

One participant was keen to distinguish between feeling relaxed and feeling less tense, again indicating different 'forms' of energy:

> I: *Imagine we're talking about a session where maybe you've done some singing, how do you feel afterwards?*

[28] Facilitated improvised jamming, in this context, involves a group of musicians (on instruments or vocals), one of whom might propose a musical idea (a chord sequence or vocal line). The rest will then musically improvise around this in their own time. The facilitator, a professional musician, may instigate an idea if nothing is forthcoming, or may augment the dynamics of the jam session to encourage others, also using non-verbal communication, such as gestures.

P: *Erm, more relaxed, I suppose. Less tense, not relaxed, less tense.*

I: *Are you often tense?*

P: *Yeah, a lot of the time. But I relax when I come to NAGAS [Chilli Studios]…*[29] *I just enjoy making something that people understand* (Anders, studio member).

Some participants cited both increased and decreased energy in the same conversation. The idea of balance was therefore important to them and, in particular, having a means to control that balance.

P: *But er, as part of that therapeutic kind of jigsaw… Music becomes part of that and then after I've done that, I do have more energy. I maybe need to go to sleep afterwards, but it does give me that balance again, yeah… Music again becomes part of that like, toolkit which I plug into, which I start to kind of… Well it helps me to kind of find that kind of feign that calmness.*

[…]

P: *…It's more about feeling balanced and not so anxious, like about everything.*

I: *Okay. Well I suppose the opposite of anxiety would be calmness.*

P: *It's experiencing inner peace* (Colin, studio member).

This reference to a 'therapeutic toolkit' indicates conscious reasoning in defining music as a resource to achieve an energy change for the better. The participant in this case was describing music in general, including listening and participating at Chilli Studios and elsewhere. His reasoning applied to multiple musical contexts, but he was emphatic that his involvement with music – in all its forms – has become a resource in his life which he uses to move from a less desirable energy state to a more desirable one. "Balance" was a desirable outcome for him and being able to control this was something he sought through various creative pursuits, including music activity.

[29] Chilli Studios was formerly Newcastle and Gateshead Arts Studio (NAGAS) and is still referred to as such by some studio members.

Participants who gained some control over their perceived energy levels described wellbeing outcomes including mood elevation, increased productivity and resilience, often in terms of subsequent activities, e.g. painting (p.123).

> *P: When you're in a random situation, but you're in control. You're not… A loose cannon, as it were. It's only random in the sense that the rhythms and the interplays between everyone will be different on different weeks, but you're in control, because you're going to try and fit in to that somehow* (Ronald, studio member).

Another member of the same group reported that he suffers from lethargy due the antipsychotic medication that he takes. As long as the room is cool, he says that having a jam session helps him wake up for the day (this person wakes up around midday and leaves his house about 1pm to attend jam sessions at 2pm). This had become a bi-weekly routine, which the participant valued as it made those his most productive days (CMOC 5, p.145). The same activity can have different (even opposing) outcomes for different people. This at first seems incongruous, but framed as a resource for achieving control over energy levels, it makes more sense.

5.2.3 Individual exemplar: Jeff

Jeff is bipolar and is usually depressed. When he becomes manic, this leads to risk-taking behaviour with potentially dangerous outcomes. Consequently, Jeff seeks to remain within the 'safety' of a depressed state. He participates in day-to-day activities, including a singing group at his church, but his 'default mode' is a low-energy 'twilight', which he admits can be a struggle at times, but makes his life more manageable and predictable.

Jeff plays flute and sings with the group once a week at Chilli Studios. He has a vivid imagination and enjoys improvising humorous lyrics, usually about the things he can see (i.e. other people in the room). Outside the studio, Jeff lumbers around and usually speaks in a monotone. He is friendly but doesn't waste energy on being 'characterful', despite his vivid imagination and quirky worldview.

He associates wellbeing with stability and would like to have more control over his mood. The word 'balanced' was used often.[30] Unprompted by the cards, Jeff defines wellbeing as:

> *That stability, er, no symptoms. Sort of stable, able to function day to day, erm… Not feeling elated or not feeling depressed, but somewhere in the middle.*

[30] In spite of the fact that I initially ruled it out from the visual elicitation task for being too vague.

In response to the VE exercise, Jeff associated wellbeing with 'energy reserves' and control:

> P: *I don't know the word for it, but erm, you know when you feel that you've got some energy reserves? You feel like in your head and in your body, you can draw on some energy to do things? Whereas if I'm feeling ill, I wouldn't be able to do things, because I feel like I haven't got the erm, energy or energy reserves.*
>
> I: *Mental energy or physical?*
>
> P: *Both, I think. Yeah… It's to do with control as well.*

Jeff values process over product. He enjoys being part of a creative unit, from which he gains inspiration and energy. This is a reward in itself and satisfies Jeff's creative urges (he has an MA in Fine Art), but in the context of his bipolar disorder, it serves a deeper function:

> P: *I think when I'm experiencing symptoms or when I'm ill, as I was saying earlier, there's a lot going on in my head. Ideas that are wrong and sounds that are wrong.... But when I'm able to do something that satisfies my creative urges, it elevates my mood a bit, but it's not the same as er, being manic. If you know what I mean… It's more of a controlled thing. More of a suppressed thing, I think.*
>
> I: *So again, say you have an energy level, creativity… Sometimes, without the medication or without the music groups, it might spike and that would be a manic phase or it might drop and that would be a depressive phase, but the music activity then can help spike or increase the energy level or the mood, but not in a manic way.*
>
> P: *Yeah, exactly… Sort of defining the difference as well between a fit of mania and a fit of kind of controlled erm, glowing feeling. Kind of feeling as if you've kind of done something worthwhile that's kind of fulfilled a need type of thing.*

This emphasises the earlier point that energy takes different forms depending on context, and supports the idea that energy can be bad or good, so control over the 'type' of energy achieved is a vital resource. In a slight twist, Jeff elaborated that he could allow himself to be a little *un*controlled through music activity, because he knew he could return safely to his previous self again. This connects with the issue of 'control' in the sense that being *un*controlled represents a little thrill – perhaps a different CMOC completely.

> *P: Exactly, yeah… But sometimes, you may not want to feel in control, so you have an hour or half hour where you do something that's taking risks artistically speaking, which is a way of channelling energies… So this thing also about control. When you… You go inside…*

Withdraw into yourself, but you also come out of yourself, but you only come out of yourself because you know that your other self is there to come back to… And I think if I was ill, I'd be scared of coming out of myself for fear that coming back into myself would feel… Uncomfortable.

The energy Jeff derived from playing music allowed him to entertain the more manic side of his personality in a controlled manner, opening up his experience beyond the relatively narrow bandwidth of emotion that his medication and self-control permitted. He went so far as to say that it allowed him a brief glimpse of being out of control, albeit in the structured and socially acceptable context of a jam session. Jeff described this feeling as 'joy'.

P: *I can be more objective and reflective when I'm well than I can when I'm ill. I haven't got the patience when I'm ill, because there's all sorts of things going on. You know?*

I: *Okay. So all these things that are going on, again, would the energy level give you the energy to perhaps filter them more or sort them out or make sense of them?*

P: *I think so, yeah. Because sometimes I get the beginnings of paranoia and I'm able to work it out and think of what proof there is for that idea and I'm able to… What's the word I used to use when I was describing it to my doctor? Erm… Rationalise it. Yeah.*

I: *Yeah, that does take energy, because it's a conscious cognitive effort, to try to do that… Making sense of the noise.*

P: *Yeah, definitely. Definitely.*

5.2.4 Individual exemplar: Albert

Albert has depression and anxiety. He attends Chilli Studios two or three days a week to paint and play keyboards. On arrival to a music session, Albert often talked about mental health, spirituality and music. He only really discusses his 'feelings' in the music room, which can be quite a private space (see context of 'safe space', p.118). Music has long been part of Albert's life and he has a keyboard and saxophone at home but rarely plays these, indicating that for him, the resource is not just about access to instruments. For Albert, the transition from talking to playing music is seamless; he will tentatively improvise on the keyboard and talk until gradually the former will dominate. The whole process changes his mood and even his physicality; he goes from hunched and tense to relaxed and nimble. He seems unconcerned with formal structure, wandering up and down the keys in a state of 'flow' that seems at odds with his overwrought countenance before the session. He usually left early to resume painting, claiming he felt 'calmer'. This change seems

particular to music; I have seen Albert painting and he is reserved, preferring to be alone – any change brought about by the painting seems to be internal.

Albert describes his feelings as 'wobbly'. He struggles to control these, but knows that music changes his energy. Now retired, he attends Chilli Studios mainly to paint, although his mood is modified more quickly when he dips into a music session. During the VE task, Albert did not choose an energy card, although he acknowledges the relationship between energy and mood:

> I: *Before you go into the music room, how do you feel?*
>
> P: *I do feel a bit nervous. And sometimes that can pass in a half an hour or so, because of the way the music works as a mood enhancer, you know?*
>
> I: *Yeah. And is that just normal nervousness, or is it nervous about going into the music room?*
>
> P: *It's just normal.*
>
> I: *Okay. So a normal state of anxiety, but you find that the music can sometimes alleviate that?*
>
> P: *Aye. It's strange, because there is a point where in music, you can get more nervous because you're excited. That's where there's like a change of the mood, which is like… Er, difficult to really assess and all that, you know? And there's times I've went in there and sat down and been nervous and I've only realised when I was sitting on the bus [afterwards] that I was… That it had passed.*

The last statement illustrated the complexity and the difference between what might be deemed 'positive' or 'negative' energy. Albert consciously uses the music sessions as a resource. When asked if he felt music enabled him to control his moods, he said he felt:

> *No need for a control mechanism; it's closer to pure expression, so it takes less energy.*

For Albert, it was about being 'in the moment'.[31] Without explicitly mentioning it, he described something similar to 'flow' (Csikszentmihalyi, 1991, 1996, 2004). He didn't dwell on the social benefits, but the opportunity to talk about feelings and music, as a precursor to playing music, seems important to Albert.

[31] Dutton (2013, p. 192) describes 'being present in the moment' as a state of mind in which the past and the future have no bearing. This can significantly reduce anxieties or inhibitions which may be based around past experiences or future worries and is the basis for much of what is often called 'mindfulness'.

Aye. I mean, a lot of it's to do with playing with people in the moment… Which sometimes is hard to come across, in a way. You know, it might not happen all that often. Like, supposing I didn't come here. I can't think of anywhere I would play, really. I've got a keyboard in the house, but I wouldn't play that much. You know, you've got to have erm… If someone's playing the bass, for instance, the bass or drums or both. You know, that would be enough. And a few words. Or a lot of words and…

The presence of other people is important, but the mechanism seems to be about converting (or processing) accumulated energy. On the benefits he felt from taking part in music, Albert's words imply a strong physical effect, although he struggled to articulate this:

P: *Aye. And you got the feeling that it was therapeutic. You know?*

I: *In what way? 'Cos it was like cathartic, or…?*

P: *Well, cathartic, yeah.*

I: *How does that connect with you feeling happy and hopeful? Like, can you tell me in what way it increases your wellbeing or your happiness?*

P: *[It's] even better than words, even better than literature and I had never thought of that, so… I'm not sure exactly in a clear way how it happens, but it's just probably to do with your heart and your soul and your mind and you become… It makes us sort of lyrically minded and you almost feel as though you're dancing and things like that and they're all connected: music, dancing. Erm…*

I: *That sounds quite physical.*

P: *Aye.*

I: *So does it increase your heart rate, or does it calm you down?*

P: *Erm, well it sort of… Sometimes it makes you nervous, but it's a nervous that's kind of like a… A nervous that's kind of like good. You know?*

I: *Mmm. Okay. So I'm trying to think of how you would put that into words. Like a 'good nervousness'. Er, anticipatory, maybe or…?*

P: *I think it's just the joining. It's the joining in. It's probably like being in a choir. You just feel as though you're part of a bigger picture, you know?*

For Albert, 'reconfiguring' his nervous energy into a more positive form increased his wellbeing, although this was contingent on the presence of others. He liked to feel part of a group and drew energy from this which was preferable to the nervous energy which was his default state. At one point, he noted that the jam sessions made him feel like he contributed to something that was "greater than the sum of its parts" and that thought was "exciting".

5.2.5 Ferndene data

Many Ferndene participants' behaviour became noticeably calmer and more focussed through their participation in a music activity. A minority were difficult to engage, but some interaction could be achieved through music. However, in spite of a few comments from individuals, there was little evidence to suggest that Ferndene participants consciously rationalised music activity as a means to calming down or becoming more energised.

F1, at Ferndene, noted immediately her diagnosis and described music's cathartic effect, establishing her view of music as a resource to release energy:

> *P: I have ADHD, so like I feel like I can bring my energy out on music… It's the physical movement of that.*
>
> *I: Do you dance?*
>
> *P: Mmm. Sometimes I belt it out as well… 'Cos there's not many things that can get energy out, other than go to the music and just [belt it out]* (F1, FYMP participant).

The Ferndene context differed from that of Chilli Studios. Energy issues were a factor; some children exhibited 'hyperkinetic' symptoms, whilst others were subdued and difficult to engage. The music activities had some effect: as described in programme theory 1, song writing provided a focus for young people who were particularly excitable. Similarly, one young person who was ordinarily very morose became animated and engaged with the activity when we played a certain song (*Is this the way to Amarillo* by Neil Sedaka). At Ferndene, the activities were carefully planned and delivered, such that the young people had some choices, but within a structured plan. There were fewer opportunities for musical improvisation and furthermore, the young people found it less easy to describe their energy levels. Consequently, the data mainly came from observations and is therefore potentially more open to interpretation. So although energy control was important at Ferndene, in this particular configuration, the Ferndene evidence was scant and lacked cohesion. The programme theory described here is mainly based around data from Chilli Studios.

5.2.6 Focus group data

Comments from this group indicated a conscious appreciation of the effects of music on energy levels. After initially establishing that the group is already "very energetic", one focus group member described the average session:

> G: *Well, as soon as we get here on a Friday morning, we meet in the café upstairs, we chill out up there and once we get down here, once we get into the room, that's when it kicks in, 'cos… Yeah.*
>
> I: *Okay, so is that's where the work happens?*
>
> G: *That's when it kicks in, 'cos that's when the energy starts to build up and you're all "Aah, we're in for a good day, here".*
>
> I: *Okay. So is it like actually when you enter the room? 'Cos you know what's going to happen?*
>
> G: *We're all in the zone. Yeah. And [facilitators] are like "whoa, what's hit these?"*
>
> *…*
>
> G: *That's what kind of this group is; it's like an energy group. It's like: 'Boom'.*

The comments here were very much in the vein of 'increasing energy levels', perhaps reflecting the different demographic of the group (more learning disability than mental ill-health). Nevertheless, the focus group clearly indicated (and agreed) that they consciously attend the music sessions because it increases their energy levels, although they attributed this boost as much to social factors (e.g. shared humour) as to the music activity itself:

> I: *Okay. So again, what is it that…? What do you actually do that makes the energy kick in?*
>
> G: *Laugh.*
>
> M: *Laughter, yeah.*

5.2.7 What worked, for whom, under which circumstances?

This study recognises that energy is important to different people in different ways and that there will be significant overlap between all study sites. Changing energy levels through music activity was acknowledged at both Ferndene and CMS, but Chilli Studios provided the most cohesive data connecting music activity with energy control. The activity in which this was most evident was facilitated musical improvisation (a jam session). Participants who had anxiety or excess nervous energy consciously used improvised music activity to alleviate this, or to reconfigure it into something more positive. This was a conscious choice; for Jeff, it was rationalised as a safe way to

boost energy; for Albert, this meant releasing pent-up energy or tension – and these were their primary reasons for attending.

5.2.8 Refined programme theory

The sense of 'control' over their energies is considered a positive outcome for people who feel a lack of control in other aspects of their lives. Interviewees aligned 'control' with the music activity as if it were an inherent property. In this regard, the programme theory was configured as follows: the music activity and the control it engenders is a *resource* that is consciously used to achieve the wellbeing *outcome* of: shifting from a less desirable energy state (having not enough or excess energy) to a more desirable energy state (gaining or releasing energy accordingly).

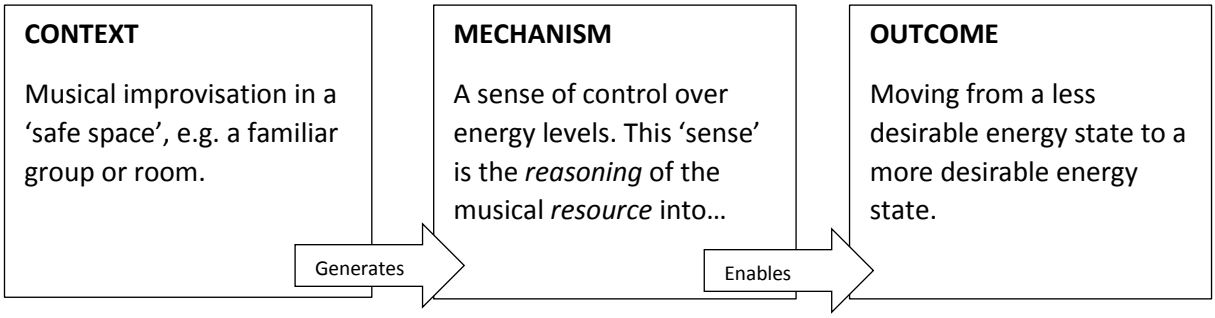

Figure 8 CMOC diagram for energy control

PART 2: Identity

It is suggested that "one of the primary social functions of music lies in establishing and developing an individual's sense of identity, and that the concept of musical identity enables us to look at the widespread and varied interactions between music and the individual" (Hargreaves *et al.*, 2002, p. 5).

The sense of belonging yielded by feeling part of a group with a shared identity is critical to wellbeing (Wakefield *et al.*, 2016). Music has for a long time been a means through which people can express an identity – either by aligning themselves with (or in opposition to) an established cultural group, or by expressing themselves directly through their own music. It was noticed at an early stage that most participants in both study sites were eager to talk about music they enjoyed or aspired to make, or were keen for others to hear their own songs and compositions. The issue of identity (self or projected) therefore became worthy of investigation.

5.3 Programme theory 3: Representation of self via a music product

Self-representation is significant for people who have experienced marginalisation or who struggle to express their 'voice'. Participants at both study sites had opportunities to create and record a tangible musical product (CD or .mp3) to play to friends and family, or for wider dissemination. The idea that participants could use their recording as a resource to represent themselves was a common thread. Concepts of permanence, communication and control are relevant here and it should be noted that recordings were the dominant focus, rather than performance, which was not really discussed. The opportunity to make recordings yielded a range of responses around ideas of representation and 'having a voice', despite some differences between study sites.

5.3.1 Candidate programme theory

Several candidate programme theories were relevant to the idea of making recordings (see appendix 1, p.231), the strongest being:

- The opportunity (resource) to record music enables a further resource (the recorded product), which can yield benefits around ownership and control of self-representation. This might give rise to a sense of pride, positive feedback, or a sense of agency.

5.3.2 Ferndene data

The FYMP documents did not mention recording and did not identify representation as an outcome, although evidence of the music activities was required by the funder (Youth Music), so recording activities and 'celebration events' fulfilled that requirement. Nevertheless, there was a sense during the song writing and recording sessions that the young people were keen to show what they'd been doing to others. Some were also pursuing an 'Arts Award', for which their recording may have become a portfolio piece. There was clear enthusiasm for the recording activity, although comments during sessions indicated that the focus was on the final product.

I had expected the young people to be more curious about the recording process – but multi-track recordings can be made on any smartphone, so perhaps this was a naïve assumption. However, the idea of a disciplined and professional recording session was introduced and explained by the facilitator to induce a sense of responsibility and calmness. The artificial context of it being 'professional' recording session seemed to engage attention and this was bolstered by the fact that a CD recording for each participant was one of the promised outcomes.

Some of the Ferndene participants enjoyed the recording activity in its own right,[32] while some had clear ambitions to make their own personal recordings or to compose film music. One participant showed great interest in the digital recorder used during his interview and was interested in recording cover versions of his favourite songs to play to his mum and "send to the radio" (reasoning). In spite of his learning disability and limited understanding of the music industry, he understood the need for recording equipment as part of the process of creating a tangible musical product (resource), commenting in the preamble of our interview:

> P: *Who's the company who made that Dictaphone thing?*
>
> I: *Oh, er, Olympus.*
>
> P: *Can you write it down, 'cos I would like one for home. 'Cos I'm trying to write my own music… Because I would like one of my own… Can you plug it into the computer, to burn it off? And can you put it on a tape and a CD?* (F4, FYMP participant).

The young people were promised a CD of their own music to take home with them. CDs might be considered slightly archaic (discussion point 3.1, p.173), but tangible nature of the disc (a physical item to take away; a 'showpiece' which included artwork created by the group) held some sort of cachet, as all the young people were keen to receive a copy.

As with programme theory 1, the CD recording of the young people's creative endeavours was something they could be proud of and which attracted praise (this time from whoever they chose to play the CD to, such as parents, carers or peers). The discs themselves were eagerly received and the idea of making a 'proper' (multi-track) recording was set out as a clear goal. This became significant during the recording sessions, in which order was maintained through the concept of 'professionalism' – to get the best recording possible so that listeners would be impressed. Two group members also expressed a desire to compose film soundtrack music as a career (citing *Star Wars* and *Lord of the Rings* – films noted for their score). Whilst the songs written and recorded in these sessions were group efforts, the desire to own a recording of these may also reflect an idea around ownership and credit – although this was more prevalent at Chilli Studios (see illustrative data, p.134).

[32] The recording activity yielded some peripheral wellbeing outcomes (mostly related to setting up the equipment; the 'testing' process, etc.). These are important in the broader context, but are not relevant to the present CMOC.

Ferndene inpatients stay anywhere between a few days to several weeks, representing a specific and potentially significant period in their life. CDs may act as a memento (connecting with programme theory 6, p.152) of this period, although there was less evidence to support this. Nevertheless, some young people stated that they enjoyed listening to their recordings in their rooms (i.e. for their own pleasure, rather than to represent the musical achievement to anyone else).

A CD compilation of original material and cover songs, including artwork and group-penned stories was produced at Ferndene. On one level this provided evidence for Youth Music (the funders), but the project was also designed to provide the CYP with a souvenir of their activities, into which they had invested considerable effort. The recording was also intended for CYP to play to their parents, carers and friends – an album which they could claim some authorship of – although this was decided by the facilitators, rather than being specified in the initial programme design. There was a palpable enthusiasm to complete the project and several participants eagerly engaged in the album design and recording process (returning each week, participating fully and asking questions about the process). The CDs were presented and played back at the Ferndene 'celebration event', to the evident delight of the young people involved (lots of smiles, shouting, applause and running around). In this regard, there were wellbeing outcomes for both the young people and for the audience of parents and carers.

5.3.3 Chilli Studios data

Being a working studio and art retail outlet, Chilli Studios is more explicit in encouraging its members to create tangible and lasting pieces of art. By providing recording facilities, internet access for online dissemination, holding gallery exhibitions and promoting live gigs, the context for members to self-represent through creativity is strong. The music studio is equipped to make semi-professional recordings. Primarily, this enables members to pursue their own musical agenda, such as making or using backing tracks, finding inspiration online, or setting up jam sessions through the PA system. However, the recording facility appeals to a core group of studio members. It is tacitly acknowledged that group activity and 'play' is prioritised over individual recording projects, so members who use the recording facilities cede the room when necessary. In this respect, time and access are also resources and these are used democratically. Nevertheless, the availability of recording equipment (and staff who can operate it) allows interested participants to generate a personal resource (the recorded product), which enables self-representation.

One studio member has recorded and released her own EP, describing her experiences of depression and alienation; one uses the facilities to record his songs (about his experience of schizophrenia, mental health services and social care) on an ongoing basis; and one participant is engaged in an album project, recruiting other studio members to perform.[33] Treating the recording equipment as a resource is more overt in Chilli Studios, which is very much about making creative resources available to those who might not otherwise have access to these. Every member has experienced some form of marginalisation in wider society and can often only voice their experience through art and music. In many cases, their creative output is defined by character traits that are often seen as 'quirky' and arguably fall into the 'outsider art' genre (see p.173). One female studio member who identifies as having Asperger Syndrome has made extensive use of the studio's facilities to produce a portfolio of recordings, artwork and clothing which represent her connection with The Beatles and her obsession with Doctor Who. She wears the clothes daily and promotes and performs her music nationally. She features prominently in a film, *Apples is Apples*, produced by Chilli Studios, in which she showcases and explains her 'difference', which is important for her to express publically, as part of her character. She explains: "…and if I wear something different, people expect me to be different and are not shocked when I turn out to be not quite the same as they think…". Later in the film, she records a ukulele performance on Tynemouth Beach. For her, a primary motivator is expressing and representing her difference in public contexts, which includes both performing music and making recordings.

Two Chilli Studios interviewees were engaged in recording projects but weren't explicitly seeking to raise awareness of social issues. Their lyrical and musical (e.g. samples from films) subject material either addressed mental health problems directly or referred to a society that still stigmatises such issues. They were not so much seeking a political 'voice', but were instead seeking to express their unique personalities and perspectives that had been shaped by the challenging circumstances they had experienced – and all sought to extend this message beyond the studio. For example:

[33] In the language of Realist Evaluation, these others become 'resources'. They were willing and their contributions were appreciated, although the idea of them being resources is uncomfortable. The term 'human resources' has been criticised for its dehumanising connotations (Hart, 1993). Yet, in this research, no participant was dehumanised; if anything, most were flattered to have been asked to help. In a community music context, the term is more innocent; Aasgaard (2004, p. 149) describes patients' relatives as "part of the 'human resources' which may be drawn into the different music therapy interventions". The dehumanising connotation is therefore context dependent. Although a linguistic mishap, for participants who have experienced social exclusion and marginalisation, this is perhaps worth being mindful of.

Marty writes his own rap songs, which he records at the studio. These revolve around his experiences with schizophrenia. Some are introspective, based on his mood, which is heavily governed by antipsychotic medication; some describe incidents or anecdotes from his life, such as a run-in with the police; and some describe his mother, who also has schizophrenia. Marty campaigns for better mental health legislation and services. He sends his recordings to friends for feedback and curates a social media profile where his songs are hosted. For Marty, the feedback is constructive and he uses it to improve the recordings. He gets a great deal of satisfaction when the listener 'gets it', i.e. understands the point of the song, which is his own perspective – and he particularly enjoys receiving comments from online listeners, whom he doesn't know.

Josie is a multi-instrumentalist who has recorded an EP which she promotes online. She also joins in the more conventional jam sessions. I was recording one of these, having requested and been granted permission from those in the room. Josie joined us late and, after noticing the red recording light on the device, asked me to press stop and to erase anything recorded. I agreed to do so and asked why. She said: "I felt I was leading that; it was my tune. Not that I think you're going to steal it, but…" Evidently, the sense of control or ownership over her music was important to her, but I wasn't able to ask about this as she refused to be interviewed.

5.3.4 Focus group data

The Community Music Spark programme was not initially designed to promote a political agenda, but over time, the group's output became heavily influenced by disability rights and social justice. Association with Sage Gateshead equips the group with valuable resources, including recording equipment, performance opportunities and wider publicity. The focus group reasoned that access to a stage is the best way of conveying their message. One articulated this as simply: "wanting to represent learning disabilities to people in power". Not only is there interest in demonstrating the group's musical talents to the general public in a live context, but their recordings have a political dimension, seeking to raise the profile of learning disabilities to those "people in power". The group's musical outputs often address disability rights, validation, and positive attitudes in the face of political and social adversity. One original composition, *Don't diss my ability*, was performed at the CMS summer show and is intended to be sent to politicians at the Houses of Parliament. This is a clear example of intentionally using music as a medium for representing a group of people and a cause.

> *There's one song we did last year called 'Don't Diss My Ability'… We thought we could spread that message to parliament, 'cos we have the rights of getting a paid job as support musicians and we wanted to fight our fund, so we can carry on throughout the years* (M, CMS group member).

For the adults at CMS, representation *is* a political issue. This programme's underlying driver is to empower those marginalised through disability to gain employability skills (see also programme theory 5, resilience, p.145) and to help others facing similar challenges. In this case, the wellbeing outcome is about 'being heard' and being acknowledged as a group in wider society, rather than as individuals. Appealing directly to the government appears to be the apotheosis of representation – at an overtly political level – although the principle of self-representation was relevant across all study sites.

The group's recorded output is also used to demonstrate impact, with a view to securing continued funding. Like Ferndene, this indicates more pragmatic reasons for making recordings.

5.3.5 What worked, for whom, under which circumstances?

Recordings of their own music gives participants a tangible object which they can use to represent themselves. This may be for close friends and family only or it may represent a conscious effort to share the unique and perhaps otherwise ineffable experience of living with a mental health condition. At CMS, the musical product is secondary to the political point conveyed. The critical difference between each study site is motivation and the intended audience. The programme theory (using the recording resource as a means to represent oneself) is similar across the study sites, but as with the other CMOCs in this study, its configuration varies according to context.

The idea of representation is alluded to in programme documents, but is never an explicit intention. The distinction between intended audiences raises the question of self-perception among the different groups, but representation remains the important factor. This could benefit from being acknowledged more explicitly in intended programme outcomes.

Personal or group expression varied across study sites. FYMP participants seemed to be motivated by having an object which they could use to gain approbation from parents, carers or peers; representing and sharing individual perspectives was important to Chilli Studios members; and the concept of group representation (as a political statement) was critical at CMS. These differences affect the programme theory's configuration, although the principle – using opportunities to record music for representation to others, remains. Figure 9 visually describes this principle.

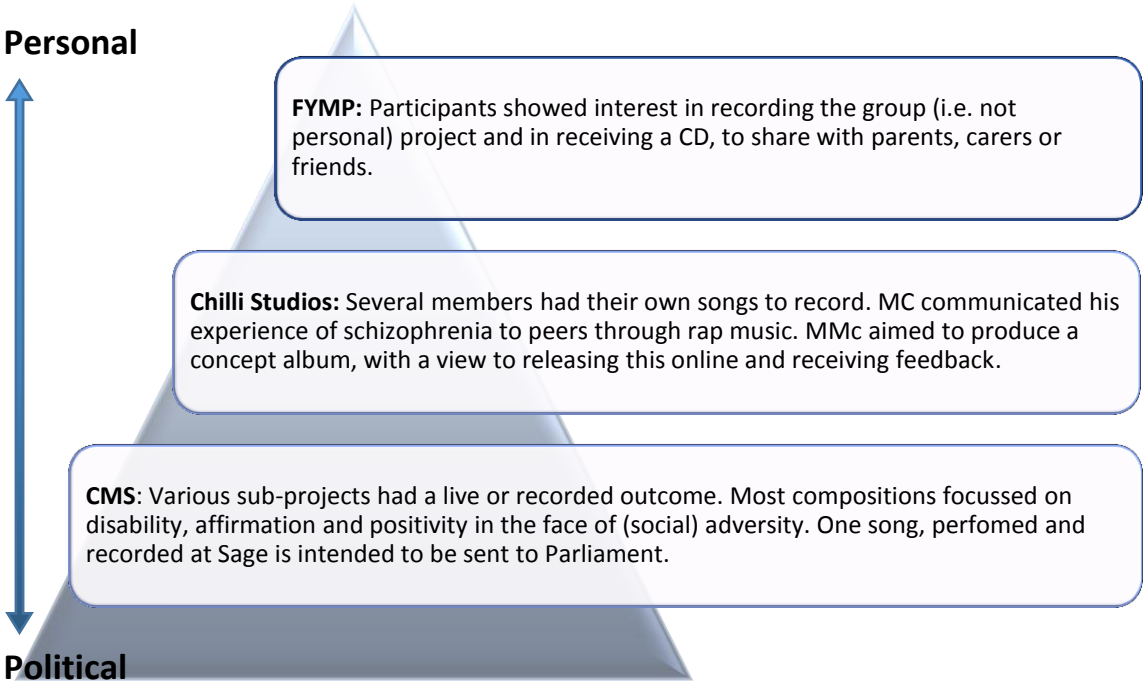

Figure 9. Motivation for representation – distinguishes participants' reasoning, which influences the CMOC configuration.

5.3.6 Refined programme theory

People in challenging circumstances are often marginalised or socially excluded. Opportunities to create and own a tangible product of their artistic expression and with which they can actively represent themself are therefore valuable and this product can become a resource. The intended purpose or audience differed between study groups, but each expressed some wellbeing value in owning (and therefore controlling) a recorded product of their musical efforts.

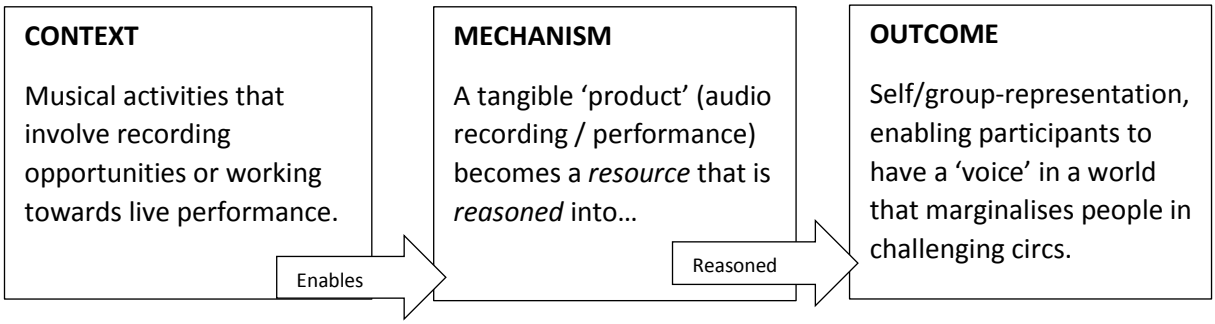

Figure 10 CMOC diagram for representation

5.4 Programme theory 4: Genre and subculture

Identity is often expressed through musical genre and this was observed during the data collection. In general, older participants tended to identify in relation to musical subcultures, often locating themselves in opposition to mainstream culture, which they associated with authority and subjugation of outsiders, including people with mental health problems. Younger participants seemed more interested in aligning themselves *with* the mainstream. The debate around subculture is broad; Hebdige (1979) recognises the various functions of style, including to communicate alignment with a group or to communicate rebellion. These are commonly signified through clothes and music. Hall and Jefferson claim: "The importance of pop music in particular has been confirmed (and never analysed) by every sociological study of young people since the late fifties... [when the concept of the teenager emerged]" (1993, p. 239). This explains to some extent the differences in musical preference between adults and young people observed in this study. However, it is worth also noting that a sense of cultural cynicism has emerged since Hall and Jefferson's publication, which serves to both complicate and reinforce such generational differences. This is interesting and could be investigated from a cultural studies perspective, but the data collected in this study did not elucidate much beyond identifying with or against the mainstream – the core idea underpinning Programme Theory 4. The meanings underpinning subcultural expression are complex, but openly associating with a musical style makes a public statement about identity – or how one wishes to be perceived.

5.4.1 Candidate programme theory

This CMOC developed from a single candidate programme theory:

- Musical style is often associated with a subculture, which has implications for identity and/or a sense of belonging. This can have wellbeing outcomes particularly for people who have experienced social exclusion as a result of their challenging circumstances.

This programme theory was not alluded to in any programme documents, although all study sites take the positive line of creating a democratic environment and celebrating diversity, so the context for either mainstream or subcultural musical pursuits exists. Most musical choices in all three settings were participant-led, allowing service users to pursue their own musical agendas (with more or less facilitation, depending on their ability). Musical determination is therefore a critical factor in this programme theory.

5.4.2 Chilli Studios data

Chilli Studios encourages an 'outsider artist' ethos, by providing a *context* and resources for members to explore and express qualities which set them apart from wider (non-service user)

society. Members can embrace difference within the safety of an accepting environment. The studio has what might be described as a 'garage' vibe (Figure 11). The décor, vintage equipment and ramshackle nature of the room convey a DIY aesthetic. This is not lost on the Studio Manager, who allows musicians a great deal of control over how the room is arranged. Support is provided by a professional music facilitator but most members bring their own established style, which in many cases is heavily informed by punk and/or other alternative musical genres.

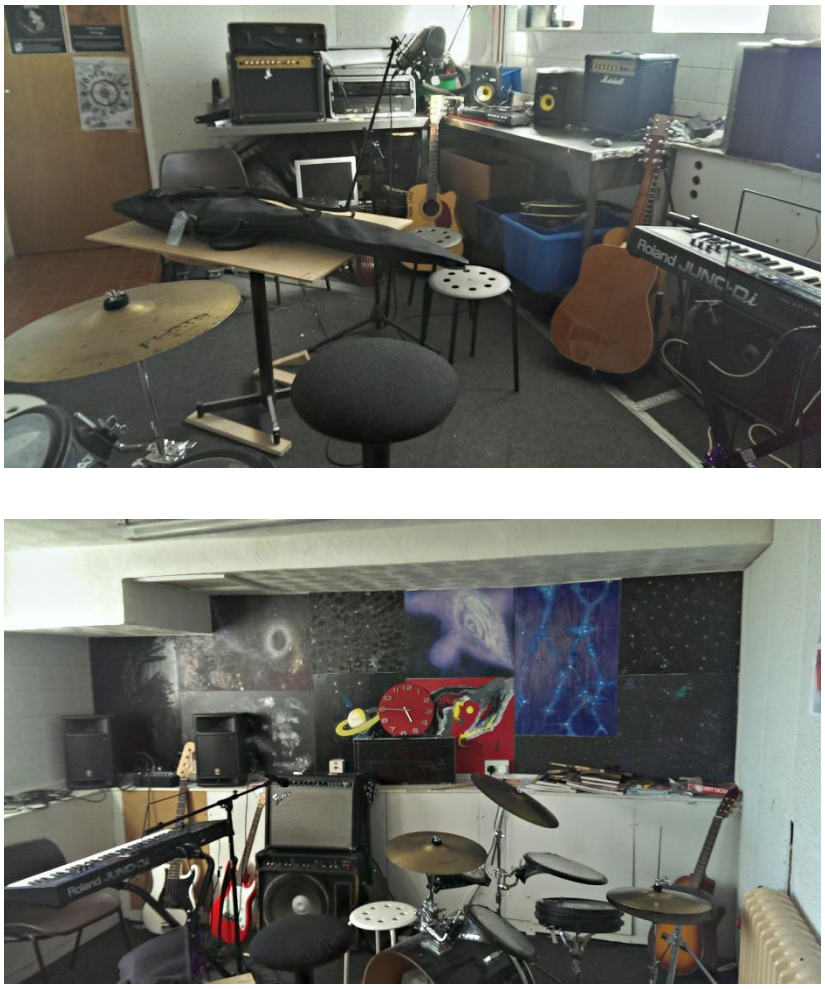

Figure 11. Two views of the Chilli Studios music room, which was more chaotic/creative than that of Ferndene or Community Music Spark. Correspondingly, music sessions were also more ad hoc.

Studio members used the stylistic freedom enabled by the music session to express their politics, character and ethos. These personal values flourish within the contextual resource of a facilitated, judgement-free music-making scenario. The reasoning underpinning this drive towards expression is connected with the idea of feeling voiceless, marginalised and even ostracised by mainstream society. In a follow-up to our interview, one participant summed up their thoughts via email:

> *There are two aspects to individuation and, I'd say, most people only achieve the first step which is individuation from the immediate family unit, but tend to, generally speaking, be less successful in* ***individuating from the wider 'symbolic family' of parental symbols such as prime-ministers, bosses, teachers, mental health staff, etcetera...*** *In other words, the somewhat infantile nature of a wage-slave consumerist culture continues to triumph over the potentially more mature evolution towards this loose thing we call anarchism. To give a musically based example, people might end up as punks* (Matt, studio member, via email, March 13th 2015).

Punk (which peaked during many studio members' youth) was a dominant influence in our jam sessions, allowing participants to express an anti-authoritarian message. One session (12th May 2016) involved ripping through the '1960s Songbook' in short, sharp volleys. The aggressive playing also has a cathartic element (connecting with programme theory 2, energy management), but the resource here is the freedom to express oneself in an appropriate musical style.

The preference for mainstream or anti-mainstream musical pursuits is influenced by age and experience, which was predicted and observed. However, the underlying principle is of music providing a way to indicate allegiance with, or opposition to, the mainstream, which has implications for the sense of identity. There was more evidence for this at Chilli Studios, where an anti-mainstream sentiment dominated and was openly expressed.

At Chilli Studios, a context of acceptance of experimentation dominated and facilitators adapted to individual musical needs. Ferndene and CMS have slightly less freedom to pursue any musical style, but their emphasis is more heavily governed by principles of inclusivity, rather than individuality. The potential for stronger personalities to influence the musical direction was therefore greater at Chilli Studios, resulting in increased 'individual' musical pursuits, rather than more the democratic (and perhaps more stylistically dilute) projects at Ferndene and CMS (discussion point 4.3, p.179).

Many studio members expressed similar anti-authoritarian sentiments. MC has schizophrenia and writes and performs rap lyrics about his experiences with the police, social workers or members of the public. He has strong opinions on the way mental health issues are viewed and stigmatised by the public and by the various services with which he engages. One of Marty's songs, 'Normal', addresses the ease with which he perceives 'non-diagnosed' people live their lives, compared to the challenges he faces. The lyrical delivery is angry and the words quite dense, but the chorus is:

> *We are crazy, yeah we're crazy, but that doesn't mean we're lazy.*
> *You are normal, yeah you're normal, with your second home in Cornwall.*
>
> (Marty, studio member)

Matt is recording a concept album about his current life experiences, from mundane daily interactions, to the long overnight walks he takes across the North Yorkshire moors, to an ongoing feud with neighbours over his garden. The album is made up of short, angular pop/punk numbers which get increasingly longer and begin to overlap until a surreal soundscape is achieved. It references Aleister Crowley, H.P. Lovecraft, R. Crumb and other luminaries of outsider art. These cultural and literary icons are important to Matt and their significance is well understood by other studio members (many of whom contributed to the album). They are all characterised by their calls for humans to embrace difference. Matt's intentions for the album are to express "the world as I see it… to friends and family… It's going to be weird". Matt wants to position himself apart from the mainstream and is doing this through his album.

5.4.3 Ferndene data

The opposite perspective, alignment with the majority, was apparent at Ferndene. Some participants referred to life outside the unit as 'normal' and there was a sense that 'normal' was desirable. This became most apparent when older or more offbeat songs were suggested to the group and were quickly dismissed as being 'crap', 'dad-music', or worst of all, 'weird'. The context of being an inpatient positions Ferndene participants as 'ill', 'unwell' or 'other'. With this in mind, the drive towards 'normal' was reflected in the mainstream musical choices, such as recent chart hits and film soundtrack music. It is also likely that young people are less familiar with alternative genres. That they should be interested in popular music is no surprise, since they are its target demographic, but having also been separated from their school friends and social groups, it is understandable that the drive to 'fit in' is stronger than the drive to 'be different' and their musical choices reflected this.

One session during summer 2015 involved various musical activities including DJing. A variety of tracks were available (via Spotify – an online music streaming platform) and the choices made by the young people were invariably recent chart hits (e.g. Mark Ronson's *Uptown Funk*), which were received positively by the rest of the group and – a minor observation – with a jaundiced ear by the staff members, suggesting that they had heard a lot of this before.

Again, the environment in which the music activity took place was a factor. In contrast to Chilli Studios, the Ferndene (and CMS) sessions occurred in the more neutral environments of Sage Gateshead or the Ferndene music room. Some Ferndene participants gravitated towards specific musical styles, but the programme focussed on accessibility and inclusivity, so generic pop songs

or music from popular films ('Frozen') dominated. Younger participants seemed less comfortable with 'difference' and had less knowledge of musical subcultures. When the choice arose, adhering to mainstream songs or styles appealed more to this group than to adult groups. This became apparent during the 'band' sessions, in which cover versions of popular songs (e.g. 'Happy' by Pharrell Williams) were nominated and voted for by the young people. This observation corresponded with the idea that younger people tend to gravitate to 'safer' mainstream cultural markers, In her paper on young people and popular music culture, Dearn (2013, p. 57) notes: "Music is described as a mechanism that allows you access to a group as well as allowing you to show some individual preferences within the safety of a larger genre". Where young people have experienced alienation, the draw to a larger (mainstream) group may therefore be stronger.

5.4.4 Focus group data

A favourite musical style in Community Music Spark is reggae, which is historically infused with emancipatory significance. [34] The group members are strongly aware of this political aspect and use it deliberately to underline their own agenda (reasoning). I asked more about the affinity for reggae during a conversation about Bob Marley and the political reasoning was quite overt.

> I: *What was it about the music – or Bob Marley – that you particularly identify with?*
>
> M: *Politics for me.*
>
> I: *Politics. Okay.*
>
> A: *I think he's my hero, music hero.*
>
> G: *'Cos he sings this song called 'Get up, Stand up' for your rights and er, it means like everybody in the world, like everybody's got a right to like speak and a right to do stuff. People can't stop you from doing stuff; you've just got to go ahead and do it.*

The wellbeing outcome in this case is also closely linked to the programme theory on representation (CMS3, p.130). It is likely that reggae was chosen *because* of its associations with social criticism and its attempts to raise socio-political awareness. Compared to punk, which is musically, lyrically and culturally positioned against the mainstream whatever that may be (i.e. is less critically argued; more corporeally screamed), reggae is associated with protest against a specifically imperialist history and is therefore more politically located. The distinctions are more

[34] Despite the style being characterised by jaunty, upbeat rhythms and 'tropical' musical themes, reggae musicians tend to be largely self-aware of the imperialist connotations of these 'exotic' qualities, often using them in an ironic or darkly satirical way to address more deep-rooted social and historical issues.

nuanced than can be described here, but the point remains: the CMS group uses reggae as a medium to convey a positive political message, rather than using punk, to convey more generally anti-mainstream message.

5.4.5 What worked, for whom, under which circumstances?

For adults, identity seemed connected with representation (see CMOC 3, p.130) and projecting a coherent 'self' to the outside world, irrespective of trends. For young people, the opposite was true; it was more a case of 'fitting in' with an outside world that had deemed them to be 'ill' (by admitting them to a hospital). Consequently, two distinct perspectives emerged:

A) Adults use subcultural identity to position themselves in relation – often in opposition – to wider society, particularly when they feel subjugated by that society.
B) Younger people (with less developed identities) identify with a (sub)culture to feel part of a more accepted group. Mainstream culture can exert a powerful influence over young identities and the 'inpatient' status of participants may cause an 'othering' effect, thereby increasing the desire to 'fit in' with more conventional cultural trends.

In spite of the binary distinction of positioning oneself either in alignment or in opposition to a dominant culture, the mechanism in both cases is about gravitating towards a place of belonging, comfort or perceived security, using music as a signifier. In their critical essay on belonging and detachment, Negus and Velázquez claim that "Central to numerous writings have been an enduring series of assumptions about significant correspondences between the characteristics of individuals, groups or places, and musical styles" (2002, p. 133). The resource here is the opportunity to express oneself through an art form with clearly defined stylistic/genre choices (made available through musical instruments and astute facilitation). The reasoning is about using musical style to project an identity to others, thereby 'positioning' oneself in the world.

The critical factor here is expressing membership of a (sub)culture through musical style, to position oneself either in opposition to, or in league with, cultural norms. This has two outcomes relating to the wellbeing concept of feeling safe or secure.

A) Expressing either allegiance or difference within a safe environment (the room).
B) The security of being part of a group.

5.4.6 Refined programme theory

Participatory musical activity tends to gravitate towards certain musical styles or genres. These have their own connotations, but can also be broadly organised into mainstream or sub-culture. The evidence here indicates that older participants sought to use and be associated with non-

mainstream styles (such as punk or reggae), which carry either political or 'othering' connotations. Younger people preferred chart music or music from popular films and it is thought that this perhaps represents a tendency towards the security of a large (or dominant) group.

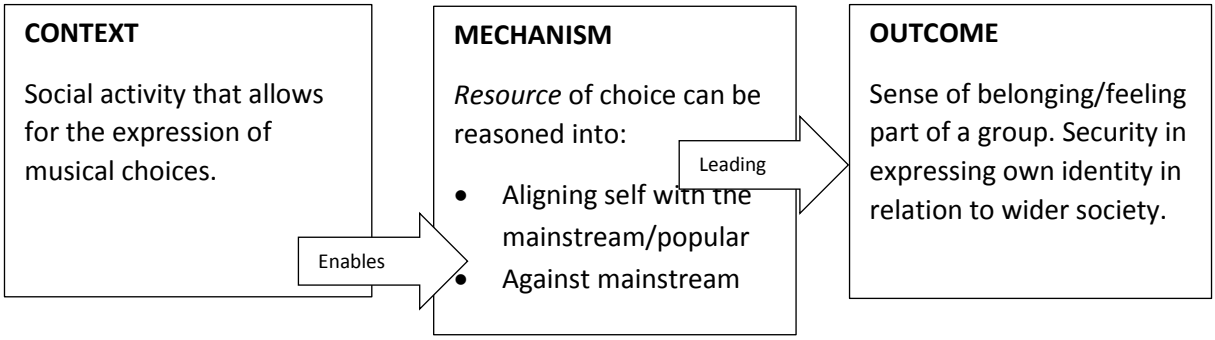

Figure 12 CMOC diagram for subculture

PART 3: Subjective/emotional wellbeing

Subjective wellbeing, governed by a combination of cognitive and emotional influences, often refers to positive emotions such as 'happiness'. Most people recognise the term 'happiness' as a state of wellbeing, but the feeling itself can incorporate a range of emotional states and be defined in numerous emotional terms. This section uses such subjective/emotional terms to describe wellbeing outcomes that are particular to individuals. For example, the resilience programme theory has different outcomes according to each participant's personal circumstances, but these may lead to a sense of happiness, relief, achievement, etc. The emotional component in programme theory 6 describes a more intangible sense of positive affect associated with memories stimulated through music participation. For example, what one participant describes as 'happy', another might describe as 'nostalgia', which is shaded quite differently. The coverall term 'subjective/emotional' wellbeing is therefore used here to refer to programme theories that have ambiguous, subjective or relative wellbeing outcomes.

5.5 Programme theory 5: Resilience

Participation in music activity affects how subsequent experiences are perceived. These experiences differ between individuals, so consistent outcomes are difficult to identify. Several programme theories (e.g. energy change) indicated wellbeing outcomes that might become apparent or yield benefits only after the music activity had ended. This was reflected in some participant comments around: increased confidence using public transport; inspiring further creative activity (painting); or feeling more comfortable partaking in social activity following the music session. Some were less specific and more 'mood' related, such as 'seeing the world differently', but most related to everyday activities that might otherwise be challenging to participants. Data that refers to these types of post-activity outcome has been grouped under the term 'resilience', which is defined here as: an attitudinal change [or change in reasoning caused by musical participation] that serves to mitigate subsequent challenges. Participants never used the word 'resilience', although the term was routinely used in programme documents:

> *To improve the young people's self-efficacy (i.e. self-esteem, skills, engagement, motivation, and confidence) and resilience to challenging circumstances* (Youth Music funding application).
>
> *To provide a sustainable service that engages people in creative activity, which promotes social inclusion and interaction, develops skills and ability which builds resilience, enables potential and improves wellbeing* (Chilli Studios Mission Statement).

5.5.1 Abstraction

What makes this PT different from the others is its level of abstraction. Where the other PTs might focus more closely on (e.g.) alleviation of tension through energy release; or the potential for self-representation through a tangible musical product (each of which can be explored in greater depth), this PT is about 'resilience', which is regarded here as a 'class' of attitudes or behaviours that mitigate challenges. These challenges and the nature of the resilience will differ between individuals and, because they happen after the music activity, cannot be entirely known in this study. To this end, resilience is classed here as a Middle Range Theory (MRT, see p.52), which has generalisability across a 'class' of similar situations. The idea of generalisability is sometimes eschewed by theory-driven evaluation, such as ToC (Galloway, 2009), but is accepted in Pawson and Tilley's original treatise on Realist Evaluation as follows:

> Rather than anticipating the cumulation of program wisdom in the form of discovering representative programs which work universally, the realist evaluator seeks to generalise about programs through a process of CMO configuration abstraction, the creation of middle

> range theories which provide analytic frameworks to interpret similarities and differences between families of programs (1997, p. 217).

In this study, the idea of 'configuration abstraction' is conceptualised as 'panning out' to accommodate a wider viewpoint still based around a core theory, in this case resilience.

> In terms of generalisation, [a realist] researcher through a process of CMO configuration abstraction creates 'middle range' theories'. These theories provide analytical frameworks for interpreting differences and similarities between classes of IS-initiatives (Carlsson, 2005, p. 99).

The keyword here is 'classes', which in this context are comparable 'families of services' (see p.52 and p.65). It is this understanding – that PT5 takes a broader, less closely focussed view – that the present section is based upon. PT5 works at a different level of abstraction and is more 'generalised' towards being a MRT than the other, more specific PTs.

5.5.2 Chains of implementation

This programme theory is closely related to what RE calls: a 'chain of implementation' (when the outcome of one CMOC becomes part of the context for another CMOC). It would be extraneous to draw all of these chains out for each individual, but the process – in which programme theories can have an effect after the music activity 'trigger' has ended – is important here. This idea of multiple contributory PTs/outcomes is illustrated in Figure 13. Pawson notes that "implementation chains are often long, thickly populated and reliant on the actions of many different stakeholders" (2006, p. 95). The idea of multiple interventions and stakeholders, especially in relation to the behavioural/attitudinal change described here, is echoed by Leeman *et al*.: "Behavioural change interventions… typically require multiple interactions between intervener(s) and participant(s) over an extended period of time. This interaction can be viewed as an 'implementation chain'" (Leeman *et al.*, 2010). Here, these chains are situated partly outside the music activity (and therefore beyond this study's field of vision); they are complex, they depend on individuals' own circumstances, and their outcomes are described retrospectively. This section therefore does not focus on the 'thickly populated' individual chains, but instead seeks to illustrate the broader, more abstracted point that positive outcomes from music activities can have subsequent beneficial effects on individuals' post-music activity contexts.

5.5.3 Candidate programme theory

Due to the disparate set of potential outcomes, it took some time before the insight occurred that these could be categorised under a single programme theory relating to 'resilience', as reflected in the following cPT:

- Positive outcomes triggered during the music activity become a resource that increases resilience in subsequent contexts. I.e. music's beneficial effects can persist after the activity has ended to improve outcomes for individuals facing challenges in their everyday life.

Figure 13 illustrates this by showing how the outcomes from multiple programme theories can be reasoned into a positive resilience outcome after the music activity has ended.

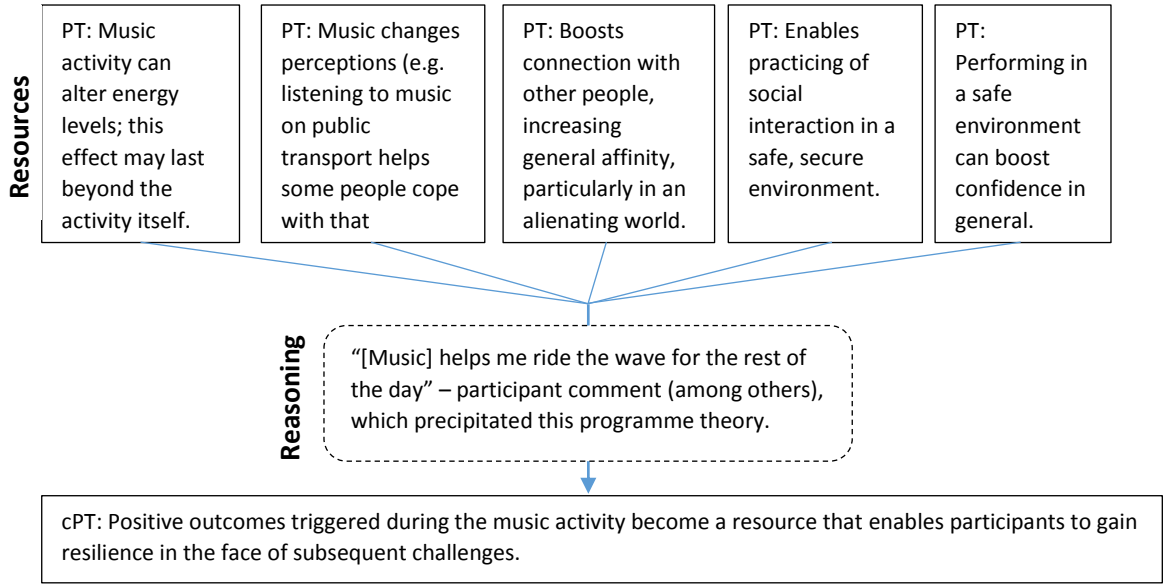

Figure 13. Several candidate programme theories contributed to this programme theory, which groups a number of positive outcomes under the catchall term 'resilience'. Critically, music activity alters perceptions, which subsequently influence individuals' personal circumstances.

5.5.4 Chilli Studios data

As one Chilli Studios member noted in relation to energy, they are able to "ride the wave" generated by this positive outcome (in his case, an energy boost) for some time afterwards. The *reasoning* here is contingent on participants first noticing a positive outcome of the music activity, then using this as a resource to trigger further mechanisms which lead to positive wellbeing outcomes in different non-musical contexts. These contexts are entirely shaped by the participant's circumstances and challenges. The ability to recognise an outcome and apply its benefits in different circumstances might be considered to be the *personal resource* of self-knowledge (discussion point 5.2, p.183). This has implications for intentionality. Indeed, using positive outcomes in different contexts needn't be conscious; it may be intuitive. For example, one Chilli Studios interviewee said that they were often inspired to go and paint after a music session, although they had never made the connection between the painting and the music until that point.

> *I'll usually go off on my own afterwards… Do some painting, you know. I like to be on me own after being in the music room for a while. But actually, the creativity's already flowing by that point [painting, following a music session]* (Albert, studio member).

The familiar environment and improvisational context of the music session on Tuesdays allows Jeff to raise his energy levels without becoming manic (see programme theory 2). Jeff saw this as a positive wellbeing outcome in its own right, but he also noted that later in the day, this feeling gives him the inspiration and energy to do painting, which he enjoys. He described the outcome as "having momentum to do something".

Matt is extremely shy. The communication and connection inherent in the jam session caused him to go from being quiet and withdrawn at the beginning of each jam session, to talkative and even effusive by the end. Ordinarily, Matt doesn't socialise, preferring instead to go to Waterstone's (book shop) to read. After music sessions, the group sometimes invited him to join them in the local pub, even though this is a non-musical environment. He enjoys this, but cannot be persuaded to socialise in different circumstances.

Marty completed a degree in disability studies at university. Marty's songs relate to his own mental health experiences and those of his mother. His condition is kept largely under control by medication, but not always. This, combined with other personal circumstances make it difficult for Marty to retain a steady job. He joined Chilli Studios and gravitated towards the music room with a view to recording and gradually became a regular studio user. He now facilitates one of the music sessions and recently established similar sessions at the Recovery College (another local resource for mental health service users). He sees his music skills, combined with 'insider knowledge' (from his degree) as a way out of his challenging circumstances and a potential career path. This is more of a long term outcome and is therefore likely to be influenced by numerous factors, but it illustrates that resilience can happen over both short and long timespans. The factors which brought Marty to Chilli Studios in the first place – finding a socially acceptable outlet for his music and having a purpose in life – have enabled him to transition from a musician with mental health problems to a community music facilitator who specialises in helping others with mental health problems. The improvement this has made to his career prospects is significant:

> *I went around to every mental health meeting I could show my face at to see what was happening, try and find somewhere I could fit in… When I heard about this place, I just got involved, came along. Then I stood in for [other music facilitator] when he was away sick and then kind of reached around to try and work out if I could hold my own [music] group*

> *because it actually sits more at home with me than doing the advocacy thing, so I kind of feel I landed on my feet there. I'd say it's a good job and it's probably a good start for loads of other* things (Marty, studio member).

5.5.5 Ferndene data

Ferndene participants were younger and were inpatients, so the challenges of 'the outside world' were less immediate in their relatively prescribed environment. Gaining follow-up access was also more difficult, due to safeguarding issues. The broad term 'resilience' was one of the primary objectives of the project:

> To improve the young people's self-efficacy (i.e. self-esteem, skills, engagement, motivation, and confidence) and **resilience to challenging circumstances** by developing their musical interests, skills, and giving them opportunities to receive positive feedback and succeed (FYMP funding application, 2014 (emphasis mine)).

However, this was vaguely defined, and does not necessarily correspond with this programme theory, which frames resilience as using a music-related wellbeing outcome to trigger a subsequent wellbeing outcome beyond the music context. At Ferndene, resilience might be interpreted as increased engagement and increased confidence; trusting the process of music making as a safe environment in which to be creative or expressive. This was witnessed, but was never explicitly linked with subsequent wellbeing outcomes by any interviewees. Quantitative FYMP data (using an amended Warwick Edinburgh Mental Wellbeing Scale) shows that most young people progressed generally in a range of measures, including resilience, but 'subsequent wellbeing outcomes' were not evidenced through either my observations or through interview data.

5.5.6 Focus group data

The course is designed to equip young adults who have learning disabilities with music leadership skills and broader employability skills. In terms of gaining independence (from a care environment), this is certainly a resilience outcome in which consequences of the music sessions extend into wider life. On a more individual level, group members note that the music session on a Friday (they spend all day at Sage) "sets them up" for the weekend, giving them a positive feeling. One member of the focus group, inspired in part by the music programme, runs a club night on Fridays. He said that to do this before joining Community Music Spark would have been a challenge.

Like wellbeing, 'resilience' differs between individuals and can be defined in relation to the fluctuating challenges of everyday life. 'Resilience' is perhaps best described through specific

examples such as reduced anxiety, improved self-care or the ability to socialise. This data mainly emerged during incidental conversations or the more tangential parts of interviews. As these pieces of data accrued, the programme theory began to emerge. Specific outcomes depend on the individual's unique set of needs, challenges and circumstances, but abstracting from these specific outcomes, the idea of resilience might be considered a Middle Range Theory. Merton describes 'theories of the middle range' as: "theories intermediate to the minor working hypotheses evolved in abundance during the day-by-day routine of research, and the all-inclusive speculations comprising a master conceptual scheme" (Merton, 1968, p. 5). In this 'programme theory', the concept of resilience is intermediate to the specific examples given by participants, and the overarching theory that music participation increases wellbeing.

5.5.7 What worked, for whom, under which circumstances?

Some participants who derive positive wellbeing outcomes from music participation found it easier to face subsequent challenges which they might otherwise have struggled with. Outcomes (of both the music and subsequent activities) vary between individuals, but the general idea of resilience is more universal and of relevance to wellbeing.[35] Resilience is a key asset in the positive psychology movement (Csikszentmihalyi & Seligman, 2000) and the term also features prominently in both programme and broader mental health literature.[36] The data here suggests various examples of resilience, both long- and short-term, although many individuals do not refer to it as such and few chose the 'resilience' visual elicitation card.

It is difficult to identify exactly *what* worked, other than simply being involved in the music activity. Addressing the question in this way casts doubt on how accurately this can be deemed a 'programme theory'. The idea around resilience developed from hearing participants discuss their experiences after the music activity had ended and a common thread emerged. However, one of the advantages of RE is that questions of 'what worked, for whom… etc.' force the researcher to seek increasingly specific answers, thereby refining the theories. Resilience, like wellbeing, is a very broadly defined idea perhaps requiring more attention in the first instance. There is no doubt that examples of increased resilience emerged in the data, but expressing this as a CMOC is difficult and indicates a plausible, but very unrefined programme theory. This could justify a research project in its own right, but the process of reaching this point was useful and

[35] Further research with a resilience focus might look more closely at the broader lives of participants – if this were to happen, a different approach would be required to observe participants who are under increased safeguarding.

[36] Asset-based approaches (as opposed to deficit-focussed approaches) are popular in wellbeing research. It is worth noting that the concept of an 'asset' (e.g. resilience) in such approaches might share some similarities with the concept of a 'resource', as used in realist evaluation.

demonstrated that RE has an almost 'self-righting' ability through forcing the researcher to ask the right questions, thereby enabling better evaluation overall. Figure 14 proposes an indicative configuration.

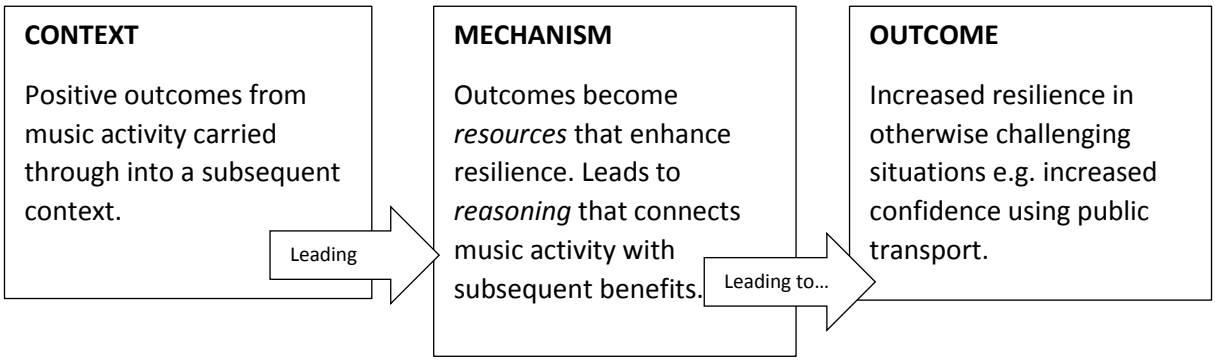

Figure 14 CMOC diagram for resilience

5.6 Programme theory 6: Memory

Memories, associations and evocation in relation to music were significant talking points for participants at both study sites. Although this could be predicted to a certain extent,[37] it was not articulated in any programme documents. My own thoughts, leading to the development of this programme theory, are that the evocation of feelings or the triggering of specific memories is linked with 'escapism' (discussion point 6.3, p.186), in the sense that changing the mental world, albeit temporarily, can create a respite or a sense of relief from challenging circumstances. Other forms of escapism exist, e.g. through drug use, but in the case of music, memory is the critical factor.

5.6.1 Candidate programme theory

Music and memory are linked in various ways. The connections were sketched out (initially relating to creation/stimulation of memories; recall of specific memories/evocation of feelings; and sensory/cognitive memory). However, these are broad brush-strokes that also overlap with other programme theories (e.g. 'recording music to create a tangible object') and related phenomena (e.g. 'listening to music to curate one's environment'). Therefore, after some initial observations, during which I got to know the participants and the nature of their activities, these preliminary ideas were consolidated into the following candidate programme theory.

- Participants will seek to pursue music activities which evoke memories and/or emotions that are positive to them, thereby increasing their wellbeing 'in the moment' and potentially enabling a form of 'mental escapism'.

Each participant brings their own history and emotional associations to the music group, so memories triggered by music vary widely between individuals. The more musically accommodating the programme is, the more opportunities participants have to access and/or project their own associations (reasoning) on to the content (Figure 15).

[37] This is best evidenced through the work of organisations such as Music and Memory, who use music to help elderly people with Alzheimer's or dementia to reconnect with their pasts - http://musicandmemory.org/.

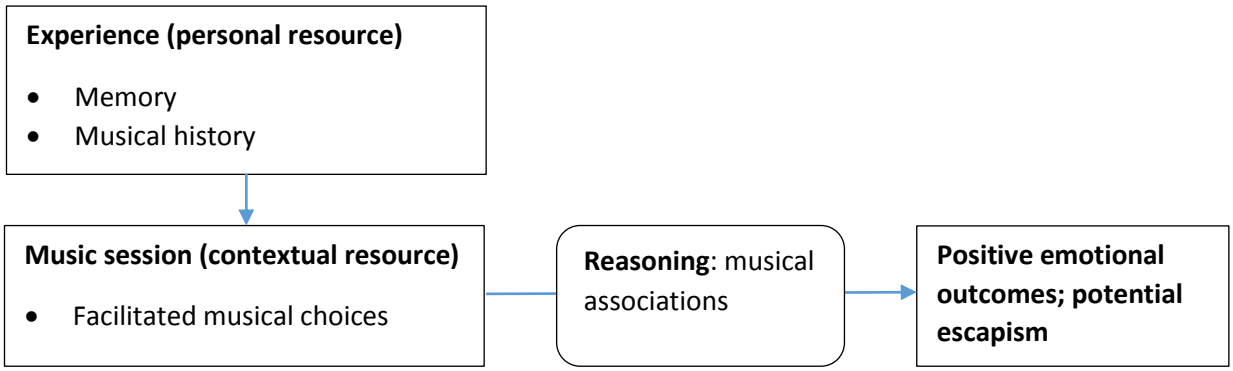

Figure 15. Participant resources (PR) and Contextual resources (CR) are combined in the music session. Participants use reasoning to connect the musical product with their own positive emotional associations.

5.6.2 Ferndene data

Both study sites enabled facilitated choices, allowing participants to pursue or project memories through music to evoke specific feelings. The musical choices enabled this *reasoning* to take place. Choice was more restricted at Ferndene, to accommodate the wider group and ensure inclusiveness, but the young people were nevertheless able to pursue music which had positive associations for them. Song writing activities in particular involved choices of themes, lyrical content, and even musical references to favourite cartoon programmes.

Musical choices were defined by the activity, for example: choice of instrument; which songs to cover; and the various options inherent within the song writing process. These were orchestrated by instigating conversations around music, which led to musical decisions based on the associations the young people made. For example, one song writing session started with the group looking at a picture of a tropical island. This led to conversations about visiting the beach, holidays and summer hit singles. The lyric-writing session that followed was thematically connected to tropical islands, but also brought in lots of personal memories about summer and holidays (beachcombing, making sand angels and eating Kentucky Fried Chicken). Critically, all group members (including those usually less engaged) contributed eagerly to this process, seemingly enthused and excited by the personal memories being triggered. This was not only a successful session (according to the facilitators), but it also underpinned this programme theory.

One of the teaching blocks involved xylophones. Early sessions focussed on improvising or learning basic melodies, but the sessions were uninspiring and lacked direction. By chance, I happened to know the theme tune to *Rugrats*, a children's TV programme, which unexpectedly captured the young people's attention, leading to a group conversation about *Rugrats* (everybody liked it). After some discussion, it was decided that we should learn that song. The results were mixed due to the range of abilities in the room, but the choice seemed to hold attention better

than previous ideas. During the session, when asked why, the answers included: that they enjoy the TV programme, it's funny, or it reminds them of watching television (a favourite pastime). The theme tune was surprisingly easy to learn, which helped.

During a drumming exercise at Ferndene, several young people requested and invoked a particular African drumming pattern, which they were familiar with from a previous music programme and had enjoyed. The activity was requested and pursued perhaps due to familiarity with that drum pattern or more likely, because a positive memory had been created by the activity previously and this had become accessible through the current activity. In the event, the activity engaged the young people and seemed to be enjoyed (evidenced by smiling, enthusiasm and a focus on learning the pattern successfully).

5.6.3 Chilli Studios data

Both the Ferndene and Chilli Studios groups were facilitated by professional musicians. At Chilli Studios, activities were less prescribed and the musical choices were more *ad hoc*, depending on who was present in the room. In comparison to Ferndene, the facilitators' role was more responsive than prescriptive; service users informed the overall direction of the session and facilitators would assist in bringing this to fruition through encouragement and musical dexterity. The memories, or musical triggers, were brought by the participants, but were often augmented and developed through collaboration with the facilitator – partly through conversations and partly through musical dexterity. For example, jam sessions would often begin with a conversation around music, triggering musical memories and descriptions of various 'scenes' or a specific anecdote, such as attending a gig. This would often lead into someone playing – or attempting to play – a relevant song, which would usually signal the rest of the group to join in.

One example of this: a new studio member attended the group. He was asked what type of music he liked and said 'techno' (this is not easy to achieve with guitars). However, we had the *resource* of YouTube, so played a few techno tracks that most people were familiar with (actually, it was early 1990s Acid House, but that seemed to be a touchstone for everyone in the room). In itself, this was an interesting nostalgic exercise. Eventually, the drummer picked up the rhythm and I followed shortly after on bass guitar (establishing the chord sequence). A guitarist joined in and we continued to play long after the original song had finished.

A slightly different framing of this programme theory is presented in the following example: Jenny had a bad experience when she was younger, which she was able to capture though an improvised song that we recorded. Later, she reported that the negative memory of that incident

felt more distant, less pervasive and had receded. I speculated a cathartic effect – but she countered that it wasn't "something which needed to be released"; rather, now the memory was preserved in song form, it was somehow safer or less potent. The memory still existed, but was confined to a recording and for the first time, she had 'control' over that memory. This connects to CMOC 3 (having a tangible product), but instead of concerning representation, it is about controlling memories (including uncomfortable ones) to influence wellbeing. This angle – a negative memory being neutralised, rather than a positive memory being evoked – could be interpreted as either another side of the same coin, or as a different CMOC that is also related to memory. To me, it indicates a different perspective on the power of music and memory and I have therefore included it here as supporting data.

5.6.4 Focus group data

In addition to the focus group, I attended three Community Music Spark sessions. During these, three separate individuals told me that they had chosen to perform specific songs that remind them of a friend or relative who had passed away, evoking positive memories of that person. Reflecting on this, one of the focus group members commented:

> A: *Last year's Music Spark show is the tenth anniversary. We had a couple of acts who did songs in memory of someone that had died and I'm one of the two acts that did a Bob Marley song, Natural Mystic, on the keyboard and then my nana, who died…*
>
> G: *And we also had a member… I don't know… Can you remember [J]? He's actually left the group now and he's joined orchestra.*
>
> M: *So we might dedicate a song to him.*

Dedicating a song performance to a former member of the group demonstrated (to my mind) a particular awareness of the complex social functions music can have:

> I: *Okay, so has he left quite a… Like when you do music, does it remind you of him quite a lot?*
>
> M: *It does. Basically, when [J] used to be in the group, he always used to suggest different songs; he always used to say "can I lead this, can I lead that…?"*
>
> [Continues to reminisce].
>
> M: *When I did 'Stand by Me' in 2012, erm, that was my first solo singing. Erm, my grandma was dying at the time and I sadly lost her a month later. I think she was suffering from Alzheimer's and everything like that…*
>
> *[Facilitator]: So when you sing that now, is that what you…?*

M: *Yeah, and I also love the film of 'Stand by Me' by the book of Stephen King and…*

The conversation went off-track at this point, but this and other examples indicate the nature of memory and associations; they can triggered in a cascade, but are significant enough to merit discussion. This principle was evident in both conversations and in music sessions.

5.6.5 What worked, for whom, under which circumstances?

The link between music and specific memories is unsurprising. Furthermore, the links between melodies, sound and genre, and emotions are widely researched. This programme theory suggests that participants' musical choices are governed by their own memories or emotional associations, and the consequent musical directions have a positive effect on their mood.

Despite many participants referring to musical associations during interviews (either apropos of nothing or responding to the card 'music reminds me of things'), it is difficult to locate that intention within programme documents. It may be that personal musical associations are too specific to be included in a group activity agenda, reflecting the individualised nature of much music therapy practice (discussion point 6.2, p.185), or it may be that other wellbeing outcomes are more explicit. Either way, the data suggests that when musical choices are available, these choices were influenced by personal associations, resulting in a positive emotional outcome.

Facilitator sensitivity and responsiveness to participants' choices is a resource built into both study sites. Participants brought their own memories and emotional narratives (personal resources) and connected these with the musical resources (instruments and opportunities for expression) to curate their own emotional experience. In other words, the reasoning process involved participants (consciously or unconsciously – discussion point 6.1, p.185) drawing on their own memories, musical associations and emotional terrain to respond to musical choices. I.e. aesthetic decisions were governed by emotional reasoning. This might apply to any artistic pursuit, but the facilitators were able to recognise, reflect and interact with those decisions, amplifying their effect in real time. So where musical choices might be influenced by memories to partially satisfy an emotional component, the facilitator can draw this out, integrating the emotional need and the musical output. In music, the dynamic relationship between participants and facilitators is critical and this is one of the core principles of music therapy (discussion point 6.2, p.185).

Listening to music can evoke specific memories or feelings, some of which are linked with positive emotions such as happiness. Musical choices and guidance can enhance this process and active music participation (as opposed to 'passive' listening) enables a more controllable, more immersive and potentially 'deeper' means to achieve this. Recollections of emotional experiences to influence or shape a creative product can amplify the subjective mood associated with that experience. The facilitator enables or encourages this emotional 'delving' to help bridge the gap between emotion and coherent musical output.

At Ferndene, facilitators 'push' the activity by offering more prescribed choices to accommodate for the young people's limited musical experience. At Chilli studios, participants have more musical and emotional experience, allowing for greater musical freedom, so facilitators 'pull' the activity by being musically responsive. So the musical resources around facilitation differ between study sites and the level of prescription varies according to participants' needs, skills and self-knowledge.

5.6.6 Refined programme theory

Contexts that allow musical choices (similar to the subculture programme theory) enable the pursuit of sounds or songs that are evocative of specific memories – which may be considered a resource for bringing about positive emotions. The evidence from Ferndene suggested that 'summer-themes' (calypso-style music with lyrics about holidaying on a desert island) triggered positive memories around holidays the young people had taken. The theory differs slightly at Chilli Studios, where specific individual songs take on more significance, although the principle of triggering memories and the more complex idea of nostalgia remains the same.[38] The programme theory relied on some discussion of music and memories in the first instance, triggering a mechanism of participants thinking about what types of music were most effective in bringing or maintaining their positive associations. The outcome was a clear enjoyment of the song writing process and of performing the song for a recording.

[38] Arguably, the young people at Ferndene do not experience nostalgia as adults do. Nevertheless, the question on whether nostalgia brings emotional pleasure or pain indicates that the subject is complex. Nostalgia was apparent in some of the Chilli Studios jam sessions and particularly listening sessions (indicated by wistful observations such as "they don't make music like that anymore…" and "those were the days" – mainly in reference to punk music), but this seemed to be a source of fond memories, rather than a sense of loss.

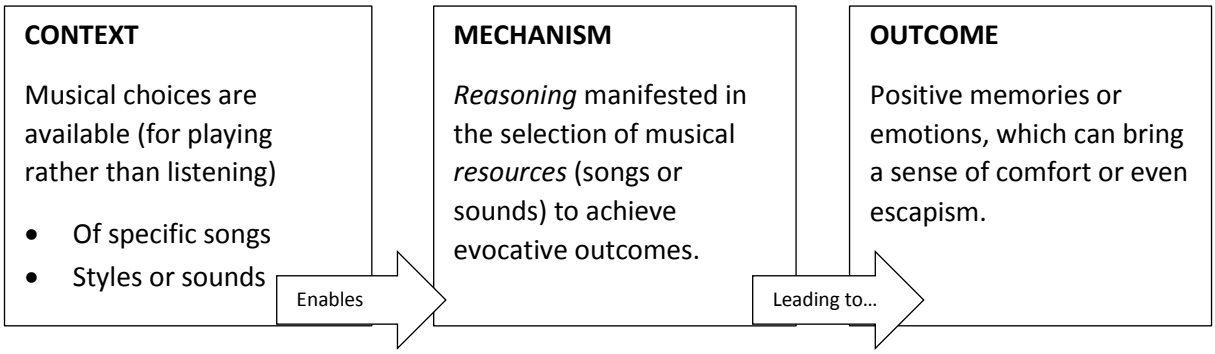

Figure 16 CMOC diagram for memory

5.7 Chapter summary

These six refined programme theories emerged from a far greater number of candidate programme theories (appendix 1, p.231). They represent the most likely CMO configurations active in the study sites being investigated, based on the evidence collected. All have explanatory potential, which could be explored in greater depth, but they are not equal. Most obviously, some were more apparent – or were at least clearer – in certain sites and this seemed most closely related to contextual differences around inpatient status and age (see comparative table, p.82).

At Ferndene for example, the resource of praise, enabled through engaging music activity (most notably song writing) was discussed by participants during interviews and informally. There were indicators that this was linked with ideas around recovery, discharge from hospital and of returning to their outside lives. The idea of discharge was not relevant at Chilli Studios and ideas around recovery also seemed different. As such, praise in this context was more of a self-esteem booster, although this was not a particularly prominent topic for most participants.

It is important to appreciate that there are differences both within and between CMOCs, which could be explored further. However, I have chosen to report the most prominent data across study sites and this happens to align most closely with the above programme theories. The focus group in this case, provided an extra layer of validation in the sense that despite its contextual differences, each developing programme theory was tested to see if it had any significance with another group of people in challenging circumstances. Some interesting insights were offered here and their answers enabled me to think about the programme theories in a different light.

Figure 17 summarises the refined programme theories in relation to the two study sites and the focus group. Grouping the findings into one table goes some way towards establishing more succinctly ‘what worked, for whom, under which circumstances’.

	Ferndene	**Chilli Studios**	**Community Music Spark**
PT1 Group music activity can be engaging and give rise to praise, which becomes a resource to increase wellbeing.	Praise from authority figures was a resource which inspired hope of recovery. The song writing activity seemed the most engaging and yielded the most praise. The PT was **active** in this context.	Praise from peers was more valuable than praise from staff members. This was usually directed at members' creative output, but was not deemed particularly important during interviews. The PT was **not active** in this context.	An ethos of peer support and mutual praise was encouraged, but like Chilli Studios, this was not deemed particularly important to wellbeing outcomes. The PT was **not active** in this context.
PT2 Improvised music activity could change energy levels, enabling participants to achieve a sense of balance or control.	Energy ups and downs were witnessed in response to various music activities, but were not commented on by participants. The PT was **not active** in this context.	Energy control was important to studio members, who consciously used improvised jam sessions to change from a less desirable to a more desirable state. The PT was **active** in this context.	CMS members deemed their music sessions "very energetic", but this did not seem to be an outcome of the activity, rather a property of their existing enjoyment of it. The PT was **not active** in this context.
PT3 Recording the musical output enables a tangible object with which participants can represent themselves and gain identity. *This PT had relevance in all study sites and could be refined further.*	The recordings made at Ferndene were a source of pride for the participants, who shared these with their parents and carers. The PT was **active** in this context.	Recordings were designed for online dissemination; enabling them to express themselves more widely to an unknown audience. The PT was **active** in this context.	Recordings made here served a political agenda, explicitly designed to convey a message to parliament. The group has a larger focus on live music, in which representation is also important. The PT was **active** in this context.

	Ferndene	**Chilli Studios**	**Community Music Spark**
PT4 Subcultural choices enabled by music allow participants to align themselves with or against a mainstream style, satisfying needs relating to identity. *This PT had relevance in all study sites and could be refined further.*	The choices made here (which were limited by the activities) were predominantly mainstream, reflecting the age group, but also the desire to 'fit in', rather than stand out. The PT was **possibly active** in this context.	There was a strong urge to reject mainstream styles, with an emphasis on punk and 'outsider music'. This celebration of difference is thought to arise from a more experienced attitude to mental ill-health. The PT was **active** in this context.	Reggae was dominant here, echoing the political component of the previous programme theory (PT3). The style is historically used to convey emancipatory messages. The PT was **active** in this context.
PT5 Effects of music participation lasted beyond the end of the activity. These effects were interpreted in different ways in subsequent contexts and this was deemed 'resilience'. *This PT needs refinement.*	This was difficult to evidence. None of the young people at FYMP mentioned any improvement in their wellbeing which they directly attributed to a previous music activity.	This was alluded to in numerous ways and tended to involve everyday experiences which participants found challenging (socialising; using public transport), or inspired increased productivity or creativity. The PT was **most active** in this context.	This PT was agreed with by the focus group, who believed that the music activity on a Friday 'energised' them for the weekend's leisure activities. The PT was **active** in this context.
PT6 Listening to and participating in music can trigger memories or evoke emotions. These can lead to positive feelings, increasing wellbeing.	Positive memories were discussed by young people during interviews and during certain music activities such as song writing. The PT was **active** in this context.	Memories were not discussed, but the evocative power of certain songs or certain styles heavily influenced the music that played in jam sessions. The PT was **not active** in this context.	In this context, memories were attached to specific people, such as deceased relatives or friends who had left the group. The PT was **active** in this context.

Figure 17. Table showing the six refined programme theories and their significance in the two study sites and the focus group.

CHAPTER 6: DISCUSSION

This chapter is divided into two parts: Part one deals with some of the pre-existing factors which directly affect the programme theories, as indicated in the findings chapter. As they developed, programme theories enabled a platform from which to examine these influential ideas, some of which are significant and could easily merit research in their own right. But critically to RE, it is the combination and configuration of these factors, leading to the formation of the refined programme theories that is important. Part two will discuss the translational potential of these refined programme theories, locating them within the broader milieu of music-based interventions and critically examining their viability in translational research. This 'two-part' structure is loosely influenced by Pawson, who acknowledges one level of discussion as a "platform for the practical science of evaluation" (2013, p. 3), interpreted here to mean a framework in which individual influences can be examined; and another level of the discussion to regard the philosophical principles of realism in terms of its use in translational research.

The overarching programme theory – that participatory music activities are a translational tool for wellbeing – is broadly accepted and this study contributes a different methodology to that body of literature. There will be a discussion of the extent to which this study's findings (refined programme theories, 'units of explanatory potential', articulated as CMOCs) might translate to different participatory music interventions. Given that this research is informed by a policy framework based around mental health and health humanities, and was carried out in a Department of Public Health and Wellbeing, it is therefore important that its contribution to the field is properly located.

PART 1: Programme theory related discussions

The explanatory framework is based on the extent to which programme theories were observed, for whom and under what circumstances. Qualitative data from dynamic social situations is 'messy', but "mess needs to be articulated" (Cook, 2009). Part one attends to the issues that arose during theory development and influence the final configuration. These details are part of a broader context and can indicate future research directions. CMOCs, though useful for reporting data, are not 'neat and tidy' and do not work in isolation. Acknowledging these 'loose ends' and signposts, and conferring value to the 'mess' created by the theory development process is a realist endeavour. This is not an attempt to capitalise on 'discarded data', but rather to capture the thought processes underlying the theory development and to prevent CMOCs from drifting too far from their generative milieus. Programme theories are defined and cultivated through RE, but also operate within an ecosystem of 'interesting points', the configuration of which contribute to specific refined programme theories. Therefore, rather than pursuing an increasingly narrow band of inquiry, this study examines both programme theories and the issues raised during their creation to further refine the configuration.

Some of these issues are established concepts with an extant literary and/or theoretical base (e.g. catharsis), whilst others are more speculative. They emerged from – rather than prior to – the findings and are therefore discussed here, rather than in the literature review. Some programme theories are highly contingent on specific circumstances, whilst others could be triggered under a range of similar conditions. Therefore each programme theory discussed here concludes with a verdict and implications for its translational potential, to be expanded upon in part two.

6.1 Programme theory 1: Praise and hope - recap

Context: For participants who are easily distracted or have short attention spans (this was particularly applicable at Ferndene), music activities that involve smaller components were found to be more engaging. **Mechanism**: This resulted in increased opportunities to receive positive feedback from 'authority figures', whose praise became a resource. **Outcome**: Praise is responded to positively by participants. At Ferndene, this was connected with the possibility of recovery/release, in turn yielding a sense of hope.

Song writing was seen to be particularly engaging for young people and praise emerged as a key resource in this group activity. The thread connecting engagement, praise, hope and wellbeing was observed predominantly at Ferndene and is therefore the focus here. There may be scope for using music to maximise opportunities for positive feedback in other institutional settings. Here,

the dominant outcome is optimism, which is triggered by receiving praise from an authority figure in an inpatient context. Chilli Studios and CMS place more emphasis on peer support. In these cases, praise was more focussed on the musical product and may therefore be subsumed by a chain of implementation where representation via a musical product is the focus (programme theory 3). Praise undoubtedly had other positive benefits, but the data indicated a praise → hope mechanism, so this became the programme theory. Other wellbeing benefits around praise were not mentioned by participants, so they are not discussed here.

6.1.1 Supporting arguments

Kohut's (1957) concept of 'enjoyable submission to the rules' comes from a psychoanalytic, not a realist paper, but its implications work on a pragmatic level. The fact that music participation enables opportunities to have fun within 'the rules' (sanctioned noisemaking) and receive praise is important. In educational contexts, positive reinforcement is used to motivate and is connected with educational success and the benefits that arise from this (the usual narrative being that a good education leads to a good career and material gain). The positive wellbeing outcome proposed in programme theory 1 is most apparent for FYMP participants, whose inpatient context means that positive reinforcement raises the hope of recovery and discharge. The material outcomes (education; recovery) are context-dependent, but the mechanism – prospect of 'improved futures' – has more global implications.[39]

If praise and/or recognition of achievement are motivating factors that increase wellbeing, it is tempting to make a comparison with sport. However, the process focus and subjective nature of creativity means that the musical product can be invariably successful, making it more suited to more fragile egos. There is no element of competition; it is easier to recognise the artistry in an off-key performance than it is to convincingly praise coming last in a race, so the potential for either individual or group praise is therefore greater. Music and other creative practices therefore contain the seeds for this CMOC; the lack of quantitative measurement of 'success' (and of a competitive element) challenges any logical impediment to the triggering of a praise-related mechanism.

6.1.2 Music's capacity to engage

The concept of fragmented activities being more engaging was important. The case for music's ability to engage is supported by numerous studies on the cognitive neuroscience of 'musicking'

[39] One of the Ferndene participants (F5), who was diagnosed with ASD, was keen to emphasise that there was no 'condition' to recover from, making it quite clear that he was not 'recovery-focussed', but was instead 'escape-focussed'. This is interesting, as it indicates different reasoning within the same mechanism. How this fits into a CMOC structure might therefore require further thought.

(Small, 2011), which support the argument that musical participation draws on a larger number of distinct areas of the brain than other activities (Patterson *et al.*, 2002; Weinberger, 2004; Peretz & Zatorre, 2005; Alluri *et al.*, 2012). It is a short conceptual step to suggest that music has the potential to occupy participants in a greater number of ways than other creative activities. Macdonald (2012a, p. 5) cites the "immersive state of flow" (Csikszentmihalyi, 1996) as an example of how music engagement can distract from (in this context) other disruptive influences or behaviours. Rickson (2006) reported that music therapeutic approaches contributed to a reduction of impulsive and restless behaviours among participants with ADHD (about half of all Ferndene participants had this diagnosis). Jackson (2003) noted that the range of approaches available in music therapy is commensurate with the range of favourable outcomes observed among people with ADHD. This suggests that bespoke programmes can be created and, aligning with this programme theory, that variety within activities can maintain attention for longer. Diaz (2013) also focuses on music's ability to improve attention, mindfulness and 'flow', although his study was centred on music listening only. In a setting where engagement is linked with good behaviour and where maximising opportunities for praise is an explicit programme theory, then activities which have a high capacity to engage can trigger this CMOC.

6.1.3 The giver of praise

Where praise is connected with ideas of leaving the inpatient unit, staff are considered gatekeepers and so approbation from them is important. Ferndene sessions, particularly those held at Sage Gateshead, had a high staff ratio, primarily for safeguarding, although the increased attention it enabled made praise more personalised and more meaningful. Close relationships pre-existed between inpatients and ward staff, although relationships with music facilitators were less close, and there were several instances where praise given by music facilitators was barely acknowledged or even ignored. This included me – although I was considered 'staff' because of my adult status, I was not as close to the participants, so my attempts to give praise were less overtly acknowledged compared with praise from Ferndene ward staff. The relationships between staff and inpatients were therefore critical and the meaning generated by those one-to-one interactions impacted on the reasoning of the young people, triggering the mechanism in which they linked praise to concepts of optimism and hope of recovery. Peer-to-peer praise didn't seem to carry as much weight as praise from staff, although one participant (F8) specifically noted the importance of giving and receiving praise within the group, but his was a lone voice. In this context therefore, the effectiveness of the music intervention on wellbeing is influenced by participants receiving praise from the 'right' person – again indicating a certain understanding of 'the rules of the game' in regard to the path to recovery.

The boundary between staff and peers at Chilli Studios is less distinct; the studio's ethos of championing peer support deliberately blurs this boundary, so the idea of an 'authority figure' is different. Indeed, studio members are perceived as authorities in their own mental health and their own artistic disciplines. Consequently, no evidence was found of a connection between praise from a staff member and the idea of recovery. Both praise and constructive criticism tended to come from peers with a view to improving the musical product. Despite its primary wellbeing agenda, Chilli Studios is also a working art studio and its product is important. The praise concept therefore has some currency in terms of programme theory 3 (p.130), but more as a link in a chain of implementation (p.52 and p.182); however, the mechanism for increasing wellbeing is completely different. Approbation from peers is likely to have some wellbeing value, but this was not mentioned. In terms of the programme theory, the clearest and most distinct evidence came from the Ferndene data.

6.1.4 Voice

The most accessible and familiar instrument to all participants is their own voice; arguably the musical **resource** they have the most control over. Many participants were also members of the choir at Ferndene. Voice holds a unique place among musical instruments, but is also closely linked with behaviour (children who misbehaved in sessions often shouted, mimicked or argued). As a resource, the voice can therefore either be a musical instrument or it can be an instrument of misbehaviour. Channelled in one direction, it can draw praise; channelled in the other, it can invite chastisement. **Reasoning** around using the voice therefore involves navigating a choice between constructive or a destructive behaviour. Singing or vocal activities can initiate that reasoning within this CMOC around praise. However, this is an observation only and there was no interview evidence to suggest that such a decision was consciously made.

This is an interesting line of enquiry, although being based around use of voice, rather than on music's capacity to engage, the context differs. To my mind, it is therefore a separate CMOC based around the same resource – praise. Under similar circumstances (young people with behaviour issues), the two CMOCs could potentially be active at the same time. In the present study however, the evidence pointed towards engaging activities, rather than voice control.

6.1.5 Summary

The initial programme theory, 'Music activities enable opportunities to give or receive praise, which can lead to wellbeing outcomes' was reflected in the findings and these were developed primarily from the Ferndene study site into a CMOC linking engagement to praise to hope of recovery. For this CMOC to be triggered, the context must include a realistic and tangible recovery

aim (in this case, young people in an inpatient unit whose behaviour is being monitored), and praise must come from the right person (an authority figure who the young person trusts).

This CMOC has most transferrable potential for young people (adults tended to be more cynical of both authority figures and concepts of recovery). Expanding this CMOC out more broadly, it underlines the importance of praise and in particular what it might mean for different people.

Adults and children exhibited different reasoning, so recommendations for music facilitators are that: praise should be geared towards different aspects. For adults, praise for the musical product was important; for young people, praise for improved behaviour had the greater impact. In terms of programme content, improved behaviour corresponded with more engaging music activities, such as song writing, or activities with smaller components.

6.2 Programme theory 2: Energy control and balance - recap

Context: For participants who felt excess energy (anxiety, hyperactivity) or a lack of energy (depression, tiredness), musical improvisation yielded a positive effect **Mechanism**: The activity engendered a sense of control, with which individuals could raise or lower their energy levels to a more desirable level. **Outcome**: This resulted in what several participants described as 'balance', which they associated with wellbeing.

The PT was originally split into two parts (raising and lowering energy levels), until it became apparent that the key factor was 'control'; consciously using music activity to shift from one energy state to another. The initial PTs were vague (music can raise energy levels / music can have a calming effect). Whilst not untrue, these were somewhat blunt conjectures. Following observations and informal conversations at the study sites (prior to interviewing), the idea of control quickly emerged and this became the lynchpin, bringing the two separate PTs together into the following more specific, interesting and explanatory PT: Participatory music activity can help participants gain control over their perceived energy levels, enabling them to move from a less desirable energy state to a more desirable one. Interview data corresponded more closely with this theory and came primarily from Chilli Studios participants.

Challenging circumstances brought about by either MH or LD issues impart a range of energy-related problems and music activity seemed to have a significant effect on controlling these. This study found that the causes of excess or low energy differ between service users, but that imbalance, once recognised, leads to an instinct to regain control. For most participants,

particularly those at Chilli Studios, the decision to achieve this via music participation was a conscious one.

More broadly, a sense of 'control' is important to individuals with long term conditions. Pothoulaki (2012, p. 250) notes: "…patients can feel a reduced sense of control over their illness and over their life in general which means that interventions that help to regain a sense of control have considerable utility within a healthcare context". The range of settings in which a control-related CMOC has relevance is broad. In this case, the sense of control is over perceived energy levels or 'energy states'. Energy states differ between individuals, but the desire for control is common among participants – especially those with mental ill-health. It is therefore possible to configure several related CMOCs here, but it's perhaps more useful to propose a more fluid CMOC relating to energy control. This may reflect a broad or loosely defined CMOC, but a balance must be struck between specificity and translational potential.

6.2.1 Forms of energy

The way energy was perceived had different outcomes for different participants, illustrating a stark difference between adults and children. Adults sought to reduce excess energy, which they correlated with anxiety (nervous energy), whereas younger participants were more likely to express excess energy through (sometimes joyously) disruptive behaviour. Conversely, adults with low energy levels tended to name this 'depression', whereas low energy in children manifested as disinterest but not necessarily depression.[40] When asked about their energy levels, the focus group (whose sessions are on a Friday) described the effect as both 'winding down' from the week and 'ramping up' to the weekend. Individual descriptions of energy levels varied, implying that like wellbeing, energy has a more qualitative dimension. This complex relationship between music improvisation and energy is noted also by MacDonald and Wilson, who note that benefits "arising from improvisation include increase of vigour and reduction of tension, stress or anxiety" (2014 para. 18). These observations led to the CMOC being articulated as: moving from a less desirable energy state to a preferred energy state, rather than using a binary (low-high) energy scale. A physics analogy may be apt here: converting potential energy into kinetic energy (e.g. a spring under tension returning to its rest state) or vice versa (the conversion of kinetic energy into a more controlled form). The role of music in mediating this conversion is more complex, but the

[40] One young person with autism showed no interest in any musical activity until the group performed Neil Sedaka's 'Amarillo', at which point his demeanour completely changed and he became energetic; moving, singing and volunteering to count the band in. The same participant was similarly disinterested in the interview and the visual elicitation, but engaged more when I asked him about 'Amarillo'.

principle remains. Extending the metaphor, the principle of 'conservation of energy' is also relevant to a 'balance model', echoing the discussion on wellbeing concepts (p.12).

6.2.2 Neurodiversity and 'normocentric' society

Adults have had more experience than children of a society that privileges 'neurotypical' over 'neurodiversity', which can result in implicit and explicit forms of prejudice (McKinney, 2012) and can in turn instigate or exacerbate mental health problems. Anxiety and depression are among the most common mental health disorders in the UK (NICE, 2011, p. 5) and most Chilli Studios participants had a diagnosis which included anxiety and/or depression. They often referred to experiences of prejudice or other difficulties encountered in the community (outside the studio) that either 'wore them down' (two participants) or caused anxiety (three participants). These experiences had a significant effect on their energy levels. The young people at Ferndene had less experience of external social influences and their energy levels seemed to be governed more by internal factors relating to their diagnoses (primarily ASD or ADHD). The musical contexts at both Chilli Studios and Ferndene were not apparently affected by pressures of 'normocentrism', allowing participants to explore their energy levels in a safe, non-judgemental environment. However, the options for improvisation at Chilli Studios were greater and this had a clearer effect on energy control.

During interviews, Chilli Studios participants were more introspective than Ferndene participants and spent more time talking about their own mental health and of 'making the best' of their situation. They also seemed more resigned to anxiety or depression. There are various psycho-social explanations for this, which are beyond the scope of this study, but it illustrated a fundamental difference between adults and children. Adult participants implied heavily that their anxiety and/or depression was caused and maintained by society, whereas the younger participants did not seek to blame external factors.

This programme theory is about energy levels. Adult participants implied that less desirable energy states are caused – at least in part – by the challenging experience of coping with mental health issues outside the studio. The music activity most commonly referenced in alleviating this was improvisation, which either relaxed or energised individuals. This might apply to all people, but the participants in this study manage various mental health issues – neurodiversity – in a society that is not always accepting of such differences. Studies in community music that seek to celebrate or explore neurodiversity in social settings provide some interesting perspectives. Drawing from disability studies and autistic self-advocacy, Bakan (2014) seeks to promote ethnomusicology as a potential alternative music therapeutic approach; Shiloh and LaGasse

(2014) investigated 'Sensory Friendly Concerts' to build community through music for a neurodivergent population, specifically those on the autistic spectrum; and Norris (2016) explored the experiences and perceptions of people with autism who use music for self-representation. Using a music education and disability studies lens, Norris found that neurodivergent musical perceptions have a distinct effect on behaviours and the way participants relate to others both within and outside a music group. She focuses on how these factors are used to mitigate disablist prejudice by increasing opportunities for self-determination, aligning with the affirmation model championed by the likes of Swain and French (2000), and Cameron (2008). These examples explore perspectives on self-advocacy for a neurodivergent population in wider society. There is some connection here with programme theory three, self-representation. However, in disability studies terms, these are models for coping in a disablist society, whereas the broader aim is to make society more accepting so that the challenges faced by neurodivergent people aren't exacerbated by out-dated perceptions of disability. The UK organisation, Disability Arts Online (which also represents people with mental health conditions and learning disabilities) exists for this reason; recognising the general power of art and creativity as both a form of self-help and for promoting strong messages about disability in society more widely.[41] The types of music activities identified as being effective in this study might be incorporated into programmes similar to those cited above to provide useful new directions in exploring energy, perceptions and prejudice around neurodiversity in the wider community.

6.2.3 The room itself

At both study sites, the room in which music activity took place represented a microcosm where 'normocentrism' didn't apply. The music room itself influenced wellbeing. Using the logic of RE, it is part of the context; the combination of *that* music activity in *that* room. "Music [therapy] never goes on in a contextual vacuum. Different *settings* and *participants* determine which meanings can be related to the activities" (Aasgaard, 2004, p. 149 empasis in original). It is also worth acknowledging the role of consistency (environmental or otherwise); Ferndene sessions took place in different rooms each week, whereas Chilli Studios used the same room throughout. Some Chilli Studios members regarded the music room as a safe haven within the wider studio setting, with which they were less familiar. Many programmes involve some form of consistency (same time each week; same room). The room and regularity do have a contextual role; this formed part of the planning of the Ferndene programme, which aimed to use the same room at Sage every other week (and the sessions were deliberately set on a Monday afternoon, as this is traditionally

[41] http://www.disabilityartsonline.org.uk/

a 'low-energy' time of the week). Furthermore, when the room was changed (from Ferndene's music room to the gym), due to timetabling issues, there was a marked decline in the young people's behaviour. Consistency alone is not enough to trigger a wellbeing mechanism, but it seemed to play a critical role.

6.2.4 Catharsis

The concept of catharsis goes back to Aristotle (Poetics, 1449b), passing through psychoanalysis (Breuer *et al.*, 1895/2000) and into more esoteric 20th century interventions such as primal therapy (Janov, 1970). Kohut (1957) describes catharsis as one of the three functions of music,[42] while Juslin (2005) writes extensively on the 'induction' of emotion through music, with a focus on its coding and decoding by both performers and listeners. Critically to this CMOC, Benenzon (1997) describes musical 'warming up' as a cathartic process that functions to discharge stress.

While developing this CMOC, the idea of emotional catharsis was persistent and was included in several PTs. I had been expecting participants to allude to this and was surprised when it didn't come up in any interviews. Instead, those that talked about 'reducing' excess energy spoke in terms of stress reduction and gaining control, but never of catharsis or 'release'. To my mind, the idea of catharsis is still relevant; this CMOC involves a connection between controlled release of energy and increased wellbeing – a process that would commonly be referred to as 'cathartic'.

6.2.5 Summary

Children and young people seemed to follow more a natural, intuitive energy trajectory, perhaps because they were less influenced by social conventions. Consequently, there was less evidence connecting energy control with explicit wellbeing outcomes for this group. Adults demonstrated a greater desire to control their energy levels. The musical activity where this was most evident – or which was referred to most often in interviews – was improvisation (jam sessions). This seemed to allow participants the freedom to pursue more instinctive musical courses of action according to their individual needs.[43] Another critical factor is the music room being perceived as a consistent 'safe space' in which to change energy levels.

This CMOC might arguably be broken down into smaller components. Achieving this balance speaks directly to the scientific realist principle of 'inference to the best explanation'.

[42] Along with 'playful mastery of threats of trauma' and 'enjoyable submission to the rules', mentioned in the discussion of programme theory 1 (p.161).

[43] Musical courses of action relating to individual energy levels are multiple, but are often characterised by qualities relating to intensity and speed. Bruscia (cited in Carroll & Lefebvre, 2013, p. 79) suggests these terms for music therapists to interpret their clients' energy levels.

The resource is control and this is reasoned into the wellbeing outcome of balance. Balance was critical to many of the wellbeing concepts discussed in the literature review and was suggested as a visual elicitation card early on by an adult participant.[44] The card was incorporated into the interview process and was subsequently chosen by several other participants.

The PT on energy was refined into the idea that musical activity, particularly improvisation, gave participants 'control' over their energy levels to achieve a sense of balance. Recommendations would therefore be an acknowledgement that energy levels – as far as individuals perceive them – are not simple low-high binaries and can be changed accordingly by the control and freedom allowed by sensitive, responsive improvisational opportunities.

6.3 Programme theory 3: Product and representation

Context: Participants who had written their own songs or who had contributed to a song writing task placed great value on the opportunity to record these creative outputs. **Mechanism**: Recordings are replicable and portable, giving musicians a tangible means to express themselves. **Outcome**: This increased wellbeing by enabling control of representation (at different levels for different audiences), particularly for those who felt marginalised or unable to present themselves in more conventional ways.

The initial programme theory, that a tangible output (e.g. CD) provides a means to represent oneself when articulation is otherwise difficult, was borne out in the findings. However, these also revealed a stratification of different motives (see Figure 9, p.136), indicating that recording opportunities are valuable in all contexts, but the reasoning behind this varies and should be taken into account when designing other music programmes that involve recording.

Representation through recording (or performance) was a significant part of the programme theory for both Chilli Studios and CMS. At Ferndene, it was used to report back to the funders, Youth Music, but was also a successful activity and an important programme component in its own right. Music offers clear opportunities to convey a message, either through lyrics or through more figurative means, such as style, emotive content or sound effects. Recorded music is relatively easy to replicate and disseminate in comparison to other art forms, which might be part of the attraction.

[44] 'Balance' had initially been a card, but I'd removed it for being too vague. Amending the visual elicitation deck in response to participants is in keeping with the iterative nature of programme theory development.

6.3.1 Audio format

CDs are archaic, particularly to younger people. Nevertheless, the physical aspect of the format affords it a certain cachet and also enabled an opportunity to produce album artwork. Ferndene participants had their art printed as a colour inlay. Those I spoke to ascribed value to the final product and were keen to take away an object which they could play to friends or family members. In his study of songs written by children in hospitals, Aasgaard (2004, p. 152) points out, "a song can directly reach audiences far away from the patient's isolated existence, for example a CD sent by post to classmates". There is some relevance here to the inpatient context of the Ferndene group.

Product vs. process in music therapy has been discussed in detail by Turry (1999). Community music traditionally downplays the role of the musical product in favour of the process (Murray & Lamont, 2012, p. 79). However, Chilli Studios actively encouraged its members to produce music and uses SoundCloud (an online audio distribution platform) to showcase their work. Chilli Studios participants were also more overtly concerned with representation in the public domain and those who made recordings had a good understanding of digital dissemination, despite using somewhat archaic terms.[45] In regard to the CMOC, the idea of a hardware product, though outdated, is nevertheless a more tangible means for representation.

6.3.2 'Outsider art'

The will to represent oneself through a creative product, particularly for Chilli Studios members, was a response to the stigma they had experienced. Many self-identified as 'outsiders' in wider society and, through their recovery context, had reached a point where they accepted or even embraced this difference. Participants' 'otherness' manifested strongly in their artwork. In music, this included a stylistic bias towards punk, 'naïve' playing styles,[46] odd lyrics, and generally intuitive song writing, ungoverned by convention.

Though commonly used to refer to the 'outsider art' movement, the sociological descriptor 'outsider' was initially used in a study on drugs and jazz (Winick, 1959) and the genre term 'outsider music' is often attributed to Chusid (2000). It might be straying from the realist ethos to categorise the music created at Chilli Studios as 'outsider', but the term itself is used self-

[45] E.g. "making a record" or "sending a demo tape" to independent record labels – outdated terms which perhaps reflect the age range.

[46] One songwriter didn't know the names of any guitar chords, so we ascribed Christian names to those chords, e.g. Roger (Em), Gerald (Amaj), Neville (Dmaj), etc.

referentially by studio members. From what I observed, working on participants' recording projects, the more unusual musical outputs were deliberate rather than naïve.[47]

There is a driver for encouraging studio members to express their difference and to generate a product (recordings) which can have a life beyond the studio walls. Discussing the role of recording, the Studio Manager noted: "we want our members to be able to express themselves in whatever way they feel, no matter how esoteric. We don't fix people; we help them feel comfortable in their own skin". Similar ideas were voiced by those involved in the programme design at FYMP and CMS. One FYMP steering group member encourages children to 'be weird' and to become comfortable with that, whilst one of the CMS facilitators commented: "we encourage people… to embrace their difference and to try to make weird sounds. If that comes more naturally than 'formal' or 'correct' musical structure, then it can be beneficial". People who already identify as 'different' are encouraged through their recovery process to gain confidence by expressing this outwardly. This is a way of 'standing up for oneself' in a marginalising (normocentric) society.

There are shades of politics here. The focus at Chilli Studios was more on individuals, whereas at CMS, 'difference' was an overtly political issue; participants made disability their subject material and sent their recordings to parliament. These observations gave rise to the 'stratified' CMOC (Figure 9, p.136). Despite these different intended audiences, the common factor, specified in the programme theory, is representation.

6.3.3 Summary

Recording, representation and outsider music are not mentioned in programme literature, but these ideas are bound up in the ethos of all three study sites. The availability of recording facilities indicates that these are considered a valuable resource by programme designers. The opportunity to represent oneself through a tangible recorded output was important to participants, but different contexts revealed different motives. These drivers should therefore be taken into account when designing music programmes that involve recording.

Creative activity is rarely exclusively product-focussed, so it is likely that this CMOC works in combination with more process-oriented CMOCs. Irrespective of this, creating tangible artefacts was not only popular, but is also easily implemented in other settings. This CMOC therefore has translational potential, particularly for individuals with some musical ability and who have

[47] Chusid (2000) would argue that this is therefore 'experimental' rather than 'outsider' music but the point is academic; participants in this study self-identify as outsiders and actively express this through their musical output.

experienced social exclusion. It is therefore recommended that if recording is built into a programme design, then the type of group should be taken into account when deciding what kind of projects to embark upon. If recording activities take place, the idea of self-representation should be considered a strong motivator and could be used as a decision-making basis for project design (e.g. considering audiences; how individuals wish to be perceived by wider society, etc.).

6.4 Programme theory 4: Subculture and belonging

Context: Musical scenarios that enabled participants to express stylistic preferences with facilitators who can support those choices. **Mechanism**: Being allowed to influence the style/genre of the music enables participants to express their identity within the group, thereby also giving some indication of their ethos or politics. **Outcome**: This resulted in increased enjoyment of the musical product and a sense of belonging (in relation to mainstream culture).

The programme theory in this case was based on early observations rather than on documented programme intentions (although it does align somewhat with the Chilli Studios and CMS ethos of participant-led music sessions). In its original form: Music provides a means to express one's belonging to a group through genre and subculture associations. A sense of belonging is important for wellbeing, particularly to those marginalised in society (Wakefield *et al.*, 2016). This study found evidence for participants wishing to express their cultural allegiances, although the connections with wellbeing were less evident. Nevertheless, this CMOC has some credibility and can inform other music programmes in the right circumstances.

6.4.1 Identity

Musical identities are discussed in MacDonald *et al.* (2002), which also touches on the concept of 'projection' (Davidson, 2002, p. 102) and the idea of 'musical taste' being critical to one's self-concept (MacDonald *et al.*, 2002, p. 11), particularly in adolescence. Wakefield *et al.* (2016) collates extensive research that shows "…*group identification* (a sense of belonging to one's social group, coupled with a sense of commonality with the group's members) is linked to high levels of satisfaction with life (SWL)" (p. 785). The security of being in a group is particularly important to young people whose identity is still developing. Music as an art form is particularly apropos to enabling identity projection, in that participants express how they see themselves in relation to society through musical styles.

Music preference guided by issues around projecting a social self-identity has been explored previously (Behne, 1997; Tarrant *et al.*, 2000). In terms of asserting an 'identity' among peers or

to a broader social milieu, there exists some research in the field of social psychology around music preferences. Most of this focuses on the needs and preferences of adolescents, for whom identity formation is often an immediate concern. Hargreaves and North (1997), and MacDonald *et al.* (2002) seek to shift the emphasis of music psychology from the cognitive and emotional – which have relevance elsewhere in this study – to the social, which they claim to be comparatively neglected.[48] Self-identity is posited as a critical social function of music (ibid.) and was implicated as being important to participants in this study, particularly through references to a 'sense of belonging'. As MacDonald *et al.* (2002) note: "One's musical preferences can define which social groups one does and does not belong to, and this is particularly clear in the case of teenage music preferences" (p. 5). This is explored more deeply in Tarrant's (2002) work on Social Identity Theory, which distinguished between in-groups and out-groups among adolescents. At Ferndene, preferences for 'popular' music were underlined by negative reactions to the less contemporary suggestions made by one of the music facilitators (sneering, laughing and referring to 'dad music').[49] The large-scale study by North *et al.* (2000) reported common reasons for individuals' music preferences as "listening in order to create a particular self-image… to be trendy/cool… and in order to please others", suggesting that music listening by adolescents "might be guided by impression management needs" (Tarrant *et al.*, 2002, p. 135). However, Tarrant notes that it "it is not yet clear whether overt displays of one's musical allegiance are guided specifically by identity needs, although there is good reason to believe that they might be" (p. 136). Despite this note of caution, we can infer conclusions from the present study's findings: adolescent participants aligned themselves with popular music.

Music preference also affects engagement with and consequently success of the programme. Cain *et al.* (2016) note that participants in music programmes tend to engage more with music that appeals to their age group: "…the use of culturally relevant music which appealed to the age of the participants was paramount. Bernstein (2012) and Conklin-Ginop et al. (2011) noted that the opportunity to perform music that was widely recognized by their peers, was the main impetus for participants' engagement and success of the program overall" (p. 115). While this might seem self-evident, many music programmes rely on more generic material or exercises for their content, which might therefore inhibit programme success more than was previously thought.

[48] All music activities in the present study were social, involving at least three people but usually more.

[49] Although it became apparent later that these musical suggestions were made in jest in a self-deprecating attempt to increase rapport between the young people and the facilitators.

Adopting a negative viewpoint, North and Hargreaves (2012) examined the connection between certain styles of music can lead to delinquency or outcomes such as self-harming.[50] Focusing on interpretations of lyrical content, they concluded that young people's music preferences are influenced by their challenging circumstances rather than the other way around, although they conceded musical style can also influence attitudes held by fans. They argue that context is vital, speculatively arguing that suicide in a Puccini opera would be perceived differently if it were addressed on a Marilyn Manson album. In emphasising the importance of context, they highlight the complex interrelationship between music preference and music's influence. The negative influence of 'goth' subculture on self-harming is also explored by Bowes *et al.* (2015), who concluded that any links observed were not attributable to musical factors.

Ideas around identity differed between study sites. At Ferndene, there was a trend towards 'belonging' to the majority group, characterised by a preference for contemporary chart music, music from the latest Disney film, or songs that everyone inherently knew (The Lion Sleeps Tonight; Amarillo). At Chilli studios, such popular songs were largely met with indifference or scorn. Hargreaves (1982) suggested that we might learn more about psychological motivations by observing the types of music people dislike, noting that people often express contempt for [perceived] novelty in music, which was consistent with the older participants in the present study. This distinction enabled an exploration of identity in terms of age differences. Lamont (2002) studied musical identity formation among adolescents with particular reference to school as a key social context in which such identities develop. The social context is important, as it (and other educational factors) can lead to the formation of positive or negative musical identities. Lamont claims "Music clearly does enable children to define themselves in relation to others. However, at present, classroom music helps *some* children to develop a sense of group identity and togetherness, but for other children the activities at school beyond the classroom lead them to develop a sense of group *difference*" (p. 56, emphasis in original). Exploratory research by Green (1993) on music and gender among young people, concluded that music in schools and music education more broadly plays a role in gendered labelling, with clear implications for identity formation. Issues around gender did not arise in the present study, but the young people from Ferndene demonstrated clear attempts to assert their identity (broadly with a mainstream), using music as a 'badge' (Frith, 1981), through enthusiastic engagement with more popular songs than with improvised or traditional music activities.

[50] Alluded to previously in this thesis (p.24).

There is also literature relating to older people's identity (relevant to those at Chilli Studios and some Community Music Spark graduates), particularly around the concept of ageing. Bennett and Taylor (2012) examined case studies of ageing punks in the UK and ageing dance music enthusiasts from the queer scene in Australia, finding that these "…produce particular forms of 'youthful' selfhood for the post-youth subject... [Suggesting] that supposedly 'youthful' genres such as punk and dance music can retain meaning in middle age… Signalling a refusal to 'grow up'" (pp. 240-241). Hodkinson and Bennett (2013) develop this further, even acknowledging the health and safety 'checks and balances' now used by people organising [electronic] dance music parties for older ravers as indicators of a more attentive approach to preserving wellbeing (p. 98). Musicians at Chilli Studios, in particular those who were more politically motivated, seemed to draw energy from punk music (including during improvising) in a way that didn't happen with more conventional song writing or playing.

There was also a sense that music which addresses more 'real' issues had more relevance to participants' lives, enabling them to connect more with particular songs. Much of the discourse around musical identity and older people relates to authenticity. Cavicchi (1998), cited in Tarrant *et al.* (2002) identified a self-imposed distinction between 'real' vs. 'ordinary' Bruce Springsteen fans, which "helped fans strengthen their social identity and feelings of community" (p. 139). However, there is significantly more literature around younger people's identity formation in relation to music than there is around identity issues for older people and the potential psychological problems these might generate. This reveals a gap in the literature, given that peak UK suicide rates and mental health issues affect men in their 40s and 50s (Samaritans, 2016).

6.4.2 Difference

Ferndene participants were interested primarily in mainstream music (current or recent chart hits, or songs from the Disney animation, 'Frozen'). It is noted that in relation to their developing identities, young people and adolescents tend to involve themselves with "mainly popular" music (Tarrant *et al.*, 2002, p. 135), "impression management needs" (North *et al.*, 2000) or the desire to 'fit in'. Other factors contributing to a mainstream bias may include the 'different' status conferred on Ferndene inpatients compared to children at a mainstream school. Some young people showed awareness of this difference – those referring to 'normal' life outside of Ferndene – whilst others seemed oblivious.

Older participants all rejected the mainstream, tending to align instead with a subcultural style commensurate with their age (most were between 40 and 60), or an even more individualistic style, which was difficult to categorise (see above, re: outsider music). The dominant genre at

Chilli Studios was punk, which also corresponded with many members' political standpoint (most expressed left-wing and/or anarchic opinions, particularly in relation to social policy). In terms of an expressed identity, punk is easily recognised, having long been codified in music and fashion.[51] It is worth noting also that adults have developed their identity in relation to culture over a longer period.

Genre interpretation would overstep the realist boundary. This CMOC is about gravitation towards stylistic anchor points in order to express an identity, satisfying 'impression management needs' (in the case of young people), or confirming outsider status (for older participants). Expressing a public identity by association with an established genre (mainstream or counter-cultural) is made possible by musical resources. Age is one factor which affects the configuration of this CMOC.

6.4.3 Democracy

Musical choices at both study sites were carried out according to democratic principles. The music facilitators at Ferndene sought to make each session fair and inclusive, by voting on songs to cover, ensuring every participant contributed and focussing on 'ensemble' work. Chilli Studios also promoted a strongly democratic and inclusive ethos, which was generally adhered to by the members. Being self-governed, there was a danger of stronger personalities pushing their own agenda at the expense of less forthright participants. Consequently, the musical observations at Chilli Studios were probably not equally representative of everyone. Punk dominated here and this was the musical preference of the stronger personalities - although there were also no overt objections to this. Some participants seemed happy to be involved, regardless of the style of music. If there was any dissatisfaction, it was not expressed. It is proposed here that the inclusive nature of the musical activity enabled a context for practicing democratic behaviours.

My own experience at both study sites differed. At Ferndene, I tried to appear enthusiastic about the young people's music choices, but hadn't heard of many of these (although I did work out the chord sequence to 'Happy' by Pharrell Williams, which we covered as a group). This focussed some attention on me, as the young people sang (vocal arrangements were organised by the music therapist) while I played acoustic guitar. At Chilli Studios, I felt more comfortable with punk songs (very simple chord sequences), or playing in that style during improvisation sessions. It is possible that my enthusiasm levels had some effect on the way these music sessions were

[51] Punk imagery is often drawn upon to define the idea of identity itself. At least two key texts on music and identity, Hebdige's 'Subculture, the meaning of style' (1979) and MacDonald's 'Musical Identities' (2002), feature punk imagery on their covers.

perceived, but I also kept a relatively low profile in each group, so my presence and attitude are unlikely to have had a significant effect on mood.

6.4.4 Summary

Opportunities for stylistic freedom resulted in gravitation towards cultural anchor points, which not only satisfied participants' own aesthetic preferences but also provided some validation of their identity relative to others. The data tended to agree with the literature base for this PT, but it was difficult to formulate into a cohesive CMOC. In terms of recommendations: sensitive, culturally astute and flexible facilitation would be beneficial (many sessions involved discussions around music, as well as actual music activity).

Age is a factor and sensitivity to younger people's 'impression management needs' is already a component of good facilitation, although it is worth noting that this became less important as the average age of participants increased. Democratic principles – also commonly adhered to in facilitated group activities – would enable less mainstream (and therefore potentially more marginal) musical voices to be articulated.

6.5 Programme theory 5: Resilience

Context: Where participants struggle with some aspects of everyday life, music activity – particularly improvisation – enables an outcome which reduces the challenge of some subsequent activities. **Mechanism**: The resource in this case is an individual outcome. For example, heightened energy levels may trigger a subsequent CMOC related to productivity; increased confidence may enable an individual to use public transport; connection with a group may benefit social interactions. The reasoning emerged through participants describing these benefits as something they noticed on days they had attended the music group. **Outcome**: The later activity – perhaps a challenging circumstance such as using public transport or a pleasurable activity such as painting – is more easily achieved and has its own wellbeing outcomes.

6.5.1 CMOC status

This CMOC is located in a chain of implementation (p.52), in which subsequent outcomes are specific to individuals and their circumstances beyond the music activity. In the present study, this is the most speculative configuration, more abstracted from immediate outcomes than the other five programme theories. However many participants indicated improvements in their day-to-day activities which they attributed to music activity and, although individual outcomes differed, categorising the programme theory as 'resilience', a broader and commonly used wellbeing term,

gives it a sense of cohesion. It would be possible to break the above configuration down into several more specific CMOCs, but in this instance, a balance is being sought between specificity and generalizability, and 'resilience' articulates that balance in a useable manner.

The programme theory emerged as follows: Several participants indicated that in the hours following a music session (on the same day) they felt more able or motivated to pursue some other activity that increased their wellbeing. This was not easy to explore for two reasons: First, being unable to carry out follow-up interviews at the point of the later activity, it was difficult to separate the benefits of the music session from other factors. Second, subsequent wellbeing outcomes were only apparent when the interviewee chose to talk about their experiences following the music session. Most interviewees focussed on the music activity itself, although later effects were described by enough people to merit a 'coverall' programme theory.

6.5.2 Resilience

Broad concepts of resilience focus on the interplay between agency and structure (Lister, 2010), the notion of being able to withstand the negative effects of risk exposure and the ability to adjust positively in the face of adversity or trauma (Bartley, 2006). To this end, much resilience is thus related to the perception of risk. The concept is therefore connected with idea of a 'safe space' discussed elsewhere in this thesis (p.118). The WHO broadly defines resilience as "the ability to react and adapt positively when things go wrong" (Friedli, 2009), linking with the idea of 'challenging circumstances'. To this end, the term 'resilience' is used here to refer to an acquired personal quality which serves to reduce (or overcome aspects of) the challenging circumstances faced by individuals in their everyday life. Responding to a government call for tighter definitions of concepts relating to mental health, Caan and Caan (2016) posit 'wellbeing' as being definable only if we acknowledge that it is comprised of multiple dimensions, some of which are health related and others are more individually focussed. Within this discussion, the authors emphasise resilience as a factor relevant across many of those wellbeing dimensions. This not only corresponds with the multi-faceted concept of wellbeing used in the present study, but also reflects the level of abstraction at which resilience is considered.

Much of the research concerning music and resilience focuses on pain management (e.g. Bernatzky *et al.*, 2012; Mitchell & MacDonald, 2012; Pothoulaki *et al.*, 2012). Many studies that do not focus on pain are still based in a clinical domain, e.g. Kemper and Danhauer (2005), who note: "…classical music increases heart rate variability, a measure of cardiac autonomic balance (in which increased levels reflect less stress and greater resilience), whereas listening to noise or rock music decreases heart rate variability (reflecting greater stress)" (p. 283). Despite this

predominantly medical viewpoint, it is reasonable to suggest that physiological responses affect individual sensitivities and hence the perceived challenges in the outside world. Studies that link participatory music to concepts around social and psychological resilience tend to focus on broader concepts around confidence and self-efficacy. One study on resilience management in social-ecological systems suggests that models (art, music, maths; it doesn't matter) "allow people to manipulate or understand abstractions… which affects the reflexive behaviours of people in respect to their use of ecosystems" (Walker *et al.*, 2002 paras 37-38). Other research suggests that opportunities for creative expression – especially music, especially in young people – enable self-reflection, critical thinking and consciousness, which can yield resilience outcomes (Benard, 1997). Music and art programmes for people in challenging circumstances often mention resilience in their programme literature, as was the case at both Ferndene and Chilli Studios.

This programme theory is not a model of resilience *per se*. It does not directly connect music participation with any specific means of navigating or handling risk. Instead, it exists at a broader level of abstraction in which outcomes of musical participation change participants' perceptions of risk (whatever these may be), yielding subsequent positive benefits. This fits a resilience definition, whilst acknowledging that the concept is broad and that music's role within it is likely to be complex and beyond the scope of the investigation.

6.5.3 Chain of implementation

Realist inquiry acknowledges that CMOCs may be configured in a series, in which the outcome of one CMO becomes the context for the next in a 'chain of implementation' (Jagosh *et al.*, 2012), although these are comparatively under-researched in realist enquiry. The concept involves complex CMOC formulations that would have required multiple repeated interviews to map out specific individual CMOCs. This was not possible for various practical reasons, although I was able to ask follow-up questions at both sites during the music sessions.

Wellbeing outcomes subsequent to the music activity were reported retrospectively and were linked with the music activity by participants. The following three examples underline the different outcomes described:

- One participant felt more confident after jam sessions and this enabled him to use public transport, which he normally found intimidating. Consequently, he took a taxi to the studios but returned home by bus. He claimed initially that he attended the music sessions because he enjoys music, but conceded that the fact he could "handle the bus more easily afterwards"

was an extra benefit. Acknowledging that this might influence his attendance implies a level of conscious reasoning in terms of using the music activity as a resource.

- Another participant enjoyed painting but often felt uninspired due to his depression. At these points, he would join us in the studio and improvise on the keyboard. After about 40 minutes, he returned to his easel to paint. When I asked if the music participation had become incorporated into his painting routine, he said yes, although he had "only just realised" and retrospectively attributed his boosted creativity/inspiration to the music activity. This implies previously unconscious reasoning in response to the resource.
- Occasionally, the music group would decamp to the pub after the session. For some, the prospect of entering a public bar was intimidating, but they felt more comfortable doing this after having improvised with the same group of people. Kirschner (2010) claimed that joint music making promotes pro-social behaviour and that music has evolved into a tool that fosters social bonding and group cohesion. This aligns with Huron's (2001) observation that music might be an evolutionary adaptation with a range of benefits that serve human survival (and possibly therefore resilience). However, this middle-range programme theory is designed to acknowledge various positive outcomes outside the initial music-making context, not just increased pro-social behaviour, which was not a significant theme in itself.
- The CMS group has a remit to develop employability skills. Some of these are specifically delivered via training, whilst others are more personal and include qualities such as guidance, communication, leadership etc. Individuals develop these in different ways, but they also serve a purpose beyond employability and have use in everyday life. Some programme documents may deem these skills to be categorised as 'resilience', although the focus group did not give the concept much attention.

These examples illustrate individual resilience, which connects with wellbeing in the broad sense that it reduces everyday challenges and enables opportunities for individuals to access or increase wellbeing. Resilience as a concept does not fit easily into a specific CMOC format, but given the examples above, it deserves acknowledgement. Consequently, it must be emphasised that this programme theory exists at a different level of abstraction than the other programme theories and that the CMOC framework is less useful as a descriptive tool.

6.5.4 Self-knowledge as a resource

Insight, cognitive ability and self-knowledge are viewed in this study as personal resources, although they are not easily captured and are only evidenced through interpreting participant responses. In terms of resilience, personal reasoning and personal circumstances are powerful

influences with significant influence over individual wellbeing outcomes. The realist response to this conceptual point is that: at any given instance in a group activity, whatever the combination of personal qualities is, that is the context under examination. This limits the boundaries for discussing potential wellbeing outcomes outside of the music activity but does not preclude the activity from having a strong influence over such outcomes. The debate has some overlap with the 'dimmer switch' theory, in which mechanisms, rather than being 'triggered' in a binary (on/off) way, are more likely to resemble a 'dimmer switch', described by Dalkin (2015) as a "continuum of activation" (para. 1). This metaphor aligns with debates around qualitative methods and the social world, which characterised such approaches in analogue terms.

6.5.5 Summary

The translational potential of this CMOC depends on how readily one accepts the idea that it can be deemed 'resilience'. Resilience is a popular 'named' outcome for many wellbeing-based interventions and has many sources (c.f. energy). To discuss individual CMOCs rather than chains would be more specific, but also more vulnerable to contextual influences outside of the music setting. The music activity nevertheless plays an important role in these resilience-framed wellbeing outcomes.

Resilience is mentioned in programme documents and the music activities in this study enabled outcomes that could be considered 'resilience' for some people. This programme theory has currency, but its dependence on individual circumstances is problematic, especially in terms of specifics. As such, this theme does not indicate any particular recommendations. However, it does highlight the fact that music interventions form only part of an individual's experience and for resilience to increase, the music activity might be more effective if it is considered part of a broad palette of support, rather than a focal point.

6.6 Programme theory 6: Memory and evocation

Context: Music activities that facilitate participant choice (of song or style) enabled access to positive memories. Facilitators who had the skills to foster and develop these choices were therefore critical resources. **Mechanism**: Musical choices seemed to be governed by emotional instincts; participants chose songs that either reminded them of specific (happy) memories or evoked a positive emotion connected to a previous event. **Outcome**: Participants were able to pursue musical activities which reminded them of happy things. This had a positive effect on their emotional wellbeing.

Many production techniques specifically aim to trigger associations and/or emotions. Songs or elements of songs classed as 'retro' employ this concept; from the emulation of 'vintage' tube amplifiers designed to recreate a certain guitar sound, to the addition of vinyl 'crackle' to a mix. The (arguably postmodern) practice of sampling has had a significant impact, as have older concepts such as pastiche.[52] The idea of invoking positive associations through music (see also genre/subculture) is consciously exploited in a lot of modern music, which relies heavily on pre-existing cultural knowledge and on nostalgia. In this study, the principle of evocation remains, but the process is simpler; certain musical sounds – and the potential to recreate these – remind participants of happier times, invoking feelings of increased wellbeing.

6.6.1 Conscious or unconscious?

Do participants draw on their memories and associations consciously or unconsciously? Some participants described specific musical memories; Pharrell Williams' song 'Happy' reminded F2 of visiting the beach, and the song was nominated and voted for the group to perform – which was a joyous and successful activity. This *conscious* positive association therefore influenced a deliberate decision to steer the group towards that song, resulting in a wellbeing outcome. The song had specific meaning for at least one person in the room but was popular nonetheless. Other musical choices were more instinctive, i.e. they 'felt' good to the participant. Following an instinct to increase wellbeing does not preclude reasoning, although it may be unconscious, becoming a more psychological question. To speculate on a participant's unconscious world does not fit with a realist paradigm, so although unconscious reasoning may be a factor, it is beyond the scope of this research. As the CMOC became clearer, I sought to confirm the mechanism by asking participants why they had made certain musical choices. Many, especially those from Ferndene, said that certain sounds or certain songs 'just made them feel good', but in spite of gentle questioning around this, they couldn't answer why.[53]

6.6.2 Overlap with music therapy

One of the facilitators at Ferndene is a music therapist but was not acting in that capacity during the sessions. Therapeutic outcomes may nevertheless have been achieved, particularly given the close relationships between staff and young people. The facilitation here seemed more responsive (FYMP facilitators having been especially trained to work with hard to reach children

[52] My own production practice involves a lot of references to my 1980s childhood using vintage synth emulators. This 'synthwave' music is heavily imbued with a sense of nostalgia for practitioners/listeners (of a certain age).

[53] With one exception: A 12-year old girl who proposed that the group cover two heavy metal songs, but was outvoted. I later asked her about these choices; she said they reminded her of her parents. She missed home.

and young people). If any crossover with music therapy occurred, then this was responsive to participants' needs, rather than by design. By comparison, the musical relationships at Chilli Studios were stronger between participants than with facilitators, who were perceived as more of a resource. Traditional forms of music therapy tend to focus on individuals, although the idea of community music therapy, particularly with user-led groups, has gained traction (Ansdell & Pavlicevic, 2004) and programmes similar to the one at Chilli Studios have been described from a music therapy perspective (Procter, 2004). Some music therapeutic elements, particularly those that rely on musical relationships were observed in the programmes investigated here, particularly when the facilitators or even peers worked closely with a participant to bring about musical associations, which can have a wellbeing outcome in their own right, outside of a psychoanalytic framework. This CMOC may therefore have translational potential by 'piggybacking' on other forms of therapy which seek to invoke memories (psychoanalysis), or positive imagery (mindfulness). The specific memories described in this study's data are personal, so cannot be generalised, but the principle might have some crossover with ideas around subculture, music therapy, or even the idea of music for dementia.

6.6.3 Escapism

Many of the young people listen to music on headphones around the common areas of the unit, which evidently provides them with some comfort. Those who attended the music sessions were eager to perform the same music that they enjoyed listening to. When asked why or how this increased their wellbeing, most answered that they didn't know. Some said they could 'pretend' to be the pop star in question, implying an element of fantasy. This raises the question: Is the desire to perform familiar songs connected with a fantasy (of being a pop star) or with a previous experience (memory)? Both imply a form of escapism. None of the Ferndene participants expressly mentioned 'escapism' through music, but the subject was raised a few times at Chilli Studios, which I discussed with the manager.

> *Escapism in the context of… Like, it's another world. Yeah. That does exist. Escaping from your thoughts, I think would be relevant. You've referenced [participant name] and I've seen this first hand as well, where he escapes and, shall we say, is able to be a bit manic without it having an adverse effect on him* (Ben, Studio Manager).

During these sessions, I sought to remain low-profile and neutral (although I found playing punk songs at Chilli Studios easier). However, when I felt that participants were reminiscing or that connections were being made with specific musical memories, I gently enquired about this. This may have had an effect on the interview content if participants believed that I was trying to elicit comments about positive memories, although I was careful not to be too inquisitive. My

interactions (I felt) were not unusual for the kinds of conversations held during music sessions at either study site, although conversations at Chilli Studios were characterised by more 'banter'.

6.6.4 Summary

Opportunities to engage in music that evoked a specific memory or positive feelings increased wellbeing. The idea of musical associations has shades of psychodynamic theory, overlapping into some music therapeutic principles. Skilled facilitation within a functional democratic ethos, particularly where the relationship between facilitators and participants was strong, aided this outcome – although facilitators should be mindful of the possibility that some music can have negative connotations for some people.

For adults, the effect of this CMOC was enhanced by pre-existing cultural knowledge, so musically adept and flexible facilitation would be beneficial. The conversation during sessions at Chilli Studios often included obscure musical references, which influenced the musical activity. Having an internet-connected computer in the room further enriched the conversational/musical interplay, which was often driven by recollection. At Chilli Studios, this was therefore a positive contextual factor that could be recommended elsewhere – although at Ferndene, it may serve as a distraction.

Music activities with children were particularly successful when existing popular songs could be adapted and when recognisable results came quickly. The critical factor here was working closely with the young people so that they felt able to pursue the music they wanted. Open communication increased the possibility of tapping into ideas that had positive associations (e.g. the observation that the 'Rugrats' theme tune could be played easily on the xylophone). Again, sensitive and musically flexible facilitation is the key here. In other programmes, this may translate into planned sessions that are sensitive to, and accommodating of, strongly felt musical associations. Knowledge of current Disney films and chart hits would also help.

PART 2: Key translational themes

Having explored the possibility of generalising from qualitative data to make modest causal claims (pp.65-69), there follows a discussion on the translational potential of this study's findings. Popper's (1978) 'three worlds theory' is a model of reality based around three interacting worlds. Of these, the third world is that of 'objective knowledge'. Findings from translational studies must make their way into the third world in order to have any bearing on the other two worlds (physical objects and events, and mental objects and events). For this to happen, the claims made here must be generalised to some extent if they are to have any meaning or impact.

> Without [generalisation], interpretivism is art and while art is a laudable activity, it is inadequate as a basis for policy action and for claims about what the wider social world is like (Williams, 2002a, p. 138).

Music and art have been used in health and social care contexts with varying levels of success. Economics is always a factor – and is particularly emotive for some – so demonstrating value for money is of critical importance. The findings made by this study are limited in scope (two study sites, 18 service user participants, plus a small focus group from a third study site), and the epistemological basis for generalising from these findings has been discussed. Some programme theories identified in this study have potential to apply in other similar study sites. It would be useful to test this proposition, but for this study, there were practical limitations of time and resources. Nevertheless, more specific lines of inquiry could be pursued in wider contexts.

The use of music participation as a translational tool can be implemented in different ways into programmes with specific outcomes for specific people in specific circumstances. This study's findings indicate some factors which might enhance specificity in programme design. The key themes will therefore be discussed in terms of their translational potential, perhaps as a direct transplant (of a CMOC), or generalising more broadly, using middle range theories (see p.52). The CMOCs here are not equal; they were informed by qualitative data. Some have more supporting primary evidence, while others have a broader literature base.

Salter and Kothari (2014) suggest that traditional evaluation approaches that attempt to implement research-based knowledge into practice "represent an oversimplification of both the environment and the interventions themselves". They propose that the theory-based approach provided by RE is more useful due to its aim of understanding 'what works, for whom and in what circumstances'. The report found that only a minority of studies examined had considered their own CMO configurations in terms of wider research and that problems had been encountered with definitions and reporting standards. However, they also found that in lieu of reporting

standards (recently published (Wong *et al.*, 2016)), researchers are taking innovative approaches to theory-driven evaluation and uptake of RE is on the increase, indicating a distinct interest in its potential for knowledge translation.

Reporting standards for realist evaluations

Wong *et al.* (2016) claim there is widespread confusion over the reporting of realist evaluation studies and have produced a set of reporting standards.[54] As outlined in the methodology chapter, the range of different studies and styles of reporting that call themselves realist evaluations is broad (p.56). However, reporting standards are important, particularly in health research, where such standards are commonplace. They also enable comparison studies and/or the ability to build on studies using a consistent framework.

The guidelines, developed by the RAMESES II team, used a three-round Delphi method to collect data and opinions from 35 experts from a range of organisations. This iterative approach echoes that of RE, in that it is designed to refine an idea through several rounds of enquiry. The product of this study was a 20-point table of items that should be included in a Realist Evaluation. Some are commonplace in academic studies (such as a title that states the methodology; rationale for using that methodology; ethical approval etc.), although they are geared towards RE. Other factors might be important to other evaluations, but have particular relevance for RE, such as describing the environment, which is a contextual factor, or describing the programme theory (or theories) being tested. Critically, the main findings are required to be described in terms of contexts, mechanisms and outcomes configurations, which Wong *et al*. refer to as "the analytical unit on which realist evaluation is built" (para.3). Discussion sections also follow a strict format, including a comparison to relevant literature (this was identified as a potential issue within my literature review) and a discussion of the strengths and limitations of the evaluation in that particular study.

The guidelines offer a reasonable amount of freedom and are based on sensible and practical rules, albeit geared especially towards RE. The present study actually follows these guidelines broadly, identifying initial or overarching programme theories and making use of the CMOC heuristic accordingly. There is less justification throughout this report, as would be required by the guidelines, however, much is explored within the methodology chapter, which would ordinarily take less space in an everyday academic study.

[54] https://bmcmedicine.biomedcentral.com/articles/10.1186/s12916-016-0643-1

6.7 Music participation as a translational tool

The overarching programme theory in this study states that participatory music activity has significant wellbeing benefits. In terms of the general literature, the cultural infrastructure and recent policy calls for increased consideration of arts in mental health services, this programme theory makes intuitive sense. However, "Policy makers need data they can rely on to reach their decisions" (Williams, 2002a, p. 125), so the connections between music and wellbeing need to have translational potential. Due to the range of programme theories (even within the small sample used in this study), this section will explore the idea of music participation as a translational 'multi-tool' for wellbeing.[55] Extending the metaphor, not all of the implements on a multi-tool are useful all of the time, but the tool itself has numerous applications and is worth carrying (echoing the RE mantra of 'what works? For whom? And in what circumstances?'). As far as this study is concerned, the translational potential of music participation in general is not in question. Summarising the field, MacDonald notes: "…Music has been implicated as a therapeutic agent in vast swathes of contemporary research studies" (2012a, p. 3). However, the *portability* of specific programme theories into different participatory music programmes *is* of interest, as these might be embedded into a wider ecosystem of music-for-wellbeing interventions. The key themes and CMOCs covered in part one of this chapter will therefore be discussed in terms of their potential applicability in similar music programmes with overlapping contexts. They will continue to be described as 'mechanisms triggered by contexts', but the 'triggering' concept will be more flexible, as per Dalkin's (2015) 'continuum of activation'. This strikes an acceptable compromise under the terms of Williams' *Moderatum Generalisation*.

6.7.1 Multi-component activities

Programme theory 1 (praise) suggests that music projects which comprise a number of smaller sub-activities that contribute to a cohesive whole are particularly engaging. At Ferndene, the song writing project was found to occupy young people – especially those with behavioural issues such as ADHD – more effectively than discrete music activities or activities with no defined goal. The result was behaviour improvement. There is some evidence supporting this. Citing a range of neurological studies, La Gasse and Thaut make the claim that music processing as a whole "is cortically distributed and shares non-musical cortical networks" (2012, p. 154), reinforcing the idea that music activity has a greater capacity for engaging participants than other art forms. The present study observed that multi-component music projects, which all participants could contribute to, resulted in higher engagement (measured by attendance), less distraction

[55] This concept has been presented under the title 'Music – a Swiss Army knife for wellbeing' (Fletcher, 2016).

(measured by observation and incidents of discipline by staff) and greater satisfaction (measured by observation, casual conversation and interview responses). The latter was especially apparent as each stage of the song writing process was connected, e.g. when lyrics were sung to a melody; when a chord sequence was added; when a complete performance was achieved and when the recording was made. The CMOC focuses on praise, but this principle around engagement is also worth taking into account in designing music programmes for similar groups.

In this instance, it was the *process* that engaged the young people, resulting in praise and perhaps other mechanisms leading to increased wellbeing. At first, instances of praise were noticed but not recorded. It became apparent later in the song writing 'block' that behaviour had improved, praise was more forthcoming and the young people were responding to this. By comparison, subsequent activity blocks (same context, but different participants doing different activities) were characterised by involving less praise and more discipline. In these sessions, activities were amended regularly to adapt to the different group, which was clearly less engaged. Consequently, there was less consistency between sessions and no 'thread' connecting these. At Ferndene therefore, supervised activities with hard to engage groups benefit from being broken up into smaller tasks that contribute to a larger product. Song writing seems particularly apt, although instrumental composition or a recording project could also work. This maintained engagement, resulting in more opportunities for positive feedback, as proposed in the programme documents. The connection between praise and wellbeing may be self-evident, although a link was also found between praise and the hope of recovery, which might indicate a direction for future research with inpatient populations.

Similarly, those who attended Chilli Studios most regularly and who were engaged with the everyday music room activities were those working on projects; writing songs, producing albums, or composing programmed computer music. Working towards a defined goal with various sub-components gave them a reason to return each day or each week. These more complex tasks of composition and recording seemed to engage participants in a different way to the jam sessions, which had a more transient, ephemeral attendance and yielded a different set of wellbeing factors.

Youth Music Network recently reported on two London-based projects that sought to engage 'hard to reach' families and young children, which used "other avenues to arrive at a musical output, such as sharing thoughts and ideas, looking up local history, creating stories or playing games. These activities can lead to writing words which can lead gently into song-writing" (Parkinson & Knight, 2016). The activity of song writing can be supported in numerous ways and

at many levels, and a range of creative approaches to song writing can be drawn upon to enhance programmes.

6.7.2 Energy control

Music participation influenced individual energy levels and the data indicated that the same activity could either increase or decrease perceived energy depending on the participant. The implication from participants was that their energy seemed to have a three-dimensional quality (as opposed to being simply high-low) and this was linked with their wellbeing – many chose the 'energy' card from the wellbeing deck. It emerged that improvised music activity (jamming) was consciously regarded as a resource to change energy from a less desirable into a more desirable state. Two interviewees referred to "finding balance". The pursuit of art has been described as a way of achieving a 'desired state of arousal' (Berlyne, 1971), although about half of participants in this study reported music activity (both listening and playing) as having a calming effect.

Reports of music interventions for older people and people with dementia, such as 'Singing for the Brain' (Alzheimer's society) have found an energising effect unattainable through other interventions.[56] Conversely, the role of music in relaxation interventions is also significant. Lim *et al*. (2011) found that self-perceived fatigue and self-perceived exertion were reduced following therapeutic instrumental music performance. Chilli Studios participants described their perceived energy levels in physical terms but often in relation to an emotional component (depression = fatigue; anxiety = tension). This study's observation that the same activity affects participants in different ways might be due to the range of diagnoses, but also supports the idea that individual perceptions of music activity differ widely. Mixed-diagnosis groups may therefore provide a context in which a range of responses are possible. The implications for 'what works, for whom and in which circumstances' therefore become more complex. If we accept that the same music activity can have different effects for different participants, then the focus moves towards the concept of 'balance' and perceived wellbeing.

This CMOC may inform programmes for groups with mixed diagnoses. Activities such as jamming, whose dynamics are governed by participants' own instincts can have a strong personal effect on energy. Jamming is contingent on a certain level of musical and communicative ability and this was more apparent in the adult group. However, skilled guided noisemaking or even free improvisation among non-musicians could also be used to significant effect.

[56] This is also connected with memory. The Singing for the Brain web page notes that: "activities which build on the well-known preserved memory for song and music in the brain. Even when many memories are hard to retrieve, music is especially easy to recall" (Alzheimer's Society, 2016).

6.7.3 Tangible product

Maratos' (2004) description of a community music project in an institution attempts to merge principles of music therapy in an institutional context with principles of community music (much like the FYMP did with the partnership between Ferndene and Sage). In describing the study, Maratos encounters the process/product dichotomy, placing greater emphasis on process. The importance of the music making process is not in dispute – most of the programme theories in this study are related to processes. However, data from both study sites also indicated that a distinct value was placed on the musical product; a CD for Ferndene group members and recordings of personal music projects for those at Chilli Studios. Many people gained a sense of accomplishment from experiencing the product of their efforts. For those who have been marginalised or who may have had fewer opportunities to create, this product can also serve as a means to represent themselves to others. This is particularly important when that recording is the culmination of a creative process (as it was at Ferndene), or represents something that is difficult to express in any other way (as was the case at Chilli Studios). All participants who talked about recording expressed a desire to play their recordings to others.

The mechanism may be slightly different at each site. For children, the idea of achievement and of a take-away product was attractive. A CD recording of the group's musical output was presented to each child following a 'celebration event', which was designed to showcase the project (and other achievements) to parents and carers, and was one of the highlights of the music programme. The adult participants were keener to represent their experiences and in particular their political viewpoints through music, with the intention of distributing this online. Nevertheless, both groups were keen on sharing their music with people they knew and with strangers – to represent themselves via an actual artefact – and referred more to playing their music to others than to owning a memento of the music programme itself.

Music interventions are often process-focussed, but the idea of having a tangible product (a live performance or a recording) is also valuable. A recording project can involve a number of components and a range of people with various skills (see previous section, p.190). One album project at Chilli Studios involved a core of three people (the song writer/producer and the engineer/keyboard player – both service users – and me on bass guitar), but at least five others were co-opted for various singing tasks, ukulele and drumming. The song writer/producer is known in the studio for his autobiographical projects. He is an otherwise shy man who finds socialising difficult and yet, by representing himself through music, he is one of the more prominent members of the studio. Being able to put his own name to a significant piece of work gave this studio member a sense of confidence he was not able to achieve elsewhere. Aigen,

during an interview with a community music therapist, describes the role of recording in a developing music therapy group for people who cannot speak: “Over time, we’ve learned a few grooves that we really like, we put names to them and then we made a CD. We designed the cover together, we chose the music, we recorded it… Those grooves became part of our package and we decided to capture them so to speak. That’s when we recorded them.” Aigen later muses: “Did hearing that it sounded good lead the group to think that the music deserves to be heard by other people?” (Aigen, 2004, p. 189). The idea of a product is clearly powerful to those whose voice is otherwise not widely heard.

In terms of implementation, recording equipment is affordable and accessible. These ingredients; multi-faceted activity, multi-skilled and product-focussed (not at the expense of process), could be easily incorporated into an intervention or programme.

6.7.4 Indicating a cultural identity

‘Youth subcultures’ play a critical role in identity formation. In terms of making these subcultural choices, it is also noted that “adolescents begin to devalue school-organised music, and instead begin to favour musical activities that they can organise themselves” (Boal-Palheiros and Hargreaves, 2001, quoted in Tarrant *et al.*, 2002, p. 134). One of the most visible examples of communicating identity through music are the street art and hip hop programmes run by Sage Gateshead and similar organisations. Two participants (one from Ferndene and one from Chilli Studios) indicated a desire to become involved in music programmes that involved hip hop or rap music. Both cited lyric-writing and the desire to convey their personal experiences as the reason for being drawn to that particular genre. The success of hip-hop related interventions may indicate potential for genre-related musical opportunities for specific groups.[57] Of course, this carries a danger of institutionalisation, leading into discussions around authority, legitimacy and authenticity. But perhaps those discussions could be incorporated if style is to be a factor at all. The recommendation here is not to hijack youth subcultures, but rather to make these part of a discussion within music programmes.

Daykin sees participatory music projects as an opportunity to explore social capital, although she warns that it is not simply a ‘commodity’ to be acquired, but can actually be a “constant struggle, rather than a straightforward outcome of participation” (2012, p. 68). There was evidence for this

[57] There was an example of this failing. The FYMP facilitators were involved in a separate project which incorporated (by popular demand) an activity based around hip-hop. This lyrics generated by the young people were violent and misogynistic (themes deeply ingrained with the genre) and were considered inappropriate, so the project was abandoned. This illustrates the point that facilitators need to be well-prepared if they are going to stray into certain subcultural territory.

at Chilli Studios when the more dominant group members exerted greater influence on the type of music played. This was less apparent at Ferndene, where musical choices were mediated by the presence of facilitators who sought to ensure fairness as much as possible. The ebb and flow of what might be considered social capital, or even cultural capital, essentially came down to the power relationships present within most social groups. This is important; group musical activities present an opportunity for identities to be expressed but are also subject to group dynamics and power relations. Therefore, it is proposed that a) opportunities to engage with and exercise genre preferences are important for music programmes and b) power relationships should be carefully negotiated. Indeed, "Projects that fail to recognize these aspects risk disengagement, frustration and disappointment" (ibid.).

On a similar note, the FYMP steering group raised a question relating to gender differences. This wasn't addressed, but no strong gender divides had emerged (Ferndene was about 50:50; Chilli Studios about 75:25 male to female).

Based on this evidence, it might also be useful for programme facilitators to investigate models, exercises or processes that enable democratic musical choices. Critically, it is important that all participants feel as if they are pursuing music that reflects their identity (or the identity they wish to project). Inequalities can be reproduced in collaborative music projects, but they can also be resisted. This was seen in FYMP when a minority of young people suggested music far removed from the mainstream choices of their peers. Despite not being able pursue those aims, their choices were discussed in the group and the difference was acknowledged (in practice, most of the young people simply weren't familiar with 'Ace of Spades' by Motörhead). At Chilli Studios, the democratic ethos remained but was not enforced, so the more dominant group members tended to get their way, requesting mainly punk songs. There is some irony in this, since punk is arguably inherently resistant to dominance. The point remains; musical style and subculture allows people to project identities, but this can lead to conflicting agendas in group situations, which may require some management.

In summary, music programmes might be improved through gaining an understanding of the nature and ethos of the group they seek to benefit. Marginalised adults might seek to resist dominant cultures representative of the mainstream society that has rejected them. At Chilli Studios, they did this by embracing alternative musical genres such as punk. Young people on the other hand, might find security in aligning themselves with popular groups and the music associated with popularity (pop music, chart music, mainstream music). However, this needs to

be balanced against the need to acknowledge and perhaps indulge those who identify with an alternative. Again, cultural knowledge on the part of facilitators is helpful in this regard.

6.7.5 Memory

This has similar translational potential to the subcultural CMOC in terms of participant-determined musical choices. Democratic principles and sensitive facilitation are also recommended in this instance. However, the memory issue is predicated on more personal internal associations, rather than more social external ones, which have greater potential to be shared. Drawing out these memories or emotional associations might benefit from the expertise of a music therapist or a music facilitator with knowledge around guidance and counselling. Two translational directions spring to mind: music assisted guided imagery, or more traditional music therapy, in which participants are encouraged to connect with their inner thoughts and express these with the assistance of a therapist – based on psychotherapeutic principles, using music as a conduit. Both of these are more often an individual process, although they could be used in groups or communities in which participants had shared experiences (for example, war veterans).

The theme of memory and the various ways it connects with both music and emotion is powerful, particularly among older people. Dibben notes: “One of the primary uses of music which people engage in is that for memory retrieval: remembering key people in their lives, using an associated piece of music to relive an event or emotionally critical moment from the past.” She goes on: “An ethnographic study by DeNora… found that music was a significant resource on women’s remembering and emotional life” (2002, p. 125). The data collected in this study indicates some associations being made, e.g. of summer chart hits reminding participants of beach holidays and of the happy memories associated with these. In principle, this is not so different to the memory retrieval phenomena observed when some dementia patients are played music from their past, although the wellbeing outcomes may differ (in terms of the nature of loss and nostalgia) as well as the underpinning neurology. Recommendations are likely to be well-known to music therapists but may also be worth exploring outside of these contexts.

6.8 Rejected programme theories

It is worth acknowledging some of the initial programme theories that were not triggered in this study; theories that were predicted but not observed and therefore not pursued (appendix 1, p.231). This does not mean that those theories are invalid; many are well supported elsewhere by academic and/or anecdotal evidence. That these theories were not triggered could have been

because of the individuals in the study (those observed and those interviewed), or because of a specific contextual factor that went unnoticed due to a lack of comparators, or because of some failing or oversight in the data collection. Indeed, my decisions regarding which observations to record could have been skewed, or my interview script or visual elicitation may have inadvertently prompted certain conversational directions. In acknowledging this, I wish to emphasise that these 'non-observed' programme theories have not been invalidated by this study and could still critically inform similar research in the future.

Such theories included: Music as a spiritual or meditative device (mentioned in early conversations by some Chilli Studios members who did not eventually attend the group being observed); skills acquisition in terms of instrument learning (interest was expressed in this at both study sites, but never became an observed outcome, nor was it mentioned during any interviews).

6.9 Implications for wider practice – a realist discussion

This section discusses practical issues around the methods used in this study and their wider potential, including an overall appraisal of the value of RE to arts and health interventions.

6.9.1 Generalisation

RE is context-specific but seeks causal explanations. In terms of health and social policy, this is problematic: Williams (2002a, p. 125) notes that highly contextualised data "…won't do in circumstances where decisions affecting the emotional and material existence of people are made on the basis of evidence produced. Increasingly, interpretative research in the form of focus groups or in-depth interviews is called upon to provide just such evidence in the creation of local or national policy, or to evaluate existing programmes". So the translational claims made here or by any RE using qualitative data are also jeopardised. If interpretivism is to be of any use, claims Williams, it must say something authoritative about contexts beyond those specifically researched.

On the transferability of qualitative findings, under the rubric of moderatum generalisation, Williams says "If characteristics point to particular structures in one situation, then one can hypothesise that the existence of such structures in a further situation will lead to at least some similar characteristics… In generalising from one context to another, we carry with us hypothetical notions of structure or outcome… However, success in this quest cannot be seen as firm deduction, but merely a weak inductive confirmation of one's hypothesis" (Williams, 2002a, p. 138). Inductive reasoning leads to moderatum or 'modest' (O'Reilly, 2008, p. 84) generalisations.

This is a convincing argument, justifying the methodological approach chosen for this study and recommendations proposed here.

6.9.2 Wellbeing

It was decided prior to the data collection (but also evidenced in the findings) that 'wellbeing' means different things to different people. For some groups, wellbeing outcomes may be more obvious than others. To this end, it is important to understand the needs of the group and, particularly where a broad challenging circumstance is identified (e.g. mental ill-health), to identify what wellbeing means to individuals. For those at Chilli Studios, the idea of 'recovery' was barely mentioned, but the idea of representing themselves and of talking about their experiences in public was very important. The concept of defining wellbeing is beyond the scope of this thesis, but what was highlighted was that individuals use musical resources – or resources made available through music – in a wide range of ways that are not necessarily predictable.

6.9.3 Visual elicitation exercise

The exercise saved a lot of time in terms of directing the conversation towards factors that were important to the participants and enabling a more in-depth exploration of these, often in limited time (particularly at Ferndene, where children's time was carefully managed). The technique was adopted at Sage Gateshead and is being piloted in the evaluation of their own music programmes for children and young people.

However, I have some concern that the themes chosen for the cards, despite being deliberately broad, may have guided the interviews down certain pathways at the expense of more oblique outcomes for participants, or outcomes that may have occurred later in the interview through association or a more 'free-ranging' conversational approach. Plus, there may have been significant wellbeing definitions or music outcomes that were overlooked by the cards and although these were not indicated by any of the participants, I will never know if this is because they were not options presented by the visual elicitation. I was careful to emphasise that all participants could make suggestions of their own, using blank cards (and two of them did), but the use of these cards did not make for a truly 'open' interview. I believe that this is a trade-off, but the method might benefit from being piloted more thoroughly if used in similar projects.

6.9.4 Appraisal of the value of RE to arts and health programmes

The increasing popularity of RE corresponds with a growing critique of the idea of RCTs as a 'gold standard', leading to renewed attention being given to causal explanations in health evaluation in the UK (Greenhalgh *et al.*, 2014). Arts interventions for health and wellbeing are open systems, inherently social, but embedded within a healthcare context. They are also dynamic and therefore

benefit from evaluations which take a number of 'snapshots' over time (diachronous). RE provides a highly suitable methodology for evaluating such interventions as well as a framework that can accommodate such complexity whilst also making moderate claims to causality. The amenability of RE to various data collection techniques allows the use of methods that work well in longer-term interventions or programmes, which focus on creativity, relationships and communication. In this case, observations allow for "luminous description" (Katz, 2001), although RE can also make use of quantitative data, thereby allowing for a range of approaches appropriate to specific interventions – and in arts and health, there is a great deal of variety. This study demonstrated a successful RE in terms of formative and process evaluation and could be used, with amendments (p.213) in similar arts and health studies.

CHAPTER 7: CONCLUSION

7.1 Chapter structure

This chapter will initially comment on the extent to which the research aims were achieved and the research questions answered. The findings will then be summarised with recommendations for both practice and further research. A discussion of my research journey, commenting on this study's limitations, will follow. The chapter will then revisit arts and health more broadly to describe the implications and impact of this study within that context.

7.2 Research aims revisited

It was stated on page 10 that: "…this research aims not only to establish knowledge that can be used in similar interventions, but also to explore a potentially useful evaluation approach that acknowledges the difficulties in measuring wellbeing and the effects of music interventions, lighting the way for more specific questions and exemplifying a framework for these questions to be generated and asked within.". Each clause of this statement will be considered here:

7.2.1 Knowledge that can be used in similar interventions

The programme theories identified and discussed here have translational potential in that, under the rubric of RE, they describe pre-existing mechanisms that are triggered in certain contexts. If those contexts can be replicated or approached in similar music for wellbeing interventions, then this study can offer some insight into which mechanisms might be triggered. The discussion around these indicates which contextual factors were critical, as well as recommendations and potential adjustments to inform these other programmes.

Since we are discussing personal interpretations of wellbeing and individual reasoning in response to a resource, these conditions cannot be replicated exactly, so there is no claim to infallible causation. However, some generalisations can be made to inform decisions about programme design for similar interventions. For example, the adults in this study have had a different experience of mental health services than the children and young people. Consequently, it was found that ideas around identity and difference were different. Music, which plays a significant role in identity formation (MacDonald *et al.*, 2002), can therefore strongly influence wellbeing in different ways. However, the effects are closely linked with the age of the participants, so this should be considered in programme design. To this end, the study did establish some translational knowledge, with the caveat that some details may need to be adjusted suit certain programmes, as one would expect from a methodology based on ongoing refinement.

7.2.2 Potentially useful evaluation approach

At least as important as the specific findings is the ability to demonstrate the proof of concept, that RE can be used to generate meaningful findings in music for wellbeing programmes. Realist evaluation was initially chosen for its aptness to social programmes, its philosophical basis, which allows for multiple causal explanations and as a response to the policy call for 'better evaluation'. Having gone from theory generation to reporting, and having encountered both methodological and practical limitations, I would confidently use the same approach in similar programmes.

If this study were to be repeated, I would make some adjustments (see p.213). However, iterative development and process improvement is part of the essence of realist evaluation, so carrying out more of this type of evaluation would not only build the data set on music for wellbeing interventions but would develop realist approaches in arts and health, e.g. experimenting with different forms of data collection and different reporting formats.

The approach used here addresses the policy need for better evaluation. To my knowledge, this methodology has not previously been used to evaluate music for wellbeing interventions. This study was successful in identifying specific findings but also demonstrated that RE can be used for this type of programme and that future programmes can benefit from similar evaluations, refining both the data and the methodology.

7.2.3 Lighting the way for more specific questions

If future research were to use findings from this study as candidate programme theories, the new data would serve to refine these further or generate new programme theories. All either indicate a direction for further research (e.g. understanding individual reasoning in response to perceived energy changes) or they support an established theme in music and wellbeing (e.g. musical identities), confirming its importance and relevance in particular context. Any of the refined programme theories arising from this research could be explored more critically, but that would have been a different study, answering a different question.[58]

[58] This study had natural limits imposed on the data collection and, in adhering to these limits, reported its findings with inference to the best possible explanation, as per scientific realism.

7.3 Research questions

7.3.1 What are the mechanisms that connect participatory musical activity with increased individual wellbeing?

Six programme theories were identified and refined, revealing some expected and some less predictable outcomes. These are described as CMOCs, which explain the mechanisms connecting music with wellbeing at the study sites. However, these differ as the context changes and their outcomes will also vary (in terms of individual wellbeing definitions). Different activities yielded different wellbeing outcomes: Music projects that involved multiple components, with various sub-categories of activity (e.g. song writing, which involves conceptualisation, lyric writing, selecting chord sequences and melodies; or recording, which incorporates both technical and artistic choices), had a distracting/engaging effect, leading to outcomes of praise, hope and self-advocacy (with a corresponding sense of empowerment). Activities that were more 'in the moment' (i.e. improvisation – from simple turn-taking exercises to more complex jam sessions and free improvisation) tended to affect energy levels and consequently mood and perception. This yielded immediate effects (a sense of balance) as well as subsequent effects (resilience) that were less easy to attribute directly to the music activity. Activities involving specific pre-existing songs or styles (e.g. cover versions and more idiomatic jam sessions) tapped into notions of identity (in particular projecting this to peers or more widely) and memory (either recollecting specific events or evoking a more vague emotional response connected with some past event), which also affected mood and increased wellbeing.

7.3.2 What does wellbeing mean to research participants?

It was indicated early on that ideas around wellbeing vary between individuals. Data from the visual elicitation task and from individual comments emphasised that pre-defined wellbeing concepts would limit the scope of the research. Although this study did not reach a conclusive definition for wellbeing, by allowing participants to describe and discuss wellbeing concepts on their own terms, the responses in relation to the music activity had more direction and were explored in greater depth than they might otherwise have been. This sub-question, despite remaining unanswered, nevertheless had an invaluable influence on the study design.

7.3.3 How can music interventions be designed to maximise increased wellbeing?

These findings underline the importance of understanding the needs and drives of the participant group, and yielded a set of recommendations that could be implemented in similar interventions. A principle of RE is that as one component in a CMOC changes, so do the others. Consequently, the overarching recommendation is to continue testing programme theories and CMOCs in different programmes. For instance: if an expected mechanism/outcome is not triggered in a

different programme, then the programme designer or facilitator might consider the differences (different contexts; different outcome targets), to redevelop the programme theory. Programme theories from this or from other music interventions might be used as a starting point, but it is likely that these will require adjustment until a 'winning formula' is achieved. A characteristic of RE is ongoing iterative refinement of programme theories. It follows that ongoing iterative programme adjustment yields more refined wellbeing outcomes. The programme theories developed in this study provide a useful starting point to achieve that aim.

These findings, if applied to the same programmes again, could strongly influence the delivery, facilitation and content of those programmes to maximise wellbeing outcomes – although it would be equally important to use the opportunity to further refine that knowledge. Since realist evaluation gains validity through further refinement (either through gathering more data within the same programmes or by testing and refining theories across programmes) and not through repetition, then the present study might be considered a starting point for similar interventions to evaluate, refine and improve their own outcomes. The recommendations here can be modestly generalised to similar interventions, but the overarching recommendation is to continue iterative evaluation, using realist principles, to develop and refine programme theories specific to those other interventions. This study demonstrates an achievable and effective formative and process evaluation method that can be adapted for use in other music-based interventions.

7.4 Summary of findings

Programme theories, expressed as CMOCs, elucidate the contextual and programme-specific factors that enable a music-wellbeing mechanism. The refined programme theories developed through this study are revisited here, with comments on their generalisability and recommendations.

7.4.1 Programme theory 1 – praise and hope

Context: Music activities that involve smaller components (e.g. song writing) were found to be particularly engaging for participants who are easily distracted or have short attention spans.
Mechanism: This resulted in increased opportunities to receive positive feedback from 'authority figures'. Praise became a resource that participants connected with the prospect of recovery.
Outcome: The possibility of recovery or release instilled a sense of optimism.

Praise can yield other positive outcomes (e.g. increased self-confidence) depending on the praise-giver (arguably a context-determined resource). In terms of the 'hope of recovery' outcome, this

CMOC is most effective when the praise-givers are perceived authority figures, as was the case for children and young people in an inpatient setting where behaviour was an issue.

Recommendations: In this context, music activities that comprise smaller components leading to a defined goal (e.g. song writing) were most effective in engaging participants, improving behaviour and generating praise. Whilst it is no surprise that praise is received positively, this CMOC indicates that song writing and recording activities in an institutional setting for young people enables specific and identifiable positive outcomes. It is suggested here that activities with a defined end goal (e.g. a song writing or recording project, which can engage a range of creative processes) are used in similar contexts to achieve these outcomes. Positive benefits of praise were seen at Chilli Studios, but participants were more cynical and distrustful of authority figures and their ideas around recovery were more complex. For this reason, it is also recommended that age range is carefully considered in terms of how praise might be received. A trusting and positive relationship between staff and inpatients enhances the value of the praise given. Participation of staff in the project was also observed to enhance trust in this context.

7.4.2 Programme theory 2 – energy

Context: Improvised musical activity was useful to participants who struggle to control excess energy (anxiety, hyperactivity) or a lack of energy (depression, tiredness). **Mechanism**: Musical improvisation enabled a sense of control by either reducing or increasing energy levels accordingly. **Outcome**: Wellbeing was felt to be increased by moving from a less desirable energy state to a more desirable energy state, yielding what participants described as a 'balance'.

It was observed that participants deliberately attended music sessions with a view to moving from a less desirable energy state to a more desirable energy state – either calming down or becoming more energised. This was particularly apparent at Chilli Studios, which had an open-house 'drop in' arrangement. The music activity here was predominantly improvised (jamming), so a basic level of musical ability was useful, although not essential. It is thought that the freedom allowed by improvisation was seen as a resource by participants, who had enough musical ability to adapt this – consciously or unconsciously – for their own needs.

Recommendations: Guided improvisation by a responsive and sensitive facilitator can be effective in helping people manage their energy levels, particularly those with anxiety or depression. This works best when a facilitator is able to respond to the dynamics of the jam session, speeding up/slowing down, or becoming louder/softer where necessary, as it enabled a dynamic range that accommodated various individual positions within the group. The presence of

a facilitator is important because in some circumstances, participants lack the confidence to improvise *ad hoc.* A strong focal point is also useful more broadly, at least in the early stages of an improvised music session. This CMOC could feasibly be reconfigured into more specific configurations that better reflect individual outcomes. It is therefore recommended that further research is carried out on the connection between participatory music activity and perceived energy levels in relation to anxiety or depression.

7.4.3 Programme theory 3 – recording

Context: The opportunity to record original music for dissemination (via CD or online) was available in both study sites and at CMS. **Mechanism**: Recordings are dynamic, replicable and portable, and are regarded by participants as a means to express or represent themselves creatively to others. **Outcome**: Recording opportunities were cherished by some participants and raised wellbeing by enabling a tangible means of self-representation, particularly for those who felt marginalised or were otherwise unable to represent themselves in more conventional ways.

This CMOC was observed at both study sites. The recording equipment/opportunity was a resource that enabled a subsequent resource (the tangible recording), which participants had some control over. There were differences between the two study sites; Ferndene recordings were the culmination of a song writing project and were presented to the participants during a celebration event. Data from this group indicated that they valued the opportunity to share their work with friends and family but also enjoyed the recording process in its own right. Chilli Studios participants were primarily interested in representing their perspective through music and the recording became their 'voice' outside the studio.

Recommendations: Recording technology is relatively accessible and can either enhance an existing project by yielding a tangible asset (as at Ferndene) or it can enhance self-representation (as at Chilli Studios). This technology can be easily integrated into music programmes either as a focus or an adjunct. Music programmes could enhance their activity repertoire by offering basic multi-track recording. Older participants were more prone to feeling the effects of marginalisation and social exclusion, so the opportunity for wider self-representation was important. Younger participants were more attracted by approbation from family and friends. These different motives should therefore also be taken into account when designing music activities based around recording projects.

7.4.4 Programme theory 4 – subculture

Context: Music activities that allowed participants to express or pursue a stylistic direction (e.g. covering songs or writing/improvising in a particular genre), aided by facilitators who can support those choices. **Mechanism**: Opportunities to pursue stylistic/genre preferences enable participants to express their identity within a democratically organised group. **Outcome**: This resulted in a sense of belonging (with, or in opposition to, a mainstream style) that positively impacted participants' senses of identity, resulting in increased confidence and even examples of leadership.

Ferndene participants responded positively to being given choices of songs to perform (which admittedly required some homework on the part of the facilitators) and were keen to demonstrate this to others; they valued normalcy and didn't want to be perceived as 'outsiders'. However, the data was scant because interviewees weren't able to articulate this concept particularly clearly. Evidence to the contrary was more robust at Chilli Studios, where the dominant styles were punk or so-called 'outsider music' and this corresponded with participants self-identifying as outsiders in society. Instead of trying to 'fit in', they deliberately identified and aligned themselves with anti-mainstream subcultures. Chilli Studios encourages members to celebrate their difference and this ethos was largely understood and embraced.

Recommendation: The claim that participants gain more enjoyment from working with music they already like may be self-evident, but some programmes or interventions are not equipped to follow trends and instead pursue a standard set of musical objectives. It is therefore recommended to create contexts in which participants can influence the stylistic direction of the music (e.g. cover versions). This may involve allowing for more democratic choice and less prescribed activity, or using structured activities that also allow stylistic openness, such as a recording project. Some circumstances will inevitably involve clashes, so careful attention should be paid to incorporating a democratic process (e.g. songs were nominated and voted for at Ferndene). Musical flexibility and open-mindedness would be required on the part of facilitators, who may have to research and learn about musical genres.

7.4.5 Programme theory 5 – resilience

Context: A positive outcome from a music activity becomes the context for subsequent CMOCs in relation to a different activity. **Mechanism**:[59] For example, heightened energy levels caused by the music session might trigger a subsequent CMOC related to productivity. **Outcome**: That later

[59] Because this programme theory exists at a different level of abstraction, it is best explained using an example.

activity – perhaps a routine task or a pleasurable activity such as painting – is more easily achieved due to the increased energy levels and therefore less of a challenge, so has its own wellbeing outcomes. In this study, this has been deemed resilience.

This CMOC is a special case, signposting the idea of a 'chain of implementation' (p.52 and p.182). Positive outcomes from music-related programme theories (e.g. energy balance) made participants' lives easier in some way, reducing challenge and increasing wellbeing at a later point. Despite operating in post-music activity contexts, the data supporting this CMOC pointed towards improved coping in everyday life and was classified under the umbrella term 'resilience'.

Presenting resilience within this framework is appropriate because it was a significant factor in many of the Chilli Studios interviews and in wider conversations in which participants described situations where the term could easily be applied. For this reason, it was too important to ignore.

Recommendation: There are no specific programme design recommendations to be made here, although it would be useful to encourage participants to pay attention to their feelings, energy levels, abilities, confidence and social attitudes following a music session. Learning to notice these would assist research on building connections between music and wellbeing, and may also yield some mindfulness-related benefits. These practices could be incorporated into music programmes even if they don't constitute a music activity.

7.4.6 Programme theory 6 – memory

Context: Activities that allow for participant-led choices (particularly around specific songs or sounds) were popular. Facilitators who had the skills to foster and develop these choices into musical outputs were vital resources. **Mechanism**: Some musical choices are governed by emotional instincts; participants showed an inclination towards music that reminded them of specific happy memories or evoked a positive emotion. **Outcome**: Access to positive memories or emotions was enhanced by specific music, which had a positive effect on emotional wellbeing.

This CMOC is contingent on the associations or memories that participants bring into the musical situation. Personal contexts therefore differ according to individual experiences, although some memories (e.g. of a particular era or time) might be shared. The musical resource in this case is opportunity and facilitation. This is similar to PT4 (subculture) although the outcome is more internal/less external. Facilitation can be more personal, intuitive and sensitive to participant requirements, bringing it into closer alignment with some aspects of music therapy. Interaction took place between participants and facilitators, who drew on improvising skills to bring about a specific musical mood or feeling that is evocative for participants. At Ferndene, this was achieved

through particular songs, whereas at Chilli Studios it was achieved through conversation, improvised musical interaction and the use of streaming music services via the internet.

Recommendation: Allow participants to guide musical choices, with a particular focus on emotions and memories. These are more personal and intuitive, so conversation and carefully cultivated trusting relationships would be particularly beneficial. There is some overlap with music therapy here, so some knowledge of this would also be beneficial. Communication between facilitators and participants is critical; allowing participants – many of whom have little formal musical knowledge – to guide sessions and to build on this in an emotionally sensitive way involves a considerable level of improvisational skill and sensitivity. Relatively easy music activities could include learning cover versions of songs; more complex/challenging activities could centre on improvisation in various styles.

7.5 Summary of recommendations

Programme theories are "never finished, but are always subject to further improvement" (Rieper *et al.*, 2011, p. 80). These programme theories offer the best explanation based on the available data but remain open to further refinement based on future findings in other music programmes. To this end, although recommendations can and should be implemented, ongoing evaluation is also essential to further understand how these mechanisms work, for whom and under what circumstances. With this in mind, the recommendations are as follows:

- Within a progressive inpatient context for children and young people, song writing / project-oriented activities can generate opportunities for praise, motivating a sense optimism in regard to recovery. Projects with multiple components and clear outcomes/end goals were seen to be more engaging and yielded more opportunities for praise giving and receiving. A trusting and positive relationship between staff and inpatients enhances the value of the praise given.
- Guided improvisation by a responsive and sensitive musician can be effective in helping people manage their energy levels, particularly those with anxiety or depression. This works best when a facilitator is able to control or respond to the dynamics of the jam session, speeding up/slowing down, or becoming louder/softer where necessary, as it enabled a dynamic range which accommodated various individual positions within the group. Given the potential for lack of confidence, good leadership within an improvisation session is crucial.

- Music programmes could be enhanced by offering basic multi-track recording. Older participants seemed more prone to feeling the effects of marginalisation and social exclusion, so the ability to create an object they can represent themselves with is important. This was the primary attraction at Chilli Studios, whereas younger participants preferred to self-represent to their families or peer group. These motives should be taken into account when designing music activities that involve recording projects. Basic knowledge of multitrack recording would also help.
- Create contexts in which participants can influence the stylistic direction of the music. This may involve allowing for more creativity and less prescribed activity. Some circumstances will inevitably involve clashes and would therefore benefit from incorporating a democratic process. Musical flexibility and open-mindedness would be required on the part of facilitators, who may have to research and learn about musical genres. Cover versions of songs are popular in this regard, although care must be taken to ensure these are not too difficult to achieve, which may result in frustration.
- Allow participant-led musical choices, with a particular focus on emotions and memories. These are more personal and intuitive, so conversation and carefully cultivated trusting relationships would be particularly beneficial. Communication between facilitators and participants is critical; allowing participants – many of whom have little formal musical knowledge – to guide sessions and to build on this in an emotionally sensitive way involves a considerable level of improvisational skill and sensitivity. Cover versions are also a factor here, but stylistic fluency may have a deeper influence.

Most of these recommendations apply to both study sites albeit with nuanced differences, mostly based on age range (Figure 17, p.161), which was the significant difference and should be carefully considered when designing future music programmes. Used in combination with other specific intervention designs, tailored to the client group, these recommendations may enable more efficient achievement of planned outcomes and consequently better value for money for music-based interventions. This study's findings go some way to a) signposting likely explanatory mechanisms which could apply in similar contexts and b) if these are not triggered in similar contexts, then the framework exists to enable further exploration of how programmes do work.

7.6 Significance of this research:

7.6.1 To policy and practice

Given that investment in arts and health programmes is often hard-won, a range of detailed evidence gathering approaches is important to ensure continued funding in the current economic context, which over recent years has seen arts and culture budgets reduced (see p.4). One such approach is to generate evidence that not only shows clearer links between arts and health but also generates recommendations for similar programmes or interventions to achieve better outcomes and value for money. As evidence of this type accrues, the case for using creative arts interventions to achieve real health and wellbeing outcomes – saving potential future expenses to core health and social care services – is strengthened. Findings from this study could enable more well-defined programme outcomes, a better understanding of the activities that are effective in achieving these, and a greater awareness of the circumstances in which these work best.

The report to Youth Music seeks not only to account for the funding, but also suggests better ways of evaluation. Youth Music is funded by the National Lottery and ACE, and therefore has some public accountability. It is too early to ascertain the impact of the FYMP on Youth Music, although funding has been awarded for a second project building on this first one, suggesting that this study's findings have been deemed useful by a publically funded body and demonstrating some impact. This evaluation method, which identified programme theories directly relevant to the Ferndene programme, demonstrated a means of gathering meaningful data that had not yet been used by Youth Music.

Wider claims to influence policy and practice should be made cautiously, although this study's findings contribute to an evidence base that could enable better questions to be asked of similar creative interventions. In terms of outcome evaluation, this methodology allows us to identify narrower targets such as hope, socialising or control, within the more broadly defined concept of wellbeing. Critically, this research shows that when evaluating arts and health interventions, it is possible to ask more specific questions to get better data and to ultimately spend money more efficiently.

7.6.2 More specific impacts

This research highlighted important findings in relation to the needs of different client groups when considering the design of music programmes for wellbeing. These, along with quantitative data collected by the facilitators, are summarised in a report for Youth Music (Hackett, 2017),

which will be used to inform similar programmes and to justify future spending.[60] Youth Music gathers evidence from all of their projects to further their aim of using music to improve the lives of children and young people in challenging circumstances. This study therefore contributes to a broader evidence base that will not only inform Youth Music about project outcomes, but also about evaluation approaches. Aside from the specific programme theories, a significant outcome for Youth Music is finding ways to capture the multiple benefits yielded by their programmes. This study explores a methodology that has not been used to evaluate music programmes of this type before.

Sage Gateshead also evaluate their programmes (many of which are funded by Youth Music) and are always looking for ways to improve this process. An unexpected outcome of this project was that I was asked by a senior manager to write a visual elicitation protocol (see appendix 3.3, p.267), which is now being piloted in Sage Gateshead's own evaluation of their projects with children and young people. This was deemed particularly useful for participants with communication difficulties, enabling a focal point for conversations and feedback.

Less prescribed settings, in which changes can be implemented quicker and more directly, perhaps stand to gain more immediate benefits from this type of evaluation. Chilli Studios' music offering is less programmed and therefore more flexible in terms of making adjustments based on participant feedback and in the way it delivers music resources. Discussions are ongoing (as of November 2016) regarding the studio employing another music facilitator whose skillset aligns more closely with current service users' needs, partially identified by this study.[61] I have also been asked to co-write the Studio's 2016/17 evaluation, which will incorporate findings from this study and further primary research based on realist evaluation.

Some programmes are well established (Community Music Spark has been running for 10 years) and have developed in response to the needs of their participants over time. Instead of implementing recommendations, programmes such as this might instead test changes by initiating discussions around this study's findings, exploring participants' drives and understandings of the various functions of music. This was seen to be valuable in the focus group

[60] The FYMP was awarded a second round of funding in late 2016, indicating that the project was deemed successful in the eyes of the funders. The design of this second programme was informed by findings from this study.

[61] The studio currently employs a professional musician and a disability studies graduate to facilitate music sessions, but has recognised a knowledge gap around wellbeing and music.

and therefore had a small impact, inspiring debate around some developing programme theories. There is potential for the present study to inform their next round of improvements.

This study has therefore impacted the study sites in different ways and has potential for wider impact. The refined programme theories, in some cases, provide a road map for use with other community music programmes. To this end, the principles of this research, as well as its findings and recommendations, are to be summarised in a report (Hackett, 2017) for use by institutions such as Sage Gateshead, where new music programmes are instituted regularly.

7.7 Research journey

Being new to social sciences, it took me longer to navigate questions around realism and data collection methods – significant decisions usually made at the beginning of a study. Progress was also delayed by the ethics application, which was necessarily detailed. Working in an NHS setting with children and young people who have mental health issues and/or learning disabilities required both internal (university) ethical approval and NHS research approval, applied for through the IRAS system. This is not the most intuitive system, but its complexity ensures a good level of rigour in the research design. The delay in gaining ethical approval (which took about four months) was frustrating at the time, but was eventually valuable to the study, as it forced me to ask questions of the study design I may not otherwise have considered. My research with vulnerable adults in a community (non-NHS) setting was less complicated ethically, but the lower safeguarding around this group made me feel an increased sense of responsibility. Nevertheless, the time taken to navigate these systems allowed me to refine the interview protocol, develop a time-saving visual elicitation method and learn more about participant-observation and field note recording.

Data collection also took a long time. Arranging interviews was difficult, especially with the younger participants, whose stay at Ferndene was often brief and whose interactions were strictly governed according to safeguarding protocols. Following two months of observation, it took a further four weeks to gain interview access to the first FYMP participants and subsequent interviews were at the mercy of the institution. Because of this, the observation period was extended. Whilst initially frustrating, this enabled a better relationship with participants and gave me more time to interrogate programme theories during informal conversations. Similar difficulties were encountered with participants at Chilli Studios, although this was more to do with finding mutually agreeable meeting times and working with their schedules.

Data analysis was relatively quick; the realist paradigm minimised the potential complexity that theoretical interpretation would have brought about. Most interviews were relatively straightforward and I was able to clarify points with interviewees either at the time or during subsequent sessions. Being 'realist', the analysis was not filtered through any particular grand-theoretical lens and although certain issues arose (e.g. catharsis or unconscious motivations and desires), these were identified as being theoretically/interpretively nuanced and I chose to focus on unvarnished themes.

7.7.1 Limitations of the current study

Having reviewed the research journey, this study's limitations are brought into sharper focus. Some are practical (and common to PhD theses), such as the small data set; others relate to my (at times irregular) understanding of both realist evaluation and the data collection methods. To this end, the following limitations are acknowledged.

- More similarity between study sites (e.g. all adults or all children, or similar challenging circumstances) would have been useful. Their differences emphasised contextual factors, allowing for some interesting insights, but similarities would have enabled a more in-depth comparison.
- More participants or more iterations (i.e. more interviews to test programme theories at different stages of development). I relied on ongoing observational data and informal conversations to clarify information, but multiple interviews at regular intervals may have enabled a subtler, more granular refinement process. The issue here was largely to do with access and some programme theories still feel a little 'rough around the edges' and could arguably have been further refined within the study.
- Using the new reporting standards (Wong *et al.*, 2016) may have helped organise my thoughts around realist evaluation and acted as a guide to writing these findings. For this study, it was a timing issue; much of the writing was done by the time the guidelines were published.
- Had the opportunity arisen, I would have made greater use of 'validation sites'. The Community Music Spark focus group was useful in terms of exploring the programme theories and, even when these were not relevant to that group, the discussion was useful nonetheless. Were I to repeat this study, I would introduce at least one extra layer of focus groups.

7.8 Suggestions for future research

Based on this study's findings and limitations, the primary recommendation is to do more realist evaluations – either in more detail at a single study site, or using a more formulaic method implemented across multiple study sites. This would not only help the cause for music and wellbeing programme evaluation, but ongoing refinement is also a broader recommendation of realist evaluation. More specifically, some of the programme theories described here would strongly benefit from further research, particularly resilience (which is more abstracted than the other CMOCs). The present study identified that resilience is linked to music activity, but takes many forms and therefore merits further study. Arguably, each programme theory could be explored more deeply, especially those where differences were found between the study sites. These could be refined into more specific CMOCs that give greater acknowledgement of contextual differences and therefore yield more granular detail with possibly greater predictive capacity.

7.9 Final words

Arts therapies struggle to compete with more empirically evidenced medical interventions. "If you're competing with hospitals, you'll lose" (Jenkins, 2015). This is undoubtedly true, but we can still make best use of the knowledge and resources available.

This study looked at a set of circumstances unlikely to be replicated in quite the same way anywhere else. However, it revealed a constellation of themes, theories and connections, some stronger than others, which lead to positive wellbeing outcomes. Some of these findings will apply in similar contexts. These programme theories and their recommendations not only have the potential to inform similar interventions, but are also candidates for further refinement through these interventions. They are indicative but are not an end point. Some strong signposts have been identified, enabling specific questions to be asked that might otherwise be overlooked if the data were not theory-driven.

The programme theories described here, as well as the data and literature that marshalled their development, reflect a fraction of the vast corpus of music/health knowledge. Their original contribution to knowledge is therefore quite specific (although they mean a lot to the study sites concerned). However, the configuration/synthesis process demonstrates a useful way of gathering data in a manner that is amenable to the fluid and dynamic nature of social programmes – particularly those with difficult to measure outcomes such as wellbeing. This study demonstrates that there is value in the *combination* of observations and outcomes generated

from these two study sites, and the way their supporting evidence accrued iteratively to develop specific theories. It is this combination and the approach that is new, offering an insight into a formative and process evaluation method for arts and health programmes, whilst also generating new knowledge to inform similar music programmes.

Returning to the origins of this research, a huge amount of anecdotal evidence exists for the wellbeing benefits of music activity. This is acknowledged in both academic and government papers, but struggles to translate directly into policy due to the lack of cohesion in that evidence base, leading to a general call for 'better evaluation'. This study answers that call, having found viability in the use of realist evaluation. Specific programme theories have been identified for the study sites involved and the process has also yielded results and recommendations, contributing to the debate around arts for health more broadly. There is clearly great transformative power in such interventions, within or without programme frameworks, but this needs to be harnessed and presented to policymakers in a rational, economically viable way. Realist Evaluation can be used across a range of programmes to collate a data set of programme-specific or more general programme theories. It benefits from wider usage, but is in principle easy to implement and appropriate to a range of contexts and data collection techniques, and can be used to develop existing programme theories or generate new ones.

In an ideal world, programme theories could be devised and recorded for each intervention, following a simple model. These could then inform the design of new programmes or be refined in an ongoing way to form the basis for funding decisions or further development. I am not calling for a single evaluation method to be used in arts and health, but am suggesting that the principles explored in this study might breathe life into a potentially vast policy area of non-clinical / alternative health interventions. This could not only contribute to the economic arguments for arts funding, but might also alleviate some of the frustration felt by researchers, arts and health practitioners, and champions of cultural/social interventions. Arts and health is an ancient field that has yet to achieve its potential in terms of health and social policy. The more evidence, of all types, we have to support these approaches to wellbeing, the broader and more effective western healthcare can be.

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APPENDIX 1. CANDIDATE PROGRAMME THEORY TABLE

Notes and ideas used during the early data collection. It initially became swamped with observations I had expected to see more of or discuss in interviews, but most did not come to pass. The spreadsheet indicated which candidate programme theories had viability, or had multiple pieces of supporting evidence. Categories and candidate programme theories are listed on each row with comments, observations, literature sources and interview quotes running across the page. The spreadsheet was abandoned after about six weeks, when specific programme theories emerged and began to be developed on their own terms, using NVivo software. The following pages contain a sanitised version of this spreadsheet.

Candidate PTs (not in CMOC form - just ideas) ***33 items***	**Supporting literature: Academic or programme-related**	**Evidence from data collection and/or programme literature** **Iteration One**	**Specific examples from observations and reflection** **Iteration Two**	**Tentative PT - less prominent cPTs discarded** ***9 items***	**Supporting Observations**	**Supporting Interview quotes (who/what) detailed**	**PTs for further examination** ***6 items***
Energy related							
Diverts excess energy, which may cause problems, e.g. behavioural or anxiety-related. Formalised / structured / socially acceptable activity enables a framework for this energy to be diverted. C.f. catharsis.	Instructional and improvisational models of music therapy with adolescents who have attention deficit hyperactivity disorder (ADHD): A comparison of the effects on motor impulsivity. (Rickson, 2006) A survey of music therapy methods and their role in the treatment of early elementary school children with ADHD. (Jackson, 2003)	E.g. F11 and the gong. He really wanted to hit that gong, but was able to 'hold it in' until certain musically appropriate points - this resulted in a round of applause.	Not particularly apparent in Chilli Studios.	ADHD as context? Music is a facilitated mechanism to dissipate some excess energy. Outcome is positive for CYP whose behaviour is seen to improve and they receive +ve reinforcement from staff. Some Chilli Studio people talked of music releasing 'pent-up', or nervous tension. Catharsis or distraction? Implicated in CMO2a.	Numerous instances of CYP at Ferndene having excess energy and music activities appearing to give focus and 'calm them down'. Wellbeing outcome was praise from staff, which seemed to raise mood	F1 - acknowledged her own diagnosis of ADHD and that when she was able to focus on something, she was less hyperactive. Noted that her improved behaviour was a step towards being released from hospital. F10 also noted similar, but cynically added that it was about 'understanding the rules of the game'.	**CMOC1** - Energy. Kids are able to redirect their energy into the music activity and receive praise, which they see as a route out of incarceration.

Similar to above, but (re)focuses or diverts attention, rather than energy, i.e. distracts. C.f. Mindfulness or meditative activity.	Mindfulness, attention, and flow during music listening: An empirical investigation. (Diaz, 2013) "music is distracting". (MacDonald *et al.*, 2012a, p. 5)	Observation: Many of the young people at Ferndene were very easily distracted and this was apparent at the beginning of each session, but lessened when we worked together on a song.	Some Chilli Studios members used the word 'escapism' in reference to the music sessions, implying that the session was able to divert their attention away from something negative.	This merits more needling. Key is control. In both cases, music affected energy levels - perceived or physical (as chosen using the cards and discussed) in a way that gave the participant more control. In FYMP, this linked with +ve reinforcement for good behaviours. In Chilli Studio, it was closely linked to a deliberate act of controlling energy and mood levels to reduce stress or sadness. Energy could go up or down, but on closer analysis, it was about the quality of that energy - possibly CMOCs combined.	Mindfulness/meditation was not mentioned by any participants, but the activity did seem to have a distracting effect.	Some Chilli Studio members initially mentioned using (listening to) music to relax and one interviewee noted that when he raps, it gets him into a more creative state of mind, which he puts to use through painting, drawing or make more music.	
Stimulates attention; arouses, excites, or otherwise 'gets through' to those who may be difficult to engage otherwise.		Many participants mentioned that it raises their energy levels. Many Chilli Studio ones were depressed.	One studio member - "sudden charge or boost". Doesn't get depressed, but usually has low energy.		'Buzz' after jam sessions.	One studio member specifically uses music activity to become "manic" in a safe way (he has a diagnosis of bipolar disorder).	**CMOC2b** - ALAN - raises energy levels, enabling things to be done later in the day.
Motivates or stimulates physical energy, e.g. through dancing, exercise or the physical action of playing an instrument.	Music and exercise/motivation literature.	Chilli Studio - some of those who drummed said it 'woke them up'	Ferndene - there was some thinking behind having the sessions on a Monday afternoon; traditionally a low energy point in the week for many inpatients.		Chilli Studios participants talked of energy, but not in a physical way. Ferndene children enjoyed the physical games and warm up activities prior to the session.		

Energy gained from a performance - can generate a 'buzz'.	Children's perspectives of participation in music youth arts settings: Meaning, value and participation. (Barrett & Smigiel, 2007)	FYMP celebration events - lots of energy gained from the pressure of performance and particularly positive feelings afterwards. Chilli Studios - tangible 'buzz' felt after a successful jam	Even I get this		Buzz' after jam sessions.	Need people to describe that buzz as a more positive thing, rather than excess energy, but more 'flow'-ing energy.	Catharsises nervous tension in a socially acceptable way (Chilli Studios); adults who have to self-regulate their interaction with the world. This enables other things more easily dealt with (hints at resilience, although nobody called it that).

Content related							
Opportunity to express own perspective/narrative.	Talking therapy adapted to musical expression or vocal expression through singing or communication through writing lyrics. Music, language and autism: Exceptional strategies for exceptional minds. (Ockelford, 2013b)	MMc albums; MC rapping; Jack (not interviewed) expressed that he wanted to write about "emotions and anxieties".	Most successful FYMP sessions were song writing. Jack (FYMP) mentioned that he felt good after writing lyrics.	In the context of challenging circumstances, many Chilli Studio members talked of being marginalised, especially in relation to mental health services; many of the kids also felt 'not listened to'. There was some anxiety around choosing lyrics, but more enthusiasm. As this evolved into a song, things got better.	Several Chilli studios members had their own recording and song writing projects on the go, all of who expressed their own unique perspective through lyrics and in some cases, musical style.	F2 had ideas of writing rap lyrics once he had left Ferndene. These lyrics would concern his relationship with his father and "riding around on my bike".	CMOC4 - Expression. Representing self to a world which apparently does not relate easily. Serves some higher need to communicate and feel integrated, or even explain aberrant behaviours.
Emotionally cathartic (different to the above; involves more of an 'articulated message' that cannot be put into words). Gives 'voice to the ineffable'	From mimesis to catharsis: expression, perception, and induction of emotion in music. (Juslin, 2005)	F8 - likes to scream along to loud music. Mentioned in interview, but not observed in FYMP sessions. F11 Gong?	Possibly more evident in Chilli Studio sessions, but not critically so.	DISCARD. Not quite enough here - FYMP was too 'governed' and, although it was more evident in Chilli Studio, there were also pressures to conform, which may have inhibited free expression.	Gamelan session for young people with LDs – many had difficulty communicating verbally, but were all very expressive using the gamelan equipment (except one, who was hypersensitive). This was not a study group - but was interesting.	No one really mentioned that they were trying to express themselves through music alone - although interviewees were selected on the basis of their ability to hold a conversation, so this may have been the case, but it was not possible to explore the idea further.	

Subject matter music may provide something to 'latch on to', either musically or thematically, potentially triggering a therapeutic response.	Chapter about uses of music therapeutic principles, allowing people to talk about things meaningful to them. (MacDonald *et al.*, 2002)	The cartoon characters and island songs were successful - but was this the group or the activity?	JS, MMc and MC at Chilli studios all write lyrics about their own experiences with mental health and the music reflects this to an extent.	Conversely to the PT about expressing one's own narrative, this is more related to the opportunity to engage with meaningful subject matter, i.e. an audience isn't necessary.	Positive examples of catharsis - mainly observed at Chilli Studios. Writing about positive things (the island song) was seen to be engaging at Ferndene, however, no one mentioned this during interviews.	J - from Chilli Studios - improvised a song about "Man in a big house", a memory which made her feel uncomfortable, but she claimed she felt better after we'd played the song.	

Musical style connected with a subculture may engender a sense of belonging.	(Hebdige, 1979; MacDonald *et al.*, 2002; North & Hargreaves, 2012; Bowes *et al.*, 2015) The 'open-earedness' hypothesis and the development of age-related aesthetic reactions to music in elementary school children. (Kopiez & Lehmann, 2008) Preference and prejudice in music: A psychological approach. (Hargreaves, 1982) Zygonic theory - imitation is the ultimate organising force in music. (Ockelford, 2013a)	Chilli Studio participants had their preference, with punk coming through strongly. Younger people, males, (FYMP) really liked Rap and the very young all were into 'Frozen' (triumph of marketing)		Context of feeling marginalised socially, or adrift. CYPs would routinely make reference to 'cool' tracks or styles and this was slightly evident in the music activity (or the music activity was seen as a potential route to these cool things). At Chilli Studio, there was a strong reference made to 'outsider' music, punk and rebellion. It might be the age thing, but was also political.		MMc relished the idea of making outsider music - to "stand out from the crowd", which he tended to view with disdain. Opportunities to choose musical genres at Ferndene were much 'safer' and focussed on mainstream/ popular media. This was implied by some young people, who made reference to 'normal' life.	CMOC4 - attachment to a subculture provided an anchor and even in some cases, an identity. This is a broad discussion topic, but music does enable stylistic themes and also subject matter themes to be articulated. Modelling - positive or negative role models.

Sound-related							
Sonic properties have a range of benefits. Active music making may reinforce these effects.	Based on the dubious work of Alfred Tomatis	Seemed to be both. They enjoyed listening to calmer music, but also expressed a preference for playing.	Was expressed by some, but no mechanism identified - or rather, it wasn't articulated.				
Relaxing - certain sounds or the physical actions associated with making those sounds can reduce tension.	Impacts of music on pain and sedation. Recent R4 documentary and also lots on the use of music on anaesthesia. Music and pain. (Mitchell & MacDonald, 2012)	Was mentioned in interviews - soothing. Piano girl (F3) and F8.	F3 specifically mentioned that she liked to play the piano (though she doesn't know how) because she likes the noise it makes "gentle, soothing and quiet". It was mentioned that she is hypersensitive, particularly to loud noises.	Challenges of having MH difficulties: incarcerated, dealing with a 'system', many not employed, being creative (MMc) resulted in extra stresses. Music participation was deliberately chosen to distract and reduce these tensions, resulting in less tension and better engagement/sleep/anxiety.		F8 spoke of playing instruments at home, which make her feel calmer after she has been angry. She likes to play loud and was the one participant at Ferndene who expressed a preference for heavy mental (Motorhead, 'Ace of Spades').	CMOC2 - the actual sound of the instrument (and perhaps also the physicality of playing that instrument) can reduce excess tension, anxiety, energy.

Similarly, music can increase energy levels and consequently wellbeing.		More mentioned by the Chilli Studios members - in that they consciously took part in music sessions to gain a handle on their energy levels, although this was mentioned tangentially by some Ferndene CYPs	Prior to some jam sessions at Chilli studios, there was a palpable discomfort (some people were irritable, nervous or tired); this was gone by the end of the session, when most people appeared much happier.	Context of difficulty controlling energy levels (Chilli Studio and FYMP), this enabled a little more control over the process. It was consciously done and energy was connected with wellbeing and feeling 'alive'.		I asked about mood changes, but most interviewees found it difficult to explain their moods, instead referring to 'energy' and achieving a balance, where they weren't too tired or too alert - this seemed to map on to depression and anxiety.	CMOC2a and 2b - JF and Al at Chilli studios explained how they modified their energy levels from a less desirable state to a more desirable state through musical improvisation.
Similarly to the more specific idea of reducing energy levels, some sounds can have soothing properties, which may bring about a sense of wellbeing.		FYMP - those hypersensitive stated that they would have enjoyed it more if the music had been a little quieter/calmer - but critically, they wanted to participate despite the risk of noise. Why is this?		Possible resilience - seeking to try something that carries a risk.			
Synaesthesia	Separate literature base for synaesthesia - mainly: Visual music: synaesthesia in art and music since 1900. (Brougher & Zilczer, 2005)	N/A	Potential for this with those who may have schizoaffective disorders - but was not mentioned.				

Music provides a 'vessel' for narrative		Marty. We would jam, and he would improvise lyrics over the top, describing his past experiences. Also Jeff, describing his present experience.	FYMP kids were encouraged to write a story - this was fairly basic, but they then 'told' the story using Gamelan instruments. Was interesting and enjoyable for some (not for others), but I don't feel any of them did it at a personal level.	When this was done, it was cathartic for Marty, who talks about his life through his lyrics - and for MMc. Jeff, this is more about energy. Dreadlock woman had a spiritual connection and this was enabled in an accepting and positive environment. In these types of session, there is no judgement.			CMOC4 - self expression

Other							
Spiritual connection?	Music of John Tavener The Music Mind Spirit Trust – http://www.musicmindspirit.org/index.html Medicine, health and the arts: approaches to the medical humanities. (Bates *et al.*, 2013, p. 11)	Not mentioned - denied by the one religious guy. Was mentioned in passing during initial meeting at Chilli Studio. Dreadlock woman?	Christmas was a big thing, but this is more to do with memories invoked. Literature from music history / liturgical music > new age/ambient.			G, at Chilli Studios had a "personal relationship" with God and channelled this through her singing. She spoke a lot about spirituality and religion, and of her 'misdiagnosis' of schizophrenic delusions. However, she also had a chaotic personal life and I wasn't able to interview her.	

Changes perceptions of the world, which can have a lasting effect, altering wellbeing in the hours after the activity.		Mainly mentioned with reference to listening to music, although it was noted (Chilli Studio) that music changed mood, making it easier to travel home.	(E.g. on public trans.). Not mentioned by FYMP kids (and not able to observe). Was mainly linked to listening to music, rather than playing.				Ditch the idea of 'flow' (although this doesn't mean it wasn't present) - but changing perceptions of the world in order to deal with things outside the music activity. CMO6 - changes perceptions. Is also related to CMOC2 CMOC5 - Resilience?
Can benefit other activities which may have wellbeing outcomes (creativity, learning, etc.)	The Mozart effect; Tomatis; Csíkszentmihályi	Albert - liked the change music gave him, so he could go back to his art. Not really observed in FYMP.	Aah, but it was. Martin, who used music to 'flow' (consciously) in order to devote his cognitive energy to other things.	Possible flow reference, but only really one person.		Many interviewees from Chilli studios spoke of feeling more confident, productive, able in the hours after a music session (on the same day)	
Aids physical development (general coordination or specific instrument skill), leading to pleasure and/or a sense of achievement.	(Overy & Molnar-Szakacs, 2009). (Wiltermuth & Heath, 2009).	Has helped with my own improvisation and bass playing, including stamina. Not really mentioned by others.					
Helps guide physical activity, e.g. by timing, rhythm, mantras, memory, exercise, meditation…							

Tangible product (CD, album, recording) - as an artefact or memento reminding participant of their achievements or of positive wellbeing benefits gained during the activity. Tangible product (CD, album, recording) - enables a means to represent self.	Nothing particular mentioned in programme literature, although Chilli Studios seeks to furnish the music room with recording equipment, based on user feedback. Most academic literature focusses on the process, rather than the musical product.	MMc's album and the more successful FYMP sessions were the ones with a CD at the end, rather than a proposed performance. Chilli Studio people wanted to put stuff on SoundCloud with a view to 'representing' Chilli Studio.	FYMP kids were involved in a few recording projects and this was engaging in itself (the process). However, there was some excitement around receiving a CD of their efforts. Those who spoke of this, looked forward to playing it to their parents, families and friends.	In a world where the participant finds it difficult to articulate themselves or represent themselves to others, working towards a tangible product gives them something to show their family or friends. In the case of MMc, it was about being creative and representing himself. In the case of FYMP, it was about showing that they could produce something and 'showing my mum and dad'.	This was significant at Ferndene, where a CD was 'the prize' for working well as a group; at Chilli Studios, where individuals could represent themselves through online distribution; and also at the focus group, where the key was having a political message to convey.	MMc - I'll burn off a few CDs and send them out to record labels; he had some hope of getting "distributed to someone on the other side of the world, who might like it". Was also interested in online distribution, but not savvy to how this works.	CMOC4 - self-expression, particularly through the creation of some form of artefact, which makes the expression portable (can play it to parents or friends). Very appealing to kids (their own CD recording had novelty value, but the adults really wanted to be able to represent themselves in a more impressionistic way.

Observations						
Context: Surrounding activities - icebreakers, but also ideas generation. Fun?	Which of these have the best explanatory potential? Test them through literature, then through data. These are hypotheses; testable propositions	Wellbeing definitions are decided as part of the interview process to give me and the participant some agreed terms to talk about and to build questions around. If wellbeing is about feeling in control and/or balanced, then I ask: why does x make you feel in control? Response to the difficulty encountered in defining wellbeing for this study.				

Emotional [???]							
Depressive - minor key music may communicate depressive feelings which the participant may find comforting - having something to identify with; feeling less alone?	Robert Burton? Complicated by the article on goth subculture. (Bowes *et al.*, 2015)	Seemed to be a preference for 'happy' music, although MC noted that he could go 'bleak' if needs be, whilst holding on to his self (control).	Al at Chilli Studios noted: "sometimes you don't want cheery music".	Not significant enough. Mood was discussed a little, but not so much depression and not minor key music. Also wasn't approached at Ferndene.			
Cheery - cheers you up. Major key is linked with 'happy' feelings - lots of reasons, but this research is interested in mechanisms indicated by participants.		With the FYMP stuff, it seems linked to happy memories: family, cartoons, films and friends.	The song 'Happy' was cited as (yes) a happy song.	Music listening and participation invokes memories, which can bring about a change in mood for happier times. With the FYMP kids, it was more listening to music; with Chilli Studio people, it was playing in previous bands and to do with previous life (before being in services). This may emerge more as people get older.	'Happy' was eventually covered by the Ferndene group and performed at the 'celebration' event. This was a triumph - not only did the young people enjoy the song itself (a recent chart hit) it also lifted the mood when we were able to perform it through successfully.	Many of the songs written by MMc had an upbeat feel, contrasting with his dark lyrics - this, he told me was because he only really knew how to write '60s garage style' songs, which tended to be major key and up-tempo. It cheered him up because he likes that music, but is also symptomatic of his limited musical knowledge.	CMO7 - music activity is linked with memories of happier times. Can't be this simple - but it could be and was mentioned by a few people.
Helps maintain a positive feeling: "ride the wave".		An FYMP facilitator: uses music as a coping mechanism to maintain their mood at work…	"Ride the wave" - was mentioned by someone at Chilli Studios, mainly in reference to maintaining a positive mood.				CMO5 - changes perceptions.

By extension to the above, could it be a means to achieving a sense of 'Flow'? Worth exploring.	Csikszentmihalyi	Colin - mentioned that he uses music (listening) to help him do other activities (drawing). F7 also achieved 'flow' during music, which 'freed his mind up' to pursue other things.		An interesting aside; F7's theory on music freeing him up to think about other things - indicates 'flow' (he had a diagnosis of ADHD and is very talkative - a lot goes on in his mind).		Flow' was not mentioned specifically by anyone, but the use of music as a catalyst for other mental activity was implied by some participants. This was not explored in much further detail.	
Associations with memories of other experiences, which may be connected with positive (or negative) emotions.	Music therapy literature heavy on associations; focus on psychodynamic theories e.g. transference.	Strong with the FYMP crowd. Also, with the Chilli Studio wider crowd, this was mentioned a lot in relation to Christmas.	Not really mentioned after Christmas at Chilli Studios. However, some music sessions were augmented by using YouTube to access songs to play along to - this usually ended up on a nostalgic trip.	Linked.	Young people at Ferndene were particularly engaged with writing music or doing activities that had a strong happy association - many of them also talked about listening to music that reminded them of a happier time outside of the hospital.	Many comments regarding music listening reminding participants of happier times. Jn's song, 'the man in the big house' was attached to a specific (frightening) memory and was actively made part of the music session.	CMOC6 - clearly a lot of evocation and associations linked with music, but this seems more to do with passive listening, rather than active playing. Worth exploring as a motivation of musical choices during the activity.

Social							
Provides a centralised focal point to draw multiple attentions and facilitate communication an interrelationship between people. *Co-pathy*	(Huron, 2001).	Older people in the initial Chilli Studio groups expressed more interest in choir work and singing together. Indeed, a carol group was formed.	Not mentioned particularly by any participant (though chilli studios members spoke of the studio in general terms to do with its impact in their social life.				
Enables practicing social interaction, e.g. finding one's place in a musical conversation; understanding and practicing when to use sound and when to stay quiet.		More relevant to the kids, especially when we performed cover songs with different 'parts' to perform - and dynamic range. Chilli Studio also, as it was mostly improvised jams.	Is linked with 'I behave better…' (F1)	People who have had difficulty integrating and/or socialising with others - either as a direct result of behavioural issues (FYMP) or through marginalisation due to mental health difficulties. Places and roles are established and when this succeeds, the result sounds good. Evidence was immediate – smiling, cheering, congratulatory…	Lots of evidence here from the FYMP sessions. Team work etc.	F1 noted that she behaves better with other people when they work on a complex task (e.g. song writing. She was also involved in some peer to peer learning that happened during the sessions - this was not expected, but was deemed a positive outcome and was praised highly by staff at the time.	CMOC1a (see group therapy analogy). Is a sub-CMOC in that it was never really articulated in programme literature or in interview, but it was detectable when sessions went well. In other words, it was a mechanism that was heavily implied, but never raised its head above the water except for a few tantalising clues (e.g. F8).

Enables an alternative form of communication (between participants, rather than outwardly).	MacDonald and Wilson.	Palpable in Chilli Studio jams - but not directly linked to a wellbeing outcome.	Some FYMP exercised (conducting and 'call and response' activities) allowed for this - but these were somewhat prescribed.				
Working on a cohesive artistic endeavour can engender a sense of inclusion within a group. May increase wellbeing if social exclusion has been an issue.	(Rilling *et al.*, 2002). (Kirschner & Tomasello, 2010).	Palpable sense of excitement and positivity following a successful Chilli Studio jam. Perhaps different for different people. FYMP - CD production.	Production of artefacts made people happy…	In circumstances where participants may have some musical talent, but not the means to demonstrate this outside of the music sessions, then an artefact becomes important. It enables them to access praise and applause from people outside of the group. This creates a 'bridge' and is also empowering.	It emerged that the wellbeing outcome from working on group projects was more to do with representing ones efforts, rather than the group work itself.	Interestingly, MMc drafted in some of the less prominent studio members to contribute (voices etc.) to his album. This seemed pleasing to both MMc and his 'contributors' (who weren't interviewed, as they never otherwise used the music room).	CMO8 - Immediacy. There's something here possibly, but it may be part of an iterative chain with some other wellbeing outcome, e.g. of having an artefact (to represent self), or of raising energy levels (palpable sense of excitement).
Having to perform in front of others (not necessarily solo) is an opportunity to practice confidence in a safe environment - linked to 'control' - is a gauged way of expanding confidence..	Poster presentation at SMHN conference, Glasgow 2015. "Neurological benefits of performance anxiety".	There were elements of confidence levels being enhanced. Kids seemed fine; at Chilli Studios, there are more shy people and they only attend sometimes. In fact, the regular studio users gain a sense of wellbeing from trying to assimilate new people - this isn't so much confidence as altruism.	Confidence not mentioned explicitly in interviews, although it appeared to grow naturally during sessions (though you would expect that over time).				

Practicing, performing, playing something within the support of a group makes you sound better, potentially increasing sense of self-achievement.		Practice. Not really. I found this, but it wasn't particularly demonstrated or mentioned by others.					
Self-esteem	(Staricoff, 2004) – systematic review. (Bungay & Clift, 2010).	Was a programme intention	Confidence increased, perhaps through familiarity, but nothing emerged in interviews.	Self-esteem may increase for all participants, but not mentioned by anyone - this may have been to do with familiarity as much as the music activity - little tangible evidence connecting music with self-esteem and a wellbeing outcome.			

APPENDIX 2. ETHICS DOCUMENTS

Appendix 2.1 Ferndene ethics approval letters

northumbria
UNIVERSITY NEWCASTLE

Professor Kathleen McCourt, CBE FRCN
Executive Dean

This matter is being dealt with by:

Professor Olivier Sparagano
Associate Dean
Faculty of Health & Life Sciences
Northumberland Building
Newcastle upon Tyne
NE1 8ST

8th October 2014

Dear Andrew
Faculty of Health and Life Sciences Research Ethics Review Panel
Title: Ferndene Youth Music Project

Following resubmission of the above proposal, I am pleased to inform you that University approval has been granted on the basis of this resubmitted proposal and subject to compliance with the University policies on ethics and consent and any other policies applicable to your individual research. You should also have recent Disclosure & Barring Service (DBS) and occupational health clearance if your research involves working with children and/or vulnerable adults.

The University's Policies and Procedures are available from the following web link:
http://www.northumbria.ac.uk/researchandconsultancy/sa/ethgov/policies/?view=Standard

You may now also proceed with your application (if applicable) to:

- NHS R&D organisations for approval. Please check with the NHS Trust whether you require a Research Passport, Letter(s) of Access or Honorary contract(s).
- Research Ethics Committee (REC). [They will require a copy of this letter plus the ethics panel comments and your response to those comments]. If your research is subject to external REC approval, a "favourable opinion" must be obtained prior to commencing your research. You must notify the University of the date of that favourable opinion.

You must not commence your research until you have obtained all necessary external approvals.

Both the University and NRES strongly advise that the supervisor accompany the student when attending an external REC.

All researchers must also notify this office of the following:

- Commencement of the study;
- Actual completion date of the study;
- Any significant changes to the study design;
- Any incidents which have an adverse effect on participants, researchers or study outcomes;
- Any suspension or abandonment of the study;
- All funding, awards and grants pertaining to this study, whether commercial or non-commercial;
- All publications and/or conference presentations of the findings of the study.

We wish you well in your research endeavours.

Yours sincerely

N J Neave

Nick Neave
Faculty Director of Research Ethics
Chair, Faculty Research Ethics Review Panel

Northumberland, Tyne and Wear NHS
NHS Foundation Trust

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St Nicholas Hospital
Jubilee Road
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(Internal) 32338
Fax: 0191 223 2341

RES-14-050

25 November 2014

Andrew Fletcher
5 Ferndale Avenue
Wallsend
Tyne and Wear
NE28 7NA

Dear Andrew

Re: Community Music and Wellbeing: An Ethnographic Study

IRAS ID: 155533

I write to confirm that Northumberland, Tyne and Wear NHS Foundation Trust are happy to support and approve the above study. Please accept this letter as verification of Trust approval.

Approval is granted with the condition that the R&D Department are notified of:

- Commencement and completion of the study
- Any significant changes to the study design
- Suspension or abandonment of the study
- Copy of annual REC report and end of project REC report
- All publications and/or conference presentation of the study findings

The Department of Health's minimum standards for research governance state that at least 10% of projects should be routinely audited. It is a condition of our approval that the researchers accept the Trust's right to include this project in the auditing and monitoring process.

Best wishes

Yours sincerely

Simon Douglas
Senior Manager for Research, Innovation and Clinical Effectiveness

simon.hackett@ntw.nhs.uk

NHS
Health Research Authority

National Research Ethics Service

NRES Committee London - Hampstead
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09 January 2015

Mr Andrew Fletcher
Postgraduate Research Student
Northumbria University
H005, Coach Lane Campus (East)
Coach Lane
Newcastle upon Tyne
NE77XA

Dear Mr Fletcher

Study title: **COMMUNITY MUSIC AND WELLBEING: AN ETHNOGRAPHIC STUDY**
REC reference: **14/LO/2075**
IRAS project ID: **155533**

Thank you for your email of 06 January 2015. I can confirm the REC has received the documents listed below and that these comply with the approval conditions detailed in our letter dated 18 November 2014.

Documents received

The documents received were as follows:

Document	*Version*	*Date*
Other [Evidence of Attendance at NTW Safeguarding Children Course]		06 January 2015

Approved documents

The final list of approved documentation for the study is therefore as follows:

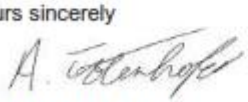
Document	*Version*	*Date*
Evidence of Sponsor insurance or indemnity (non NHS Sponsors only) [UMAL]	1	01 August 2014
Letters of invitation to participant [Ferndene Youth Music Welcome Pack]	2	08 October 2014
Other [Evidence of Attendance at NTW Safeguarding Children Course]		06 January 2015

Participant consent form [Participant]	Final	17 September 2014
Participant consent form [Easy Read]	Final	17 September 2014
Participant consent form [Parent/Carer]	Final	06 June 2014
Participant information sheet (PIS) [Participant]	Final	17 September 2014
Participant information sheet (PIS) [Easy Read]	1	17 September 2014
Participant information sheet (PIS) [Parent/Carer]	Final	06 June 2014
REC Application Form	3.5	05 November 2014
Research protocol or project proposal	3	27 October 2014
Summary CV for Chief Investigator (CI) [Andrew Fletcher]		01 July 2014
Summary CV for supervisor (student research) [Susan Carr]		01 January 2014

You should ensure that the sponsor has a copy of the final documentation for the study. It is the sponsor's responsibility to ensure that the documentation is made available to R&D offices at all participating sites.

14/LO/2075 **Please quote this number on all correspondence**

Yours sincerely



Dr Ashley Totenhofer
REC Manager

E-mail: nrescommittee.london-hampstead@nhs.net

Copy to: Professor Sue Carr – Northumbria University

Mr Simon Douglas - NHS NTW Foundation Trust

Dr Stephen Cummings – Northumbria University

Appendix 2.2 Ferndene information and consent forms

northumbria UNIVERSITY NEWCASTLE

Professor Kathleen McCourt, CBE FRCN
Executive Dean, Faculty of Health and Life Sciences

Andrew Fletcher
Room H005, Coach Lane Campus
Newcastle upon Tyne
NE7 7XA

Tel: 0783 306 8540
Email: Andrew.fletcher@northumbria.ac.uk

Parent or guardian Information sheet

Study Title: Ferndene Youth Music Project - interviews

We wish to invite your child to take part in two informal interviews for our research study. Before you decide, we would like you to understand why this research is being done and what it involves. Please contact us if anything is not clear.

Purpose of the study. We are trying to find out if taking part in musical activity helps young people feel better about themselves. This is called 'wellbeing'. The research is being done by Andrew Fletcher at Northumbria University for his PhD.

Why have my child been invited? We want to talk to young people involved with the Ferndene Youth Music Project who are engaging either a lot or a little, so that we can find ways to improve the activities.

Does my child have to take part? No. It is up to you and your child to decide whether or not they would like to be interviewed. If you both agree to take part, we will ask you to sign a consent form. You or your child are free to withdraw at any time without giving a reason. This would not affect the care/support they receive and they can still take part in the music activity at Sage, without being interviewed.

What will happen if my child takes part? They will be asked to take part in two relaxed and informal interviews, each lasting less than an hour. Each interview will take place at Ferndene and will be audio-recorded. Andrew Fletcher will ask questions and take notes, and a member of staff/carer will also be present. Interviews will happen at the beginning and end of their time with the Youth Music project. The questions will be about their experience of the musical activity. They will never be pressed into discussing anything they don't wish to talk about and can stop the interview at any time for any reason. Breaks at any time are also permitted.

Risks/benefits of taking part. We do not anticipate any risks involved in taking part in these interviews. It is hoped that the results of this research will be used to improve care and access to musical activities for young people.

What happens if my child does not wish to continue? If they choose to withdraw from the study, please contact any member of staff at Ferndene or Dr Michael Hill at Northumbria University, whose details are at the bottom of this sheet. You or your child do not need to give a reason and they can continue to take part in the Youth Music Project if they wish. Any study data relating to your child will be destroyed.

How will the results of this study be used? Sage Gateshead, Ferndene Hospital and Andrew Fletcher will use the findings from this research to improve services and access to music for young people.

Confidentiality. Confidentiality will normally be protected at every stage of this study. We will not tell anyone about your child's participation and their name will not be used in the research, nor attached to any interview recording. If your child shares information about harm to themself or others, I am legally obliged to inform Ferndene Hospital. All recorded data, including transcripts, will be kept in accordance with the Data Protection Act (1998) for a period of five years, then destroyed.

You may read the final report if you wish. Please contact Andrew Fletcher or either of the alternative contacts listed below.

Who is funding this research? This research is funded by the National Foundation for Youth Music and by Northumbria University.

Who has reviewed this study? This study has been reviewed and given a favourable opinion by the Northumbria University Research Ethics Committee and The National Research Ethics Service. A Research Ethics Committee is a group of independent people who review research projects to protect the dignity, rights, safety and wellbeing of participants and researchers.

Further information and contact. If you need any further information about this research, please contact **Andrew Fletcher** using the details at the top of this sheet.

Dr Mick Hill
Principal Lecturer / Director of Postgraduate Research
Northumbria University
Faculty of Health & Life Sciences
Room H023, Coach Lane Campus (East)
Newcastle upon Tyne
NE7 7XA

Tel: 0191 215 6623

Dr Simon Hackett
Head of Arts Psychotherapy
Ferndene
Prudhoe
Northumberland
NE42 5PB

Tel: 01670 394886

Professor Kathleen McCourt, CBE FRCN
Executive Dean, Faculty of Health and Life Sciences

Andrew Fletcher
Room H005, Coach Lane Campus
Newcastle upon Tyne
NE7 7XA

Tel: 0783 506 8540
Email: Andrew.fletcher@northumbria.ac.uk

Parental consent form for participant interviews

Study Title: Ferndene Youth Music Project

	Please initial
1. I have read and understood the 'Information Sheet' dated 6th June 2014 (v. 3) for this study. I have had the opportunity to consider the information and ask questions.	☐
2. I understand that taking part is entirely voluntary and that I am free to withdraw my child at any time, without giving any reason.	☐
3. I agree to my child being interviewed and the interview being tape recorded.	☐
4. I agree that (anonymous) quotes from my child's interview may be used in the write up of the study and may be published.	☐
5. I would like to receive a summary of the results.	☐
6. I agree for my child to take part in this study.	☐

_____	_____	_____
Your name	Date	Your Signature

17th September – version 1

Professor Kathleen McCourt, CBE FRCN
Executive Dean, Faculty of Health and Life Sciences

Andrew Fletcher
Room H005
Coach Lane Campus
Newcastle upon Tyne
NE7 7XA

Tel: 0783 506 8540
Email: Andrew.fletcher@northumbria.ac.uk

Participant Information sheet – Easy Read

Ferndene Youth Music Project

You are invited to take part in our music project. The project is about playing music with other people and talking about music and feelings. You do not have to take part and please ask one of us if there is anything you don't understand.

Purpose.
We are trying to find out if playing music helps you feel better about yourself. This is called 'wellbeing'.

Why me?
We would like to ask you some questions about your feelings when you play music. Does it make you feel happy ☺ or sad ☹ ?

Do I have to take part?
Not if you don't want to. If you do agree to take part, you can stop at any time, without giving a reason. No one will feel upset if you don't take part and this won't change the way people are towards you.

What will happen?
You will be asked if you would like to do some music making in a small group with other young people from Ferndene. Andrew Fletcher, who is doing the project, will also play music and will write about the activity afterwards.

Andrew might ask to talk to you about how you felt whilst playing the music and if it made you feel happy or sad. This talking will just be you, Andrew and a member of

staff from Ferndene. The conversation will be at Ferndene and will be tape recorded. It will last about half an hour and you can stop at any time.

If you're happy about talking, Andrew would like to speak with you at the beginning of the 12-week music activity and then again at the end. This is to see if your feelings about music have changed over that time.

What if I don't like it?
Taking part is perfectly safe, but if you feel uncomfortable at any time, you can tell Andrew or the Ferndene person and we will stop. Or, if you don't want to play music, then you don't have to. The names of other people you can contact about this are written at the bottom of this form (which you can keep).

Confidentiality.
Confidentiality means we won't tell anybody else what you say to us. We will use your words in our project, but not your name – so nobody will know what you said. We do this so you can feel safe and comfortable to talk about music or anything you like.

Andrew will write an easy to understand report of the project when it is finished, which you can read, or which we can read to you. The information we collect will be used to make more fun music activities for people just like you.

Consent.
Consent means you decide if you want to take part in this project. You can talk about it with a friend or someone you feel comfortable with from Ferndene.

You need to say YES or NO about whether you want to take part. You should only say YES if you fully understand what the project is about. So the next thing to do is look at the following page and answer four easy YES/NO questions by ticking the boxes.

Further information and contact.

Dr Mick Hill
Principal Lecturer / Director of Postgraduate Research
Northumbria University
Faculty of Health & Life Sciences
Room H023, Coach Lane Campus (East)
Newcastle upon Tyne
NE7 7XA

Tel: 0191 215 6623

Dr Simon Hackett
Head of Arts Psychotherapy
Ferndene
Prudhoe
Northumberland
NE42 5PB

Tel: 01670 394886

17th September - version 1

Participant ID: ___

Professor Kathleen McCourt, CBE FRCN
Executive Dean, Faculty of Health and Life Sciences

Andrew Fletcher
Tel: 0783 506 8540
Email: Andrew.fletcher@northumbria.ac.uk

FYMP Participant consent form

1. I have read and understood the information about this project

 YES ☐  NO ☐

2. I have had a chance to ask questions about this project and they have been answered.

 YES ☐  NO ☐

3. I understand that it's okay to change my mind and that I can stop taking part at any time.

 YES ☐  NO ☐

4. I am happy to take part in this study.

 YES ☐  NO ☐

_____	_____	_____
Your name	**Date**	**Your signature**
_____	_____	_____
Witness name	Date	Witness signature
_____	_____	_____
Researcher name	Date	Researcher signature

Participant Information and Consent Form – Easy Read version
Final Version, 17th September 2014

3

Appendix 2.3 Chilli Studios ethics approval letters

Newcastle
& Gateshead
Art Studio
www.chillistudios.co.uk

The Blackfriars Centre, Newbridge Street, Newcastle upon Tyne, NE1 2TQ
Tel: 0191 209 4058

Email: info@chillistudios.co.uk

RE: Community Music and Wellbeing research at NAGAS

To: Northumbria University Ethics Committee

I am the Studio Manager and primary contact at Newcastle and Gateshead Art Studio (NAGAS). This letter is to confirm my agreement for Andrew Fletcher to conduct research with our members, on our premises, for his PhD in Community Music and Wellbeing at NAGAS.

Andrew and I agree that aside from serving Andrew's research agenda, this research could benefit NAGAS in a number of ways, which we shall discuss as the project evolves. Data collection is conditional on Andrew gathering informed consent from all research participants and I am satisfied that all of our members are able to give this.

Andrew is a paid-up member of NAGAS and as such will comply with all of the rules and regulations of our studio.

Please do contact me if you have any further questions regarding NAGAS.

Kind regards

Studio Manager

Company Reg: 5028177 Registered Charity No: 1116957

Professor Kathleen McCourt, CBE FRCN
Executive Dean

This matter is being dealt with by:

Dr Nick Neave
Director of Ethics
Faculty of Health & Life Sciences
Northumberland Building
Newcastle upon Tyne
NE1 8ST

23rd February 2015

Dear Andrew

Faculty of Health and Life Sciences Research Ethics Review Panel

Submission code: RE-HLS-13-131203-529db9730c308(b)

Title: Newcastle and Gateshead Arts Studio (NAGAS) Participatory Music Study

Following independent peer review of the above proposal, I am pleased to inform you that Faculty approval has been granted on the basis of this proposal and subject to compliance with the University policies on ethics and consent and any other policies applicable to your individual research. You should also have recent Disclosure & Barring Service (DBS) if your research involves working with children and/or vulnerable adults.

The University's Policies and Procedures are available on the ELP; Organisation name: HLS0002: Research Ethics and Governance

All researchers must also notify this office of the following:

- Any significant changes to the study design, by submitting an 'Ethics Amendment Form'
- Any incidents which have an adverse effect on participants, researchers or study outcomes, by submitting an 'Ethical incident Form'
- Any suspension or abandonment of the study;

We wish you well in your research endeavours.

Yours sincerely

Dr Joanna Reynolds
Ethics Coordinator: Department of Public Health and Wellbeing

Appendix 2.4 Chilli Studios information and consent forms

Interview consent form, followed by observation consent form.

northumbria UNIVERSITY NEWCASTLE

Professor Kathleen McCourt, CBE FRCN
Executive Dean, Faculty of Health and Life Sciences

Andrew Fletcher
Room H005, Coach Lane Campus
Newcastle upon Tyne
NE7 7XA

Tel: 0783 506 8540
Email: Andrew.fletcher@northumbria.ac.uk

Participant Information sheet

Study Title: Newcastle and Gateshead Arts Studio (NAGAS) Participatory Music Study

We wish to invite you to take part in our research study. Before you decide, we would like you to understand why this research is being done and what it would involve for you. Andrew Fletcher will go through the information sheet with you and answer any questions you have. If anything is not clear, just ask.

Purpose of the study. We are trying to find out if taking part in musical activity helps you feel better about yourself. This is called 'wellbeing'. The research is being done by Andrew Fletcher for his PhD at Northumbria University.

Why have I been invited? We want to talk to people who take part in music activities at NAGAS, so that we can find out about music and wellbeing and, to find potential ways to improve those activities.

Do I have to take part? It is entirely your decision to take part in the research. We will answer any questions you have and, if you agree to take part, we will ask you to sign a consent form. You are free to withdraw at any time, without giving a reason. This would not affect the support you receive at NAGAS and you can still take part in the music activity, even if you don't wish to be part of the research.

What will happen if I take part? You will be asked to take part in two informal interviews, each lasting less than one hour. Each interview will take place in the music studio at NAGAS and will be audio-recorded. I will ask questions and take notes, and you may have a friend or staff member present if you wish. Interviews will happen approximately three months apart, with music sessions taking place in between. The questions will be about your experience of the musical activity, although you will be encouraged to talk freely about whatever comes to mind. You will never be pressed into discussing anything you don't wish to talk about and you can stop the interview at any time for any reason. You may also take a break from the interview at any time.

Risks/benefits of taking part. We do not anticipate any risks involved in taking part in this study. It is hoped that the results of this research will be used to improve provision of, and access to, musical activities for people like yourself.

What happens if I do not wish to continue with the study? If you choose to withdraw from the study, please contact either me, any member of staff at NAGAS, or Dr Michael Hill at Northumbria University. Details are at the bottom of this sheet. You do not need to give a reason and you can continue to take part in music at NAGAS if you wish. Any study data relating to you will be destroyed. All data can be retracted up to the point of being made anonymous.

How will the results of this study be used? Findings from this research will contribute towards Andrew Fletcher's PhD at Northumbria University. The data will also be used to inform existing music activities and provision for service users.

Confidentiality. Your confidentiality will normally be protected at every stage of this study. We will not tell anyone about your participation and your name will not be used in the research, nor will it be attached to any interview recording. If you choose to share information about harm to yourself or others, I am legally obliged to inform staff at NAGAS. All recorded data, including transcripts, will be kept in accordance with the Data Protection Act (1998) for a period of five years, then destroyed. You may read the final report – or a summary - if you wish. In doing so, you may recognise some of your own words. However, no one else will know that these are connected to you.

Who is funding this research? This research is funded by Northumbria University.

Who has reviewed this study? This study has been reviewed and given a favourable opinion by the Northumbria University Research Ethics Committee. A Research Ethics Committee is a group of independent people who review research projects to protect the dignity, rights, safety and wellbeing of participants and researchers.

Further information and contact. If you need any further information about this research, please contact me, **Andrew Fletcher** (details at the top of this sheet), or either of the contacts below.

Dr Mick Hill
Principal Lecturer / Director of Postgraduate Research
Northumbria University
Faculty of Health & Life Sciences
Room H023, Coach Lane Campus (East)
Newcastle upon Tyne
NE7 7XA

Tel: 0191 215 6623

Bob Malpiedi
Studio Manager
The Blackfriars Centre
Newbridge Street
Newcastle upon Tyne
NE1 2TQ

Tel: 0191 261 6027

Professor Kathleen McCourt, CBE FRCN
Executive Dean, Faculty of Health and Life Sciences

Andrew Fletcher
Room H005, Coach Lane Campus
Newcastle upon Tyne
NE7 7XA

Tel: 0783 506 8540
Email: Andrew.fletcher@northumbria.ac.uk

Participant consent form

Study Title: NAGAS Participatory Music Study

	Please initial
1. I have read and understood the 'Information Sheet' dated 24th November 2014 for this study. I have had the opportunity to consider the information and ask questions.	☐
2. I understand that taking part is entirely voluntary and that I am free to withdraw at any time, without giving any reason.	☐
3. I agree to being interviewed and the interview being tape recorded.	☐
4. I agree that (anonymous) quotes from my interview may be used in the write up of the study and may be published.	☐
5. I would like to receive a summary of the results.	☐
6. I agree to take part in this study.	☐

_____	_____	_____
Your name	Date	Your Signature
_____	_____	_____
Researcher Name	Date	Researcher Signature

Professor Kathleen McCourt, CBE FRCN
Executive Dean, Faculty of Health and Life Sciences

Andrew Fletcher
Room H005, Coach Lane Campus
Newcastle upon Tyne
NE7 7XA

Tel: 0783 506 8540
Email: Andrew.fletcher@northumbria.ac.uk

Participant Information sheet

Study Title: Newcastle and Gateshead Arts Studio (NAGAS) Participatory Music Study

We wish to invite you to take part in our research study. Before you decide, we would like you to understand why this research is being done and what it would involve for you. Andrew Fletcher will go through the information sheet with you and answer any questions you have. If anything is unclear, please ask.

Purpose of the study. We are trying to find out if taking part in musical activity helps you feel better about yourself. This is called 'wellbeing'. The research is being done by Andrew Fletcher for his PhD at Northumbria University.

Why have I been invited? You use the music studios at NAGAS. We want to observe music activities there to find potential ways to improve those activities.

Do I have to take part? It is entirely your decision to take part in the research. We will answer any questions you have and, if you agree to take part, we will ask you to sign a consent form. You are free to withdraw at any time, without giving a reason. This would not affect the support you receive at NAGAS and you can still take part in the music activity, even if you don't wish to be part of the research.

What will happen if I take part? You are not required to do anything to take part. Andrew Fletcher, who is a service user and NAGAS member, will attend, partake in and observe music sessions held at the studio. No data will be recorded during the activity and Andrew will write up his notes and observations after the activity. These will then be used to inform his research findings. Please note that no individuals will be named in the notes or at any stage of the research. The entire process will be completely anonymous. Examples of the data collected are: the nature of the music activity; attendance and engagement; the degree to which the activity is member or facilitator-led; communication between participants; and any external emotional responses to the music activity. You may leave the activity at any time for any reason. You may also ask Andrew to leave at any time and for any reason.

Risks/benefits of taking part. We do not anticipate any risks involved in taking part in this study. It is hoped that the results of this research will be used to improve provision of, and access to, musical activities for people like yourself.

What happens if I do not wish to continue with the study? If you choose to withdraw from the study, please contact either Andrew Fletcher, any member of staff at NAGAS, or Dr Michael Hill at Northumbria University (details below). You do not need to give a reason and you can continue to take part in music at NAGAS if you wish. Any study data relating to you will be removed from the findings.

How will the results of this study be used? Findings from this research will contribute towards Andrew Fletcher's PhD at Northumbria University. The data will also be used to inform existing music activities and provision for service users.

Confidentiality. Your confidentiality will normally be protected at every stage of this study. We will not tell anyone about your participation and your name will not be used at any point in the research. If you choose to share information about harm to yourself or others, I am legally obliged to inform staff at NAGAS. All data generated from this research will be kept in accordance with the Data Protection Act (1998) for a period of five years, then destroyed. You may read the final report – or a summary - if you wish. In doing so, you may recognise some events or descriptions. However, no one else will know that these are connected to you.

Who is funding this research? This research is funded by Northumbria University.

Who has reviewed this study? This study has been reviewed and given a favourable opinion by the Northumbria University Research Ethics Committee. A Research Ethics Committee is a group of independent people who review research projects to protect the dignity, rights, safety and wellbeing of participants and researchers.

Further information and contact. If you need any further information about this research, please contact me, **Andrew Fletcher** (details at the top of this sheet), or either of the contacts below.

Dr Mick Hill
Principal Lecturer / Director of Postgraduate Research
Northumbria University
Faculty of Health & Life Sciences
Room H023, Coach Lane Campus (East)
Newcastle upon Tyne
NE7 7XA

Tel: 0191 215 6623

Bob Malpiedi
Studio Manager
The Blackfriars Centre
Newbridge Street
Newcastle upon Tyne
NE1 2TQ

Tel: 0191 261 6027

Professor Kathleen McCourt, CBE FRCN
Executive Dean, Faculty of Health and Life Sciences

Andrew Fletcher
Room H005, Coach Lane Campus
Newcastle upon Tyne
NE7 7XA

Tel: 0783 306 8540
Email: Andrew.fletcher@northumbria.ac.uk

Participant consent form

Study Title: NAGAS Participatory Music Study - observation

	Please initial
1. I have read and understood the 'Information Sheet' dated 5th February, for this study. I have had the opportunity to consider the information and ask questions.	☐
2. I understand that taking part is entirely voluntary and that I am free to withdraw at any time, without giving any reason.	☐
3. I agree that (anonymous) quotes may be used in the write up of the study and may be published.	☐
4. I would like to receive a summary of the results.	☐
5. I agree to take part in this study.	☐

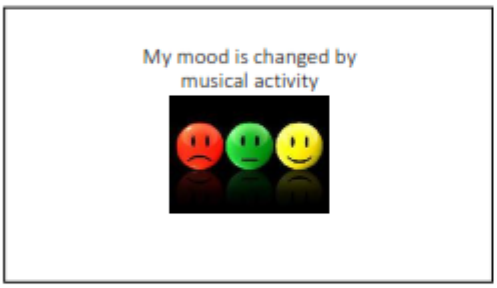
_____	_____	_____
Your name	Date	Your Signature
_____	_____	_____
Researcher Name	Date	Researcher Signature

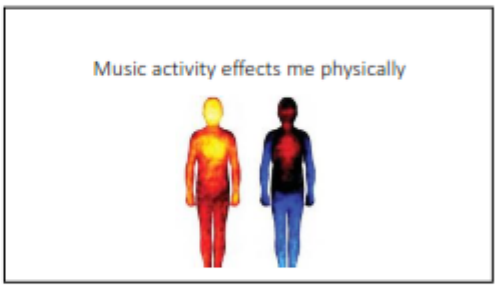
APPENDIX 3. VISUAL ELICITATION CARDS

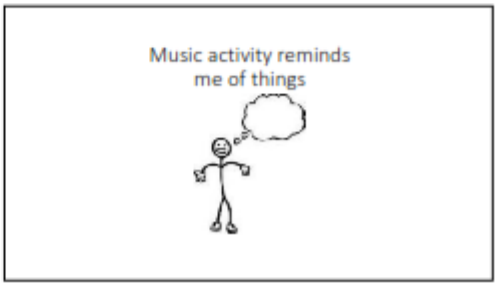
Appendix 3.1 Wellbeing

Two blank cards were filled by participant suggestions of: Balanced and Alive.

Appendix 3.2 Music







Appendix 3.3 Visual elicitation protocol for Sage Gateshead

Use of 'visual elicitation' in the Ferndene Youth Music Project

Intro

The Ferndene Youth Music Project aims to increase wellbeing for children and young people in challenging circumstances through a range of musical activities. The research component of the project uses Realist Evaluation to find out: what works, for whom and in which circumstances?

Realist evaluation works on the basis of Programme Theories, which are speculative theories based on programme aims and other literature about what mechanisms might be at work within a programme that increase wellbeing through participatory music activity.

Following data collection, these programme theories are narrowed down to those that are triggered within this specific project. These are then examined and described in terms of 'Context Mechanism Outcome Configurations' (CMOCs). In this project, the outcome is increased wellbeing; the context is the musical resource (and other factors, e.g. location) and the mechanism is the reasoning the young people use to connect that music activity with their own increased wellbeing.

Data gathering

Defining wellbeing has been problematic. The general consensus in policy is that wellbeing is fluid, and nebulises around a number of life factors including health, security, occupation, social issues, control etc., which are of different levels of importance to different individuals.

For interviews with the Ferndene participants, I was reluctant to impose a predefined concept of wellbeing on individuals. People's idea of their own wellbeing and their response to music activity is so varied that trying to elicit data that fitted a pre-determined model seemed too rigid.

So the idea of Visual Elicitation (VE) came about (I'd love to give a reference; it's not a new idea, but I hit upon it of my own accord – I may not even be doing it right). The process serves two functions:

1) It allows participants to describe their thoughts around music and wellbeing in terms that more closely resemble their own 'configuration'. E.g. For some people, mood may be critical to their wellbeing; for others, it may be physical. For some, the social aspect of music might be important; for others, it could be the noises…
2) The method enables me, the interviewer, to 'get to the point' far more quickly. Without VE, I could spend a lot of time during an interview simply establishing the facts described in (1). By reaching this point sooner, I can spend the rest of the interview time discussing these factors in more depth. It's a time-saver.

Protocol

- Four wellbeing cards were devised, with simple images to illustrate them. These were:
    - I feel in control
    - I feel happy and hopeful
    - I can bounce back from challenges
    - I feel physically healthy

Blank cards were also provided for participants to offer their own wellbeing definitions. In the course of the research, two new ideas were proposed: 'I feel alive' and 'Feeling balanced'. These were integrated as and when they were suggested.

Participants were asked to choose as many or as few of these cards as they wished (or add their own). The chosen cards were placed on a table over a silhouette image of a generic 'young person', representing the participant. If they were deemed highly important, they were placed right on top of the silhouette. If they were considered less important, they were placed further away.

This idea of 'proximity' wasn't measured; it was simply used to establish which aspects the subsequent conversation should focus on.

Six music cards were devised and the young people were again asked to choose:

- Music activity changes my energy levels
- I feel I can 'be myself' when I do musical activities
- My mood is changed by musical activity
- Music activity effects me physically
- I behave better with other people when we do music together
- Music activity reminds me of things

The interview would then proceed following its own protocol. An example question might therefore be: "You've said that feeling 'in control' is very important to you and that music activity changes your energy levels; can you tell me about how doing music might help you control your energy levels?" Or: "How are these cards related?" Questions like this can give some insight into the participants' reasoning when they encounter the resource of music.

This kind of data can then be used to devise music activities for similar people in similar contexts. It is not a directive, but it can (and has) given some valuable pointers in terms of what activities work, for whom and in what circumstances.

Within the context of this PhD, the cards chosen gave an indication of the themes which would be discussed in the findings chapter.

APPENDIX 4. FIELD NOTES EXAMPLE

Appendix 4.1 Ferndene example – working on the song 'Cartoon Characters'

Date/time	Description	My feelings
2nd February 2015 Location Ferndene - FYMP Members present F2 - Loud, brash, engages and can communicate – TO INTERVIEW F4 - Really into the activity, but low understanding – TO INTERVIEW F11 – Energetic, but communication difficulties F0 – When not troubled by personal issues, gets a lot out of music – TO INTERVIEW F1 - Plays guitar and sings – TO INTERVIEW F12 - Very young, but very articulate – TO INTERVIEW F6 - Barely communicates, but is articulate – TO INTERVIEW F3 - Very quiet, but does engage. Shy – TO INTERVIEW F13 - Doesn't like being asked questions.	Big group. Initial issues with control, but once it calmed down, a lot was achieved. Icebreakers: played dice throw and the story game. F2 has been given increased freedoms (now allowed to roam the site unaccompanied) and seems more confident; he was winding up F4, detuning the bass and guitar. However, once engaged, he works really well with the other kids, making an effort to remember their names. Even F11 sang at points, which is a bit of a breakthrough. F0 seemed okay, but has anxiety about leaving this place when he's 18. F1 played a bit of guitar, but was not able to sing at the same time, which she found frustrating. F6 was uncomfortable and left early, likewise F13, who doesn't like being put on the spot. Despite some behaviour issues (partly to do with the size of the group and partly (to quote JM) because "there was a lot of energy in the room", we managed to perform successfully the three verses and the chorus of our song, 'Cartoon Characters'. Ran through these several times and made some scratch recordings on iPad. I suggested shouting *Ole!* at the end of each chorus and this was built on by shouting the name of our favourite cartoon character, going round the group, to spin out the end of the song. This enabled the shyer kids to partake minimally and they seemed happy. This was the turning point; everyone was locked into the song and had something to contribute. One thing that seemed useful was making small changes to the lyrics and the song structure as we went along. Some were suggested by the young people and were implemented – we practiced these changes as a group and voted on whether they sounded good or not. Most people had an opinion and were focussed on the task of iterative improvements then practicing these. The song began to take shape, getting better each time. We achieved a lot today and it was really pushed through by JM. He noted that today was a struggle for him at points, but everything was done safely, so it was a successful session.	I was initially worried about the high energy of the group and the difficulty in getting everyone engaged. Two group members left, as they didn't seem comfortable at all. Having a complete song to work on gave a strong feeling of 'purpose'. There was a focal point (to practice the song with a view to recording it next week). It was slightly chaotic, with a lot going on, but a sense of collusion was present (I think) – even those that don't say much were engaged with the task of adapting the lyrics to make them scan or rhyme better. It was this minutiae that seemed to point everyone in the same direction, rather than energy-draining 'ice-breaker' exercises. Definitely something different about this session. Might possibly a musical factor which results in behaviour change. Had good banter with F4 (about axolotls) and F2.

Appendix 4.2 Chilli Studios (formerly NAGAS) – jam session example

Date/time	Description	My feelings
25th November 2014 Location NAGAS Members present (pseudonyms) In order of arrival: Ben (interviewed) Zach Marty (interviewed) Jeff (interviewed) Matt (interviewed)	**Initial conversation with Ben** NAGAS doesn't have a therapeutic or interventional use for their music room enshrined in policy, but the organisation agrees with the following principles: 1) Music has a strong social component, which is also a core NAGAS value 2) Skills acquisition, via experienced music facilitators 3) Music is a major art form - is part of NAGAS's offer as a multimedia studio 4) Enables those with motor impairments to have an outlet for expression, e.g. singing or drumming 5) Basic recording and production facilities available (differentiating it from simply a 'noise making space'). Interesting chat – not really part of the jam session. **Jam session** *Marty's sister was taking photographs for a college project. She had permission, but this changed the dynamic of the room (all present were male).* Several improvised jams were performed and recorded. Initially based on known songs, e.g. Riders on the Storm, Bike, The Chain, etc. Zach would then pick out riffs from guitar, bass and keys to repeat and use as the basis for new melodies. Everyone was reasonably competent. We discussed using eye contact to drive the dynamics of the improvisation, including false endings, etc. There was some humour in this. When Marty used vocal samples on the keyboard during a jam, Jeff said (Quote): "I couldn't tell if that was you, or the voices in my head". We all found this quite funny (there is a distinct gallows humour around mental health issues in this 'safe space'). Jeff improvised rhyming vocals. Two notable songs revolved around politicians, Marxism, the Russian Revolution and general leftism. It was quite impressive. The other big improv was about biscuits and how they're smaller than they used to be. We also attempted Pink Floyd's 'Bike', with little success and quite a few 'la la la' songs. The session was relaxed, pushed gently by Zach, but very much about improvisation – mainly around Jeff's flute and vocals. This emerged organically, I felt.	Interesting chat with NAGAS staff member – surprised nothing about music in any formal documents (compared with the visual arts), but they do recognise its importance (and of course, run numerous music activities). Jam was a bit slow to begin with; standard covers with not much energy. This changed when Zach started going off-track and others followed. There was a bit of anxiety (straying from known songs), but when cohesion was achieved, the energy in the room raised (it felt hotter; music went faster and more aggressive/assertive). Jeff's vocals made the music into proto-songs and this was recognised. Jeff is a good bell weather for the mood of the room; when he decides to 'go for it', others tend to follow. Music became more cohesive and there was a palpable sense of excitement by the end of the session. Lost track of time, playing until close.