

36th Arts Therapies Forensic Conference
Friday 25th November 2017
Oxford Quakers Meeting House

Welcome and Introduction

Kate Rothwell, State Registered Art Psychotherapist, supervisor, private practitioner, author and illustrator, Kate has over 30 years pre and post qualifying experience in prison and secure settings, and within special needs, educational and mental health settings with children and adults. Currently practicing at The John Howard Centre for Forensic Mental Health (ELFT) where she manages a team of Arts Therapist and works in the Specialist Learning Disability Unit. Kate also practices as an art psychotherapist on a general wing in H.M.P. Grendon and presents to National and International Clinical, Forensic and Academic forums, and is a member of the HCPC, UKCP, IAFP, and BAAT. Kate edited the Forensic Arts Therapies Anthology of Practice and Research (2016, FAB) and authored a wide range of chapters for academic publications. Kate convened the Forensic Arts Therapies Advisory group from 20015 – 20016.



Bringing darkness to light - art therapy on a sex offender therapeutic community.

Simon Hastilow has worked with offenders since 1995, in prisons and in the NHS. He currently works at HMP Grendon and also in an NHS medium secure unit. He also teaches at University of Roehampton.

Simon Hastilow gave an engaging and direct presentation, confronting the audience openly with some of the complexities of working on a sex offender's wing at HMP Grendon. At the start of the presentation 'Lets talk about sex...' appeared on the projection screen. Simon asked us to imagine discussing our sexual fantasies in a room such as this, with as many people, in order to give a sense of the possible shame felt when residents are asked to consider such matters in groups. Simon drew our attention to the horrendous childhoods of abuse and neglect very often experienced by sex offenders, as well as their experiences of recurrent damaging relationships. He highlighted the struggle the residents might have confronting their feelings, and how sexual fantasy can act as a defence against difficult feelings.

Simon described the Therapeutic Community (TC) as an ideal environment for sex offenders, and stressed that talking with peers with different but relatable experiences, as opposed to purely staff, was very powerful for residents. He described Grendon as a democratic community with a flattened hierarchy, which encouraged equality, good self-esteem and healthy relationships. He described the process of peers voting out residents who are not able to engage with therapies, or who are not

capable of being open to change, but that it was important for staff to supersede possible scapegoating. Simon also highlighted the risk of being manipulated, or *groomed*, as a therapist working with this client group. He stressed the need for an ethos of tolerance from staff that emphasised openness. Simon described HMP Grendon as 'the only prison in the country that people want to go to', but that it usually takes at least a year for residents to build trust and begin to engage with the therapeutic work. Simon drew our attention to the encouraging statistic that only 18% of residents of therapeutic communities are reconvicted, as opposed to 43% of untreated offenders.

Simon presented a case study of his art therapy work with an individual client at HMP Grendon. His client had a difficult childhood, and a series of complicated psycho-sexual relationships in adolescents and adulthood. This culminated in him murdering one of his sexual partners. Through looking at some of his images from art therapy, starting with very diagrammatic images with little feeling attached, and ending with a rich and colourful self-portrait: themes around anger, arousal, sexuality, confusion, spirituality and eventually a confrontation of the self in the here and now were revealed.

This was a thought-provoking exploration of what is a very complex, and perhaps sometimes avoided, component of Forensic work. There was no time to show the last slide, where Simon outlined some of the positive and negative impacts of this kind of work on the therapist. I wondered if having little time for the therapist's feelings was significant, in light of the overwhelming disturbing nature of this work.



Break – Kate Rothwell welcomes past and present colleagues from Grendon and thanks them for coming to support today's event.

Art Therapy and TC+ in its infancy.

Deryk Thomas is an Arts' Psychotherapist who has worked with forensic populations for the past fourteen years. Before qualifying, Deryk worked in a variety of community settings, mainly with homeless people living with mental health difficulties and enduring substance misuse. His forensic experience has involved working in low, medium and high secure settings. Since 2004 he has worked as an Arts Psychotherapist at Broadmoor high secure hospital (West London mental health NHS trust). He joined the Arts Psychotherapies at HMP Grendon in April 2014 to begin working on the newly opened F wing, a TC+. TC+ is a therapeutic community program adapted for prisoners' identified as having learning disabilities.

Derek Thomas' have an insightful and varied presentation of vignettes from art therapy sessions, partaken with residents with learning difficulties on F wing at Grendon, over the period of two and a half years. He explained that learning difficulties can become hidden, and so undiagnosed, within

the offender population and that the group population had an average IQ of 86, as opposed to the national average of 100. Derek highlighted what he described as a prevailing 'rawness' in the case studies to come, in relation to the use of raw materials, raw expression and psychological rawness. He elaborated on the power of images made on F wing, affirming this with an inspiring philosophy: '*a picture is worth a 1000 words...but it takes over 1000 words to describe a picture*'. This emphasised the importance of offering art therapy to the residents of F Wing, whom he stated tend to have difficulties with their memory and expressing themselves with words.

A dynamic mixture of themes arose in the case material; relating to resistance, avoidance, concrete thinking, feeling misunderstood, control, shame, humiliation, revenge, dependency, sexuality, mortality, freedom, family, ethics and boundaries. The volume of themes and images presented was suggestive of the large amount of artwork produced in art therapy within this community of people, and of Derek's capacity to hold it all in mind. It was evident that art therapy was a very valuable means of expression and communication for this client group.

Derek opened up the discussion to the room, and some interesting ideas were shared around the concept of IQ. Derek revealed that some residents wanted their scores laminated, and had a pride around their score, while others seemed ashamed. An audience member wondered about the other less measurably levels of intelligence than IQ based cognitive abilities, for example *emotional* or *creative* intelligence.

Jamie Bennett – Governor HMP Grendon and Richard Shuker – Head of Clinical Services

We were fortunate to have an un-programmed visit from two key figures at HMP Grendon. Jamie Bennett has worked in prisons for over 20 years, and been at Grendon for 5 years. He expressed his support of the creative therapies at Grendon and described how residents, who might have used violence over words in the past, could find new ways to express themselves in the arts. He thought that this had a wider impact on the community, as people could ultimately be understood as individuals. Jamie stressed the value of the diverse multi-disciplinary team at HMP Grendon.

Richard Shuker has a background in psychology and was passionate about the creative therapies offering residents an opportunity to express difficult and painful experiences, in a way that prisons did not usually accommodate. He felt that art therapy groups could help residents engage with others, build self-esteem, and potentially understand their offending behaviour through the image. He highlighted the ethos at Grendon is inclusive, respectful, and human, and that '*people can change*' when given the right support. He also expressed his appreciation for the diverse team input, and felt that the therapeutic work impacted the staff culture positively, by encouraging an atmosphere of openness around possible tensions or conflicts within the team.

Reflecting through the lenses - establishing art therapy on a mixed offender therapeutic community

Joy Chong is currently practicing as an art psychotherapist (since Jan 2016), as well as verbal therapy group facilitator (since May 2016) within a mainstream Therapeutic Community at HMP Grendon. She trained at Roehampton University and previously worked clinically as a trainee with a range of client groups including adult forensic psychiatry, young children, and victims and/or witnesses of domestic violence. She has a keen interest in the neuro-psychological and biological

perspective of art therapy based on psychoanalytic principles. She was awarded the BAAT New Practitioner Prize in 2015 and through that published on International Journal of Art Therapy (IJAT) an article entitled: "Why Art Psychotherapy? Through the lens of interpersonal neurobiology: The distinctive role of art psychotherapy intervention for clients with early relational trauma."
<http://www.tandfonline.com/doi/full/10.1080/17454832.2015.1079727>

Joy Chong gave a lively and thoughtful presentation, exploring her experience of establishing a new art therapy group, as a reasonably new art therapist at Grendon. Joy touched upon some of the painful experiences her group members might have suffered in early childhood, such as early relational trauma and a confusing lack of boundaries. She described the range of presentations in group members in terms of their low self-esteem, pessimism, suspicion and strong sense of injustice and mistreatment in life.

Joy expressed how difficult it was to select images from the group to present, which again seemed indicative of how much material can be produced in such groups, and how difficult it can be to process and prioritise everything that surfaces. Joy initially displayed an image created by a group member of a balloon that was about to be pricked by a pin. She compared the tension in the image to some of the difficult feelings group members experienced on a day to day basis: feelings of pressure, and of suspense that something is about to go wrong. It was interesting for group members to use to imagery to describe feelings they found it hard to name. The images Joy presented from the group members explored themes around vulnerability, shame, fear, guilt, injustice, loss, grief, relationships and the future. The rawness of the images and scope of themes was again suggestive of the huge amount held in the images and by Joy as the group facilitator. Joy explained that the artworks had allowed the group members to tolerate sitting with their feelings.

It was a thought-provoking and relatable to hear Joy's warnings around the potential for group members to attempt to split staff, and how staff members can move from 'idealisation' into 'villianisation' from one week to another, in the eyes of group members. She drew attention to the possibility of this splitting then be reflected in the team dynamics. Joy also highlighted the presence of continual boundary testing, sometimes subtle and sometimes obvious, and her persistent effort to keep the space safe. Looking through a psychological and neurobiological lens, Joy described the group member's predisposition to be in fight or flight state due to the damage to neural pathways in early developmental phases. She emphasised the difficulties this population can present in getting in touch with and naming emotions, due to missing out on vital mirroring in early development. Joy also expressed the importance of the therapist acknowledging loss and discomfort, and of exploring somatic and felt responses within themselves, as the 'body is the biological window to feelings'.

Joy touched upon the challenges she faced as a young *female* therapist in the setting when working with men, and the additional vulnerability she faced in being new. She ended with the rousing analogy around the scientific experiment Titration – where an equilibrium must be met between two substances, Joy compared this to the 'constant strife of gauging the distance' between protecting oneself and being present with this client group.



Group Music (Psycho)therapy – “what happens? The use of instruments: the emphasis on exploration, improvisation and communication rather than ‘learning to play’.

Pete McPhail is a qualified Music Psychotherapist. After completing a degree in Human Sciences and working as a research assistant/tutor in social psychology at Oxford University for three years he worked as a professional musician, performing, recording and broadcasting in Europe and further afield. He has also worked as composer/performer for a number of contemporary dance and theatre groups. For the last 25 years he has worked extensively with children and adults with learning difficulties, ‘challenging behaviour’ and complex needs and also taught music in HMP Bullingdon for 7 years. Pete has an MA in music therapy from the University of the West of England and works as a core creative psychotherapist in HMP Grendon. He is a music therapist at Helen & Douglas House Hospice in Oxford. In addition he facilitates a music therapy group for mental health service users in Swindon.



Pete McPhail recently developed a music therapy group, also with residents with learning difficulties on F Wing. He immediately absorbed the audience in an interactive presentation, which began by exploring what we consider a ‘musician’ to be in the western world: perhaps a specialist’s activity? He soon asked 6 members of the audience to participate in a musical exercise, in which they sat in a circle and chose from various rhythm based instruments. He encouraged the group to communicate with music in various ways, one being to ‘pass a message on’ using a drum pattern, in a kind of rhythm-conversation. The musical discussion seemed to become more expressive and experimental as it progressed - from quiet and self-conscious to loud and disinhibited. The group eventually came together to make a whole piece of collaborative music, which eventually faded out slowly if a little awkwardly. Pete suggested the hesitation around the endings was not uncommon, and significant in thinking about other possible difficult endings.

A group member suggested that it felt as if the group were listening to each-other deeply in order to work out how they fit in to the group. Pete explained that this was ‘atypical’, as these group members were particularly good at listening, which was not always the case, at least to begin with, on F Wing. This workshop demonstrated that everybody has a role within a group dynamic, both individual and collective, even when silent. He explained that this was a similar exercise to the taster groups he runs on F wing for potential group members. He clarified that it gave residents a chance to explore musical texture and group dynamics and gain a better understanding of the expectations of music therapy, which was evidenced in the workshop very well.

Pete highlighted that music therapy is ‘a psychological therapy that uses music in a central role in a therapeutic process’, and that it was usually practised in dyads or groups. He described the potential ‘magical’ quality that can be experienced using music in this way. He explained that music helps people to communicate in a very human way, where client and therapist can negotiate with vocals and instruments by using improvisation in a very reciprocal way. He highlighted that choice -

about what instrument to take and where to sit - often played a part in groups, and that there was an unspoken hierarchy of instruments, with the voice being high and the bass being low.



Pete went on to explore some of the challenges of being a music therapist. For example, group member's reluctance to discuss pieces of music that don't work, and his own tension between letting a piece of music fall apart in a group, or choosing to play his instrument along with a member to bring it back, in turn favouring to play along with one member over another and creating a potential split in the group. He then described the important process of attempting to encourage clients away from wanting to play along with only *you* as the facilitator, in order to equalise the hierarchy. He brought to light the anxiety group members might have around their preconceptions that music needs to be concrete, especially if they have experienced music education. This is often played out in the use

of musical and repetition and reproduction, or when members who play instruments might want to start a band, or others might only want to further their skills in a concrete way. He emphasised that what they could in fact learn, was to play what they feel and be familiar with instruments.

However, he described the difficulty some group members have in being playful or moving out of their comfort zone, when they might not have been brought up to *play* confidently in neglectful or trauma filled childhoods. Pete ran out of time to discuss the resistance to music therapy in this setting, but ended by affirming that these music conversations can help to build trust and work with control, in turn allowing for a relationship to be built where words fail. An audience member commented on the physicality of playing an instrument and its somatic qualities.

Evaluating Arts Psychotherapies at HMP Grendon- 'A residents' perspective'

Jo Augustus is a qualified Arts Psychotherapist who has been practising within therapeutic communities for the past 18 years. She is currently the Lead Arts Psychotherapist at HMP Grendon and has worked there for the past 13 years. Previously she has worked within an Adolescent therapeutic community for 5 years. Her clinical work at HMP Grendon is largely based across 2 TC'S, including the assessment unit. Jo is also a qualified creative clinical supervisor and practises both group and individual supervision. She has pioneered developing both evaluative and research projects concerning the efficacy of the arts psychotherapies within this particular TC custodial setting. Such work is ongoing, some of which will be presented today.

Jo Augustus gave an informative presentation about the importance of evaluating the arts therapies from the service user's perspective, not only for auditing purposes, but as a way of understanding the resident's perspective of their treatment. She described the process: a quick and easy to complete tick-box questionnaire given to residents biannually, with questions ranging from how long they have been at Grendon, to how the treatment there might have helped them explore their index offence.

Jo presented some quantitative results from the Art therapy small group research at Grendon from 2016. Pie charts showcased that the majority of residents had engaged with core art therapies, usually for around 18 months but for up to 4 years. Those residents who committed to arts therapy had high attendance rates of 90-100%. Residents were initially asked to identify what benefits they might gain from attending, for example; being able to express themselves, access deep emotions, manage emotions, gain different perspectives and explore offence contributing factors. Most group members felt that self-expression and gaining 'fresh insight' into their index offence were the key benefits. Other pie charts showed that the majority of residents felt there were sufficient arts therapies provisions and that the arts therapies work was communicated well to the team. All of the residents stated that they would recommend arts therapies to others.

Jo then presented qualitative post-therapy feedback. For example, a group member expressed that arts therapy 'helps put words to feelings'. She explained that voluntary evaluations would continue to circulate on wings A and F on a 6 monthly basis, in order to gauge the more long term effects of arts therapy.

Jo described an imminent mixed-method research pilot project she was developing in collaboration with Birmingham City University students, which again aimed to use both quantitative psychometric measures and qualitative resident interview methods to evaluate the efficacy of *all* Core Creative Psychotherapies across five therapeutic communities at HMP Grendon.

Business Meeting

Kate Rothwell made the audience aware of the recently published *The Forensic Arts Therapies: Anthology of Practice and research* (2016 Free association Publishers) on sale and announced that the publisher is interested in producing a second FATAG book. Kate gave apologies for absent members, and handed out evaluation forms for the conference. She highlighted that the cost of the FATAG event only covers the venue, and posed the question: would the audience be willing to pay more? Kate informed the audience of the next FATAG conference on the 14th June 2017 and that it would focus on 'maintaining creativity in a prison setting'.

Poignantly, Kate Rothwell announced that she would be stepping down as FATAG convenor after **11** years. There was an emotive response from the audience and gratitude for her hard work and dedication was shown, and flowers given.



Plenary

Thanks were given to the HMP Grendon team for a valuable day. An audience member appreciated the rich insight given into the complex and traumatic work that is so meaningfully held and contained by the team. Another talked about the rhythmic quality of the day, and reflected on the rawness of the material produced in arts therapies at Grendon. Another wondered if Drama Therapy had a place at Grendon, and it was clarified that instead Psychodrama was the modality used there for over 37 years.