
Listen Here: The Role of Narrative and Performance Dialogue in Enabling Empathy

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Abstract

This paper presents three case studies which illustrate some of the challenges I have faced as a creative practitioner using live performance to encourage empathic dialogue between individuals with very different perspectives. The projects presented involve researchers, health professionals, commissioners, designers and individuals experiencing, or likely to experience, forms of health and social care. Each project touched on sensitive and potentially highly emotionally charged issues around mental health care and care in later life. By presenting and reflecting upon these projects I hope to question the role of performance or performativity in enabling empathy in participatory arts and design contexts.

Author Keywords

Empathy; Performance; Participation; Experience; Health; Care; Theatre; Design.

ACM Classification Keywords

H.5.m. Information interfaces and presentation (e.g., HCI): Miscellaneous.

Introduction

Working with vulnerable individuals who are personally effected by highly sensitive, health related subjects, has taught me the importance of a flexible and patient approach to facilitating dialogue and carrying out research. Such flexibility is rooted in empathy for those

involved and means that the needs and comfort of participants become major factors in shaping projects. The following projects attempted to use performance to stimulate empathetic dialogue around the personal impact that health and care service design has on those who encounter it.

Experience Design Theatre (EDT), was underpinned by the creation of a live performance dealing with issues raised by a future care service designed for older people and delivered by local volunteers. The second two projects, Alice in Bed (AiB) and LISTEN HERE (LH), were born out of a relationship with a regional Early Intervention in Psychosis team (EIP). These last two examples were rooted in the creation and delivery of a theatrical production that addressed the patient role and personal experiences of contemporary mental health services in the UK.

In what follows I reflect on moments of tension and misunderstanding as well as connection between participants, researchers and performers. I go on to pose questions related to the context and conditions of empathy and the role that performativity has in that process. This is a first person account of working within these spaces and, with an awareness that as a practitioner embedded in and initiating the projects, what I recount is only one side of the story.

Experience design theatre (EDT)

EDT is an approach to involving diverse groups of service users and stakeholders in the early stages of designing and refining future care services [1]. The approach builds upon the work of Newell et al. who used film and forum theatre to engage participants in discussion of future scenarios [2]. EDT frames participants as co-directors in the development of a live

performance based on their contributions. In this instance EDT was used to engage groups of varying ages in a dialogue around a hypothetical volunteer care service, in which local volunteers are managed by a care providing organization and rewarded for the care that they provide to older residents. The performance was developed with and presented by professional actors.

I will focus on the final stage of the EDT process, as delivered in this project. After a series of rehearsal-workshops with participants and a "dress rehearsal" in which participants made final suggestions for how scenarios should be presented, the performance was presented to 24 social and health care professionals, and representatives of care service providers, government agencies, and manufacturers of care technologies (the stakeholder group).

At the performance, stakeholders expressed appreciation for the event as a tool for considering the concerns of the participant groups. Many noted that it helped them to compare imagined futures presented with their own lived experience working within or designing care services. They emphasized that they could now see the "value" of volunteer care. A recurrent theme of the workshops was that the value of volunteer care lies in the companionship offered and the quality of personal relationships that can be developed outside of formalized, existing care services.

Going forward, the identification of value made by the participants and interpreted by the audience forms a design principle for the service. More importantly in the context of this paper, the identification of value by the audience highlights the capacity live performance has for engendering greater understanding of another's

perspective; the audience was able to identify and *empathise* with the perceived value of the care system according to the participants. In this way EDT achieved a “rekindling of value” in participatory design—i.e., values were “emergent and dynamic”, developed between participants, stakeholders and designers [3].

Alice in bed (AiB)

Alice in Bed was a large-scale theatrical production of a play by Susan Sontag that deals with the history of mental health treatment. The play poses questions about the cultural perception of those who have been diagnosed with mental illness. Elements of the play were developed with a group of 14-35yr olds who were experiencing symptoms of psychosis, as well as staff from EIP. The group focused on the role of subjectivity in mental health services. Their exploration was rooted in making narrative performance from subjective, personal experiences.

In the final workshop the group attended a performance of AiB in which the audience were free to roam around the space whilst the play happened. The group used hand held cameras to document the play from their perspective. Following this they used the documentation to share what their experience of the performance had been. The aim here was to use the process of interpreting live performance, rather than creating it, to leverage dialogue around the role of the patient in mental health service design.

While much of the dialogue centered around the use of the cameras rather than the performance itself, moments which had been documented by a number of people were quickly identified and the motivations for doing so shared. Motivations included a desire to capture or acknowledge “good” performances and in

some cases participants described “feeling” something for the characters in the play. In no instance did the motivations described touch up on personal experience for the participants, all of whom had close relationships to the subject of the play.

On the one hand this example could be dismissed as having failed to directly engage participants in a dialogue about lived experiences of mental illness. However, it did succeed in employing the activity of interpretation to create a safe space in which people felt comfortable discussing the themes of the play in abstracted ways. Distance meant that participants were not directly implicated in statements they were making; they were able to express opinions a position slightly outside of their own illness. This process could be seen as similar to EDT in that participants are focusing on fictional characters in order to share personal perspectives.

While this project was not directly related to service design, I describe it here to question what the role of interpretation or abstraction in understanding another's point of view and articulating our own is. In what way can the interpretation of live performance be used to encourage dialogue around highly sensitive subjects?

LISTEN HERE (LH)

LISTEN HERE is another example of a dialogic event that took place in connection with the performance of AiB. Attending the event were a number of participants ranging from health professionals, “service users”, academics and artists working in mental health contexts, and members of the public. A number of individuals gave workshops and talks aimed at stimulating discussion on the role of listening in understanding experiences of psychosis. Patrocínio

Schweickart (in Kester [4]) notes the crucial role that active listening plays in enabling connection between parties engaged in a dialogue. Approximately 50% of the participants at LH attended the performance of AiB the previous evening and conversations centered on how the play dealt with empathy as a crucial part of dealing with mental illness. The presence of health professionals and local mental health trusts enabled dialogue to directly relate to contemporary mental health services. In contrast to AiB, LH explicitly to address about mental health services in order to foster understanding between people from different perspectives.

The event took place in a public lecture hall outside of academic and health care institutions. The venue presents itself as a heritage space and as such was a relatively “neutral” space for those involved; it is not an arts centre nor does it have a direct connection to health care. In this “neutral” space participants engaged in a public dialogue as equals. No individual was presented as being of or representing any particular perspective unless they personally chose to position themselves as such. In this space participants were able to, as far as is possible, engage with others outside of the presumed hierarchies of “service users” and “experts”.

Presenting this example I would like to question what impact the context of a dialogue has on the ability for people to empathise with one another. Does ambiguity, or the lack thereof, regarding identity impact on how we empathise with others?

Conclusion

Empathy is defined as “the ability to understand and share the feelings of another” (OED). Whilst each of the

projects above aimed at increasing understanding of alternative perspectives, did they enable *empathy* between parties involved? Did the EDT audience *empathise* with the feelings of another, or did they simply deduce the value system being promoted by the narrative presented? Does understanding an abstraction or performative representation of a participant “feeling” count as empathy? And if not, how do we approach Dalsgaard et al.’s work on performer-participants? [5]

With these examples I hope to problematise notions of empathy, as something that can be aimed at or said to have been achieved in design and participatory arts contexts.

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