

# Performing Anxiety

A resource for audience-facing  
arts projects about mental health

**MENTAL  
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**The Baring  
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# Intro- duction

**Over the past few years, more and more people have been making creative projects that are explicitly about mental health. In some of these, artists have shared stories about their own experiences of anxiety, depression, childhood trauma and, increasingly, identity and neurodivergence. In others, artists have encouraged or supported other people to open up about their mental health.**

While there is still considerable stigma surrounding mental health, as a society we seem increasingly open to talking

about it, and this is reflected in the kind of art being made.

In recent years the Mental Health Foundation's arts team has frequently been contacted by people looking for guidance as to how to make creative projects addressing mental health in a responsible way. We have often found that artists making work about mental health have learned, based on trial and error, strategies that they are then able to share with others. We have observed a sense of community among people who explore mental health in their work, despite very different backgrounds and approaches. There is even a sense that 'mental health arts' at some point became a genre in itself, although one that's difficult to define precisely. And we've seen how empowering it can be to talk to others and compare experiences, successes and failures, and working methods.

Bryony Kimming in *I'm a Phoenix Bitch*



Much of this conversation, though, remains undocumented – or rather uncollected. There are many people with expertise in this area. There are artists who were operating in this field before anyone else, creating influential work. But there is a lack of coherent, user-friendly guidance to how to negotiate this complex territory.

When we began working on this resource, we imagined a set of best practice guidelines, drawing on the experience of some of those artists, such as activist the vacuum cleaner, performance artist Bryony Kimmings, theatre-makers Mariem Omari and Selina Thompson, and comedians such as Juliette Burton and Felicity Ward.

With mental health, though, people's experiences are as varied as their personalities.

Working with a wellbeing practitioner can be transformative for one person and frustrating for another. A check-in session at the start of a rehearsal can be relaxing for one person and stressful for another, depending on what makes them anxious. Trigger warnings can help to identify potentially upsetting material, but triggers are often personal to individual experience, so can be difficult to predict.

And so what we have ended up with is something slightly different – a

collection of individual stories, in which performers, producers, programmers and activists from the 'mental health arts' world describe what has worked for them and what hasn't.

We've done our best to sum up our findings in the sections of this resource, some of which will also be available as a podcast.



You can also read – and listen to – full length interviews at [www.mhfestival.com/performinganxiety](http://www.mhfestival.com/performinganxiety). Two of our interviewees, Mariem Omari and Bryony Kimmings, spoke to us for three hours, carefully re-examining all the decisions, and mistakes, they made while learning their craft, and acting as consultants as we tried to summarise our findings into guidelines. We invited two others, the vacuum cleaner and Selina Thompson, to expand on our conversations with written provocations. We are grateful to all of them – and to all our other

# This is a collection of individual stories, in which performers, producers, programmers and activists from the 'mental health arts' world describe what has worked for them and what hasn't.



interviewees – for their time. This is obviously not an exhaustive survey. Firstly, the resource focuses almost entirely on live work. Some of the people we spoke to make performance; others work in a participatory way with different communities. Our thinking here was that there is a particular dynamic in creative work that brings people together in a live situation, and that

this is where the kinds of safeguarding issues we were keen to explore are most apparent. For example, making a live performance about your mental health is very different from making a painting or a film about your mental health. One involves being in a room, possibly night after night, sharing a mental health experience with a group of people in a live situation. The other can be done



Mess, by Caroline Horton & China Plate. Image © Ed Collier.

while maintaining a distance between artist and audience, or even complete anonymity.

Secondly, there is a slight bias towards Scotland. The Mental Health Foundation's arts programme is largely run from Scotland, where the Scottish Mental Health Arts Festival has been doing pioneering work for almost two decades now. Around a third of the people we interviewed are based here. These are artists with whom we have built a relationship of trust over years of programming; the result of that trust is the kind of open conversations that are essential for a resource like this.

Thirdly, a majority of interviewees are female. Our experience is that most of the people who have extensive experience of working in the arts on mental health projects – ie: the people whose expertise was most relevant to this project – are female. This notably includes women, such as Mariem Omari and Bryony Kimming, who have created ground-breaking projects about men's mental health, sometimes at the expense of their own. The stigma around men even participating in mental health arts projects, never mind leading them, is well documented. The Baring Foundation, which funded this resource, recently published a report called *Creatively Minded Men* which explores this subject. It is an issue we are aware of and will continue to address.



**We've tried to highlight some of the best work that has been done in recent years, the people responsible for it, and what they have learned from their experiences.**



This resource, then, is a work in progress, consciously so. We hope to add more voices to it (if you would like to be one of them, get in touch). Meanwhile, we've tried to highlight some of the best work that has been done in recent years, the people responsible for it, and what they have learned from their experiences. We hope you will find it helpful.

**Andrew Eaton-Lewis**

*Arts programme officer, Mental Health Foundation*



# Telling my story

## Autobiographical work about mental health

**A performer tells a deeply personal story about their struggle with mental health, in front of a live audience.**

This could describe any number of performances created over the past decade, a time in which, as a society, we have become increasingly open to the idea of talking about our mental health. But how do you make a show like that and look after your mental health at the same time?

I think, naturally, when we've developed new language for things in a cultural way, it becomes really prevalent, especially with something so hidden, so taboo, so unexplored. I think, once you're allowed to say something, there will always be an explosion of people saying it, because people are like, 'I didn't know we were allowed to.' It's such a revolution inside people's minds.

Bryony Kimmings

Bryony Kimmings is one of the UK's most high profile live artists; she has made two intensely personal and very successful shows about mental health, *Fake It Til You Make It* (2015) and *I'm a Phoenix Bitch* (2019). The 'explosion' she refers to arguably began in August 2015 at the Edinburgh Fringe, a huge international arts festival whose themes often reflect wider cultural shifts. The previous year, comedian Robin Williams had died by suicide, as had well known British theatre-makers Adrian Howells and Ian Smith. As the comedy and theatre industries grieved, shows about mental health began to receive

considerably more attention from the public and media.

Alongside Kimmings, people performing Edinburgh Fringe shows about depression or anxiety in 2015 included Le Gateau Chocolat with a cabaret show called *Black*, Brigitte Aphrodite with a musical called *My Beautiful Black Dog*, Johnny Donohoe with *Every Brilliant Thing*, a returning hit from 2014, and comedians Felicity Ward, Carl Donnelly and Juliette Burton. Mental health has been a prominent theme at the Edinburgh Fringe every year since then.

Tim Grayburn and Bryony Kimmings in *Fake It Til You Make It*



Some of it, I think, is to do with the fact that cuts during the age of austerity pushed a lot of people away from making work as a collective and into making solo work, which pushes them into autobiography. And if you are trying to make autobiographical work, and build stories, you're going to be looking for conflict and trauma, and there is mental health almost immediately. So I think it's inevitable that when you make a shift to autobiographical work, you are going to find more people talking about trauma and, as such, mental health.

Selina Thompson



There tends to be an assumption that talking publicly about mental health is a positive thing, in that it can reduce isolation and stigma and open up conversations. All of this is true. But what is the psychological cost for a performer of sharing traumatic personal experiences in front of an audience? And how do you know whether you're ready, or whether you should do it at all?

**It's not a rite of passage, making a show. It's not like 'I deserve to be heard.' It's, 'why are you doing this?' There can be 5% of it that's healing and there has to be 95% of it that does something to an audience, that's going to do something for the world. Otherwise, why do it?**

Bryony Kimmings

So the first question is why? Why is this the story you want to tell? Why do you want to tell it now? Why are people coming to hear you tell that story rather than, you know, staying in bed watching Sex and the City re-runs? What is the political purpose of telling it beyond you? I think it's really important to be specific about who your work is for. Why do they need this? And then the next thing almost immediately is, what care have you put in place for yourself? Because when I first started making work, I did not have the tools and the language. And I feel that I did myself a great deal of harm.

Selina Thompson

When interviewing the first wave of writer-performers who made very personal shows about mental health, it's striking to hear them talking about mistakes they made, and the lessons they learned, often through not having enough support in place.



Being in Edinburgh, in the pressure cooker that it is, and experiencing people talking about theatre critically where it's also your story, I hadn't realised how vulnerable that can make you. So it was after that that we were like, 'right, if we're going to tour this show we've got to get better at knowing how to,' because it started to feel like it was unsustainable.

Caroline Horton

After making *Mess*, a 2012 show about her struggle with anorexia, Caroline Horton began working with Lou Platt, a theatre-maker, therapist, and what would now be known as a wellbeing practitioner. Platt helped Horton to structure rehearsal processes, and set boundaries when talking about her mental health in public. But initially it had not occurred to Horton to do this, and she admits that performing *Mess* impacted on her mental health.



Bits of my behaviours around food were becoming more problematic, not to the extreme that they had been before, but they were definitely at play again. And I don't think it's necessarily that the play caused that, it's just, I think, I'd been in those behaviours with those various forms of eating disorders for such a long time that choosing to re-enter the story was a risk.

Caroline Horton

In other words, a risk of making autobiographical work about mental health is that it can be triggering rather than therapeutic. Almost everyone I spoke to stressed the importance of a thorough research and development process, to try out ideas that you may not use but which will allow you to process painful experiences before going public with them. They also recommended asking yourself what you need at every stage of the process.

Have you thought about which bits of the process you could hold? And which bits you can't? Can you work long days? If you can't, how does that change the length of the process? Are you going to need coaching and counselling? Because the Arts Council can pay for that. Are you going to need to ensure that you write a certain amount of it somewhere where you can look up, look out the window and see green things? Also, the care can't just be in the process, it has to be in the show. So, what are the bits that are going to feel intense and triggering for you? And how are you going to remind yourself, the performer in that moment, that you are just in a room talking about things, not necessarily experiencing them again? What does it look like to cancel the show? Are you going to be able to tour it? If so, for how long? There are many beautiful, lofty, deeply meaningful reasons why people make art, but if you are making it to get paid, if it's work, if it's labour, then you've got to make sure you don't get sick, you've got to honour your body and mind as tools that you work with that must not be harmed as much as possible.

Selina Thompson

I think if you're really taking it seriously, and you want to make a great piece of art that does something to an audience, you almost have to take your own experience outside of your body and in your hand and turn it around and look at it in a really pragmatic and almost forensic way. You need to be able to be objective about your experience. And if you can't be objective about it, I would say that's when you know you're not ready.

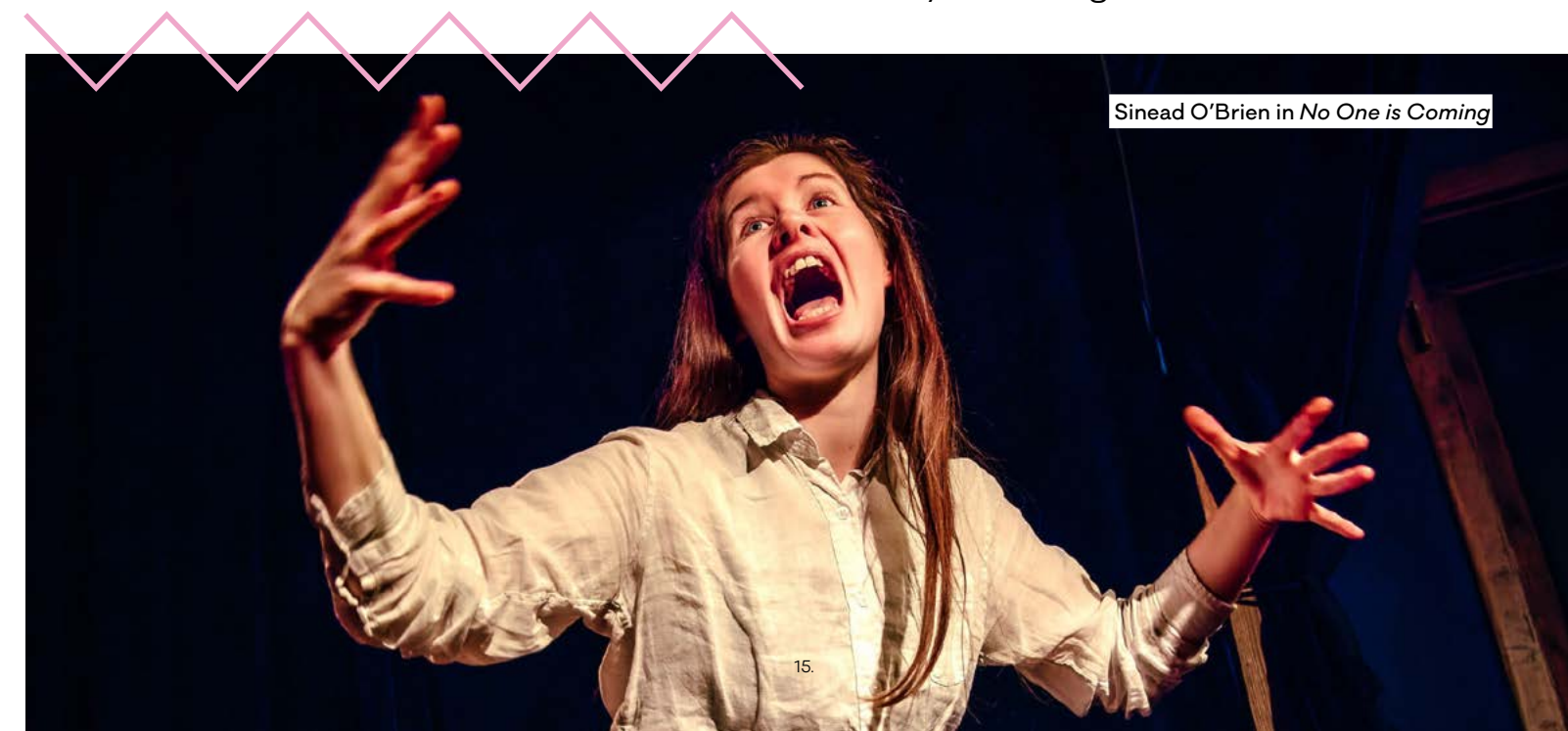
Bryony Kimmings

It's questionable, perhaps, whether the objectivity Bryony Kimmings talks about here is entirely possible, given that traumatic experiences are rarely left behind completely. Time though, can help.

I think it's very important that you're making art from a scar but not an open wound. So it was important to me that I was only sharing stories that I had been through in therapy and talked to enough people about, and wasn't something that was actively causing me distress anymore.

Sinead O'Brien

Sinead O'Brien is the creator of *No One is Coming*, a 2023 show in which the Irish storyteller describes growing up with a mother with a severe mental illness, and how O'Brien eventually had to cut off contact with her. She was able to make this show, she says, because all of the events she describes in it happened over a decade ago, and she has already discussed them at length in therapy. Half of the show also consists of Irish folk tales which mirror her childhood experiences rather than directly describing them.



Sinead O'Brien in *No One is Coming*



I think you start from a comfort level, from what do you want to talk about, how much of your experience, varying levels from okay to traumatic, just ensuring that the person who's making it is not going to expose themselves too much on stage in front of potentially hundreds of people.

Nye Russell-Thompson

Nye Russell-Thompson is one of the creators of Choo Choo, a 2023 show about his experiences of living with intrusive thoughts. Like Sinead O'Brien he was able to distance himself from this through the style of the performance – in this case a playful parody of children's television shows.

I think, at least for me, it has to be a mix of truthful elements packaged and wrapped up in something more akin to caricature or character. In the example of Choo Choo, that being sort of safe, semi-autobiographical performance, it's bright, it's fun, and it's silly. So you can still have that distance as a performer because there's other things to focus on.

Nye Russell-Thompson

In short, the style of a performance can be crucial in allowing a performer to put a safe distance between themselves and the material. It might also help address a concern that theatre-maker Julia Taudevin (creator of Move, Blow Off, Chalk Farm and other shows) raised with me during our interview, about this move towards autobiographical work.



Choo Choo by StammerMouth.  
Image © Jorge Lizalde

I think that there's a sector-wide obsession with prioritising the individual story, as opposed to storytelling. So prioritising the story of the individual and platforming voices we've not heard before, which necessarily asks them to re-traumatise themselves, if their story is traumatic, which generally, if they are people of colour, or women or gender minority, they will have trauma, their story will be rooted in trauma.

So we're part of this sort of industry wide - probably global wide - push to tell your own personal story. But as a sector we're not teaching craft. We're not teaching character. We're not teaching story structure. We're not teaching resilience, wellbeing. You know, we're just saying, give us yourself, and we might put you in the spotlight. And if that doesn't go so well, oops, we'll go to someone else. And sorry, I hope you're okay. But if that does go well, great, well, we'll keep doing it. We'll keep doing this.

Julia Taudevin

Bryony Kimmings, Sinead O'Brien, Caroline Horton, Nye Russell Thompson and others all talk at length about making autobiographical work in our full interviews on the Scottish Mental Health Arts Festival website.

The final word for now goes to Amy Conway, whose 2016 show, Amy Conway's Super Awesome World, explored her experiences of depression, but in the style of a computer game. The show was popular with audiences and critics; however she now has mixed feelings about how direct and personal it was.

I think it's okay to not be ready to talk about something, it's okay to talk about it through metaphor. That's something that I'm realising now, working with people in therapeutic drama contexts, that anonymity can be your friend. That's not to say that the raw, incredibly, exposing shows can't exist. But I just have to question like, 'do you have good collaborators that are funded and have the resources to hold this experience and hold this story?'

Amy Conway

Read, and listen to, our full length interviews with Bryony Kimmings, Selina Thompson, Caroline Horton, Sinead O'Brien, Nye Russell-Thompson and Amy Conway at [www.mhfestival.com/performinganxiety](http://www.mhfestival.com/performinganxiety)

# Other people's stories

## Participatory work

**It has become increasingly common for artists to make participatory projects about mental health.**

These projects encourage people who have gone through sometimes profound mental health challenges to explore that through creativity, or just sharing their stories. The idea is to open up conversations about mental health, reduce stigma, and support self-expression. But in doing so, how do you avoid making people more vulnerable, or even exploiting them?

For five years, Mariem Omari worked as a humanitarian in conflict zones in the Middle East and North Africa. Since moving to Scotland, she has used the listening skills she learned when taking testimony from vulnerable, often traumatised people, to create a series of artistic projects drawing out other people's mental health stories through conversation.

The first results of this work were two acclaimed theatre shows by her company Bijli Productions. *If I Had a Girl...* was based on interviews with women from South East Asian communities in Scotland who had been subjected to honour-based violence. *One Mississippi* was based on interviews with men from various cultural backgrounds who had all attempted suicide. While the shows were performed by actors, each involved a careful process of identifying potential participants, building relationships of trust, collaborating on how their stories were told, and carefully protecting their identities when the work finally went public. You can listen to Mariem talking in depth about this process, and what she learned from both shows, in our full interview at [www.mhfestival.com/performinganxiety](http://www.mhfestival.com/performinganxiety).



More recently, Bijli has worked on projects in which the process is led much more by the participants, telling their stories themselves through live or pre-recorded performances. For *Doing it Our Way*, a community project in Ayrshire,

Bijli ran weekly sessions for six months, to support a group of people with complex mental health needs to create a theatre piece about their lives, with help from John McCormack of the Scottish Recovery Network. It was, Omari says, a valuable learning experience.

So you have to yield when you're working with people who have mental health challenges, and it could be a good day or could be a bad day. And you have to be able to shape the work around that and continue to support them on their journeys without imposing too much. When I say imposing, of course you want to bring your creative vision to it as an artist but you have to look after yourself and them in the process. And if you push too hard in the direction that you think the work needs to go, and it falls flat because the group can't go there for whatever reason, you're not only doing harm to the group, you do harm to yourself as an artist, because you've become wedded to this idea... And I just had to relinquish and actually the more that I relinquished and sat with what I had been given, and with what was safe for that group of people, the better the work became.

Mariem Omari



An example of this was Doing it our Way's final performance, for which some participants were struggling to remember their lines. Bijli came up with a solution where, thanks to three technicians closely following the script, if anyone forgot their lines, they could raise their hands and a pre-recorded version of their monologue would start playing, from the exact point at which they had stopped talking.

And so we then discovered these additional ways of being able to work with vulnerable people, with complex mental health needs, that kept them not only safe, but also created this extraordinary feeling of freedom and self-expression in that safety.

Mariem Omari

James Leadbitter, who makes participatory arts projects under the name the vacuum cleaner, works with young people who have long-term mental health needs. He has also learned to be flexible in his approach to every aspect of each project.

So number one, you don't have to do anything you don't want to do. You can walk at any point, you can pull your material at any point, often in performances, or shows. On the day of the sharing, on the day of exhibition, once the exhibition is open, you can pull your work. And we'll back you on that. I will always want to have a conversation with you about that - what's going on, why that's happening - but ultimately if you're going to open up about an experience that's hard, you're in control, it doesn't matter whether you signed a contract or not, you're in control. And that can be really empowering. (With) the piece For They Let In The Light, at Chisenhale (Gallery, in London), which I made with seven young people that I met in psychiatric intensive care, on the evenings that they were sharing they had the right not to be on stage. And we made three versions of every bit of material. We have...

...a live version, we have an audio version, we have the version where that material wasn't in the piece at all. And in the moment, a young person might say 'I don't want to stand up and read it today' and I'm like, 'Cool, can I read it on your behalf? Do you want to hear the audio version?' Or some days the young person might not be able to turn up, or turns up really late, so we've coming up with these adaptive and complex ways to navigate through people who have fluctuating conditions.

James Leadbitter

This kind of flexibility can also be vital in persuading people to take part in a project in the first place. Several artists I spoke to emphasised the importance of understanding what places, and what times, would be most comfortable and practical for participants, and of providing free childcare, transport, sometimes food. Several also emphasised the importance of being flexible about what artform is used, and being willing to adapt this, as well as changing your expected outcome.





This approach was key to the success of Mariem Omari's next project, *We Make The Path*, on which she worked with John McCormack and wellbeing practitioner Vicky Mohieedeen. *We Make The Path* supported 15 Black, Asian and Arab women to curate a performance themselves, on their own terms. This took ten months of weekly sessions, with the project evolving along the way.

*We Make The Path* by Bijli Productions.  
Image © Leila Taimadge

In a participatory setting, when you have preconceived ideas that you're trying to impose on people, because you have written in a funding application that you're going to create a piece of theatre, with people with complex mental health needs, from Black and Asian communities, you are setting yourself up to force through something that has not been organically conceived. And you set up an unequal power dynamic that removes the agency of those people in that group to be able to speak what it is they really want to create. And I think that is one of the most damaging things about having to tell a funder, 'this is the form'. (It's better) if you can say 'this is the form for now, but during the creation of this project, if the form needs to change, please let us change it, because we will be doing that in order to give power to, rather than have power over, the people in this group.'

Mariem Omari

This can be a difficult idea for artists, and funders, to get their heads around – a project that could be in any artform, where the lead artist has limited creative control, and the outcome is uncertain. I asked James Leadbitter how he would measure the success of this approach.

I measure it by whether people stick with the process. So, for instance, the project I've just been running, which led to a showing at Whitechapel Gallery. I think we began with 35 young people, and I think we ended with 29, over six months, so people stuck with the process... I think that's also about creating new aesthetics, not having to work to this kind of like super polished aesthetic, that mental health aesthetics are different. And that doesn't mean that the work is not considered, it means that the means of production of the work are really different.

James Leadbitter

You can read, and listen to, full interviews with James Leadbitter and Mariem Omari at [www.mhfestival.com/performinganxiety](http://www.mhfestival.com/performinganxiety). Much of what they have said here is echoed by other people I interviewed who have led on participatory arts projects about mental health, such as Clare Prenton, whose play *Men Don't Talk* is based on interviews with groups of men about their mental health; Sabra Khan, producer of the BEDLAM mental health arts festival in Birmingham; and Hannah Uttley, a community artist who works with vulnerable groups in Scotland. You can find out more about this work at [www.mhfestival.com/performinganxiety](http://www.mhfestival.com/performinganxiety).



# Hacking the gauntlet

On leadership, mental health and art making in a time of permanent crisis.

By Selina Thompson

I want to start by defining a few of the terms above - leadership, mental health, a time of permanent crisis.

I would describe good mental health as being OK, most of the time: regulated nervous systems, a body not riddled with inflammation that is able to sleep and rest, being able to connect with

others if so desired, having space to appreciate and enjoy our one and only lives. This is a deceptively simple definition, but every single word in that sentence is contestable. I'm putting it there, I guess, as an entry point into what I think one needs to have good mental health, which is:

- Your basic material needs and comforts met without an excess of hardship, humiliation or suffering
- Agency, Freedom, Self-Determination
- Community, Love, Companionship
- A sense of yourself as a part of the glorious biosphere that includes all fauna, all flora, the vastness of the cosmos, and other things beyond our conception
- A meaningful and fulfilling way to pass the day to day.

Selina Thompson. Image © Jana Rumley



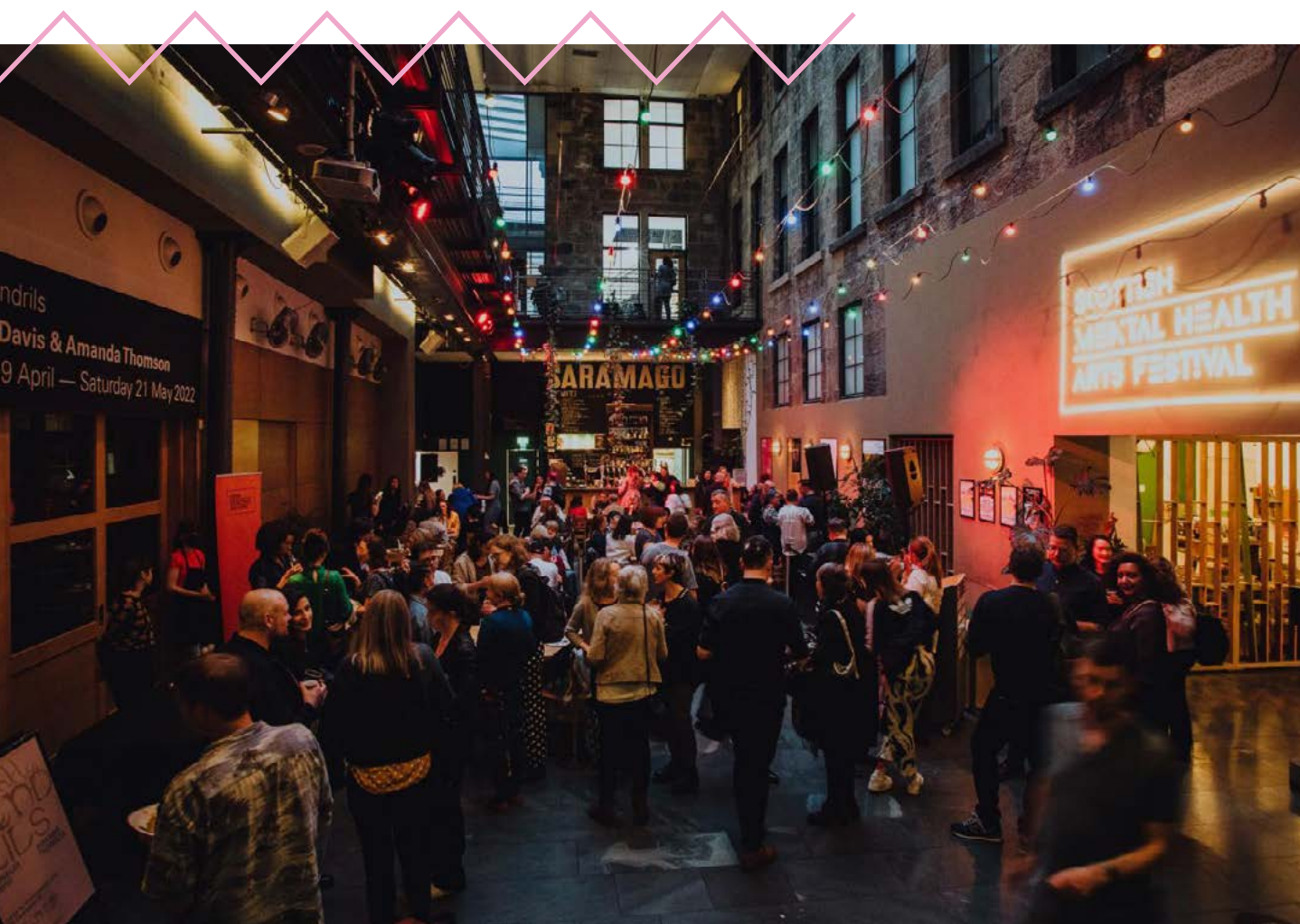


The world of work is one of the things that can provide the first and last of these requirements. The only thing any 'sector' can truly, tangibly offer to its workers to enable that is an approach to work that pushes back against doctrines of capitalism and neoliberalism, that is actively engaged in organised political agitation, and experiments in building and living otherwise that seed those changes. Even these offers are made messy by their entanglement in the exchange of labour for money, but they're a start.

When all of this is kept in mind, I believe that the only ethical approach to

leadership is to see it as a service job, rooted in care. I would define this care in the following terms:

**"When I say I want to work from a place of care, I am saying that I do not want to work in a way that extracts from your body until you are ill, extracts from your mind until you are burnt out, and extracts from your soul until you are alienated and despair. I want to try to work with you as a human, I want you to work with me in that way too, and I want you to stay here, in the arts, if that's where you want to be. I do not want working for me to be a gauntlet."**



You are tasked with responsibility and trust, and at the very least you must seek to pay people, and treat them well, and to go further even than this, and try to create meaningful work to do with them.

You are also entrusted with a mandate, a task that your organisation is committed to. As the leader of a publicly funded arts institution, the mandate I have is one that is supposed to contribute to society as a whole, to make the world a better place. This feels like a particularly tall order in a time of near constant crisis.

I think you could argue that since it took root, capitalism has been a state of crisis for most humans - whether your land was being stolen and your people were being wiped out, or you were being displaced from your land to harvest the cotton being grown on that land, or working as an impoverished child in the factory that was processing that cotton. So I don't refer to the current time as a change, as such, more of an acceleration as numerous of capitalism's bills come due: pandemics, climate catastrophe, constant war, a continuous stream of genocides, the growth of fascism across the west led by politicians who are exuberant in their corruption, and the rapidly growing gap between the rich and the poor, and the resulting polarisation of societies across the world because of it.

How does one maintain 'good mental health' in the shadow of this? How does one meaningfully live with 'a sense of themselves as a part of the glorious creation that includes all fauna, all flora,

the vastness of the cosmos, and other things beyond our conception' when our species seems determined to inflict maximum damage on most of it?



**"How does one meaningfully live with 'a sense of themselves as a part of the glorious creation that includes all fauna, all flora, the vastness of the cosmos, and other things beyond our conception' when our species seems determined to inflict maximum damage on most of it?"**



These are the three poles I pinball between. 1. the material: basic things I want for all those connected to my work. 2. the political: my responsibility as someone tasked with choosing a direction and getting us there, and 3. the existential:



the context that we are all moving through, one in which it is hard to hold on to why all this matters with clarity.

There are specific and significant mental health challenges that leaders have to carry. You are, of course, dealing with a huge amount of pressure; many leadership roles are full of busy work that takes you away from the work that you seek to do. There is always this sort of constant background scream of how important and urgent everything is, and if you are not careful, you forget that it is not the work, rather a series of gates and barriers and borders between you and the work. When an artist becomes 'a leader' they are alienated from their work and themselves: your practice becomes a product that you are responsible for selling, and that is an ugly mindset to be in. There is a lot of things that many of the most radical artists push against that sneak in alongside the label leader.

This is not to say that leadership is inherently bad: on the contrary, leadership in the arts comes with a huge amount of benefits, not least that you have more autonomy than anybody else in your organisation to make positive change. You can build care structures around you, often far better than the ones that could be provided for you by the state or another employer. You can set the pace of the work, the tone of each meeting, and the priorities of your organisation. You are paid the most, which increases your access to care, and you are listened to the most by the

sector as a whole, which gives you a platform, and the affirmation of being listened to. You are valued, in a sector that offers very little regard to most of its workers. Your autonomy and agency remind you of your inherent worth, and this in itself stabilises, heals and motivates. A little pressure is more than worth the exchange.

So I find myself thinking about what the responsibilities are that leaders have to the rest of their sector, what we must start moving towards with urgency and focus.

Four day work weeks. Longer tech rehearsals. More money for less work. For venues to focus on the artists in their own localities first and foremost, so that folks do not have to travel away from their support networks to live and work in the sector. Money to support the childcare costs of our workers, to support the therapeutic and healthcare costs of my workers, to support the need for respite that those who work with me that have caring responsibilities have. I want the people I work with to have access to green space when they need it, workloads that do not inhibit their time off. I need them to have wages that mean that they don't worry about money, that they have the things they need and want for their own mental health wellbeing, that travelling to work, and living in comfort as they work are simple. I want them to be able to afford to see as much art as possible, and to be working within a sector that is placed in a location of importance in public life, that genuinely feels bound up in every other

struggle and fight and need our society has. I need more people to work with, to spread labour around, so we can lessen our workloads, and live a life. And as we do all of this, we must also see that much of what is above should be provided by the state, not an employer, so we must be part of actively demanding it from our elected officials, and being willing to go above and beyond if that does not work.

None of this can happen in isolation. It is sector change, national, maybe international change, it requires us as an industry to change direction together like a great shoal of fish. We need completely new models, and we needed them yesterday: and a huge part of building that will be changing what we understand a leader to be, and what we understand leadership to be. It will be reshaping our sector so that it is no longer a gauntlet of making in a space of high pressure which literally makes us sick, and is designed for most folks to drop off around the age of 30, especially those of us that can get pregnant and give birth.

I believe that once we have that, we will have the space and capacity to go even further, and to do what the arts are supposed to do: reimagine the world, instigating the changes that will enable us to deal with the existential crises of the day. As things stand, we can barely look after ourselves and each other, so how can we expect to make the art that the world so desperately needs? How could we possibly have the space to reflect and refract, transforming the chaos we see around us?

This isn't what I thought I would write, when I sat down with this provocation. I think I expected something more personal and rooted in autobiography for myself. But to be honest, I'm as OK as I can be as an individual. What I need now is for my community to be OK, for the sector as a whole to recalibrate, heal and start doing things differently. And that is going to take all of us.

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*Selina Thompson is a writer, performer and the founder of Selina Thompson Ltd, which is based in Birmingham and has made theatre shows, installations, workshops and performances for radio since 2016. Her best known show, salt, traces a personal journey retracing transatlantic slave trade routes from Britain to Ghana and Jamaica; the show, which explores the impact of trauma across generations and centuries of history, was critically acclaimed and has toured internationally. Selina lives with epilepsy as well as depression, anxiety and CPTSD, and has been open about the challenges of balancing creative work with mental health.*



# Safe spaces

## Healthier creative work environments

**In recent years, more and more people have been making live performances that address mental health, often drawing on their own very personal experiences of trauma.**

In doing so, they potentially make themselves emotionally vulnerable. What should those who are producing or directing this work be doing to support them?

There's more general awareness and openness to talking about mental health. I feel like we've made some fairly decent strides in that area in recent years. But yes, there is also a concern about how it's being talked about, by who, and what support has been put in place for people processing their trauma through art, and also people then having to sit and watch it and process it with them. So yeah, it's a really interesting dynamic. For us, we see an awful lot of it.

Robyn Jancovich Brown



Remedy for Memory by Stories Untold. Image © Kirsten McEwen



Robyn Jancovich Brown is a theatre producer based in Scotland. Her company, Stories Untold, aims to explore “how care and access can be prioritised and embedded at every level in the making of work, putting people before project outcomes”.

We take the approach that care and wellbeing should be baked into every single aspect of project management or relationship building. So the very first step is building trust with an artist, making sure that we have lots of conversations before starting to work together, we know exactly where the boundaries are for each person, they understand the way that we work, we understand the way that they work, and that there's a synergy there between us. And that trust is really, really crucial. Because if the artist doesn't trust us to hold them and hold their work, then everything just kind of falls apart from there.

Robyn Jancovich Brown

Stories Untold has various processes in place to help build this trust, one example being access riders, which are completed at the beginning of a working relationship.

We have an access rider, and so people can tell us about not only their physical access needs but any ways of working - if they prefer digital working, and if they need quiet spaces, quiet time, all of that kind of thing. It basically sets out how they like to work, or what they need in order to work the best. And then, as much as reasonably possible, we will always try and work with those needs.

Robyn Jancovich Brown



Remedy for Memory by Stories Untold. Image © Kirsten McEwen

Access riders are a list of things artists require to be able to do their job to the best of their abilities. Until recently they were an accessibility tool designed by, and for, people who identify as disabled or neurodivergent, but some organisations, like Stories Untold, are now offering them to everybody they work with. Scissor Kick, another Scottish production company, also does this. Its artistic director is Stephanie Katie Hunter.

We always knew access riders were a thing. And we're so aware that when you implement support with access and inclusion in mind, everybody benefits. We were also very keen to try and eliminate the risk of finding out information after some preparatory work had already taken place, you know, and then there'll be additional hidden costs, for example. So we send out our safeguarding policy, our contract, our safeguarding declaration form and the access requirement, and we should get three signed and completed documents back. And it means that from word go on contract, we can kind of go, this is what that person's needs are moving forward.

Stephanie Katie Hunter

Stephanie Katie Hunter. Image © Robbie McFadzean

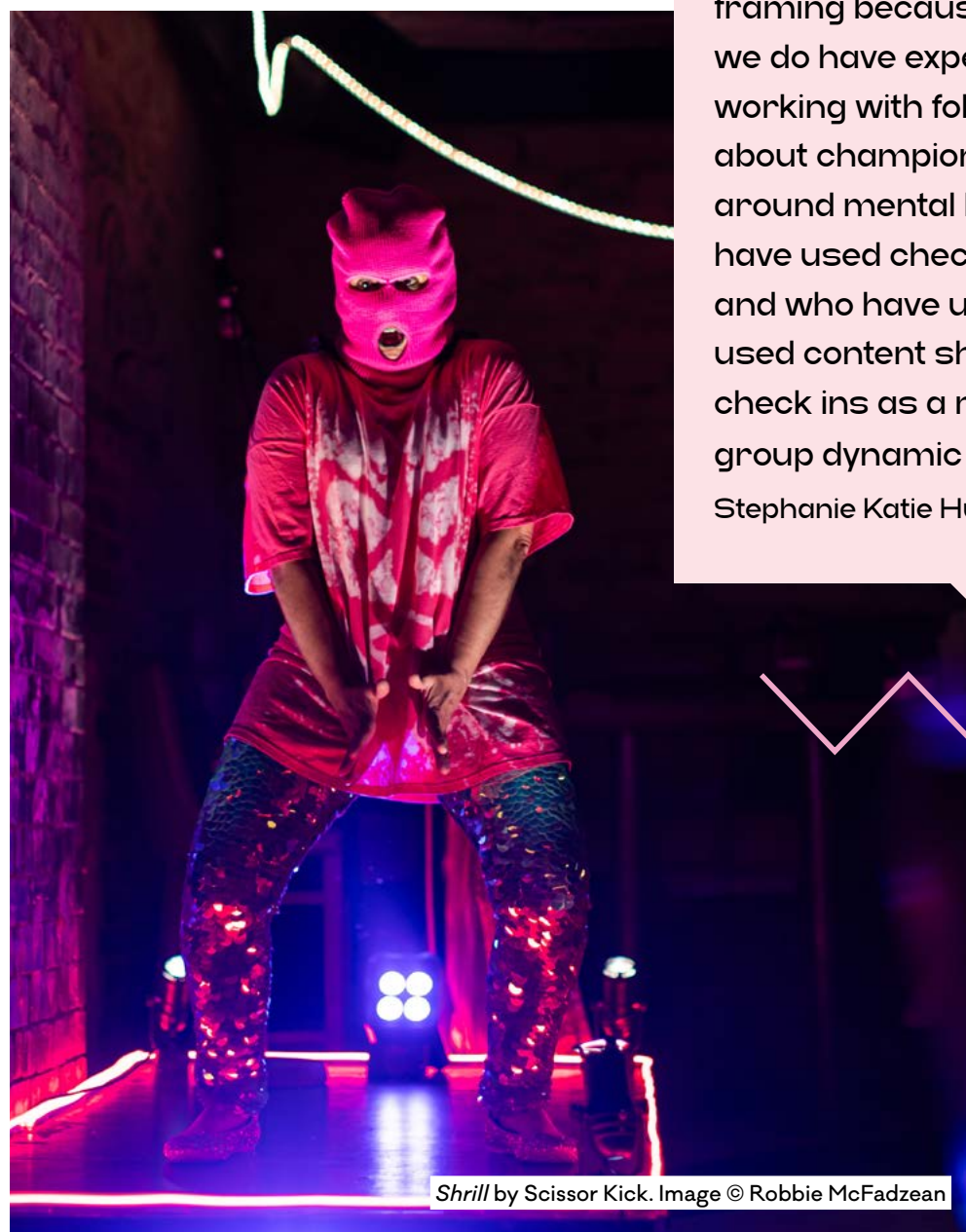


Scissor Kick and Stories Untold were both suggested to me as examples of good practice when it comes to taking care of artists. They use several similar processes, and Stephanie and Robyn talk in more detail about these in our full interviews at [www.mhfestival.com/performinganxiety](http://www.mhfestival.com/performinganxiety), touching on contracts, safeguarding policies, shorter working hours where possible, managing expectations, and setting boundaries so that people know where they stand from the beginning of a working relationship.

Establishing best practice can become more complicated once creative work starts and clashes emerge between different needs and personalities. For example, one thing that has become widely used in rehearsals is verbal check ins, where a group of performers each has a chance to express how they are feeling before the day's work begins. But not everyone likes them. Scissor Kick use them, but with caveats.

We try to be very specific in the framing because unfortunately we do have experiences of working with folks who talk about championing issues around mental health but who have used check ins maliciously, and who have unfortunately used content shared within check ins as a means to shift a group dynamic later on.

Stephanie Katie Hunter



*Shrill* by Scissor Kick. Image © Robbie McFadzean

Theatre director Julia Taudevin also has reservations about verbal check ins.

So the verbal check in space is quite often relied upon, in creation of work, as a way to check that everyone's okay. But actually I have found that can be a space that can be exploited and abused, but also can be a disingenuous space, you know, it can be a bit of a tick box. It can be, 'yes, I'm fine. Don't talk to me anymore.' (Or) I've found in the past with these check in spaces, people bring personal trauma into the space because they're looking to release it. But it's actually then inappropriate for the work that you're trying to do because really what you're looking for in this scenario is therapy.

Julia Taudevin

Instead, Taudevin begins a day working with a cast of performers by singing together or, for her most recent project, dancing together.

We come together to sort of ritualise the entrance to the work. That is not about sharing what's on our minds, but about being present together, if that makes sense. And the day is bookended with that.

Julia Taudevin

Singing or dancing is also not for everybody, of course. And what this illustrates is that the effectiveness of practices designed to promote positive mental health can depend on the personalities and needs of the individual people involved. Another example is the increasing use of wellbeing practitioners, or wellbeing co-ordinators, people who work alongside directors and producers as a mental health resource for the creative team.

Stories Untold work with wellbeing practitioners on every project they make, even if the subject matter doesn't explicitly touch on mental health. Could this across the board approach be described as good practice? Robert Softley Gale is artistic director of Scotland's disabled-led theatre company Birds of Paradise, and is one of Scotland's most respected advocates for accessibility in the arts, but he has mixed feelings about wellbeing practitioners.



Robert Softley-Gale. Image © Andy Catlin



I'd compare it to intimacy co-ordinators - I know that's a separate thing but there's crossover as we're saying that the wellbeing practitioner's job is somehow distinct from the director's job. That concerns me a little bit because I think it lets directors off the hook. It's my job as a director to make sure that my cast and my team's wellbeing is looked after. A wellbeing practitioner has got further knowledge and they've got more experience of dealing with issues that might arise but as a director it's my job to be there to support the actors. If they are having problems with something that's happening in the rehearsal room or on stage then that affects the play, and I as a director need to hold that, and work with that, and somehow respond to that. So trying to section that part of the job off into different jobs, I worry about that.

Robert Softley Gale

Another theatre director I spoke to compared working with a wellbeing practitioner to having a teacher in the room, and said that feedback from their cast suggested the constant offer of wellbeing was distracting them from actually making the work. They are still planning to work with a wellbeing

practitioner in future, but in a more limited way. One problem here is that, perhaps because this is a relatively new way of working, there is no clear consensus on what experience or qualifications someone actually needs to call themselves a wellbeing practitioner, or how often they should be present in the room.

For Robyn Jancovich Brown though, a clear benefit of wellbeing practitioners – for her and Stories Untold producer Kirsten McPake – is that it provides a creative team with someone to talk to who has no power over them creating a 'culture of wellbeing' across their work.

It means that they're not having to come to me or Kirsten, who are technically their employers who are paying them, or the director or the writer, whoever's in the room, and offer themselves up as being quite vulnerable. They're able to give that to someone else for them to hold. And then, obviously, if there's an issue that needs mediated, that will come back to us and we can address it. But it also means that we're not having to hold people's emotions quite as much, which is great wellbeing for us and makes sure that it's a sustainable way for us to work a little bit more.

Robyn Jancovich Brown

Ultimately, all approaches to wellbeing are likely to be imperfect. One issue that came up a few times in interviews was aftercare; how effective can any form of mental health safeguarding be when it is limited to the short life of an arts project? But it is encouraging to see companies like Stories Untold and Scissor Kick modelling innovative new ideas. Another Scottish organisation that is focusing much of its work on wellbeing is Stellar Quines, an intersectional feminist theatre company active for over 30 years now. I spoke at length to artistic director, Caitlin Skinner, about the challenges involved in creating a 'culture of wellbeing' across their work, and the final word goes to her.

*Read, and listen to, our full length interviews with Robyn Jancovich Brown, Caitlin Skinner, Robert Softley Gale and Stephanie Katie Hunter at [www.mhfestival.com/performinganxiety](http://www.mhfestival.com/performinganxiety)*

At the moment it feels like you start from the principle of being person-centred. You learn, you gather your tools, you find out what other people are doing, and you try some stuff. And then you debrief. As an organisation we run productions but we also do artist development, run engagement projects, and do sector work. So we take from all of those strands and use them across each other. And we see what works. And what we want to do now is to put more things in place strategically so we have more of a menu or a framework within which we make decisions I do feel really hopeful. I do think we're in a process of uncoupling ourselves from exploitative working practices that have been accepted for a really long time. And I think that makes for a really exciting opportunity and an exciting time actually. I think it's tough to be remaking the plane as you are flying the plane, but overall we're headed in a good direction.

Caitlin Skinner



Sarah Hopfinger in *Pain and I* by Stories Untold

# Finding the funny

## Comedy and mental health

**More and more stand-up comedians are now making shows about their mental health. But what are the benefits of these kinds of shows, for performers and audiences?**

I think that stand up, accidentally, has always been focusing on mental health, but it's just never kind of realised it. I remember going to comedy clubs 15 years ago, and people talking about being single, talking about being broke, talking about their relationships with their mothers, and actually all they were trying to do was reframe the really dark stuff and get people to laugh about it so that they couldn't be embarrassed or humiliated about it. And I think comedy has that ability to reframe, that ability to give purpose. It gives meaning, but it also gives identity as well.

Dave Chawner

Dave Chawner is a British stand-up comedian who has also become a mental health campaigner, making numerous appearances on national TV and radio. He began talking about mental health on stage in 2014, in a show called Normally Abnormal, which addressed his struggle with anorexia.

Ironically, I actually felt more comfortable talking about mental health than I did doing club sets. Because I felt there was, without being snotty about it, more value. I felt it really gave me a lot more meaning and purpose rather than going ha ha ha, isn't this a silly sign? Or 'someone said this on the bus'. I felt that there was an explanation there, as well as the kind of entertainment value.

Dave Chawner



For Chawner, as well as being therapeutic, comedy has a unique ability to cross cultural boundaries and connect people.

I think one of the main reasons that comedy focused on mental health, and one of the reasons I think it's the cornerstone of mental health, is it is one of the very, very, very few art forms that transcends class and it transcends gender. No matter whether you are rich, poor, middle, upper, lower working class, whatever it is, humans can laugh before they can talk and I think you can really use that in order to transcend those cultural boundaries in other ways that other art forms and, to be honest, other outlets don't really reach.

Dave Chawner

Dave Chawner is also the creator of Comedy for Coping, a series of workshops that teach people to use humour to connect with others, overcome isolation, and improve their mental health. Across the UK there are numerous similar examples of people teaching stand-up comedy skills to improve people's confidence.



But telling jokes about your mental health also has its risks. Juliette Burton is a comedian with multiple mental health diagnoses who has talked openly about these on stage since 2012. While it has brought her a great deal of success and acclaim, she admits that it has been a learning process.

I used to seek external validation from audiences. I now understand why that was. I do not judge my past self for that, but, much like with social media, I was searching for an external validation of a sense of self that hadn't been properly built within me from childhood upwards. So if you're going into performing comedy, with unmet childhood needs, then that is not a good way to go. Please don't. Please do some work on yourself. Take years away to work on yourself before you put yourself out there on stage. Otherwise you can potentially cause yourself even more problems in the future.

Juliette Burton

Australian comedian Felicity Ward has also been talking candidly about living with anxiety and depression for over ten years now. She says it often takes her three or four years to go from writing a joke to actually putting it in a show.

One thing I would say to anyone who wants to talk about their mental health is make sure that you have dealt with the crux of it before you start to talk about it on stage. So I don't talk about anything that I haven't spoken about in therapy.

I know lots of people have something traumatic happened to them, and then they start writing material about it straight away. For me, that doesn't make sense for lots of reasons. One, I don't know how I'm going to react in the future. I don't know what else there is to come up about it. Emotionally, I mean.

I'm a very big advocate of therapy and support groups and have participated in both for nearly 20 years. And so when I get on stage to talk about it, it means that I'm not going to, to use the buzzword, retrigger myself. There's nothing worse than when you think you're okay with something, and then an audience responds to it in a way that you don't expect. And then it rattles your foundation.

Felicity Ward

At its best, comedy about mental health can be a cathartic experience. One of the most famous recent examples is Nanette by Hannah Gadsby, in which the Australian comedian argued that making self-deprecating jokes about painful and formative experiences of homophobia and sexism had been so damaging for them that they were considering giving up comedy entirely.

Juliette Burton experienced a similar epiphany in recent years.

So there is a term that I learned in the last couple of years, in my ongoing journey of therapy, called performative surface level engagement, which is a phrase used when talking about PTSD. The idea is that we can tell a fixed narrative, we can get so comfortable, almost too comfortable with a certain fixed level of telling a story, you know, beginning, middle, end, and we stay sort of hidden by being removed through the repetition of that fixed story. And we can distance ourselves, especially if you've lived through traumatic experiences, from really processing and feeling the pain of whatever that experience or experiences might be.

I definitely feel that it's not for everybody to perform and...

...tell stories about their lived experience of mental illness. I also recognise that there was a lot of pain that I didn't confront, or I had confronted to a safe enough point. And I stayed there. I stayed stuck there. A bit like with society, we get to a certain level where we'll have comfort around a certain topic, and suddenly we find ourselves stuck. And we don't actually address the causes or the systemic issues that mean that people are oppressed or discriminated against. And I feel that for me, now, in the last couple of years, I've pushed my window of tolerance a bit wider.

Juliette Burton



Juliette Burton

One conspicuous difference between the stand-up comedy world and the world of autobiographical theatre, which we've previously explored, is the lack of formal support networks. Comedians cannot normally apply to public arts funders for the cost of therapists, or wellbeing practitioners. And other comedians will not necessarily be sympathetic if they don't consider the material to be original or strong enough. All the comedians I spoke to have observed a backlash, in recent years, against performers sharing mental health experiences on stage.

I think it's certainly created a lot of cynicism, a lot of anger. A lot of that still exists, people going, oh, is it a dead dad show? You're trying to win an award? You know, there's people that I still get on with very well, but still write in their bios 'this isn't a show that's gonna make you cry so that I try and win an award'.  
Dave Chawner

I have found, in the last few years, there's a kind of fatigue of 'trauma farming'. Many shows were creating not something new that's pushing the conversation forward, but just staying in this one space, which is horrific when it comes to talking about trauma, or any painful experience.  
Juliette Burton



Felicity Ward

Comedy audiences may not be sympathetic either. For Felicity Ward, this is another reason to take lots of time to process whatever it is you're experiencing before sharing it in public.

A bad gig is a bad gig, you know what I mean? Whatever you're talking about. And that's the thing about being ready to talk about it. I'll feel bad if no one laughs because I'm a comedian. But if I've already got professional help for what I'm about to talk about, then the vulnerability will be that I haven't written a joke that's funny enough. There's the risk that you're not ready to hear people laugh at your trauma. That they laugh in a nasty way, that you say something that isn't the joke, and that's what people laugh at. Yeah, you need to be ready. Like with anything, laughs might come from a number of different places. I'm actually not talking about anyone else, but me. Anyone can do whatever they like, it's stand up, you can do it however you want. But for me, I don't want people to be laughing at something that is traumatic, if I haven't already looked at it very clearly and I'm ready for people to laugh at it.

Felicity Ward

The final word goes to Juliette Burton, now a veteran of mental health themed stand-up, who describes herself as a mental health activist as much as a comedian.

The industry is fickle and fame and fortune does not ever come at the cost of sharing something that you're not ready to or that won't do you any good or the audience any good or society any good. If you really want to push the conversation forward, make sure you have the right support around you. Make sure you have collaborators who are going to help bring out the fun in you and the playfulness, because comedy is light in the darkness but even I need to find new and playful ways to tell different stories and to reach new levels of not just depth of experience, but actually lightness, the heights of comedy, to balance it out. If you're going to go really dark, make sure you go really playful at the same time.

Juliette Burton

*Read, and listen to, our full length interviews with the comedians featured here at **[www.mhfestival.com/performinganxiety](http://www.mhfestival.com/performinganxiety)**.*



# 'It's important that we're not causing harm'

A conversation with  
the vacuum cleaner

**There's been a noticeable increase in the number of creative projects that explicitly address mental health. What do you make of this shift, as someone who has been working in this field for a long time now as an artist and activist?**

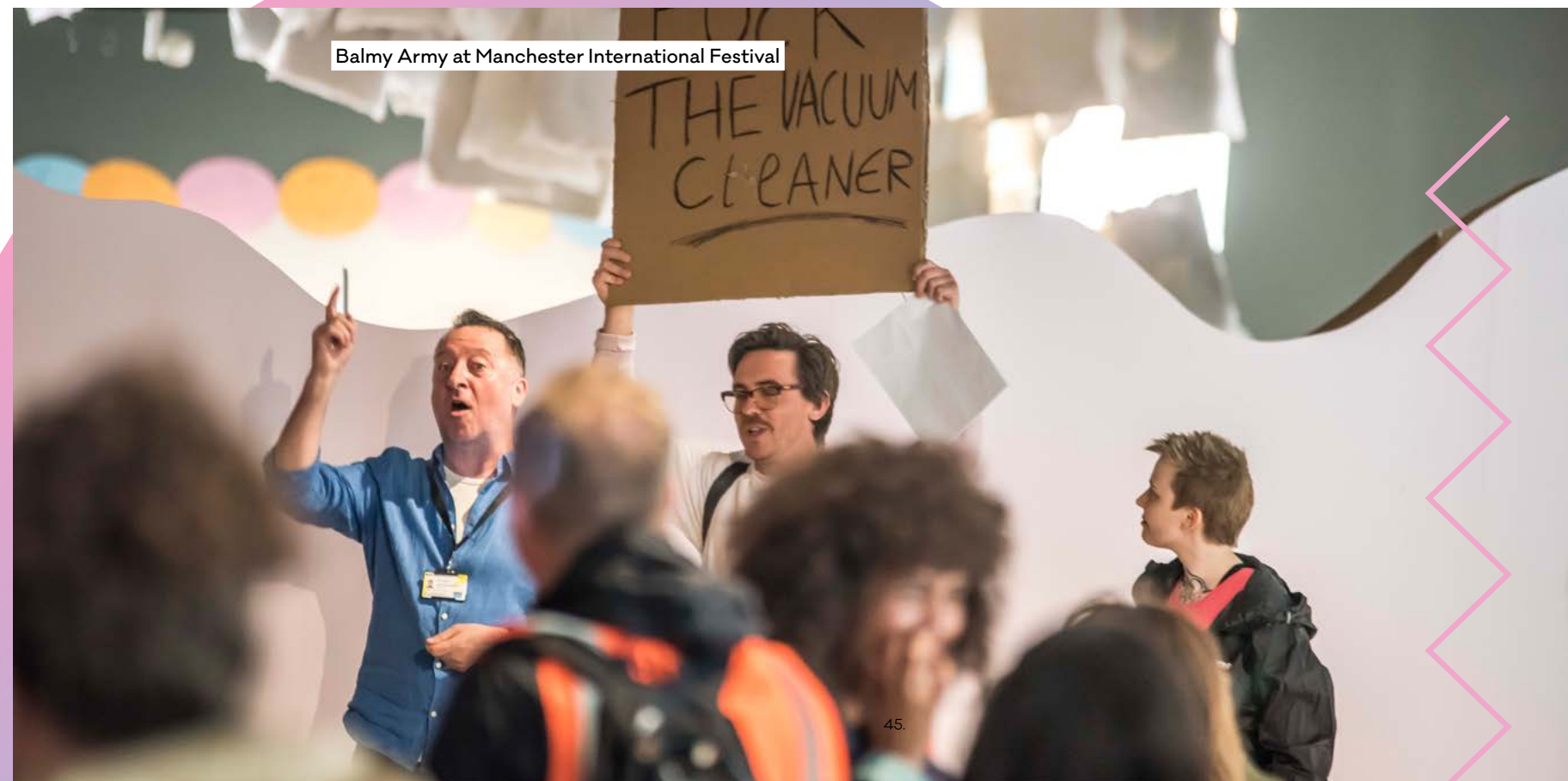
I think that it's great. The human mind is really complex, so the many different narratives around that is great. I think there are downsides, massive questions around how the work is supported and produced. I think if I look at some of my earlier work, it's been problematic in places.

**What do you mean by that?**

Well, in one of my most recent projects, Balmy Army, we were looking with young people at how mental health is individualised. My early work was very much about me. Now, I think that was right at that point in time, because I think it was hard in my life to think about anybody's struggles other than my own, because they were very challenging. But there's been a big shift thinking about us, our struggles, our needs, our care, rather than my care, because the model of care that we have sees individuals as having a problem, but when it's happening to so many people, that's something systemic.

I'm comfortable aligning myself with the question that madness is distressing, painful, challenging, but also not unnatural, not something to be got rid of. Not something like the recovery model. Recovery to what? Back into capitalism?

Balmy Army at Manchester International Festival



**On the section of your website where artists would usually put endorsements from organisations, you've instead put quite antagonistic quotes... the police describing you as 'dangerous' and so on. Do you think of yourself as being constantly in conflict with the system?**

I'm gonna quote Farzana Khan, who is one of the key people within Healing Justice London. She came to speak to some young people I was working with and said something like 'Who's okay right now? If you're okay, right now, what does that say about you? Like, read the room guys. Think about what's going on in the world what we're all going through. It's impossible to be okay right now.' So, I think it is true that I am pushing against something, and that there is a form of antagonism there. But also if you look at the history, over the last 1000 years of mental health care from the foundations of Bethlem Hospital in London to where we are now, there is a long history of quite violent practice towards mad people. So if I am pushing back against that I don't really think I'm being antagonistic. I think, all things considered, I'm actually being quite nice.

**Indeed, and you do work with established mental health institutions.**

Yeah, I mean, I've worked with the NHS. I've worked at Broadmoor, I've worked in CAMHS, you know. I've been doing a big project with the Mayor of London's office. So I don't buy this idea that you're on the inside or the outside. We're all on the inside,

but what I think is really important is that we're not having to censor ourselves or bite our tongues in these conversations.

It's also fun poking a bear. Totally grabs the attention. But also I think there's something that's really important about the joy of resistance. There's something about the project we've just done for Manchester International Festival, Balmy Army, where we worked with 80 young people. When we met these young people, it was hard to get them in the room. They were not confident young people. They were shy, they were very unsure about their own relationship with their mental health. And on the last day of the festival, 200 of them are marching through central Manchester, singing songs with banners with very problematic slogans on them, but they're taking space. And disabled young people should be taking spaces, public spaces, and should be seen and should be heard.

**What are the things you need to consider when working with young people with mental health issues?**

It's really important that we're not causing harm. So harm reduction as a strategy also means that sometimes you have to take a young person and put them in a mental health hospital, because in that immediate moment it's the only way you can keep them safe.

But that also means setting up some really clear boundaries at the beginning of a

process. So you don't have to do anything you don't want to do. On the day of the sharing, on the day of exhibition, you can pull your work and we'll back you on that. Ultimately if you're going to open up about an experience that's hard, it doesn't matter whether you signed a contract or not, you're in control. And that can be really empowering.



I think particularly for young people, it's really important that they feel a sense of agency in that situation to create the boundaries of it because that's not what happens in mental health hospitals, all that is taken away.

I think that's also about creating new aesthetics, not having to work to this kind of like super polished aesthetic. And that doesn't mean that the work is not considered, it means that the means of production of the work are really different. We're coming up with these adaptive and complex ways to navigate through people who have fluctuating conditions.

**What about your own mental health? How do you look after your own mental health while doing this work?**

I have professional supervision with the same person over a long period of time, and a lot of the work I do with her is prefigurative. So it tries to think about what you do before something becomes difficult, so you've got strategies in place in advance. I think that all of the material conditions around the production of the work are really important. And I've learned this the hard way - don't take a meeting just before you're about to do a rehearsal, don't put meetings in afterwards, give things space and time. And the things that I say to the young people, 'you don't have to do this, you can stop at any point', also apply to me.

*This is an edited version of a conversation with James Leadbitter, aka the vacuum cleaner, a UK-based artist and activist who makes work drawing on his own experience of mental health disability and inspired by mad pride, grassroots organising, direct action, deep ecology and disability justice.*

*You can read the full interview at [www.mhfestival.com/performinganxiety](http://www.mhfestival.com/performinganxiety), along with *We Are Not The Problem*, a written provocation by the vacuum cleaner that was specially commissioned for this project.*



# The gatekeepers

## Power and responsibility

**Throughout this resource, we've been looking at how the past few years have seen a huge increase in the number of artists explicitly addressing mental health in their work, drawing on their own lived experience.**

Audiences clearly want to see this work. Funders, festivals and venues want to support it. But what are the consequences for artists' mental health, and what should those in power be doing about it?

As a society and as a sector, we need to move away from glorifying trauma as what makes good art because I don't think it does make good art. I think art can be about trauma, but it doesn't have to be our trauma. Especially young makers, I want to release them from the obligation - young makers of colour, generally, female or ethnic or gender minority artists, you know - of making work about their trauma and then retraumatising themselves.

Julia Taudevin

Julia Taudevin has been working professionally as a playwright and director in Scotland for over a decade and is co-artistic director of Glasgow-based theatre company Disaster Plan. She is often asked to support emerging artists, and has concerns about the kind of work they are being encouraged by the industry to make.

I've been asked a lot to work in development for young or emergent theatre makers generally - as I say, they are makers of colour or gender minority theatre makers - who have been successful in getting funding to develop their idea, which is how to turn their trauma into a play. And that is a problem at funding or commissioning level. But it's a sector problem, because these young theatre-makers are vulnerable, I think, really vulnerable.

Julia Taudevin

What Taudevin is referring to here connects to a series of cultural shifts that have taken place alongside a reduction in stigma around mental health. In the wake of MeToo, Black Lives Matter and the mainstreaming of discussions around transgender rights, there has been an increasing appetite in the industry for stories about people whose experiences - and traumatic experiences in particular - had previously been ignored. Caitlin Skinner, artistic director of feminist theatre company Stellar Quines, has observed this too.

In an industry context, we're very aware that audiences, particularly even in the last five years, have become really hungry for more diverse stories, for stories that they haven't heard before, and for stories about injustice, actually. And so there needs to be particular care around that work. I think also, because we're often working with folks who are underrepresented on stage - that's our job - you're likely therefore to write from your own experience, or to make work from your own experience, because you've not seen it before. So that means you're likely to be exploring trauma, and your own experiences of trauma.

Caitlin Skinner

Caitlin Skinner. Image © Kat Gollock



I asked Selina Thompson, as a prominent black British theatre-maker whose own work explores mental health, for her thoughts on this situation.

Here are some messy thoughts, all half-formed. The first is a quote from Michaela Coel, where she was saying that what matters to her is everybody gets to make the work that they want to make. So the thing I always want to balance, when we're talking about work that is about the trauma of people of colour, is that I have made work that is about some of the foundational traumas of Blackness and irrespective of who was commissioning it, I as a person really needed and wanted to make that work. And I always feel really provoked by any suggestion that there is an excess of that work or that work shouldn't happen. Because if there are artists that want to make it, they should be able to make it. The problem comes if you are an artist of colour who wants to make a *Wind in the Willows* adaptation, and that is completely out of reach for you.

Selina Thompson

Thompson and Taudevin are touching on the same issue here – a need for people in positions of cultural leadership who understand the difference between supporting artists to tell stories about mental health and actually creating work environments that allow everyone to flourish. A good example is Tracy Gentles; now artistic director of Sick! Festival, Gentles previously co-founded the Sick of the Fringe, a mental health initiative at the Edinburgh festival, and went on to found the charity Something to Aim For, which advocates on behalf of people who are marginalised in the arts.

I've always been a champion of artists on the fringes of arts and society, supporting their platforming in new spaces, but also working to change the context around them. The Sick of the Fringe in Edinburgh was about building context through creating conversations. How do we create connection and bring artists together? How do we bring in mental health practitioner and support? How do we have wider conversations about what is actually happening here? What are the coping mechanisms? And lots of things have happened since we were doing this. We've had MeToo, Black Lives Matter for example, highlighting some of the ways people treat each other...



...and how people navigate this. Mental health now being a big priority to me feels like a natural thing because when people become more aware about how they're oppressed by a system or other people in whatever way, they start to think about their needs and their rights in new ways.

Tracy Gentles

Thanks in part to the work of people like Gentles, more of our institutions seem to be prioritising mental health. However it is telling that this has been a long learning experience even for someone like Gentles, whose work has focused on wellbeing for many years now, but who admits that while doing this work she neglected her own mental health.

I think my journey of getting things wrong here has gone from just prioritising artists and not thinking about the wider team, this is what we were doing, and then onwards from that, connecting these dots but then not looking at myself within this. I think it's quite easy, when you're in a curation role, a leader or perceived gatekeeper, and holding these conversations, to forget yourself. I think if you lead with this, giving permission to yourself to look after yourself, you



can then support other people. I think the hardest thing is to live it. It's easier to say it. So, I think that is the final piece of the journey, asking, 'how do you actually live this and make it sustainable?' Leadership that embodies this, and spaces where you can feel a more holistic invitation has being made are beautiful things. Whilst it's also safer for yourself and stops you burning out.

Tracy Gentles

Someone who understands this all too well is Ross Mackay. Now a freelance writer and director, until 2020 Mackay was artistic director of Scottish theatre company Tortoise in a Nutshell. In 2016, Tortoise in a Nutshell made a show called *Fisk*, inspired by Mackay's experiences of depression. The show was an international success, and opened up valuable conversations about mental health. When it toured as part of the Scottish Mental Health Arts Festival it was accompanied by workshops about mental health.

Behind the scenes though, the stress of running the company was making it impossible for Mackay to manage his depression, and ultimately he had to leave the job.



Working for a company, you were employing people, bringing people on for a gig. I was the director and if I wasn't there, things stopped or got held up. So other people couldn't do their jobs because I wasn't doing my job. And that was really difficult. What would happen is I'd go to the doctor, would be signed off, and then I would desperately try and get myself to a point where I could get back into work. So the focus for me was not me feeling better, the focus was 'I can survive a day at work so I'll go in', it wasn't that I felt like the anxiety had reduced or that my suicidal feelings had reduced, but that I managed to get them enough under control that I wasn't dangerous. Looking back, that was a really bad cycle that I had got caught in for quite a few years.

Ross Mackay

Mackay is aware of the irony of making a hit show that raised awareness about depression while his own mental health was in crisis.



On reflection, what we didn't have in there was anyone we'd employed as mental health support. It's interesting, now I'm doing a project with the National Theatre of Scotland, and it's not even about mental health, per se. And they instantly said, 'we employ counselling services that anyone from NTS can use.' That's very different because with Fisk we didn't have any of that. And I think, looking back, that was a big gap, because all the conversations were about the show. Reliving the trauma wasn't about me processing it emotionally or psychologically, it was about sort of using that as material. But then there was no aftercare for me having brought those memories up and trying to process them.

Ross Mackay

It feels impossible, ultimately, to talk about good practice in making creative work about mental health without addressing the wider issue of mental health across the performing arts industry, an industry that is in a state of crisis itself. It is a problem that Selina Thompson keeps encountering.

Something that we come up against often is that we have to deal with huge amounts of hostility and aggression, both passive and active, from people who are overworked, masking their own mental health issues and masking their own neurodiversity within their workplaces. So how you treat your staff tells me a lot about whether you can actually take care of me and my company, when we're working in your building. And that that's not to say that it's impossible, or it can't be done, but I think it's long, slow, constant work. But we're talking about actually remaking the foundation of how the arts works, if you really want to change things, and that can't be rushed. That's the big picture, but maybe the place to start is 'how are you working with a person?' And how are you working with them in a way that isn't extractive? That's what's at the core of it: seeing...



the person in front of you, not just an art machine.

Selina Thomson

The challenges of addressing mental health in an industry that is often exploitative is something that came up a lot in my conversation with Caitlin Skinner of theatre company Stellar Quines. But our interview ended on a positive note, and so this chapter will too.

Things that I'm hopeful about - you know, I really am starting to see mental health be referenced openly and regularly, and in a nuanced and expansive way. I think people will look back on us and laugh at our naivety probably, our kind of clumsiness, our excitement about 'wow, we could talk about mental health, how exciting'. So I'm looking forward to moving to a more nuanced place perhaps. When we start to see our mental health as a positive part of who we are, even if it's challenging, I think that's really exciting. And I feel like there's a younger generation of artists who are going to do that.

Caitlin Skinner

Read, and listen to, full length interviews at [www.mhfestival.com/performinganxiety](http://www.mhfestival.com/performinganxiety)



# Good practice guide

**When it comes to mental health, everybody's needs are different and there are no 'one size fits all' solutions. However, here are some initial suggestions and questions to consider, drawing on conversations with over 30 writers, performers, directors, producers and programmers who have professional experience in this field.**

You'll find a longer version of these guidelines at [www.mhfestival.com/performinganxiety](http://www.mhfestival.com/performinganxiety). It will be continually updated in response to feedback so that this resource can evolve as we continue to learn. If there are things you think we've missed – or that we've got wrong – contact Andrew Eaton-Lewis at [smhaf@mentalhealth.org.uk](mailto:smhaf@mentalhealth.org.uk)

## Autobiographical work

**Some things to consider if you're planning to share personal mental health experiences with an audience:**

**Are you ready?** Is the experience you want to share something you're still processing? Do you have enough distance from it to do it safely? If you're not sure, we recommend taking lots of time to talk about it to friends, and a therapist if possible, before sharing it as part of a creative process.

"I find it really useful to use some of the more painful things that have happened and write about them. But I would only write about these things years on, when I have found my footing. I worry when people are working through things and writing about them and they're very raw."

Laura Horton, playwright

**Remember art is not a substitute for therapy.** If you are looking to audiences (or critics) for validation, a negative response is likely to be triggering for you.

**The 'why' is important.** Think about why you want to share these experiences in public. Who is the audience for it? Why do they need to see it? How might it help them?

**Make time for a research and development (R&D) phase before sharing anything in public.** Several artists we spoke to emphasised the importance of trying out raw ideas you might not end up using, without the pressure of creating a finished product that could be exposing for you in ways you hadn't anticipated.

"In a mental health context, R&D is really important. It's almost like the material will tell you whether you're ready or not. If you try and make something and it's painful to even look at, then you know you're not ready."

Bryony Kimmings, writer-performer

## Be mindful of overexposing yourself.

Can you fictionalise your story? And if you don't want to, what narrative devices can you use to put a safe distance between the material and your real life? What details can be changed?

**Consider how sharing your story might affect other people in your life.** Does your story involve other people? Do you have their explicit consent to tell it? If not, what measures are you putting in place to ensure what you are doing is ethical? Can characters be identified as real people? What are the potential consequences if they are identified, particularly if the show reaches a wide audience and is discussed on social media?

### Consider how your mental health might be affected during every stage of the production process.

Can you work long days? If you can't, how will that change the length of the process? What parts of the show are likely to be most triggering for you? Are you going to be able to tour it? If so, for how long? And what support might you need afterwards?

### Include therapy in your project budget as an access cost.

If you are exploring potentially triggering material, therapy is a legitimate access cost and funders are increasingly recognising this.

**Set boundaries** when talking about the work. Just because you have chosen to share something very personal, you are not obliged to share anything beyond what you have chosen to include in a show, or to discuss the material in any forum (rehearsals, post-show Q&A etc) where you are not comfortable doing it.

### What does it look like to cancel a show?

Do you have a contingency plan in place, for example someone who can perform instead of you? If you have a clear plan for this, it will become just another process rather than something to be anxious about.

### Build aftercare into the project plan.

Consider how creating this project might impact on you long term and how much time you will need to recover, and build this into your plan.

"Make sure you know what it looks like to cancel a show if it's not safe for you to perform it. Because if you know what the steps are, it stops being this terrifying thing you can't do, and becomes just another process."  
Selina Thompson, writer-performer

## Participatory work

Some things to consider when creating mental health themed artistic work with a group of participants:

**Accessibility.** Have you considered all the access needs of your participants? Is the space, and time (time of day, length of event), fully accessible not just practically in terms of wheelchair access etc but in terms of participants feeling at home and at ease? Do you have a budget for travel, food and drink, and childcare? Have you considered the impact of threshold anxiety on people's willingness to enter spaces associated with the arts?

**Do you have appropriate mental health professionals in the room?** Do you have the necessary skills to hold a space with vulnerable people? If not, are you working with support workers, therapists, or wellbeing practitioners?

### Is your consent form fit for purpose?

A consent form will clearly outline how material created during the project will be used, who will see it, what will happen to it afterwards, how long it will stay in the public domain, whether or not participants will be identified etc. Are you being clear with participants about how will use the material, and what control they will have over it at every stage of the process?

### Remember that consent is ongoing, not static.

It is good practice to allow participants to withdraw material, or decline to perform their work, at any stage in the process. Also, if you are encouraging someone to share mental health related material with an audience, have you discussed with them how this might be received by people they know – loved ones, family members – and do they understand the implications? You might want to consider renewed consent, which allows you to use material only for a limited, mutually agreed time, or limited consent, where people's real names or photographs aren't used, or where nothing appears online.

### How adaptable is your artform?

Several interviewees told us that projects in which participants could choose the artform themselves during the process had better levels of engagement. Are you willing and able to adapt what you want to do in response to participants? If done innovatively, this can lead to stronger artistic work.

### All layers of involvement are valuable.

Try not to see someone's reluctance to fully engage in a process as an obstacle. If they need to wear headphones or regularly check their phones, for example, or if they can only be involved intermittently or for a short time, work with that. If they want to listen but not talk, work with that. All levels of engagement are valid and will bring something extra to the project. And if you can meet people half way they may then grow in confidence and participate more.

### Are you setting clear boundaries when sharing information?

You need to anticipate the possibility of participants sharing distressing experiences in a way that is not appropriate for the process, or stressful for other participants, and sensitively set boundaries about when and how experiences can be shared.

## Producers

Some things to consider if you are supporting artists to make work about mental health:

### Be clear from the beginning about what you can and cannot do

and manage expectations. Be mindful that even approaching you about a project can make someone vulnerable. Make sure you clearly explain what level of capacity you actually have to help, and what you can and cannot do for them.



### Consider offering an access rider at the beginning of the working relationship.

While access riders tend to be associated with artists who are disabled or neurodivergent, some producers are now providing templates for everybody they work with, encouraging them to set out what they need to do the best job possible.

When you implement support with access and inclusion in mind, everybody benefits. And it means that from word go on contract, we know what that person's needs are moving forward.

Stephanie Katie Hunter, producer

### Consider working with a wellbeing practitioner.

The right wellbeing practitioner can support you to prioritise mental health in various aspects of the creative process.

### Is there someone looking after the team's wellbeing who is independent enough from the creative or contractual process to have no power over them?

This could be a wellbeing practitioner or just a nominated person within the project who is relatively independent. Either way, you need someone people can confide in without worrying they're putting their job at risk.

### Consider an 'opt in' rather than 'opt out' approach to wellbeing.

For example, you could let your team know that they will be contacted by a wellbeing practitioner early on in the project and, if they don't feel they need this, they can opt out. This way, you're not placing the burden on anyone to come forward and single themselves out. Instead, wellbeing is integrated into the process.

**Include an offer of therapy in your budget plan** but also be mindful of the limits of this, given that effective relationships with therapists are very personal and often long term. Consider including a budget line for team members to source their own therapy, on their own terms – this could be time with their own therapist, or just time at a sauna or swimming pool.

**Build aftercare into a project plan (and budget).** Several people we spoke too highlighted the issue of people feeling abandoned after a project ends. Ensure that you plan some time for reflection and face to face discussion at the end of the project.

**Remember the people matter more than the work.** Ultimately people's wellbeing throughout the project needs to be of more importance than the end product, and this principle should be built into the project plan.

## Programmers

**Things to consider if you are programming work about mental health:**

**Prioritise access right from the beginning.** If you want to work with people with mental health challenges, then you need to build your event plan around what will and will not be safe for that person to do, for example in terms of working hours and rest time. You also need to anticipate the possibility of someone cancelling a performance at short notice, and have a contingency plan in place.

### Human connection is important.

Several artists we spoke to emphasised the importance of human connection, what one described as the "disconnect between the emotional world of an

artist and talking about the work like it's a commodity". Take time to build relationships and, where possible, assign just one person as a consistent point of contact. Ensure that access riders are carefully read and requests honoured.

**Look after your audiences.** If an event requires trigger warnings, when and how are you communicating this? Are they as clear as possible? Can audiences leave the space mid-performance if they need to? How practical is it to do this and have you considered this when planning seating arrangements? Are you providing a space after the show that allows people space and time to process what they've just experienced?

*Our full set of guidelines are at [www.mhfestival.com/performinganxiety](http://www.mhfestival.com/performinganxiety)*



Amy Conway in *Super Awesome World*. Image © Amy Conway



# The Baring Foundation

**Performing Anxiety is a resource for anyone who wants to make audience-facing arts projects about mental health.**

It draws on interviews with over 30 people – writers, performers, directors, producers and programmers - across the UK, many of whom have done pioneering work in this field in recent years.

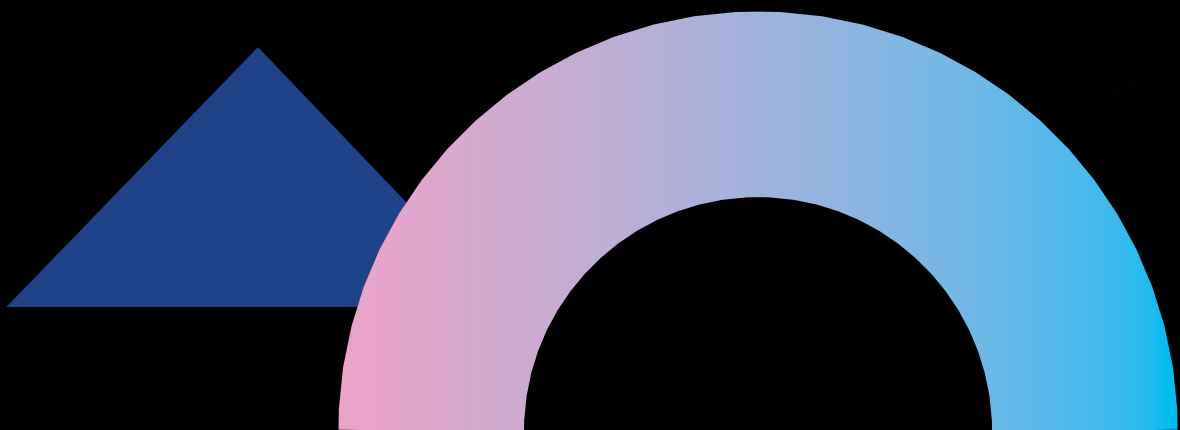
The resource covers autobiographical work, participatory work, safer working environments, leadership, and more (including a section on stand-up comedy).

Performing Anxiety was created by the Scottish Mental Health Arts Festival and the Mental Health Foundation, with funding from the Baring Foundation.

As well as this document, Performing Anxiety is also available as a podcast, a series of full length interview transcripts, with accompanying audio, and an expanding set of guidelines, all of which you will find at

[www.mhfestival.com/performinganxiety](http://www.mhfestival.com/performinganxiety).

We would like to say a huge thank you to all the people who shared their experiences and wisdom with us, and to the Baring Foundation for their support.



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*The Scottish Mental Health Arts Festival is led by the Mental Health Foundation. For more information on supporting your own or others' mental health, go to [www.mentalhealth.org.uk](http://www.mentalhealth.org.uk)*