



# **Human Henge**

## **Wellbeing Research: Final Report**

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# Bournemouth

## Version 2 (November 2018)

This report was prepared by Vanessa Heaslip and Timothy Darvill as part of ongoing research for the Human Henge Project.

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## Introduction

Human Henge is run by the Restoration Trust in partnership with Richmond Fellowship, English Heritage, the National Trust and Bournemouth University and supported by Avon and Wiltshire Mental Health Partnership NHS Trust. It was funded by the Heritage Lottery Fund, Wiltshire County Council and English Heritage. The aim of the project was to enhance mental wellbeing of participants through activity and exploration in the prehistoric landscape. This was achieved through a facilitated programme of participant-led activities coupled with experts, carers, support workers, and contributors from a range of cultures who together explored prehistoric landscapes in the Stonehenge and Avebury World Heritage Site.

This report builds upon the first report shared in June 2017 (Darvill & Heaslip 2017). The research question that framed the project was: *“Does a creative exploration of historic landscape achieve sustained, measurable mental health and wellbeing outcomes for people with mental health conditions?”* Answering this was achieved through two parallel investigations. First, a study of available literature and published case studies was collated and published as a chapter in the volume *A handbook of well-being* edited by Kate Galvin (Darvill et al. 2018). Second, the focus of this report, was an evaluation of the impact of the Human Henge project on the mental well-being of its participants.

## Dissemination

In addition to the book chapter identified above, short accounts and notices of the Human Henge project have appeared in range of media.

- Publications include: English Heritage Staff Newsletter (March 2017); English Heritage Member’s Magazine (May 2017: 12); My Weekly (22 June 2017); Megalith (Summer 2017); Current Archaeology (August 2017: 44–46); Guardian Online (21 December 2017); Museums as Spaces for Wellbeing (April 2018); Heritage Lottery Fund website News Features and Blogs (June 2018); Heritage Lottery Fund Our Projects (November 2018) .
- Radio and television coverage includes: BBC Radio 4’s Open Country (first broadcast 21 April 2017); BBC Points West (first broadcast 27 March 2017); BBC Radio Wiltshire (22 March 2017).

- Exhibitions include: Amesbury Library (25 May – 6 June 2017); Green Land Hospital (9 June - 21 July 2017), Stonehenge Visitor Centre (24 July – 2 September 2017), Salisbury Library (18 September – 2 October 2017), Melksham Library 2– 16 October 2017), Chippenham Library 16 – 30 October 2017, Bournemouth University (13 – 20 April 2018), National Trust Avebury Visitor Centre (10 May – 10 June), Marlborough Library (14 – 29 June 2018).
- Festivals and open days include: Salisbury Festival of Archaeology (22–23 July 2017 in Salisbury Museum); Heritage Open Day walk at Stonehenge (8 September 2017); World Heritage Day walk at Avebury (20 April 2018); Wiltshire Farm Open Day (10 June 2018)
- Lectures and presentations include:
  - “Cultural Heritage Therapy in Action” at the Stonehenge Education Room (27 March 2017);
  - “Human Henge and Heritage Wellbeing” at the Stonehenge and Avebury History and Archaeology Research Group at Devizes Museum (2 June 2017);
  - “Human Henge: Cultural Heritage Therapy in Action” at the Culture, Health and Wellbeing International Conference, Bristol (20 June 2017);
  - “Human Henge: Cultural heritage therapy and its impact upon mental health and wellbeing” at the Humanising conference, Bournemouth University (29–30 June 2017);
  - “Human Henge: Cultural heritage therapy and its impact upon mental health and wellbeing” for the University of the Third Age at Bournemouth University (11 September 2017);
  - “Human Henge: Stone Henge as a healing environment in the 21st Century” for the Theoretical Archaeological Group at Cardiff University (19 December 2017);
  - “Human Henge: historic landscapes for mental health”, West of England Learning Symposium, Devizes, (6 March 2018)
  - “Human Henge for health”, Trowbridge Service Users Group, Trowbridge, (12 March 2018)

- “Impact of Neolithic healing landscapes on mental health and wellbeing” at Historic Landscapes and Mental Well-being Conference Bournemouth University (13 April 2018);
  - “Human Henge: cultural heritage and wellbeing”, Heritage and Wellbeing Workshop University of Kent (7 June 2018);
  - “Human Henge: heritage and mental health”, National Womens Register Conference, Salisbury (6 October 2018);
  - “Impact of Neolithic healing landscapes on mental health and wellbeing” at Bournemouth University (9 October 2018)
- A project website is available at: <http://humanhenge.org/>.

A one-day conference entitled Historic Landscapes and Mental Well-being was also held at Bournemouth University on the 13 April 2018. Attended by around 80 participants, the morning sessions focused on the work of the Human Henge project while papers presented in the afternoon showcased half a dozen other projects taking place in various parts of England, as well as explorations of the theoretical underpinnings, mainly in the field of phenomenology and hermeneutics. The papers from this conference, as well as some additional papers from the TAG session mentioned above, are currently being edited to form a monograph report that will be published in early 2019 by Archaeopress of Oxford. The volume will be available as a print-on-demand publication at cost, and for free on-line through gold open-access.

## **Background**

As described in the previous report (June 2017) the Human Henge project started at Stonehenge with a programme of ten half-day sessions held in different parts of the surrounding landscape. These included Durrington Walls and Woodhenge, the Cuckoo Stone, the King Barrow Ridge Barrow cemetery, and the reconstructed houses and displays at the Stonehenge Visitor Centre. A night-time walk along the Cursus provided a chance to experience the largest monument in the landscape under a star-lit sky. The programme culminated with an early-morning ceremony inside Stonehenge, designed and executed by the participants themselves. Music, song, poetry, illustration, and pot-making featured

amongst the activities. The programme ran twice, Group 1 in autumn 2016 and Group 2 in spring 2017, with only slight variations in its delivery.

Further funding was obtained by the Restoration Trust in autumn 2017 that enabled a third iteration of the programme to be run at Avebury in spring 2018. This had a similar structure to the Stonehenge programme, with the ten sessions variously based at monuments in the surrounding landscape and at the Alexander Keiller Museum in Avebury village. The monuments visited included Windmill Hill causewayed enclosure, West Kennet long barrow, The Sanctuary stone and timber circles, Silbury Hill and the Swallowhead Springs, round barrows on the Ridgeway and Avebury Down, and the sarsen field at Lockeridge. The night-walk followed the line of the West Kennet Avenue to the southeast of Avebury, an area with excellent dark-sky conditions for star-gazing. As in the earlier programmes, music, song, poetry, illustration, and working with clay formed key activities. The final ceremony took place within Avebury itself on a snow-covered morning.

## Participants

Participants for all three groups were recruited through the Richmond Fellowship, a charity that specialises in supporting individuals with long term mental health needs. All of the participants self-identified as having ongoing mental health issues. The research did not explore in depth the types of mental health issues the participants had, nor their current medical care.

The total number of participants in Human Henge was 35 (13 in Group 1, 10 in Group 2, and 12 in Group 3). It is important to note that participation in the research element of Human Henge was entirely voluntary, in that participants were free to participate in the Human Henge 10 week programme but not the research element, or indeed they could choose to opt out of particular element of the research process if they wished. In total, 35 participants (n=16 men, n=19 women) were involved with evaluating the impact of Human Henge on their mental health. The age of the participants ranged between 21 and 77, with the mean age being 45. Table 1 summarizes the age and gender structure of those taking part in the research by programme group (Group 1, n=13; Group 2, n=13; Group 3, n=12).

**Table 1** Age and gender composition of participant groups

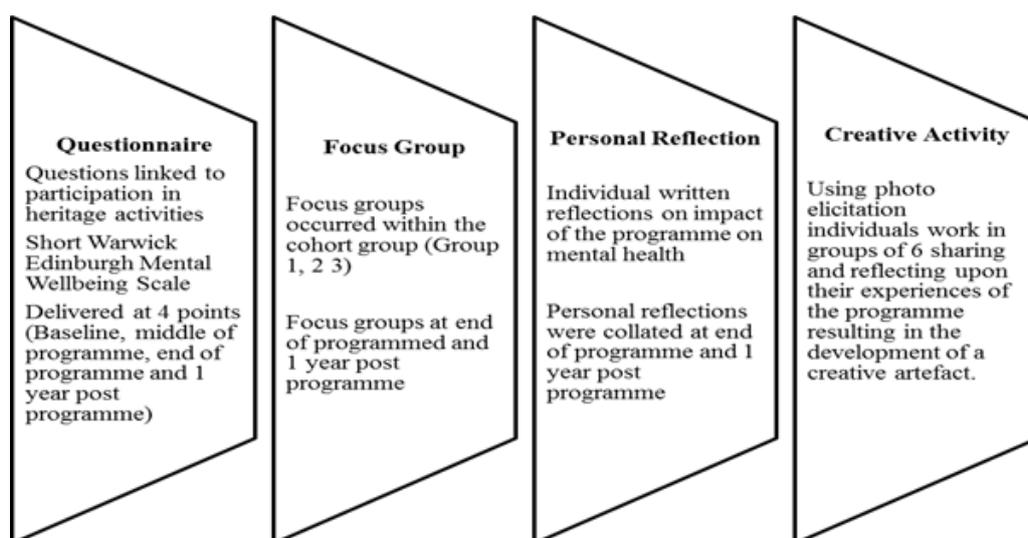
	<b>Group 1</b>	<b>Group 2</b>	<b>Group 3</b>	<b>Total (n=35)</b>
Age range	26-77	35-54	21-56	21-77

Mean age	51.23	43.30	39.83	45.06
Male	9 (69%)	3 (30.0)	4 (33.3)	16 (45.7)
Female	4 (31%)	7 (70.0)	8 (66.7)	19 (54.3)

Table 1 shows there were differences between the three groups. Group 1 had the greatest age range (26 to 77), but was also an older cohort consisting of more males. Group 2 was a younger cohort consisting of more females whilst Group 3 was an even younger cohort (mean age 39.83). Over the three programmes, the population represented by the participants was fairly balanced in terms of gender profiles.

## Data collection

This was a mixed method evaluation (Figure 1). Full description of the methods was presented in the interim report (June 2017) and as such has not been replicated here. A key point to note was the use of both qualitative and quantitative data collection methods promoting methodological triangulation. Methodological triangulation is used to explore the degree to which findings from the two different data collection methods converge (Simons and Lathlean 2010) which is useful in increasing the depth and validity of the data presented (Parahoo 2006).



**Figure 1** Data collection methods

## Findings

As identified, the total number of participants in Human Henge was 35 (n=13 in Group 1, n=10 in Group 2, and n=12 in Group 3) and all of these consented to participating in the research component of the project. However as there were multiple data collection points (baseline, mid 10 week programme, end of ten week programme and 1 year post programme) not all participants completed all parts of the research process (see table 2).

**Table 2** Participant numbers at each data collection point

Group 1 (Stonehenge)	Baseline n=13 Mid ten week programme n=10 End of ten week programme n=10 1 year post programme n=7
Group 2 (Stonehenge)	Baseline n=10 Mid ten week programme n=9 End of ten week programme n=9 1 year post programme n=5
Group 3 (Avebury)	Baseline n=12 Mid ten week programme n=11 End of ten week programme n=11 1 year post programme - due for data collection Spring 2019

Reasons for this were largely due to participants missing sessions due to ill health and one participant (Group 1) left the programme due to starting work. The number of participants who completed the data collection at the one year post programme was lower (52%) and this drop-off is common in longitudinal research.

### Quantitative Findings

At the start of the Human Henge programme one of the questions in the baseline questionnaire asked participants: "What attracts you most to the Human Henge Programme?" Their responses were in free text format, subsequently analysed by identifying themes and trends using thematic analysis (Braun and Clarke 2006). Reasons for becoming involved in Human Henge were multi-faceted and included interest in: Stonehenge (n=7); history (n=8); the outside landscape (n=4); and curiosity about the project (n=4). Other reasons for wanting to participate were linked to the individual and a desire to challenge themselves: to gain confidence in order to test their own limits and overcome some fears (n=8), as well as a desire to meet new people who were experiencing

similar challenges to them (n=9). However, 18 of the participants expressed feeling apprehensive about the project; mainly because of meeting new people and being in a group setting (n=10), and anxiety (n=6).

At the end of the 10-week programme the participants were asked: “What aspects of the Human Henge programme have you liked most?” The majority of responses to this question focused on the landscape and being outside (n=14), followed by being with people (n=13), Stonehenge itself (n=6), the creative activities (n=4), and history (n=2). The following free-text statements capture the range of emotions:

*“Fresh air, ancient landscapes, experimental archaeology – all providing a wholesome and simplistic early life focus for the group to chat, laugh, have fun, dance and sing” (Participant 10 (Female) Group 1 Stonehenge, end of 10 weeks)*

*“Meeting new people; understanding more about my mental health by talking to others with mental illness” (Participant 16 (Male) Group 2 Stonehenge, end of 10 weeks)*

*“Becoming part of a group with the participants and feeling belonging, walking in the fresh air and learning about the ancient history and cultures of Britain” (Participant 18 (Female) Group 2 Stonehenge, end of 10 weeks)*

*“The group - seeing this collection of disparate people, most of whom have not met before, gel together through their common experience of negative mental wellness and an interest in trying something new (despite their reserve in stepping outside their safe zone)” (Participant 30 (Male) Group 3 Avebury, end of 10 weeks)*

When participants were asked at the end of the ten week programme what they liked least about the Human Henge programme there were fewer responses (17 out of 35) and analysis of their free text responses identified the following trends: inclement weather (n=3); singing (n=3); lack of structure (n=3); end of the project (n=2); physical demand of the programme (n=2); press presence (n=1); limited number of volunteer positions available at Stonehenge (n=1); being with people (n=1); indoor session (n=1); and form filling (n=1). The following free-text statements capture the range of feelings:

*“Being alone among so many people having to avoid the communal singing and dancing” (Participant 4 (Male) Group 1 Stonehenge, end of 10 weeks)*

*“Occasional lack of structure” (Participant 16 (Male) Group 3 Avebury, end of 10 weeks)*

*“Talking in a group, I’m just too worried all the time. Wished there was more time for me to gain more” (Participant 31 (Female) Group 3 Avebury, end of 10 weeks)*

*“At times I felt very tired and was confused about where we were going or what was happening. I feel at times the activity was catered to the most able and not the least”  
(Participant 14 (Female) Group 2 Stonehenge, end of 10 weeks)*

*“I was upset by the limits to paid work at Stonehenge because so much is done by volunteers - this spoilt my hopes for future work there” (Participant 16 (Male) Group 2 Stonehenge, end of 10 weeks)*

At the end of the ten week programme participants were asked if they felt that Human Henge had impacted on their mental health or overall wellbeing: 65.7% (n=23) identified that it had a positive impact upon their mental health and wellbeing, 17.1% (n=6) were unsure, and six people did not complete this question. The qualitative comments highlighted enhanced mood, improved confidence in their own abilities, a renewal of interests in the past, new understandings, and for a couple of participants a fear of the future:

*“Renewed an interest in the past, an interest I’ve long neglected” (Participant 4 (Male) Group 1 Stonehenge, end of 10 weeks)*

*“Difficult to say, I think it has been beneficial and stopped too much introspection” (Participant 1 (Male) Group 1 Stonehenge, end of 10 weeks)*

*“Too soon to say, but it's moved me forward in thinking and understanding myself and in ideas for the future” (Participant 16 (Male) Group 2 Stonehenge, end of 10 weeks)*

*“I feel more confident in my ability to manage and interact with other people, to get up and out and meet new people. I feel more confident about leaving the house” (Participant 14 (Female) Group 2 Stonehenge, end of 10 weeks)*

*“Meeting new people and making friends. Learning about a whole new world of knowledge, it’s changed my outlook on life; I have enjoyed the Avebury countryside. The 10 weeks have given me more motivation, confidence and determination” (Participant 32 (Male) Group 3 Avebury, end of 10 weeks)*

*“I have finally got comfortable but now it’s over. It's helped me to get out but now I'm worried what to do next. I'm wanting to move forward but feel it is over too soon” (Participant 31 (Female) Group 3 Avebury, end of 10 weeks)*

As identified in the first report the Short Warwick Edinburgh Mental Well-being Scale (Tennant et al. 2007) was used to measure the mental wellbeing of the participants. Within this scale there are seven different facets of mental wellbeing that are explored:

1. Feeling optimistic about the future
2. Feeling useful
3. Feeling relaxed
4. Dealing with problems well
5. Thinking clearly
6. Feeling close to people
7. Able to make up my own mind about things.

In order to explore the impact the programme had on participants' mental health and wellbeing, we input the data obtained from the four surveys (baseline, mid project, end programme and 1 year post programme) for Groups 1 and 2 and data obtained from the three surveys (baseline, mid project and end of programme) for Group 3 into a SPSS spreadsheet and undertook descriptive statistical analysis. The 1 year post-programme data collection for Group 3 will be conducted in spring 2019. For this report, the five point rating scale has been condensed into three points: none of the time/rarely, some of the time, and often/all of the time (Tables 3-9). The data is shown as percentages for ease of reading.

**Table 3** Descriptive statistics for the 1st scale - feeling optimistic about the future

	Baseline Number (%)	Mid project Number (%)	End of project Number (%)	1-year post project Number (%)
<b>All sample (n=35)</b>				
None of the time/rarely	16 (45.7)	10 (28.6)	9 (25.7)	-
Some of the time	14 (40.0)	12 (34.3)	14 (40.0)	-
Often/all of the time	3 (8.6)	8 (22.9)	7 (20.0)	-
Not replied	2 (5.7)	5 (14.3)	5 (14.3)	-
<b>Group 1 (n=13)</b>				
None of the time/rarely	6 (46.2)	4 (30.8)	6 (46.2)	4 (30.8)
Some of the time	6 (46.2)	4 (30.8)	2 (15.4)	2 (15.4)
Often/all of the time	1 (7.7)	2 (15.4)	2 (15.4)	1 (7.7)
Not replied	-	3 (23.1)	3 (23.1)	6 (46.2)
<b>Group 2 (n=10)</b>				
None of the time/rarely	4 (40.0)	3 (30.0)	1 (10.0)	1 (10.0)
Some of the time	5 (50.0)	4 (40.0)	6 (60.0)	2 (20.0)
Often/all of the time	-	2 (20.0)	2 (20.0)	2 (20.0)
Not replied	1 (10.0)	1 (10.0)	1 (10.0)	5 (50.0)

<b>Group 3 (n=12)</b>				
None of the time/rarely	6 (50.0)	3 (25.0)	2 (16.7)	-
Some of the time	3 (25.0)	4 (33.3)	6 (50.0)	-
Often/all of the time	2 (16.7)	4 (33.3)	3 (25.0)	-
Not replied	1 (8.3)	1 (8.3)	1 (8.3)	-

Exploring the participant’s responses to feeling optimistic about the future overall (table 3) for the three groups there was an improvement in the numbers of participants that replied often/all of the time from 3 at baseline rising to 8 mid project and dropping to 7 at the end of the project. In addition, this improvements in positivity about the future was also apparent for each of the three groups during the first three points of data collection (see figure 2). Looking at the 1 year post involvement in the HH programme, it is difficult to explore patterns due to the small numbers of participants who participated in this data

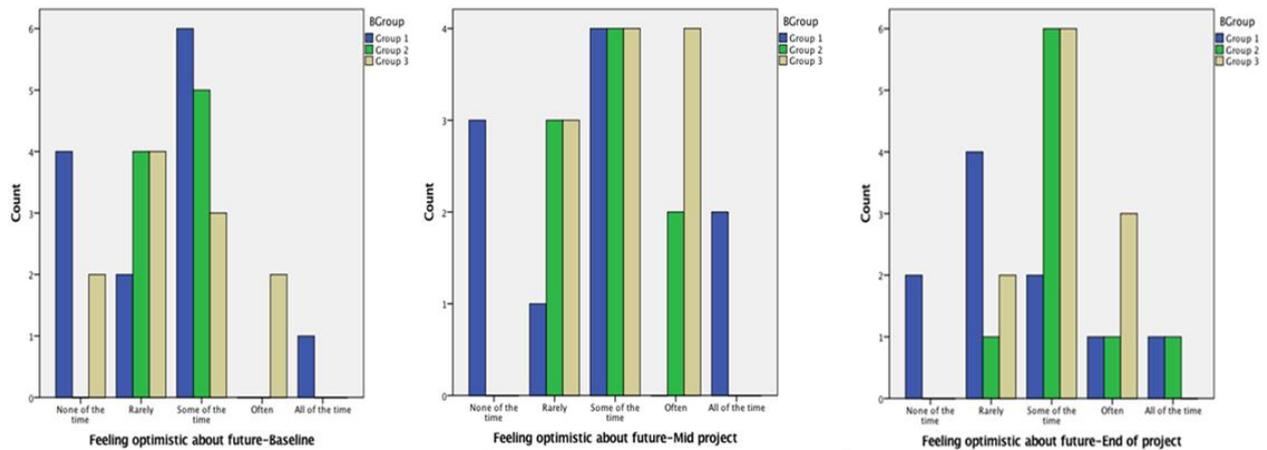


Figure 2 Trends - Feeling Optimistic

collection (n=12).

Exploring the participant’s responses to feeling useful shows a similar picture in that the total number of respondents who identified they felt useful often/all of the time was three at baseline, rising to 3 mid of the ten week programme and to 9 at the end of the 10 week programme (table 4). When examining whether this was sustained for groups 1 and 2 at the 1 year post involvement the 10 week programme shows that there is a drop from 3 to 2 in Group 1 and from 3 to 1 in Group 2 (figure 3).

Table 4 Descriptive statistics for the 2nd scale - feeling useful

	Baseline Number (%)	Mid project Number (%)	End of project Number (%)	1-year post project Number (%)

<b>All sample (n=35)</b>				
None of the time/rarely	13 (37.1)	12 (34.3)	6 (17.1)	-
Some of the time	17 (48.6)	13 (37.1)	15 (42.9)	-
Often/all of the time	3 (8.6)	5 (14.3)	9 (25.7)	-
Not replied	2 (5.7)	5 (14.3)	5 (14.3)	-
<b>Group 1 (n=13)</b>				
None of the time/rarely	2 (15.4)	3 (23.1)	3 (23.1)	3 (23.1)
Some of the time	10 (76.9)	6 (46.2)	4 (30.8)	2 (15.4)
Often/all of the time	1 (7.7)	1 (7.7)	3 (23.1)	2 (15.4)
Not replied	-	3 (23.1)	3 (23.1)	6 (46.2)
<b>Group 2 (n=10)</b>				
None of the time/rarely	5 (50.0)	5 (50.0)	1 (10.0)	2 (20.0)
Some of the time	3 (30.0)	2 (20.0)	5 (50.0)	2 (20.0)
Often/all of the time	1 (10.0)	2 (20.0)	3 (30.0)	1 (10.0)
Not replied	1 (10.0)	1 (10.0)	1 (10.0)	5 (50.0)
<b>Group 3 (n=12)</b>				
None of the time/rarely	6 (50.0)	4 (33.3)	2 (16.7)	-
Some of the time	4 (33.3)	5 (41.7)	6 (50.0)	-
Often/all of the time	1 (8.3)	2 (16.7)	3 (25.0)	-
Not replied	1 (8.3)	1 (8.3)	1 (8.3)	-

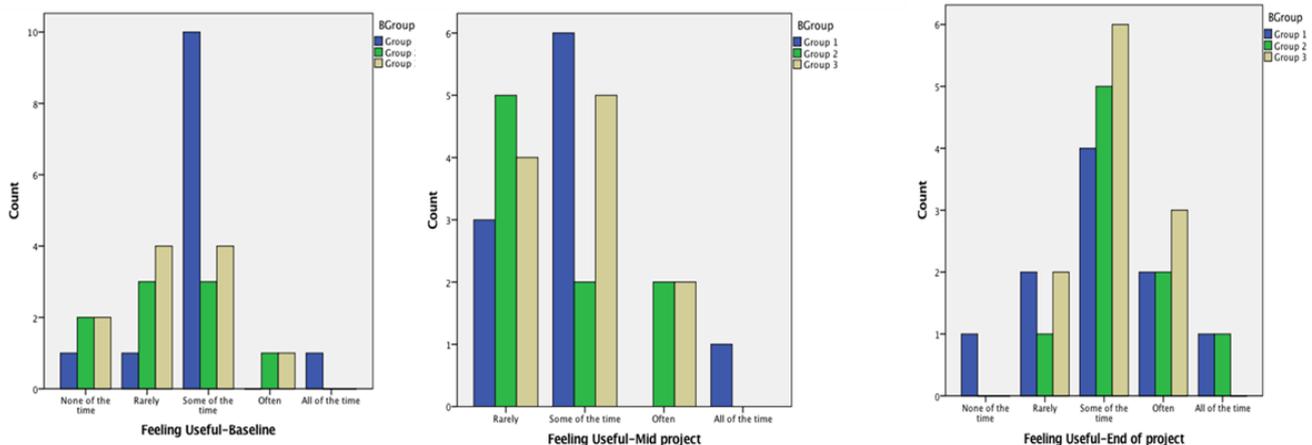


Figure 3 Trends - Feeling Useful

Exploring the 3<sup>rd</sup> scale in the Short Warwick Edinburgh Mental Well-being Scale (Tennant et al. 2007); feeling relaxed, once again the quantitative data showed a general improvement for all three groups over the course of the 10 week programme (table 5) from 4 respondents identifying they felt relaxed often/all of the time at baseline line, rising to 7 at midpoint and 9 at the end of the ten week programme. Overall we cannot calculate the impact at 1 year post involvement in Human Henge as group 3 have not had this data collected yet. However for groups 1 and 2 this had reduced; for group 1 none of the participants identified feeling useful often/all of the time at the 1 year post programme point and this was less than the numbers of participants who identified this at the beginning

of the programme. Whereas for group 2, none of the participants identified feeling useful (often/all of the time) at baseline yet 1 participant identified this at the 1 year post point.

**Table 5** Descriptive statistics for the 3rd scale - feeling relaxed

	Baseline Number (%)	Mid project Number (%)	End of project Number (%)	1-year post project Number (%)
<b>All sample (n=35)</b>				
None of the time/rarely	12 (34.3)	5 (14.3)	6 (17.1)	-
Some of the time	17 (48.6)	18 (51.4)	15 (42.9)	-
Often/all of the time	4 (11.4)	7 (20.0)	9 (25.7)	-
Not replied	2 (5.7)	5 (14.3)	5 (14.3)	-
<b>Group 1 (n=13)</b>				
None of the time/rarely	3 (23.1)	1 (7.7)	3 (23.1)	2 (15.4)
Some of the time	6 (46.2)	5 (38.5)	3 (23.1)	5 (38.5)
Often/all of the time	4 (30.8)	4 (30.8)	4 (30.8)	-
Not replied	-	3 (23.1)	3 (23.1)	6 (46.2)
<b>Group 2 (n=10)</b>				
None of the time/rarely	3 (30.0)	4 (40.0)	-	2 (20.0)
Some of the time	6 (60.0)	4 (40.0)	7 (70.0)	2 (20.0)
Often/all of the time	-	1 (10.0)	2 (20.0)	1 (10.0)
Not replied	1 (10.0)	1 (10.0)	1 (10.0)	5 (50.0)
<b>Group 3 (n=12)</b>				
None of the time/rarely	6 (50.0)	-	3 (25.0)	-
Some of the time	5 (41.7)	9 (75.0)	5 (41.7)	-
Often/all of the time	-	2 (16.7)	3 (25.0)	-
Not replied	1 (8.3)	1 (8.3)	1 (8.3)	-

Table 6 explores the participants responses to the question 'dealing with problems well'. Here it can be seen there was again an overall improvement in the three groups' responses to this. At baseline 9 participants identified they felt they dealt with problems well often/all of the time and by the midpoint this had dropped to 4 however this rose to 12 by the end of the programme. Initially this may look at those the participants dipped in the middle of the programme. However if we explore the number of participants who responded that they felt they dealt with problems well none of the time or rarely, at baseline this was 12 participants, dropping to 4 at midpoint; whilst this rose to 7 at the end of the programme this was still lower than the 12 at the start. Exploring this with regards to the data obtained from Groups 1 and 2 at the 1 year post involvement stage it is evident that the improvements were not sustained in Group 1, although it was sustained in Group 2. The 1 year post involvement response to dealing with problems well none of the time/rarely was 3 participants at baseline and 3 participants at the 1 year post programme. Whilst for

group 2, 4 participants identified they dealt with problems well none of the time/rarely at baseline and this dropped to 1 participant at the 1 year post involvement mark.

**Table 6** Descriptive statistics for the 4th scale - dealing with problems well

	Baseline Number (%)	Mid project Number (%)	End of project Number (%)	1-year post project Number (%)
<b>All sample (n=35)</b>				
None of the time/rarely	12 (34.4)	4 (11.4)	7 (20.0)	-
Some of the time	12 (34.4)	22 (62.9)	11 (31.4)	-
Often/all of the time	9 (25.7)	4 (11.4)	12 (34.3)	-
Not replied	2 (5.7)	5 (14.3)	5 (14.3)	-
<b>Group 1 (n=13)</b>				
None of the time/rarely	3 (23.1)	2 (15.4)	5 (38.5)	3 (23.1)
Some of the time	2 (15.4)	7 (53.8)	-	3 (23.1)
Often/all of the time	8 (61.5)	1 (7.7)	5 (38.5)	1 (7.7)
Not replied	-	3 (23.1)	3 (23.1)	6 (46.2)
<b>Group 2 (n=10)</b>				
None of the time/rarely	4 (40.0)	2 (20.0)	2 (20.0)	1 (10.0)
Some of the time	5 (50.0)	6 (60.0)	3 (30.0)	3 (30.0)
Often/all of the time	-	1 (10.0)	4 (40.0)	1 (10.0)
Not replied	1 (10.0)	1 (10.0)	1 (10.0)	5 (50.0)
<b>Group 3 (n=12)</b>				
None of the time/rarely	5 (41.7)	-	-	-
Some of the time	5 (41.7)	9 (75.0)	8 (66.7)	-
Often/all of the time	1 (8.3)	2 (16.7)	3 (25.0)	-
Not replied	1 (8.3)	1 (8.3)	1 (8.3)	-

Exploring the aspect of thinking clearly, overall there was an improvement in the three groups scores (table 7). At baseline the number of participants who identified that they were thinking clearly often/all of the time was 5 and this rose at the midpoint of the ten week programme to 9 and further again to 11 at the end of the ten week programme. Exploring whether this was sustained over the 1 year post involvement in the programme showed that this was not sustained.

**Table 7** Descriptive statistics for the 5th scale - thinking clearly

	Baseline Number (%)	Mid project Number (%)	End of project Number (%)	1-year post project Number (%)
<b>All sample (n=35)</b>				
None of the time/rarely	10 (28.6)	3 (8.6)	8 (22.9)	-
Some of the time	18 (51.4)	18 (51.4)	11 (31.4)	-
Often/all of the time	5 (14.3)	9 (25.7)	11 (31.4)	-
Not replied	2 (5.7)	5 (14.3)	5 (14.3)	-
<b>Group 1 (n=13)</b>				

None of the time/rarely	1 (7.7)	1 (7.7)	4 (30.8)	1 (7.7)
Some of the time	7 (53.8)	2 (15.4)	2 (15.4)	5 (38.5)
Often/all of the time	5 (38.5)	7 (53.8)	4 (30.8)	1 (7.7)
Not replied	-	3 (23.1)	3 (23.1)	6 (46.2)
<b>Group 2 (n=10)</b>				
None of the time/rarely	4 (40.0)	1 (10.0)	2 (20.0)	1 (10.0)
Some of the time	5 (50.0)	7 (70.0)	4 (40.0)	4 (40.0)
Often/all of the time	-	1 (10.0)	3 (30.0)	-
Not replied	1 (10.0)	1 (10.0)	1 (10.0)	5 (50.0)
<b>Group 3 (n=12)</b>				
None of the time/rarely	5 (41.7)	1 (8.3)	2 (16.7)	-
Some of the time	6 (50.0)	9 (75.0)	5 (41.7)	-
Often/all of the time	-	1 (8.3)	4 (33.3)	-
Not replied	1 (8.3)	1 (8.3)	1 (8.3)	-

Exploring the aspect of feeling close to other people is important, especially with regards to potential self-isolation due to the stigma associated with mental illness. Table 8 demonstrated that overall for the three groups there was a slight shift in feeling close to other people. At baseline the three groups' amalgamated responses noted that only 4 participants identified as feeling close to people often/all of the time and this rose to 11 at the midpoint and further to 14 at the end of the ten week programme. Exploring the impact of this one year later shows there were still some slight improvements (figure 4); 8 participants in group 1 identified at baseline that they felt close to people none of the time/rarely indicating a degree of isolation, yet at the 1 year post involvement in the Human Henge project only 3 participants responded that they felt close to people none of the time/rarely. For group 2, 5 participants in group 1 identified at baseline that they felt close to people none of the time/rarely and at the 1 year post involvement in the Human Henge project this had dropped to 3 participants.

**Table 8** Descriptive statistics for the 6th scale - feeling close to other people

	Baseline Number (%)	Mid project Number (%)	End of project Number (%)	1-year post project Number (%)
<b>All sample (n=35)</b>				
None of the time/rarely	17 (48.6)	7 (20.0)	9 (25.7)	-
Some of the time	12 (34.3)	12 (34.3)	7 (20.0)	-
Often/all of the time	4 (11.4)	11 (31.4)	14 (40.0)	-
Not replied	2 (5.7)	5 (14.3)	5 (14.3)	-
<b>Group 1 (n=13)</b>				
None of the time/rarely	8 (61.5)	4 (30.8)	5 (38.5)	3 (23.1)
Some of the time	4 (30.8)	2 (15.4)	2 (15.4)	3 (23.1)
Often/all of the time	1 (7.7)	3 (23.1)	3 (23.1)	1 (7.7)

Not replied	-	4 (30.8)	3 (23.1)	6 (46.2)
<b>Group 2 (n=10)</b>				
None of the time/rarely	5 (50.0)	1 (10.0)	2 (20.0)	1 (10.0)
Some of the time	2 (20.0)	5 (50.0)	2 (20.0)	2 (20.0)
Often/all of the time	2 (20.0)	3 (30.0)	5 (50.0)	2 (20.0)
Not replied	1 (10.0)	1 (10.0)	1 (10.0)	5 (50.0)
<b>Group 3 (n=12)</b>				
None of the time/rarely	4 (33.3)	2 (16.7)	2 (16.7)	-
Some of the time	6 (50.0)	5 (41.7)	3 (25.0)	-
Often/all of the time	1 (8.3)	4 (33.3)	6 (50.0)	-
Not replied	1 (8.3)	1 (8.3)	1 (8.3)	-

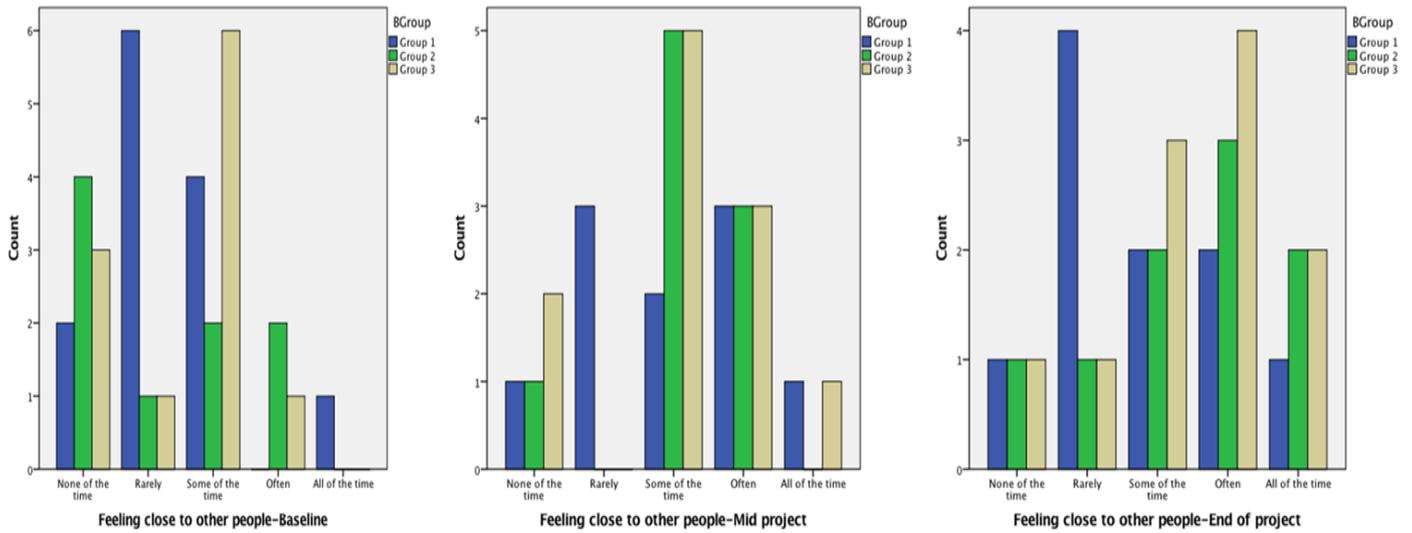


Figure 4 Trends - Feeling close to other people

The last facet of the Short Warwick Edinburgh Mental Well-being Scale (Tennant et al. 2007) relates to the aspect of being able to make up one's own mind about things. In this facet we also see some slight improvement across the three groups in that at baselines the amalgamated number of participants who felt they were able to do this often/all of the time was 12 at baseline rising to 16 at the end of the ten week programme. Exploring the data for Groups 1 and 2 at the 1 year post involvement mark shows that this improvement was no longer visible one year later and in fact was lower than the scores had been at baseline. However when you compare this to the number of participants who identified they felt able to make up their own minds none of the time/rarely at baseline it was 1 and 3 participants for Group 1 and 2 respectively and this remained 1 at the 1 year post involvement point for group 1 but reduced to 2 participants for group 2.

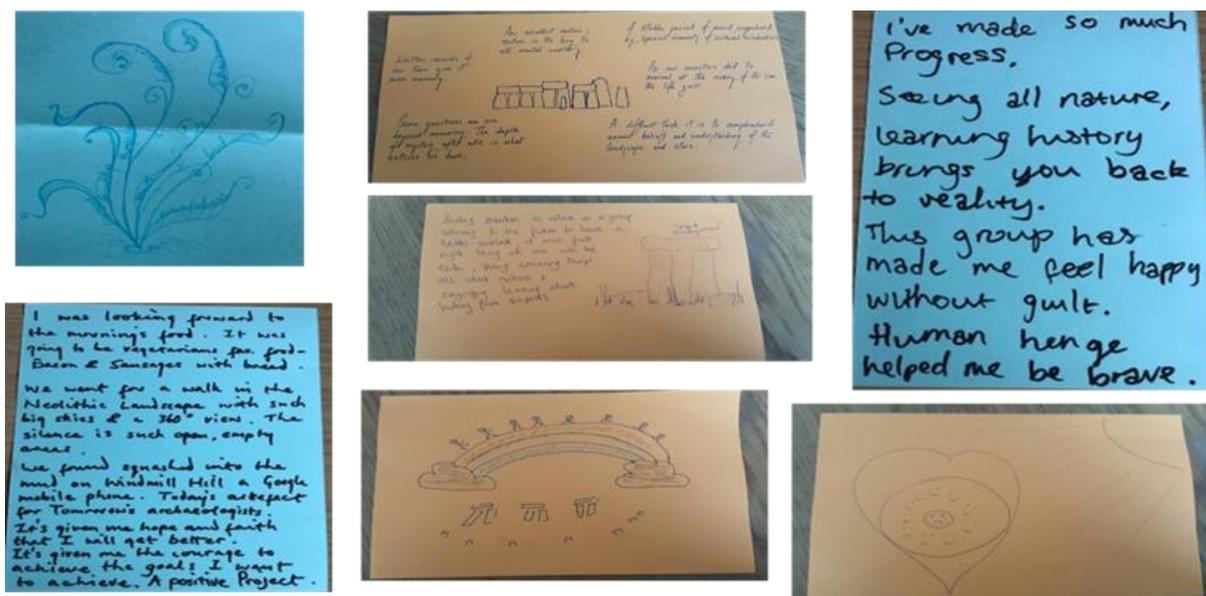
**Table 9** Descriptive statistics for the 7th scale - make up my own mind about things

	Baseline Number (%)	Mid project Number (%)	End of project Number (%)	1-year post project Number (%)
<b>All sample (n=35)</b>				
None of the time/rarely	8 (22.9)	5 (14.3)	6 (17.1)	-
Some of the time	13(37.1)	13 (37.1)	8 (22.9)	-
Often/all of the time	12 (34.3)	12 (34.3)	16 (45.7)	-
Not replied	2 (5.7)	5 (14.3)	5 (14.3)	-
<b>Group 1 (n=13)</b>				
None of the time/rarely	1 (7.7)	1 (7.7)	1 (7.7)	1 (7.7)
Some of the time	4 (30.8)	3 (23.1)	2 (15.4)	3 (23.1)
Often/all of the time	8 (61.5)	6 (46.2)	7 (53.8)	3 (23.1)
Not replied	-	3 (23.1)	3 (23.1)	6 (46.2)
<b>Group 2 (n=10)</b>				
None of the time/rarely	3 (30.0)	2 (20.0)	1 (10.0)	2 (20.0)
Some of the time	4 (40.0)	4 (40.0)	2 (20.0)	3 (30.0)
Often/all of the time	2 (20.0)	3 (30.0)	6 (60.0)	-
Not replied	1 (10.0)	1 (10.0)	1 (10.0)	5 (50.0)
<b>Group 3 (n=12)</b>				
None of the time/rarely	4 (33.3)	2 (16.7)	4 (33.3)	-
Some of the time	5 (41.7)	6 (50.0)	4 (33.3)	-
Often/all of the time	2 (16.7)	3 (25.0)	3 (25.0)	-
Not replied	1 (8.3)	1 (8.3)	1 (8.3)	-

## Qualitative Findings

### *Focus Group Activities*





**Figure 6** Creative Activity Outputs at end of the ten week programme from Groups 1-3

### *Personal Reflections*

Exploring the data from the personal reflections highlighted themes around knowing oneself and connections. In knowing oneself, participants expressed having a better understanding of the challenges associated with their mental illness but also their possibilities for recovery and inner strength they found through engagement with the programme. This strength enabled them to reconnect both with others but also with their local communities in which they lived.

*“Helped me connect with local people socially and local places with happy memories. Feeling more connected with Wiltshire and feeling like I have a place to be/belong in Wiltshire” (Participant 21 (Female) Group 2 Stonehenge, one year post programme*

*“The increased motivation, creativeness and determination that I have achieved by attending Human Henge enabled me to give a successful presentation to 29 people this week. I could not have considered doing anything like this prior to my involvement with Richmond Fellowship and in particular Human Henge. In the past I would have been a shaking wreck!” (Participant 30 (Male) Group 3 Avebury, End of 10 week programme)*

For one of the male participants (participant 3, Group 1) being part of the qualitative data collection at the end of the programme was too difficult for him and he had to leave and not participate in this, yet when we met again one year post involvement in the Human Henge programme the personal reflection noted *“I learnt I was iller than I thought. I have gone on to socialise more, not much more but more. The environment made being around others easier, I became less self –conscious”*. Interestingly, this participant was able to stay and participate in the qualitative data collection 1 year post involvement in the Human Henge programme.

### *Focus group*

As previously highlighted, focus groups were undertaken twice for each group: at the end of the Human Henge programme and one year post involvement in Human Henge. The data presented here focusses upon the analysis of the three groups’ end of programme as we have yet to complete data collation for Group 3 one year post involvement. Analysis of the data led to the identification of five themes: feeling special, challenging myself, feeling connected, enhanced mental health and well-being and fear for the future.

### Feeling Special

The participants in Groups 1 and 2 spoke about feeling privileged, feeling special for being part of the project. This was not only reflected in the culmination of their programme (access to the stones) but also in how they had the opportunity to utilise all of the facilities on offer at Stonehenge (museum, Neolithic huts) during the 10 weeks. They also spoke of the access they had to experts in archaeology, and how the project made them feel special,

*“...I was really impressed by what we had each week. Like, we had...obviously the climax the access to the stones, but like the museum, the exhibition, and then doing the pottery. I thought the quality, we had like VIP treatment” (Male participant Focus*

*Group end of 10 week programme, Group 1)*

*“...being able to learn from experts and things like that” (Male participant Focus*

*Group end of 10 week programme, Group 2)*

This theme of ‘feeling special’ was not extracted when analysing Group 3 data and this may reflect the change of location of the Human Henge programme between the groups. As previously identified, Groups 1 and 2 were located at Stonehenge where access to the

stones themselves is restricted; the programme culminated in the participants being allowed access to the stones themselves. In comparison, Group 3 was located at the Neolithic site of Avebury, where the stones are directly accessible to everyone and this may have reflected this difference.

### Challenging myself

Participation in Human Henge gave some of the participant's confidence to step outside the boundaries that they had previously placed upon themselves and try something new, something they would not have contemplated before. For some, it was within the group setting itself, leading and facilitating a Human Henge session whilst for others it was challenging themselves outside the group, creating new opportunities and possibilities for themselves linked to employment or new hobbies.

*"I found it difficult...really difficult to stand there in front of a group of people talking to them an' all that, but afterwards I thought... phew! I did really well there!" (Male Focus Group end of 10 week programme, Group 1)*

*"This is the first time I've done them (taken photographs) and you've really influenced me to go into a shop and say "Look this is what I've got, do you wanna buy it off of me?" And I think that's awesome that is. And then a couple'a weeks ago I did actually take my cards into a shop in \*\*\*\*\* and they bought almost a hundred of my cards and it was really exciting for me" (Female Participant Focus Group end of 10 week programme, Group 2)*

*"...having the interaction with everybody here and the motivation that I see from the people that have been assisting it's made me feel very comfortable. So on Monday evening I had the opportunity to do a presentation to a local council meeting. There were 29 people there and I gave it successfully, without attending this and the support of the group I couldn't have done that, I would have run a mile" (Male Participant Focus Group end of 10 week programme, Group 3)*

The participants gained inspiration and strength from the group and this was instrumental in themselves having the confidence to try new things. A female participant (Focus group 3) at the end of the ten week programme sums this up saying "... you see

*people grow and they overcome their personal struggles, some physical, some mental and that gives you some strength and some determination to overcome your own, you know, push yourself a little bit”.*

Analysing qualitative data from the two focus groups held 1 year after the participants involvement in the Human Henge project (Groups 1 and 2) identified that this aspect of challenging themselves had extended beyond the weeks when they were in the programme and continued throughout the past year. This was evident as participants’ spoke about trying new activities, such as finding and attending a local mental health support group, writing poetry and feeling more confident:

*“... spending time around the guys here that I’ve met through Human Henge, I just thought...they’re kind of more like where I’m at and therefore, it gave me optimism that I could find a support group that was more on my level” (Male Participant Focus Group 1 year post Human Henge programme, Group 1)*

*“I’ve wrote a poem that got put online as part of the creative presentation. So I’m told, I haven't seen it online, but I’m told that it was presented there and I’ve written just a couple of poem since and that’s something that I doubt I would have done if I hadn't been prompted to write a poem by the Human Henge experience” (Male Participant Focus Group 1 year post Human Henge programme, Group 1)*

*“I liked going to the stones and looking at it as an adult. Because when I was feeling low you feel so little and childlike and when we were going around the stones, it was seeing things in the adult eyes again. And encourages you to go other places as a mobile adult not feeling squashed down. So it gave me more confidence, yeah”. (Female Participant Focus Group 1 year post Human Henge programme, Group 2)*

One of the participants in Group 2 reflected in the one year post involvement focus group that having attending Human Henge he now felt confident enough to start his own local mental health support group as he recognised there was not such a group locally

*“I've always wanted to start my own group to provide that one thing that's neither here, neither there in mental health. And I suppose it gave me the impudence to sort of get up and do it in the end”.*

### Feeling connected

Across all three groups, there was a strong theme regarding connection that was facilitated through their Human Henge experience. This centred on a re-connection to people achieved through connecting with others in the group, as well as through a connection to ancestors who also walked and lived on the landscape they were exploring. In addition to connecting with people, there was also a re-connection to their local area and landscape. These connections had previously become fractured as a result of their mental illness, because of unhappy memories associated with time and place and poor experiences of feeling discriminated and stigmatised; both of these had culminated in participants isolating themselves from others. In addition, the participants in Group 2 expressed how clinical mental health services focussed on their mental illness and not them as individual people; this was in contrast to the Human Henge programme, which focused on them as individuals and not that they were living with a mental illness. Through associating with others with similar experiences, participants grew strength and confidence to revisit local places as well as to engage more readily with their local communities. This was a positive experience for them:

*“[on handling ancient pottery]... some of that is like thousands of years old, and it has been handled exactly as we were handling it, you know they had their hands on it and now I've got my hands on it and so that was like a connection and they would have had their same worries, perhaps not in exactly the same way, but shelter, food, family, those things would have been just the same for them, so I think there's a connection” (Male participant Focus Group end of 10 week programme, Group 3)*

*“Only speaking for myself, you can get trapped up in making the world so small and protecting yourself from the world. Sometimes you don't need protecting from that. Sometimes I think it's just slowly breaking down them barriers and this is a start, you know, within these groups” (Female participant Focus Group end of 10 week programme, Group 3)*

*“I mean, I feel more sort of connected to the landscape and I didn’t realise how many ancient artefacts there are in Wiltshire” (Male participant Focus Group end of the 10 week programme, Group 1).*

This notion of a re-connection to both people and the local area was still apparent in participants in the 1 year post involvement in Human Henge. For some of the participants, the re-connection that they made whilst on the 10 week programme to past lost interests such as history or photography were still being perused, and this was bringing them a lot of happiness. For other participants, their reconnection to people established through Human Henge was having an impact upon their families as they were experiencing closer family relationships in the year following their involvement in Human Henge.

*“What it did allow me to do was to reconnect again with some of my...I mean, I've never entirely lost touch with my passion for history. Maybe because one of the things I can always do, even when I'm really, really down and I'm lying in bed, I can read. And...so it allowed me to reconnect with things like that. Things I hadn't even thought about since I was...literally since I was in primary school. You know, I thought yeah, haven't thought about that since then”. (Male Participant Focus Group 1 year post Human Henge programme, Group 2)*

*“So a couple of really specific things to me is before I came on this project, my past work and life and interests would be outside and working in exciting projects in nature. And because of things going on I couldn't do that. I just couldn't cope with it. And I think Human Henge has just been key to allowing me to kind of re-access the things that I enjoy without the contamination”. (Male Participant Focus Group 1 year post Human Henge programme, Group 2)*

*“I think that I’ve interacted with my children more over the last year. Yeah, I actually sat down, chatted and had a conversation with them, gone out, you know, gone to visit them as well as them coming to visit us...Yeah, so I mean that sort of things where I’ve been able to interact with family I suppose better, has been a big improvement I think in my life really, through doing this”. (Male Participant Focus Group 1 year post Human Henge programme, Group 1)*

## Fear for the future

It is evident that the impact of the 10-week programme was so powerful for some participants that they expressed anxiety and fear regarding the potential repercussions on their mental health and well-being when the project came to an end. For some participants (particularly Groups 2 and 3) this was very difficult and some of them became distressed during the focus group session just thinking about it. They were particularly worried about two aspects: first, the loss of focus and structure that the programme had given them; something to look forward to each week. Secondly, and perhaps more important, was the possible loss of the sense of belonging that had developed, the social acceptance that they felt within the group sessions and the friendships they had made:

*“It’s a shame to hit a dead end and then nothing” (Female participant Focus group 1)*

*“I’m devastated it’s over. [Tearful] I don’t want this to finish” (Female participant Focus Group 2)*

*“I feel like this experience as well has given us something to get ready for, something to look forward to. And I just think it’s a bit hard that they’re just robbing it from us and taking it all away, because after this, like \*\*\*\* [participant name] said, at that week where you didn’t have it, it was hard. It was a hard week. You, know, because you had nothing else. But now it’s going to be gone and I feel like some of you I’ll probably never see again, and I don’t want that (Female participant Focus Group 3).*

As a project team, we became aware at the end of Group 1 of the impact that a sudden withdrawal of the programme would have on participants. As a result of this, the project team implemented a variety of additional meetings, both as small groups but also as a wider Human Henge group consisting of participants from Groups 1-3. However at the 1 year post programme data collection, it became apparent that some participants developed strategies to stay connected using social media (Group 2) and have continued to meet socially:

*“At the time...well when we were part way through the project, I don’t think any of us were confident enough to actually start that connection to build anything on top of doing stuff afterwards. It was only towards the end, wasn’t it, the Facebook thing went ahead” Female Participant Focus Group 1 year post Human Henge programme, Group 2)*

In contrast, participants in Group 1 have not established such mechanisms to keep in contact and perhaps this reflects different group dynamics. Group 1 had a stronger group identity with the Richmond Fellowship (many of the participants were already part of Richmond Fellowship groups); during the focus group, they did discuss speaking to Richmond Fellowship about keeping the activity going, thereby relying on Richmond Fellowship to organise and maintain the group. By contrast, Group 2 did not have this identity: many of the participants did not know each other prior to their programme and therefore relied on their group to maintain contact.

### Enhanced mental health and well-being

It was clearly evident from the qualitative data that the majority of the participants felt that their mental health and well-being improved as a result of participating in the project. For some participants it gave them something positive to look forward to, as Fridays became a day of excitement rather than dread:

*“I’ve had quite a bad time this year...and most mornings I’ve woken up with my stomach churning, panic feelings... But on those Fridays when we met, you know, I woke up thinking (excited) “Right – I’ve got to get ready! Down to Stonehenge!” Have a little drive in my car. And then... when I drove back after we had our sessions, I felt so much better. I actually had a normal, fairly happy day on those Fridays”*  
(Female participant Focus Group end of the 10 week programme, Group 1)

*“This has been... more positive than anything I’ve done in the last two years (Female participant Focus Group end of the 10 week programme Group 2)*

For one female participant in Group 2, being involved in Human Henge had not only given her a focus for the first time in years as she had become increasingly more housebound and isolated because of her mental illness, but it had also reduced her self-harming and for her this was very significant. She shared:

*“No for me there was two there were two things, one I hadn’t committed to anything for... over... three years, so for me to actually... commit to something was quite a big thing anyway. But then also to commit to this I also had to be disciplined because unfortunately at times I self-harm really badly so to commit to this I had to agree*

*with my husband that on the day I come here I would not self-harm, and the first week I did but since then I haven't".*

It is important to note that participating in Human Henge does not eradicate the ongoing mental health challenges that participants face. Instead, it provided them with more confidence and belief in their abilities to manage these challenges. One of the female participants in Group 3 noted: *"I think I've learned that I can cope with like my symptoms a lot better, like before I would just run away, but now I'm like learning to deal with it"*.

However, it is also important to note that for some participants being part of the project was very challenging and this linked to their ongoing mental health issues. One of the male participants (Group 1) expressed the challenges he experienced regarding the singing in the group activities and responded to this by walking away from this activity: *"all the singing and all that sort of... I found that really terribly frightening. I mean I love the history, I've always been interested in history that's why I wanted to come here but... having to take part in all the dancing an' singing an' all that... I just found that so difficult... I just had to turn round walk away"*. Within the Human Henge project, we did not explore individual mental health diagnoses, and therefore we cannot speculate about whether some individuals with specific mental health issues may find this style of programme challenging. Future research needs to explore this further.

Exploring the focus group data one year after completion of the Human Henge at Stonehenge programme (Groups 1 and 2), it is evident that while some participants expressed that the programme had an positive ongoing impact on their health and well-being, this was not consistent for all of the participants. For some participants as time passed, the impact on their mental health and well-being also diminished:

*"And it sort of gradually sort of dissipated in that because... And I think, for me, anything I sort of got out of it, that was a year ago, you know. And I know RF did sort of, have more sort of, outings as a follow on but that was only sort of sporadic and, but it seems to have sort of died a death at the moment. So really, unless you sort of carry on with it and do it on a regular long-term basis, a lot of what you get*

*out of it just sort of disappears over time”(Male Participant Focus Group 1 year post Human Henge programme, Group 1)*

### **Impact of Human Henge 1 year post involvement**

Throughout this report quantitative and qualitative analysis from data obtained at the 1 year post involvement mark has been integrated into the qualitative and quantitative data finding sections. However, here we wish to reflect on a summary of the data obtained at this point.

As identified earlier in the report (table 2) the number of participants completing the data collection at the one year post programme point was low (around 52%) and this makes it difficult to draw strong conclusions from the quantitative data analysis. Table 10 shows a comparison of baseline scores for each of the seven facets of mental health and well-being identified in the Short Warwick Edinburgh Mental Well-being Scale (Tennant et al. 2007). As can be seen in this table it appears as though the Human Henge programme had a better impact on participants in Group 2 over the entire length of the research in comparison to Group 1. However there were not really any demonstrative sustained benefits for either group over the one year period.

**Table 10 Comparison of baseline and 1 year post programme scores**

Facet of Mental Health and well-being	Group 1 Baseline	1 Year post	Group 2 Baseline	1 Year post
Feeling optimistic about the future				
None of the time/rarely	6	4	4	1
Some of the time	6	2	5	2
Often/all of the time	1	1	-	2
Feeling useful				
None of the time/rarely	2	3	5	2
Some of the time	10	2	3	2
Often/all of the time	1	2	1	1
Feeling relaxed				
None of the time/rarely	3	2	3	2
Some of the time	6	5	6	2
Often/all of the time	4	-	-	1
Dealing with problems well				
None of the time/rarely	3	3	4	1
Some of the time	2	3	5	3
Often/all of the time	8	1	-	1
Thinking clearly				
None of the time/rarely	1	1	4	1
Some of the time	7	5	5	4
Often/all of the time	5	1	-	-
Feeling close to people				
None of the time/rarely	8	3	5	1
Some of the time	4	3	2	2
Often/all of the time	1	1	2	2
Able to make up my own mind about things				
None of the time/rarely	1	1	3	2
Some of the time	4	3	4	3
Often/all of the time	8	3	2	-

In contrast, the qualitative data did demonstrate from the participant perspective that they had found benefit in undertaking the programme in terms of increased confident and connectively.

### Limitations

A limitation of this research project was the small sample size; this became more problematic at the later data collection points. Whilst all the participants completed the questionnaires at baseline, mid 10 week programme and end of 10 week programme, at the 1 year post programme there was a dropout rate of about 48% resulting in limited data collection at this stage. In addition, as the participants were living with an ongoing mental health issue then some participants were sick at different parts of the data collection point as highlighted by this participant:

*“My mental health is generally worse in the late autumn/winter so the early starts eventually tired me out, meaning that (combined with seasonal depression) made it*

*untenable for me to continue attending after the first 5 weeks or so” (Participant 9  
(Male) Group 1 Stonehenge, 1 year post programme)*

These two issues make an analysis of data trends problematic, resulting in it being hard to draw meaningful conclusions from the quantitative data regarding the impact of the programme.

## **Conclusion**

It is difficult to answer the original research question “Does a creative exploration of historic landscape achieve sustained, measurable mental health and well-being outcomes for people with mental health conditions?” conclusively at this stage as data collection and analysis is still ongoing. Nevertheless findings to date highlight that involvement in Human Henge had a positive impact upon participants’ mental health and well-being, and to some degree this was still apparent one year after involvement in the programme. However, caution is required because of the relatively small sample size and the limited extent to which it is can be said to represent the bigger picture. Accordingly, further data collection is needed before any claims about the generality of the findings can be made. It is proposed that a larger study, possibly with a control group, needs to be undertaken to explore the potential of this type of heritage programme for the health and well-being of people with mental health conditions.

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