Human Henge

Wellbeing Research: First Report

Vanessa Heaslip and Timothy Darvill

Bournemouth
Version 1 (June 2017)

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

Version 1. Circulation date 20 June 2017.
© 2017 Authors, Bournemouth University, and Human Henge Project.

Authors

Dr Vanessa Heaslip, Department of Health and Social Science, Faculty of Health and Social Science, Bournemouth University, Bournemouth, Dorset BH12 5BB. Email: vheaslip@bournemouth.ac.uk

Professor Timothy Darvill, Department of Archaeology, Anthropology and Forensic Science, Bournemouth University, Bournemouth, Dorset BH12 5BB. Email: tdarvill@bournemouth.ac.uk

Contents

List of Figures

List of Tables

Introduction

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 it is being achieved through two parallel investigations: first, a study of available literature and published case studies; and, second, the monitoring and review of participants in the two iterations of the Human Henge programme in autumn 2016 and spring 2017. Initial results from the first set of studies have been prepared for publication as a book chapter (Darvill et al. forthcoming) and further reports and papers will follow in due course. This report is concerned solely with the second investigation and provides a summary of the methodologies used and the provisional results from the first three monitoring cycles. As such it is an interim report, but will provide the basis of a series of papers to be submitted to appropriate journals at the end of the Henge Henge project.

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); and *Current Archaeology* (August 2017: 44–46). Radio and television coverage includes: BBC Radio 4's Open Country (first broadcast 21 April 2017); and BBC Points West (first broadcast 27 March 2017). Exhibitions include: Amesbury Library (25 May – 6 June 2017); and Salisbury Festival of Archaeology (22–23 July 2017 in Salisbury Museum). Lastly, 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 Conference, Bristol (19 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). A project website is available at: http://humanhenge.org/.

Background

The aim of the Human Henge project was to enhance and improve the mental wellbeing of participants by doing things and explore places connected with archaeological sites in their historic environment in ways that were unfamiliar yet safe, rejuvenating, and revitalizing. This was achieved through a programme of participant-led activities for people living with mental health problems and on low incomes who came together for fun and therapeutic adventures. Experts, carers, support workers, and contributors from a range of cultures facilitated journeys through the remarkable and inspiring landscape of the World Heritage Site around Stonehenge in Wiltshire.

The programme involved ten half-day sessions that were held in different parts of the Stonehenge landscape, including Durrington Walls and Woodhenge, the Cuckoo Stone, the King Barrow Ridge Barrow cemetery, and the reconstructed houses and displays at the 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. The programme was run twice, Group 1 in autumn 2016 and Group 2 in spring 2017, with only slight variations in its delivery.

Participants in both iterations of the programme were recruited via the Richmond Fellowship; a charity specialising 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 clients had nor their current medical care. The total number of participants in Human Henge at Stonehenge was 24 (12 in Group 1 and 12 in Group 2). However, 5 participants did not complete their programme for various reasons (1 through gaining employment, 3 because of deteriorating mental health issues, 1 chose to discontinue). It is important to note that participation in the research element of Human Henge was voluntary and participants were free participate in the programme but not the research element, or indeed to opt out of any one element of the research process. In total, 23 participants (n=12 men, n=11 women) were involved with evaluating the impact of Human Henge on their mental health. The age of the participants ranged between 26 and 77; the mean age being 47.78. 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=10).

Table 1 Age and gender composition of participant groups

	Group 1	Group 2	Groups 1 and 2 combined
Age Range	26–77	35–54	26–77
Mean Age	51.23	43.30	47.78
Male	9 (69%)	3 (30%)	12 (52%)
Female	4 (31%)	7 (70%)	11 (48%)

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

The Human Henge evaluation comprised a mixed-methods approach summarized schematically in Figure 1. Data was collected on both the participants and the facilitators. As this report is concerned with the research question regarding impact on mental health and wellbeing it focuses on the data pertaining to the participants. It was important to capture both quantitative and qualitative data because the sample size was small and, whilst interesting, means that conclusions derived from the evaluation so far have limited generality.
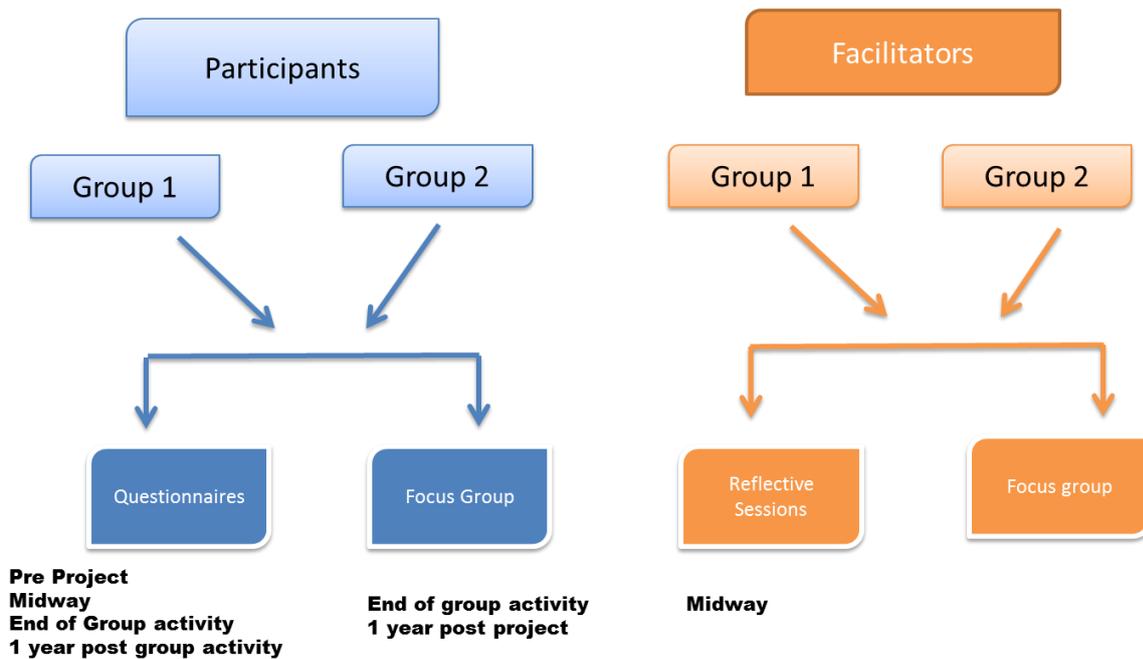
Figure 1 Evaluation methods

Questionnaire

At the start of each delivery of the Human Henge programme the participants completed a baseline questionnaire capturing their thoughts and feelings towards the project. The Short Warwick Edinburgh Mental Wellbeing Scale (Tennant et al. 2007) was used to measure their mental wellbeing, supplemented by questions regarding their interests in history, heritage, and archaeology (see Table 2). The same questionnaire was repeated in the middle and at the end of each 10-week programme, and will be run again for a final time in 2018 a year after the sessions finished. As identified earlier, not all individuals who signed up to the programme completed the baseline questionnaire, and some missed sessions (usually because of ill health) when surveys took place, Where data was collected it has been analysed, but there are a few gaps and some longitudinal profiles are incomplete. Additionally, participants, volunteer helpers, and staff were involved in focus groups exploring their thoughts and perceptions regarding the project, and its perceived impact upon mental health and wellbeing.

Table 2 Short Warwick-Edinburgh Mental Well-being Scale plus additional questions used during the Human Henge Project

Statements	None of the time ☹	Rarely	Some of the time ☺	Often	All of the time ☺
I've been feeling optimistic about the future					
I've been feeling useful					
I've been feeling relaxed					

I've been dealing with problems well

I've been thinking clearly

I've been feeling close to other people

I've been able to make up my own mind
about things

Which of the following things do you think that Human Henge has helped you to do? There are no right or wrong answers. (Tick one box for each question)		
a) Learn more about archaeology/heritage	No ☐	Yes ☐
b) Learn new skills in archaeology/heritage	No ☐	Yes ☐
c) Handle archaeological objects	No ☐	Yes ☐
d) Learn new creative skills	No ☐	Yes ☐
e) Make new friends	No ☐	Yes ☐
f) Understand more about other people	No ☐	Yes ☐
g) Bring me closer together with other people	No ☐	Yes ☐
h) Learn more about myself	No ☐	Yes ☐
i) Have an enjoyable experience	No ☐	Yes ☐
j) Have an interesting experience	No ☐	Yes ☐
k) Play a useful part in a group	No ☐	Yes ☐
l) Become more creative	No ☐	Yes ☐
m) Feel more confident about my abilities	No ☐	Yes ☐
n) Connect with my local archaeology in a meaningful way	No ☐	Yes ☐
o) Connect with my local environment in a meaningful way	No ☐	Yes ☐
p) Help develop a sense of place through interacting with the landscape	No ☐	Yes ☐
q) Compare myself to people from the past	No ☐	Yes ☐
r) Other (write down here:)	No ☐	Yes ☐

Quantitative data was analysed using descriptive and inferential statistics as well as content analysis, qualitative data from the evaluation was analysed thematically using the Braun and Clarke (2006) process of thematic analysis. It is important to note that the formal evaluation process had been reviewed and approved prior to the start of the first programme in line with Bournemouth University Research Ethics Code of Practice.

Questionnaire findings

The main factor attracting interest in Human Henge amongst participants was Stonehenge itself: learning about it and its history (n=8); for personal development reasons (n=8); and because of an interest in history (n=5). However, 9 of the participants expressed feeling apprehensive about the project; mainly because of anxiety (n=4) and feeling worried about

being in a group setting and meeting new people (n=5). At the end of the programme the participants' responses to the question "what aspect of the Human Henge project have they liked most", identified a variety of responses. These related not only to Stonehenge (n=9) and the surrounding landscape (n=9), but also being with people and making friends (n=7). 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"

"Meeting new people; understanding more about my mental health by talking to others with mental illness"

"Becoming part of a group with participants and feeling belonging, walking in the fresh air, learning about ancient history"

When participants were asked what they liked least there were fewer responses (11 out of 23) and the issues raised included: physical demand of the programme (n=2), singing (n=3), inclement weather (n=3), press presence at one session (n=1), the limited number of volunteer positions available at Stonehenge (n=1), and end of the project (n=1). Specifically:

"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"

"Press intrusion – feeling vulnerable and watched and judged and insecure"

At the end of the each programme participants were asked if they felt that Human Henge had impacted on their mental health or overall wellbeing: 56.5% (n=13) identified that it had a positive impact upon their mental health and wellbeing, 21.7% (n=5) were unsure, and five people did not complete this question. The qualitative comments highlighted a renewal of interests in the past, new understandings, and improved confidence in their own abilities:

"Renewed an interest in the past an interest I've long neglected"

"It has enabled me to be supported whilst going out. Learnt I can manage well and feel more confident trying new things"

"Too soon to say, but it's moved me forward in thinking and understanding myself and in ideas for the future"

As identified earlier, 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 project had on participants' mental health and wellbeing, we input the data obtained from the three surveys (baseline, mid project, and end project) into SPSS and undertook a descriptive statistical analysis. 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 (please note the percentages do not sum to 100% because of missing data).

Table 3 Feeling optimistic about the future

	Feeling Optimistic about the future		
	Baseline %	*Middle %*	*End %*
None of the time/rarely	43.5	30.4	30.4
Some of the time	47.8	34.8	34.8
Often/all of the time	4.3	17.4	17.4

Table 4 Feeling relaxed

	Feeling relaxed		
	Baseline %	*Middle %*	*End %*
None of the time/rarely	26.1	21.7	13
Some of the time	52.2	39.1	43.5
Often/all of the time	17.4	21.7	26

Table 5 Feeling useful

	Feeling useful		
	Baseline %	*Middle %*	*End %*
None of the time/rarely	20.4	34.8	17.3
Some of the time	56.5	34.8	39.1
Often/all of the time	8.6	13	26.1

Table 6 Dealing with problems well

	Dealing with problems well		
	Baseline %	Middle %	End %
None of the time/rarely	30.4	17.3	30.4
Some of the time	30.4	56.5	13.0
Often/all of the time	34.8	8.6	39.1

Table 7 Thinking clearly

	Thinking clearly		
	Baseline %	Middle %	End %
None of the time/rarely	21.7	8.6	26.1
Some of the time	52.2	39.1	26.1
Often/all of the time	21.7	34.7	30.4

Table 8 Feeling close to people

	Feeling close to people		
	Baseline %	Middle %	End %
None of the time/rarely	56.1	21.7	30.4
Some of the time	26.1	30.4	17.4
Often/all of the time	13	26.1	34.7

Table 9 Able to make up my own mind about thing

	Able to make up my own mind about things		
	Baseline %	Middle %	End %
None of the time/rarely	17.4	13	8.6
Some of the time	34.8	30.4	17.4
Often/all of the time	43.4	34.8	56.5

Good facets of mental health and wellbeing are positivity towards the future and current life experiences. Looking at all of the tables presented above (Tables 3–9) it is evident that each of the seven measures dimensions of mental health and wellbeing saw an increase in positive response rates (often/all of the time) as they progressed through their programme.

Looking back at the participants' responses at the commencement of the programme they felt most negatively about feeling close to people (56.1% responded none of the time or rarely), followed by feeling optimistic (43.5% responded none of the time or rarely), and followed again by dealing with problems (30.4% responded none of the time or rarely). At the end of the programme these three areas were still the ones which evoked the most negative feelings by participants, but the depth of negatively had reduced in all three areas. For example, in feeling close to people (Table 8) at the start 56.1% of participants identified feeling this none of the time or rarely, but this reduced to 30.4% at the end of their programme. In comparison, at the start of their programme only 13% responded that they felt close to people often/all of the time and throughout the course of the programme this rose to 26.1% (midway) and 34.7% at the end highlighting that participants felt more positive regarding personal attachments. Likewise, feeling optimistic (Table 3); at the start of the programme 43.5% only felt optimistic none of the time/rarely but this reduced through the course of the programme to 30.4% midway. Conversely, 4.3% identified feeling optimistic often/all of the time at the start of their programme, this had risen to 17.4% by the end.

Focus Group Activities

Within the focus groups a variety of different activities were included to ensure that each participant has an opportunity to share their thoughts. The activities included a creative activity, personal reflection, and a group discussion.

Creative activity

The creative activity was based upon photo elicitation where participants had to pick a photograph that resonated with their Human Henge journey. After they had picked the

photograph they had to identify six words that reflected their Human Henge experience. The collated words resulted in the following word cloud (Figure 2).
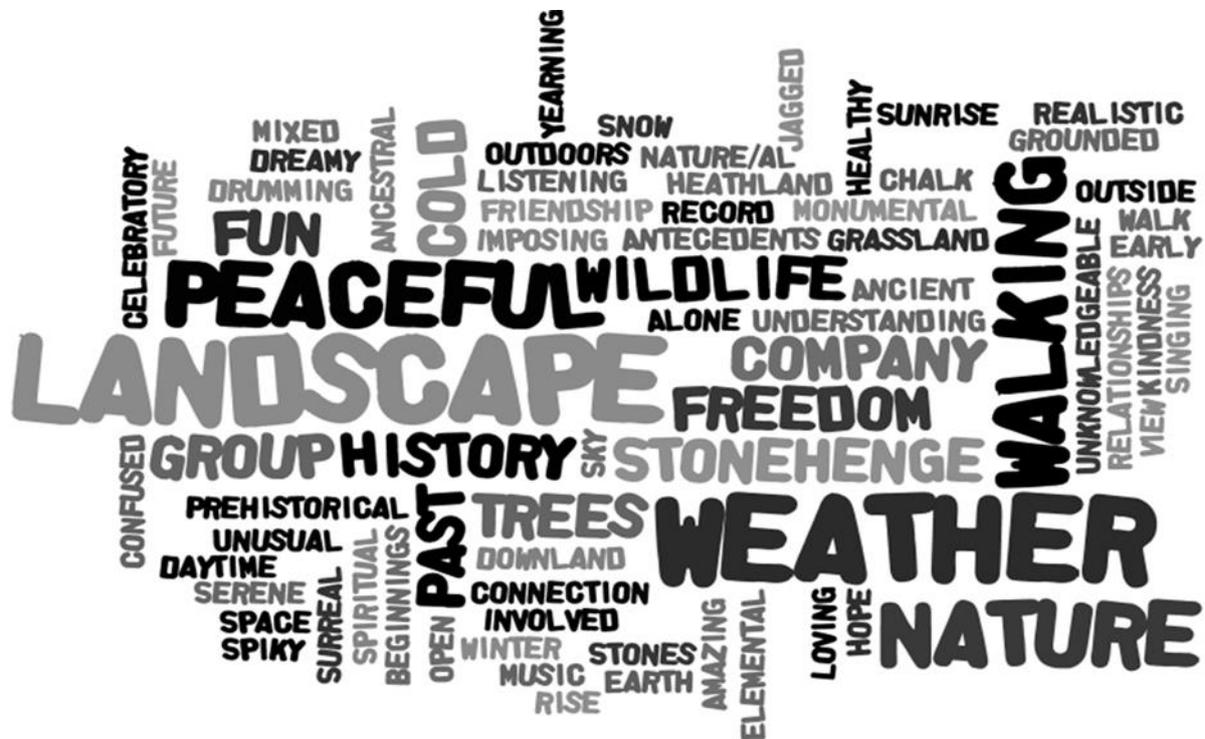

Figure 2 Participant word cloud based on terms selected to reflect participants' experience of the Human Henge programme

As it can be seen, the participants used a wide variety of words in this activity (n=74 different words), some of which were associated with geographical dimensions of the landscape (such as grassland, Stonehenge) while others related to thoughts and feelings (such as freedom, kindness) or history (such as ancient, pre historical). All triangulate well with the data obtained through scrutiny of the free-text responses from the questionnaire.

Each participant shared their six words with others in a sub-group of six participants, and turned these words into sentences which then formed the basis of the next stage of the activity. Here participants had to read the six sentences that the sub-group had constructed, and then use what they heard to develop a picture, written prose, or a poem summing up their experiences of Human Henge. A sample of these products are shown in Figures 3 and 4.
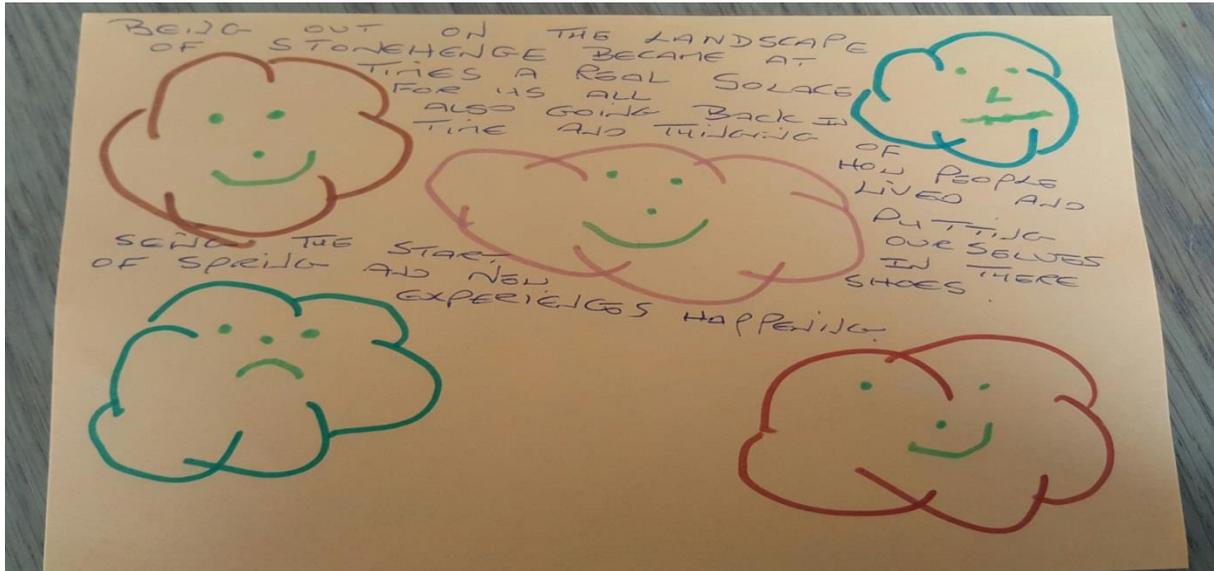
Figure 3 Creative activity – Group 2 participant
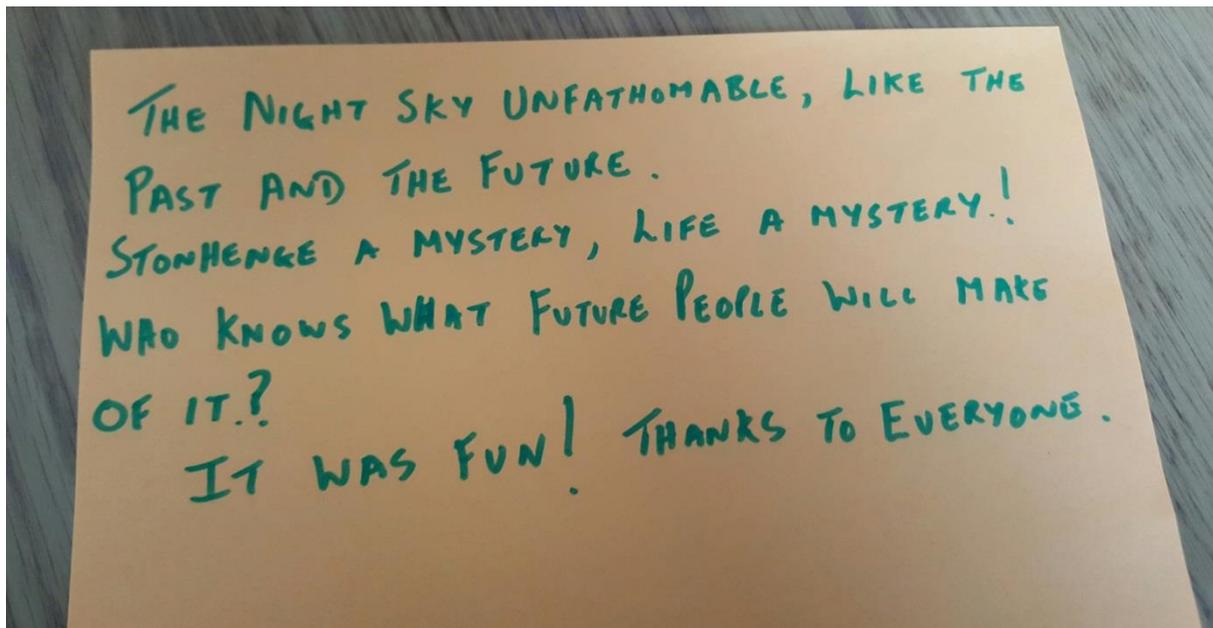
Figure 4 Creative activity – Group 1 participant

Personal reflections

In addition to the creative activity it was important for the participants to have an opportunity to capture their own personal reflections, things they may not wish to share openly in a focus group setting. Thirteen participants completed this activity and the data was analysed using thematic analysis (Braun & Clark 2006). Themes that were identified were locating oneself; rekindling passions; isolation; and a sense of sadness. In locating oneself, this location was either within or with others, identifying that the programme had

enabled them to consider and reflect upon themselves and aspects of themselves they thought they had lost through their mental illness. It rekindled passions they previous had, and this included photography and a love of nature they thought they had lost. However, for some participants this positivity was tinged with sadness in that the programme was ending and this provoked anxiety regarding what would happen next. For one participant, the programme reinforced his feeling of non-belonging and isolation, and for the future it is important to explore the "group" versus "individual" experiences of cultural wellbeing further:

> *"The project made me feel very lonely and inadequate as it reinforced my belief that being with other people is too stressful. Often times I had to walk away so that I could enjoy the pleasure of being alone. The landscape and history encouraged me to read as much as I could about the people of the Neolithic. It rekindled a lifelong passion about history this alleviated the distress I felt as everyone else enjoyed the communal singing and dancing"*

> *"I have loved being part of a group that has been so supportive and understanding and consistent. I am devastated it is over!! I have enjoyed learning new things with interesting people and having something to look forward to each week. It's been nice to have something NICE in my life. I am crying as I write this. I don't want it to stop!!"*

> *"It's torn me. In some ways I've overcome the fear of doing things – enjoying subjects that I used to work in when work caused me huge damage".*

> *"Human Henge gave me a new lease of life which wasn't really what I expected. I have done a few firsts with Human Henge".*

Focus group discussion

The last activity was a group discussion within both Group 1 and Group 2, at the end of their respective Human Henge programmes. Both groups were asked the same question "I'm interested in hearing about your experiences and your thoughts about your participation in the Human Henge, can you please tell me about it?" Both sessions were audio-recorded and what was said transcribed verbatim; the data was analysed using thematic analysis (Braun & Clarke 2006). The following themes were identified: feeling special; challenging myself; being human; impact on mental health and wellbeing; and fear for the future.

Feeling Special

The participants spoke about feeling privileged, feeling special 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) on an almost daily basis. This was manifested in comments describing how well they felt the facilitator looked after them, from her open friendly approach to the variety of tea, coffee and biscuits she

provided, and ensuring that each person's needs were catered for. They also spoke of the access they had to experts in archaeology, and how the project made them feel special:

> *"Just on a practical level, 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 1*

> *"…being able to learn from experts and things like that" Male participant Focus Group 2*

Challenging myself

Participation in Human Henge gave some of the participants the confidence to step outside of the boundaries (they had previously placed upon themselves) and try something new, something they would not have contemplated before. For one participant (Group 1) this occurred in the group setting in which he found himself as the facilitator and leader on a session within the group because of his expert knowledge in a particular area. He noted:

> *"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!"*

Another participant, a female in Group 2, created an opportunity for herself outside of the group. This participant had previously had a keen interest in photography, since being on the project this passion was reignited and she started taking photographs of the area. She shared some of these, alongside a selection of previous photographs, with the group, who encouraged her by saying that the quality of the images was excellent. This led her to seek opportunities for herself and her work:

> *"This is the first time I've done them 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"*

Being human

It was evident from analysing the focus group that the participants wanted to be seen as more than their mental illness or diagnosis. They expressed feeling angry that, at times, mental health service providers focused on their illness/diagnosis and not them as individuals, yet their experience in the project was the opposite. In Human Henge they were seen as human, in fact their mental illness was rarely mentioned, they felt they were not treated as if they were ill but rather as intelligent, capable human beings and for them this was really important. Key to this was the inclusiveness of the group and the group dynamic, the flexibility that comes from being with others who have similar experiences and who face similar challenges to the ones they face. The participants felt that they belonged, they felt safe, and cared for; for many this was not how they felt on a day-to-day basis outside the project. During Human Henge they felt free to be themselves without having to put on an

act, they did not need to apologise if they felt low in mood or did not wish to participate in any activity:

> "But but but we are more than our mental health problem" Male participant Focus Group 2

> "It's been nice to be treated like an adult with problems rather than just being put in a box" Female participant Focus Group 2

> "Not treating you as you're ill when you're feeling not ill cos with mental health sometimes you might be alright for a week two weeks and then it hits you again, and everybody here knows that. If you're having a bad day they don't make a big thing of it" Female participant Focus Group 2

> "It's been nice to talk to people who are on the same wavelength as me, and not be treated like I'm daft or anything, if you get what I mean. Cos people I've met… um… people I've met outside, cos I've got mental health and cos I've got Asperger's, I often get treated like I'm stupid or something…and it's been nice to meet… people who are on the same wavelength that I can talk to actually talk to if I've got a problem or I'm worried about anything" Female participant Focus Group 2

> "I like the walking and talking and learning all at the same time and being a human being rather than as ***** said an illness or a condition or a client or an end user y'know I've actually been a human being for three months" Female participant Focus Group 2

> "That was a good thing about the spirit of the group that it didn't matter. And if you didn't want to sing and dance, you didn't have to. You just did what you want". Male participant Focus Group 1

Impact upon mental health and wellbeing

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

> "For me, my Fridays… 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. So it did something for me participant" Female participant Focus Group 1

> "This has been… more positive than anything I've done in the last two years – apart from stuff I've had to do for myself. Female participant Focus 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 due to 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".

However, it is important to note that for some participants being part of the project was very difficult. One of the participants (in Focus Group 1) left the focus group as he found it too difficult to participate and another shared challenges he experienced regarding the singing in the group activities and responded to this by walking away from this activity:

> "Well I, I've been listening to what everybody's saying… it… 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. Male participant Focus Group 1

Fear for the future

The impact of the 10-week programmes had been so powerful on some participants that they expressed anxiety and fear regarding the potential repercussions on their mental health and wellbeing when the project came to an end. For some participants (particularly Group 2) 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, was the loss of focus and structure that the programme had given them; something to look forward to each week. Second, 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

> [Tearful] "I'm devastated it's over. [Tearful] I don't want this to finish". Female participant Focus Group 2

> "That's the problem cos I know my side of things that when I feel low and down that I shut myself away and isolate myself. And then it's hard – hard to bring, to bring yourself out again" Female participant Focus Group 2

> "Um… it's sticking plaster, to be really honest. I mean don't get me wrong, yeah it's been a great experience but… anything that's time-limited is gonna run out and then there's gonna always be… the inevitable… y'know… I no longer have a purpose" Male participant Focus Group 2

It was apparent that participants in Group 2 developed strategies to stay connected using social media. Subsequently they have met socially and been on activities together, such as visiting local museums. This has been led by two participants in the group who manage the social media site. In comparison, participants in Group 1 did not remained in contact with each other and perhaps this was because of different group dynamics. Group 1 was an older cohort; as such they may use social media less than Group 2. However, Group 1 also had a stronger group identity with the Richmond Fellowship (many of the participants were already part of Richmond Fellowship groups) and during the focus group they did discuss speaking to Richmond Fellowship to keep 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 the programme they joined and as such looked within themselves to maintain contact. For the future, carefully consideration needs to be given to construction of a post-programme activity schedule perhaps by way of stepping stones that maintain group connections and provide pathways to a range of related self-actualized activities.

Conclusions

Looking back at the original research question "Does a creative exploration of historic landscape achieve sustained, measurable mental health and wellbeing outcomes for people with mental health conditions?" some caution is needed when answering it because of the small sample-size of the participant population involved in the research. However, it is evident that for the majority of participants there was a positive impact upon their mental health and wellbeing which they attribute to the programme and associated activities. Whether will be sustained is difficult to judge at this stage, but it is hoped to collect further data from the participants one year after they completed their programme. It must also be remembered that not all participants found the programme they attended beneficial to their mental health and wellbeing, and more research is needed to elicit whether there are particular mental health conditions or personality types that this type of programme is especially beneficial for. Lastly, it is important to explore whether the findings would be similar if the programme of visits and experiences was set in a different historic landscape, one that did not have the prestige or facilities of Stonehenge for example. What is clear, is that any continuation/revision of the project need to develop a strategy that allows participants to work their way out of the programme and back into the wider world in tapered fashion so that they do not feel abandoned at the end of their programme.

We leave the final words of this first interim report to one of the female participants in Group 2 who summarised her programme very eloquently:

"Um I think I'll take away the friendships, the fun and the laughter, rather than anything that I felt at the time that'd been negative. Cos at the end of the day to me it hasn't been negative it's been a really good time and I will miss it. And also I think you don't realise how much something impacts on your life until you're gonna lose it"

References

Braun, V. & Clarke, V. 2006. Using thematic analysis in psychology. *Qualitative Research in Psychology*, 3, 77–101.

Darvill, T. Heaslip, V. & Barrass, K. forthcoming. Heritage and well-being: Therapeutic places past and present. In K. Galvin (ed), *A handbook of well-being*. Abingdon: Routledge.

Tennant, R., Hiller, L., Fishwick, R., Platt, P., Joseph, S., Weich, S., Parkinson, J., Secker, J. & Stewart-Brown, S. 2007. The Warwick-Edinburgh Mental Well-being Scale (WEMWBS): Development and UK validation. *Health and Quality of Life Outcome*, 5:63. [doi: 101186/1477-7252-5-63]