Holistic practice, art, creativity and the politics of recognition

Lynn Froggett[1]

Abstract: *A strand of social work thinking that insisted on the art-like nature of practice has been marginalised in recent years by a scientistic and technical-rational turn. This has been consolidated by a number of interrelated factors including competence-led education, managerialism, the audit culture and the building of a scientific evidence-base. Within healthcare, however, the arts and humanities are flourishing and are thought to nourish professional creativity and artistic dimensions of practice. Social work has much to learn about professional creativity from the arts for health movement, but a detailed understanding of the ways in which such practice contributes to well-being has yet to be developed. The paper draws on current research in a cross-professional community and healthy living centre where the creative process is seen as central to organisational and personal development. Art, broadly conceived, is understood as a special instance of creative living: story-telling, poetry, drama, music and visual arts underpin most of the Centre's activities and services. The paper explores ways in which this facilitates the development of a rich internal symbolic life within the organisation which supports experimentation and creative illusion. Staff and users are encouraged to find and use media which foster a distinctively personal creativity and in the process develop an ability to oscillate between analytic and syncretistic modes of perception. This supports a practice based on interpersonal recognition and directed at an integrated conception of health, social care, education and leisure. A complex view emerges of the relationship between creativity and recognition and its importance for personal development which is an irreducible element of wider struggles for recognition in institutional and societal domains. A practical understanding of this link is strengthened through narrative, biographical and other creative methodologies, which by virtue of their holistic view, can help to counter an overly procedural practice.*

Key words: *holistic practice; social work; creativity; art; well-being; health; welfare; recognition.*

The arts are hardly a prominent concern within contemporary social work. England's *Social Work as Art* (1986) may be remembered with affection by people

---

1.Reader in Psychosocial Welfare.
Address for correspondence: Dept of Social Work, University of Central Lancashire. Preston PR1 2HE. lfroggett@uclan.ac.uk

drawn to holistic, imaginative approaches, but it did little to counter-balance social work's technical-rational or 'scientistic' drift. This latter tendency was consolidated by a number of reforms in the eighties and nineties including managerial re-structuring of social service departments and the introduction of competence-based training. It is currently underwritten by a regulatory framework integral to the New Labour modernisation project, an evidence-based practice movement dominated by scientific evaluation methodologies and an audit culture that insists on transparency and determinacy. The welfare pseudo-consumer's clear choices are compromised by the ambiguities and open-endedness implicit in 'social work as art'. For organisational command cultures dominated by a discourse of 'service delivery' they are inefficient: wasteful sources of antagonism, subversion or sloth within the system (Froggett, 2002)

England addressed himself largely to an Anglo-American social work still dominated by individual casework and a degree of therapeutic commitment. Community work in the UK had failed to develop within the well-established European tradition of social pedagogy and had been progressively marginalised since its political high-point in the 1960s. However, while the casework paradigm dominated much practice remained intrinsically biographical, individuated and open-ended. Scope for creative experimentation was progressively reduced during the 1980s and 1990s as perpetual resource constraints accompanied the introduction of care management and demands for time-limited, outcomes-led interventions. If the social work as art theme had little impact in the mid-1980s, (England himself described it as a dust-bin category for the irrational and intuitive) why should it now attract more than an indulgent nod?

There are several possible responses to this question. Firstly, England was more interested in practice as art than the contribution of the arts to practice, though the two perspectives are intimately related. The current growth of the arts in healthcare challenges us to understand the links between creativity and well-being. Things have come a long way since hospitals started decorating walls to brighten them up. Arts-based organisations are now attracting funding and their methods are being incorporated into local initiatives and national programmes such as Surestart. In keeping with the holistic mind-set of the arts, these are often settings where the boundaries between health, education, leisure and social welfare are blurred, and methods are highly participatory. Although subject to service contracts and funding strictures, many such projects have carved out space to experiment with the 'how' of health and welfare practice and are potential sources re-thinking and renewal within the field. The current direction of funding to outcome-led evaluation fails to answer key questions that need to be addressed if such organisations are to influence the mainstream. What are the principles underlying creative practice? Are they relevant to core public services or are they a third sector luxury? What partnerships are possible? Where are the transferable models of care? How far do such projects need to grow organically?

What interpersonal ingredients go into the mix? Can such organisations remain 'honest' as they grow? How can they juggle the political pressures of the welfare environment?

Secondly, the arts have always raised issues about the relation between subjective experience and the external world. They tend to be aired, in displaced form, in debates around the nature of professional knowledge, experiential learning and reflective practice. However, there seems to have been a crisis of 'relevance' in social work thinking with a reduced willingness to 'borrow' from the humanities. I have argued elsewhere (Froggett, 2002) that most good-enough practice remains narratively structured at the client/worker interface and that it is perverse for social work to have neglected the narrative turn which has so thoroughly infected a range of other disciplines, including medicine [1]. Narrative, biographical and visual research methods are highly congruent with practice, can be adapted to the complexity and uncertainty of the terrain, and can elicit compelling user-centred accounts of the social work process (Chamberlayne *et al.,* 2004)

Thirdly, the themes addressed in England's book remain salient. He levels his sights at positivistic social science with implications for the nature of useful evidence. He argues that social work practice must preserve the centrality of perception and meaning within the helping relationship. Within his thesis there is an implicit critique of many of the assumptions that underpin models of welfare regulation based on audit and outcome measurement, the rational choices of welfare consumers and ever more elaborate technologies of assessment, monitoring and review.

The current UK context of arts in health and welfare

The use of arts in health and community development settings has grown exponentially in the last decade with a proliferation of imaginative projects in statutory and voluntary sectors aimed at community engagement, health promotion and therapeutic applications. Participants in local arts projects gain in self-esteem, transferable skills and employability (Matarasso, 1997, 1998a, 1998b). They often acquire a taste for arts-based activities and support them in the longer-term. In healthcare settings arts enhance the environment and attract approval from staff and patients, raising morale and improving user participation. (Scher and Senior, 2000). Internationally, claims have been made for the role of the arts in regeneration (Williams, 1997; Kay, 2000): they express social identity, enhance communication and integration between cultures and contribute to the development of social capital. The arts can render areas attractive for investment and contribute to area regeneration through training and job opportunities (Myerscough, 1998). Scher and Senior (2000) point to the difficulties of assessing

value for money but found that an overwhelming majority of users and staff approved of capital expenditure on the arts. A review of initiatives in Ireland, Australia and North America suggests that arts projects serve to combat some adverse effects of globalisation (Craig, 1998).

Arts in health are acquiring a higher policy profile with increasing attention being paid to dissemination of good practice (Health Development Agency. 2000). The Centre for Arts and Humanities in Health and Medicine at Durham University is developing use of the humanities in training healthcare professionals and building an evidence-base for the effectiveness of arts in healthcare. Scher and Senior (2000) point out that quantitative research encounters difficulties in isolating their impact from other environmental influences, although highly focussed studies may be possible. Angus (2002) provides an overview of evaluation studies on community projects. However, in holistic, cross-professional settings outcome measures may be of minor relevance. Work is often process-led, community impact may be long-term and involve complex chains of causality. There seems to be a consensus that the arts are generally 'a good thing' but there is an urgent need to theorise precisely what they have to offer and to ground this in practice experience.

The Bromley by Bow Centre, holistic practice and the arts

The inspiration and illustrations for this paper come from a complex multi-method research project at the Bromley by Bow Centre in East London.2 A number of published and forthcoming research papers discuss the methodology, findings and analytical procedures, and provide detailed case studies.[3] This three year project involved a multi-method design that used observation, action research and biographical narrative interviews (see Wengraf, 2001) to identify the Centre's distinctive approach to community-based health promotion, treatment and social care and its methods of individual and community engagement[4].

The Centre has grown organically over more than twenty years from a small community project housed in a dilapidated church-hall, energised by a number of eccentric individuals. It perceives a synergy between narrative and visual arts in nourishing the imagination, promoting participation and attracting resources, and claims that the arts underpin everything it does. It is now a Healthy Living Centre with GP practice, community health workers and a range of complementary therapists. It runs a community care project with places funded by social services and provides further education through partnerships with local colleges. The Centre seeks integrated solutions to community regeneration and individual well-being. It is disrespectful of professional boundaries and delimited areas of competence and sees itself as promoting holistic practice in

catering for the social, emotional, aesthetic and cultural needs of local people, along with advice on employment and welfare rights. A GP in the health practice can access on-site services of a range of health professionals and outreach workers. She can recommend an on-site nursery place, or adult day-care. She could refer to exercise programmes, silk painting, aromatherapy, ceramics, chutney making, gardening or luncheon club. She might suggest language, computer or art classes or an interactive health promotion event targeted at asthma, diabetes or iron deficiency.

The Centre is housed in beautiful buildings and surrounding park designed in accordance with the principle that the first requirement of any public building is that it give pleasure.[5] Around twenty five professional artists are involved in projects at the Centre at any one time. The surgery's stained glass is designed by the GPs themselves and its walls covered by work from patient groups. The mosaic tables in the café are produced in a furniture-making project. The sculptures in the surrounding park are made in the studios and its walkways are paved with tiles fired on the premises. Classes prepare local students, often with no prior qualifications, for HNC or HND Public Arts Management. The health practice uses art to heighten community awareness of health issues. One of its most successful groups 'young@art' attracts older people for treatment of otherwise neglected conditions such as leg ulcers. Chronic conditions which exclude and restrict are the subject of exploratory projects: children are taught to manage asthma in an art group, similarly elders with nutrition and iron deficiency. Diabetes sufferers have been invited to themed 'diabetes fairs'. Healthy eating is celebrated in 'food art' and the theme is reflected in sewing crafts. Among the successful local enterprises launched from the Centre have been a dance school, furniture-making workshop, sign painting business, pizza project and 'green dreams' environmental initiative. Internal working groups are as likely to get to know one another by taking a trip to an art gallery as holding a meeting. A new building has recently been opened to cater for expansion of music and drama.

The Centre is a story-telling organisation sensitive to the biographies of its members. It sees in these stories resources for individual and community development and good welfare practice. Art is broadly conceived as a special instance of creative living within everyone's grasp. The remainder of this article is devoted to a more detailed consideration of the way in which this fosters perceptual, imaginative and interpretive capacities of individuals and contributes to interpersonal processes of recognition.

Developing the interpretive self

Annie's Journey

The picture was produced by Annie who describes her background as 'gypsy' and is now in her mid-fifties. When she originally started attending the Centre she had very little formal education, although the story that she was illiterate was not quite true. She had suffered a stroke and as her strength returned she took on the job of cleaner. Meanwhile she attended all the art classes and was one of the first cohort to gain a Higher National Certificate in Public Arts Management. Eventually she was invited to become 'artist-in-residence' and gave up cleaning. She is now enrolled for a degree and loves creative writing.

The picture refers to an event earlier in Annie's life when she rode to the polling booth followed by a dog and a donkey. Apparently, the dog was hopelessly 'in love' with the donkey, who was likewise 'in love' with the horse. This is a tale of powerful but futile passions - from which there could be no (pro)creative outcome. Annie, on the other hand, rides purposefully towards a human community, where there can be creative intercourse.

There is also a meeting of two cultures. Annie's nakedness is the anarchic sensuality of the gypsy in communion with nature and the animal kingdom, as she meets the culture of formality, constraint and officialdom. Could there also be a reference here to Lady Godiva of Coventry who rode naked to defend the rights of the poor and disenfranchised against the oppressive tax-regime imposed by the state?

Annie's journey is one of self-realisation and citizenship. The slightly dejected dog is a creature of little independence, following others around in its doggy devotion. 'Donkey' stands for obdurate ignorance. For Annie these are dimensions of a former self – now she rides naked uniting vulnerability, sensuality and power. For Freud the relationship between the rider and the horse was a privileged metaphor for the relation between the ego and its unconscious - no wonder Annie's expression of determined concentration as she seeks to quell the eruption of desire from the beast below. The exultant 'vote for me' could be interpreted as Annie's celebration of her own mastery - always precarious and won against the odds. Or there again, she may be about to trample the crowd,

though it seems to welcome her ... and so the interpretation could go on.

All these ideas on the latent content of the drawing were checked out with Annie by a neutral third party giving her every opportunity her to corroborate or dismiss them. She loved them, and had only two criticisms: one was to point out a spelling mistake and the other was to request use of her real name. She added that she was not in fact illiterate when she came to the Centre but preferred the poetic to the literal truth "because it's the case with most gypsies". We had to ask "you weren't really naked on that horse?" The truth carried a similar symbolic load to the fiction: she was wearing rabbit pelts that she had killed and skinned herself.

The artist in Annie responded to the layered nature of the interpretations and the poetic truths they unravelled because like all artists she understood that her peculiar skill was to reveal in symbolic form the complexity of her inner world. She does so in a few disarmingly simple charcoal lines. The representation of a critical incident in her life condenses a number of elements of her biography and positions her in a societal context. The vitality in the picture comes from the counterpoints within it - hopeless devotion versus purposeful agency, instinctual versus rational/instrumental behaviours, self-abnegation versus self-assertion. Moreover, Annie deftly gestures at a personal constellation of emotions involving attachment, ambivalence, determination and desire as she moves between her past and her future. She inserts these feeling states into a symbolic framework with considerable communicative power.

Both pictorial and narrative art condense and contain multiple meanings; the denser and more layered the meaning, the greater the artistic achievement. The cartoon style identifies in essential detail a clue to a richly contradictory reality and infuses it with the humorous vision of the author. This layering supports a paradoxical relationship between illusion and reality which need not cancel each other out – the nakedness is a visual metaphor which can be read in (at least) two ways – yet both of them are truthful in capturing contradictory dimensions of Annie's experience.

Writing of the impact of illness on self-hood, Barker (2000) highlights the critical importance to the subject of an enriched repertoire of metaphorical allusion: 'Life is so real I can meaningfully represent it only in metaphor' p.97. Boyd (2000) draws attention to the disconcerting openness of experience and its premature enclosure within scientific enquiry. Health and illness are imprecise metaphors in which health is typically linked to wholeness and sexual vigour.

Annie's drawing is the outcome of unconscious emotional work in which she represents a life that is lost, mourns what might have been, and dreams of what may come. She invokes an interpretive self, able to play with meaning and imagine future change while grounding it in the constraints of lived reality. All of the biographical interviews conducted at the Centre, with staff and users alike, provided narrative evidence of release of the imaginative faculties; the enlarging of horizons that followed;

the enhanced ability to link different sides of the self and envisage future change.

Annie's picture is a recognisable *Bildungsroman* (narrative of personal progress). The research interviews, revealed this to be an organising gestalt at the Centre. (Froggett and Chamberlayne, 2004; Froggett and Wengraf, 2004). However, the picture is arresting for aesthetic and emotional reasons: the deftness with which conflicting feelings are intimated: futility, amusement, anxiety, triumph, vulnerability, absurdity - all seen through the ironic eye of a woman who looks back with affection and perhaps a touch of incredulity on who she had been and where she was heading. In order to 'see' what Annie had put into her picture, the researchers needed to do what members of the Centre were doing all the time: allow themselves an embodied response before attempting to articulate understanding. The research team as a whole had struggled to know what to do with the creative output of the Centre, and at times this had amounted to a blockage. In the bid for research-based objectivity we had been trying to force it too soon into meaningful categories, without first having allowed ourselves to be affected by it. We could perhaps have heeded Winnicott's insistence that 'the wish-fulfilling illusion may be the essential basis for all true objectivity' and his warning:

> This insistence on objectivity concerns not only perception but also action, and creativity can be destroyed by too great insistence that in acting one must know beforehand what one is doing. (Winnicott [1951] 2000, p.119)

The Centre's understanding of the need to allow time for embodied and emotional response and work with emergent process is the key to its ability to work with what people bring, while generating a ceaseless flow of ideas. This requires tolerance of the apparent 'waste' in aborted plans, unrealised outcomes and the failures that inevitably occur when things are tried that have not been done before. It does not mean that 'anything goes' - staying with emergent process requires an effort of will, a disciplined thoughtfulness, respectfulness of the other and a capacity to contain the anxiety provoked by not knowing precisely what the outcome of a project may be.[6]

Marion Milner (1971) wrote an illustrated reflection on her experience of creative blockage in *On Not Being Able to Paint*. She found that infusing her work with imagination required a peculiar kind of discipline – the discipline *not* to force her work to take the shape of a recognisable object too soon. The temptation for premature projecting and planning of a design, and the inability to tolerate the 'messy' phase were defences against the discomfort of the creative struggle. The impediment to creativity was the lack of will, or self-control, required to take time and allow unconscious primary process to influence the outcome - to allow something to emerge without knowing exactly what it would be. It was the rush to symbolisation and the inability to make use of the space of illusion (or potential space as Winnicott termed it[7]) between the self, the symbol and thing symbolised, that gave the product a literal, one-dimensional, meretricious quality. The space of illusion can be thought of as

a triangular mental space that allows the play of imagination, opens up alternative perspectives and allows experimentation with different relations to the world.

Self

potential space

Symbol   Thing symbolised
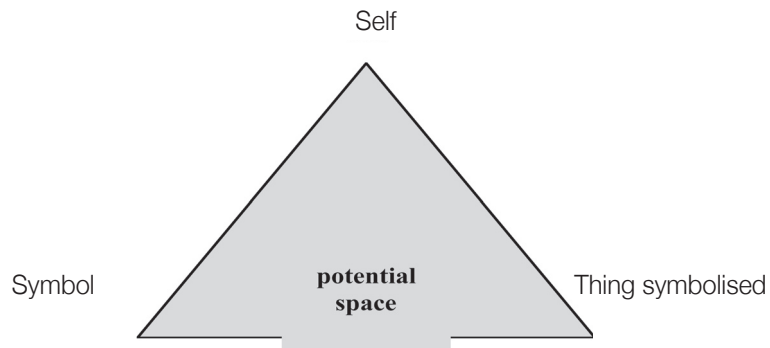
If the interpreting self is removed from the triangle, as it is in a great deal of procedure-driven activity, it collapses into the rigid symbolic equation (Segal, 1986). Annie's picture is then no longer a nodal point in the flow of a life history charged with meaning, but a crude sketch of an amusing event.

The Centre continually plays with metaphors of space and fluid boundaries and preserves an arena of creative illusion, as a buffer against premature reality-testing, allowing people to dream of what they might do and who they might be (Hoggett, 2000). The first thing one sees on entering is a sculpture of a dreaming child laid on an indeterminate and infinitely benign animal.

Sculpture by Paula Haughney

The potential for creative illusion is supported by the design and situation of the Centre building itself. Spaces flow into one another inviting movement and surprise while the glass front acts as a porous membrane of entrances surrounding a courtyard which people seem to respond to according to their cultural idiom: paradise garden, Mediterranean courtyard, cloister, stage-set, romantic retreat.[8]

The result of all this is an internal culture rich in symbolisation which greatly aids acculturation among members and allows them to find bearings in the chaotic day-to-day flux of the Centre's life. For example, the Centre's creation myth[9] articulates an organisational ideal which is reflected in biographical narratives of the people we interviewed: creating things out of virtually nothing; 'honouring' or recognising the contribution every individual; the serendipitous effects of being open to possibility. The Centre is very much aware that this ideal is easily invaded by forms of accountability demanded by contemporary techniques of health and welfare governance. The tensions are continually felt, especially in the GP practice. It would be misleading to represent this as a conflict free environment which seamlessly translates its vision into good healthcare. Many people develop an infectious and enthusiastic commitment for what they do; however, compromises are necessary and the toll on individual energies high. Some staff struggle with boundary maintenance and work very long hours with potential for invasion of personal life. There have been instances of 'burn-out' and in partial recognition of these problems the organisation has run a voluntary work-life balance project, and is currently discussing supervision and other staff support mechanisms.

Creativity and Recognition

The following extract from an interview with Miriam an artist/project worker at the Centre illustrates the use of potential space as a site of self-expression which triggers changes in perception.

A: An' it broke my *barriers of people with different abilities, some of them quite severely disabled. I've never worked with somebod- I've worked with autistic children before, while I was doing my degree an' my postgraduate in teaching I worked with people with slight err with learning difficulties, but not physically disabled, it's completely different. I mean, how do - I was thinking how would they understand that I'm doing anything with them, like rolling the clay. They're just touching the clay. I just didn't understand if - how they understood - what they were thinking when they were touching the clay. I just thought: ' they're not learning anything, they're not doing anything',*
P: Mhm.
A: err, but err I was completely wrong. 'Cause it taught me of just how much a little a little bit of touch with the wet clay - you you saw the - how happy that person was, re- really happy

Bromley by Bow Centre Courtyard

just - .you could see how they were enjoying- *just by touching the clay that they were* part of
that pot. -- *An' that was when all my barriers of -- or my - what I thought was just like: 'Oh
my God, this is fantastic!' - And umm - it it was brilliant. An' then I looked forward to go to
work every day, and being part of them, and being honoured really.*

Why did the experience make the disabled potters so happy and lead Miriam
to this epiphany? Milner indicates that we need to create the right conditions to
produce something distinctively personal and original and that this can involve
a degree of mental pain. Miriam must contend with her own difficulties until she
allows herself to see members of the class forming a relationship to the clay – this is
all the more surprising in that she herself is a professional ceramicist. Her empathic
response is subverted by her task orientation. When a shift in perception occurs
she apprehends that the creative product is one which in which part of the outside
world (the medium) is infused with the self and that in achieving this the potters
produce something new in the outer world and their experience of it is changed. The
external material - in this instance clay – takes on the form of an inner conception
and so becomes a medium of sensual and conceptual self-expression. An exciting
meeting place (a potential space) arises which Milner would describe as a place of
illusion and transfiguration. Through the clay, a bit of the world becomes subject to
personally induced transformation and this confers a sense of agency. The job of the
professional is to provide the circumstances in which such creative transformations
can occur. While the plastic media of the arts are particularly well adapted to this
process, a similar creative meeting of inner and outer worlds must happen in any
process of learning which induces personal change.

When we find in the external world things that can bind or contain inner experience
we produce a subjectively-conceived object - something distinctively original that
has been changed by 'passing through' the medium of the self. Important though this
is, it does not remain merely an object of self-expression – the product is invested
with the imaginative life of its author, but only by recognising and working with the
opportunities and constraints of the material. To paraphrase Winnicott (1951): the
potter has moulded what was there to be formed[10] and conferred on it a quality of
'aliveness'. It remains self-referential but has an independent existence and becomes
an object objectively conceived that can be a point of communication where an
encounter with the other takes place. The process Miriam describes so vividly is of
oscillation between fusion and separation from the object: the potters 'lose themselves'
in the plasticity of this subjectively cathected yet materially external medium which
asserts itself with vital properties of its own. The oscillation between fusion and
separation is characteristic of the transitional illusory realm of experience in which the
boundaries between self and object fluctuate and blur. This echoes a process which
is set in motion in early experiences of symbiosis and separation between infant and
mother. It requires an adaptive environment in the person of the 'holding' mother
who mirrors and reflects back the infant's feeling states enabling the first experience

of recognition and a sense of pleasure at this affirmation which will impel the child and later the adult to seek it over and over again (Winnicott 1965, 1971). It also implies that the core of professional helping is to become a medium and find other media to reflect back to the client, patient or user their own creative resources so that they can be mobilised.

> In relation to this process, the chosen medium is important. It is this medium that will furnish a form for the missing experience, a sensory semblance that will partially reinstate it. The medium that provides this semblance occupies the place of the adaptive mother who provided the experience that the infant lacked. I like to think that this creative finding of a needed form carries with it a memory of maternal recognition, and that creativity itself is an endlessly repeated commemoration of this moment (Wright, 2000).

Perception, aesthetic experience and personal change.

The extract above testifies to a perceptual shift in which Miriam's concerns with technique and formal learning are displaced in the face of the evident pleasure the participants take in the pottery session. She implies that the contact with the clay stimulates a deeper transformation in which the whole self is brought into contact with a sensual, pliable external reality. For disabled people, with socially restricted opportunities for tactile expression, the discovery offers an occasion to share in a common human delight. The absorption of the whole self mobilises the imagination and allows it free rein. At this the educator takes a step back and is able to recognise the capacities that are coming into play. Her instrumental task orientation which depends on analytic perception is displaced by another 'syncretistic' mode which suddenly allows her to take a wider view and enhance her understanding of the learning process and of the abilities of the people concerned. All this is encompassed within a greater shift in which she imaginatively apprehends the existential significance of the experience, both for herself and the people she is working with. She is in a position to take, as it were, a global view in which the pottery class becomes an instance of a creative biographical process of personal change. [11]

Ehrenzweig (1967) elaborated Piaget's view of syncretism into a theory of aesthetic perception. The child's perception is regarded as primarily syncretistic until about the age of eight when latency dulls the libidinal impulses and the analytic faculty tends to take over. (It is commonly observed that the imaginative content of children's art tends to lose its freshness and vitality at this age as they become preoccupied with matching and comparing their conception to the outside world.) Creative activity, however, depends on the syncretistic faculty and artists are simply better at accessing and using it than most. Broadly speaking, it is the ability to 'step back' and scan whole objects and their interrelations without deconstructing them. Ehrenzweig

describes this form of perception as 'low level' or 'subliminal' awareness leading to an 'undifferentiated' mode of vision. It is an embodied response which draws on unconscious primary process. The syncretistic view is global, allowing for distortion and re-configuration of details without affecting the identity of the whole. Annie's caricature can render the complex 'poetic' truth of an experience regardless of the accuracy of representation. In fact, Ehrenzweig claims that the undifferentiated vision needed to produce a picture like this (and the undifferentiated attention required to perceive the range possible interpretations) is more accurate than analytic attention in scanning complex structures.

> Undifferentiated perception can grasp in a single undivided act of comprehension data that to conscious perception would be incompatible…while surface vision is disjunctive, low-level vision is conjunctive and serial. What appears ambiguous, multi-evocative or open-ended on a conscious level becomes a single serial structure with quite firm boundaries on an unconscious level. Because of its wider sweep low-level vision can serve as the precision instrument for scanning far-flung structures offering a great number of choices. Such structures occur regularly in any creative search. (Ehrenzweig, 1967 p.46)

It is precisely this kind of open-ended attention that is required in understanding other people and the experience of being the object of such attention is the experience of finding an image of the whole self in the other's recognition. For the social worker it is both the complexity of the situation and the person that requires this kind of attention because practice judgements are often like negotiating a maze where there is no aerial view (Ehrenzweig, 1967). Later writers, borrowing from information technology, refer to such situations as 'unstructured' or 'fuzzy' domains (Ravetz, 1993). Decisions have to be made on incomplete and imprecise information. Action is only possible if the worker takes a comprehensive view and scans a range of possible future patterns. Precise strategic visualisation is not possible and will not help.[12]

In an ethnographic study of clinical reasoning Tannenbaum (1994) found most doctors were concerned with an imaginative construction of the processes by which their patients got ill and might possibly get better. They told stories which aimed to give a coherent account of 'an analytical whole whose parts are reconciled in the medical problem-solving process' (p.32). In an attempt to do justice to particularity they often resorted to visual metaphors of pattern, fit and emerging picture. These were then communicated in stories - for the very good reason that the narrative form is pliable enough to weave together different sources and types of information: the patient's account, their experience of the patient and the relevant scientific data.

It is not *only* undifferentiated vision that is brought to bear on creative work - the moment of syncretism is often a moment of empathic engagement which is accompanied by a sense of fusion with the object or the ability to 'lose' oneself in its contemplation. This must give way to separation and differentiation and the re-

assertion of boundaries. Details must be attended to and their significance analysed. Syncretism does not substitute for analytic task-orientation, although it is easily suppressed by it. It is the process whereby the creative unconscious engages with aesthetic form and not only demanded by art-work. It gives rise to the 'art' in science and is equally important in a game of chess, in creative algebra, the apprehension of complex self-regulating systems and in much reflective practice. It is invoked in interpersonal responsiveness when we try to 'get a feel' for the whole person and accompanies an attitude of empathic openness and a willingness to accord experiential learning its proper place. Unfortunately it is undervalued, if not erased, by institutional processes that privilege analytic cognition and goal-oriented action above a more intuitive, open-ended process orientation (Froggett, 1996, 2002). The creative process in any form of human endeavour is the outcome of a fine perceptual balance.

The biographical interviews carried out at the Centre indirectly revealed the operation of syncretistic perception in personal learning and development. Often accounts would be associated with moments of 'epiphany' or key stages in a learning trajectory when perspective altered, a 'wider' view was obtained and something felt to be important was understood. Frequently these were 'integrative' moments when different sides of the self were brought into relation with one another and a critical link was discovered. For example, the practice nurse, who thought her arts education belonged to a former life, learnt to retrieve what had been disavowed in her clinical practice and re-unite the artist and the scientist within herself.

I feel that I've strongly found my niche here, because I have an arts degree, and I feel as though I've been able to use that in conjunction with nursing to quite a lot of effect, and it's been embraced in a way that I've never ever been able to consolidate with previous jobs, I've always kept it incredibly separate

A youth worker spoke of the ways in which certain people had helped her expand her consciousness of the world through travel and art and bring it to bear on her work.

… we raised money to go to Sinai Desert, five, six, of us …, it made me think about: 'Gosh, all these mountain, beautiful sky, they're always gonna be there, but I won't live long, and I need to go and explore and find out things.' And when I'd come back college was going well, because all the expression, all the colours that came from Sinai, I used all that on my textile work, and I <u>really</u> enjoyed doing that. And I went on to higher education in arts …

An older woman who had spent her adult life caring for disabled members of her family, and had been much in need of care herself, linked the discovery of her group leadership capacities to finding her creative medium in mosaics.

… you have to work for 2 years before you become a group leader. All the young girls done

it, and I thought: 'Well, they're young, they do it.' But this mosaic group become vacant, and I loved mosaic, and someone said to me: 'Why don't you go for it?' And my friend that works with me: 'Go for it', she said, 'you've been here long enough'. So I said to Amy I said: 'Can I be a Group Leader for mosaics?' 'Oh, yes, certainly, yeah, yeah, yeah you can do it.' And now I've been doing it quite a few years, and I thoroughly enjoy it.

Conclusion: A politics of recognition?

In each of the instances described a change in self-perception was answered by a recognising response which made the experience feel meaningful and 'real', conferred a sense of social esteem and enhanced a feeling of belonging to a community of value. In the detailed examples so far discussed these three dimensions are clearly present. Annie's picture tells the story of a journey in which she finds a community where her personal creativity is seen and affirmed. For all her dominion over her horse she enters 'naked' to find people who will accept her as she is. She acquires rights (markers of esteem), both informally as a member of the Centre and formally within a larger political community. In entering these communities she gains a sense connection and belonging.

In Miriam's pottery class the recognition process begins as the disabled students cease to receive instruction and instead creatively find what is there to be learnt. There is an intense and pleasurable resonance between Miriam, her students and the clay. The learning process becomes a partnership. Out of the experience arises a new and more equal learning 'contract' and Miriam's understanding of her role is transformed. She finds herself working in a common project and takes pleasure in being part of the group.

In each case there are three aspects to the recognition process: the interpersonal resonance whereby aspects of the self are reflected by another who is also worthy of regard; the experience of social esteem represented by informal and formal rights; the experience of mutuality, belonging and solidarity within a community of value. This arc between affective interpersonal response, social respect and community echoes the three 'moments' in the struggle for recognition identified by Axel Honneth (1995) as 'love, rights and solidarity'. Love is the basis for a form of recognition (following Winnicott's account of the infant's separation process) where the establishment of an attachment allows basic emotional confidence and leads to 'an affirmation of independence that is guided – indeed supported – by care' (Honneth, 1995, p.107). It is a precondition of all further possibilities of respect and participation in public life. It follows from this that a meaningful interpersonal experience of recognition should be at the centre of helping and educative relationships. Rights, on the other hand, can be viewed as generalised symbols of social esteem where I view myself as worthy of respect because I see myself respected in the eyes of others. Rights foster

a reciprocal sense of moral responsibility.[13] Solidarity arises from the symmetrical esteem of rights-bearing subjects which gives rise to the ability to see in the other traits which can be the basis for a common practice.

The Bromley-by-Bow Centre provides a case study of an organisation which has learnt to foster micro-processes of recognition and sustain them in a welfare environment which often seems hostile to its ethos. Recognition in this context means the finding and celebration of a distinctively personal creativity, in whatever form or degree, as the basis for mutual regard and shared experience. People often use the old-fashioned term 'honouring' to describe the sense of respectfulness, openness and gratitude for the irreducible uniqueness of the other. The term 'recognition' is not generally accorded any theoretical or programmatic status, but recognition relations are fostered in informal interactions, facilitated by internal structures and pervade the creation myths and seminal stories that ensure cultural transmission (Froggett and Chamberlayne, 2004). In the context of the Centre the arts help develop the quality of attention to the other required to sustain interpersonal recognition, but they are also an ingredient in community solidarity. Scott (2000) considers that the arts illuminate what is unique in individuals and what the 'whole person' shares with a human community, enriching the language with which to conceptualise differences and commonalities in patterns of response which might otherwise remain obscure to us. She gives as an example John Bayley's (1998) biography of Iris Murdoch which invites an imaginative identification with its subject 'sailing into the darkness' of Alzheimers.

In what respects is it useful or possible to think in terms of a politics of recognition rather than merely an aspect of practice whereby perception is diversified and aesthetic response attended to? In *Love, Hate and Welfare* (Froggett, 2002) I developed a psychosocial and psychosocietal analysis of post-war welfare settlements in the UK and an emergent alternative fuelled by critical and democratising tendencies such as user and advocacy groups, ethnic minorities, women, disabled people, gays, and other social movements. I argued that if these were to eventually feed into a coherent alternative to welfare consumerism, they would need to preserve the distinctive voice of their constituency while pursuing a politics founded on greater equality (in terms of both moral worth and access to material resources) and social solidarity. This would mean abandoning the mirage of self- realisation through consumer choice, and the pursuit of sectional interests through identity struggles in favour of an active reconstruction of the 'public good' as entailing responsive differentiated provision within a framework premised on the viability of social bonds. Acts of recognition involve a compassionate, holistic, embodied orientation to the other. They invoke a sense of dynamic and complex connection because they involve the capacity see the self in other who is valued because of what makes them different.

Welfare consumerism constructs the welfare subject as rational chooser who understands his contract with the state and fellow citizens in terms of socially and politically agreed entitlements in return for personal responsibility, wherever it is deemed possible and necessary. I argued that a welfare politics based on rights and

reciprocity could not promote solidaristic relations since a discourse of eligibility and entitlements disembedded from recognition practices leads to competition between groups for goods and services perceived to be scarce (Frazer, 1995). Nor can it reinvigorate a sense of 'the public good' or reconstruct a now degraded public sphere. On the other hand, a politics of recognition articulated between interpersonal, institutional and societal domains could sustain a high degree of differentiation whilst promoting equity and social solidarity. Social workers can access repertoires oriented both to individuated and collective response from within their practice traditions; amongst these are the narrative, biographical and interpretive activities that constitute the art-like dimensions of practice and a historical commitment to alleviating the more pernicious effects of poverty and inequality. (See for example: Richmond, 1922; Rapoport, 1968; Kaminsky, 1985; Munsen, 1993; Reamer, 1993; Saleeby, 1994; Stanford, 1995; Hall, 1997; Parton & O'Byrne, 2000; Kyllonen, 2004.)

In *Love, Hate and Welfare* I was concerned to establish the theoretical possibility of recognition relations in personal relationships, institutions and the socio-political order and to that end I drew on psychoanalysis (Klein, 1975; Winnicott, 1965, 1971; Benjamin, 1990, 1995), political and critical theory (Fraser, 1995, 2000; Honneth, 1995) and social policy (Hoggett, 2000; Williams, 1999) to develop a conceptual framework which could support their realisation in health and welfare practice. I did not fully appreciate at that time the critical link between recognition and the ability to exercise a personal creativity. I suggested that social work based on narrative and biographical methods and attention to aesthetic dimensions of experience would be well positioned to do this, but that the constraints under which social services presently operate mean that the likely sites of such development would be provider agencies, especially in the voluntary sector. The argument needed tested and elaborating through empirical research investigating the operation of recognition in practice settings at an interpersonal level, and as a cultural orientation within the organisation.

The Bromley by Bow Centre and my research partners have been invaluable in allowing observational and interview-based analysis of the creativity/recognition link. The latter have been prepared to engage in the vicissitudes of their own creative process with an unflinching psychodynamic reflexivity which has at times been uncomfortable but always immensely productive (Froggett and Chamberlayne, 2004; Froggett and Wengraf, 2004). Through our own struggles with the research and one another we have mirrored, enacted and ultimately seen more clearly struggles and dilemmas within the research site. This has allowed us to understand the Centre's attempts to foster recognition relations at an interpersonal, institutional and community level. It has illuminated for us the numerous practical ways in which creative media and methods sustain the ability to operate a complex dialectic between illusion and reality and stimulate the imaginative interpretive self.

Notes

1. As an indication of the degree of interest a number of BMA sponsored Narrative Research in Health and Illness conferences have been over-subscribed.

2. Funded Dunhill Medical Trust 2002-5. Research team: Lynn Froggett, Prue Chamberlayne, Stefanie Buckner, Tom Wengraf in collaboration with the Centre. The study combined open biographical narrative and semi-structured interviews with observational methods, participatory action research and a mapping exercise.

3. A detailed account of the findings can be found in the final report: Froggett et al 2005 (forthcoming). The recognition process is evidenced in many examples, including this paper and Froggett and Chamberlayne (2004). Froggett and Wengraf (2004) provide a detailed account of the process of panel interpretation and Buckner (2005) offers a complete case-study. Further forthcoming papers, including an overview and discussion of the methodology (Wengraf forthcoming) and policy implications (Chamberlayne and Froggett forthcoming), will be highlighted on the website:
http://www.uclan.ac.uk/facs/health/socialwork/bromleybybow/index.htm

4. The Centre has been identified as a flagship of social enterprise. It has been used as a ministerial launch site for New Labour initiatives in *Tackling Health Inequalities*, Children's Centres and so-called 'Big conversations' on Health. Leisure and the Environment.

5. Personal communication from the architect Gordon McLaren

6. The researchers themselves struggled with this in the action research project, where many frustrating months passed before there appeared to be any identifiable 'outcome' to the work. (Froggett and Chamberlayne, 2004) The Centre members, by contrast, were better able to stay with the process, and able to use their final product (a visual display) as a marker of development which discovered thematic coherence (healthy eating) within a range of apparently disparate initiatives.

7. According to Winnicott the space of illusion is the space of potential we first inhabit as infants when we make use of transitional objects – typically the blanket or the teddy bear - which are neither wholly products of fantasy nor wholly separate from the self. They are the child's first use of symbols: affectively charged objects with properties of their own, that nevertheless stand in not only for the absent mother but for whatever the child imagines them to be. They may be alternately caressed, tossed aside or abused but they survive, dog-eared, as testament to the endurance of things outside of the self. Transitional objects help building basic trust in the continuity of the world and when the child is 'lost' in interaction with them with them s/he is in the potential space of play which encourages experimentation, tolerance of uncertainty, goal suspension and work with emergent meaning.

8. Short interviews focussed on the setting were conducted with a random group of people of varying ethnicity, gender, age and occupational background who passed through the courtyard on a particular day.

9. See Froggett and Chamberlayne (2004) and Froggett et al (2005). The organising gestalt of the 'creation myth' was compared with individual narratives of personal experience of

the Centre. The features mentioned in the text above were common to all user narratives and those of the staff group who gave biographical interviews

10. Winnicott's formulation begins with the baby who finding a breast provided at the right moment and in the right manner by the adaptive mother feels that it has created the breast and finds the world to be a responsive place. Later the focus shifts to the mother's face which mirrors its feeling states to 'reflect back what is there to be seen' (1971, p.117).Later still, in mature learning 'each student must create what is there to be taught, and so arrive at each stage of learning in his own way. If he temporarily forgets to acknowledge debts this is easily forgiven, since in place of paying debts he re-discovers with freshness and originality and also with pleasure, and both the student and subject grow in experience.' (2000, p.119)

11. Bollas (1987) regards the aesthetic object as a 'transformational object'. He asks why aesthetic form moves or unsettles us with an 'uncanny sense of fusion'. He suggests that our peculiar sense of resonance, whether it be art-object, landscape, face, words - arises from the fact that it provokes unconscious memories of the earliest experiences of transformation in the context of the mother's 'personal idiom of care'. It is a 'sense of being reminded of something, never cognitively apprehended but existentially known' (p.16) which refers back to the stroking, cooing, holding, smiling whereby the baby's unintegrated experiences were contained.

    This anticipation of being transformed by an object … inspires the subject with a reverential attitude towards it so that even though the transformation of the self will not take place on the scale it reached during early life, the adult subject tends to nominate such objects as sacred.(p.16)

12. Something similar is suggested in Wittgenstein's ([1953] 1973) later view of the creative use of language as a game in which we continually make moves according to rules we make up as we go along. Nevertheless we can grasp the meaning of utterances even though that meaning will only emerge with precision in its future use.

13. It could be argued that they only necessarily do so in the context of the capacity for interpersonal responsiveness developed through affectional bonds. Honneth's interpersonal approach does not easily allow him to explicate the psychological dialectics between love, rights and solidarity. This would need to be informed by a theory of way in which the dynamic unconscious gives rise to states of mind that differently inform intimate and proximate relations, and behaviour in the public sphere which can allow empathic apprehension of the other as at one and the same time uniquely individuated, the bearer of social rights and embedded in solidaristic relations. I have suggested elsewhere (Froggett, 2002) that Alford's (1989) psychosocial reading of the Kleinian 'depressive position' as a compassionate orientation to reality can serve this purpose.

References

Alford, C.F. (1989) *Melanie Klein and Critical Social Theory*. New Haven, CT: Yale University Press

Angus, J. (2002) *A Review of Evaluation in Community-based Art for Health Activity in the UK*. London: Health Development Agency

Barker, P. (2000) Working with metaphor of life and death. *Journal of Medical Ethics: Medical Humanities*, 26, 97-102

Bayley, J. (1998) *Iris: A memoir of Iris Murdoch*. London: Duckworth

Benjamin, J. (1990) *The Bonds of Love*. London: Virago

Benjamin, J. (1995) *Like Subjects, Love Objects*. New Haven, CT: Yale University Press

Bollas, C. (1987) *The Shadow of the Object*. London: Free Association Books

Boyd, K.M. (2000) Disease, illness, sickness, health, healing and wholeness. *Journal of Medical Ethics: Medical Humanities*, 26, 9-17

Buckner, S. (2005) Taking the debate on reflexivity further: Psychodynamic team analysis of a BNIM interview. *Journal of Social Work Practice,* 19, 1, 59-72.

Chamberlayne, P., Bornat, J., and Apitzsch, U. (Eds.) (2004) *Biographical Methods and Professional Practice: An international perspective*. Bristol: Policy Press

Chamberlayne, P. and Froggett, L. (2004) 'A psychosocial approach to research in a community development agency: Exploring the tensions.' Centre for Narrative Research at UEL ESRC Seminar Series 2003-5, Methods in Dialogue: 'Negotiating research in context', London: University of East London

Craig, G. (1998) Community development in a global context. *Community Development Journal* 33, 1

England, H. (1986) *Social Work as Art*. London: Allen & Unwin

Ehrenzweig, A. (1967) *The Hidden Order of Art*. London: Wiedenfeld and Nicholson

Frazer, N. (1995) From redistribution to recognition? Dilemmas of justice in a post-socialist age. *New Left Review*, 212, 68-92

Frazer, N. (2000) 'Recognition of identity or recognition of status?' Paper presented at 'Recognition: psychoanalysis and the politics of identity'. Institute of Psychoanalysis, London.

Froggett, L.. (1996) Instrumentalism, knowledge and gender in social work. *Journal of Social Work Practice*, 119-127

Froggett, L.. (2000) Care and commodity aesthetics. in I. Paylor, L. Froggett, and J. Harris *Reclaiming Social Work: The Southport Papers* Vol. 2. Birmingham: Venture Press

Froggett, L. (2002) *Love, Hate and Welfare: Psychosocial approaches to policy and practice*. Bristol: Policy Press.

Froggett, L. and Chamberlayne, P. (2004) Narratives of social enterprise: From biography to practice and policy critique. *Qualitative Social Work* 3, 1, 61-77

Froggett, L., Chamberlayne, P., Buckner, S. and Wengraf, T. (2005) *Final report of the Bromley by Bow Research and Evaluation Project: Integrated practice, focus on older people.* Preston: University of Central Lancashire

Froggett, L. and Wengraf, T. (2004). Interpreting interviews in the light of research team

dynamics: a study of Nila's biographic narrative. *International Journal of Critical Psychology*, 10, 94-122

Hall, C. (1997) *Social Work as Narrative: Storytelling and persuasion in professional texts,* Aldershot: Ashgate.

Health Development Agency (2000) *Art for Health: A review of good practice in community-based arts projects and initiatives which impact on health and well-being.* London: health development agency

Hoggett, P. (2000) *Emotional Life and the Politics of Welfare*. Basingstoke: Macmillan

Honneth, A. (1995) *The struggle for recognition: the moral grammar of social conflicts*. Cambridge: Polity

Kaminsky, M. (1985) Daily bread: Or, the marriage of art and social work. *Social Work with Groups*, 8, 1, 17-23

Kay, A. (2000) Art and community development: The role the arts have in regenerating communities. *Community Development Journal,* 35, 4, 414-424

Klein, M. (1975) *Collected works of Melanie Klein*. Vols 1-4, London: Hogarth Press and Institute of Psychoanalysis

Kyllonen, R. (2004) 'It's the way that you use it': Biography as a tool in professional social work. in P. Chamberlayne, J. Bornat, and U. Apitzsch (Eds.) *Biographical Methods in Professional Practice: An international perspective*. Bristol: Policy Press

Matarasso, F. (1997) *Use or Ornament? The social impact of participation in the arts*. Stroud: Comedia

Matarasso, F. (1998a) *Poverty and Oysters: The social impact of local arts development in Portsmouth.* Stroud: Comedia

Matarasso, F. (1998b) *Vital Signs: Mapping community arts in Belfast.* Stroud: Comedia

Milner, M. (1950, 1971) *On Not Being Able To Paint*. London: Virago

Munsen, C.E. (1993) *Clinical Social Work Supervision*. Binghampton, NY: Haworth

Myerscough, J. (1998) *The Economic Importance of the Arts in Glasgow*. London: Policy Studies Institute

Parton, N. and O'Byrne, P. (2000) *Constructive Social Work*. Basingstoke: Macmillan

Rapoport, L. (1968) Creativity in social work. *Smith College Studies in Social Work*, 38, 139-161

Ravetz, J. (1993) Information technology support systems in the human services. in B. Glastonbury (Ed.) *Human Welfare and Technology*. Papers from the HUSITA 3 conference on IT and the quality of life and services. Assen: Van Gorcum

Reamer, F.G. (1993) *The Philosophical Foundations of Social Work*. New York: Columbia University Press

Richmond, M. (1922) *What is Social Casework*? New York: Russell Sage Foundation

Saleeby, D. (1994) Culture, theory and narrative: The intersection of meanings in practice. *Social Work,* 39, 4, 351-359

Scher, P. and Senior, P. (2000) Research and evaluation of the Exeter Health Care Arts Project. *Journal of Medical Ethics: Medical Humanities,* 26, 71-78.

Scott, P.A.. (2000) The relationship between the arts and medicine. *Journal of Medical Ethics:*

Medical Humanities, 26, 3-8.

Segal, H. (1955, 1986) A psychoanalytical approach to aesthetics: Notes on symbol formation. in H. Segal *The work of Hannah Segal*, London: Free Association Books/Maresfield Library

Stanford, R. (1995) Creativity and child protection social work. in M. Yelloly and M. Henkel (Eds.) *Learning and Teaching in Social Work: Towards reflective practice.* London: Jessica Kingsley

Tannenbaum, S. (1994) Knowing and acting in medical practice: The epistemological politics of outcomes research, *Journal of Health Policy, Politics and the Law*, 19, 1, 27-44

Wengraf, T. (2001) *Qualitative Research Interviewing: Biographic narrative and semi-structured method.* London: Sage

Williams, D. (1997*) How the Arts Measure Up: Australian research into the social impact of the arts.* Stroud: Comedia

Williams, F. (1999) Good enough principles for welfare. *Journal of Social Policy*, 28, 4, 667-87

Winnicott, D.W. (1965) *The Maturational Processes and the Facilitating Environment*. London: Hogarth Press

Winnicott, D.W. (1971) *Playing and Reality*. London: Routledge

Winnicott, D.W. (1951, 1975) Transitional objects and transitional phenomena. in *Through Paediatrics to Psycho-analysis*, London: Hogarth Press.

Winnicott, D.W. (1951, 2000) Critical notice of 'On not being able to paint'. in L. Caldwell (Ed.) *Art, Creativity, Living.* London: Karnac

Wittgenstein, L. ((1953 1973) *Philosophical Investigations.* (edited by G.E.M Anscombe and R. Rhees), Oxford: Basil Blackwell

Wright, K.. (2000) To make experience sing. in L. Caldwell (Ed.) *Art, Creativity, Living.* London: Karnac