

The Reader's Shared Reading Groups in Communities in South London
Supported by the Guy's and St Thomas' Charity

WHAT LITERATURE CAN DO





I'm not really a book person.
I'm the person who'd probably
go to the end or just get
distracted or give up, or it's
boring, you know, I don't take
the time to sort of get involved.
But now I think: really is this
what books can do? I go into it.
It is really bringing me alive. It is
making me awaken...

Group-member

Drug and Alcohol Addiction Centre

Authors



Guy's and St Thomas' Charity is an independent charitable foundation which supports new ideas to tackle major health and care challenges in Lambeth and Southwark. Find out more at www.gsttcharity.org.uk and follow @GSTTCharity on Twitter.

Photographs

The reading group participants shown in the photographs used throughout this document are not necessarily the participants discussed or interviewed in the text.

Design, photography and cover illustration by Joe Magee, www.periphery.co.uk

Professor Philip Davis

Centre for Research into Literature, Reading and Society (CRILS), University of Liverpool

Ms Fiona Magee

CRILS

With

Dr Kremena Koleva

School of Psychology, University of Leeds

Mr Thor Magnus Tangeras

Department of Library and Information Science, Oslo and Akershus University College of Applied Sciences

Professor Elisabeth Hill

Department of Psychology, Goldsmiths, University of London

Ms Helen Baker

Department of Psychology, Goldsmiths

Dr Laura Crane

Department of Psychology, Goldsmiths



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Foreword

Shared Reading groups, run by the national charity The Reader, are not like traditional book clubs where (mainly) contemporary novels are read in advance of a discussion of the book. In Shared Reading, poems short stories and novels are read aloud together, in real time, and the reading is regularly interrupted when group members want to share immediate thoughts and direct personal responses arising from what is being read. You don't have to be able to concentrate on reading a whole book to be a member of a Shared Reading group. You don't have to be literate, or proficient in English. In this way the model is reaching communities of people who might not otherwise discover what literature can do for them.

One of the reading-group members, as you will see, says that literature is not just 'talking about' feelings but actually 'doing feelings' - getting into them and re-experiencing them in another form. Shared Reading is about re-experiencing life from off the page, and as a result, being useful to the lives of its group members. It is about real doing.

After he leaves the session, one member of a Mental Health group says:

It is like there's fresh breath, fresher breath, feel the air clean, yeah when you step out of it. Things feel more alive. (main text p.54)

This report investigates the impact of Shared Reading upon mental health and wellbeing in the four boroughs of Croydon, Lambeth, Lewisham and Southwark, providing an analysis of what it is that Shared Reading does, giving qualitative and quantitative evidence that Shared Reading works, and asking three further research questions:

Q: Where does it work?

A: Across and within diverse communities and individuals of different age and gender, social and educational background, and ethnic origin – in libraries, in elderly care centres, in mental health facilities, and drug and alcohol rehabilitation centres, in General Practice centres, and in primary schools.

On page 42-3, for example, you will see a 9 year-old schoolboy and a 50 year-old woman both moved by a 9th century Japanese lyric in translation:

I have always known
That at last I would
Take this road, but yesterday
I did not know that it would be today.

Q: How does it work?

A: Shared Reading allows the strong language of powerful literature to get to people emotionally – to get under their defences and depressions, their defaults and their pre-formed opinions, to the emotions and memories of their core selves. In doing so, it shakes up mental patterns, and helps people get away from set attitudes or disappointing outcomes.

We video-recorded shared reading sessions to investigate how they worked, and to enable us to show clips to participants at individual interviews. You can see the revitalizing effect upon mental life in the language that people suddenly begin to use when they care about something a poem has recovered in them - just as surely as you can see the brain light up and make powerful interconnections in fMRI scanning (p.45).

One interviewee reported how he could get away with faking responses in his usual therapy group but with Shared Reading it was different (p.13):

What with books and poems, it makes you look at things honestly. And it's harder to lie around them.... It's about feelings, there's feelings so you're talking about feelings. [In other therapy groups] you're talking about actions.

Q: Why does it work?

Poems, short stories: how could they do practical good? how could they have impact on wellbeing?

A: Because they are models of real life, and they show their authors' own need to feel past experiences again, to think about, use and transform them, good or bad. People who have become literary readers have always instinctively known this; but for a variety of reasons, many in our population do not become such readers. Yet people need the emotional place offered by literature in which to think together about the joys and pains of human existence.

Shared Reading works because of people's often unrealized needs, feelings and powers in search of meaningfulness in life or amidst the loss of it.

Here is one of many comments that we did not use in the main report - from group-member Peter, watching video clips of himself working hard at reading together:

And you suddenly think, God! I have got an imagination. I can sense that. I have got something to say. It makes you feel like a fully-functioning person again. You know, like a member of society. Whereas your world was very small often, on your own and lonely, or with other drug users when you'd be in your comfort zone. You suddenly felt like a living, breathing, important, credible person because you could understand good literature, you could see the colour, you could relate to the people, you could relate it to yourself and the world you're in.

To do justice to the individual experience of Shared Reading we offer you a great deal of specific human detail in this report; but en route you are also offered mini-conclusions to highlight the way in which these details constitute cumulative evidence of benefit.

The interim conclusions are gathered into major conclusions on pp.43 (on sections 1-4), 43 ('Why does this help?'), 56-7 ('Qualitative Conclusion'),

66 ('Quantitative Conclusion'), 69-70 ('Final Conclusions'), to which readers should turn in order to have a quick sense of the overall findings. Finally, in what follows you will also see us make trial of a variety of new experiments in this project, for future development. This is part of one further question concerning further research into the longitudinal benefits of Shared Reading.

Q: What can it do in future?

'I'm not really a book person,' says the group-member who gave us the title for this report and whose comments form the epigraph on the title page. Others would say the same, including the woman who told us this at interview, after watching herself talking about Charlotte Bronte's *Jane Eyre* (p.55):

I'm a little bit better at being confident now, than what I used to be. I think the reading group has helped. If my partner says anything to me I can talk back to him. Last Wednesday when I went into hospital he said, 'You're a disgrace as a woman'. So when he sat down I said, 'Do you get some pleasure out of...?' I wouldn't have said it to him 'Do you get some pleasure out of hurting me...'

[INTERVIEWER: That's new?]

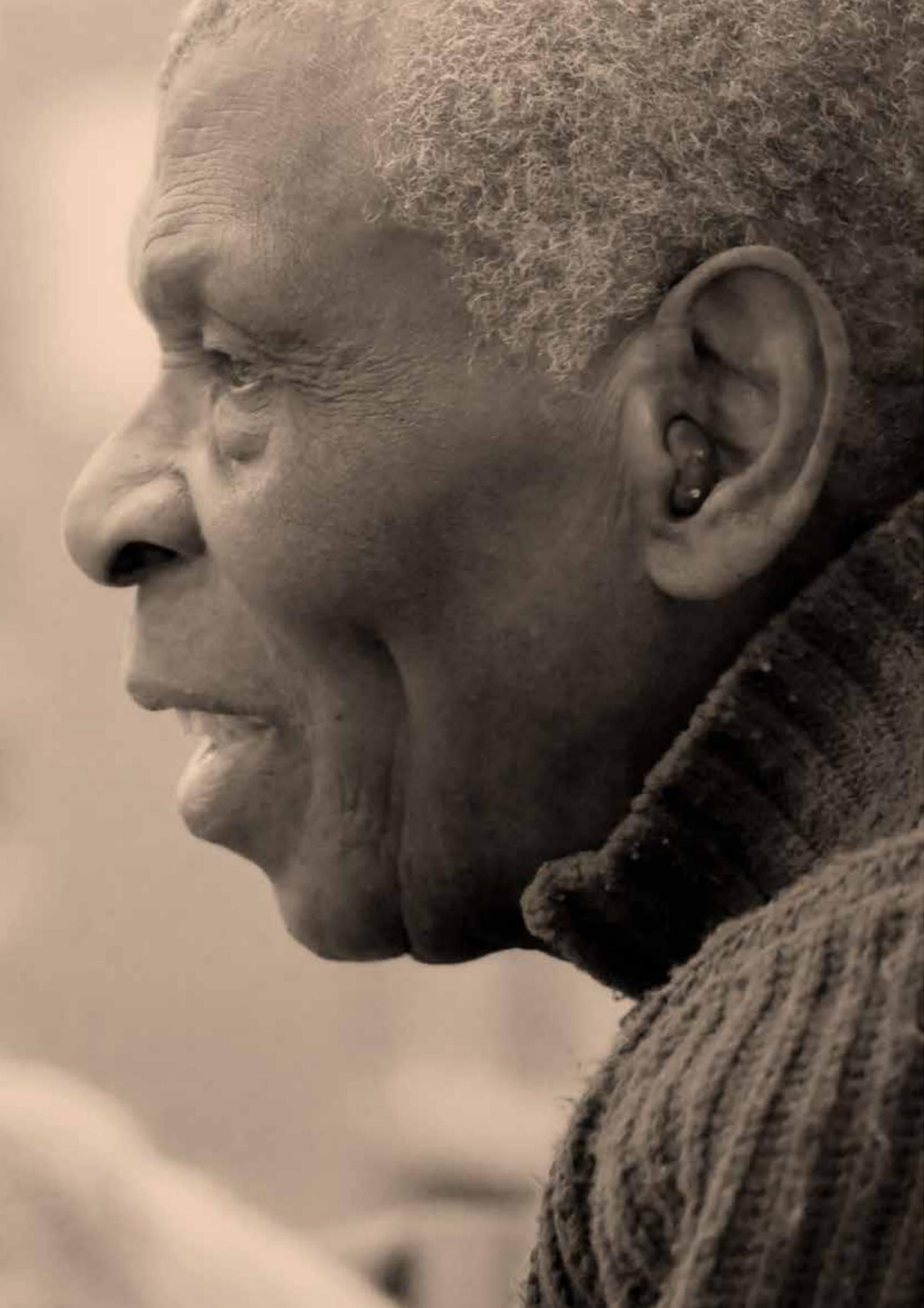
That's a new thing yes, to be able to stick up for myself.

This concerns longer-term recovery and change, with all that goes into the term 'confidence'. We plan to stay in touch with many of the key participants in this project.

What you are about to read is research, literary, linguistic, psychological and social, offering a variety of evidence; but we hope you will also relish and be moved by the individual stories, making the case for a new kind of evidence. Reading serious literature has given the people in this report a voice and a language. It 'sticks up for' them when sometimes nothing else - no one else - does. That is what literature can do.

Professor Philip Davis

Director, CRILS (Centre for Research into Reading, Literature and Society),
University of Liverpool



Introduction

What was the Project?

The Guy's and St Thomas' Charity, together with the Maudsley Charity over three years and with the Southwark Innovation Trust for the initial year, funded The Reader (TR) to bring 120 Shared Reading groups over 3 years to 4 London boroughs – Southwark, Lambeth, Lewisham and Croydon – across 5 populations:

- Community Adults (in local library setting)
- Older Adults
- Children
- Adults with Mental Health Issues
- Adults with Addiction Problems

The aims of The Reader project were:

- To improve the health and well-being of 1700+ people living in Southwark, Lambeth, Lewisham and Croydon
- To train and support 200 statutory and community organisation staff and volunteers to deliver and sustain Shared Reading provision
- To develop a Shared Reading franchise model
- To investigate the impact of Shared Reading on the health and wellbeing of beneficiaries, enabling TR to replicate the project on a national scale.

The Reader will produce its own evaluation report detailing the outcomes of and learning from the project.

The Centre for Research into Reading, Literature and Society, University of Liverpool (CRILS) was engaged to undertake research into the impact of Shared Reading on the health and wellbeing of beneficiaries, and entered into partnership with Goldsmiths, University of London, as a South London academic centre with specific expertise in psychology and the quantitative analysis of mental health and wellbeing.

The research groups ran for 24 weeks.

Ethics approval was obtained for all groups before participants were recruited into the study. Separate consent was sought from participants for filmed excerpts to be shown in public.

What is Shared Reading?

Shared Reading is run by The Reader (TR), a national charity since 2008, dedicated to bringing serious literature from all ages to often hard-to-reach communities. The Shared Reading model is based on small groups (2-12 people) formed to read aloud together short stories, novels and poetry, led by a project worker/group leader trained by The Reader. It is to be distinguished from

(a) traditional self-organizing book clubs where books, usually contemporary novels, are read in advance and then discussed, often without close reference to the text, in a social setting in which the demographic is limited. Shared Reading involves live reading aloud; no works are read in advance; it makes literature available to those who might not otherwise want or be able to be involved in reading

(b) books on prescription where what is offered is either self-help books treating of particular cases and conditions, or literature specifically chosen for its targeted relevance. Shared Reading offers a wide range of texts from a wide range of periods, such that the situation and the language is often not wholly familiar or predictable.

The text is read aloud by the group-leader in the first instance; group members are free to offer to read or not; the text is often re-read out-loud to focus attention; space is left between sections of the story or poem for comment and analysis. As group-member Ralph put it with regard to the

shared liveness of involved response required in the process:

I think pausing between every couple of pages or paragraphs or verses meant we had sharper thoughts on that section rather than reading it the whole way through and having to remember the whole thing. Although you're still immersed in the story, you can take time out to analyse it as you go along rather than reading it all or reading it at home and then saying what you thought. It was interesting to get other people's perspectives there and then, and give your own perspective as well.

Research, largely undertaken by CRILS at the University of Liverpool, has established a strong initial case for the effectiveness of Shared Reading (see Appendix 1).

What is the Purpose of this Research?

When poems and short stories are inaccessible to many people who do not regularly read on their own and when they may seem to have little relevant value to them, there is a requirement for strong evidence that/how/why Shared Reading works, if a case is to be made for its improving mental health and wellbeing. Mixed methods, quantitative and qualitative, build on previous research findings to be tested further in this project. If it can be demonstrated that the intervention works, then (though there are overlaps between them) the three main research questions are:

- Where does it Work? Purpose: this project offers the opportunity to consider effects both within and across a wide range of (5) different communities, indicating possible commonalities and differences in relation to each population.
- How does it Work?/What is it that the Reading of Literature Does? Purpose: to explore what may be the particular benefits to individuals of reading literature aloud together in a group-setting led by a project worker from The Reader.
- Why does it Help? Purpose: to investigate the psychological and cognitive processes involved in Shared Reading.

Why is this Report so Detailed?

- Because there is a need to provide detailed evidence from a variety of different research methods and

to try out those methods in relation to one another. To this end, a quantitative approach was conducted through the collection of a range of information, nuanced for each participant group, but broadly covering participants' self-reported general and mental health as well as quality of life satisfaction, emotion awareness and social provisions pre-Shared Reading and post-Shared Reading (after six months). Additionally, a qualitative approach was adopted with the same participants and included both linguistic analysis of videos and transcripts of group sessions, and interviews with individual group-members looking at video recordings of themselves in action.

- Because a major finding in this report is *the value of the specific - as opposed to over-general memory*. Research on autobiographical memory¹ indicates that a difficulty in accessing specific episodic memories is related to depressive tendencies. Depression often involves getting locked into over-general and categoric ruminations unrelieved by a life's specific examples or exceptions, by elaboration or qualitative distinctiveness, and therefore subject to negative re-enforcement until rigidly fixed patterns are established: e.g. 'I am no good at my job', 'I have always felt I am a failure,' 'Nobody likes me' and their associated memory-networks. In recent years, techniques have been proposed to enhance the accessing of specific autobiographical memories: Shared Reading may be a more spontaneous version of such training.² In what follows, the detailed qualitative accounts of deep individual reading offer evidence of participants getting away from set defaults and habitual responses, through access to a powerful literary language working in strongly emotional areas, and leading to reappraisals that release more specific and attentive responses to particular situations re-created by literature. The recognition of the specific, and the capacity inductively to explore its implications without the certainty of categorization is mental health in action. In this context, the specific is good mental health, whether its content is happy or sad, or not simply either.

- Because a second major finding is *the value of the felt - the individual emotional moments*. What is offered qualitatively in this report are stories of people reading - small, transient moments within which something of large emotional import can happen very fast and often in very close relation to specific verbal triggers in the literature. These readers find themselves inhabiting an emotional space, established between the literature, the individual and the group,

which is usually private or often repressed but which offers a way for people to be in touch with themselves in a safe setting. Keith from the Addiction Group offered a contrast between the Shared Reading group and the therapy groups he attends. In the addiction therapy group:

You can mess about with it. But what they want to hear is - well, personally what I thought they wanted to hear was - 'Yeah I had a really bad day the other day, I really fancied a drink but I sat down and I thought no, it won't be just one, it's never just one, so I got through it' and they'll go, 'Oh well done' and I'd walk out of there and go 'Psht'. . . If I was getting only comfortable thoughts in all the groups that I was going, I would not change my behaviour. Because, because, I've been through groups before and I've sailed through.

In the Addiction Groups where participants had received considerable counselling, one of the challenges for Shared Reading was to move group-members on from initial repeated responses such 'Speaking as an addict', or 'This is like addiction': the aim was emotionally to stimulate a wider and more spontaneously human discourse that freed them from the set vocabulary of cases in therapy or conditions in recovery. For Keith, the Shared Reading group was (beneficially) not 'comfortable' because of the abrupt and unexpected emotional involvement:

What with books and poems, it makes you look at things honestly. And it's harder to lie around them.... This is, it's about feelings, there's feelings so you're talking about feelings. That (therapy groups) you're talking about actions.

Feelings here mean a deep level of serious personal involvement, entered into all the more honestly because accompanied by some reluctance and resistance.

Mike, another participant, compared Shared Reading to reading self-help books:

I read loads of self-help books, well, I tried. I skimmed through them and tried to find chapters that helped but none of them did. And they tell you what to do or how to feel and nobody knows exactly how you feel - every person is different. Ok we may have

the same problem but how you've arrived at that problem or how you will find your way out of it is just yours. It's written there in black and white, you should be doing this or you should be doing that.

[INTERVIEWER: So someone is telling you what to do.... ? Why doesn't that work?] Because we're all rebellious at nature aren't we? It's like when your parents told you not to do something, you'd go and do the opposite wouldn't you?... With a self-help book, you just think it's written in such a clinical way, it's not human, that you think what am I doing, why am I wasting my time on this? And with a novel you can just escape as well, into a character. But although you're escaping you can sort of like still see yourself in it....

This is an argument for reading that is less prescriptive, less restrictive in its language and instead, more free and more emotionally intelligent about what an existence feels like and how it has come to be.

Without the specific and without the emotional, there is nothing to start or build from in the stimulation of life and wellbeing. Often in education and in therapy, intervention begins too far up - in set theory, in generalization, in programmatic learning or set vocabulary - to be able to reach what is individually human. What Shared Reading offers is psychology (individual and social) in living action, stimulated by the intense model of life that literature constitutes.

The participants deserve the close attention they themselves often pay to the works they read. In their readings, there are moments of extraordinary achievement: they are transient and intricate, but these achievements deserve greater recognition, and not least by the participants themselves, many of whom were shown such moments during video playback as part of the individual interview process.

The qualitative researchers concentrated above all on what they took to be individual 'breakthrough' moments, when in a two-way movement the literature seems to get through to participants, and participants seem to experience a change or awakening taking place beneath the level of intention and beyond the general norms of response or opinion. Evidence that something significant had happened, through a change in the perception of reality, was sought through analysis of the transcripts.

These moments, themselves specific and emotionally powerful, were often shown to the participants at interview, to test their validity and significance. So Donald (Mental Health Group) spoke of ‘challenges’ from within the literature that prevent his still being ‘usually somebody who stays in a sort of mundane, day-to-day way of doing things.’

In what follows the report offers interim conclusions at various points when these individual stories or moments generate provisional ideas/hypotheses/summaries which are gathered together in synopsis at the report-end in terms either of general conclusions or further research.

Participants are anonymised in this report through the use of fictional names. Participants’ ideas, and their way of expressing them are used in what follows as a way of communicating an authentic sense of the experience.

Who was involved in the Shared Reading (SR) Groups?

The current project enabled research into a wide range of communities: in particular this is the first occasion on which we have been able to film continuing sessions with people living with psychosis, older adults that included those living with dementia, and children at primary school.

The research groups were based within the four boroughs in south/south-east London that were the basis of the funding and were made up as follows:

1. **COMMUNITY ADULTS** (n= 16 declining to 13). Made up of two groups hosted within two community public libraries. Initially, the groups were advertised within the libraries, although non-members of the library were able to join. Group members ranged from 47-85 years (average age of 66 years). This group finally comprised 5 males, 8 females. 7 were White British/Irish, 4 were Black or Black British African, 1 was Asian, and 1 was Iranian. 1 individual in this group declared a diagnosis of dementia.

2. **OLDER ADULTS** (n= 16 declining to 11). Made up of two groups of individuals attending one of two Older Adults Groups. Some group members were residents in an extra-care residential unit, while others opted to attend to take part in local community activities, e.g., offered by The Elder Peoples’ Support Project (EPSP) which puts on activities for people over

55 years, Monday-Friday. A total of 11 group members (9 males, 2 females) took part in the quantitative aspects of the project, and they ranged from 62-86 years (average age of 77 years). Of these, 2 group members were identified with dementia, while others were not in this category; but the group included at various times up to 5 people living with dementia. 5 adults were from White backgrounds (British or European), 5 were from Black/Black British Caribbean backgrounds, and 1 was Asian (Sri Lankan). 6 group members also took part in the qualitative interviews (4 of whom also took part in the quantitative study) and the daughter of one of the older adults was also interviewed.

3. **CHILDREN** (n= 13). Year 6 children (aged 9-11 years) from a state funded primary school formed two SR groups as part of their timetabled activity in school. Participation in the group was based on referral by the Reading Coordinator teacher within the school and was based on reading attainment. Children who might benefit from different types of engagement with texts were included. The total group comprised 4 boys, 9 girls. 11 were Black African/Caribbean, 1 White British, 1 White and Black British. For all children English was their first language, with 2 children also speaking additional languages.

4. **MENTAL HEALTH** (n= 12 declining to 4, average age=37 yrs). Made up of three groups hosted within supported housing settings (two groups) and a NHS funded service (one group). While 12 people consented to take part, only four completed the SR study. This group finally comprised 3 males and 1 female. Group members ranged from 30-50 years, with an average age of 37 years (one participant did not provide this information). 1 participant was White British, 1 was Black/Black Caribbean, 1 was Egyptian and Italian, and 1 did not declare their ethnicity. Detailed information on individual participants’ particular mental health issues was not collected, although these services support people with enduring issues with all aspects of mental health including depression, anxiety, phobias and psychosis. Service users have complex needs, and many are affected by secondary consequences such as homelessness, offending and substance misuse. Many of the service users are considered high risk and have had multiple periods in custody or hospital. The research group became one of the timetabled activities in these settings.

5. **ADDICTION** (n= 7 declining to 6, average age=54 yrs). Made up of two groups hosted within drug and alcohol services. Some people self-referred to these services, while others were referred by a clinical team. The research group became one of the timetabled activities in these settings. Group members ranged from 42-64 years (average age of 54 years). This group finally comprised 5 males, 1 female, and 5 reported they were White British (1 did not provide this information). In addition to addiction issues, some participants reported symptoms of depression and anxiety.

Note

The planned number of groups, and the sample sizes of the recruited groups, decreased over the course of the project. This is a common factor in ambitious projects that are based within the community, since they are dependent on a wide range of individuals and factors and, by nature of some of the group memberships, chaotic situations. Of particular note:

- Difficulties in recruitment, the attrition rate over 24 weeks resulting from additional factors such as the volatile situation of many participants (in particular in the Mental Health group) and the effects of medication on attendance, meant that the research team was not able to capture large amounts of quantitative data at specific times. (Some Mental Health group members expressed appreciation when The Reader’s group-leaders were direct, innovative, and even challenging in their questioning, helping to overcome the effects of medication,)
- In the last few months of the project, a sixth population based upon **PHYSICAL HEALTH** concerns has been established in a progressive GP centre, and this may be the basis for further research, as a result of initially promising results.³

Qualitative Research

Method

The groups in which participants had consented to be involved in the research project were filmed and sound-recorded. Moments that the research team considered significant were transcribed and analysed for their language-content and style by literary scholars and experts in discourse analysis. Group members (20 adults, 7 children) were interviewed. Interviewees were shown selected highlights from their own group sessions to check their significance, to deepen the semi-structured interview experience by immersing the participant in the recorded reality of transient moments, and to elicit free-ranging responses in consideration also of more longitudinal effects.

During the course of the project and partly as a result of it, CRILS developed with a team from The Reader a 'Theory of Change' arising out of the experience and analysis of the praxis. This was achieved through discussion of the videos, concentrating on the identification of stages within a typical session and the possible relation to later outcomes.⁴

In relation to change arising out of Shared Reading, five (inter-related) areas were emphasized as central to how it worked and what benefits arose, in the following sections:

- 1) Feelings (which are not necessarily named emotions)
- 2) Breakthroughs signalled through language-transitions in the participants
- 3) Mobility of self/perspective
- 4) Movement of time
- 5) Experiencing surprise and change.

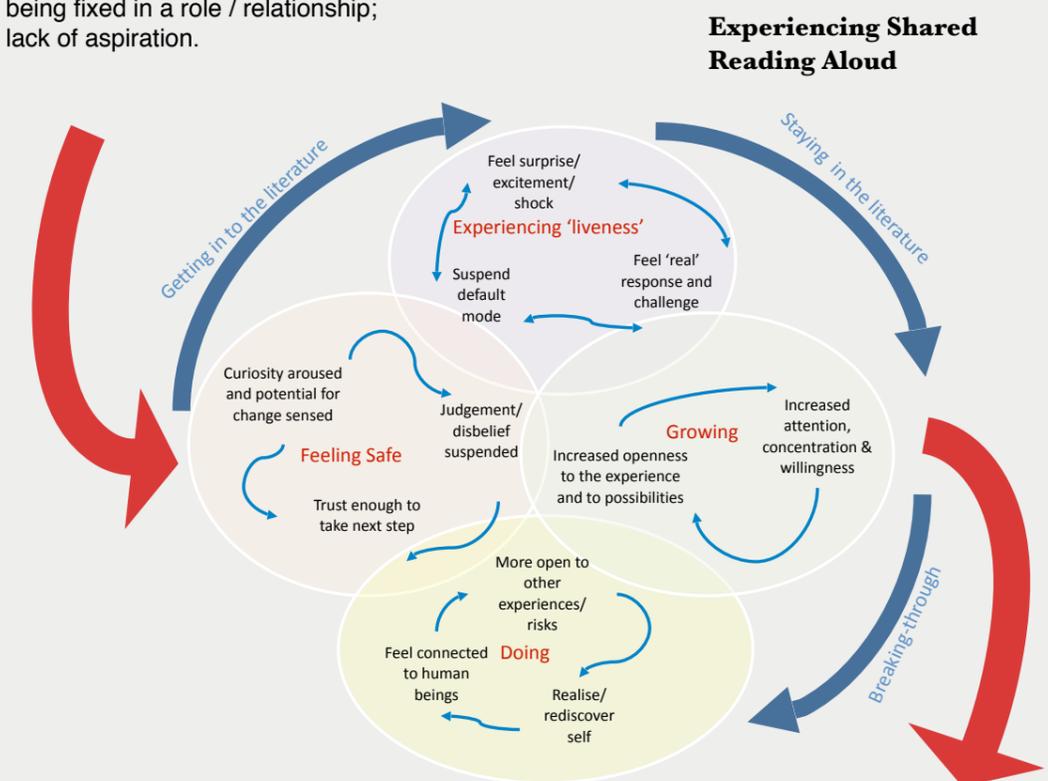
The particular stories, views and excerpts reported below are not one-offs, but are representatives that offer with a particular clarity evidence that is also provided elsewhere in the groups and in different parts of this report. Hence the mini 'conclusions' that are provided en route to alert the reader to larger issues arising.

Below the surface-stream, shallow and light,
Of what we *say* we feel--below the stream,
As light, of what we *think* we feel--there flows
With noiseless current strong, obscure and deep,
The central stream of what we feel indeed.
Matthew Arnold

The Reader: Core Theory of Change

Experiencing 'stuckness'

All of us experience 'stuckness' of varying degrees at some time in our lives e.g. lack of fulfilment; low self-esteem; insecurity. For some, this 'stuckness' can affect well-being and life chances through e.g. over-reliance on others/substances; being fixed in a role / relationship; lack of aspiration.



Experiencing Shared Reading Aloud

Hard Outcomes of Shared Reading Aloud

e.g. improved well-being for people at risk of isolation or mental health problems; improved connectedness between parents and children; increased reading for pleasure amongst schoolchildren.

Shakespeare, Sonnet 29

When, in disgrace with fortune and men's eyes,
I all alone bewep my outcast state,
And trouble deaf heaven with my bootless cries,
And look upon myself, and curse my fate,
Wishing me like to one more rich in hope,
Featur'd like him, like him with friends possess'd,
Desiring this man's art and that man's scope,
With what I most enjoy contented least;
Yet in these thoughts myself almost despising,
Haply I think on thee, and then my state,
Like to the lark at break of day arising
From sullen earth, sings hymns at heaven's gate;
For thy sweet love remember'd such wealth brings
That then I scorn to change my state with kings.

1. Feelings

Keith's Story

Keith, a member of the Addiction Group, reported at interview that he had been brought up in an 'unemotional' family environment in which the message was: "Boys don't cry, don't be stupid. If you're gonna do that we're all just gonna take the mickey and pick on you". So you had to, well you didn't have to, but as a protection mechanism you shut it down, and you go, "No, it doesn't affect me whatsoever. I don't care what you do". Alcohol allowed him to cry as 'a release' but it 'did not solve anything' because afterwards he 'did not feel any better'.

He watched a video recording of his response to Shakespeare's sonnet 'When in disgrace with fortune and men's eyes'. In the group itself and later at interview he focused on the line, 'Yet in these thoughts myself almost despising', saying it is 'the one that really strikes...'. In first reading the line (he reported at interview), he had wanted to deny it, and say instead 'I didn't despise myself', but then '[he sighs] No'. As reported above under 'the importance of the felt', this is what Keith describes as the suddenly triggered effect of almost involuntary feelings that demand honesty. In relation to the reading group Keith speaks of no longer 'having to remember' to keep up his lies as he had to in his therapy group in order to maintain defensive pretence. Instead:

Once you become aware of something, you cannot turn back, you can't unknow. So now when I see these things in print and they strike home...

Print strikes home, as though the reader is almost unavoidably caught by the immediate translation of something previously elusive, neglected or denied into something definitive. Keith feels he 'cannot turn back', 'can't unknow', when deep feelings are suddenly involved: hence he speaks of an almost unavoidable honesty, despite the pain. This, like his earlier sighed 'No' in the face of tempting evasions of painful meaning, is in line with previous research findings⁵ on the profitable uses of the apparently negative or the ostensibly uncomfortable in human experience, as reflected within literature and in the reading of it within a safe environment.

Conclusion: The 'cannot turn back' and 'can't unknow' condition of change marks the point at which emotions begin to reclaim their evolutionary value as useful. Originally fear, for example, would be useful as a warning, in its survival value as indicative of present external danger. In further human development, it may become objectless anxiety and counter-productive. But here in Shared Reading, emotions are restored to urgent messages of feeling that usefully tell of a now more internal fact, a psychological reality which, equally, should not be ignored, in the interests of well being at a higher evolved level of survival. This may be an important reason why Shared Reading matters, why it works and how it is useful.

Arthur's Story

Feelings are useful because in Shared Reading these are often unnamed emotions occurring in action. Arthur from the Older Adults Group describes the experience of reading, when getting to grips with complex writings not difficult for their own sake but because sited in important emotional areas:

It means that your mind is in action. The mind is in action and also your feelings are in action, you're feeling something. It's like when you care for somebody... you don't go 'Oh I think you're wonderful', you express it by the way you are with the person. You might say sometimes 'I love you' but that's not the important thing, it's the way you express by your emotions to something, the way you do it.

In reading literature, says Arthur, you do the feelings – imagine, express, read aloud, perform, and feel them as acts. The immediate trigger for this remark made at interview was Arthur viewing himself in discussion of a poem 'Child' by Sylvia Plath, on a troubled mother trying at least to make a beautiful nursery bedroom for her baby. Arthur had two sons, but both died of esophageal cancer when young boys – one after the other. He said that with this kind of cancer the sufferer can't eat, 'so you have to watch your children slowly starving to death'. After the second boy died, he had what he called a nervous breakdown – said he couldn't cope any more, and left his job (as an anaesthetist). He gradually recovered, but he and his wife left their home as his wife didn't want to live any more in the house where both her children had lived. He is now a widower who said at interview that it was important not to

WALTER: 'When I was younger I used to know more than what I actually know now' [laughs]
 GROUP LEADER: 'That happiness can happen, can't it, when we are children... ?'
 WALTER: 'It happen every ... remember. It happen when you talk about what happen when I was younger.'



Heather's Conclusion

Heather is a member of the Older Adults Group in which many participants are struggling with (short-term) working memory. At interview she said that the emotional effect of the poetry on (deeper/long-term) core/autobiographical memory 'does good':

It's probably not so much knowledge, but your feeling, you feel it.... Sometimes you might feel down and you remember something you do in the past, places that you've been, and it just bring your spirit up.... I suppose if you remember things, even bad memories, you have a bit of memory because I suppose some people can't remember, can't remember things that they did in the past.... It give you some, what you would call, bring back some memories, [quietly], bring back some memories, [quietly] bring back some memories...

2. Language changes

Transitions

The Theory of Change speaks of a third stage in the Shared Reading process: 'getting in', 'staying in', and 'breaking through'. If readers can 'stay in' a text with sufficient intensity and stamina, then, it is claimed, something qualitatively emerges as a result.

The challenge is to identify this 'breakthrough' as such, and to show evidence for its significance at the personal level, in particular through linguistic traces that differ from the norm and are inflected by what is being read. In the Older Adults Group, Ona read 'For the Sake of Strangers' by Dorianne Laux:

She sounds to me like a person who's had a terrible loss... and that feeling... disengaged to the world I... I...I remember that feeling when my grandmother died... and I walked about like she's walking about now. I was aware of things but not aware of things. I wasn't part of it. It's a horrible, horrible feeling... The words in the poem 'No matter what the grief, its weight, we are obliged to carry it'... I'm afraid I know that. I can't say I don't know that because I do.

As though indeed afraid, Ona has previously found it difficult to speak of the death of her husband. Here she is helped by the poem because of its pain. The threshold-crossing significance of hesitation and the use of the double-negative when 'I can't say I don't because...' mark the turns of syntax that participants often instinctively use in sensitively feeling out the space they are having now to occupy and explore.

Linguistic Markers

Dr Kremena Koleva is a linguistics expert at the University of Leeds with interests in the formation of non-literal language and the psychological processes involved. As an independent, external reviewer called in to consider linguistic data, she provisionally offered the table below in relation to key utterances from participants in Shared Reading - some already cited, others which are given further context and discussed at greater length in later sections of this report. The table depicts the literature triggering in a group member, often an inexperienced reader, an awareness of reality beyond the usual norms (i.e. an intangible reality in the face of which conventional language can seem powerless or floundering). Group members made efforts to grasp this new reality through single metaphorical words or developed conceits and paradoxes in order to forge a tangible language; a process equivalent to what goes into the creation of poetry itself.

Breakthrough in action (as it happens during reading sessions)

Sense of Intangible	Responses via Tangible	
<p><i>The initial stages</i> Reader recognises something in the text that goes beyond the literal:</p> <p>ARTHUR on feeling 'something' beyond the words: 'The words are only the expression of something that we wish we could say more. It's not the words of the language, it's what are these people trying to express with the form that they have.'</p> <p>ONA on a woman who cannot speak of her loss: 'I'm afraid I know that. I can't say I don't know that because I do'</p> <p>JACKIE on there being more than we see on the surface: 'And it's what we can't see that is life'</p>	<p>Metaphorically-used words either by this reader, or another one in the group:</p> <p>e.g.</p> <p>'Strike' – metaphorically used</p> <p>'Hit' – metaphorically used</p> <p>'Awaken' – metaphorically used</p>	<p>Developing conceits (either reader or somebody else)</p> <p>CHARLOTTE: 'Our day dreams are like prayers'</p> <p>JUD: 'You're a prisoner but you're also free to do whatever you want'</p> <p>HEATHER (on poetry making her remember): 'It splits up the darkness'</p>

There are a number of associated examples of sought-tangibility where group-members have recourse to the markers 'kind of', 'sort of', 'like' or (better still for its tentativeness) 'almost like' -

'It's almost like a partner as well' (Jud, Mental Health Group); 'Yeah it's like split [gestures] multiple personalities' (Jud, Mental Health Group); 'Or yeah, almost like being in a boxing ring with someone' (Jack, Library); 'but it's like when you, when you sort of er, when someone asks you for advice' (Ralph, Addiction Group); 'I suppose yes it does make it feel more real you know um, it's, it's like if you've got a worry' (Keith, Addiction Group)

Dr Koleva concludes: 'My idea here is that readers seem to begin to be aware of another reality, or a deeper reality created by the breakthrough. They are aware of it, they can feel it, but they do not have to give it an outward expression yet (not in words at least). There is almost a feeling that language is ready to fail us; ready to fail us in expressing accurately enough the thought we currently have in mind. That's why when we compare what we are thinking/feeling to something (more) common (e.g., partner, split personalities, boxing ring), we hope that we would be understood more accurately. My idea here is that this may be a process that is the opposite of de-familiarization. If the breakthrough has the healing power we think it has, surely part of it will be the potential of the breakthrough to bring people in closer touch with their own individual experience and also perhaps closer together with others as a result: creative re-familiarisation of experiences and thoughts could be one way of so doing.'

This translation is not easily achieved. There are what Donald (Mental Health Group) called at interview 'pregnant pauses', silence underlying the struggle for articulation. Dr Koleva also drew out a series of sentences from the Shared Reading groups that spontaneously expressed live hesitation, a groping for words or syntactic constructions, 'indicating the transition to a higher plain/mode of thinking, not always easily accessible to words'. These often began from the words 'something' or 'it' or 'what':

'Yeah something that's come to an... end, or, either a relationship or... or something that started' (Donald, Mental Health Group)

'It just came into my... what came into my mind, I didn't plan it. It felt right for me to say it, because this group, this group is like a little family...' (Jane, Library, interview).

The group members themselves were often people who felt directionless or powerless or stuck, and points of change or strong feeling triggered by a text were likely to cause hesitancy, stumbling revision, a sense of the important and unfamiliar or the lost and unattainable. Such utterances indicate, Dr Koleva tentatively concludes, that 'speakers are probably somewhere on the very edge/borderline between language and thought, and there is always a coming back and forth between the two.'

Dr Koleva further pointed to the phenomenon of 'hangings', situations in which speakers abandon a thought or leave it uncompleted, reaching a point that is even before thought, again. At that point speakers experience a kind of mental emptiness in the face of the unknown or where it could ever lead. It is less like the process of linguistic probing described above, and more like 'a processing halt' at which point (as can be seen on the videos) gestures often take over and become important:

1. The kind of like dreamy description of um hell there, it's um... (Jud, Mental Health Group)
2. So I tried to understand life through philosophy, through novels, different languages, tried to get different perspectives....so yeah I'm just....[looks down at text and stops speaking] (Mark, Mental Health Group)
3. It's about what you consider to be an accomplishment, as opposed to, you know ... - who he really is (Jud, Mental Health Group)
4. And I think, the expression on her face and her physical disposition or, or certain.....[trails off, group leader talks] (Jack, Library)
5. Bitterness, well I don't know if bitterness is quite ... [gestures] (Donald, Mental Health Group)
6. To me it's psychological violence, it's not physical violence, it's psychological violence, it's more damaging...it remain for the rest of your life...if you hurt your arm or whatever, it might heal up but [points to head]... (Jane, Library)

At interview Donald (Mental Health Group) described these moments, in his own experience, as 'almost like the words stopped'. Sometimes this is about people recalling what they already know from their own experience (1,4,6: hell, trauma - Jack revealed at interview that he had been mistreated by his own father; psychological violence) - but in a new way personally translated out of the literature, a fresh realisation that re-creates what has stopped their lives so powerfully in the past. Sometimes it is less about pasts than possible futures immediately felt in the act of speaking (2, 3 on ways forwards; 5 on the waves of understanding when on the brink of new formulation), and the sudden discouraged or wearied incapacity to know how to go on from them. Jud knows what is at stake here when in a discussion about a prisoner in Chekhov's 'The Bet', the group-leader says, 'So, he's kind of...' and Jud finishes the sentence by saying, 'Hanging on'.

On these stops and starts in the excitement and draining of intelligence, Dr Koleva offered a tentative conclusion: 'This may indicate that the breakthrough comes in surges.' How far these surges can be worked into a more consistent future is an issue addressed in section 5 below.

The language markers and symptoms identified here are manifest in sections 3,4 and 5 following.

Contribution Trial

CRILS Research Fellow Fiona Magee piloted the idea of working between quantitative and qualitative analysis to begin to measure the development/change (or otherwise) of a group member's contribution at 4 points - sessions 6, 12, 18 and 24 - over the 24 week intervention.

CASE STUDY: Sarah, Addiction Group.

Session 6 (4 group members)

Total speaking time throughout 1.5 hour session = approx 7 mins

Notes: Most speech is about the concrete facts (especially in the story); much is repetitions of 'Yeah, yeah' to others' comments; some almost inaudible; S is often interrupted and spoken over, often defers and refers to what others have said especially K; she waits for others to state and then agrees; but she uses the word 'beautiful' twice, once at end of story, once at end of poem.

Doesn't read aloud but does read some lines of the poem back when thinking/speaking.

Session 12 (4 group members)

Total speaking time throughout 1.5 hour session = approx 6 mins

Notes: Much fewer 'yeah's: uses instead 'That's right' or 'that's it'. S sounded more definite in her comments, using present simple tense mostly e.g. 'she wants him to...' and 'she hates him' - often used to talk about something that's true in the present, or always true but it has to have an element of the definite/known. She also uses a few modals - 'So he can't be...' and 'He must have....' - which may indicate an increased confidence in the understanding of the text and confidence in expressing her thoughts and ideas.

She prompts the others occasionally, and she interrupts R. Also uses the form 'But then....' (as in 'But then it wasn't really a bad thing because...') and uses it jointly to add to/adjust/counter/disagree with another group member and also to start to examine the contradictions within the characters (they say one thing, do another etc.). All signs of starting to explore and feel okay in exploring and seeing various views.

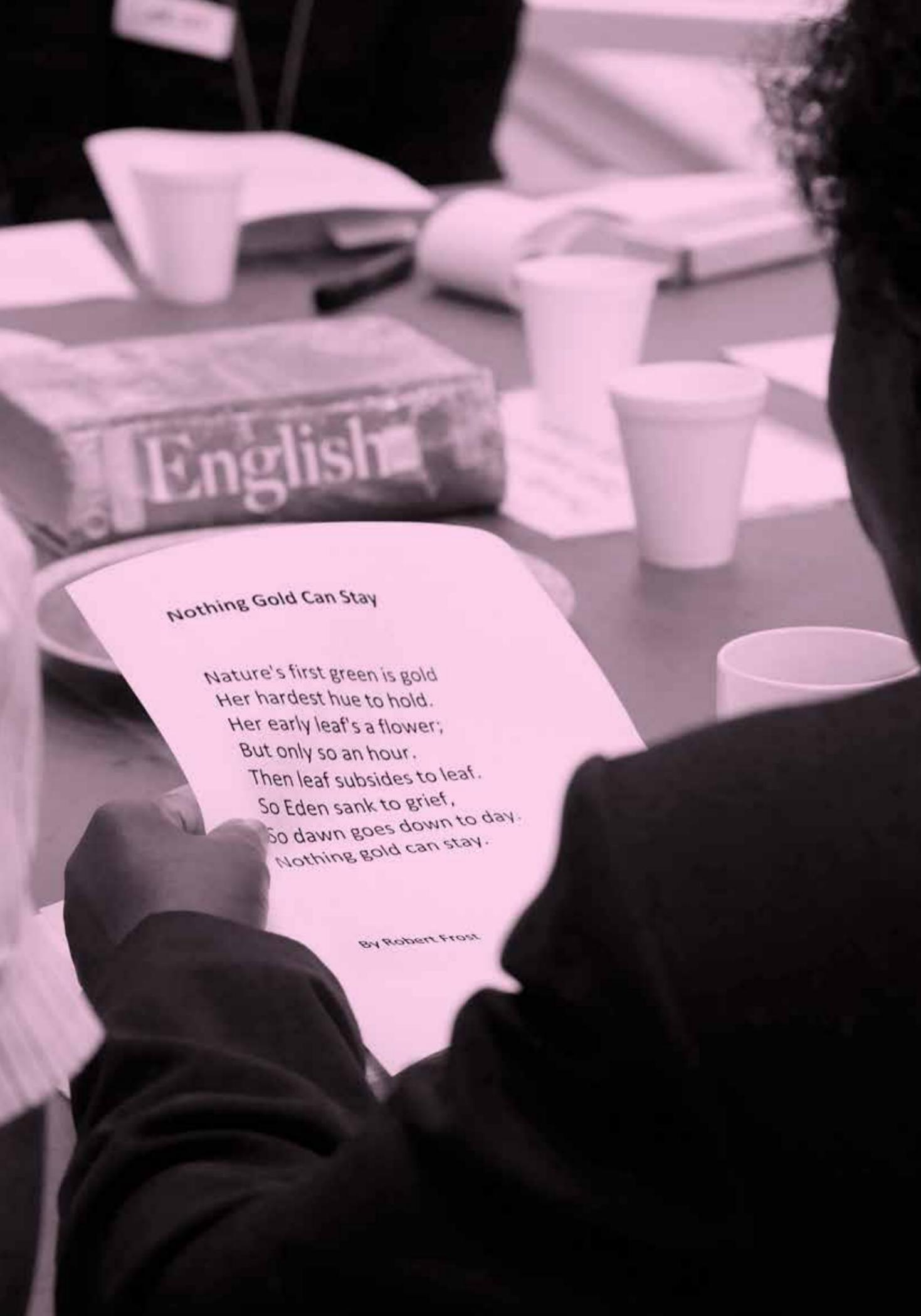
Session 18 (only 2 group members)

Total speaking time throughout 1.5 hour session = approx. 14.5 mins

Notes: Uses a lot of question tags, which is new - 'It was a serious matter, wasn't it?', 'He's not even being a friend, is he?' Question tags are used either to confirm something is true or not, or to encourage a reply from the person to whom you are speaking, in contrast to earlier sessions when S would repeat 'yeah, yeah' in agreement to whoever said anything.

At one point she says (in reference to Kitty in *The Painted Veil* being ditched by her lover), 'That hurts'. A bit later she says 'She must be devastated'. She uses 'She/he must feel...x, y, z' often in this session.

It's hard to convey this but her tone is different from earlier sessions even though some of the syntax stays the same. So she says, for example, 'It could be that' and stresses 'could'. And that goes with her countering K much more - there's an insistence in it, rather than the previous reticence or feeling of 'this is probably wrong but...?'



Session 24 (3 group members)

Total speaking time in 1.5 hour session = 13.5 mins

Notes: Bolder language – ‘She doesn’t want him to...’ and ‘That’s why she’s asking him to...’. She also says ‘I don’t know’ really differently now - like ‘ooh there is something here to work out!’ She said it in earlier sessions more with a kind of disappointment (at self) and feeling of wanting to move on (away from her not knowing). It sounds different because of how she says ‘know’: the pitch drops between the kn- and the -ow, with a long sound, as though she is really wondering.

The research importance of cases of apparent incapacity or disability

One Reader project worker comments: ‘There is something important in the fact that group-members living with dementia still display, explain, articulate the themes of this report. It feels more down-to-the-bone, as if what they say is almost proof that even when articulacy seems gone, a core is there.’

In the Older Adults Group Pamela, who has mild-to-moderate dementia, is listening to Henry Van Dyke’s poem, ‘Life’, about the ‘rough and smooth’, the way down the hill as well as up.

Let me but live my life from year to year,
With forward face and unreluctant soul;
Not hurrying to, nor turning from the goal;
Not mourning for the things that disappear
In the dim past, nor holding back in fear
From what the future veils; but with a whole
And happy heart, that pays its toll
To Youth and Age, and travels on with cheer.

So let the way wind up the hill or down,
O’er rough or smooth, the journey will be joy:
Still seeking what I sought when but a boy,
New friendship, high adventure, and a crown,
My heart will keep the courage of the quest,
And hope the road’s last turn will be the best.

Suddenly Pamela feels the force of the down-side: ‘That’s a bit different, isn’t it’. Hearing again the lines ‘Not mourning for the things that disappear/ in the dim past’, she said ‘I don’t like that one... you can’t find to why it’s there you know, I hate that.’ For Pamela, nouns have disappeared often into ‘it’ and ‘that’; but she went on:

I was just thinking about these things and they don’t always do the things, do they, that

you want to do, or want them not to do it, you know.

‘Do they’ and ‘you know’ are not markers of disability but social aids to appropriately tentative efforts of thought. The semantics have somewhat gone, but extraordinarily a complex syntax is still structurally in place, adapting to the thought, in rearguard action from ‘what you want to do’ to what ‘you want them not to do’.

‘No,’ she continues, ‘You just want things to do nice, comfily, you know, but the inside is that you can’t make it like that.’ The inarticulacy is all the more creative for the obstacles against which it struggles. When the group leader dares to ask Pamela why the past is said in the poem to be ‘dim’, Pamela replies, ‘I don’t know about that, but it’s there’. That sense of something still ‘there’, still felt on ‘the inside’ is what gives shape to the attempted utterance.

That there was something ‘still there’ in Pamela herself impressed Pamela’s daughter. Watching this excerpt from the reading group, she felt that her mother’s engagement with the group would encourage her to continue driving Pamela the considerable distance to the weekly sessions, as to her surprise she saw in her mother signs of life in that setting which she did not normally see when the two of them were alone together at home. She felt the freedom of the group - the way in which direct questions were not asked of anyone in particular such as might cause embarrassment from an inability to answer - enabled Pamela to be more responsive, in a way that gave her daughter more motivation. ‘It’s a boon to me that she can be like that, still.’

In this respect, this example of Pamela’s response is no more and no less than an extreme version of the creative pressure on syntax and vocabulary that at crucial moments occurs in all groups, when members may have no difficulties of speech or recall.



3. Mobility of perspective

Shifting Roles

At interview Sarah from the Addiction Group, not previously a willing reader, commented on the variety of roles adopted in the act of reading and the free movement between those perspectives, with particular relation to the character Kitty in Somerset Maugham's novel *The Painted Veil*:

It's like being an actress or something, being someone, doing the role, going into the role of somebody else, their feeling... So it's a learning thing as well, it's almost a bit like psychiatry or something like that, psychiatrists telling people your life but you're understanding – I know what she's going through. I'm not just... I'm actually feeling it with her, it's like I could almost give her advice. So going through the emotions with her is kind of like um, like therapy for me, a lot happy, a lot confident... I feel I'm learning from her.

Actress getting to know the character from within, psychiatrist analyzing her from without; learning from her but also almost able to give her advice – these are subtle combination and shifts: 'Her feelings and my feelings are kind of combined so I'm getting out how I feel about men or love or being vulnerable.' In the group Sarah's interest in Kitty Garstin, who is betraying her husband, has an equivalent shifting effect on Keith who notes how often previously he has needed to be single-minded in his views:

When Sarah brings up 'Oh what about Kitty?', then I'm forced to think 'Yeah, well, mmm, what about her?' And I go, 'Well yeah, I didn't really want to have empathy for her... now you've brought that up I've got to take that with me. I can see why she's scared stiff, I can see why she's done that. And you keep trying to come back to the fact that she's done this, she's cheating! Come on, just remember that fact! But you can't... and oh no, for God's sake and... and because you're getting the different thoughts, you're developing.'

In the difficult imaginative register of complexity – the multiple perspectives, the conflict not only

between the points of view of different people but also between judgment and understanding in one's own viewpoint - what is striking is the reluctant, almost involuntary and yet reappraising nature of the extension of mind involved: 'Just remember the fact (of her cheating)... But you can't'. There is a threshold being crossed here, into greater imagination of another person (in the text and via a group-member).

Conclusion: Mobility here means an increase in what is often called empathy, in relation to the imagination of other minds.

Though a far more experienced reader than Sarah, Mark from the Mental Health Group spoke similarly on the mobility of positions, in his relation to the imprisoned autodidact in Chekhov's 'The Bet':

For me it was, it was a mixture of feelings because like I felt like, I wish this guy was real because me and him would be best of friends I felt, right. And um, it felt really good because in a sense someone was saying something that I could relate to about, I saw, as if someone was talking about my own story, in a sense. Someone was talking about me, um, in some way. And it felt good that that was happening and when I shared what I shared I felt good, but I also felt scared because I was vulnerable, I was showing myself in a way, and I wasn't sure um, exactly how that would be received. But the group-leader reacted to me well and people around me didn't say anything.

The man exists on his behalf, but Mark also wants to be the man's friend, the man to be his friend, whilst also feeling good and feeling vulnerable: Mark is very strong in the sessions themselves on the need to feel and think more than one thing at a time and even 'have opposing feelings at the same time'. In the session on 'The Bet', he is impressed by his fellow group-member, Jud, starting things going by saying:

I feel like I've been locked away for fifteen years... You're a prisoner but you're also free to do whatever you want. It's a - quite a quandary.

It was this that prompted Mark's own identification – 'I kind of understand what you said about it being a life-sentence having a mental health problem, and I think we're all in the same boat to a certain extent,

on one level or another'. As he says later in the interview:

when Jud, he said it, it resonated with me and it felt like I could make a connection with him. And I said it for that, and I also said it for my own sake

There is the resonance of a three-way movement in Mark's speaking 'for' – that is to say, speaking (i) in connection with the text, (ii) in connection with his fellow group-member, (iii) in connection with himself. Because it is shared reading aloud, the movement between those three centres is swift and fluid and inter-related:

I... something inside of me just felt like talking and saying what I said and it felt good. But I've lived it as I was saying it, so I lived... – I don't know if I'm being too dramatic, I guess I am dramatic sometimes anyways, but I lived the intensity of what I was saying in how I was saying it, and it really helped.

Conclusion: Shared Reading is not only about the reading aloud being a live experience but also about group-members' thinking becoming dynamically alive in the moment of spontaneous and emergent utterance.

Shifting Language Markers

This live mobility of thought is mirrored at other levels, and again as in section 2 above linguistic markers are telling, especially in respect of words and phrases that only seem merely background or functional. One crucial indicator is the flexible but barely conscious movement of pronouns, shown in work of discourse analysis:

Well, in the story *the woman* had put off clearing her mum's stuff, hadn't *she*? Kept putting it off and putting it off and putting it off. *It's* not putting it off, *it's* just delaying it. *You're* not ready to part with... I mean *I've* still got Bill's dressing gown, which *I* will not part with. *It* took *me* two years to sort out *my* husband's stuff... couldn't bear to... (Gladys, Library, on Jane Gardam, 'Waiting for a Stranger')

Which is something *he* can feed on, that despair, because once *you* get down into that circle, *you* go '*I've* got no hope'. (Keith, Addiction Group, on Shakespeare sonnet 29)

I mean people explore life through the experiences that *they* have and relationships *they* have, if *you* don't have that in your life, then you try and explore it in other ways. Through books. And *you* try and live it through *your own* imagination, the only experience. *So I* tried to understand life through philosophy, through novels, different languages, tried to get different perspectives.

(Mark, Mental Health Group, on Chekhov)

In his work *The Secret Life of Pronouns*, James W. Pennebaker suggests that an implicit indicator of mental health is an increasing shift from I-centred discourse to discourse more concerned with others⁶. What the transcripts of Shared Reading groups show is that this is no more than part of a greater and subtler mobility: from 'I' to 'he' or 'she', or 'we', the shifts are achieved with rapid seamless flexibility in live thought. Most significantly, they feature a particular casual usage of 'you' not in the second person but as a third-person informal version of 'one'. The creative use of 'you' in these examples - 'you're not ready', 'you go...' 'you try' – offers an imaginative middle ground for thoughtful exploration between the text and me, between me and others (be they 'we' or 'they'). It is an instinctive instrument of thought used across a variety of participants. As such it is similar to that found in previous research where CRILS identified as an alternative to the opinionated stuckness of 'I just think', the formulation 'It is almost as though, it is as if'.⁷ This is also related to participants gaining access to a wider range of vocabulary, allowing more mobility of mind.

Ambrose at the Mental Health Group often struggles for basic understanding but delights in using different alternative words for the same essential meaning, trying them out singly in apposition, in order to arrive at a feeling for the piece: 'kind is a nice word... considerate', 'It's a... greeting'.

Jerry in the Mental Health Group habitually refers to surreal landscapes, jungles with strange-coloured doors; but in relation to a poem by William Stafford on adventurers returning from wild and far-off places this suddenly develops into an extended riff about those places rather than the usual dead-end and he finds other words arising out of it, culminating in 'a kinda like, um, paradise... utopia'. He then says this sense of a special place is something that 'cannot be touched' but when you return home 'you touch

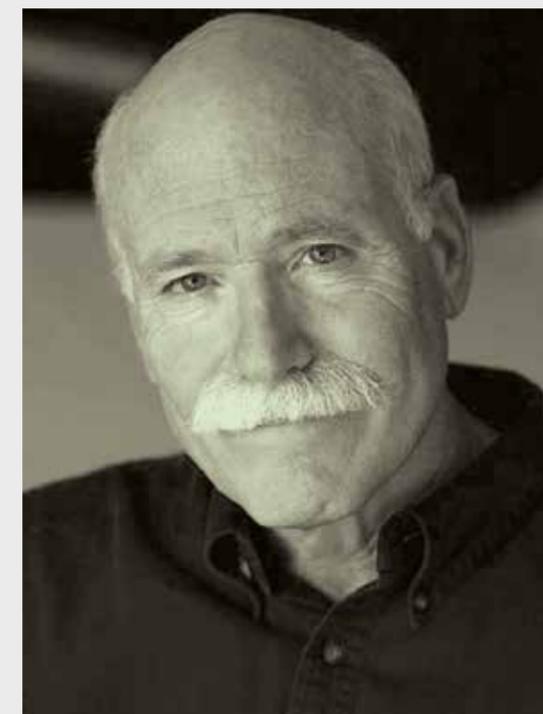
the mantelpiece to know it is real'. There are no such images in the poem but Jerry's improvised movement from what cannot be touched to what must be, exactly mirrors in his own invented terms the movement of the poem as extraordinary heroes of war and adventure have to return home to ordinary material lives. Rhiannon Corcoran, Professor of Psychology at the University of Liverpool comments on this as something subtler and more achievable than a 'cure' of obsessive symptoms: the symptomatic imagery has not been abolished but used and modified freely to build a meaning and achieve something creative. This matches the increase in wellbeing, rather than a radical improvement in mental health itself, tentatively indicated in the quantitative analysis of the group living with serious mental health issues, below p.63.

The imagination of better out of worse

There is a strong relation between this verbal mobility and what emerges at another level as a suddenly flexible imagination of possibilities. Jud became interested in the end of Tobias Wolff's short story, 'Bullet in the Brain' in which an acerbic critic is shot through the head for correcting a robber's vocabulary. The end of the tale goes into a slow-motion account of his brain's final movements when the dying critic has a last flashback to a beautiful moment in his youth when he was playing baseball and another kid chooses the position of 'shortstop', saying, 'Short's the best position they is'. The critic never forgot that phrase, the words, the inversion. For all his compunctions about grammar, this was for him a sort of natural poetry, the words coming to his brain at the moment of bullet-entry like a poetic bullet. 'They is, they is':

JUD: The first time, when this boy makes a grammatical mistake 'Short's the best position they is' he wants to correct him but he doesn't... Instead he actually enjoys it. It's beautiful... and repeats it. And I guess that's where his innocence is still intact, his childishness, his humanity because he's not bitter and twisted at that time, or cynical or even judgmental even though he wants to be... he sees a beauty in everything. Even someone else's mistake, in his eyes... I guess he wanted to stay there as long as possible. It's as close as he's ever going to get to Heaven, that moment in the past, when he was happy, happy, and you know, he wants it to last forever.

Tobias Wolff



'It is a pleasure to watch people think, really think. It's every writer's dream, to have readers confront the work as if it might actually matter to them, might have something to say that would clarify or even enlarge their sense of reality. This goes beyond traditional academic scholarship to the very heart of the writer's ambition – not to be praised for cleverness, but to know that you have engaged another person deeply, inspired them to feel and to think.'

Tobias Wolff, on seeing the videos of groups reading his stories



Jud knows his own propensity for bitterness and cynicism, not unreasonable in the face of a hard life. But this is recovery not in the sense of moving on but being able to recover lost innocence of good feeling when it had seemed lost in disillusionment or trauma.

Imagination here is like what Cynthia from the Library Group describes - the sudden movement of a reversal. She has become attracted to the epigraph to a short story by Joanne Harris that says: 'Some people spend their lives without ever moving their eyes from the ground. Others dream of flying':

There was a time I was going through a very difficult phase and I would dream the exact opposite of what I was experiencing. It was my means of escape because our daydreams are like prayers. It is like constructing a future somewhere.

It is a formulation nuanced by the poetry that has been read, and the ordinary equivalent of what lies beneath other poetry such as T.S. Eliot's 'Ash Wednesday': 'Because I do not hope to turn again/ Consequently I rejoice, having to construct something/ Upon which to rejoice'.

As Jud himself put it on another occasion, arriving late to the Mental Health Group in a very angry mood, but then finding something intriguing in the possibilities offered by a Tessimond poem, 'Day Dream': 'I think he's saying there... that it's do-able, I guess... there's nothing that couldn't be done... I guess'. He goes on from that signature form of double negative that lets in a chink of possibility ('nothing that couldn't'), to read the last lines:

And people will smile without reason,
Even in winter, even in the rain.

JUD: If you want to change and be like this you can. And I guess that's the start isn't it? No-one is stopping anyone from being that way, I guess it's just society as a whole is the only thing that's, you know, that prevents individuals from thinking it's possible, because they're just one person. If they live like that and everyone else isn't. It's... it's literally a daydream.

Conclusion: This is not about time past but about a possible future: a dream which is not merely dreamy but the construction of possibility somewhere.

It is a genuinely creative forming of mental health.

Group Mobility

There is another sort of change of position that arises in groups when suddenly a group-member naturally assumes the role of group-leader through getting closer than anyone else to the heart of the work or when the project worker relinquishes the role of lead. Two examples from sessions previously mentioned may suffice:

- In the session in an Group Addiction on Shakespeare's sonnet 29, the project worker begins to talk about the line 'myself almost despising', and how it goes beyond merely making a mistake and is more like 'how could I do that'. Peter turns to her and asks, 'Are you talking from your own experience?' When she immediately says yes, authority is easily ceded, the situation is not to do with addiction but with broad human issues, and the room changes.

- When Carol is upset by Clare's poem 'I Am', one fellow group-member tries to explain (not wholly correctly) how the poem is less painful than Carol imagined. Though Sean's intention is well-meant, the effect is such that Amy, who knows herself to be far less educated than he, takes it upon herself to say, bravely, on Carol's behalf, 'I don't think Carol misread it.'

Conclusion: The group is not a fixed entity.

Metacognition

There was a particular mental perspective that Jud identified from another Tobias Wolff short story, 'Mortals', on a man who announced his own death to the local newspaper in order that he might read his own (brief) obituary:

JUD: And if you haven't achieved that much and you are not in a good state at the time of your death, what do you put in it? I mean, people are not going to know about your personal workings are they?

And the things that matter to you are always left unreported because they're never said, and an obituary is really about society's view of you.... It's a stranger's clinical view of your life, based on accomplishment.

Then he adds what it is, actually, that realist literature adds to obituary – the need for the inner story, the more just representation of the neglected and the common:

He wants to be acknowledged... he wants everyone to know who he was and then to correct it and say, actually this is what I'm really about... I think he wanted people to know who he really was... and not in the most shallowest sense, he just wanted someone to know who he really was.

This is what is usually an impossible achievement in normal life: the capacity to take the view of oneself from the outside and one's own view from inside at almost the self-same time.

Conclusion: Reading literature helps to create flexible and complex mental perspectives in relation to both oneself and others.

Keith speaks of becoming himself 'a sort of spiritual figure' looking over all the people in the book, seeing what they are actually thinking. The Mental Health Group worked through their incomprehension of Kit Wright's poem 'All of Us' by turning to the similes and metaphors - sounds of our own loneliness like a cracked bell; the pressure on the sea wall to which mussels cling, hoping their shell will bear the pounding. It recreated a language for a condition that, said Cristo, felt like schizophrenia to them, only now without the label. Then Jim spoke of the poem ending with making an 'enormous sky over whatever we most hold dear'; 'the big picture' over and above all the details is what Jim calls it, concluding: 'If you think big, it can take you away from schizophrenia even for a few minutes'. It is notable that the mental health groups were especially attuned to working by means of the use of metaphors.

Jackie feels what she calls the presence of a benign 'Big Brother' when she is reading. In one session she sees and hears herself suddenly saying: 'This is me, I need to change my life.' The evolved capacity for people to look at themselves as if they were other people but without being wholly separate from them – what psychologists call metacognition – is enhanced both in the sessions and in the interviews that arise out of watching the videos.



4. Movements of time

In the Older Adults Group, a session on Wordsworth's 'Composed Upon Westminster Bridge' has ended and the group is about to disperse. Suddenly however, Eleanor begins to read the poem again, with wonderful relish and emphasis, briefly noting the beautiful moments, and the group bursts into applause. At interview Eleanor looks at this moment but, to the interviewer's surprise, does not recognize that the person doing the reading is herself - though she is happy to read it aloud again with the interviewer and again functions beautifully in the present:

Earth has not anything to show more fair:
Dull would he be of soul who could pass by
A sight so touching in its majesty

In the session, following Eleanor's joyous reading, Carmella had said in what was itself 'extra time' for the group: 'Sometimes you have something that you don't know you've got, and after other people come, you realize that this is precious, we have got it in our hands.' This is about not being 'dull of soul and passing by', as the group-leader quickly points out, referring back to the text. Carmella is speaking of how literature captures and re-captures what too often is missed or taken for granted at the time of its happening. Recovery here, as with Jud on 'Bullet in the Brain', does not mean simply trying to get better by going forward but the capacity to get back something of what was lost or damaged, restoring a renewed continuity to a life. It is time recovered.

The model here is not therefore time as simple therapeutic progression (so-called moving on). Nor is it linear time going on and on (and then this, and then that, and then something else coming after). Jack in the Library Group speaks of undigested experience resulting from 'events just rolling into each other' in that on-going way.

Nor is Shared Reading about reading on and on in straightforward serial mentality. Roger from the Library Group thinks of himself as an historian, dispassionately interested in the work's context, the author's controlling intention and the story's outcome rather than looser feelings: he disliked the slow reading of a short story allowing too many extended pauses for individual response, because 'you'd be speculating about things which if you read on a few paragraphs turn out to be, you know, a waste of

time'. But in the Primary School, ten-year-old Zac commented with particular relation to poetry:

I just think it's more like interesting because when you have a story it carries on, but when you have a poem it just stops. [INTERVIEWER: Why's that good?] It's more like a challenge than a book. Like with a book you get to know everything and with a poem you might get a tiny bit of it and you've got to try and figure it out.... With stories sometimes if you have a question and you want an answer, you won't be able to answer it because they're just going on and on and on. And then by the end of the story you might forget about it.

It is the practice of group-leaders to pause at the end of particular movements in short stories precisely to avoid too much dependence on linear outcome, to make the present and its possibilities not merely resolved by what happens to come of it in the imminent future but contain something of the poetic potential Zac describes.

Conclusion: It is important that Shared Reading is not just about simple outcomes when so often it involves people whose own lives, if viewed from that perspective, might look like no more than failures or dead-ends (people living with depression or dementia or psychosis, for example). Patterns in a life are more complex than ideas of linear progression. This is part of the experience of reading literature but it also has implications in the evaluation of the longitudinal effects of Shared Reading. It is important to develop methods of understanding how people who cannot simply be 'cured' may nonetheless enjoy increased wellbeing through Shared Reading.

A different pattern

In the Older Adults Group including people living with dementia, one project worker notes the difference in working with this group:

The feeling comes before understanding. We were reading Robert Hayden's poem, 'Those Winter Sundays', about remembering his father rising early to make the fires and polish the shoes for the whole family, without thanks. At the end two members said, 'Oh, lovely. That's lovely'. But when we started taking the poem slowly, line by line almost, it became clear that there were large chunks of the poem that

they did not 'get'. So we are talking about a different sort of getting, that is not to do with short-term working memory.

It's important that the group leader is a bit more fluid about the direction the understanding or feeling comes from because it's not necessarily linear. With other groups you may start at the narrative sense level. But in these groups it doesn't seem to follow the normal pattern of meaning being built up bit by bit. It sometimes comes full-on instantly, but then disappears altogether and then comes back a bit. It is like a memory that is detached from a place/person, but has tapped into a feeling that's kind of... floating around.

I am thinking about the role of the group-leader in creating a kind of safety and allowance for this shape (or lack of shape). The group-leader has to pay even closer attention to the detail - because often the participants will latch onto just one word and repeat it, not a whole sentence. Or their response will be one word and you have to work backwards into the poem to try and work out where that word has come from for them in the text. And when the group-members come out with these one-word instant instinctive reactions, they look at you a bit scared. It's like they are thinking they are in the right place but not being quite sure: 'Is this ok?'

I wonder what it's like to have a feeling unconnected, or not knowing what it's pinned to. It must be intense. Often it seems like there is a kind of trying to make the links and as group-leader you have to be really on the ball to notice that because it's not obvious. So I'm thinking here about a member - Dawn, whose dementia is becoming increasingly evident - and how after 'Those Winter Sundays' she kept trying to get back into the feeling of it, but it was like she didn't have the words or normal capacity to do or show that. So she would tap the sheets of paper, the printed texts, in front of her. Or Heather repeats from the poems single words - often the most important words that she holds onto. When someone talked about the honey-bee or the cricket in Yeats' 'The Lake Isle of Innisfree', Betty who never speaks now, looked animated and used her fingers to express how small crickets are, and Carmella

joined in, just to make the same gesture with her fingers, whilst speaking.

There is growing research into this variation of mental structure, in terms of fragments, mosaics and quilting.⁹ But the argument here is that literature not only allows but also encourages this form of response, even amongst those readers who have no obstacles to immediate comprehension or articulation. In the group-experience of people living with dementia, the process requires a greater and more patient understanding of the role of apparently discontinuous silence. The project worker comments:

It is different from other groups, though there too silence is important. But more so here. First, because staff present don't like silences: sometimes their idea of an activity for these people is being jollied along; but it seems really important to allow them the silent gaps. Second, that actually dementia patients live in silence a lot of the time so I don't think it phases them as much. Third, because it's important not to confuse (as a group-leader) silence for non-presence/non-engagement - so someone will say nothing, you think nothing is happening, then suddenly they may recite, or go exactly to the right place in the poem. Lastly because this links to what I was saying before about the way of thinking - in that there is a word or a feeling sort of floating around in the silence, and then suddenly it's there, it doesn't seem to need to be linear.

Another group-leader recalled from her notes a session from the Older Adults Group on Edward Thomas's 'Adlestrop', a train halted at a station.

On a second or third reading of the poem, after a long silence, one lady began to speak but only in the words of the poem. 'No one left and no one came,' she read, as if musing at the possible meaning:

Yes. I remember Adlestrop—
The name, because one afternoon
Of heat the express-train drew up there
Unwontedly. It was late June.

The steam hissed. Someone cleared his throat.
No one left and no one came
On the bare platform. What I saw
Was Adlestrop—only the name
No one left and no one came

Then she looked up and directly round at the group. 'That's how it is for me,' she said in an altogether different tone of voice, more certain, deliberate. 'I don't know if there is anyone there. I put words out but I don't know if there is anyone really there to pick them up. There's no evidence. One can't be sure. One hopes. *No one left and no one came*. No, it seems I am quite alone, but I trust there is someone there to receive it.' Then after another silence, she read the poem's sudden ending:

And willows, willow-herb, and grass,
And meadowsweet, and haycocks dry,
No whit less still and lonely fair
Than the high cloudlets in the sky.

And for that minute a blackbird sang
Close by, and round him, mistier,
Farther and farther, all the birds
Of Oxfordshire and Gloucestershire.

As she spoke she looked us in the face, as if seeking our response. And then someone else picked up the conversation: 'I hear birds outside sometimes early in the morning.' 'That's a good sound,' said the care-helper.

'That word "Mistier",' said Carmella reading the same poem in the Older Adults Group, 'has to do with one bird starting and the others all join in', - and the group then talked enthusiastically about the birds all coming into song together, as they themselves in their own way did at that point.

Carmella from the Older Adults Group describes her own inner experience of a poem suddenly not only making sense in itself but helping to create further sense in its reader, re-enforcing memory even when it has seemed occluded:

Sometimes there are things that you think about and you can't put it together, and then like the poem come and it fulfil, it fulfil that you don't remember, that you're puzzling about. It fits in what you wanted or in your think or in your mind, that you have it shallow, and then you have that fill in.
[INTERVIEWER: Shallow?]
Shallow, open, nothing in it, it's open, open, and then something comes and it just fills that space in, and then 'oh yes, that's right'. Yes, so something is missing and then it fills in that space.

That 'fit' or 'fill' is like the force of emotional memory stimulated and reawakened, re-filling gaps in the experience of life.

Conclusion: The experiences in the Older Adult Centre reading groups that include people living with dementia are distinctive but still have relation to the experience of other groups in terms of emotional awakening, recovery of autobiographical memories, and the encouragement of ways of thinking, understanding and intuiting that are not doggedly linear. That is why the group-leader spoke of the aged participants representing something almost like proof of the core experience of Shared Reading.

In particular literature speaks to the feeling of temporal and emotional disorientation that often arises in relation to traumatic occurrences or conditions that people never thought would happen, or thought would never happen.

- Ona speaks of something that happened one night which, had she had a gun, she said, would have led her to shoot another person and then herself: 'That was how low I was and I never ever thought I'd be that, in my life, I'd ever be that low... I felt that I was at the end of a line of something.'

- Amy from the Mental Health Group, thinking of the last stanza of Clare's 'I Am' on the desire to recover childhood sleep, said: 'Because you're innocent, ain't you, you haven't come across all the problems, I don't think you know in childhood you are an alcoholic or addict. I was never in school and put my hand up and said "Yeah, I want to become an alcoholic or addict". You just wouldn't dream of it.'

- In relation to Matthew Arnold's poem 'The Buried Life', Jud was asked direct by the carer whether he had any buried original plan: 'Um, yes, possibly but it seems to be far removed from the reality I am in now [smiles ruefully]... (Project worker quotes end of poem and he leans forward to look at it.) Yes, it seems to be quite a distance between the person you once were - hoping to be, the person you have become, so... ur...'. The research team is interested both in what makes people begin to talk and in what makes them stop. The stop here with Jud is to do with the difficulty experienced by a person who in the present looks back to the past, but a past which seems now to have lost the future it once had - hence the lack of an immediately articulatable future 'So...'. These complicated time warps or loops are

experienced in the linguistic hesitations: it is not only the distance between the person you have become and 'the person you were' but also 'the person you were – hoping to be'.

This need to get some hold on passing time, and have some understanding of one's own life's time is why an Addiction Group session on William Stafford's poem 'Ask Me' was important in seeking to stem the linear flow of life, and hold onto some sense of a life as a whole:

Some time when the river is ice ask me mistakes I have made. Ask me whether what I have done is my life

RALPH: It's a - not joyful but not painful - it's just a different experience, a lack of, a lack of, either calmness or, or the rush of the river.

GROUP-LEADER: And when it's calm, still... ?

RALPH: Yeah, there's still sounds there, but, but there's nothing to... It's almost like artificially silent but it's not artificial, it's a different state, a third state between calm and tidal.

GROUP-LEADER: But when it's frozen...

KEITH: You can contemplate. There's a stillness about it, so you can stop, pause and think, so it's not all [gestures], you know there's things going on around you but you can stay in one place and go 'I know I can think'.

GROUP-LEADER: Ah, and you can look at this particular bit?

KEITH: Like look at me, this bit of the river is me, my life, things are blowing over there and there [gestures], but now I can just look at this bit.

PROJECT-WORKER: I like that because then there is something in the second verse:

*We know
the current is there, hidden; and there
are comings and goings from miles away
that hold the stillness exactly before us.*

I'm really loving that picture of him wanting a bit of his life to be still and to look at it [repeats lines].

KEITH: So this is what's happened to bring him to this place and it was in the past, now we've frozen this bit so we can look at it, otherwise it will just flow/roll on by [gestures].

So many linguistic pointers towards breakthrough (see section 2 above) are evident here: not x but not y either; almost like; things or something; pronoun shifts; similes and metaphors; gestures related to language struggles. Prompted by literature, this is not only emotionally responsive but genuinely philosophic and in that, as if for the first time again, revelatory of the origins of thinking intrinsic to human need. The philosopher Hannah Arendt, for example, argues that thinking is the human rebellion against time, inserting itself 'in between' time left behind and time approaching. Without a thinker, she writes, 'there would be no difference between past and future', only the continuum of the flowing stream. 'But thanks to the insertion of a fighting presence' called thinking, says Arendt, the very shape of things alters away from the linear: past and future 'meet at an angle, and the correct image would then have to be what the physicists call a parallelogram of forces'.⁸

Conclusion: For Ralph, the unnamed 'third state' is the place in the middle of things in which Shared Reading best operates, neither wholly calm, nor utterly wild. This relates to the creation of contemplative place discussed in (1) above on Feelings (p.20), and again to Ralph, below, on the shape of thinking in (5), level 3 on the group-experience of change (p.49).

What Literature Does to Time

Carmella speaks after the session has ended. So too Donald from the Mental Health Group continues to want to talk about the short story even though the group-leader wants to go on to discuss this week's poem. Instead of leaving the text behind and going on to the next thing, Donald reported at interview that he was amazed since he was not an assertive person but that he had 'sort of spilled over'. When these moments of persistence occur, thought is revealed as what it often truly is – something necessarily left-over, which, latent with unfinished matter, insists on re-inserting itself into the passing present.

This is like what Jack (Library Group) describes in *Jane Eyre* when the young girl, at last free from the tyranny of Mrs Reed's house, decides at the last moment not to leave without saying what she thinks of her treatment under that roof:

Once she knew she was gonna go, she couldn't just be told to go off and [makes dismissing gesture with arms/hands], you



understand me? And then almost like to be kept somewhere, not be heard or anything. So, she was on her way out, then she thought, 'No I'm going to tell, come back and just tell her and suddenly I feel...' Because she'd actually been hurt, she feels the impact, and I don't think she thought through whatever she was gonna say but, but she said what, what was in her mind or the impression of her so the words kept flowing...

This flowing movement that results from beginning to go and then coming back is related to the 'comings and goings' emphasised in Stafford's poem: for John, the girl is already almost over the threshold and into the future before she goes back across it again to do justice to the past. What group-members are discovering is a sophisticated idea of what literature can be, creating through words a present which can do justice to its own experience rather than just pass on by. It is significant that a leading thinker in this area is the poet Douglas Oliver who related this idea of literature's redeeming of time to the experience of reading aloud, in intense

and intimate relation to the poetically created present.¹⁰

In life itself it is hard to have the right emotions at the right time – as Jane (Library Group) described when looking at herself laughing even as she said something very serious in her group:

It's really silly. I've noticed one of my daughters-in-law doing this – when she's going through a painful thing or going through pain, she'd laugh. And it's not until later on, after she's laughed and then been able to digest and go through and mull over, does she then have the right emotion, if there is a right emotion, does the emotion really come through.

The alternative time-structure offered by literature in reclaiming the meaning of lives is described again in Jane's interview when she recounts sending to her sister, who was leaving for a different life from her own in America, two poems she had read in the shared-reading sessions - Derek Mahon's 'Everything is Going to be All Right' and Robert Frost's 'The

Road Not Taken'. 'I had to send them', she said, and the interviewer asked her why:

Because they just fitted in, with what she was doing, and it was something I wanted to do 28 years ago. Oh and this one:

I have always known
That at last I would
Take this road, but yesterday
I did not know that it would be today.

It is a poem by Ariwara no Narihira, a 9th century Japanese courtier, translated into English, which was also given to the young children at the Primary School, across the generations. The boy called BG said of it at interview:

Well at first, when it first came into my head, I thought maybe the person, the person always knew that they'd like die and pass away and yesterday the person who died did not know...

Floella said of the lines: 'Sometimes I act like that, but then I never knew what happened tomorrow.' INTERVIEWER: 'So you could see a bit of yourself? What's that like?' 'I get surprised or I just become happy, like at least someone knows, like, the feeling I have, too.' Floella concluded of the children's group: 'I liked the way we sometimes communicate together. Like sometimes, like with erm BG, erm we always had fights together and I started to become friends with him after the reading group.... Because we started communicating with each other.'

Conclusion: What the Shared Reading groups offer is a special kind of emotionally contemplative time-out related to Ralph's third state. It creates a healthy environment not least because it also allows - within its safety, informality and good fellowship - material that is painful and risky and in need of expression.

So What? Cumulative Implications of Sections 2, 3 and 4

Section 5 is the culmination of the previous sections: hence the need to take stock here.

What we have seen is what Donald (Mental Health Group) described at interview as 'a different way of thinking' in Shared Reading, when otherwise he had 'got so used to everyday stuff'. He said this in the context of watching himself try out the word 'bitterness' in relation to a situation created by the

text and then go on to say 'sadness' instead. 'I was listening to what I was saying'

This more literary way of thinking is not always recognised in the world as thought. But the changes in vocabulary and syntax described in section 2 and the forms of mental mobility analysed in sections 3 and 4 show just how subtle and how deep it can be. As thinking, it comes after the initial sense of feeling which, described in section 1, indicates the area in which thought must further operate through the uses of a probing language.

That the initial triggering feeling contains thought and allows for further explorations through 'a different way of thinking' is vital to the right ordering of mental health, in the broadest sense of that term. Failure to be able to translate one's emotional experience into thoughts, says the psychoanalyst W.R.Bion, is as disastrous mentally as the 'failure to eat, drink or breathe properly' physically: it is 'a disaster in the development of the personality'.¹¹ That change of level from feeling to the extrication of the thoughts within feeling, without becoming cold, is vital to change itself.





5. The experience of change

Concurrent with the commencement of this South London project, and in line with its multi-methodological procedure, CRILS carried out in Liverpool a series of fMRI brain-imaging experiments¹² in which 24 individual participants were asked to read in the scanner 16 four-line texts, half of them adapted from poems, half being more prosaic paraphrases and acting as controls, with participants invited to detect that difference: across both types, half the specimens developed linearly in terms of expected meaning, but half consisted of a fourth line - what was called the 'a-ha' moment of shift and surprise, negative or positive - that gave rise to an overall meaning that could not have been anticipated and thus involved reappraisal. It was found that with both poetic and control a-has there was increased activity in the inferior temporal gyrus (clinching single updated meaning across multiples) and the hippocampus (consolidating new meaning). But with the poetic a-has the left caudate nucleus was also activated involved: the left caudate nucleus recognizes prediction errors (at top, dorsal) and creates a sense of reward (at tail, ventral). The conclusions offered as hypotheses for further research were:

- A willingness and ability to update expectancies/ thoughts/beliefs on the basis of new evidence is related to a greater awareness of what is poetic and what is not poetic.
- In many if not all clinical disorders, rigid beliefs fail to be updated, even when contradictory evidence is presented. It would help individuals suffering in that way if they were enabled to have excited 'a-ha!' moments more often, especially since the activated area (left caudate) that provided a sense of reward in the very process of activation is known to be particularly under-utilized in those suffering from depression.
- The sustained experience of reading poetry – and literature with poetic effects – might be expected to challenge rigid expectancies and fixed thoughts and to increase mental flexibility through the process of the reappraisal of meaning and the acceptance of fresh meanings, a process that was experienced as intrinsically rewarding.

The contribution of this research to the Theory of Change was examined in relation to the practical

activity of Shared Reading at four different though interconnected and sometimes overlapping levels.

Level 1: Surprised by reading literature

Of those who described themselves as literate but non-readers of literature, over 80% expressed the thought most powerfully summarized by Sarah from the Addiction Group in what is also the epigraph to this report: 'I'm not really a book person. I'm the person who'd probably go to the end or just get distracted or give up, or it's boring, you know, I don't take the time to sort of get involved. But now I think: really is this what books can do?! I go into it. It is really bringing me alive. It's making me awaken, if you know, not just stuck in an easy world.'

The change involved in 'getting into' a work of literature is not initially or necessarily articulate: as Sarah describes the visceral feel, 'Sometimes my mind's so blank actually, when we first read the poem my mind's really blank and I go 'Uh?' and then she reads it again and breaks it down and then someone else puts something in and you think "Oh yeah..."'

Others, particularly in the addiction or psychosis groups, who had been serious readers spoke of the loss they had felt in not being able to read, when in the midst of their difficulties, as a result of impaired concentration and depression. 'I stopped reading for a long time, which I had loved, and I couldn't understand why. I stopped reading and lots of things, everything that would have brought the best out in me' (Peter, Addiction Group). 'When I got ill in 2003-4 I stopped reading for a few years. You lose the ability to use your imagination in that way. I was thinking about things that weren't helping me and I was lost in my thoughts. I lost touch with a lot of things that keep people healthy and on the right track' (Mark, Mental Health Group). The return to reading was part of the sense of recovery, including the recovery within reading of more innocent or joyous experiences that seemed to have been irrevocably lost after trauma or breakdown. Group members might do no more initially than just point by finger to a key line, such as in George Herbert's 'The Flower' where 'after so many deaths': 'I once more smell the dew and rain'.

Mark from the Mental Health Group concludes on the use and usefulness of reading: 'You use the story as a springboard for you to open up, sometimes.' BG, a primary school pupil, said of the reading of poems: 'Because it's really confusing that you don't know what to think, you don't know exactly what they are

talking about, it kind of gets up in your brain and makes you think, like, could it be this, could it be that? And you start having a lot of thoughts.’

Level 2: Specific changes seen and felt in the act of reading

The instances of deep reading, recorded on video, are manifold, individual and specific, as is the nature of literary experience. Many of the linguistic traits indicative of processes of change or sudden breakthroughs which were discussed above in section 2 are picked up again in the analysis that follows as a final contribution to ‘how’ Shared Reading works.

Here are four brief examples of powerful change in what was being read and in the persons responding to it – they are examples of reading at its deepest and most subtle:

- Participant Cristo in the Mental Health Group, which offers supportive housing for those with enduring mental health problems including psychosis, said of a crucial moment in the novella *Snow Goose* by Peter Gallico, which was read over several weeks: ‘The kaleidoscope changes, something new, something fresh, something happy!’

The noticing of changes, even before knowing quite what to make of them, is one of the project worker’s main aims for the reading group.

- Jim from the same group was suddenly animated by the climactic moment in *Snow Goose* when the young woman recognizes in the flying bird the soul of the ageing and disabled artist whom she had grown to admire and love - as though, now dead, he was taking a last farewell from the sky above her. Jim said in relation to the bird the girl Fritha was ‘lifted by her emotion for it’.

This is the movement through ‘getting in’ and ‘staying in’ that in the Theory of Change is called ‘breaking through’ to the sudden felt discovery of meaning. The imagination of it offers a lift in spirits, a change in mental dimension, accompanied by an effect on the vocabulary of the participant.

- Jack (Library Group) is reading Katherine Mansfield’s short story ‘The Doll’s House’. It is about the children of the poorest, most ostracized family in the neighbourhood being asked in, on the sly, by Kezia, the one kind daughter of the snootiest family, to see their wonderful little toy home. In the doll’s house dining room, in the middle of the table, there

is a perfect little amber light in a white globe, a little detail which seems to Kezia more real, more to do with home, than anything else, though she never says so. At the end the poor children are ordered away by the adults but one of them, Lil, unwittingly sharing Kezia’s secret love, is left still like this at the tale’s finale: ‘she smiled her rare smile. “I seen the little lamp,” she said, softly.’ In the session Jack, himself an immigrant, refuses to be drawn into what another group-member interrupts to say jokingly: ‘I seen the light!’; instead he stays with the text, saying:

I think it’s more like being invited in, someone taking the time to invite them in [putting his hand to chest], something that you couldn’t actually explain, beside the experience they had, but someone actually identifying with them or almost accepting them, because all through they’re picked on and all that stuff, but the idea that for once, do you understand me? That’s when you saw the rare smile – something glowing within her.

That glow is of course the equivalent of the lamp at the heart of the little house, and itself a product of John’s imaginative sympathy. It is these ‘for once’ moments, whatever follows them, that constitute a breakthrough by virtue of their singularity as against repeated norms.

- Breakthrough involves, even from relatively unpractised readers, a literary form of reading that works within the words, their implicit symbols, and their resonances beyond the given level of mere description. For a final example:

In an Addiction Group session, participants read a short story ‘The Thief’ by Ruskin Bond, the tale of a young thief rescued by a slightly older man and given work by him, until within weeks the boy is tempted to steal again, taking money from under the very pillow of his sleeping benefactor: ‘My hand took an identity of its own and slid round the mattress.’ ‘That’s it!’ says Petra, ‘It’s not him. The hand is there, the feelings are not attached.’ But the text goes on ‘My free hand was resting on the bed and his hair touched my fingers, I was frightened’ and Ralph says: ‘It’s not really me stealing. But the other hand is me, and I didn’t want to feel that bit, because that bit might join to this bit...’ It is a subtle image for ‘on the one hand, on the other’.

The group then asks why the boy is falling back into his old habits. Keith says, ‘It might be easier to stay in the trap he is in than escape.’ Petra says, ‘He’s scared’ to which the project worker responds, ‘Of what’ and Petra replies, ‘Of change, of being softer, of losing it.’ Ralph concludes, ‘He has had say 15 years in being in that lifestyle, and two weeks of this new experience, it’s a bit shocking, a bit surprising that he could actually achieve other things.’

This group, suffering from addiction and knowing the dangers of recidivism, is here carrying out psychology in action, modeling through their collaborative thinking the complicated relation of fear, self-division, surprise, shock, reappraisal, and the difficulties of change.

Conclusion: As one library participant put it, the effect at its most powerful is akin to ‘I never quite knew I thought or felt that’ or ‘I never knew I could admit that thought or use that feeling’: ‘one thing you have given me is a voice’.

Why does this help? Because of the cathartic value of expression; because of the damage to mental health of being unable to think thoughts lodged deep in one’s experience, or unable to consider new thoughts and perspectives; because of the benefit to mental health in being freed from imprisoning routines of mind; because of the value in ceasing to be passive but able actively to use one’s experience in relation to human experience itself. Shared Reading involves the active performance of literature: as the live engagement of the thinking and feeling that is found within literature as a model of life, it is wellbeing in action.

Level 3: Changing the group-atmosphere inside the room

The reading group is not a static entity, with equal time offered to each member in set circulation. Don (Addiction Group) said he was grateful, for example, for the help he had received at Alcoholics Anonymous but in his experience ‘AA is not a two-way communication about sharing: you listen to someone tell their story, and then you get up and tell yours.’ In contrast, at moments in Shared Reading, as in the example above concerning ‘The Thief’, the group can operate as a collective mind, with thoughts being passed on and modified between its contributors in a kind of verbal relay.

‘I do feel that connection,’ says Sarah from the Addiction Group, ‘We are kind of all working it out together. And it goes round.’

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“

I was exploring them (these thoughts) then when I was speaking, speaking as my thoughts were forming in my mind... it was a combination of my pre-conceived thoughts and also taking cues and prompts from A and from F.”

Mark from the Mental Health Group describes the collaborative experience as like being in a melting pot: ‘I was exploring them (these thoughts) then when I was speaking, speaking as my thoughts were forming in my mind, I wasn’t... it was a combination of my pre-conceived thoughts and also taking cues and prompts from A (the Mental Health Group care worker) and from F (The Reader project worker) and they were prompting me with words and their own opinion and I was kind of putting that into the pot and having, sharing that moment with them and exploring what they were saying while I was speaking.’

On other occasions, the effect may be temporarily more of a dynamic 1:1 relation between text and reader: the project worker taking the lead in modelling what intense reading might look like; an individual group-member suddenly getting excitedly closer to the core of the poem or short story and insisting on the reality of that world within, or even against, the world of the group itself.

An example of the latter is Jane from the Library community group responding to the story ‘Bibi Haldar’ by Jhumpa Lahiri which was read over two sessions. Where most group members responded initially at the level of plot, inquisitive as to who had made the protagonist pregnant, Jane concentrated instead on the girl in herself, though Jane was not a group-member temperamentally used to assertive or corrective intervention. She did it on behalf of the character – in formulations such as ‘I’m just wondering...’ - especially as a result of the thinking that went on for her between the first and second sessions on the story and which made for a more considered change:

‘I, I, I, went away and I thought about this – I think that the people she’s living with are holding her back in a lot, a lot, of ways.... They don’t really bother about her.’

That sudden authority, especially from participants who are not customarily vocal but are moved to speak out, has a significant effect on the atmosphere of the session. As Peter from the Addiction Group put it at interview:

The literature has contacted you and you want to contact it and give it out.

This is active two-way reading, based on both gratitude and obligation towards what is experienced

not merely as fiction but as representative of the real - and often the neglected real. As Peter claimed, you become as reader ‘an agent of something’. It is more than a matter of personal identification and confession, as Sarah from the Addiction Group also indicated at interview, given the opportunity to reflect on the process and on herself:

It makes me think more. It actually makes me think deeper. This is when it all comes out. You can see it more now. I can go into this and bring it out, bring it alive.

‘You can be looking at something,’ Keith says, ‘and nothing comes back.’ But the process is really working when something does come back. This sense of reciprocity – back-and-fro, going in and bringing out, out of the text but also out of its reader – enables participants to do what they might not be able to do on their own without the emotional and imaginative stimulus of literary triggers or mirrors.

These individual instances can themselves become breakthroughs that change the feeling in the room and enable the group to reconvene itself at a more serious level of involvement. It is notable that so far from resenting those individual leads, which can come from anyone in the group and not just the group-leader, the other group members tend to respect the moment when a text suddenly comes alive within a particular participant who becomes its temporary spokesperson. In another session of the Addiction Group the participants discuss the opening lines of a Christina Rossetti poem:

We lack, yet cannot fix upon the lack:
Not this, nor that; yet somewhat, certainly.

Ralph comments: ‘So we don’t know exactly what it is but we know we’re definitely missing something’ to which the group leader responds, ‘Yes, that “certainly” is almost worse isn’t it?’ Then Ralph again:

Yeah. There’s a space there and it’s got a shape on it but you can’t quite... focus on the shape to see what piece to put in it.

The accompanying movements of his hands are extremely complex (circling, feeling out) as he tries to get hold of the situation by any means or any sense available. He is thinking with his hands, even as he also talks. What is being done by the hands is a version in one language of what in another language

is being attempted by syntax. The space with a shape in it is the best definition of a Shared Reading group struggling for meaning, beyond the easy norms of common social communication. It is a shape that dynamically keeps altering during the course of a session.

Mark’s Conclusion

Mark from the group of people suffering from psychosis commented at interview on how this sort of community offers an alternative to social isolation by enabling more of the private and personal to enter into a safe and humane social setting:

It’s important for us to allow each other to express ourselves and I’m grateful for the opportunity to be able to speak, grateful for people allowing me the space to do that, and we’ll do that for each other.

Many group members commented on the value of also seeing through interaction with others alternative views or alternative outcomes. At interview Ralph quotes from a poem in the session ‘comfort each other’s fear’: ‘That’s like group sessions really. You can learn from me... yeah, yeah, individuals become a group and their experiences become the sky, where you learn there’s very different experiences and very similar experiences but you have a sort of common issue there throughout the experiences and through, er, through talking about them and expressing yourself about them, you, you, you get a bit more stronger...’ There is still struggle registered in the speech.

But this is the good of creating more connected communities in which working together in serious human matters is a bond.

Conclusion: As Ralph’s words indicate, Shared Reading creates an emotionally-bonded working community in which the conventional social divide between public and private experience is overcome, creating a small version of a better human world.

Physiological Measures and the Group

Further research into the group collaboration will involve thinking in terms of an orchestra in which the project worker acted as conductor: it is not clear whether the greatest achievement in the development of a group would be a greater coherence and harmony in seeing and making meaning, or an increased confidence in individual differentiation, or what might be the appropriate movement

between the two possibilities. But the recording of synchronization/variation of heart-beats, for example - particularly valuable at key emotional places in the text - is one more physiological method we propose to trial in forthcoming projects as a result of the findings in the present one.¹⁴

What has provoked an increased recognition of the need for physiological measures is the sight of the physical effects on individuals within the reading group as recorded on video. Viewers can actually see what otherwise might be considered an immaterial act: a person thinking. This is particularly evident in a process where the reading is aloud and embodied, taking feeling to a physical level. Jack from the Library Group read aloud one of the so-called 'terrible sonnets' of Gerard Manley Hopkins

No worst, there is none. Pitched past pitch of
grief,
More pangs will, schooled at forepangs,
wilder wring.
Comforter, where, where is your comforting?
Mary, mother of us, where is your relief?
My cries heave, herds-long; huddle in a main,
a chief
Woe, wórd-sorrow; on an áge-old anvil wince
and sing —
Then lull, then leave off. Fury had shrieked 'No
ling-
ering! Let me be fell: force I must be brief.'

In the session he said it felt almost like a woman giving birth. At interview, noting his own stress on the word 'heave', he said: 'I didn't realize I tried to use my physical... but I remember, it was like children trying to draw breath whilst crying'. This is related also to the group-members' own efforts at articulation at key moments. Watching himself responding to Shakespeare's line, 'With what I most enjoy contented least', by saying how in depression he himself had ceased reading and lost all the things like that which had made him happy, Peter commented:

I said: 'I'd forgotten what it was that made me feel - happy.' That was so difficult to say. I don't think I've ever said that. I never talk about happiness and contentment, I can't quantify it. I can't put it into words. You heard me, you heard me, I almost couldn't quite get it out, I had to say it. I had to say it. And that's what the group was doing. I had to say it, because [long pause] it was such a beautiful sharing experience...

This is that reappraisal mode when something that seemed beyond recovery is recovered: in this case the very word 'happy' renewed. For some participants such as Peter it was harder to speak of the good things than of the painful ones. 'I had to say it' is Peter's repeated emphasis. It is a contribution to a major research question which is on-going here and in future: what is it, in a setting that is experienced as free and voluntary, that nonetheless almost 'makes' a person speak?

Here is the beginning of an answer. Crucially in an Addiction Group session on the Robert Frost poem 'The Revelation', group-members discussed the tension between needing to be known and yet not wanting to be known. 'We make ourselves a place apart', writes Frost, 'Behind light words that tease and flout':

But oh the agitated heart
Till someone finds us really out.

In the discussion of these lines, the group is constantly and instinctively miming the creation of boundaries, each one at different times using hands to fend off the outside world, arms crossed, or employing half-open gestures of dismissive pretence, until Keith uses the word 'sharing'. It is, says Sarah, the non-word 'oh' (and here she clutches her heart) that is the real cry.

As another participant put it, 'The thought is in your mouth like a physical thing, almost literally hard to say.' The effect has to come out in the body, the voice, or the hands, the most extreme version of which was Carol's temporary exit from the room during the reading of Clare's 'I Am'. This is the extra force of what Keith referred to as the un-fakeable power of 'feeling' and how in this physical context it cannot be ignored.

Hence the research team's renewed sense of the need for the use of physiological measures. Any shift from an habitual default has implications in terms of changes in vocabulary, syntax and/or emphasis, tone and hesitation: these too are physically registered. Thus another pilot experiment was conducted:

- Donald is a reading group participant from the Mental Health Group for people with mental health needs, including psychosis. He has a certain style of thinking - a list of possible answers intelligently but slightly mechanically produced in linear monotone fashion. However there are

moments in the discussion of the text when he seems more thoughtful, slowly rhythmic in exploratory contemplation, and more attuned with the poem's own pace. The research team explored analysis methods that may be able to capture differences between these moments of change and realignment and Donald's more usual 'mode of speech/being'. We extracted a series of acoustic features from audio clips to see if these differences could be identified in vocal intonation and how it varies over time. Initial testing indicates that this may be a promising line of inquiry. Plans for future research include examining such features in relation to transcripts of uttered words, for example, using emerging sentiment analysis methods; in addition to gathering physiological measures (portable EEG; galvanic skin response, the registering of change in the electrical properties of skin; heart rate; temperature, pupil dilation, eye-tracking) either during discussions of the text or while the participant relives/watches a video of such discussions.

Level 4: Longitudinal After-Effects

The crucial question is how far these emotional and psychological changes, registered at a physical level, do or do not feed into longer-term changes in habitual defaults and individual character. These were 24-week interventions but the intention is to try to remain in touch with some of the key individuals identified in this report in order to establish a further longitudinal record. Many of them remain in volatile or difficult situations. But this is not an atypical response:

[Shared Reading] has given me a very important anchor and positive point in an otherwise chaotic and distressing time, and gives me joy and stimulation that really helps my mood and well being.

Participants were very clear that something was going on within the informal and relatively unstructured reading process: Ralph called it 'therapy by stealth', Donald called it 'education' but 'without being taught', 'a late sort of learning curve'.

Preliminary evidence suggests that the Shared Reading of literature - and the stimulus it may offer to returning to reading on one's own - offers an alternative way of thinking more deeply and honestly about life, especially when it has been difficult to examine or follow it by other means. At the Mental Health Group Mark during the course of a session on Chekhov's short story 'The Bet' identifies his own project, in struggling amidst mental illness, with that

“
[Shared Reading] has given me a very important anchor and positive point in an otherwise chaotic and distressing time, and gives me joy and stimulation that really helps my mood and well being.”



W.B. Yeats, *The Lake Isle of Innisfree*

I will arise and go now, and go to Innisfree,
And a small cabin build there, of clay and wattles made;
Nine bean-rows will I have there, a hive for the honey-bee,
And live alone in the bee-loud glade.

And I shall have some peace there, for peace comes dropping slow,
Dropping from the veils of the morning to where the cricket sings;
There midnight's all a glimmer, and noon a purple glow,
And evening full of the linnet's wings.

I will arise and go now, for always night and day
I hear lake water lapping with low sounds by the shore;
While I stand on the roadway, or on the pavements grey,
I hear it in the deep heart's core.

Conclusion on qualitative analysis

Examples of the evidence on which these conclusions are based are given in brackets.

1. The Value of Felt Experience

This experience of Shared Reading can create a more personal world, with greater individual immersion and greater social bonding (pp.19-20 'Arthur's Story').

Attachment by feeling demands honesty of involvement (pp.9,13,19, 'Keith')

The feeling triggered by literary works gives readers access to emotion, to memory and to core self: this is highly useful in relation to mental health and wellbeing (e.g. p.24 'Heather's conclusion').

Literature and the Shared Reading of Literature create an emotional and contemplative place (p.40 'Ask Me') in which even painful feelings can be expressed and found to be of value.

2. The Value of the Specific and the Individual

Examples of deep creative reading carried out by participants who are often not experienced readers show intense cognitive and imaginative understanding: of significant detail and context (p.46 'Level 2: Act of Reading'), of challenging and anomalous experiences (p.46-7 'Level 2: Act of Reading'), of other minds (p.31 Keith on Sarah) and other possibilities (pp.33-4 'Imagination of better') - all lying outside present norms, conventional opinions, depressive defaults and/or imprisoning habits.

This included changed points of view (pp.31-3 'Mobility of Perspective'), freer patterns of thinking (pp.37-9 'Conclusion' & 'A Different Pattern'), and power of immersed attention (pp.20, 21-2 'Staying In'). Also see 5 below

3. Shared Reading as Giving a Voice and a Language

There is considerable evidence from linguistic analysis to show effects upon syntax and vocabulary in the course of group-members achieving a breakthrough into a sense of further meaningfulness or deeper reality (pp.25-7 'Linguistic Markers', 32-3 'Shifting Markers').

These changes are prompted by the power and range of the language within the literature, across the ages (e.g. pp.18-19, 21-2, 35,37 on Shakespeare, John Clare, Wordsworth)

Various forms of mental, emotional and imaginative mobility were manifest in the creative inarticulacy required of participants on the borderline between thought and language (pp.31-2 'Shifting Roles').

This struggle into articulation is the participants' own version of the artistic creativity that went into the writing of the poems and stories they enjoyed and were moved by (pp.33-4 Cynthia and Jud). The conscious increase in the participants' emotional intelligence achieved through a language expressive of deep responses may be crucial to the quality of life and mental health.

4. The Value of so-called Negative Experiences and apparent Inabilities

This includes the value of inarticulacy, or struggling into articulacy, to achieve something even more powerful than what is called 'confidence'. Those people who seem to have less (in terms of formal education, or ready-made reading experience, or happy confidence, or status) often give more in this context, in the challenge to confront human troubles as well as human joys (pp.29 Pamela, 31-2 Mark and Jud)

Some of the group-members living with dementia offered strong examples of the residual and fundamental human powers found also in other populations (e.g. pp.29 project-worker's note, 37-9 'A Different Pattern')

5. Awakening of Capabilities

Access to emotion, memory and core self (pp.22-4 Jack, Eleanor, Donald, Walter) and hence Recovery (see 6 below).

Emotional Intelligence (pp. 19 'mind in action', 42 Jane).

Mental mobility and capacity for reappraisal (pp.31-43, sections 3 and 4).

Emergent Thinking (pp.40 Arendt, 32 Mark 'lived it as I was saying it').

Patterns of thinking were developed that were not chained to immediate outcomes either in the text or in the persons reading it (p.37 'non-linear').

Imagination (Foreword p.9 Peter, pp.33-4 Imagination of Better').

Metacognition and self-reflection (p.35 Jud).

Powers of self-reflection were often revealed and enhanced by interview (pp.54 'metacognition' and also see 6 below).

6. Shared Reading as Therapeutic without being a programmed Therapy

Some participants explicitly cited the freedom and honesty of the experience in contrast with more formal therapies (pp.13, 19 Keith and Mike, 20-1 'Peter's Conclusion').

There is evidence of post-traumatic recovery of past, lost, denied or neglected experiences (see p. 39 three examples of trauma; pp.20-1 Peter on conventional meaning of recovery; pp.33-4, 37, 45, 46 Jud, Carmella, Herbert, Peter and SR meaning of recovery).

There is evidence of the imagining of future possibilities and alternatives, as a result of Shared Reading (pp.33-4 'The Imagination of Better').

Reading is an alternative way of carrying life forward (pp.51,54 Mark, Tobias Wolff p.33)

There is the value of interviews (e.g. pp.19-20 Arthur, 22 Arthur and Carol, 23 Donald, 49 Sarah and Mark, 54 Mark).

There is the value of the Group – social bonding (see 7 below).

7. The Value of the Group made Stronger by Literature

A closer community was created by the emotional and imaginative power of the literature when delivered by a skilled group-leader (pp.35 on sonnet 29, 38-9 on dementia).

Groups would at best share a collaborative mind or begin to coalesce around individual initiatives and breakthroughs, showing dynamic mobility amidst strong and respectful bonding (pp.47-9 'Changing the group atmosphere').

They gave confidence to their members (pp.27, 29 Sarah's improvement, 54 Peter and Jane).

They offered a place for shared emotional contemplation created through reading rather than conventional confession or testimony (pp.19 'Arthur's Story', 49 Sarah)

“

What Literature Can Do above all is (1) trigger access to felt experience at the human core and (2) offer a freer, deeper and more mobile way of thinking about it.”



Quantitative Research

To complement the qualitative data, a quantitative evaluation of the Shared Reading model (hereafter SR) on mental health and well-being was conducted through the use of questionnaires that were administered before and after the six-month SR intervention. Consistent with a tailored approach to take account of individual differences and group characteristics, different measures were administered to each participant group. These comprised various aspects of well-being (e.g., quality of life, social provisions) and mental health (e.g., mood, anxiety) and are detailed more fully in Appendix 2. This range of measures was selected to allow a preliminary exploration of mental health and well-being in the groups, with a view to highlighting potential avenues for future, more systematic research on a larger scale.

The exploratory nature of the study, the small sample sizes in each group, the absence of a control group of those who did not receive the SR intervention means that some of these results are presented descriptively rather than statistically and that all results should be interpreted with caution. However, some initial positive results were found (as indicated below), which will be important to explore more fully in subsequent work.

Group 1: Community Adults

Whilst there was no significant effect of the SR intervention on well-being, general health, life satisfaction or alexithymia (the ability to recognise and identify one's own emotions) for the Community Adults, two positive findings did emerge, suggesting some benefits of the SR intervention:

(Figure 1) There was a significant positive change in perceived social provisions (assessed using the Social Provisions Scale, SPS; Cutrona & Russell, 1987) reported by the Community Adults from pre-intervention (mean = 69.42, SD = 9.77) to post-intervention (mean = 74.15, SD = 9.79) [$t(12) = -2.41, p = .02$ (one-tailed)]. Looking at individual scores, this was driven by the pronounced improvements in social provisions reported by half of the participants (mean improvement = 9.67). The SPS assesses aspects such as guidance (advice or information), reliable alliance (the assurance of

other's that can be counted on in times of stress), reassurance of worth (in terms of one's own competence), attachment (emotional closeness), social integration (a sense of belonging within a social group), and opportunity for nurturance (chances to assist other people), all of which are heavily promoted within the SR intervention.

(Figure 2) There was a significant positive change in perceived quality of life (assessed using the WHOQOL-BREF; WHOQOL Group, 1998) following the intervention [$t(12) = -2.09, p = .03$ (one-tailed)]. Indeed, nine of the 14 (64.28%) Community Adults showed improvements in quality of life following the intervention. The WHOQOL-BREF assessed several aspects of quality of life (e.g., physical health, psychological health, social relationships, environment) and suggests that the benefits of the intervention might extend beyond those aspects specifically promoted by SR.

Group 2: Older Adults

Given the low response rate (<10) on many of the questionnaires for this group, data could not be analysed statistically. On the whole, the results were very mixed. Across all the measures used in this group, some individuals demonstrated improvements, others declines, and others still no change. The inclusion of individuals with dementia in an already small group may be a factor in this varied performance. A study that focused on the benefits of SR in dementia is reported elsewhere.¹⁵ This and the findings of the south London study suggest further focused work is needed with larger groups of participants in the older adult and dementia categories.

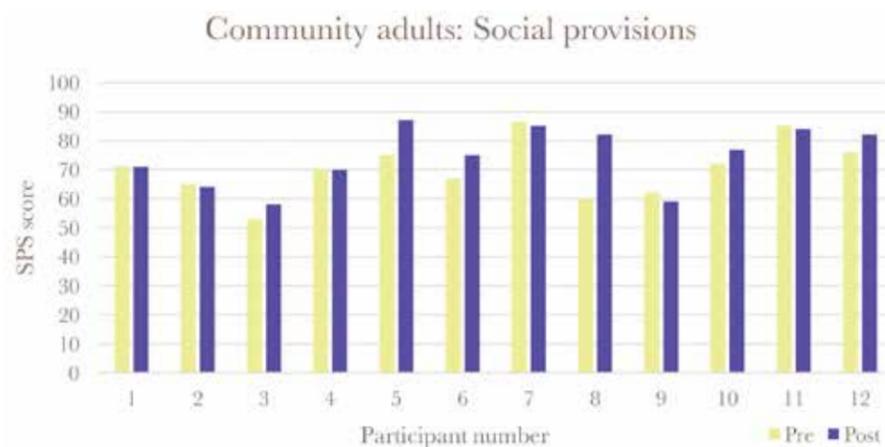


Figure 1 Pre and Post-SR intervention scores on the Social Provisions Scale (Cutrona & Russell, 1987) for each of the 12 participants in the Community Adults group

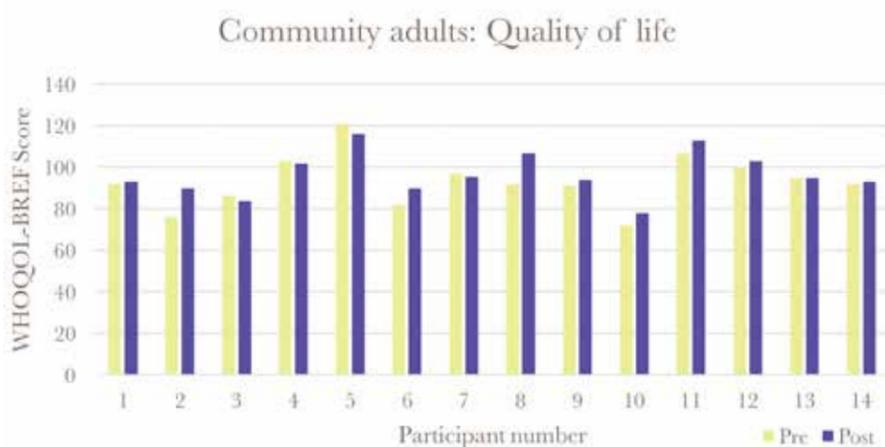


Figure 2 Pre and Post-SR intervention scores on the Quality of Life questionnaire (WHOQOL-BREF; WHOQOL Group, 1998) for each of the 14 participants in the Community Adults group



Group 3: Children.

The children responded very positively to the experience of shared reading, as detailed in Figure 3 below.

Despite no statistically significant effects of the SR intervention on emotional awareness or mood, there was a significant improvement in self-concept (assessed using the Piers-Harris Self Concept Scale, PHSCS; Piers & Harris, 2002) following the SR intervention in this sample of school children [$t(12)$

$= -2.26, p = .02$, one tailed]. Nine of the 13 children showed improvements in self-concept following the intervention. The PHSCS assesses several facets of self-concept (behavioural adjustment; intellectual and school status; physical appearance and attributes; freedom from anxiety; popularity; happiness and satisfaction). Eyeballing the data (see Figure 4, below) reveals that, for the group, the SR intervention appeared to have an effect across several subscales, but (most notably) popularity.

School children: About the sessions

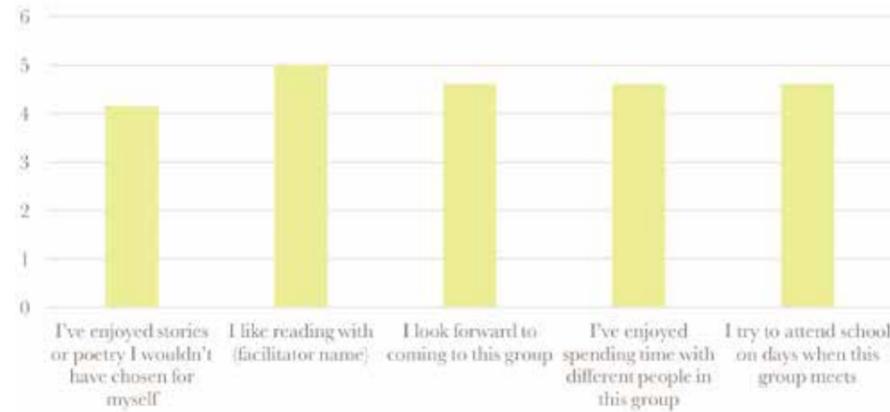


Figure 3
Children's post-intervention ratings of various aspects of the SR group

Self-concept

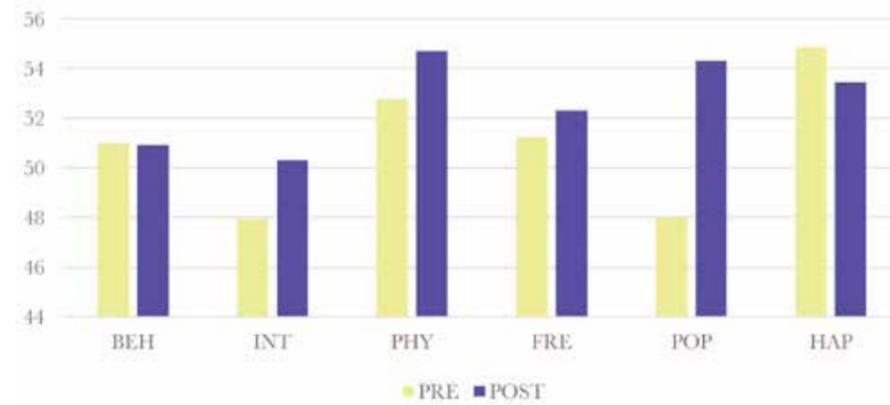


Figure 4
Pre and Post-SR intervention scores on the sub-scales of the self-concept questionnaire (PHSCS; Piers & Harris, 2002) for the group of Children [BEH = Behavioural Adjustment; INT = Intellectual and School Status; PHY = Physical Appearance and Attributes; FRE = Freedom from Anxiety; POP = Popularity; HAP = Happiness and Satisfaction].

Group 4: Mental Health

Only four adults were included within this group, and full data are only available on the well-being questionnaire (only two participants completed all of the measures provided). Whilst this meant that the data could not be analysed statistically, it was encouraging to note that all four adults with mental health issues reported increases in well-being (as assessed using the Warwick-Edinburgh Mental Wellbeing Scale, WEBWMS; Tennant et al., 2007) following the SR intervention (see Figure 5).

Mental health group: Well-being

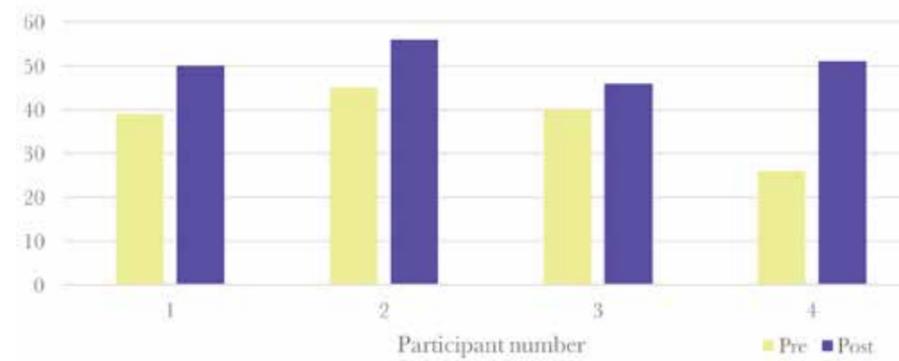


Figure 5
Pre and Post-SR intervention scores on the well-being questionnaire (WEBWMS; Tennant et al., 2007) for each of the 4 participants in the 'Mental Health' group

Group 5: Addiction

As for the adults with mental health issues, there was a very small sample (of six adults) in the Addiction group, and not all participants completed all questionnaires. However, a positive change was apparent with regard to positive and negative affect for 80% of the five adults who completed the Positive and Negative Affect Schedule (PANAS; Watson, Clark, & Tellegen, 1988) (see Figure 6a and 6b). Results on the other measures yielded mixed outcomes (with some adults showing positive effects, others showing negative effects and others not showing any changes; and this varied across measures).

Figure 6a and 6b:

Pre and Post-SR intervention scores on the positive (Figure 6a) and negative (Figure 6b) affect scale (PANAS; Watson, Clark, & Tellegen, 1988) for each of the 5 participants in the 'Addictions' group

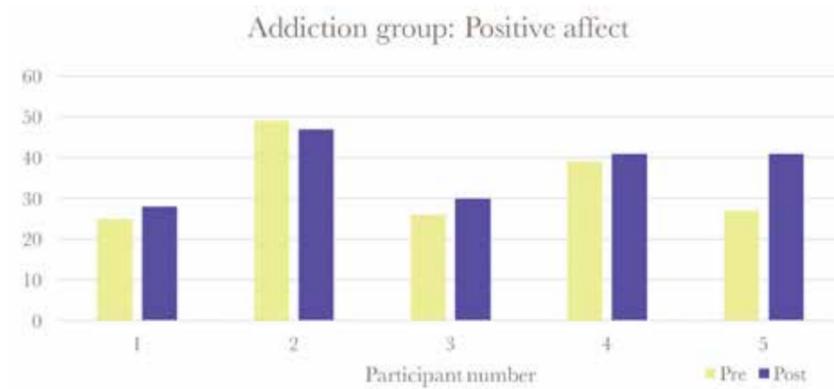


Figure 6a

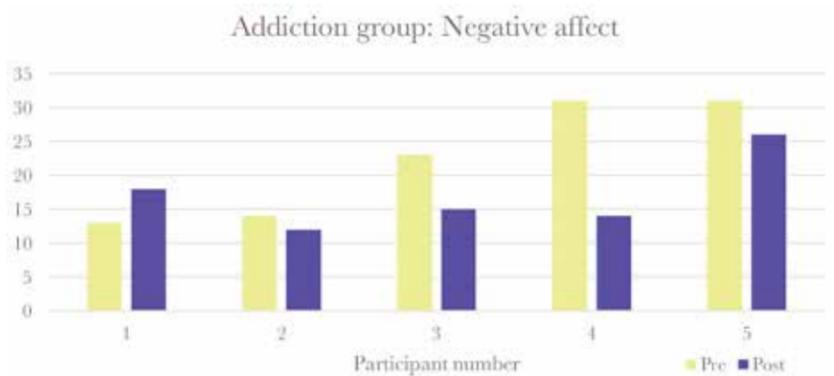


Figure 6b

Combining the adult datasets

In an attempt to address the difficulties associated with small sample sizes with a range of variables, and as an initial, tentative next step, data for the four adult groups were merged for the four measures that were completed by all four samples. Not all participants completed all measures and therefore the number of participants whose data were included in this analysis is indicated for each measure below. This revealed:

- Well-being (n = 28): No significant change in well-being scores from pre (mean = 49.70, SD = 9.07) to post (mean = 50.29, SD = 8.47) SR intervention: $t(27) = -.22, p = .83$.
- Social provisions (n = 31): A statistically significant effect of the SR intervention on social provisions from pre (mean = 72.69, SD = 12.73) to post (mean = 75.10, SD = 10.02) intervention: $t(30) = -1.97, p = .03$ (one-tailed).

• Life satisfaction (n = 24): The data were significantly skewed and we had to run a non-parametric test (which does not rely on assumptions that the data are normally distributed). This showed no significant effect of satisfaction with life from pre (mean = 21.29, SD = 7.63) to post (mean = 22.87, SD = 6.85) SR intervention: $Z = -1.36, p = .08$ (one-tailed).

• Quality of life (n = 29): A statistically significant effect of the SR intervention on quality of life from pre (mean = 94.09, SD = 14.55) to post (mean = 96.48, SD = 12.52) SR intervention: $t(29) = -1.8, p = .04$ (one-tailed).

Focusing on the two promising results (significant change for self-reports of social provisions and quality of life), the percentage of adults displaying improvements/declines/no changes over the study period is illustrated in Figures 7 and 8.

All adults: Social Provisions

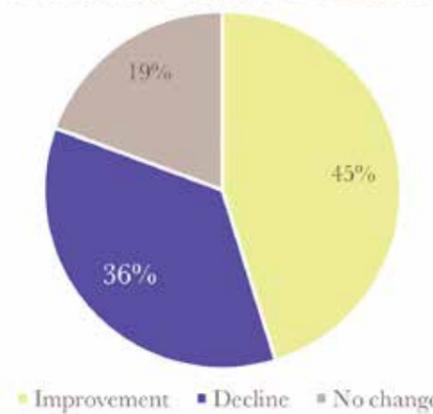


Figure 7

All adults: Quality of Life

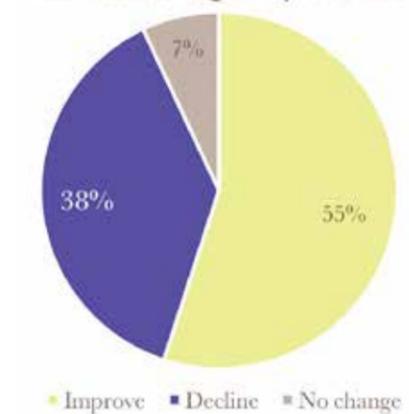


Figure 8

Conclusion on quantitative analysis

In relation to several variables, quantitative analysis showed either no measurable effect or an inconclusive outcome. The most notable changes were identified in the larger groups on a small number of the measures included, specifically positive changes over time in social provisions and quality of life in the Community Adult group (as also found when analysing these variables in relation to the combined sample of all adult groups as a whole) as well as self concept, particularly in relation to perceived popularity in the Children. Findings in relation to mental well-being and positive/negative affect were positive for the majority of those in the Mental Health and Addiction groups, respectively. However, positive changes, where they were identified, were not seen consistently across all members of a group (in around half of the Community Adult group and two thirds of the Children, for example), suggesting that there are many factors at play. Such mixed findings, both in terms of individuals within the populations of interest in this study and in relation to the measures selected (based on findings from previous studies of the SR intervention) should be understood in the context of small sample sizes and the complexity of engaging in real world research; it does not suggest that there is no benefit to be materialised in quantitative analysis of the approach. Certainly some of the initial results from the quantitative analysis are promising and suggest that there are some positive benefits of SR as an intervention.

At first glance, the richness of the qualitative data (obtained via the linguistic analysis and interview responses) stands in stark contrast to the apparent impoverishment of the quantitative data and it appears that there is very little link between the two approaches. The methods require different parameters (Burke Johnson & Onwuegbuzie, 2004) and these are not easily achieved in a community-based project with such a broad range of focus points. Despite the limitations of the group sizes and response numbers, along with the difficulties inherent in conducting community-based empirical research with vulnerable groups, there are some promising findings that suggest further, more focused studies would be beneficial. The findings of group change in the Social Provisions Scale, with its focus on aspects such as guidance (advice or information), reliable alliance (the assurance of others that can be

counted on in times of stress), reassurance of worth (in terms of one's own competence), attachment (emotional closeness), social integration (a sense of belonging within a social group), and opportunity for nurturance (chances to assist other people) link into some of the themes identified in the qualitative focus of this work: in particular the valuing of the (often vulnerably) personal within the supportive social group setting. Flowing from the qualitative work, greater focus on emotional awareness and investigation of autobiographical memory processes may also be warranted in far larger groups. There are certainly a number of promising areas for future research.

Overall, then, this was an exploratory study, to highlight potential variables of interest for future work both within the quantitative approach and in linking it to the qualitative approach. We recommend that subsequent research on this topic is undertaken that:

- (1) focuses on a narrower set of measures, selected through particular predictions and evidence from previous research, with far larger groups;
- (2) continues the mixed methods approach;
- (3) extends the evaluation of the intervention over a longer time frame to see whether positive results are maintained or improved in prolonged intervention (N.B. this is currently on-going in monitoring research groups that have continued after the end of the 24 week research period, led by a staff member in the host organisation who has been trained by TR; and in follow-up interviews of continuing participants);
- (4) uses a cross-over design to allow for comparison to a control group in terms of specific benefits.





Final Conclusions

What Shared Reading offers through the group, the trained group-leader and the literature:

- A form of unprogrammed therapeutic intervention, involving awakening and recovery of life
- A different kind of human thinking that gets away from passive norms
- A more personal relation to perceived reality that releases inner qualities
- A new model of community, working together in serious human areas

Quantitative and Qualitative

The Quantitative finding of some indicative improvement in Quality of Life across the various adult populations has potential relation to the finding in the Qualitative report of an increased capacity of participants in Shared Reading to think about life in a way that is itself lively in a profound sense – to do with emotional engagement and excitement of thought.

The Quantitative finding of indications of an increase in perceived Social Provision resonates powerfully with the Qualitative findings concerning the creation of small but strongly bonded communities in which the relation between private and public, and between safety of environment and risk of expression, is newly drawn.

In particular in relation to participants with severe mental health problems, there was an increase in Wellbeing, perhaps related to the group experience of collaboration and to the individual ability to use rather than just suffer from emotional experience.

There was some evidence of increased access to core or autobiographical Self – greater access to the self via the literature leading to greater access

of the self by participants, re-enforced through the interview process.

Future Implications for The Reader

The research here conducted fed into The Reader's development of a Theory of Change and also alerted The Reader to general issues of quality maintenance amongst its project workers, in terms of good practice.

As a result of this research project, The Reader has already adopted filming and analysis for staff training. On occasion and where appropriate, this could extend into the subsequent watching of a group-session by its own participants.

The reflective interviews have potential to further consolidate the process of embedded growth, and it may be worth considering how a version might be incorporated on occasions in the general practice of The Reader. Where appropriate and independent, such interviews offer a humane means for the in-depth gathering of data.

The awareness of what goes into quality delivery must be part of training and support for volunteers, especially the attention on high-quality literature, capable of triggering powerful emotion and cognitive responses.

In terms of longitudinal progress and national impact on mental health and wellbeing, much will depend upon the sustainability of the Shared Reading model and the ability of The Reader to recruit and train good-quality volunteers who will maintain their training and continue to deliver the full and challenging range of literature across the ages.

This involves appreciation of the complications of a franchise model. The Reader is currently working

with The International Centre for Social Franchising to develop a franchise model, and that work has been significantly influenced by the findings of this research programme.

This research also enabled The Reader to see the importance of improving its own impact measurements and it has recently secured £50,000 from Social Investment Business, through their Impact Readiness Fund, to upgrade its evaluation tools and systems over the coming financial year.

Future Longitudinal Research

Major issues here in looking for embedded change and longitudinal growth thus include investigations of:

(i) participant's own reading history alongside/ after Shared Reading; (ii) raised confidence; (iii) decrease in sense of social isolation; (iv) changed way of thinking of oneself and reality; (v) increase in emotional articulacy - with the research team currently working on an emotional lexicon to evaluate the development of a more nuanced and sophisticated vocabulary of feelings, including syntactical changes in the way of thinking; (vi) increased sense of worth, mastery/achievement, purpose and meaningfulness, in the practical enhancing of mental health and wellbeing.

Evidence (of which there are initial traces) would also include (vii) the continuance of groups after the end of the research period; (viii) participants going on to become volunteers with The Reader; (ix) reduction of NHS usage; (x) possible relation to employability. Again this is potentially quantifiable as well as qualitative.

Further Research

- Further experimentation through cross-over design or control group to test specific value of Shared Reading in relation to other interventions.
- Further large-scale research into particular communities, in particular people living with dementia, people living with psychosis, and people living with addiction.
- Development of Physiological Measures trialled in this project (pp.49-51).
- Further development of linguistic methods (pp.25-7) and development of an emotional lexicon.
- Analysis of the amount of time individual participants take up in their contributions over the period of the shared group, together with discourse analysis of the content (pp.27-9).
- Data collection of NHS Savings (p.55),



Appendices

Appendix 1

Published studies of the effects of Shared Reading (SR) in community settings (Hodge 2007; Billington and Sperlinger, 2011), and in health care and addiction facilitation centres (Robinson, 2008; Davis, 2009) have shown its value in relation to mental health issues. Specifically, research has shown that SR can alleviate symptoms in people suffering from depression (Billington et al, 2011; Dowrick et al, 2012) and dementia (Billington et al, 2013). Literary reading 1) addresses, through very specific felt instances, meaning-of-life issues or sense of lost purpose, without demanding directly confessional personal exposure to those matters which conventional forms of ‘talking cure’ require; 2) enables emotional articulacy and consciousness from a depth of reflective understanding triggered by the power of the literary text, without diagnostic stigma or prescribed stages in a step-by-step therapeutic agenda. (Longden et al, 2015). Benefits include: literature’s offering of a stimulus to mental agility and moral and emotional flexibility in a way which few activities (including other arts-related ones) demand with equivalent directness and immediacy (Billington, 2012); slowed deep thinking in intrinsic relation to personal emotion, where the text is not a two-dimensional manual but more like a voiced living presence (Billington et al, 2014); memory or recovery of lost aspects of being, where the reading matter helps bridge the gap between a current unwell self, and a past healthy self and enables integration of fragmented parts of the self into a functioning whole (Gray et al, 2016); the SR group setting, and the literature within it, offering a compassionate alternative (and partial antidote) to the experience of being judged, exposed, or disregarded within the world, and enabling the compression of lived experience in moments of sudden reflection and realisation (Longden et al, 2015). Related research in the field of reading and neuroscience has suggested that the inner neural processing of language when a mind reads a complex line of poetry has the potential to galvanise existing brain pathways and to influence emotion networks and memory function (Davis et al, 2008, 2012). These brain-imaging experiments have emphasised the shift in literary reading from left-hemisphere automaticity to right-hemisphere recognition and emotional involvement. Together with qualitative findings that reading ‘stimulates metacognition and high-level mentalisation in

relation to deepened and expanded emotional investment in human pursuits (created by the book)’ (Longden et al, 2015), a recent CRILS neurological study has suggested that it is possible some of the benefit associated with reading may come from ‘diverting individuals away from processing their struggles via ingrained and ineffective channels and towards more diverse, novel and effective reasoning options’ (O’Sullivan et al, 2015).

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Appendix 2

For the populations of Community Adults and Older Adults, the assessment booklet contained:

- Mental Well-Being: Warwick-Edinburgh Mental Wellbeing Scale (WEBMWS; Tennant et al., 2007)
- General Health: General-Health Questionnaire (GHQ-12; Goldberg & Williams, 1988)
- Quality of Life: World Health Organisation Quality of Life Scale (WHOQOL-BREF; WHOQOL Group Development, 1998); WHOQOL-OLD for older adults in the community (WHOQOL Group

Development, 1998)

- Life Satisfaction: Satisfaction with Life Scale (SWLS; Diener, Emmons, Larsen, & Griffin, 1985)
- Ability to recognize and identify one’s emotions: Bermond-Vorst Alexithymia Questionnaire (BVAQ; Vorst & Bermond, 2001)
- Social Provisions: The Social Provisions Scale (SPS; Cutrona & Russell, 1987).

For the participants in the Older Adults group who presented with dementia that was too severe for the above questionnaires to be completed (n=4, the Dementia Quality of Life Questionnaire (participant and carer versions; DemQOL; Banerjee, 2011) was completed.

For the Children, the assessment booklet contained:

- Self-Concept: Piers-Harris Self Concept Scale (PHSCS; Piers & Harris, 2002)
- Awareness of one’s emotions: Emotion Awareness Questionnaire (EAQ; Rieffe, Meerum Terwogt, Petrides, Cowan, Miers, & Tolland, 2007)
- Mood: Mood Questionnaire (MQ; Rieffe, Meerum Terwogt, & Bosch, 2002; 2004)
- Enjoyment of reading: Two sections of The Reader Organisation’s internal reading group evaluation form, for children (TRO, 2014).

For the populations of adults with mental health issues and adults with addiction problems, the assessment booklet contained:

- Mental Well-Being: Warwick-Edinburgh Mental Wellbeing Scale (WEBMWS; Tennant et al., 2007)
- Quality of Life: World Health Organisation Quality of Life Scale (WHOQOL-BREF; WHOQOL Group Development, 1998)
- Social Provisions: The Social Provisions Scale (SPS; Cutrona & Russell, 1984)
- Depression: Beck Depression Inventory (BDI; Beck, Steer & Brown, 1996)
- Anxiety: Spielberger State-Trait Anxiety Inventory (STAI; Spielberger, 1983)
- Affect: Positive and Negative Affect Schedule (PANAS; Watson, Clark, & Tellegen, 1988).

Footnotes

1. Cedric Lemogne, Pascale Piolino, Stephanie Friszer, Astrid Claret, Nathalie Girault, Roland Jouvent, Jean-Francois Allilaire, Philippe Fossati, Episodic autobiographical memory in depression: Specificity, auto-noetic consciousness, and self-perspective, *Consciousness and Cognition* 15 (2006) 258-268

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2. Raes, F., Williams, J.M.G., & Hermans, D. (2009). Reducing cognitive vulnerability to depression: A preliminary investigation of Memory Specificity Training (MEST) in inpatients with depressive symptomatology. *Journal of Behavior Therapy and Experimental Psychiatry*, 40, 24-38

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3. Initial feedback from two main attendees: Retired woman living with arthritis and chronic obstructive pulmonary disease, whose SWEMWBS score improved by 4 points (21:25) in the first 3 months of the group: 'I read a lot - but have not had a lot of interest since I have been ill - so I hoped this group would stimulate me [...] I heard about the group via my GP [...] I had been unable to concentrate on reading - but now find I am more interested in picking up a book [...] The sessions have meant I have motivated myself to go out.'

Retired woman whose SWEMWBS score also improved by 4 points in the first 3 months of the group: 'I read more slowly now and make sure that I have a think before moving on ... I think hearing other people's views about the readings is helping me think differently about things and I'm enjoying tackling stories or poems that seem hard at first go closely together.'

4. In illustration of the processes, see below sections 1 (on 'getting in' and 'staying in' through immersion in feelings); 2 (break-through markers); 3 and 4 (on moving out of forms of 'stuckness') and 5 (the overall experience of change at various levels).

5. See AHRC Cultural Value Project CRILS Report downloadable <https://www.liverpool.ac.uk/psychology-health-and-society/research/reading-literature-and-society/about/ahrc/> especially pp.42-9

6. R. Sherlock Campbell and James W. Pennebaker, 'The Secret Life of Pronouns: Flexibility in Writing Style and Physical Health', *Psychological Science* 2003 14: 60

7. See CRILS longer Cultural Value Report for AHRC (pp.19-21) <https://www.liverpool.ac.uk/psychology-health-and-society/research/reading-literature-and-society/about/ahrc/>

8. Linda A. Moore and Boyd Davis, 'Using Repetition Techniques to Help Elderly Communicators', *Geriatric Nursing* 2002, vol 23, 5, 262-6

9. Hannah Arendt, *The Life of the Mind* (Harcourt, 1978) vol 1 pp. 205, 208

10. See Douglas Oliver, *Poetry and Narrative in Performance* (Macmillan, 1989).

11. W.R.Bion, *Learning from Experience* (1962), p.84.

12. O'Sullivan, N., Davis, P., Billington, J., Gonzalez-Diaz, V., Corcoran, R. (2015) 'Shall I compare thee': The neural basis of literary awareness, and its benefits to cognition, *Cortex* 73 (2015) 144-57.

13. See David McNeill, *Hand and Mind* (University of Chicago Press, 1992) *Language and Gesture* (Cambridge University Press, 2000) on the body not merely reflecting thought but helping to create thought through its own separate but complementary language-system.

14. (http://www.thereader.org.uk/media/56538/a_literature_based_intervention_for_older_people_living_with_dementia.pdf).

Peter (Addiction Group) concludes:

“

It's real isn't it? It's real. That's me. You can't lie. Why would you go there and lie? It's just so... it's just so pure, there's something beautiful about that group, there's something quite pure going on there. We're being offered a golden afternoon of being ourselves, being allowed to be, be ourselves, aren't we.”

