# Katharine E. Low

The potential of radical kindness as a methodology in applied theatre in arts and health

This call for papers came at the start of the UK's COVID-19 first lockdown, when I was surrounded by acts of kindness and generosity, both at a distance and locally on my doorstep. These spontaneous acts of kindness have helped me see the radical potential that can be inherent within such acts. My moment of realisation occurred when a dear friend and neighbour began a 4-week long miscarriage. At the time, we had very little public understanding of the transmission of COVID-19, but I heard the fear in my friend's voice as she waited at the hospital, in a room by herself, her partner unable to join her, while her daughter cuddled up to my son on my sofa - two three-year-olds excited to be home from nursery. I heard how her fear shifted as she recounted to me the kindness of a nurse who had held her hand, reassuring her and comforting her while my friend underwent another invasive internal scan. The nurse did not need to do this and, as a medical professional, probably should not have been holding my friend's hand when COVID-19 infection control protocols were starting to be set up within hospitals. But that caring generosity, that seemingly small act of kindness created a pause, a temporary assuaging of pain in a very difficult personal moment. That small gesture of kindness during the COVID-19 pandemic can be viewed as a disobedient act; the nurse bent the rules. In that gesture of kindness, the inherent potential within that moment transformed how I thought about kindness and consequently on the way in which I practice. I have come to appreciate how much the idea of kindness has been devalued in applied arts and within the wider field of arts and health, and in terms of spaces for healthcare workers (c.f. as discussed by Magnet and colleagues (2014: 2-3)) and it is timely now to reconsider the potential of radical kindness within applied theatre practice, specifically in terms of arts and health. In this article, I take time to examine how a methodology of radical kindness is imbued within both the space and the practice, and the decision to notice, pay attention and to name these moments and actions is a deliberate one. Here, I am building on from the idea of apertures of possibility as an invitation to pause and consider the impact of these seemingly small moments (Low 2020).

This article outlines an ongoing collaborative partnership with Positively UK and a number of practitioner researchers and artists. I have worked with Positively UK since 2016, collaborating

on a series of theatre-based projects and events, where I, along with other colleagues, have developed and delivered theatre-making and creative writing workshops. Positively UK is a charity providing peer-led support, information, education and advocacy to anyone living with HIV in the UK and our partnership is leading the way in creating a culture of care around women living well with HIV.

I begin by naming all those who have been involved in participating, planning, delivery and supporting our collaborative practice which includes co-creating with over 70 women who access Positively UK; Silvia Petretti, Mel Rattue, Neo Moepi, Helen Rodgers, Sarah Fraser (staff team members at Positively UK); Dr Shema Tariq (UCL and lead researcher on the PRIME Study (Positive tRansltions through the Menopause); Matilda Mudyavanhu (independent dramatherapy practitioner and HIV Youth Consultant); Caroline Townsend and Lydia Cawson (Royal Central School of Speech and Drama (Central)); Stuart Cox and Idgie Beau at St Margaret's House (a charity supporting creativity and wellbeing in Bethnal Green). We have also worked with over 25 of students from Central who have either performed alongside or, with permission, on behalf of some of the women, or acted as co-facilitators. Naming all those involved is deliberate and acknowledging everybody's contributions not only recognises their radical kindness, but is in keeping with an ethos of radical kindness.

Our collaboration began as a series of theatre-making and creative writing workshops in 2016 which led to an event for International Women's Day, entitled Women Living with HIV: Our Care, Our Needs and ongoing workshops. In 2019 we facilitated workshops, co-hosted a conference for International Women's Day at Central in London, and ran a joint public workshop as part of the Being Human Festival, co-hosted by St Margaret's House, moving to delivering zoom workshops due to COVID-19 in Spring 2021. All of the work discussed in this article is the product of careful and joyful co-facilitation and co-creation. The article moves between "I" as I articulate the analysis and will use "our" to acknowledge the co-collaborative nature of the work on these projects. Thus, in this article, I consider how the applied theatre site is a place of exploration where radically kind spaces are held for the co-participants who choose to attend to discuss their own questions and needs. It is fundamentally different to the space they usually congregate together as a peer support network at Positively UK. As one of the women commented, "we see each other differently here," which is meaningful because it is the same physical space. The idea of kindness permeates the space and can be seen as a way in which to begin to resist and reshape power relations in our quotidian interactions (Magnet et al. 2014: 2). This article unpicks and considers these ideas against a backdrop of pedagogies of kindness and the opportunities that the space affords the women to have multiple ways of being – they are more than their HIV status or their roles as mothers (Low, Mudyavanhu & Tariq 2017). To begin, I contextualise our practice before considering kindness as a critical frame in pedagogy and applied theatre practice before discussing the impact of radical kindness within our practice.

# **Our Practice**

To date, our collaborative practice has resulted in the creation of artworks, creative outputs and open workshops which aim to improve the general publics' awareness around living well with HIV, thereby challenging, rather than reinforcing, existing stigma around HIV. We have shared

resources, knowledges and expertise in developing creative spaces in which current representations of what it means to live with HIV are problematised. Specifically, through our practice we ask what happens when the multiple everyday elements of a woman's lived experience is considered, not just to a general public, but within the workshop space itself. We are acutely conscious of the emotional and physical labour that falls on individuals living with HIV in advocating for their personal, emotional and health needs, and in terms of how encountering the general public's' perceptions can affect their wellbeing. Our partnership is robust in that we openly debate the ethics and approaches of our shared practice. The partnership is also based on ensuring avenues for growth for women living well with HIV to become leaders and advocates, and to gain experience in planning and delivering workshops and events, such as the joint workshop for St Margaret's House.

Our practice is based in materiality, touch, play, laughter and food. We work in a way which welcomes whoever and whatever is brought into the shared space. The workshops began following an approach by Shema who suggested that we collaborate together with Positively UK. In setting up our initial workshops, we held a series of conversations with Silvia and colleagues about the most useful, appropriate and sensitive means of working in partnership and in a manner open to whoever attends the workshop space. Matilda and I devised and planned a series of performance and creative writing workshops and we continue to work in this manner with other colleagues, developing closely planned sessions which are open enough to respond to what happens in the room, but also maintain a thread over separate multiple workshops with different attendees. Some participants will come to every workshop, others will drop in once or twice. The participants are women from different cultural backgrounds, usually aged between 25 to 60+, with older or younger women occasionally attending. Each workshop has a particular structure which allows for new insights and directions to be responded to, but also is a welcome space for new participants. Participants are invited to contribute and share only what they feel able and want to. The exercises are staggered in that people can choose to engage at less personal levels or can share key insights. Any workshop run in collaboration with Positively UK loosely follows the following setup: we gather from 5pm onwards, setting up the room by placing chairs to the side in small groups and transforming the room from 'meeting room' into a more informal space and lay out a meal that will be shared. The women begin to arrive from 5.30pm onwards and continue to do so over the following hour. Women are greeted individually; welcomed into the space if it is their first time, or if they are regular attendees, they also help newer women gain their bearings. People help themselves to food, make tea and settle in to catch-up. As facilitators we eat alongside attendees, welcome them and explain in an unhurried manner what the plans are for the evening.

Once people have eaten, leaving those who have arrived later time to eat comfortably and encouraging them to take part as they can, we begin gathering in the centre of the room with a series of welcoming, warm-up exercises, often based in movement and playful games, so that language barriers can be breached, and individuals are not placed into high focus. Where appropriate, I can translate into French and some of the women will translate into Swahili or Lingala if needed. We then focus on the main theme of the workshop, exploring the theme through different creative writing, movements or performative exercises, coming back to share in small groups, gradually leading to a short moment of performance, the presentation of an

artefact or sharing of a poem. We often have a space for discussion at this point and then move on to begin to close the workshop, ending on a playful thank you game and a common activity or singing a chosen song, more often than not, *We Are Family* which kept being requested. Throughout the workshop, participants will continue to arrive, or stop to grab some food. We always aim to end promptly at 8pm as some have long journeys ahead of them and the reimbursement of transport costs takes time. Some women linger on and help tidy up, but swiftly in a flurry of hugs and shouted joyful goodbyes, everyone leaves.

The impetus for our practice is in response to the ongoing and repeated stigmatisation of people living with HIV. Speaking in 2012, the former Executive Director of UNAIDS, Michel Sidibé, noted: "Whenever AIDS has won, stigma, shame, distrust, discrimination and apathy was on its side." This stigma and the societal shame placed upon a person living with HIV<sup>2</sup> is deeply limiting and reductive of that individual's whole being, leading to the perception of personhood governed solely by HIV status, othered within a single, stigmatising narrative of victimhood or of "suffering" (Kasadha 2018). However, a diagnosis of HIV has moved from a perceived imminent death sentence to being understood and experienced as a long-term chronic health condition by medical professionals, policy makers and most individuals who live well with HIV (Deeks et al. 2013). In this very definition, the reduction of the urgency and threat of HIV is striking. This shift is evidenced in the current U=U campaign (Undetectable = Untransmissible), where it states that if an individual's viral load is suppressed to a certain level, it is considered undetectable and therefore the risk of transmission of HIV is negligible.<sup>3</sup> While this medical evidence has been upheld by the WHO and is well advertised, it does not translate in an impactful way onto people living well with HIV's everyday experience (AVERT 2020). Fundamentally, we need other ways of conceptualising what health means, what health looks like, feels like and is experienced. Space is needed to appreciate, hear and contextualise the felt and multiple experiences of what it means to be a woman living with HIV, an acknowledgement of the impact of race, gender, the UK's Home Office's hostile environment policies, <sup>4</sup> education, sexuality, employability may have.

Because the visceral nature of health, the felt experience, is hard to translate into words<sup>5</sup> or medical reports, the women we work with often hold onto their lived experiences in their bodies. Women living with HIV, like many "vulnerable" participant groups, need a particular way of working in terms of performance-making in relation to questions of health, especially chronic and stigmatising health conditions like HIV. As one of the women in the 2016 project noted: "There are not many opportunities to work in a way which is not so cerebral. HIV is a visceral thing; it lodges in your body. We need to find forms to express this." What is needed is a medium through which to embody, consider and explore these lived experiences, to respond to questions that emerge or have not yet been encountered; for the unspoken to be heard. The performance and performance-making context is the medium that creates just such a space that can hold, respond and problematise the stigmatisation of these women's everyday lives, allowing them to widen the lens of both how they see themselves, as well as how they are often perceived in the wider world.<sup>6</sup>

I argue within our practice what was needed was an invitation to and space to perform, explore and play. The impact of making art in non-traditional venues means that space is taken up within which people can choose to engage with creative material and begin to explore different ways

of sharing particular stories or narratives (or not) - a space to choose to do so, and even not to do so. Theatre and art-making environments enable participants to take up the space to question and explore these ideas further. And it is here where an engagement with kindness literature helps to set out my consideration of radical, reciprocal kindness as a methodology in applied theatre practice.

### **Kindness as a Critical Frame**

Readings of kindness and care and how they operate as concepts in pedagogy and applied theatre are multiple. There are several approaches which are useful for my conceptualisation of radical kindness as a methodology in applied theatre. I draw on the work of Shoshana Magnet et al. (2014), Sue Clegg & Stephen Rowland (2010), and Sarah Burton (this issue) who consider the role of kindness in pedagogy and higher education, and Julie Brownlie and Simon Anderson (2017) who problematise kindness in sociology. Burton draws attention to the potential and the "allure of 'academic kindness'" (2021), noting while it is often undefined it has the potential to be both a tool of solidarity and domination. Here we can see how kindness can operate on a knife's edge - this approach can afford a space of growth or a space of oppression. Brownlie and Anderson (2017) speak of how for sociologists the concept "kindness lacks the heft of 'solidarity', 'justice' or 'community'". The word "heft" here is illuminating – it is precisely the perception of the idea of kindness, the relegation of the concept to an act of care, to the domestic sphere, "especially in a neoliberal context, a residual sense that being kind is a sign of weakness" (Brownlie and Anderson 2017: 1223) because these acts are perceived to carry little weight, or readily tangible impact. The suggestion that kindness is devalued disguises the subversive potential inherent in the act of kindness; an idea which is closely aligned with our theatre practice and especially in light of my theorisation of apertures of possibility (Low 2020). I use the term apertures of possibility to invite closer attention to the fleeting moments, often overlooked in our practice, arguing that a closer look offers greater insight into what is happening within the practice space. Indeed, we require, as Burton does, "[a] greater attentiveness to the relationships between kindness, care, and power - and a sharper delineation of what these concepts actually mean in practice - present opportunities for practical and conceptual cultural shifts in academia - to change the way we work and the way we engage with each other" (2021:33). This type of kind reciprocity, a radical kindness, is what informed the work with Positively UK and the practice that we co-created.

There is undoubtedly a practice of kindness – even a leitmotif of kindness within applied theatre practice; an impetus to work towards social good and to respond to a "critique of a society where the habit of caring for others is devalued" (Thompson, 2020:42) at the least in status or remuneration. However, within the field, the idea of a practice imbued with reciprocal kindness is a challenging one because practice that is kind can be seen to inherently establish a hierarchical split between the status of facilitator and those in "receipt" of the practice; that is to say, those who need or might be viewed as benefitting from the "kindness" inherent in the practice. As Brownlie and Anderson note: "The absence of kindness is also patterned. Some people have their needs recognised, while others do not, at least in some circumstances. As such, kindness can have an exclusionary quality; even in extending our notion of kindness of whom is "deserving" of "kin-ness," we are marking others as undeserving" or be "morally

problematic" (2017: 14). Similarly, Dani Snyder-Young (2013) problematises the concept of engaging with applied theatre practice based on "good intentions". The kindness impetus could be seen as feeding a neoliberal and meritocratic societal agenda where the applied theatre work is doing "societal good;" a form of libertarian paternalism. The action of libertarian paternalism is a "nudge," a concept developed by behavioural theorists, Richard Thaler and Cass Sunstein in their bestselling book, *Nudge* (2014), where they suggest that choice architecture undertaken by organisations, governments and public health bodies can use "nudges" to prompt people into making more desirable choices in terms of their health, living conditions, finances and so forth. As I have argued, it is problematic to view applied theatre as such because "such an approach falls into a neoliberal push to impose pre-determined outcomes on a particular group of participants" (Low 2020:14).

In her analysis of Clean Break, a British women-only theatre company focusing on women's experience of the criminal justice system, Sarah Bartley makes an argument for how applied theatre can both perform acts of care and, how as a field, "embody a care-full practice that unsettles traditional forms of value and responsibility" (2019:307). Bartley acknowledges how care and caring is "enmeshed" within all strata of applied practice, noting how applied theatre "can be conceptualised as a type of social reproduction and a labour of care", fulfilling a socially reproductive role in society that is not currently acknowledged by the state (2019: 308-9). However, as Lucy Perman, former AD of Clean Break notes, it is highly problematic to be defined by the duty of care, acknowledging the pitfalls in terms of becoming part of the system and the lack of equity in such a relationship (Perman interviewed by McAvinchey in 2018, in McAvinchey 2020: 137). While questions of care are present across most applied theatre practice, the linkage of care with the facilitator and the practice results in further complexities including ethical questions and an acknowledgement that in such settings there exists "the capacity for care to become oppressive and manipulative" (Stuart Fisher, 2020: 4). Clegg and Rowland usefully distinguish kindness from care in their discussion of kindness in higher education teaching by acknowledging the interrelation between kindness, care and respect, but suggest that they "have found it productive to think about kindness as a way of traversing public and private concerns" (2010: 721). In order to drill down what radical kindness as a value could mean for this practice it is thus beneficial to separate the idea of kindness away from "due care" or duty of care of professionals. Building on this, I argue that the idea of kindness is full of possibility in applied practice.

## So how might kindness work?

Clegg and Rowland consolidate some of the thinking around kindness within the neoliberal society in which we live and note how kindness as a value is often felt to be "out of place" or embarrassing in higher education (2010:721-22). I suggest that this form of embarrassment is similarly felt in applied theatre – particularly due to the pivotal concern that the practice may be patriarchal or colonial in its intentions, whether intentional or unintentional in a similar way to how the "hidden curriculum" operates within an educational setting. The difference with pedagogy and applied practice is that while a teacher has the mandate to teach and be "in charge" of students, the applied theatre practitioner and participant relationship, is, I argue, much more nuanced, requiring care-full negotiation of content, focus and direction with a

sharing of the responsibility for the co-creation of the work. What I believe occurs in this process is an acknowledgement of the potential role that kindness has to play.

Radical kindness appropriately troubles the notion of kindness. Re-examining our practice has led me to see how an intention, and thus a method of radical kindness, is embedded within all strata of the practice. Here my use of the term radical, builds on Baz Kershaw's use of his term radical performance which he sees as invoking a type of freedom which "is not just freedom from oppression, repression, exploitation – the resistant sense of the radical – but also freedom to reach beyond existing systems of formalised power" (1999:18, original emphases). Fundamentally, the "radical" is the aperture of possibility, the act of drawing attention to the small act of kindness and acknowledging the deep value and affect of that particular action (Low, 2020). For me this positionality is about moving away from an imperialist position of benevolent care, to one of holding an expansive viewpoint of individuals. It is also doing so fully aware of the "exclusionary" nature of kindness, in that there is a decision as to whom is deemed worthy of kindness (c.f. Brownlie and Anderson 2017: 14). Finally, the radical potential of small acts of kindness is a driver in our practice. Clegg and Rowland argue, "although kindness is a commonplace in pedagogical encounters, easily recognisable by its presence or absence, attending to it can be subversive of neo-liberal assumptions that place value on utility and cost above other human values" (2010: 720). It is the placing of attention, attending to the kindness, which is radical. This noticing of the reciprocal kindness is an aperture of possibility. Here, the potential or opportunity for subversion is keenly felt in our practice and a means of subverting the existing perceptions of what it means to live with HIV. The paying attention to the subtlety in the moment demonstrates that a methodology of radical kindness is not clear cut and evident; we need to consider how a space can be atmospherically responsive, full of invitation and an intent of openness; it is looking at small moments to consider what occurs in those moments. Considering our practice as a methodology of radical kindness is a reclaiming of the idea of kindness and care not as "un-heft-like," "feminine" qualities with overtones of patriarchal, matriarchal and colonial biases, but a deliberate look at the radical potential inherent in small acts of kindness. This radicality has four dimensions: firstly, it resists perceptions of a "vulnerable," stigmatised body; secondly, it upholds the potential that lies in a consideration of the quotidian and quiet advocacy; thirdly, it foregrounds the role of the facilitator in supporting the workshop and the care that takes place within those spaces; and, finally it is an observation of the potential outcomes which can emerge even when these may be subtle.

I now turn to discussing moments from our practice which illustrate what occurs within moments of radical kindness, and to outline the value of understanding a radically kind reciprocity as a methodology in applied theatre.

## A space of expansion

A walks into the space – always one of the first to arrive, she is often exceptionally early at any event or workshop. "No chance!" says A when you invite her to take part in a warm-up game, preferring to sit on the side, to eat and observe. "No chance!" says A when you offer to work with her or to bring together another group to work with her on one of the exercises. "No chance!" comments A from the side as you invite a new, shy participant to share their work back

to the rest of the group. **A** does not engage in any of the creative activities and frequently, and loudly, remarks on the work that others are doing, and sometimes directs small groups from the chair she is sitting in, from the side.

In order to understand the impact of what is happening in the workshop and performance spaces, the reader has to understand what the space may feel like in relation to the external sites the women engage with and the often stigmatising view of the "sick" body. While their health status is the means through which the women may enter this space, the radically kind space recognises that each woman from the moment she enters the room brings a complex and nuanced herstory which rightly demands space for a multifaceted conceptualisation. Part of my intention in working in this context with this group of women is to find a way of thinking about and making space for social justice where this group of women may be heard and taken seriously; for their views and spaces and desires, their everyday lived experience, to be acknowledged. Here, I am building on one of the tenets of kindness that Adam Phillips and Barbara Taylor described as "the ability to bear the vulnerability of others" (cited in Magnet et al. 2014:3) which Magnet and colleagues offer as an argument towards "a form of kindness in the classroom that can bear the vulnerability of others and that bothers to do the labour of being compassionate while not giving in to the forms of leniency make appraisal impossible." (2014:3). Magnet et al.'s conceptualisation of the potentials held in a teaching space that engages with kindness as a pedagogical strategy have been fundamental to my understanding of how this particular applied theatre space is a site of radical kindness where we co-facilitate and co-make; that is, it is a space that is able to "bear the vulnerabilities of others." Building on their arguments, the consideration of what is possible in a kind and open space - a shame-free space where participants are not directed at a particular outcome, but are rather invited to make connections and finding ways of "thinking with" a particular shared experience or event - is the critical underpinning of our practice.

Thinking back to the public creative workshop we co-facilitated in 2019, exploring ideas of what it means to be well and wondrous, the space was revolutionary in that no one's health identity was revealed. It was a space of equity where we all shared looking for different ways of understanding our own health and well-being and due to the collective nurturing space, we were able to consider what it meant to be wondrous. This was a moment of quiet advocacy. Reflecting on what can be viewed as kind spaces, I find that we tend to adopt "feminised" words to describe such inviting spaces, such as "gentle," "playful," "soft," "calm," "welcoming," or "collectively nurturing." Softness, kindness and warmth, although gentle in sound, are almost offered as a critique or a weakness of a practice, an "out of place" value as Clegg and Rowland point out, drawing on Mary Douglas' theorisation of "matter out of place" (2010:722). There is something radical about being in a space that is soft and kind, warm and welcoming where we do not necessary talk about sex, HIV, or health; a space to be seen as yourself, and whatever you wish to share on the day.

Thus, the workshop becomes a space to pause, to share food, to laugh, to play; to do with what they wish. This taking up of space is the overall intention of the practice. And, while it is radical to have a space just to pause, with no expectation of any outcome, it is even more radical for individuals to experience this, especially women who are not ordinarily offered any space. An

example of this is A, who comes for the food, the transport expenses, companionship and to watch what other people are doing. A takes up a lot of space, is sometimes disruptive and interferes, but she is not challenged on this. Rather, **A** is held with kindness by everyone. Her needs, her vulnerability are recognised and rather than challenging her, we hold her with kindness, working around her outbursts to encourage others, acknowledging A's right and her need to be in this space, ensuring that she has food and space to comment. This is what a radically kind applied theatre space can offer – a space of expansion where this act of kindness holds and supports and begins to resist a labelling or a reductive perception of a vulnerable, often stigmatised woman. In our holding of **A**, the radical potential of a small act of kindness is evident: we are saying that she is enough for the space - we can hold her. Her being, her prickliness and disruptive presence is both acknowledged, held and invitations to join at whatever level she wishes to do so are offered and never retracted. I now turn to how small acts of kindness illuminate the potential within a consideration of the quotidian.

## The potential of the quotidian

It is 2021; at the request of Positively UK, we are running hour-long creative workshops for the women's group, via the impersonal boxes of Zoom. As facilitators, we are trying to maintain the flexible and responsive style of facilitation that we would offer in the physical space and ensure that women have a space to speak and to be creative in a new medium, bearing in mind the technical difficulties and access to appropriate equipment and data. Joyfully, the welcoming and greeting of individuals remains, with each new arrival being greeted in turn by everyone else in the space. We take up time and space to greet and welcome each other and at the end to say goodbye fully. We are playing an object hunt game, whereby individuals are given a description and are invited to find an object that matches that description. One of the descriptions is "something that reminds you of Positively UK" and **Z** comes back with a letter. "Do you remember this Kat?" asks **Z**. "It is the letter you asked us to write to ourselves in 2016, saying what we were proud of ourselves for. I read it most days." Later in the exercise, in response to the description "something that evokes a memory," Z points to her background picture, a young gorgeous woman. "This is my daughter, she is a model." To which **D**, a former model herself, responds "your daughter is beautiful, you must be so proud of her. My daughter was a model too."

Two things have happened in this moment. We have had insight into **Z**''s everyday life, both in terms of her pride and delight in her daughter but also the pleasure she has taken in being part of the workshops, and secondly, through **D**'s intervention, an act of kindness and a moment of intimacy; in that short exercise we have heard numerous stories; the women have been more than their HIV status to each other. The exercise offers space for a moment of kind reciprocity, an act of radical kindness.

HIV activism in public is often spectacularly performative and "in yer face." It is beautiful and loud and demands attention and while this is vital, it may not be the form of activism and advocacy that some people are able to commit to, or wish to engage with. Our applied theatre space addresses an existing gap in how both society and government policy is failing to see and view these women. Focusing on the everyday, the applied theatre space makes legible the domestic, the ordinary — an act which is radical as it allows space which validates their

experiences. What this work does is create a space in which other narratives of living with HIV can be heard, with a particular focus on the everyday because it is in the everyday that most of the experiences encounter micro-aggressions and oppression occur. Our practice offers a different type of aesthetic and political response, a performance that is gentle and slow and just as important. The focus on the everyday is crucial because the quotidian, the mundanity of everyday life acts as a counterpoint to the single narrative of a woman living with HIV. Specifically, with this practice it is about seeing beyond the women's health status, seeing the person and their intersectionality, recognising what Emmanuel Levinas describes as alterity, acknowledging the radical difference of the other, seeing the other and recognising that the other cannot be an object of knowledge (2006). Critically, the ethos of our practice is radical because there is no agenda within the space, and thus the reductive potential of being labelled by a health condition which opens up entry into the creative space is immediately transformed into an expansive potential. The space belongs to these women and it is theirs to do with as they please.

The regenerative action of making with the body - of showing how the supposedly "sick" or unhealthy body is capable of extraordinary, powerful poetry, physical performance, becomes profoundly significant. There is radical action in the act of showing how that body, which has been dismissed as contaminated and contaminating, has an extraordinary capacity for creativity, communication and beauty. The action of making is a recognition of the multiplicities inherent in any one's body, but especially those bodies which have been classified as "other," and therefore dismissed. The opportunity for performance-making and exploration leads to a regenerative action in which new knowledges are located and recorded. This kind of work is a means of rejecting and moving beyond stigma, creating spaces of radical kindness through which the women can focus on the journey they wish to and share what they believe is important to share - to come together and perform their whole selves. This quiet, powerful advocacy is both felt and received both in the workshops space and in public arenas. Yet getting to this requires a consideration of the role of the facilitator.

### **Facilitation**

It is January 2019, we are starting the year by looking forward, acknowledging that the festive season may not always be as celebratory or joyful for the participants as the advertisements suggest. It is the first workshop and gathering of the Women's Group for 2019. We are planting hyacinth bulbs. I've set up the room with flowers in vases, candles and gentle lighting, music playing and scented hand soap and hand cream by the sink - no fluorescents or industrial soap this evening. There is a mound of compost on the table, with the bulbs and jars and ribbons arranged alongside. After we have eaten, we begin to talk about the future and gradually we write poems and dreams for ourselves before choosing aspects we want to keep - to feed our bulb, planting those dreams alongside the bulbs in the compost. For one woman, **B**, it is her first workshop, the first time she had engaged with any of the outreach services at Positively UK. Her diagnosis was only three weeks old and she was clearly nervous about being in the room. Soon into the workshop, during the writing, **B** began to cry. The group held her with kindness, not clustering but rather giving her space acknowledging her distress but not invading. I sat next to her. We held hands, we spoke some French together and then one of the peer mentors came and

took over and chatted with her before inviting her to step out for a short while. She returned later and we helped her pot up a hyacinth.

Here is an example of "collective care" - or "care-full" holding - something which Sue Mayo discusses in depth in her article in this journal and elsewhere (2019 & 2021). In this moment the group jointly held the workshop space with kindness and in our actions demonstrated that we could bear **B** and her vulnerability; she was not too much. We could sit alongside her and not pull away. There is much to unpack here in the collective holding and the care-full facilitation of the facilitators in these moments.

Firstly, I suggest it is a form of radical kindness when space is created that is open to anything that emerges, responsive to the focus or direction the participants choose. Kay Hepplewhite describes this form of facilitation as a form of "responsivity," which embodies key skills including, awareness, anticipation, adaptation, attunement and respond-ability (2020) - a means of brokering trust within an ethics of care. We, my co-facilitators and I, do not position ourselves as experts in the room; rather our facilitation and holding of the room is egalitarian and full of care - what Mayo calls "care-full" holding of participants (2019). In essence, it is about creating a space where the individual's whole personhood is recognised in all of its joyous complexities and contradictions. It is a space to consider, reflect back on and process past experiences and dreams for the future. What is happening here is gentle and there is room and agency for individual participants to engage and interact at a level they wish to. I argue that a careful holding of the workshop space is fundamentally linked to the embodiment of the facilitator's whole being within the space. I am aware that both in my facilitation and teaching I bring in my multiple parts and roles into the space, navigating a fine line between authenticity and but fundamentally not splitting parts of my life or suggesting that there are areas that are off limits.

Secondly, in considering the ethos of the workshop and the invitation to take part in the practice, I am informed by Magnet et al.'s idea of a radically kind teaching practice: "As we focus on the physical and metaphorical space that we create and hold, the idea of kindness permeates the space and can be seen as a way in which to begin to resist and reshape power relations in quotidian interactions" (2014: 2). Specifically, they discuss how when educators make and own their mistakes, they "open up a radical space of possibility for students to also make mistakes" demonstrating how a pedagogy of kindness "becomes relevant as a microtechnique of both resisting and shaping power relations within classrooms and institutions" (2014: 15). For me, there is a clear parallel with the way in which my co-facilitators and I choose to facilitate and hold the applied theatre space as a space for making mistakes. I acknowledge and draw attention to when I get things wrong, and in the lowering of the stakes in that particular space, especially for individuals who may be new to the creative space, allow for other people to play and to get things wrong too, which becomes a means of readjusting how the space is held and who holds power in the workshops space. It is vitally important that the space is open enough to hear whatever anybody wishes to contribute. We see this in the group's holding of A. Part of a radically kind theatre space requires an act of care-full holding, a style of co-facilitation which is gentle, kind and caring but also fundamentally enables encounters that are robust because of the interaction in that space. We can engage with challenging questions and ideas and discussions precisely because the space is radically kind and collectively held.

Thirdly, Mayo proposes "The performance of collective care is emotional, practical, supportive, encouraging, protective, vocal, and tacit. It demonstrates solidarity with others, and a respect for difference. Collective care is revealed in an acceptance of one another, as well as in a striving for excellence. When we don't make the space for the group to perform care for one another and for the facilitator, what is being impaired?" (2021: 195) I echo Mayo here and further argue that collective care emerges through a radically kind theatre space. In her analysis of the Academy, Burton draws attention to "the lack of space made, or importance given, to the personal or the human in the neoliberal academy" (2021: 23). If we place this idea within our practice, there is a lack of space for particular individuals in our society, specifically these women, whose personal stories are only heard within the neoliberal institution in terms of hitting excellent outreach and widening participation targets. But this is also the opportunity to flip this power imbalance, to prevent a potential impairment like the one Mayo cautions against. Rather it is about claiming specific spaces in which personal and individual stories can be shared and those stories stamped into the atmosphere of those rooms, and for individuals not to be held in one particular way. In the creation of such atmospheres, the physical site of the workshop plays a crucial role in this moment.

I am always reminded of one of the architectural choices Maggie Keswick Jencks made in her design of the first Maggie's centre, <sup>11</sup> a feature which remains present in all of the centres globally, a bathroom space where you can fall apart and pull yourself together again. Keswick Jencks describes the space as "An old-fashioned ladies' room – not a partitioned toilet in a row – with its own hand basin and a proper door in a door frame – supplies privacy for crying, water for washing the face, and a mirror for getting ready to deal with the world outside again" (2007: 21). Fundamentally, it is the little things which are significant and when experienced, provide this radical kindness because such a space recognises the whole being. The pedagogy of care evident in that design decision is one we take into our practice through the sourcing and using of quality materials, delicious and nutritious food and the small touches such as scented hand creams and soap. It is considering the small details and acknowledging that while we work in constrained and small budget settings, small moments of care and beauty are key because they signal something beyond their material functionality. Finally, I consider what happens when we pause and reflect on what emerges from these moments, these *apertures of possibility*.

## Apertures of possibility

March 2019 - the Catwalk4Power closing event for the conference. Women attending the conference are found across the rooms at Central School of Speech and Drama. Singing and sewing occur in one room while badges and poster affirmations are being created in another room, while debates are being held in a bigger room. Mac makeup artists style women from Positively UK in Central's costume department, before they take to the stage in one of our older teaching spaces - where with lights and music a catwalk is formed - the women strut themselves and their outfits at the closing event...

December 2019 - the Women's Group's Christmas Party, which for the first time is being held in one of Central's newest black box studios. Similar lights and music to earlier in the year, there is

food and festivity and gifts given by Positively UK. Keen to dance, a few of the women ask the DJ to play some specific songs but not everyone likes that music. We change tack and one of my Scottish students helps to set up and lead a ceilidh as, with much hilarity and joyous confusion, we learn new steps and dance together.

In all of these brief moments, I believe the women were reclaiming Central's spaces as theirs, breaking down the ivory tower fortresses of an academy, temporarily claiming their space as joyously and as loudly and outrageously possible – taking up space and leaving an atmosphere that continues to linger... especially for all of us who use these spaces, we have an embodied experience of what has occurred and who has inhabited these sites.

Performance in applied settings is often quick, artistic and beautiful, but we need to make space for acknowledging the brief, subtle moments of performance and to capture the transient nature of the work; to pause and notice what emerges in those moments - those apertures of possibility. The liminality of the performance space is one where multiple things are possible. To observe and acknowledge how, through the act of creating together, the formation of an atmosphere or an atmospheric shift occurs in the space, allowing the space to move from a somewhat dull, rundown, beige and boring room to a space full of light, hilarity, warmth and joy, where multiple things are possible all that once. In that moment, we glimpse the opening or the potentiality of the other in moments of heightened atmospheric engagement. We see others and ourselves differently in that moment – this affect lingers with others and yourself. There is an affective experience and atmosphere which helps to engender the look and the engagement which happens through a radically kind theatre space: the activities and our collective holding of the space, in negotiation and collaboration with the other participants and co-facilitators. It is a warm and supportive space – it is about expansion and possibility, not limiting and reductive: a space to cry and rejoice, at the same time.

If we consider the physical site of Central, as described in some short snapshots above, there has been a reclaiming of that site through these events. The ephemeral act of celebration is often overlooked when considering the impact it may have for an individual. It leads to an affective atmosphere which begins to shift the micro-dynamics of the felt experiences and tensions in a particular site (c.f. Sara Fregonese 2017). Atmosphere is an important question to consider with regards to applied theatre-making, particularly considering the atmospheres produced in certain settings: what happens in the moment of making that has an impact on the atmosphere of the space? What happens when the atmosphere remains; when the joy, the energy, the intangible aspects and essences from the performative workshop linger in that space; when the atmosphere is marked by what has happened before? Ben Anderson (2009) and Fregonese (2017) both consider the role of affective atmospheres within urban geography and sites of urban living. Drawing attention to the affective atmospheres that linger in particular sites is an aperture of possibility. If we acknowledge that affective atmosphere can emerge or be engendered through the performance and workshop space, the potential for what the "affect" does is, in this instance to create growing and learning spaces. These affective atmospheres come about through radically kind facilitation - the impact of what I have described above, how the intentionality and methodology of the facilitator and the practice, coupled with the physical space create spaces of radical kindness.

The act of an open public event, like the 2019 Being Well and Wonderous public workshop, or a celebration and the sharing of the performance practice created, like the 2016 Women Living with HIV: Our Care, Our Needs or the 2019 Conference and Catwalk4Power has a profound impact on those involved and those who are recipients of the work. Fundamentally, it also is a reinforcement of an individual's personhood, where attention is given and framed with a particular gaze to the individuals' quotidian experience. This begins to shift understandings and move away from that single narrative of what it is to live with a health condition particularly a stigmatised chronic health condition as a woman in the UK. Through the reciprocal kindness of the collective theatre-making, all of these moments are observed and felt, they are recognised and noted.

### Conclusion

This article began with a comment on a kind, careful gesture, and ends on another.

The touch that Everlito offers my father on a daily basis. Everlito cares for my dad, who has advanced cognitive frontal lobe dementia. Everlito's gentle tapping on dad's shoulder as he begins to walk in the wrong direction, carefully guiding him on their daily walk. How Everlito gently hooks dad's glasses over his ears, wiping his mouth, brushing his teeth, washing and dressing him with dignity and care, so that "Sir Jon" looks smart. The kindness in elevating my dad – Pops to us – to the position of "Sir Jon." Ultimately, it is the gesture of Everlito placing his infant daughter in Pops' arms and then sending me a picture on WhatsApp so I can share in the joy and smiles of delight that melts my heart. This past 18 months I have not been able to visit and care for my non-verbal dad who lives overseas, but I know he is being held with kindness and respect. It is a radically kind touch.

As health professionals, carers or applied theatre practitioners – we find ourselves knowing some of the other's most intimate details. The manner in which we respect and hold this knowledge is evidently key, but it is also where I think the kindness and the value of kindness emerges – the sharing of our personhood and the potential for reciprocity. The offer of the relational and the offer of touch are key drivers in a radically kind space and their potential affect is huge and this paper is an invitation to notice the small and subtle effects of affect and atmosphere.

I started this paper laying out my argument why the applied theatre field needs to engage with radical kindness as a methodology because of what can occur when we take a radically kind approach to our practice. There is something radical in applied theatre practice which adopts a radical kindness methodology because it is kind, soft and gentle offering a space for quiet advocacy, where the quotidian and the mundanity can be seen as both ordinary and extraordinary. Kindness is a form of care; these small acts of kindness are radical because they are unplanned, responsive and have deep impact.

In her treatise, How to Stay Sane in an Age of Division, Elif Shafak argues:

Until we open our ears to the vast, the endless, the multiple belongings and multiple stories the world has for us, we will only find the false version of sanity, a hall of mirrors that reflects ourselves but never offers us a way out (2021:89).

This, I think, captures the essence of what the work we do together with Positively UK - a building of communities of care; a space to really recognise the multiple parts and beings of every person who inhabits the shared creative space. The radical kindness of the space allows us all to move against and away from apathy towards recognition, trust and belonging... moving away from being invisible, unnoticed, overlooked and unobserved, to opening our ears and eyes to seeing and being seen, "the multiple belongings, the multiple stories" – and this is a radically kind methodology in practice.

\_\_\_\_\_

#### **Notes**

<sup>1</sup> While the practice of emotional labour in nursing has been well documented and researched (c.f. Pam Smith's *Emotional Labour in Nursing*), the extraordinary work and kindness of medical professionals, healthcare workers and all those involved in supporting and maintaining the functioning of the hospitals during COVID-19 requires more outcry and discussion of adequately recompensing this labour but also to acknowledge the kindness of their actions. I begin to discuss this idea <a href="here">here</a> when acting as a respondent to a research event on the labour and care of nurses. For more information, please see the <a href="Performance for Care">Performance for Care</a> project.

- 4 The UK's Home Office established a series of hostile environment immigration measures in 2012, an act which has recently been reported as breaking Equality Act of 2010 (Equalities and Human Rights Commission, 2020).
- <sup>5</sup> Alan Blum considers the 'grey zone' between illness and health, to offer up a new interpretation of embodiment in health and wellbeing (2011) while Arthur Frank discusses the impossibility of naming pain and emphasises the importance of challenging the notion of a dichotomy between pain and suffering (2001).
- <sup>6</sup> For wonderful examples of this in action, have a look at <u>The Sick of the Fringe</u> Festival where multiple different ways of capturing and discussing health are explored through performance. See also Low, 2017.
- <sup>7</sup> In my analysis of a long-term sexual health applied theatre project with co-participants and co-researchers in Nyanga, Cape Town, I vehemently reject the idea that applied theatre practice can be seen as a form of the libertarian paternalism. I argue instead that "[n]udging is too crude an explanation for what is a highly complex set of behaviours or approaches. It does not take into account the complexity involved in people's decision making or that, at times, people do not always have the ability to make the choice that they would like to make. The applied theatre space is about offering an invitation to explore different ways of thinking" (Low 2020: 211) and thus by definition, different ways of choosing.
- <sup>8</sup> Please see *Performing Care: New Perspectives on Socially Engaged Performance*, edited by Amanda Stuart Fisher and James Thompson which considers "care both as a form of labour and a mode of performance" in an analysis of different examples of socially engaged performance (Stuart Fisher, 2020: 3-4).

<sup>&</sup>lt;sup>2</sup> For theorisations around shame and dirt, see Mary Douglas (1979), and more generally regarding shame and HIV see Hutchinson & Dhairyawan (2018).

<sup>&</sup>lt;sup>3</sup> For more information about U=U, visit the aidsmap website, which offers a clear <u>explanation</u> and further information.

- <sup>9</sup> On reflection, I recall how my colleague Clara Vaughan and I struggled to define the atmosphere of the workshop space in our account of facilitating a project in a female prison in Johannesburg, describing it as follows: "the atmosphere was tender, chaotic and energetic. At times it was also 'soft', for want of a better word, in the sense that, when we listened to the poems or heard the letters, we clustered around; it was intimate, personal and receptive" (2020: 208).
- <sup>10</sup> This argument is in line with Thompson's description of Norman Geras' "contract of mutual regard" in terms of his discussion of an aesthetics of care in art-making as a basis of relational art-making (Geras 1998 cited in Thompson 2020: 44).
- <sup>11</sup> Maggie's is a cancer care charity offering free information and support in centres in the UK and online.
- <sup>12</sup> In *Performance Affects: Applied Theatre and The End of Effect,* Thompson argues for the need to focus on affect rather than effect, offering as an example a significantly affective moment when a génocidaire begins to sing Bob Marley's *Redemption Song* during a lunch break in a prison project. Here Thompson considers the affect of seeing the other differently and how that affect may linger (2009: 209-10).

### Works cited

- Anderson, Ben. 2009. "Affective Atmospheres." Emotion, Space and Society 2 (2): 77-81.
- AVERT, 2020. HIV Stigma and Discrimination. Available from: <a href="https://www.avert.org/professionals/hiv-social-issues/stigma-discrimination">https://www.avert.org/professionals/hiv-social-issues/stigma-discrimination</a> [Accessed November 30, 2020].
- Balfour, Michael. 2016. "The art of facilitation: 't'aint what you do (it's the way that you do it)." In *Applied Theatre Facilitation: Pedagogies, Practices, Resilience*, edited by Preston, S., 151-165. London: Bloomsbury Methuen Drama.
- Bartley, Sarah. 2019. "Gendering Welfare: Acts of Reproductive Labour in Applied Performance Practice." Contemporary Theatre Review 29:(3) 305-319, DOI: 10.1080/10486801.2019.1615901
- Blum, Alan. 2011. The Grey Zone of Health and Illness. Bristol, Intellect.
- Brownlie, Julie and Anderson, Simon. 2017. "Thinking sociologically about kindness: Puncturing the blasé in the ordinary city." *Sociology 51* (6):1222-1238. https://doi.org/10.1177/0038038516661266
- Burton, Sarah. (2021). "Solidarity, now! Care, Collegiality, and Comprehending the Power Relations of 'Academic Kindness' in the Neoliberal Academy." *Performance Paradigm 16*: 20-39.
- Clegg, Sue. and Rowland, Stephen. 2010. "Kindness in pedagogical practice and academic life." *British Journal of Sociology of Education* 31, (6): 719-735, DOI: 10.1080/01425692.2010.515102
- Deeks, Steven. G, Lewin, Sharon. R. and Havlir, Diane. V. 2013. "The end of AIDS: HIV infection as a chronic disease."

  The Lancet, 382 (9903):1525-1533. 

  <a href="https://www.thelancet.com/journals/lancet/article/PIIS0140-6736(13)61809-7/fulltext">https://www.thelancet.com/journals/lancet/article/PIIS0140-6736(13)61809-7/fulltext</a>
  Accessed September 30, 2020.
- Douglas, Mary. 1979. Purity and Danger: An Analysis of Concepts of Pollution and Taboo. London and Henley: Routledge & Kegan Paul.
- Equalities and Human Rights Commission, 2020. Public Sector Equality Duty assessment of Hostile environment policies. Hostile Environment Assessment Report, November 25.

- https://www.equalityhumanrights.com/sites/default/files/public-sector-equality-duty-assessment-of-hostile-environment-policies.pdf Accessed November 30, 2020.
- Frank, Arthur. W. 2001. "Can we Research Suffering?" Qualitative Health Research 11 (3): 353-362.
- Fregonese, Sara. 2017. "Affective atmospheres, urban geopolitics and conflict (de)escalation in Beirut." *Political Geography* 61: 1-10.
- Hepplewhite, Kay. 2020. *The Applied Theatre Artist: Responsivity and Expertise in Practice.* London: Palgrave Macmillan.
- Hutchinson Phil, and Rageshri. Dhairyawan. 2018. "Shame and HIV: Strategies for addressing the negative impact shame has on public health and diagnosis and treatment of HIV." *Bioethics* 32:68–76. https://doi.org/10.1111/bioe.12378
- Kasadha, Bakita. 2018. "As a black woman living with HIV, my story is often left untold. This silence creates stigma." *Metro News*, October 30. <a href="https://metro.co.uk/2018/10/30/as-a-black-woman-living-with-hiv-my-story-is-often-left-untold-this-silence-creates-stigma-8085173/">https://metro.co.uk/2018/10/30/as-a-black-woman-living-with-hiv-my-story-is-often-left-untold-this-silence-creates-stigma-8085173/</a> Accessed on December 6, 2018.
- Kershaw, Baz. 1999. The Radical in Performance: Between Brecht and Baudrillard. London: Routledge.
- Keswick Jencks, Maggie. 2007. A View From The Front Line. First published 1995. Reprinted 2003 and 2007. Edinburgh: Maggie's Cancer Caring Centre.
- Levinas, Emmanuel. 2006. Entre-Nous: Thinking-of-the-Other. Trans. Michael B. Smith & Barbara Harshav. London: Continuum
- Low, Katharine. E. 2017. "'It's difficult to talk about sex in a positive way': Creating a Space to Breathe." In *Applied Theatre: Performing Health and Wellbeing*, edited by V. Baxter and K. E. Low, 146–61. London: Bloomsbury Methuen Drama.
- Low, Katharine. E. 2020. *Applied Theatre and Sexual Health Communication: Apertures of Possibility*. London: Palgrave Macmillan.
- Low, Katharine. E. and Vaughan, Clara. 2020. "There is Still Life in me, Despite What I Have Done' Assuaging Woundedness Through Collective Creativity." In Caoimhe McAvinchey, *Applied Theatre:* Women and the Criminal Justice System, London: Bloomsbury Methuen Drama, pp. 197-215.
- Low, Katharine. E., Mudyavanhu, Matilda. and Tariq, Shema. 2017. "The Press/Supress/Our Stories of Happiness/They Choose to Define Us/As 'Suffering Headliners:' Theatre-Making with Women Living

- with HIV." In *Viral Dramaturgies: HIV and AIDS in Performance in the Twenty-First Century*, edited by Alyson Campbell & Dirk Gindt, 91-110. Basingstoke: Palgrave Macmillan.
- Magnet, Shoshana, Mason, Corinne and Trevenen, Kathryn. 2014. "Feminism, Pedagogy, and the Politics of Kindness." *Feminist Teacher* 25 (4): 1-22.
- Mayo, Sue. 2019. "We know..." Collective care in participatory arts." Unpublished paper shared with permission by the author.
- Mayo, Sue. 2021. "We know...' Collective care in participatory arts." Performance Paradigm 16: 184-198.
- McAvinchey, Caoimhe. 2020. "Clean Break: a practical politics of care." In *Performing Care: New Perspectives on Socially Engaged Performance*, edited by Amanda Stuart Fisher and James Thompson 123-131. Manchester: Manchester University Press.
- Shafak, Elif. 2020. How to Stay Sane in an Age of Division. London: Profile Books & Wellcome Collection.
- Sidibé, Michel. 2012. "Giving Power to Couples to End the AIDS Epidemic." *Huffington Post*, July 5, Available from: https://www.huffpost.com/entry/hiv-aids\_b\_1477206?guccounter=1 Accessed June 20, 2018.
- Smith, Pam. 2011. *Emotional Labour in Nursing: Can Nurses Still Care?* 2<sup>nd</sup> edition. Basingstoke: Palgrave Macmillan.
- Snyder-Young, Dani. 2013. *Theatre of Good Intentions: Challenges and Hopes for Theatre and Social Change*. Basingstoke: Palgrave Macmillan.
- Stuart Fisher, Amanda. 2020. "Introduction: caring performance, performing care." In *Performing Care: New Perspectives on Socially Engaged Performance*, edited by Amanda Stuart Fisher and James Thompson, 1-17. Manchester: Manchester University Press.
- Thaler, Richard and Cass Sunstein. 2009. *Nudge: Improving Decisions About Health, Wealth and Happiness*. London: Penguin.
- Thompson, James. 2009. *Performance Affects: Applied Theatre and The End of Effect,* Basingstoke: Palgrave Macmillian.
- Thompson, James. 2020. "Towards an Aesthetics of Care." In *Performing Care: New Perspectives on Socially Engaged Performance*, edited by Amanda Stuart Fisher and James Thompson, 36-48. Manchester: Manchester University Press.

## Acknowledgements

- Sincere and ongoing thanks to all those at Positively UK and my co-collaborators, without whose generosity and critical debate and consideration, there would be no practice or article.
- I appreciate the radical kindness and generosity of critique that the editors, Emma Willis, Alys Longley and Victoria Wynne-Jones, and the anonymous reviewers have offered in the writing of this article.

KATHARINE E. LOW is a practitioner-researcher and is Senior Lecturer in Applied Theatre and Community Performance at The Royal Central School of Speech and Drama, University of London. She has over 18 years' experience in applied theatre practice and health, working in the fields of sexual health, gender equity and urban violence, in the UK and internationally. Her research is embedded in collaborations with arts and cultural organisations, medical practitioners and NGOs to co-facilitate participatory theatre and arts-based projects based around social concerns. Her recent publications include: Applied Theatre and Sexual Health Communication: Apertures of Possibility (2020, Palgrave Macmillan) and Applied Theatre: Performing Health and Wellbeing with Veronica Baxter (2017, Bloomsbury Methuen). Katharine is

currently developing performance practices with women living well with HIV and researching the impact of motherhood on academic life. Katharine tweets about arts & health practice at <a href="mailto:@katlow17">@katlow17</a>.

© 2021 Katharine E. Low



Except where otherwise noted, this work is licensed under a <u>Creative Commons Attribution-NonCommercial-ShareAlike 4.0 International License (https://creativecommons.org/licenses/by-nc-sa/4.0/).</u>