

Developing and Investigating a Participatory Internet Radio Intervention to Support Psychoeducation and Non-Formal Learning in At-Risk Youth

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Abstract. Previous research in the area of participatory media has shown that the whole performative space of participatory radio can support the inclusion, non-formal learning and employability of socially excluded groups. Building on this research and development this paper reports doctoral research that adopts a more specific and nuanced focus, where the emphasis is on developing and investigating a non-clinical participatory radio intervention specifically aimed at psychoeducation and non-formal learning in the context of mental health and related issues (e.g. substance misuse). This approach is using a specific communication media and technology – internet radio - to promote active learning about mental health

Keywords: psychoeducation, engagement, participatory internet radio, mental health, non-formal learning, vocational learning

1 The Problem

A report produced by the Office for National Statistics in 2004 reported that 1 in 10 children between the ages of 5 and 16 had a “clinically diagnosable mental disorder” [1]. This report found that the issues could be divided into conduct issues and emotional issues. The same source reported in 2015 [2] that this statistic was largely unchanged. However, there was a decrease in conduct issues and an increase in emotional issues. This suggests that while there has been success in interventions which target conduct and behaviour, there remains a problem in targeting the emotional issues of mental health and psychosocial dimensions such as self-confidence, self-motivation, and self-efficacy. This situation is indicative of a failure of current services for young people.

Young people face an average waiting time of 28 days for a single ‘talking therapy’ session from Child and Adolescent Mental Health Services (CAMHS) in the United Kingdom [3] – and the same report notes that in one service waiting times were on average 18 weeks. This problem is compounded as young people have been reported to be unlikely to seek professional help for substance use and mental health issues [4-7].

Studies which seek to identify what young people perceive as barriers to their ability to seek help for mental health issues report a range of factors - including feeling there is a stigma towards mental health issues, including a difficulty recognising symptoms,

embarrassment when discussing the subject, and a desire to be self-reliant [8-11]. A role of this doctoral research is to provide psychoeducation about mental health which addresses these very issues, thus helping young people develop a critical literacy [12] and critical consciousness [13] about mental health, and providing a preventative step so that young people feel more able to discuss mental health with a GP if required, and indeed to recognise the symptoms if they occur.

If these young people are unlikely to seek help for mental health issues, there is therefore a need for an intervention which is able to engage young people unlikely to seek help – one which may seem enticing to them due to the delivery method, i.e. a technology-based intervention that provides facilitated collaborative learning. After all, a benefit of technology-based interventions is that young people are more likely to engage than with traditional interventions due to a desire to engage with the technology [14].

The intervention approach that is the subject of this doctoral research is to use participatory media – media where the audience are also the content creators. An example of this is ‘RadioActive Europe’; a European project that uses participatory radio as a learning literacy [15-17]. The ‘whole space’ of participatory radio is used to promote the inclusion, engagement and non-formal learning of disenfranchised people throughout Europe (5 countries), and in the United Kingdom. A RadioActive101 educational intervention is implemented with an organisation (such as a community group), rather than directly with individuals. The organisation itself then acts as a RadioActive101 ‘radio hub’, which has been empowered by the project to continue to implement sustainable radio-led educational interventions.

The findings of this study, and subsequent discussion, should ultimately answer the overall research question of this doctoral research: How can a non-clinical participatory radio intervention be used as engaging, effective psychoeducation about mental health and related issues (e.g. substance misuse) for at-risk youth

2 Participatory Internet Radio

RadioActive101 is ongoing participatory internet radio research and development and a sustained technical platform (radioactive101.eu and radioactive101.org). Fundamentally is an educational intervention that is implemented with young people in a low-cost manner. Within RadioActive101, young people and other disenfranchised groups, who frequent an organisation create a radio programme through participatory methods. This forms an educational intervention, where disenfranchised young people create and listen to the radio programme, and in doing so – engage in rich non-formal and vocational learning. Participatory radio is a form of radio where the content is created by the intended audience. Any listeners outside of the creation process are encouraged to engage through critical listening, with the potential for these external listeners to participate in the creation process if they desire. Participatory media has been praised for increasing participants’ engagement with a media form [18-19] whilst participatory radio has been reported as capable of engaging people by making them activists – providing them with a role within the public sphere [20].

Participatory radio has been reported as a particularly engaging medium when implemented with a young population – the reason for this appears to be that young people are able to express themselves in a variety of ways, with few factors limiting the type of radio programme that they can produce. So RadioActive101 is therefore capable of providing any participant with entry into the public sphere through the creation of a radio asset.

The creation of a radio asset is a benefit of using participatory radio as the technology to engage participants – the created radio programme can not only be listened to by the participants, but also broadcast to a different group of young people, which can be in turn investigated as effective psychoeducation regarding mental health. So this intervention is also useful in that it will produce an asset which can have further benefits to additional young people – and indeed, if the radio programme proves to be effective as psychoeducation regarding mental health, it can be hosted online for anyone to listen to, worldwide.

RadioActive101 was designed to engage community centres as a whole, as opposed to specific participants. Radio programmes were created with whichever participants were attending the community organisation on a given day. A premise of this doctoral research was to adapt the RadioActive101 approach to target specific individuals who return each week.

This is a crucial distinction, as there is a clear difference between providing an intervention for a changing group and specific individuals. It is therefore necessary to consider how certain aspects of RadioActive101 can be changed and narrowed down, and researched in less breadth but more depth - to serve specific individuals who will return each week for a pre-defined participatory radio intervention.

3 Intervention Design: Active learning about mental health

In developing this particular participatory radio intervention, it is important to stress the difficulty of the problem that this applied research is addressing and also the shortcomings of existing clinical approaches. Practical ongoing collaborations with Tower Hamlets CAMHS (Child and Adolescent Mental Health Services) have emphasised the difficulty of engaging at-risk youth within clinical services and then achieving clear benefits using existing clinical methods. Typically, those in need of help, and particularly those at risk of mental health and related substance misuse problems either don't seek out services at all, or, don't continue to engage with services if they are referred.

The combination of low referral, low engagement and limited resources means that there is a pressing need to adopt psychoeducational approaches that are more inclusive, engaging and relevant to those with problems, or potential problems. And although this severe problem is clear, there are few, if any, alternatives to the 'standard' clinical approaches which are designed, implemented and evaluated with academic rigour to investigate their efficacy. Therefore, the relevance but also the challenge of addressing this problem through participatory radio needs to be recognised, so that this research is set in an appropriate frame; that also accepts the difficulty of the target context and problem being addressed.

In order to implement RadioActive101 as effective psychoeducation, an intervention of a fixed duration and a pre-defined and stable group, it was necessary for us to experience managing a RadioActive101 project. The purpose of this particular feasibility study was to observe how RadioActive101 could be applied with a 'fixed' group of eight young people, who were tasked with creating radio programmes. Participants were thereby facilitated in learning radio skills (e.g. presenting, producing and reporting). This feasibility study was therefore investigating the feasibility of the methods that are different to what has been previously reported in RadioActive101 literature.

The crucial issue with adapting RadioActive101 as experienced by us was that the participants were unable to be productive in an environment that lacked structure. The usual pattern of RadioActive101 content creation (recording content with participants who were present) did not function with the Performing Arts students, who desired clearer individual roles and responsibilities. As a direct result of this experience, we initially devised eight unique radio production roles which participants could choose from, but this proved too complicated when discussed with a professional in the youth work industry, who felt that the roles would confuse participants rather than empowering them. As such, this list was shortened to three clear and obvious roles – Presenting, Producing and Reporting. Participants will adopt these roles in the intervention, which are tied to predetermined digital 'badges' – digital awards which act as effective recognitions of learning achievements with regards to radio skills. The 'badges' can be considered as a way of documenting the non-formal learning of participants. These 'badges' are awarded once participants complete a set of pre-determined conditions over the course of the intervention. These conditions are not only evidence of learning hard skills in radio production, but also soft skills – evidence of non-formal learning of the EU Key Competencies for Life-Long Learning.

These EU Key Competencies (referred to as 21st Century Skills, or 21C Skills) [21-22] are skills which are regarded as necessary for success in life in the 21st Century. These skills are: communication in the mother tongue, communication in foreign languages, mathematical competence and competence in science and technology, digital competence, learning to learn, social and civic competence, sense of initiative and entrepreneurship; and cultural awareness and expression.

So the intervention design includes the non-formal learning of 21C Skills through the engaging vocational learning of participatory radio, as these radio roles adopted by participants are directly linked to these skills through digital badges. This is then directly linked to psychoeducation regarding mental health as this is the very topic of the radio programme. So young people engage in non-formal learning (21C Skills) through vocational learning (participatory radio roles linked to digital badges), which is itself delivering psychoeducation regarding mental health (the topic of the radio programme, and thus the discussions held between young people) – it is argued here that the necessary learning design is one which accepts that in order to properly understand 'what is going on' a 'gestalt' approach to learning must be adopted [23]. This process of participatory radio production for the purpose of providing effective psychoeducation is possible due to 'the patterns of participatory radio', discussed below.

4 The Patterns of Participatory Radio

The ‘patterns of participatory radio’ is a term originating within this doctoral research. It is used to describe the systematic structure of creating a participatory radio programme, and thus a key component of the design of the intervention itself. In simple terms, the ‘patterns of participatory radio’ is an umbrella term used to describe the elements of participatory radio which are effective at bringing about psychoeducation regarding mental health.

The ‘patterns of participatory radio’ therefore are:

1. Practicing performing a radio role (e.g. interviewing a peer about football)
2. Discussing how that radio role can be applied to creating a *balanced* radio programme about mental health (e.g. interviewing a footballer about mental health)
3. Actively performing the radio role (e.g. recording the discussed interview)
4. Listening to, and discussing, the radio piece that was recorded (e.g. the interview)

It should be clear that the ‘patterns of participatory radio’ are therefore a crucial part of the doctoral research, as they form the link between the ostensibly engaging activity of making radio and the critical discussion which leads to the creation of a *balanced* radio programme.

The word ‘balance’ is crucial here, as participants must collaborate to create a radio programme which considers both sides of an argument. Therefore, in order to create an unbiased radio programme, participants must consider the *opposite* to their point of view. This serves two purposes: 1) It encourages participants to think critically about their own view, and 2) it ensures that even the most extreme entrenched view must be challenged.

So, the ‘patterns of participatory radio’ refers generally to the structural process of creating a participatory radio programme, and specifically to the requirement of unbiased discussion in order to create an unbiased radio programme. This highlights the way in which participatory radio can be effective at engaging young people in psychoeducation regarding mental health, as the participants must engage in a critical discussion of mental health in order to be able to create a radio programme.

5 The Main Study of the Doctoral Research

The next step of this doctoral research will be to conduct the main study, which is a comparative study of two groups, which can be considered different examples of ‘at-risk youth’, combined with an investigation into how listening to participatory radio can provide engaging psychoeducation about mental health and related issues (e.g. substance misuse).

These two groups are a mental health group and a community group, both based in East London. Within the mental health group, the young people have either self-referred or have been referred to a sister organisation, which provides care, support and housing.

These young people therefore have a need for mental health care. These young people may be in contact with mental health services (e.g. NHS CAMHS) and may have received a mental health diagnosis. In contrast, the young people who attend the community group have not self-referred and there is no assumption that these young people are suffering with mental health problems.

A goal of this comparative enquiry is to understand *how* and *why* each aspect of the conceptual framework of this intervention *does* or *does not* work in each context [21]. 6-8 participants (aged 16-25) will be recruited from both locations. These participants will create a radio programme according to a specific, intervention design. The intervention will last six sessions, two hours in length, which have been meticulously designed with activities directly linked to non-formal learning, vocational learning and psychoeducation regarding mental health.

Participants will be interviewed preceding and following the intervention, and recordings will be taken of the key discussions where participants appear to engage in critical, reflective dialogue regarding mental health. For example, on the concept of engagement, there are questions targeting behavioural engagement (How focused were you during the sessions?), affective engagement (Do you feel like you ‘belong’ here?), and cognitive engagement (How motivated do you feel to learn when you show up to these sessions?). This data collection has been carefully designed to target the concepts within this doctoral research (e.g. engagement, non-formal learning outcomes, psychoeducation) in order to be able to measure and investigate the impact of the intervention.

The second step of this study is to investigate the value of the ‘radio asset’ – whether listening to participatory radio can be effective psychoeducation. There will be an online survey targeting 100 respondents. This survey will include open-ended questions to target the same concepts as above. A sample of 30 participants will be taken from the survey respondents to investigate the value of listening to participatory radio in further detail. These participants will listen to a radio programme and take part in pre-intervention and post-intervention focus groups.

This has potential broader contributions for TEL research in general – Investigating the potential of participatory internet radio as an innovative TEL intervention for: including and engaging socially excluded young people in non-formal and vocational learning; psychoeducation about mental health; and, investigating the relationship between non-formal learning, psychosocial development and psychoeducation.

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