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Who is Responsible? Neoliberal Discourses of Well-Being in Australia and New Zealand

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ABSTRACT

Policy proposals about social change and well-being shape the implementation of applied theatre projects through technologies such as evaluation practices and funding applications. Representations of projects can, in turn, effect public discourse about who participants are and why they are or are not 'being well'. Like public policy, applied theatre for social change has to establish a problem that needs to be solved. Drawing on debates about change in applied theatre literature, we consider how funders, governments, and communities call on applied theatre practitioners to frame particular issues and/or people as problematic. We then examine discourses of well-being in Australia and New Zealand, drawing on policy documents and funding schemes to discuss the politics of change in applied theatre in each country. We consider how the field might navigate policies, technologies and public understandings of well-being, change and social good to produce work with and for participants in neoliberalised contexts.

This paper explores the ways documents related to theatre/drama/performance for well-being in Australia and New Zealand draw on neoliberal responsibilising discourses to justify, outline, or connect drama/theatre work and well-being (Sointu 2005; Low 2017). To achieve this, we draw on neoliberalism as an explanatory theory for organising the governance of people, and therefore the place of people-oriented work such as applied theatre and drama education. The poststructural methodological approach we use explores public documents about drama and theatre and seeks to question and critique taken-for-granted ideas. We therefore state from the outset that this article is about how drama/theatre/performance practice relates to the wider funding and policy context, and how this relationship affects the way it is written and talked about. We acknowledge that this does not necessarily correspond to how this work is practised or experienced by facilitators or participants. Here, we seek to understand drama/theatre/performance at the textual/representational level arguing that documents (such as policies), and their related technologies, play a critical, performative role in forming subjects (such as participants) as understandable within current social/political/policy contexts and give authority to certain discursive themes (Butler 2010). Further, that the representations of

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such themes 'make them', legitimise them, and establish them as governing forces (Rose 1996; Butler 2010). This means the ways in which policy makers, practitioners, and donors talk about 'prisoners', for example, as a common-sense representation of a category of participant *in need of theatre*, makes these participants understandable as a certain kind of participant and legitimises practices that govern them.

Background

One critique of applied theatre, which emerged almost as soon as the field started to define itself, is that the intentionality underlying much socially engaged theatre practice makes it particularly susceptible to being co-opted to dubious purposes (Ackroyd 2007). 'Dubious' meaning purposes that run counter to or undermine the social justice claims of much applied theatre practice. Balfour (2009) argues that dependency on governments and non-governmental organisations, for funding, but also for legitimising discourses, has affected both the 'rationale and practice' of the field (347). Specifically, adaption to marketised funding and public policy contexts, in countries like the UK, New Zealand, and Australia, Balfour argues, has led to the dominance of a discourse of 'social utilitarianism'; (350), a level of complicity with discourses that Other or exclude certain groups, and the adoption of reductive models of change. Other research shows how the technologies of policy-makers and funders (application systems and forms, contracts, accountability registers, report templates) effectively discipline applied theatre makers (Mundrawala 2009). In their overview of impact assessment in applied theatre and Theatre for Development, Etherton and Prentki (2006) suggest that the measures of impact that have come to matter the most are those consistent with the measures of success and progress of neoliberal capitalism. Summarising this line of critique, Hughes and Nicholson (2016) propose that the need to achieve the impacts or outcomes demanded by funders has 'upheld an emphasis in applied theatre as a mode of personal and social problem-solving in which predetermined goals are realised, and this can mean that applied theatre is conceptualised in ways that serve neoliberalism' (4). In this paper, we focus on the extent to which discourses and technologies of funders, governments, NGOs, and drama/theatre/performance practitioners themselves call on programs, frame particular issues and/or groups of people as problematic, and to frame responsibility for 'fixing' those problems, in ways that are consistent with the neoliberalised policy contexts of Australia and New Zealand.

The analysis and arguments of our paper focus on policy, funding, and evaluations of programs to help establish the relationship between drama/theatre/performance and well-being in each country. This is an area of practice that is relatively new to both contexts, but has been recently established in Australia and is currently emerging in New Zealand. Baxter and Low's (2017) book *Applied Theatre: Performing Health and Wellbeing* gives a critical overview of this area of practice internationally. Pertinent to this paper is their argument that health and well-being, as terms and domains of practice, are often defined and delineated in narrow, individualised, neoliberalised, and/or culturally inappropriate ways. This, in turn, sets a particular (and potentially limited) scope for what the arts can, and should, be and do in relation to health and well-being (Low 2017). Well-being, for example, has become synonymous with the pursuit of personal fulfilment within a global 'happiness industry', bringing neoliberal

value systems to bear on previously personal/private mental, bodily, and spiritual ways of being (Davies 2015). An increased focus on the importance of achieving personal well-being, and on determining the best methods for doing so, arises 'in a social context, which emphasises proactive agency and self-responsibility as meaningful and normal, with the self and body providing particularly amenable arenas for the exercise of self-responsible agency' (Sointu 2005, 255). Eeva Sointu's argument is that discourses of well-being have shifted to produce an individualised subject with responsibility for the 'active creation of personal health and well-being' (255). She also finds that potentially counter cultural activities, such as creativity, are increasingly reframed in this discourse as techniques of normalisation.

In the critical policy analysis space, Fullagar (2002) explores how health policy discourses are 'a means through which neo-liberal rule is exercised over population groups' (70) (such as 'the addicted' or 'the overweight'). According to Fullagar, this governmental power is achieved and exercised through the systematic rationality of particular logics and assumptions of well-being focused on self-examination, self-care and self- improvement (Fullagar 2002). We are interested in the extent to which public documents related to drama/theatre/performance for well-being participate in the promotion of individual self-governance, and how the pro-social aspect of drama/theatre/performance relates (or otherwise) to this promotion. Tied to this interest is an acknowledgement that the centralisation of participation in theatre/drama work, by definition, focuses on the participant,[1] and therefore it is not surprising that the locus of change rests here too. This leads to us questioning to what extent does the participatory, intentional nature of applied theatre ultimately place the responsibility for 'appropriate' or 'healthy' actions on to the participants. And, as Veronica Baxter (2017) asks, how much does this approach take into account the power that individuals have to act out such 'healthy choices' within specific socio-economic and/or cultural conditions? Baxter identifies a shift in arts and health discourse, in the global south particularly, towards outcomes framed by positive psychology rather than social justice theories, theories that assume a self-efficacious subject who is able to make individual choices and behaviour changes. This approach can lead to the individual, or a technicality of the approach taken, being blamed for any 'failure to change', rather than factors in the wider social, economic, and cultural structures that may actively disadvantage or be unhealthy for these people. While this individualised, responsiblising approach does not align with the politics of many applied drama/theatre/performance practitioners, we are interested in how such participatory discourses might be taken on in funding applications, evaluation reports, and public-facing documents.

A focus on participants also puts the governing force of the practitioner, program, and funder on the periphery. Few policies, funding calls, or evaluations explicitly outline the expected outcomes for the practitioner or researcher (such as employment, professional recognition, tenure, and so on) (Snyder-Young 2013) in the same way it focuses on the outcomes for the participants. It is also the case that many of the institutions in which drama/theatre/performance programs take place, or organisations that sponsor such work, can be considered to be 'part of the problem' – that they operate within or on systems which maintain marginalising practices that directly affect the participants (Balfour 2009; Etherton and Prentki 2006). There is also little attention in public documents to the ways in which institutions and services benefit from such marginalisation.

Funiciello (1990) has termed this 'the poverty industry' and worried, like Baxter (2017) that this has led to a focus on the failure of the oppressed to achieve their own liberation:

> For every poverty problem, a self-perpetuating profession proposed to ameliorate the situation without altering the poverty... Furthermore, to keep the "service" engine stoked, every manner of failure has been ascribed to the families themselves. (Funiciello 1990, 38)

We are not suggesting that drama and theatre practitioners conceptualise their role in such a way (despite many receiving income from this industry). Nor are we suggesting that the work undertaken is not done in ways that are compassionate, empowering, and indeed radical. We are, however, suggesting that discourses in public documents about the relationship between theatre/drama and well-being tend not to critically address the role of such work in supporting and maintaining institutions and policy discourses that operate in (and potentially support) unjust systems.

Methodological perspectives

This paper engages methodologically with a critical analysis of documents that inform and represent drama/theatre/performance and well-being in Australia and Aotearoa New Zealand. Methodologically, we draw on methods of critique that are both theoretically informed and practically structured and purposeful. These methods are based on Foucault-inspired poststructuralism (Rose 1996) and Bacchi's 'What's the problem represented to be?' discourse analysis (2009). This form of analysis understands policies (or evaluation reports, or websites advertising theatre programs) as not telling us what is actually being done in the program, but demonstrating what 'things' (outcomes, social goals, kinds of people) are desirable and powerful in the particular institutional and historical context in which they were written (Bacchi 2009; Bacchi and Goodwin 2016; Freebody and Goodwin 2018). The methodology asks the following seven questions and steps about a text:

'Question 1:   What's the problem [e.g., 'communication skills', 'partying', 'health'] represented to be in a specific policy?

Question 2:   What presuppositions or assumptions underlie this representation of the 'problem' (problem representation)?

Question 3:   How has this representation of the 'problem' come about?

Question 4:   What is left unproblematic in this problem representation? Where are the silences? Can the 'problem' be conceptualised differently?

Question 5:   What effects are produced by this representation of the 'problem'?

Question 6:   How and where has this representation of the 'problem' been produced, disseminated and defended? How has it been and/or how can it be disrupted and replaced?

Step 7: Apply this list of questions to your own problem representations.'
(Bacchi 2009, 2; Bacchi and Goodwin 2016, 20)

In a prior publication, these questions were applied to a close reading of an evaluation report for a New Zealand drama program in schools that aim to encourage safe partying practices of young people (Freebody and Goodwin 2017). We found that rather than 'unsafe partying', the young people and their behaviour were clearly represented as the problem. The representation of the aim to educate young people about safe partying practices assumes young people do not know, or behave in ways that indicate they do not know, about safe partying. The assumption that adults know better and have the right to judge and govern the preferences of children is an assumption here, and throughout most if not all public policy about youth. However, it has not always been the case that 15- or 16-year-old people were considered children and a genealogy of political, social, and policy constructions of 'youth', particularly 'youth as pre-competent' or 'youth as problematic' would allow this problem representation to appear to be 'common-sense' to the reader. The discursive (and lived) effects of representations such as this allow the legitimisation and naturalisation of young people as problems, and adults as guardians, judges, and protectors of young people's behaviour.

In this article, the following documents referring to/or establishing the relationship between drama or theatre programs for health and well-being in Australia are explored:

- The 2013 Arts and Health Framework, published by the Australian Government CoA, (2013).
- A four-page description and report on an in-school program developed by the ACT school system in collaboration with a government health organisation that discusses teaching values education through drama, with a focus on mental health and well-being (CoA, 2010).
- A journal article in *Health Promotion Journal of Australia* exploring the use of drama-based strategies for sexual health promotion (Roberts, Lobo, and Sorenson 2017).

There is currently no New Zealand equivalent of the Australian 2013 Arts and Health Framework. Instead, we (the New Zealand authors) examine reports, policy, and funding materials from which, we argue, the dominant discourses for applied drama/theatre/performance, particularly related to young people's mental health and well-being, in New Zealand are likely to be derived:

- 'Improving the transitions – reducing social and psychological morbidity during adolescence' (Gluckman 2011)
- The *Youth Mental Health Project Research Review* (Social Policy Evaluation and Research Unit, 2015)
- The Youth Development Strategy Aotearoa (Ministry of Youth Affairs 2002)
- Funding documents from the J R McKenzie Trust (J R McKenzie Trust n.d.) and the Vodafone New Zealand Foundation (Vodafone New Zealand Foundation 2017)

The discussion that follows in this article is informed by the above methodology, but not strictly wedded to it. Rather than engaging in detailed explorations of the language and discourses at play in each document (see Freebody et al. 2018; Freebody and Goodwin

2017, for projects similar to this), we use these documents to explore the ways in which particular subjects and objects are called forth in drama/theatre/performance in health and well-being contexts.

The arts and health in Australia: governing discourses

In Australia, there is a National Arts and Health framework, drawn from the Health and Cultural Ministers' offices, demonstrating their commitment to improving the health of Australians, and '*recognising* the role of the arts in contributing to this' [italics added] (2013). The policy, as evidenced in this opening statement, concerns itself primarily with acknowledging and advocating for the value of the arts in health policy settings, rather than legislating about the work itself. Therefore, at the outset, the framework itself appears to be solving the problem of a lack of advocacy or knowledge about the benefits of working within collaborative arts and health spaces. This is the initial proposal of this policy, framed clearly in the opening 'commitment' from the ministers.

Beyond this initial proposal there are other policy proposals evident and much can be learned about how the arts are perceived as 'useful' in and for such settings. According to the framework, the arts and health has an impact 'by changing individuals' attitudes to health risks and supporting community resilience' (CoA 2013, 1). It goes on to allocate benefits such as 'improved communication, better understanding, attitudinal change and clinical outcomes'. This aligns with Cahill's (2013) idea that health and human relationship educators are 'in the business of influencing behaviour' (178) and represents attitudes and behaviours as 'problems' that arts and health collaborations, and/or this particular framework, can solve. Within the policy, participants' attitudes and lack of resilience in communities facing health issues are represented as problematic. This idea responsibilises participants and communities – if the solution is a better attitude and more resilience, then the responsibility for being healthy falls on them. Finally, it allocates the 'solution' of the arts to, for the most part, the development of specific skills and knowledge – communication, understanding, and attitude (which can often be linked to awareness). Clinical outcomes are also listed but not explicitly outlined in depth. On page three, the authors state that promoting health and well-being and health literacy using the arts can reduce obesity. While a reduction in obesity can be interpreted as a clinical outcome, the combination of this with health literacy positions this reduction as again, an increase in knowledge and awareness.

An example of a drama program with a well-being focus is the ACT MindMatters Well-being Festival of Drama and Dance (CoA 2010). This program is facilitated as a co-curricular activity within schools in the Australian Capital Territory with students in years 7–10 and 11–12 (two distinct groups). The program sees students working in collaboration with teachers (usually drama, dance, and health and physical education teachers), school coun-sellors, and each other to develop a 10-minute performance about mental health and/or well-being. Our discussion here is not a comment or commentary on the program itself, but rather attends to a document 'Values education for Australian schooling: building values through drama and dance with a wellbeing focus' written by the Australian Government about this program. According to this document, the program helps students develop social skills, gives them knowledge and skills in resilience building, allows them to actively address issues related to well-being, develops responsibility, and empowers participants to take part

in a positive school culture (CoA 2010, 1). In this document, but common to the field more generally, there is a valorisation of education discourses in writings about drama and well-being (Freebody and Goodwin 2018). The role of drama to achieve these outcomes is described in the document as 'an excellent way of involving students in engaging and relevant research and experimental work; *building their knowledge and positive attitude*s in the area of mental health; *enhancing their respect* for people experiencing high mental health needs; *increasing their understanding and tolerance* of others with mental health issues' and promoting the inclusion of 'different' others in school life" (italics added, CoA 2010, 2). The 'problem' of well-being is therefore 'solved' by educating people about it. This increased knowledge is unproblematically and commonsensically linked with tolerance and respect. If this is the solution, however, the unstated problem is the participants' current knowledge and attitudes. Interesting to note, this document strongly aligns with the values and proposals made by the National Framework for Arts and Health through its focus on building understanding and (therefore) attitude change. It does not as easily align, however, with Davies (2015) finding that well-being discourses are increasingly connected to personal satisfaction and happiness.

There are different ways of perceiving the program's outcome statements listed above. On the one hand, the focus on building knowledge and understanding orients to the notion that knowledge can be 'had' and therefore places the responsibility of 'having' on the participant (and in turn, considers those without the knowledge as problematic). This can be considered a neoliberal way of constituting subjects, through policy proposals that simultaneously problematise and responsibilise groups of people. On the other hand, although this document does responsibilise the participants to 'be the solution' – the 'solution' presented is 'pro-social' – explicitly connected to the more community-oriented goals of tolerance and compassion for those suffering ill well-being, rather than a pursuit of individual happiness. The participants here are positioned as in need of education to participate in a society in which well-being is problematic for some, rather than positioned as those suffering from a 'well-being problem'.

'Evaluating shared stories youth theatre program' (Roberts, Lobo, and Sorenson 2017) is an article that reports on an interactive theatre and drama-based strategies program to promote sexual health among multicultural youth in Western Australia. The article contains several policy proposals about the place of drama interventions as solutions to the 'problem' of sexual health in multicultural youth. For the purpose of this paper, however, we will focus on one such proposal that connects with our discussion above: the use of education discourses to position drama interventions as 'solutions'. The document achieves this by explicitly problematising the Migrants' educational experiences, referring to 'disrupted schooling prior and post arrival in Australia, and therefore have limited opportunity to receive accurate sexual health information during adolescence' (31). This positions education – specifically schooling – as the place young people receive *accurate* sexual health information and therefore builds a relationship between schooling and sexual health, through information and knowledge that is then commonsensically and implicitly linked to healthy behaviour. Key to this proposal is a focus in the document on participation and engagement – the notion that active involvement of participants is proof of knowledge, skill, confidence, or positive attitude change (36) by allowing 'participants to demonstrate their knowledge and skills' (35). This project, similar to others discussed in this paper, focused not only on governing individuals' sexual health practices (through increasing

their personal attitudes, knowledge, and skills) but also engages the participants to be 'peer educators and good communicators of sexual health information' (30). This puts the responsibility of their peer and community's sexual health practices on the participants. It is at once neoliberal in its responsibilising of the participants and social in its focus on community (rather than just individual) change.

Drawing these documents together, there are three common influencing proposals about theatre/drama and well-being:

- The *attitudes* of participants towards themselves, others, or well-being issues needs to change – both the programs and the framework orient to the role of theatre/drama programs to change attitudes, by building tolerance towards others, reducing stigma, understanding the importance of sexual health. There is a tacit, common-sense connection made here that once participants have changed their attitudes, they will change their *behaviour* (and practise safe sex, build a tolerant community, seek help, and so on).
- Participants do not now have enough knowledge, skills, or understanding of the relevant well-being issue and therefore the role of the theatre/drama program is to educate. There are two assumptions drawn from this – firstly that the education will promote healthy choices and secondly that education will lead to behaviour change. 'Evaluating shared stories youth theatre program' document made this connection more explicitly than the other documents; evaluating the outcomes of the program by testing participants post-program knowledge about how to access services related to sexual health.
- All three documents explicitly oriented to theatre or drama as a solution to 'the problem' (of well-being, lack of resilience, lack of knowledge, sexual health, and so on) because of its ability to engage participants. Moreover, two of the documents explicitly referred to 'active engagement' or the 'active process of engagement'. The active involvement of the participants, as opposed to passive reception, was connected to empowerment and relevance for the participants.

There is a potential tension that exists in these three common proposals. Active participation allows for participant 'empowerment', for participants to have agency and voice to contribute to the theatre or drama; however this is only successful when the action the participant decides to take aligns with the purposes of the program. As Snyder-Young (2013) reminds us, 'popular positions and ideas are not necessarily progressive' (40). So, while theatre/drama programs might empower participants to be engaged and actively devise plays about well-being, the success of the program is only evident in those participants who conceptualise well-being in ways that are deemed appropriate by facilitators, funders, and institutions. Drama/theatre/performance for well-being exists to address a predefined well-being 'problem'. In order to be 'successful', therefore, the end point of the drama work must arrive at a place that suitably 'solves', or at least addresses, that problem in the 'right' way.

Points of tension in Aotearoa New Zealand

Arts in health and well-being contexts in Aotearoa New Zealand have been historically under-resourced, under-recognised, and under-researched (Walls, Deane, and O'Connor 2016). A recent *Arts in Health* review, for example, identified the lack of sustainable funding and policy recognition as preventing this area from developing (Bidwell 2014). In 2018, however, the context seems poised for change. The Prime Minister and Minister for Arts, Culture and Heritage, Rt Hon Jacinda Ardern (2018), stated: 'Budget 2018 lays the foundations for a significant programme of work that highlights the essential role the cultural sector plays in the wellbeing of our society'. Creative New Zealand (CNZ), The Arts Council of New Zealand Toi Aotearoa, has engaged with the development of Te Ora Auaha, a sector-led alliance of organisations and practitioners, intent on creating a cross-disciplinary innovation hub for arts and well-being. CNZ has also made a submission to the government-led Mental Health Inquiry advocating for public funding to launch a national Arts on Prescription scheme (Pannett 2018). Finally, in contrast to trends elsewhere, some philanthropic trusts are shifting from 'quick-fix' individualised solutions to long-term systemic change. But, tensions still exist.

Our examination of two reports commissioned by the previous government to inform youth mental health policy reveals tensions between competing discourses of mental health and well-being. The first document, 'Improving the transitions – reducing social and psychological morbidity during adolescence' (Gluckman 2011), was produced by the government's chief science advisor with a taskforce of specialists from 'relevant science' disciplines (13). Commissioned to make policy recommendations and inform government youth mental health strategy, the report highlights impacts of environmental challenges and complex socio-economic factors on youth well-being. But, ultimately, its policy recommendations are based on an individualised, bio-medical conception of mental health. This is evident in its focus on risks posed by young people's biological and neurological development, alongside problem adolescent behaviours such as poor impulse control, lack of maturity, risk-taking, and excessive alcohol consumption. The report proposes interventions to improve personal behaviours, attitudes, and relationships, placing responsibility on individuals and communities for improved well-being. Young people are represented as inherently problematic and in need of interventions to make them more resilient to challenging life environments. One contributor Sue Bagshaw (2011) critiques the tension between 'improving the individual with adherence to standards and punishment for failing' (84), and the evident need to improve wider conditions. The opportunity to call for policy solutions to create healthier life environments, however, is largely missed. Participation in community and out-of-school activities is acknowledged once, as a way to promote adolescent development and well-being. However, in the context of 'normative and prescriptive' conceptions of well-being (Low 2017, 15), such interventions are expected to address mental health by reducing preconceived risks and problem behaviours in individuals. This is amplified by an insistence that funding should only be available for interventions with evidence produced through scientific methods. So, while different conceptions of well-being are present in this report, it ultimately represents medicalised, individualised conceptions as the most legitimate. To be recognised as credible providers, arts organisations have needed to represent their work as effective forms of normalisation and responsibilisation.

In 2015, the *Youth Mental Health Project Research Review* (Social Policy Evaluation and Research Unit 2015) was produced to accompany an evaluation of the government initiatives emerging from *Improving the Transitions*. The report represents a significant shift in thinking. Whilst acknowledging the value of individually focused interventions, it emphasises the impact on well-being of factors such as inequality, poverty, and unemployment. It recommends policy-level interventions to address these determinants and create nurturing social environments. It highlights the limitations of the bio-medical paradigm, stating that 'a lack of robust empirical evidence does not necessarily mean that an intervention is ineffective, and conversely well-researched interventions are not necessarily the most effective' (18). Finally, the report acknowledges the shift in youth policy over the last 20 years, in New Zealand and internationally, towards a positive conception of youth, and the notion of Positive Youth Development (PYD).

PYD focuses on young people's strengths and system-wide approaches to promoting well-being (Lerner et al. 2012). The Youth Development Strategy Aotearoa (YDSA) is a seminal document used nationally to inform youth engagement practices (Ministry of Youth Affairs 2002). YDSA departs from western approaches to well-being, marked by deficit thinking and individualism (Beals 2015), and aligns with Māori and Pasifika models, focused on collective well-being and holistic relationships between mind, body, spirit, family, and environment (YDSA 2002). Well-being from a Māori perspective is inextricably linked to the values, practices, and communities in which individuals live, and is inseparable from the health of land and environment (Blisset 2011, cited in Social Policy Evaluation and Research Unit 2015, 34). The YDSA represents youth as partners. Responsibility for their well-being lies not with individuals or communities, but with the whole system. YDSA underpins key funder strategies, including the Vodafone New Zealand Foundation, which we discuss below. However, critics suggest that instead of opening up opportunities for new approaches, practices informed by this more holistic conception of well-being remain constrained by a neoliberal context, which measures positive development in economic terms and defines young people as a drain on state services (Beals 2015).

Tensions between different discourses of responsibility and well-being extend into the funding context. For example, the donors we examine focus attention on social determinants of well-being but do not fully move away from individualised solutions. First, the Peter McKenzie Project (PMP), a funding scheme of the J R McKenzie Trust, was recently set up to spend $15 million NZ dollars over 20 years to 'contribute to a significant reduction in the number of tamariki [children], rangahi [youth] and whānau [families] living in hardship and poverty'.[2] The project website avoids simplistic definitions of poverty that stigmatise or responsibilise 'the poor'.[3] Instead, poverty is framed as a complex set of 'circumstances' and 'factors' preventing some children and families from 'flourishing'. Helping the most disadvantaged is represented as something that is fundamentally for the good of society. The guidelines discourage ideas for services targeted at specified groups and encourage ideas for long-term changes to 'rules', 'systems', and/or 'underlying values and goals'.[4] Applicants are directed towards ideas to improve societal well-being by addressing 'thinking, systems and structures', including 'the legacy of colonization' and 'economic policies like neoliberalism'.[5] This scheme opens up space for solutions that explicitly counter neoliberal responsiblisation by inviting contemporary forms of civic responsibility (Trnka and Trundle 2014). Arts

practitioners and organisations might propose ways of addressing social and economic determinants of well-being by provoking public debate or enabling people to imagine other ways of being together. While the scheme challenges neoliberal capitalism, however, its stated vision of giving all families 'access to decent jobs and to capital'[6] set its limits on more just forms of capitalism, rather than radical economic change.

The Vodafone New Zealand Foundation (VNZF) launched a new strategy in 2017, to spend 20 million dollars over 10 years. Their vision is to create 'a thriving and prosperous Aotearoa New Zealand where all young people can live lives they value'.[7] VNZF seeks to support ideas for 'generat[ing] better outcomes for the most excluded and disadvantaged young people', including 'those with disabilities, special needs and those who struggle with mental wellness'.[8] Consistent with the YDSA, VNZF distances itself from deficit-based youth services, calling for changes to 'the systems, environments, contexts and ecosystems that wrap around and contain their lives'.[9] But, the strategy simultaneously categorises certain young people as 'high risk', and thus problematic, and represents the problem as the conditions preventing these young people from living 'lives they value' (VNZF 2017). The solutions called for by VNZF are social 'innovations', 'collective' approaches and 'disruptive' activities to achieve 'systems-level impact' (VNZF 2017). But, ultimately, disadvantage and exclusion are represented as being solvable by improved 'access to resources and opportunities', envisaging individuals equipped to 'thrive and prosper' (Vodaphone New Zealand Foundation 2017). This strategy opens up opportunities for applied theatre to work in ways that hold systems and structures accountable for social exclusion and disadvantage, rather than individuals, representing a potential challenge to responsiblising policy and service provision. But, we argue, its vision leaves other neoliberal ideas undisturbed (Trnka and Trundle 2014).

Susanna Trnka and Catherine Trundle (2014) argue that multiple meanings and forms of responsibility 'extend, challenge or co-exist with neoliberal ideas' (136). This is evident in the different forms of responsibility represented in the discourses of PMP and VNZF. Both schemes evoke a sense of responsibility as 'inter-relational care', 'constituted through the dual aspects of recognition and action motivated by one's commitment to welfare of the other' (Trnka and Trundle 2014, 142). But, in VNZF, a recognition of and commitment to care for the welfare of others sits in tension with the need to produce subjects well equipped to prosper within neoliberal social relations. In addition, the ideal of 'systemic social justice' (VNZF 2017) sits in tension with aspects of the concept of social innovation, which can be viewed as 'governance-beyond-the-state' (Swyngedouw 2005). The PMP evokes a sense of civic responsibility, an obligation to society to care for and 'honour' fellow citizens and work together for just and equitable outcomes for all (Trnka and Trundle 2014, 146). It does so, however, while acting according to the neoliberal 'dispersal of responsibilities of the state to other entities' (140). Underlying both of these funding programs, then, is the idea that private actors must step in to solve social problems, further transferring responsibility for well-being into the private sphere.

Conclusion

Drawing together our different perspectives from Australia and Aotearoa New Zealand, we have critically explored the ways in which the relationship between drama and well-

being is constituted by policy, funding, and program evaluations in these two contexts. This is not intended to be a comprehensive mapping of the field or the issue. Rather, our analysis is aimed at prompting further dialogue about the ways in which socially engaged arts practice can function as a dispersed form of governance, constituting particular individuals and communities as problems and contributing to the legitimisation of normalising solutions. We have focused on drama/theatre/performance and well-being, as an area of practice in which, we argue, this issue is heightened. But, we have also highlighted instances in which multiple discourses compete and intersect, opening spaces in neoliberalised policy funding contexts for applied theatre to respond to social and holistic notions of well-being and alternative forms of responsibility.

Notes

1. It is important for us to acknowledge here that there are reams of literature available (e.g., Neelands 2009; Boal 1979; Freebody and Finneran 2013) that address the importance and benefits of participatory processes in drama and applied theatre. As practitioners, we believe that this participation is one of the defining aspects of drama work and its potential for social change. We also, however, believe that as a core principle of our field, this notion should be unpacked critically, which we attempt to do here.
2. https://jrmckenzie.org.nz/program/peter-mckenzie-project/.
3. https://petermckenzieproject.org.nz/poverty-in-new-zealand/ .
4. https://petermckenzieproject.org.nz/making-a-lasting-change/ .
5. https://petermckenzieproject.org.nz/making-a-lasting-change/.
6. https://jrmckenzie.org.nz/program/peter-mckenzie-project/ .
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Funding

Notes on contributors

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Molly Mullen is a Senior Lecturer at the University of Auckland's Faculty of Education and Social Work with a background in theatre education, youth theatre, community arts and children's theatre. Her research examines the economies of applied theatre and socially engaged arts practice, encompassing issues related to policy and funding, as well as forms of organisation, management and work. She is also involved in projects related to the arts and ecological issues, drama and performance in early childhood education and the arts in criminal justice contexts.

Amber Walls is a creative learning and engagement practitioner-researcher, and doctoral candidate at University of Auckland where she is exploring the potential for creative engagement to make a difference to youth wellbeing in Aotearoa New Zealand. Amber has over 15 years' experience using creative partnerships as a powerful tool for learning, community building and social change locally and overseas. A passionate champion for social justice and equity, Amber has initiated a number of award winning programmes supporting marginalised young people to articulate and amplify their visions and voices, and supporting practitioners to work in more creative, innovative and inclusive ways.

Peter O'Connor is Professor of Education at the University of Auckland Faculty of Education and Social Work. He is also the Academic Director of the Creative Thinking Project, a large philanthropically funded multi-disciplinary research project that focuses on the contribution creativity makes to the lives of individuals and communities. His most recent work includes creating theatre with Auckland's homeless community and an applied theatre project on sexual consent with first-year university students.

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