

Vocal artistic research methods: tools for accessing an atmospheric experience

Heidi Fast
Aalto University
heidi.fast@aalto.fi

Biography

Heidi Fast is an artist-researcher and singer, who is currently finalizing her artistic doctoral research on the transformational potential of non-verbal affective communication, in Aalto University. The research is actualized in cooperation with Helsinki University Central Hospital of Psychiatry. The themes of the artistic research are imminently connected with art working, that involves wide projects and series of artworks, such as Hospital Symphonies (2015–2019), which was actualized to the hospital space, concert hall and radio.

Abstract

With this article, I want to introduce a specific way of doing research according to which my artistic research methods have developed, and can operate as tools for creating access to the non-verbal, vocal atmospheric experience. By atmospheric experience, I refer to a spatial, surrounding and bodily felt mood, created by shared vocalizing, that might modify the ways in which we experience the boundaries between each other. Even though the transformational potential of artistic research has been widely discussed during the last

decades (Borgdorff, 2012; Kirkkopelto, 2015; Rouhiainen, Anttila & Järvinen 2015; Varto, 2017), it is not always clear for the artist-researcher, how the methodological path is actually taken and the experiential knowledge generated within particular kind of artistic work (see Savin-Baden & Major, as cited in Savin-Baden and Wimpenny 2014, p. 2). I wish to add to this discussion by unfolding the key features and necessary conditions of my vocal artistic work turned into a research methodology in the context of psychiatric healthcare. My understanding is that only by creating and using certain kinds of research tools, that have in this case evolved from vocal practice, it is possible to obtain precisely certain kind of knowledge, which would not be possible to obtain otherwise. With this work, that involves both the aesthetical and the ethical aspects, I examine, how non-verbal vocalizing, as dynamic interaction with the world, is significant in situations in which verbal communication might be difficult. The aim of this boundary work¹ between the artistic research and psychiatry is to create shared ground for co-operation between different epistemic paradigms and understandings.

Keywords

Vocal voice, Atmosphere, Affectivity, Artistic research, Psychiatry

Setting the sensitive research question

According to historian Petteri Pietikäinen (2013, p. 12), “a crazy person is different, abnormal, strange; someone, with whom the communication is somehow twisted” [my translation]². The experiences of despair, chaos and suffering are often manifested exactly as obmutescence: as unwillingness or disability for verbal communication; as an experience, which can be dif-

difficult to access for both the person her- or himself, the relatives and the psychiatric care staff. The ICD-10 classification of mental and behavioral disorders³ pays attention to the challenges of verbal communication, according to which, certain situations when a person cannot be contacted with normal conversation, are considered as diagnostic criteria. For example, “mutism”, “paucity of speech” or “rambling and incoherent speech” are mentioned as some of the diagnostic criteria for schizophrenia (F20) (Psykiatrian luokituskäsikirja 2011, pp. 106–107). Also, the diagnostic criteria for severe depression mention, for example, “reticent in comparison to the normal” (Ibid, 2011, p. 116)⁴.

But why is it important to pay attention to the diagnostic criteria that concerns verbal communication in the context of artistic research? I encountered a similar kind of obmutescent, as I visited a psychiatric ward as a relative some twelve years ago. A deep silence in the ward fell into my body as a painful experience. The affective quality of this silence felt isolating and lonely, something which I was not able to fully verbalize. I realized then, that certain dimensions of human suffering are manifested within an experiential mode that remains somehow incomprehensible: that does not easily or perhaps not at all translate to the verbal explaining. I began to elaborate an idea, what would happen, if I could create an artistic space for sensorial vocal encountering within this kind of sensitive and vulnerable environment⁵. It felt important, because all activities of speaking, vocalizing and listening always takes place in a societal and epistemological context, and the adult non-verbal vocal expressions are easily considered uncanny or too intimate in the western societies.

A starting point for my research began to compose. Whereas the purpose of psychiatric diagnoses is to help implying appropriate treatment for an individual, and thereby decreasing their distress, I approach painful experiences in my research through the experience of connection, and the ways in which this connection may be hindered⁶. Besides seeking to relieve symptoms, (that is of fundamental importance), I ask in my research, how would it be possible to transform

the mode of being in relation itself? How to create another (side)path to the experience that remains unspeakable?

The research is actualized in co-operation with the Helsinki University Central Hospital (HUCH) of Psychiatry in Finland⁷, and particularly the hospital HUH Psychiatry Center⁸, and their patients. I contacted the particular hospital and came to work with them, because as the largest university hospital in Finland, it is one of the central operators of the field, and importantly also, because they were open for collaboration. During the research, I have developed an artistic practice of vocal work, and with it, invited voluntary patients and those staff members, who were able and willing to join, to attune to a shared resonance field. The main research interest has to do with the question of change: how does vocal work transform the experience of connection to oneself and between the participating people?

The research is realized as part of the project *Experiential Demarcation: Multidisciplinary Boundaries into the Affective Foundations of Interaction*⁹ which emphasizes the embodied and affective basis of how we experientially demarcate ourselves from the others. Experiential demarcation refers to the experiential processes of establishing, revising, protecting and also blurring one's interpersonal boundaries. Clear boundaries protect one's integrity and detachment on one hand. On the other hand, the elasticity of boundaries enables such modes of communion, that would not be possible if we consider ourselves as distinct.

Human voice is an interesting sensorial example of the experience of permeable demarcation, because vocal experiences stir the cognitive and dichotomic understandings of how we consider the boundaries between the inside and outside, and, me and you (Anderson, 2009; Böhme, 2014; Vadén & Torvinen, 2014; Tarvainen, 2016). During the sensorial activity of vocalizing, the perception of one's own boundaries is continuing also outside one's own bodily space. While I am aware of my clear boundaries as a discrete unit, my voice does not only sound inside my body, but emits also outside my bodily space. I can hear it simultaneously from the

inside and from the outside. I can hear other people's voices through my ears, but they can enter me also through physical vibration, particularly when one is in close proximity with another. Shared vocalizing thus creates a blurred area – a kind of an atmosphere – between subjects that are usually considered to be experientially separate from each other, where the inner and outer space, myself and the other, become fundamentally entangled on the level of sensorial perception. In an organic relation to the vocal atmospheres, also the thematic of breathing would be interesting to elaborate on, however, it is an entirely own area of human activity and research, and is therefore not possible to cover within the limits of this article. Also, as I will later specify, these kinds of atmospheric experiences might also have political consequences, that have to do with the ways in which the normal procedures of interaction are socially determined, and how we, for example, consider the boundaries between what is understood as sick and as healthy.

This kind of a research setting is involved with highly sensitive ethical concerns. The mandate for the work is the approval from the Scientific and Ethical Review Committee of Helsinki University Central Hospital¹⁰, and, HUH (Helsinki University Hospital) research permit, as well as the informed consents from the participating patients. As an artist-researcher, I am therefore obligated by the ethical and legal duties of the health care providers with confidentiality of patient information. In practice this means, among other things, that I need to obtain total anonymity of the participants and cannot name the people who participated substantially to the producing of the vocal material.

During the research, two participatory artistic workshop periods have been actualized with the patients of HUCH Psychiatry. The first period took place in February 2014 to May 2014, during which I had a possibility to meet all together 25 people from four different closed wards of the HUH Psychiatry Center in Helsinki. These people included inpatients mainly suffering from severe psychiatric disorders, such as psychotic symptoms or severe depression, and a few staff members. The second and actual participatory artistic research process took place from

October 2016 to March 2017 as 15 group meetings with eight outpatients of HUCH Psychiatry, suffering mainly from both psychoactive substance use disorders, and severe mental disorders. Also, psychiatric nurse, Heimo Spelman, from HUCH Psychiatry attended the meetings. We would create for example such sounds with our voices, that would resonate as much as possible in our bodies. The vocal sessions were recorded and published as series of artworks, called *Hospital Symphonies*.

Hospital Symphonies as artistic outcomes of the research

The first artwork of the *Hospital Symphonies series*, *Vocal Nest*, was actualized as an eight-channel, non-verbal human sound installation, situated in the central stairwell of a ten-floor hospital building of the HUCH Psychiatry Center¹¹ in 06–07/2015. It was designed to be participatory, including (in the different stages of the artistic process) first 25 voluntary inpatients from 4 closed wards of HUCH Psychiatry Center and some staff members whose voices sound in the artwork together with mine. And later, as the installation was displayed to the hospital space, it included also other patients from the hospital, their visiting relatives, and the staff members who came to experience and listen to the work. The aim of *Vocal Nest* was to invite new conditions for sensibility within the psychiatric hospital space.

The second artwork of the series, called *Hospital Symphonies*, was a concert-installation performed in Helsinki Music House 12.1.2018 and Lapinlahti Hospital 21.2. and 22.2.2018. Eight outpatients of HUCH Psychiatry and a psychiatric nurse Heimo Spelman vocalize with me in the artwork. The artwork is based on the vocal non-verbal material recorded from the longer artistic intervention period with the patients of HUCH Psychiatry during the years 2016 and 2017. The composition of the concert-installation was performed together with singer Sanna Kurki-Suonio–Rueth and sound artist Juha Valkeapää. *Hospital Symphonies* aimed at creating a spatial and dynamic environment for collective attunement.

The third and the last part of the series, called *Sairaalasinfonia 3.0*¹², is 50 minutes long radio essay published by the Finnish public service broadcasting company, YLE Radio in February 2019. This artwork is also based on artistic intervention period with the patients of HUCH Psychiatry in 2016 and 2017. Besides non-verbal voices, the radio essay involves also anonymous interviews of the participating patients (read by actors), the psychiatric professionals and my own auto-ethnographical written and vocal experiences. The aim of *Sairaalasinfonia 3.0* was to explore the experiential boundaries between sickness and health, and the possibility for connection.

The ethical questions regarding working with the psychiatric patients from the professional position of an artist-researcher and composing their voices as part of the research artworks, are complex and difficult, and relate with the question of vulnerability. Vulnerability is key for my practice in several ways, which also inform the artistic methodologies as well as the outcomes of the research. It means a way of approaching human as sensitive and dependent from others, as also capable of connection. Vulnerability is an ambiguous concept that has different connotations in different contexts. In the methodological level, I include the model of psychic vulnerability, which stands for individual's vulnerability to react to stressful situations with certain psychological symptoms, such as psychosis¹³. However, I approach vulnerability through a different model. In my research, I seek to actively open to the sensorial and affective modes of experience and connection, which could also be called human sensibility. By a self-regulated process of allowing oneself to become vulnerable, an access to the experience of connection might open.

Artistic methods as research tools

However, the experience of connection is not easy to generate, particularly if one is experiencing a lot of suffering, bodily tension, and trouble with verbal expression, or even certain

indisposition to the experience of being alive itself. This is why I have created ethically oriented vocal practice to help the participants to yield into the shared artistic experience. The artistic practice has turned into the methodology of the research¹⁴. The task of vocal work is to create a safe space that enables for the affective and vulnerable experience to emerge. The method, that is divided into three overlapping parts, can be considered as tools for accessing the atmospheric experience, producing knowledge on this experience and also exposing the experiential results of the research. The idea of understanding artistic research methods as “tools” for conducting a certain change is inspired by many thinkers and artists, who have also affected the development of my research. For example, artist and psychoanalyst Bracha Ettinger (2016, p. 151) describes the “place” of art as the potential “transport-station of trauma”, that allows for occasions of encounters, which might become the realization of healing encounters which Ettinger calls “borderlinking”. Also, media researcher Franco Berardi’s (2015) work on the contemporary changes occurring in our aesthetic and emotional sensibilities, has influenced my work, as he searches for new tools for interaction and understanding for the social body to resurrect the sphere of sensibility. Philosopher Alva Noë (2019), in turn, proposes that works of art are “strange tools”, that have the power to reorganize the system of our shared habits and skills. Inspired by these thinkers, I will next specify the key conditions and requirements for how the vocal artistic research methods could be understood as tools for potentially creating access to the atmospheric experience.

Vocal-affective attunement

Vocal-affective attunement is activity based on non-verbal human voice: more specifically, the active using of one’s own voice. Here, I refer to one’s own voice, according as it appears in each particular moment, be it strong and steady or shivering and crumbling. The research tool is organized depending on this intimate, vibrant and acoustic foundation, completely entangled

with its surroundings. By the concept “affective attunement”, I refer to an intersubjective, affirmative connection, where affective attributes can become known and sensed without verbal communication, by child psychologist Daniel Stern (2004, p. 241). Affectivity of voice refers in turn to a scale dimension in every person’s voice between information oriented verbal communication and bodily attuned vocal forms of communion (see also Massumi 2015, p. 205, 212).

The methodological starting point is, that the particular kind of experience of connection, emerged in this research, would not be possible to generate, and thus experience, without vocal-affective attunement. As an artist-researcher, I cannot however vocally “attune” the participants. Vocal-affective attunement is activity that participants are doing together. The attunement appears potentially as a gentle modification from the more cognitive and verbally oriented dialogue to the affective and sensorial vocal communion. Also, slowly shifting from the registers of silence to the shared vocal activity might be even more essential in the sensitive context of the research. The task of vocal-affective attunement is to create an experiential chance in the ways in which the participating people experience connection to themselves and the environing situation, and also produce sensorial research material of this experience. It is thus a self-regulated action and skill of creating a different kind of perception of the world, and the way we relate to each other, through the interoceptive, auditive and situation-sensitive vocal activity. I am inspired here by the “action-perception loop” (Hari & Kujala 2009, p. 455), according to which all human action and sensory perception are in constant relation with the environment, and thus cannot be considered separately.

Vocal-affective attunement requires above all emotional safety. As sensorial interaction, it differs from the conventional rules and habits of verbal conversation, that are highly valued in the western societies. Also, it requires, that I, as an artist-researcher, open and allow myself to become vulnerable first. Only through attuning to the interoceptive sensing of my own voice

joined with the other voices in a particular situation, I am able to invite the others to join. Through such an orientation, the power positions between people may diminish, and human to human communication become more accessible.

One example of the sensorial and emotional effects of vocal-affective attunement are the patient's experiences. In the beginning of the process, all the participants reported an agonizing experience, that they could feel in their bodies, but that was challenging for them to fully verbalize and share with others. After participating to the period of the vocal work, the participants reported that they had experienced getting in touch to these bodily sensations and emotions in a new way. Perhaps a bit surprisingly, vocalizing together also helped many participants to find words for their experiences.

Compositional process

The sonorous research material, produced and recorded via the tool of vocal-affective attunement, is the basis for the next methodological tool, the composing of the shared voice. Composing is an artistic process I actualize partly alone and partly by directing the artistic working group of the research artworks. The task of composing is not only to create forms to display the vocal material created by the patients. Rather, it has to do with creating a sensorial interaction with different kinds of vocal experiences produced in the research by artistic means¹⁵. The artistic strategies I use, and choices I make in this phase, are oriented through the research question. By using the means of vocal art, sound art, contemporary music, installation art, site and situation specific art, and participatory art practices, the aim is to find such compositional structures, that would reveal (sensorial and affective) evidence of the process of what happened to the experienced connection to oneself, and between people, as they gradually began to sound together.

In practice, I listen to and linger on the recorded voices and seek to recognize what is going

on within them; what emerges from this particular material? With an aim of trying to intensify what these voices already communicate, I then improvise with my own voice with the recorded voices afterwards and record also these vocalizations. I do not “manipulate” the patients sounds by effects other than sound cutting, but create a temporal, musical and spatial composition of the whole vocal material that would introduce the experiential changes within the encounters. The task of composing is therefore closely related to the sensorial forms of publishing the research.

The process of composing could then be seen as a material and technical path, for creating a spatial and dynamic environment for the listeners of the artworks to access the particular atmospheres that were created by vocal-affective attunement.

Crucial is, that the forms of composition are also affected by the ethical concerns of the research. The process has challenged me to develop an ethically-aesthetically oriented practice of composing. The ethico-aesthetical approach was introduced by the psychiatrist Felix Guattari (1995) already a few decades ago. Guattari proposed, that the artistic strategies should be based on the reformulation of the double process between the aesthetical and ethical (Guattari, 1995, pp. 98–118). In practice, this means that I try to modify the ethical concerns, like the anonymity of the participants and the aim of reducing their suffering, by artistic means so that the issues would somehow become sensed and heard in the artistic parts of the research.

Finally, composing of the research publication is also affected by the question of what kind of knowledge is produced in the research. As I work specifically with the non-verbal processes of interaction, I have searched for and created means, with which I would be able to transmit the non-verbal, embodied and sensorial knowledge (see Rouhiainen et al, 2015). By sensorial knowledge, I refer to a way of knowing, that is primarily implicit, immediate and affective (see Varto 2017, pp. 56–57; Fast, 2018). The challenge of such a form of knowing, is that it is the knowledge of the agent, which means in this case the shared agency of the vocalizers and the listeners. As such it calls for some kind of an experiential access to the researched phenomenon.

The term can however also be problematic. The intention is not to oppose the sensorial ways of knowing to the (other) scientific ways of knowing but pay attention to how the vocal atmosphere feels, and what can be known through the affective experience. In my research, I argue that only by paying attention and attuning to what can be known via embodied feelings and sensorial activity of vocalizing and listening, the whole ineffable experiential phenomenon begins to open.

Attuning listening

The tool or attitude of attuning listening can be conceived of as a subtle participatory practice for the listeners of the research artworks that aim at encouraging the listener to sensitize to the affective qualities of human voice. However, attuning listening is also involved in the earlier phases of the methodological processes of vocal attunement and composing. The main research task of attuning listening is to strive for opening an occasion for the listeners to access the sensorial vocal atmospheres produced and composed in the research, and potentially become slightly changed by them.

In this sense, attuning listening can be conceived of as practicing one's sensibility (as a threshold for both; vulnerability and connection) in which not only the vocalizers but also the listeners expose themselves to the self-regulated process of becoming vulnerable, if they so decide. Perceiving the vocal information depends therefore on whether one is actively listening or passively hearing. Attuning to listen can really change one's experience (See also Noë 2019).

Noë (2019, pp. 118–140) reminds us, how looking always happens in a cultural context. Some things are supposed to be worth looking at while others are not. The same goes for listening. Certain kinds of voices, such as “rational” speech or “beautiful” singing are considered to be worth listening to. Other kinds of voices, such as howling and growling or other rudimentary attributes of non-verbal human expression are often considered uncanny: something,

that should rather be silenced. The tool of attuning listening relates then also to the question of tolerance, that is, to the question of what kinds of (adult) voices do we tolerate in general? What kinds of voices can become heard in our society? In that case, the voices within the compositions of the research “are” not something. The listener rather “finalizes” the voice and the tone it bears with her or his own interpretation¹⁶.

Attuning to listen is important because it has to do with the experience of being listened to. One of the main findings of the research is that the patients experienced that they got access to their own voices, they were able to express themselves, and as a result felt that they were being listened to. When we talk about “becoming heard”, we often refer to that what one is saying, is being understood. Non-verbal expression is however more vulnerable, bare and immediate than speech. It reveals something, one cannot necessarily pull back. Listening to such expressions – which nonetheless do not necessarily sound raw or untamed, but also beautiful – might be difficult to put up with. That is why the normal everyday activity of listening calls in some situations for a sensorial tool, that could modify our abilities to yield to listen to such voices that have not, on average, thought to be worth listening to. Here, the act of listening receives, not just sensorial, affective and cognitive, but also political nuances.

Conclusions: artistic research methods using, modifying and challenging the experience of connection

In this article, I have opened one specific way for how artistic research methods can enrich the discourse of experience research by using, modifying and challenging the ways in which we experience connection. I divided the particular artistic method, used in this research, to three, partly interlacing practices, that can be understood as tools for creating access to an atmospheric, sensorial experience. By means of these tools, that I have named *vocal-affective attunement*, *compositional process* and *attuning listening*, I explained, how the ethically ori-

ented vocal practice can help the participants to yield into the shared affective experience and get in touch with their bodily sensations and emotions in a new way. Within this process, vocal work utilizes the affective and sensorial modes of experience to be able to create connection between people in situations, in which verbal communication is not possible. The vocal compositions of the Hospital Symphonies -series, for their part, seek to reveal sensorial and affective evidence of the transformational process the participants went through – and that they were capable of creating connections during shared, non-verbal vocalizing.

I also referred to, how the process of attuning to such sensorial atmospheres did not, however, modify only the participating patients' experiences, but according to the results of the research, also many listeners of the artworks went through some experiential changes. One explicit example of this was, when the first artwork, *Vocal Nest* (2015), was actualized to the hospital space. The untamed and intimate voices, sounding within this particular hospital stairwell, challenged the experiential ways in which we consider ourselves as distinct. As elaborated earlier, the shared voices created a sensorial environment where the distinctions between subject and object, inside and outside, became blurred, because while listening to the artwork, one was not able to hear a difference between those who were patients and those who were not. Some of the staff members experienced these blurred boundaries evoked by *Vocal Nest* as uneasy or “awful”, and also were afraid the artwork would cause anxiety in the patients¹⁷. However, the inpatients of the hospital did not to my knowledge consider the sounds as distressing, but rather as moving and touching. Besides the experiences of concern, the shared sensorial and aesthetic experience created new kinds of communion amongst different actors of the hospital.

To summarize, along with concentrating on the patient's experiences, the vocal practice also shed light on the normal and socially approved societal practices and interactive procedures, that determine the terms and conditions for how we can experience and express connection in general in our society. That is to say, the attunement to the sensorial and affective experience,

by means of mutual vocalizing and listening, revealed how socially constructed everything we produce verbally is.

From within such situation-sensitive and interdisciplinary context, my research can be seen to take part to the emerging continuum of artistic research practices, which use experience as a research attitude, in diverse ways (Mäkikoskela & Tuovinen, 2017, p. 228; see also Heimonen, 2009; Mäkikoskela, 2015; Nevanperä, 2017; Rouhiainen, 2015; Tuovinen, 2016; Valkeapää, 2011). More specifically, it attends to the wide range of artistic methodologies which do not only explore, but also create sensorial and embodied experiences, and produce knowledge of the world from within these experiences. The process of describing the specific features of my vocal artistic research in this article, might hopefully increase critical understanding of the varied ways in which artistic research methodologies could be useful also in other fields of research and practice, such as psychiatry.

References

- Anderson, B. (2009). Affective atmospheres. *Emotion, Space and Society*(2), 77–81. doi: 10.1016/j.emospa.2009.08.005
- Berardi, F. (2014). *And. phenomenology of the end. cognition and sensibility in the transition from conjunctive to connective mode of social communication*. Helsinki, Finland: Aalto ARTS Books.
- Borgdorff, H. (2012). *Artistic research as boundary work. the conflict of the faculties. perspectives on artistic research and academia*. Netherlands: Leiden University Press.
- Böhme, G. (2014). The voice in bodily space. *Dialogue and Universalism*(4), 54–61.
- Daykin, N. (2019). Social movements and boundary work in arts, health and wellbeing: A research agenda. *Nordic Journal of Arts, Culture and Health*(1), 9–20. doi: 10.18261/issn.2535-7913
- Ettinger, B. (2016). *Art as the transport-station of trauma* (Y. Ataria, D. Gurevitz, H. Pedaya, & Y. Neria, Eds.). Geneva, Switzerland: Springer International Publishing.
- Fast, H. (2018). Vocal nest. non-verbal atmospheres that matter. *Journal for Artistic Research*(16). doi: 10.22501/jar.387047
- Hari, R., & Kujala, M. (2009). Brain basis of human social interaction: From concepts to brain imagining. *Physiological Reviews*, 89(2), 453–479. doi: 10.11527/physrev.00041.2007

- Heimonen, K. (2009). *Sukellus liikkeeseen – liikeimprovisaatio tanssimisen ja kirjoittamisen lähteenä. acta scenica 24*. Helsinki, Finland: Teatterikorkeakoulu.
- Kandel, E. (2012). *The age of insight. the quest to understand the unconscious in art, mind, and brain, from vienna 1900 to the present*. New York, NY: Random House.
- Kirkkopelto15. (2015). *Artistic research as institutional practice. yearbook on artistic research 2015*. Stockholm: Swedish Research Council.
- Massumi, B. (2015). *Politics of affect*. Cambridge, England: Polity Press.
- Mäkikoskela, R. (2015). *Ympäri, sisällä: kolmiulotteinen työskenteleminen kuvataiteessa*. Helsinki, Suomi: Aalto ARTS Books.
- Nevanperä, T. (2017). *In the flesh of sensibility: Unravelling incompleteness with art*. Helsinki, Finland: Aalto ARTS Books.
- Noë, A. (2019). *Omituisia työkaluja. taide ja ihmisluonto* (T. Kilpeläinen, Trans.). Tampere, Suomi: niin&näin.
- Pietikäinen, P. (2013). *Hulluuden historia*. Suomi: Gaudeamus Helsinki University Press.
- Rouhiainen, L. (2015). *Resonoivan kehon matkassa: tanssiminen, kokemus ja tutkimus* (V. Tökkäri, Ed.). Rovaniemi, Suomi: Lapin yliopistokustannus.
- Rouhiainen, L., Anttila, E., & Järvinen, H. (2015). *Taiteellinen tutkimus yhtenä tanssintutkimuksen juonteena. tanssiva tutkimus: tanssintutkimuksen menetelmiä ja lähestymistapoja*. Retrieved from <https://nivel.teak.fi/tanssiva-tutkimus/taiteellinen-tutkimus-yhtena-tanssintutkimuksen-juonteena/>
- Savin-Baden, M., & Wimpenny, K. (2014). *A practical guide to arts-related research*. Amsterdam, Netherlands: Sense Publisher.
- Stern, D. N. (2004). *The present moment in psychotherapy and everyday life*. New York, NY: W. W. Norton.
- Tarvainen, A. (2016). Vokaalinen soomaestetiikka. kehotietoisuuden esteettiset mahdollisuudet ihmisen äänenkäytössä ja kuuntelemisessä. *Etnomusikologian vuosikirja*, 28, 1-39.
- THL. (2012). *Psykiatrician luokituskäsikirja – suomalaisen tautiluokitus icd-10:n psykiatriaan liittyvät diagnoosit, luokitukset, termistöt ja tilasto-ohjeet 1/2012*. Helsinki: Terveyden ja hyvinvoinnin laitos. Retrieved from <http://urn.fi/URN:ISBN:978-952-245-549-9>
- Tirkkonen, S. (2018). *Experience in michel foucault's philosophy*. Finland: University of Helsinki.
- Tirkkonen, S. (2019). *Yksinäisyyden tunteet tove janssonin teoksessa muumipappa ja meri*. Retrieved from <http://www.psykoterapia-lehti.fi/verkkolehti/tilaajat/psykoterapia-32019/sanna-tirkkonen-yksinaisyyden-tunteet-tove-janssonin-teoksessa-muumipappa-ja-meri/>
- Tirkkonen, S. (2020). Yhteinen yksinäisyys. *Koetun yksinäisyyden filosofia. Ajatus*, 76, 401–421.
- Tuovinen, T. (2016). *Taiteellinen työ ja visuaalinen ajattelu – eräs havainnon tutkimushistoria*. Helsinki, Suomi: Aalto ARTS Books.
- Vadén, T., & Torvinen, J. (2014). Musical meaning in between: Ineffability, atmosphere and asubjectivity in musical experience. *Journal of Aesthetics and Phenomenology*, 2(1), 209-230. doi: 10.2752/205393214X14083775795032

Valkeapää, L. (2011). *Luonnossa.vuoropuhelua nils-aslak valkeapään tuotannon kanssa*. Helsinki, Suomi: Maahenki.

Varto, J. (2017). *Taiteellinen tutkimus. mitä se on? kuka sitä tekee? miksi?* Helsinki, Suomi: Aalto ARTS Books.

Notes

¹From the concept of "boundary work" within art and health, and artistic research contexts, see Daykin, 2019; Borgdorf, 2012.

²"Hullu on erilainen, poikkeava, omituinen; joku, jonka kanssa kommunikointi on jotenkin nyrjähtänyttä".

³Suomalainen tautiluokitus ICD-10 Psykiatrian luokituskäsikirja <http://urn.fi/URN:ISBN:978-952-245-549-9>

⁴Suomalainen tautiluokitus ICD-10 Psykiatrian luokituskäsikirja <http://urn.fi/URN:ISBN:978-952-245-549-9>

⁵See also Fast, 2018. <https://www.researchcatalogue.net/view/387047/387048>

⁶From the processes of demarcation which are experienced as hindered, problematic and painful, see Tirkkonen forthcoming; 2019; 2018.

⁷https://www.hus.fi/en/about-hus/Hospital_areas/huh_psychiatry/Pages/default.aspx

⁸<https://www.hus.fi/en/medical-care/hospitals/psychiatrycenter/Pages/default.aspx>

⁹<https://www.jyu.fi/hytk/fi/laitokset/yfi/en/research/projects/political-institutions/experiential-demarcation>

¹⁰<https://www.hus.fi/tutkijalle/tutkimuseettiset-toimikunnat/Sivut/default.aspx>

¹¹<https://www.hus.fi/sairaanhoito/sairaalat/hyks-psykiatriakeskus/Sivut/default.aspx>

¹²<https://areena.yle.fi/1-4654669>

¹³From the psychic vulnerability, see for example: <https://www.mielenterveystalo.fi/aikuiset/itsehoito-ja-oppaat/oppaat/psykoosi/Pag>

¹⁴See Kirkkopelto, 2015, p. 49; Varto, 2017, p. 98–109. In my research, I have also used qualitative methods, such as open interviews, and two psychiatric measurement tools (EQ5D-Vas and SWEMWBS), but in this article, I will focus on the artistic research methods.

¹⁵See also how artist-researcher Leena Valkeapää describes the methodological task of her artistic doctoral research 2011, 22.

¹⁶The viewers relation to art, also known as the "beholder's share", has been widely discussed particularly in the field of visual arts and neurobiology (see, f.i. Kandel, 2012)

¹⁷I inquired the reactions of the patients and staff members from the head nurses of the wards of the Psychiatry Center by emails and besides that got also some spontaneous verbal feedback from the shared moments of listening to the artwork in the stairwell.