A therapeutic landscape for some but not for all: An ethnographic exploration of the Bethlem Royal Hospital parkrun

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Abstract

This study sought to explore the experiences of those involved in the Bethlem parkrun. A mobile ethnography employing participant observation and informal discussion was conducted on the grounds of the hospital in London, UK. The findings focused on 'what it is like' to participate in this parkrun, and were organized into two themes: i) Bethlem as a Shared Leisure Space and ii) Shared Leisure Space, But for Whom? Findings illustrated the emplaced and relational experiences of some participants in this 'therapeutic landscape,' while highlighting that the events were exclusionary for others, namely service-users. These findings contrast the therapeutic landscapes literature which largely assumes their benefits are experienced equally. This work may provide further understanding of the individual and collective experiences of parkrun.

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Community-based physical activity programs which take place in 'green space', or 'blue space' may be experienced as therapeutic landscapes. In the mental wellbeing and health geography literature, therapeutic landscapes and enabling places have been used interchangeably in recent years to describe "the physical and built environments, social conditions, and human perceptions [which] combine to produce an atmosphere which is conducive to healing" (Gesler, 1996, p. 96). While 'therapeutic landscapes' were first conceptualized by Wilbert Gesler in 1992 to describe how certain environments contribute to or promote healing specifically, later understandings also more broadly included the health- and wellbeing- promoting aspects of such places (Cattell et al., 2008). Crucially, therapeutic landscapes do not simply denote the physical and built environment, but rather the ways in which individuals interpret and use the space, their aesthetic features, and more intangible social networks (Cattell et al., 2008; Smyth, 2005; Wakefield & McMullan, 2005). After criticisms that these spaces were being examined uncritically and assumed to be intrinsically healing (Conradson, 2005), more recent research has uncovered the ways in which emotional, embodied, and experiential experiences of socio-environmental contexts enable or constrain health and wellbeing for various individuals and has recognised the relational nature of such landscapes (Bell et al., 2017; Finlay et al., 2015; Foley, 2015; Kearns & Milligan, 2020).

Researchers have underscored the need to study therapeutic landscapes from an emplaced and nuanced perspective (Bell et al., 2018), framing the environment as something to be interacted with rather than upon (Fors et al., 2013). Emplacement locates the body in a wider social and material ecology, allowing us to recognize, "the specificity and intensity of the place event and its contingencies, but also the historicity of processes and their entanglements" (Pink, 2011, p.354). In this way, emplacement allows us to think about the spatio-temporal experiences of the Bethlem parkrun as a place-event, how human and non-human relations (including weather) shape these experiences, and how histories of places either perpetuate or challenge expectations and identities (Fullagar et al., 2019). A focus of emplacement aligns with a communitizing lens (Fortune & Whyte, 2011) which aims "to overcome historically situated dividing forces and move toward a vision of a shared community space with the ultimate purpose of genuine inclusion by all" (p.21).

Researchers have noted that the de-institutionalization of care in recent decades has paved the way for contemporary research into landscapes of 'community care' within 'post-asylum geographies' (Philo, 2000) which warrant examinations into the ways in which 'non-medical

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spaces' can foster support and healing (Doughty, 2018). Therefore, the current research on the grounds of a psychiatric institution starkly contrasts the trend of increasing 'post-asylum geographies' while the institution's expansive grounds simultaneously represent a non-medical space for non-service-user parkrun participants. Such a distinct context which represents different geographies, spaces and forms of care for different individuals has yet to be explored through a therapeutic landscapes framework. The application of the therapeutic landscapes theoretical framework among this clinical and non-clinical population is novel and unique as most of the previous research in this area has focused on either clinical populations and contexts (e.g., hospitals; Curtis et al., 2009) or everyday spaces of wellbeing (e.g., parks, Finlay et al., 2015). Relatedly, the application of this framework on the grounds of a mental health hospital (i.e., built environment) which also includes a vast green space and wooded area (i.e., natural environment) which can be accessed by the general public further extends the literature on therapeutic landscapes (Doughty, 2018).

The Bethlem Royal Hospital in South-East London and its 270-acres of green space represent a unique opportunity to explore a multi-faceted therapeutic landscape. The Bethlem is the oldest mental health hospital in the world and provides treatment to local and national service-users across a range of services and mental health conditions. The grounds are open to the public, with opportunities for museum visiting, dog walking, football-playing, and parkrun participation. Positive examples exist in the literature wherein therapeutic engagement with nature has been linked with activities that promote socializing and sharing of experiences, such as walking groups and communal gardening (Mossabir et al., 2021). In 2019, the Bethlem began to host weekly parkrun events on its grounds, which may be another example of therapeutic engagement with nature combined with sociality, though the use, experiences, and impact of this program has yet to be explored. parkrun events, on the grounds of this institution, may be an example of the 'communitizing' potential of leisure to re-imagine institutional contexts (Fortune & Whyte, 2011): "if leisure can be a vehicle for creating spaces that are open and accepting of difference, it may also be a vehicle for decreasing our need for spaces that function to separate and exclude people based on difference" (p.28). The Bethlem parkrun may encourage dialogue and action which may benefit and include both those inside the 'institution' and community members who enter the boundaries of the institution for this event.

The Bethlem parkrun has yet to be comprehensively studied yet there is an emerging area of research alluding to parkrun as a therapeutic or healing activity. Among parkrunners with mental health conditions, participation was found to have a positive effect on mental health, condition management, and time spent outdoors, and this effect was amplified for those who run/walk and volunteer, compared to those who simply run or walk (Ashdown-Franks et al., 2023). Consistent with these findings, parkrun's free, public, and largely volunteer-driven nature allows for a culture of reciprocity and sustainability (Wiltshire et al., 2018) that is highly valued (Stevinson et al., 2015). parkrunners have also reported that participation in parkruns with family and friends make physical activity (PA) feel more enjoyable and less isolating (Masters 2014, Pringle & Pickering 2015) and more social (Hindley, 2020; Sharman et al., 2019; Stevinson et al., 2015). The community and social support derived from parkrun participation are key mental health benefits (Ashdown-Franks et al., 2023; Stevinson et al., 2015; Wiltshire & Stevinson, 2018; Wiltshire et al., 2018).

The unique nature of this particular event is worth exploring and may extend current understandings of mental health recovery and outdoor spaces. Given the need to consider the social context of the recovering body, it is not surprising then that recent research efforts have begun to elucidate the role of PA in mental health recovery more broadly, rather than simply symptomology. Indeed, Fenton and colleagues (2017) conducted an integrative review of 35 papers to examine the role of recreation in mental health recovery. It was found that creative, social, and physical community recreation can contribute to both the recovery and the social inclusion of those experiencing mental health difficulties (Fenton et al., 2017). The authors found that engagement in community-based recreation supports recovery via increased self-esteem, self-confidence, feelings of social inclusion, and expanded social networks (Fenton et al., 2017). The study also highlighted the fact that community recreation programs that emphasize the social environment (e.g., development of camaraderie, friendships), have an increased likelihood of facilitating the social inclusion and recovery of those with mental health difficulties (Fenton et al., 2017). Recreation programs for those experiencing mental health challenges that take place in the outdoors, have been reported to be enjoyable and beneficial in mental health recovery, though this area of research remains understudied (Cooley et al., 2021; Hubbard et al., 2020; Picton et al., 2020). Given this, the case of the Bethlem Royal Hospital parkrun has the potential to be a novel exploration into community-based recreation, social inclusion, and recovery. In line with Conradson's (2005) contention, this exploration seeks to consider the relational aspects of the encounter by

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emphasizing not only the landscape itself, but also the individuals' experience of this landscape. Theorizing in this way emphasises the ways in which social, cultural and embodied aspects contribute to participants' active construction of therapeutic landscapes (Kearns & Milligan, 2020).

Thus, the present study was framed by an overarching aim of understanding what it is *like* to do this particular parkrun, and was guided by two broad research questions:

1. What are the individual and collective experiences of those involved in the Bethlem Royal Hospital parkrun? I.e., the public, service-users, volunteers, coordinators, hospital clinicians?

How do individuals experience this parkrun with and through their bodies, places, and other people?

2. How do individuals experience mental health recovery at and through the Bethlem Royal Hospital parkrun?

What are the experiences of this parkrun on the grounds of a mental health hospital, and how might these inform future events at mental health hospitals?

Methodology

Participants and setting: The Bethlem Royal Hospital parkrun

The Bethlem is a mental health trust that provides treatment for a variety of conditions, the majority of which are on the more severe end of the mental illness spectrum. Various national treatment centres are located within the Bethlem, such as the National Psychosis Inpatient Service and the National Autism Unit, which typically receive patients whose conditions are at such a level that they cannot be effectively managed at their local trust and require specialist care (NHS, 2015). Furthermore, the Bethlem provides outpatient and day-treatment units alongside these inpatient resources.

The Bethlem Royal Hospital parkrun started in 2019 and welcomes service-users, clinicians and staff, local residents and parkrunners from other locations every Saturday morning at 9 am. Individuals may participate as runners or walkers, or as volunteers, and the 5km events are overseen by a core event team. parkrun aims to be non-competitive and to foster an obligation-free context, so individuals may partake as often or as infrequently as they wish. In order to capture the full range of ways in which the grounds are used and experienced, the

participants for the current study include those who participated in the Bethlem Royal Hospital parkrun between November 2019 and March 2022, or anyone using the Bethlem grounds at the time of a parkrun event. A large contingent of Bethlem parkrunners and volunteers are adults between the ages of 18-70, though some younger children and older adults do partake. Consistent with parkrun's overall demographics, most participants are White with a smaller number of individuals from ethnic minorities participating each week (Fullagar et al., 2020).

Data Collection & Analysis

The methodology of this study has been largely guided by the field of mobile ethnography (Novoa, 2015) and enactive ethnography (Wacquant, 2015), meaning that much of the data collection has been done while on the move, while 'performing the phenomenon' of running at the Bethlem parkrun (Novoa, 2015; Wacquant, 2015). This study involved participant observation and informal discussions to 'sociologically capture' (Atkinson, 2012. p.26) the events, interactions, and behaviours within the study of the practices, experiences and inner workings of Bethlem parkrun and its participants (Jachyra et al., 2014). Participant observation primarily took place during the weekly 5km runs. A further important component is the volunteer aspect of the run. Volunteer roles include tail runners, barcode scanners (for timekeeping), and trail marshals. Given the importance of becoming fully immersed in this organization and run, participant observation also took place within volunteer aspects of the run. From November 2019 until April 2022 the lead author (GAF) engaged in the runs as a participant (and sometimes a volunteer) and interacted with fellow participants in the same capacity as any other run participant would.

Detailed field notes were taken as soon as possible after each run. These were transformed into analytic memos, which then served to develop more analytic ideas as the process progressed (Hammersley & Atkinson, 2019). Documentary sources including online podcasts, email communications, run reports, leaflets, and websites (news sources, Facebook, Twitter) were also compiled and transformed into analytic memos. In this way, data-source triangulation allowed for the products of field notes and of documents to be analysed simultaneously and allowed for inferences drawn from one type of data to be compared against other forms of data (Hammersley 2006; Flick, 2007; Hammersley & Atkinson, 2019). Next, ethnographic coding began to identify key analytic concepts and categories, guided by theories of emplacement, relationality, mental health recovery and therapeutic landscapes

(Hammersley & Atkinson, 2019). This coding was iterative and inductive in nature and involved thorough reading and re-reading through all field notes and documents to generate ideas (Hammersley & Atkinson, 2019). The aim at this stage was to find features and interpretations of such features that might explain what was happening and the reasons for this, or might highlight to what distinctive category an individual, experience, action or context might belong (Becker, 2014). Through this process, categories were generated, and codes were applied to sections of these categories (Hammersley & Atkinson, 2019). Then, guided by Glaser and Strauss (1967) constant comparative method, meanings of the categories and the associations and relationships amongst them attempted to be clarified. With particular attention being paid to categories that were particularly relevant to her initial research questions, "or that appear to be particularly important for recognizing what is going on in a setting and for understanding the attitudes and actions of participants" (Hammersley & Atkinson, 2019, p.177), GAF began to examine the similarities and differences between data that had been similarly categorized. GAF continued to systematically do so until "the internal structures and mutual relationships of categories" became clear, at which point the final categories or themes were finalized (Hammersley & Atkinson, 2019, p.177).

Reflexivity and ethical considerations

Ethical approval was granted for this study both by the University and by the parkrun Research Board. As someone who had spent time at the hospital previously and with connections to hospital staff, most notably one of the founding parkrun and core team members, GAF was not a complete outsider. For the purpose of this research, GAF became fully immersed in the parkrun culture by running (or volunteering) in the weekly, runs. In this way, she became a 'parkrunner' and her stance as a researcher was one of simultaneous insider/outsider where she intentionally aimed to maintain a marginal position to access the perspectives of participants, but also minimize the bias of over-rapport (Hammersley & Atkinson, 2019).

Guided by Sparkes & Smith (2014), GAF's entries in a fieldwork journal documented how her presence and biases shaped the context and setting of data collection and informed the ways the data were interpreted and analysed. Consistent with a subjectivist and transactional epistemology, GAF's identity as a White, 28-year-old, mentally and physically healthy female PhD researcher undoubtedly shaped her experiences and interpretations of this research. Hammersley & Atkinson (2019) describe the effects of ethnographer as audience

and urge researchers to be alert to how participants' views of the ethnographer's interests may impact what they say or do. Acknowledging and accounting for these biases is an important step towards addressing positional reflexivity, and aligns with the research epistemology.

Findings & Discussion:

The findings were arranged into two themes and their respective subthemes organised around the experiences of 'what it is like' to partake in the Bethlem Royal Hospital parkrun.

Bethlem as a shared leisure space

The grounds of the Bethlem facilitate sharing and connections between multiple human, non-human and material entities and between different activities. Conceptualizations of relationality and emplacement can be used to explain a) the shared leisure space itself and b) the shared leisure between different activities. These categories often overlapped and intersected.

The shared leisure space

The connections between parkrun participants and the grounds on which the runs take place lend themselves to theories of emplacement, considering the "geological forms, the weather, human socialities, material objects, buildings, animals" (Pink, 2011, p.349). The space itself allows for recovery and healing and participants often spoke of its serenity. One runner explained, "I just love this second field. It feels like an oasis. It's so peaceful." The vast and open space within which the run takes place allows for runners to engage with and through the nature and beauty of the grounds. In one parkrun run report, it was explained: "And there's some cracking fun guys (fungi, sorry) around Bethlem Royal Hospital at the moment. Here's one we spotted this week on a log by the run briefing area...no idea what type it is, but it's very pretty" (Bethlem parkrun, 2021). This same fungus was spoken about at a subsequent run while the volunteers were gathered at the start, chatting before the run began. People started pointing out the mushrooms and wondering what type they were and how long they had been around. In this way, the mushrooms served as a common point of discussion, which related all those present. Indeed, it wasn't uncommon for runners and volunteers to interact based on the presence of other flora or fauna, with volunteers one week urging runners to "mind the puddles and mind a few of the trees hanging over on the path." One

week I recorded how "I very nearly got stuck on bramble that was hanging over the path." Bell and colleagues (2019) noted the influence of shifting weather which similarly resulted in frictions related to overgrown vegetation for their participants, an artefact of changing seasons and "rhythms of growth and movement" in the natural world (Ingold & Kurttila, 2000, p. 190).

Given the run's outdoor nature, all-weather policy, and UK-based location, runners' experiences with and through weather are central to this work. Ingold (2011) proposed the idea of the 'weather-world' to conceptualize the material enmeshment of land and bodies, rather than an organism-environment interaction wherein the body is separated. Indeed, weather was a common source of discussion, at an organizational level and participant-level. Fieldnotes similarly conveyed the importance of weather in the entire experience: "absolutely frigid. We [volunteers] were saying how apparently if you go from South London to here it's always two degrees colder. And I forgot my mitts…very cold. The puddles were almost frozen over." These sensations echo the findings of research in UK-based long-distance runners, who felt pain and described occasions of intense embodiment due to the "haptic discomforts of cold and rain" (Allen-Collinson & Leledaki, 2015, p.467).The cool weather also meant many runs were foggy or misty: "The day dawned crisp and cold, with a heavy mist which had descended over the two, increasingly muddy fields" (Bethlem parkrun, 2019). As Duff (2011) explains, 'social-material-meteorological-affective configurations' of a given place at a given moment in time create different moods or atmospheres. One of my Saturday experiences described such an atmosphere as, "a bit spooky or eerie not being able to see too well on the path" suggesting a feeling of discomfort at that particular run. Bell and colleagues (2019) noted that these atmospheres, alongside other material qualities of place, can support experiences of well-being, or those of frustration or exclusion. While their research focused on individuals with impaired sight, the current research also saw these atmospheres impacting individuals' parkrun experience. Indeed, on a few separate occasions runners expressed anxiety or apprehension prior to starting the run in this sort of weather, as they did not want to get lost in the mist. Thus, while Bell et al (2019) suggest that weather-related atmospheres or moods may promote frustration or exclusion, our findings further add that these atmospheres may also foreground fear-related emotions.

In the winter months, when most of the data collection for this project occurred, muddy terrain and conditions were simply a given of the Bethlem parkrun experience. While many

parkruns take place in parks with paved routes, this one could more closely be compared to experiences of cross-country or trail-running which are "subject to the vagaries of terrain and weather" (Allen-Collinson & Jackman, 2021, p.636). In the fall, one runner described: "this is the time to do the Bethlem parkrun because basically from here on out with the winter and the wetness it just gets much muddier and soggier and so the course gets quite difficult". Macpherson (2008) also describes how changing weather patterns shape walking terrain which can result in difficult and mud-covered encounters following rain.

As Gorman explains, such seasonality and its respective elements can either allow for or undermine how running bodies flourish (2018). Indeed, the mud was understood to be a pervasive issue but also just a regular part of the experience which parkrunners must bodily negotiate (Brown, 2017), with organizers explaining that they tend to see their participation numbers rise in the spring when the course dries out, suggesting a change in seasons being conducive to such flourishing. This was further explained in a run report in November 2021 which congratulated nine individuals on personal bests and then cautioned "as the winter goes on, these might be more difficult to come by as the course gets wetter and muddier. Reports were that it wasn't too bad going this week, despite last week's deluge" (Bethlem parkrun, 2021). This communal understanding that the mud was inevitable and unavoidable was illustrated one week when a volunteer told two runners attempting to tiptoe around the mud, "sorry gals there's no way around it, you've just gotta go through it." Brown (2017) speaks of this "terrestrial tactility" (p.311) which runners develop in order to move through running terrain, with this example suggesting that such tactility may be developed relationally alongside others. The jovial tone (and use of 'gals') suggest a certain playful air, which is in line with Brown's (2017) finding that the "textured terrain's active doings" facilitated experiences of haptic openness and playfulness in outdoor exercisers (p.311).

The findings address calls for consideration of the ways in which more-than-human relations affect individuals' capacity for movement and activity (Nettleton, 2015) and calls to recognize the temporality of these shifting capacities (e.g., seasonally, Allen-Collinson & Jackman, 2021). In accounting for time and temporality, the findings from the current subtheme also allude to a sense of impending worsening weather and subsequent ground conditions in future. This idea of engaging in activity at present to compensate or to mentally prepare for the future state of the terrain, does not appear to be well-explored at present in the leisure or geography literature. Our research responds to the call to consider weather, and sheds light on how it directly shapes "our experiences of movement and opportunities for

human and non-human interaction" each time an individual engages in the Bethlem parkrun (Hall et al., 2019, p.279). Our findings also elucidate how each parkrun, though taking place in the same geographical location, represents a different 'place-event' (Pink, 2011) each week, characterized by changing weather, seasons and terrain.

More than just a run: exploring activities at the Bethlem hospital

In addition to hosting weekly parkrun events, the Bethlem hospital also houses football pitches, the Bethlem Museum of the Mind, and a network of public walking trails. The individuals partaking in each of these activities often interact with each other and parkruns may be a conduit for engaging with other activities.

Encouraging parkrunners to also explore the Bethlem Museum of the Mind has long been part of the Bethlem parkun's plan: "We're also planning to encourage people to visit the Bethlem Gallery and Museum whilst they are on site" (Maudsley Charity, 2020). While volunteers were setting up for one Saturday morning event, various individuals discussed Louis Wain (a patient of the Bethlem in the 1920s) and the current exhibition at the Museum at that time. These conversations even surpassed the boundaries of the leisure spaces at the Bethlem, when one individual asked others in the group whether they had been to see the Louis Wain film at the cinema. A couple mentioned that they were planning on checking out the exhibition at the museum that day following the run. The museum and gallery allow for shared interactions in shared leisure between visitors to the Bethlem and service-users, and thus represent a rare community space which can provide belonging across difference (Fortune, 2021). Having parkrunners learn about the history of the Bethlem also allows for further emplaced experiences of the run in this location, as Pink (2011) underscores that history and interconnections are what contribute to the intensity of a place.

The public are also able to walk their dogs on these trails. On some Saturdays, parkrun participants would be accompanied by family or friends who had come along to support the runners but also to walk their dogs. Often however, the dogwalkers did not appear to have any connections to the runners, but both groups would engage with each other with respect and kindness, often wishing each other good morning as they passed. While consistent participation with a similar group of individuals (i.e., other runners, walkers, volunteers) at parkrun presumably fosters feelings of belonging, there is also evidence to suggest that encounters with unknown others in everyday leisure spaces can also be meaningful and

valuable (Bell et al., 2015, Cattell et al., 2008). Small-scale social interactions based around dogs or children present opportunities for spontaneous interactions in park settings (Neal et al., 2015). On one occasion, two walkers with a dog cheered, "Well done ladies!" as two women approached the finish line. On another, I ran past a middle-aged local man walking his dog on my first lap, and we exchanged hellos. The next time I saw him, his dog began to stare at and sniff me and the man apologised, explaining how "the dog is very nosy" and laughed. I laughed and petted the dog and told his owner not to worry. The owner then asked, "is this your second lap? You must be nearly there now!" Research has found that temporary encounters between unknown individuals such as at street markets, can contribute to feelings of inclusion and perceptions of community (Cattell et al., 2008). Similarly, Bell and colleagues (2015) note how the presence of other people socializing in particular places, even if strangers, can foster feelings of connection and safety. Given parkrun's context in (largely) public parks and spaces, it is noteworthy these forms of distal sociality (Bell et al., 2018) have not been explored. Future research therefore might seek to further explore the role that more distal forms of socialization may play in individuals experiences of parkrun locations as therapeutic landscapes. The current research has responded to suggestions to consider the role that non-human animals may have as co-constituents and co-participants of therapeutic experiences and spaces (Gorman, 2016). Future research may wish to further explore the ways in which multispecies interrelationality affects how humans negotiate their way through, and experience, various parkrun landscapes (Merchant, 2019).

Another specific population who use this leisure space are members of a local football club, who train on the Bethlem football pitches on Saturday mornings. Oftentimes, parents, grandparents or siblings accompanied the players to the practices, implying a multi-generational use of the space, even if only as fans. Like with the dogwalkers, there were shared exchanges between the footballers and the parkrunners; some of the core volunteers often greeted and had a conversation with the coach, suggesting they had been familiar for some time. Research on public spaces such as parks has noted the development of familiarity over time, both with the space and with other park users (Neal et al., 2015). Similarly, research on a neighbourhood in London elaborated on this sense of familiarity: "regularity is therefore a component of public sociability reliant on the fixity of local places and on repeated participation; of knowing and being known by returning to the same spaces, engaging with familiar faces" (Hall, 2012, p.98).

This research responds to a call to further research how these places matter in multiple ways, and how social infrastructures function and promote democratic and fulfilling experiences (Latham & Layton, 2019). The following theme explores how parkrun, in the context of the Bethlem as a social infrastructure, permits some individuals to have democratic and fulfilling experiences, while excluding others from these opportunities.

Shared leisure space, but for whom?

Bell and colleagues (2018) note the need "to be attentive to diversity and difference when considering who has access to and who benefits from settings that have developed socio-cultural reputations for health and/or healing" (p.129). Indeed, challenges with access to these runs were noted, alongside the difficulty level of the course and the competitive culture of the runs which impacted who could benefit from them.

Who can access this leisure space?

In line with the 'post-asylum' and recovery-focused mental health service landscape, the Bethlem houses a range of wards, for individuals experiencing varying levels of psychiatric challenges or distress (Reavey et al., 2019). Within this landscape, forensic psychiatric units are the 'outliers' within contemporary mental healthcare provision, sharing similar carceral architecture of the previous system, with service-users simultaneously straddling the mental health system and the legal system (Reavey et al., 2019). While considered less 'permeable' than other wards (Quirk et al., 2006), depending on service-user behaviour and progress, those on these wards can be granted escorted (e.g., the service-user who came to parkrun one week with a nurse) or unescorted leave, or conversely may have to adhere to strict restriction orders which may confine them to the ward itself (Roberts et al., 2008). As Gorczynski et al. detail in their 2013 study, conditions imposed on those with schizophrenia living in a psychiatric hospital by either the hospital itself or by legal proceedings impacted whether they were allowed to leave their units, and for how long. These formal laws and regulations in turn influenced how often service-users were able to leave their unit for physical activity (Gorczynski et al., 2013).

While parkrunners are free to enter the grounds of the Bethlem and then leave again, some service-users do not enjoy such freedoms. This sheds light on who can truly access and

benefit from this leisure space, and in line with Kearns & Moon's (2002) contention that the positive aspects of therapeutic landscapes are often over-valorised, provides a more nuanced understanding of this space. In other words, what is conceived as therapeutic, or a third place for some (Hindley, 2018) is at the same time a 'total institution' for others, who may not be able to experience this 'togetherness' or 'escape' (Goffman, 1961). In this way, it can be argued that the way in which leisure is provided on the grounds of this hospital elucidates its existing divisiveness. These practices separate, categorize, and institutionalize populations of individuals who are deemed less valuable, in this case "the mad from the sane," "the sick from the healthy," and the "criminals from the good folks" (Foucault, 1982, p. 778). An example of the impact of this occurred one week when a father accompanied his young son to football training and asked for directions for how to get to the pitch. After pointing out the direction to him, he responded, "Oh, you have to go *through* the hospital to get there?" with a concerned tone in his voice. Interactions such as these on the border of the hospital grounds further seemed to convey an unspoken shared experience of being "outsiders," for having the ability to freely enter and leave the grounds, while service-users in the secure units were not able to have such freedoms. However, it is unclear how best to navigate these leisure experiences for those in secure care, and as Reavey and colleagues (2019) explain, "balancing risk through physical separation of patients from the community with the provision of care remains a live project" (p.281).

Further, despite one older run report elucidating how "enabling patients, staff and the wider community to join together in a positive environment has been the aim of this parkrun from the start" (Bethlem parkrun, 2019) some volunteers and some of the Bethlem organizing team further noted that the runs may not be well suited for current service-users. When asked on a podcast whether anybody in the hospital had taken part in the runs, one of the organizers responded:

> We have, but it's something we would like to develop more and it's still relatively early days but we are engaging with the hospital to try quite gently to introduce both patients and ex-service users. I think it's probably the ex-service users who are more likely to need or want to use it. I think people who are actually receiving care at the moment may not actually be in the right sort of place. But I think once people come out of care, it's certainly something we would really like to encourage. (Forwood & Norman, 2019)

Similarly, a volunteer who also works in mental healthcare explained how she was hoping to link in another local hospital with parkrun, as it provides primary healthcare and therefore tends to treat those with more manageable day-to-day conditions. She detailed how contrarily, at the Bethlem, "it's inpatient and people are more acutely ill and have more complex situations and are sort of less likely to get involved with the runs as we've obviously seen." Though another volunteer working at the hospital spoke of one previous patient "on the anxiety disorders unit, who participated in the Bethlem parkrun. Now that she is back home in [city], she participates in her local run on Saturdays. She told me that this routine and consistency has been helpful for her." Evidently, the range of service-users and their ability to partake in the runs varies widely and reflects the variety of services and wards at the hospital.

However, it is also important to consider the relationships that service-users may have with the grounds of the Bethlem and be open to the fact that they may want to distance themselves from such formal spaces of care. As Laws (2009) and Fullagar & O'Brien (2018) posit, allowing individuals experiencing mental health challenges to explore recovery away from the typical spaces and practices of treatment and care, may have therapeutic benefits. The location of the Bethlem and its grounds are highly distinct, as they represent such a conventional space of treatment, while also having "off the map'" (Laws, 2009, p.1831) qualities beyond typical mental healthcare provision like a park or a sports ground. Further exploration of service-user conceptualizations of, and their relationships with, psychiatric contexts with both conventional and "off the map" features is warranted, especially if the trend for hosting parkruns on the grounds of mental health trusts is to continue in the UK.

Who can enjoy this leisure space?

Assuming one *can* access the space, it remains unknown whether they will enjoy it, and whether they will come back. In line with what parkrun strives to be, runners, walkers and volunteers were largely supportive and encouraging of each other; it was not uncommon to hear a seasoned participant reassure a first timer by explaining, "it's not a race or a competition, just a competition against yourself." Organizationally, the Bethlem parkrun also promotes a supportive and encouraging culture, by celebrating milestones (e.g., 25th,50th, 100th run) and personal bests; a practice which is consistent across all parkruns. While well-intentioned, these recognitions may also contribute to an environment where comparison is normalized, with those comparing upwards potentially feeling worse about their own

accomplishments (Arigo et al., 2020; Diel et al., 2021). Such upward comparisons can lead to individuals negatively evaluating their own physical activity performance, which can lower motivation to engage in, and maintain physical activity participation (Kwan et al., 2018). Indeed, one service-user who was accompanied to a run by his nurse, expressed with visible disappointment, how some of the fellow runners were so fast and fit and kept passing him. Relatedly, some aspects of the Bethlem parkrun, at an interpersonal and an organizational level, fuelled competition. Following each run, each participant is emailed their results, which outline their time, their age-graded score, and their place. On their website, the Bethlem parkrun routinely posts about timings and positions in their run reports, one example being: "There was some keen competition at the fast end of the field, with [name] getting a new PB and just finishing ahead of Bethlem first-timer [name], although both were given the same time of 17.56mins - very speedy for our course!" (Bethlem parkrun, 2021). For some runners, timed events can instil motivation and offer feedback for continual goal achievement and striving (Koronios et al., 2017). However, the organization's inclusion of timings and positions may promote competition with oneself and with others, despite parkrun's "its's a run not a race" motto. As Bowness et al. (2021) have criticized, parkrun's ranking of individual times, finishing positions and course records is at odds with its ethos of being inclusive and non-competitive. Similarly, our previous research found that some service-users in this trust noted the timed aspect as well as the comparative and competitive nature of the runs as intimidating (Ashdown-Franks et al., 2023).

Furthermore, the large proportion of runners and volunteers associated with a local club also perpetuates this competitive culture; one Saturday parkrun was much busier than usual, and it transpired that many individuals were using that parkrun as a qualifier for an upcoming half-marathon. Hindley (2020) previously explored the contrasts between experiences in and perceptions of parkrun vs. running clubs for those with experience of both. However, it remains largely unknown how the presence of these competitive or club-affiliated runners affects the more recreational runners. This is a glaring research gap, especially when considering tensions from a relational perspective, and future research might look to explore how these runners affect the perceptions and experiences of recreational runners, alongside their motivation to return to this potentially competitive environment. Besides from a generally quick group of regular participants (many being club affiliated), other aspects of the course may also lead to less enjoyment for some participants. The mud-covered and puddle-filled terrain of the course is more difficult than many other local runs, which take place on

paved paths within parks. A local woman came to her first parkrun ever at the Bethlem, and found the experience more overwhelming, challenging and faster paced than she had envisioned, expressing that she didn't really know what she had gotten herself into. She walked most of the time, and the volunteer who walked with her subsequently explained that the participant had been very discouraged by this experience and would likely not be returning. For service-users who have the freedom to participate in the runs, it is plausible that they may be similarly discouraged. Indeed, a service-user reported feeling "horrible" at his first run and suggested this may have been because he had not done any running or training for a long time. He ended up stopping halfway through and not finishing the 5km route as he found it too difficult. A volunteer and nurse reflected on this situation after:

> I worry about people like him getting discouraged. So if you come in with very high expectations and thinking that you'll be able to run the whole time and stuff, and then you realize that there's lots of other fast people around you and that your fitness isn't as great as you thought… Then it can be really discouraging.

A primary aim of establishing the run in this location was to encourage service-user participation, however this example highlights how the fast and competitive aspect of the runs may serve to exclude these individuals, by prioritizing the experiences of faster individuals. In a sense, experiences such as these suggest that aspects of parkrun may contribute to dividing practices, further distancing the "insiders" from the "outsiders" especially in the cases where service-users choose not to return to the runs (Fortune & White, 2011). The small size of the Bethlem parkrun may also influence the experiences of participants; compared to nearby runs, the Bethlem hosts an average of 87 participants, while the nearby Bromley run welcomes an average of 410 participants per week, likely a result of its flat and paved course. This intimacy, however, can also come at a cost, as one volunteer and runner detailed:

> The thing with the smaller ones then is that if you are slower, or a walker, or for whatever reason are further back from the main pack, it can get quite lonely. You look around and feel alone, and don't see anyone around you.

The organization prides itself in event completion times that get longer each year, highlighting that between 2016 and 2017, there was an 88% increase in the number of participants taking over 50 minutes to complete the 5km (Reece et al., 2018). This however is completely at odds with the local level, wherein there is a clear preference or expectation for

running. At the Movember charity run where stick-on moustaches were handed out, a runner ran past me walking and joked, “is the tache slowing you down?” While said in jest, comments such as these suggest that walking is neither acceptable or desirable. Across many weeks, when I grew tired and slowed down from a jog to a walk, people would ask whether I was okay. On one particularly wet occasion, when my shoes were filled with water, a volunteer shouted, “well they’ll be soaked if you're running or if you’re walking so you might as well run!” Considering that parkrun claims to encourage those of all abilities, frowning upon walking, and encouraging running is highly exclusionary. Indeed, this expectation to run, or this stance that running was the superior option, evidently had an impact on the participants who felt ashamed for not being able to live up to this expectation. One morning, two friends apologised to the tail walkers for holding them up, and one exclaimed “we hope you two have nowhere to be after this!” A different morning, an older man crossed the finish line while walking and apologised for keeping the volunteers waiting. These experiences are in line with previous research which found that slower participants often felt like a burden or felt ignored by the faster runners who left prior to them finishing (Bowness et al., 2021). The authors proposed that the ‘collective effervescence’ (Durkheim, 1995, [1912]) produced through organic solidarity of parkrun participation, may be exclusionary to those who do not perceive themselves to be insiders of the parkrun community (Bowness et al., 2021). Their findings, in conjunction with those of the current study, are noteworthy as they provide a more nuanced view of collective participation, which has largely been portrayed in the parkrun literature so far as an overwhelmingly positive aspect of the runs.

The challenging, competitive, and fast nature of these runs convey certain unspoken messages about who *can* enjoy this space, which thereby (can) exclude those who are less fast, less able, less physically or mentally healthy. In line with Fullagar et al (2019), third places- for those able to access them as a third place- cannot be assumed to be neutral or ‘good.’ If parkrun is to be a truly inclusive organization, that provides the context for therapeutic encounters to occur, then it must actively partake in wider initiatives to support more marginalised sections of the community to ensure they feel they belong (Thomas, 2015). A de-emphasis on competition and comparison is needed. One way to achieve this would be to remove public mentions of places or positions on the event’s Run Reports on their local website, and on their social media. Through providing a context wherein participants are exposed to other participants’ physical activity ranked against their own, this practice has the potential to activate processes of social comparison (Arigo et al., 2020).

Upward social comparisons in a sporting context have been found to lead to disengagement, lower motivation, decreased happiness and increased feelings of shame (Diel et al., 2021). Having each participant's result displayed online may allow for such "comparison concerns" to emerge (Garcia et al., 2013). Ending this practice of publicly ranking participants would send the message that the position in which you finish in is not relevant or important at all, rather what is important is simply showing up and partaking. Changing the culture which places running on a pedestal above walking may also foster feelings of inclusion and belonging for individuals of all speeds and abilities. Implementing a once monthly walking-only event could provide a first step in changing this culture. From an organizational perspective, the local parkrun event team would be conveying to participants that walking is both welcomed and encouraged. Participation in the walking events may also change the views and attitudes of the parkrunners and volunteers who made it clear to other participants that running was preferred. One volunteer in this study shared the attitudes expressed in previous research (Sharman et al., 2019) that walkers are a nuisance as they prolong the amount of time that a volunteer has to be present at the events on a Saturday morning. Having volunteers involved in events where everyone walks could help to normalize walking and might demonstrate to the volunteers that it only marginally increases the amount of time they have to commit on Saturday mornings (e.g., volunteering until 10:00 am rather than until 9:45 am).

Strengths & Limitations

The strengths of the current study relate to its ethnographic methods, namely my immersion within the Bethlem parkrun over a prolonged period of time. This sustained involvement allowed me to interact with a variety of individuals including runners, walkers, volunteers, fans, organizers, service-users, and clinicians. Through engaging in participant observation as both a runner and a volunteer, GAF was able to understand various perspectives of the parkrun events. Participating as a volunteer opened up many discussion and interaction opportunities, as all volunteers wear lanyards and high-visibility vests, and individuals tended to gravitate towards the volunteers when they had questions or were just feeling nervous or unsure about the run. The Bethlem parkrun is a unique case, and thus the aim of this research was to understand the operation of this specific program in this particular situation (Patton, 2015). Despite not being generalizable, this study has nonetheless produced knowledge that may be of use to future mental health hospitals who wish to host parkruns on their grounds,

and to the parkrun organization more broadly. The duration and seasonality of data collection are also a limitation that must be noted; participant observation through mobile ethnography took place between October 2021- April 2022 which are arguably the coldest and wettest months of the year in the United Kingdom. If participant observation were conducted in the spring and summer, the findings may have been very different (Allen-Collinson, 2018). The impact of the COVID-19 pandemic on parkrun and on data collection is a further limitation and resulted in a much more condensed period of participant observation than originally envisioned. However, being able to engage in this research immediately following the ending of lockdowns and restrictions allowed for a unique exploration of the need for the parkrun organization to have endured the pandemic.

Conclusion

The current findings echo those which propose health and wellbeing to be intimately connected to individuals' socio-spatial interactions (Mossabir et al., 2021). Sociality also extended beyond the group of parkrunners themselves, to include more distal others who share the same leisure space. For many, the Bethlem parkrun was experienced as a therapeutic experience, and the grounds a therapeutic landscape, though this was not the case for everyone. The event itself presented exclusions to access for some service-users, contradicting the premise of hosting a parkrun on the grounds of a psychiatric institution. For both service-users and visitors who were able to access the events, a competitive, fast-paced, and difficult course meant that even if someone was included, they would not necessarily enjoy the event, or return to partake again. The current findings add to our current understandings of the therapeutic landscapes literature, elucidating how these spaces are not inherently healing nor salutogenic (Edgley et al., 2011), but instead can inadvertently be exclusionary, marginalising and disempowering (Mackian, 2018; Mossabir et al., 2021). Our findings suggest that the therapeutic needs of dominant groups, in this case non-service users at the hospital, may serve to marginalise the needs of others (i.e., service-users), highlighting that access to therapeutic contexts remains a privilege reserved for society's dominant groups (Conradson, 2014; Mossabir et al., 2021).

These findings also extend the literature on therapeutic landscapes, emplacement, and relationality, by illustrating that for those who experience these spaces as either healing, or as promoting of health and wellbeing, these processes occur in and through the materiality of place, and relations with human and non-human others. Like previous work, our work has

shown the ways in which the emplaced experiences of this run support moments of well-being or healing for some, at some times, and experiences of frustration or exclusion for others, at other times (Bell et al., 2019). Our findings illuminate how the material qualities of the grounds of the Bethlem, the social encounters taking place within them, and the atmospheres created as a result of their changing 'social-material-meteorological-affective configurations' affect participants' experiences of 'what it is like' (Bell et al., 2019; Duff, 2011). Finally, our work has attempted to engage "with the broader dimensions advocated by the therapeutic landscapes concept" (Bell et al., 2018, p.128) through considering the material, social and discursive patterns of exclusion that may occur for some in this context, while also contemplating the shifting cultural, historical, and individual factors that might influence people's experiences of the Bethlem grounds (Bell, 2018). In doing so, we hope that this work may lay the groundwork for future research on the more intangible aspects of therapeutic places and encounters.

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