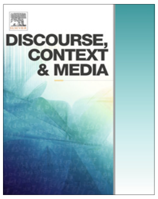
Discourse, Context & Media xxx (2017) xxx–xxx

Contents lists available at ScienceDirect

Discourse, Context & Media

journal homepage: www.elsevier.com/locate/dcm



‘Bad’ mums tell the ‘untellable’: Narrative practices and agency in online stories about postnatal depression on Mumsnet

Sylvia Jaworska

Department of English Language and Applied Linguistics, University of Reading, Whiteknights, Reading RG6 6AW, UK

A R T I C L E I N F O

Article history:
Available online xxxx

Keywords:
Postnatal depression
Online health communication
Confession
Exemplum
Positioning
Agency

A B S T R A C T

Health research highlights transformative and therapeutic effects of peer-to-peer online communication. Yet, we still know little about the practices and processes that generate such effects. This paper seeks to contribute to this understanding by examining polylogue online stories about postnatal depression (PND) on the popular parenting website Mumsnet. Drawing on the notion of narrative, small stories and positioning, this study shows how a narrative discourse-analytical approach can reveal narrative practices used to project and transform illness identities. At the micro level, the analysis shows that the small stories studied here draw on two *big* canonical narratives *confession* and *exemplum*. Whereas confessions are a ‘way in’ to disclose PND, the ‘didactical’ exempla serve as a knowledge resource and tools of alignment, and validation helping women to narratively repair ‘spoiled’ identity. At the macro-level, the analysis highlights tensions that exist between hegemonic discourses about motherhood and personal PND stories in which women appropriate and re-work these discourses to break silence and exercise agency. This study shows how together with technosocial factors these narrative practices can work to produce transformative effects of trouble telling and sharing online and contributes to a better understanding of digital practices underlying peer-to-peer interactions about stigmatised conditions.

1. Introduction

Web 2.0 technologies have become the most popular resources when it comes to making sense of illness. ‘Going on the Internet’ to seek information about one’s condition is now a routine practice (Ziebland and Wyke, 2012). Patient forums have been shown to be particularly beneficial; hearing illness stories of others can reduce one’s sense of isolation, offer support and provide information that patients utilise to make decisions and access better treatment options. Research exploring aspects of health and illness communication on digital channels continuously highlights the transformative and empowering effects that telling and sharing stories and coping strategies online has on patients and carers (Ziebland and Wyke, 2012; Naslund et al., 2015; Newhouse et al., 2017). Yet, most research in this area has been concerned with contents and measurable impacts of online health communication and we still know little about the practices and processes that contribute to such effects. This is important to explore because even if we know that peer-to-peer online communication is transformative, we need to understand *how* such transformations happen and how the digital affords therapeutic and transformative effects (Ley, 2007; Drentea and Moren-Cross, 2005; Van Doorn, 2011).

Drawing on previous applied linguistic research on health communication in digital environments (Hamilton, 1998; Jones, 2010; Page, 2012, Harvey, 2012, Anesa and Fage-Butler, 2015, Koteyko and Hunt, 2016), this paper argues that a closer attention to the language and other linguistic resources which people use in sharing their illness stories online can contribute to a better understanding of the practices and processes of health transformations. Language is a gamut of tools which people use to think, act, create and maintain relationships (Jones, 2013). Therefore studying in detail the kinds of linguistic ‘tools’ that people utilise to tell their stories online and engage with others can shed light on *what* people do when they talk about illness online and *how* they do it.

This paper attempts to contribute to this understanding by examining the ways in which participants in an online discussion forum disclose postnatal depression (PND) and engage in peer-to-peer interactions about this condition. PND presents an important case to study; it is a highly stigmatised condition, which in the UK affects 10–15% mothers (NHS, 2016) with suicide due to PND being the leading cause of maternal death (Oates, 2003). Despite the gravity of the problem, women rarely seek help and most suffer in silence because of the social stigma surrounding PND. As with any mental health issue, the opportunity to talk about the condition is essential to diagnosis and treatment. Because so many are reluctant to disclose it, little is known about the ways in which

---

E-mail address: s.jaworska@reading.ac.uk

https://doi.org/10.1016/j.dcm.2017.11.002
2211-6958/

Please cite this article in press as: Jaworska, S. ‘Bad’ mums tell the ‘untellable’: Narrative practices and agency in online stories about postnatal depression on Mumsnet. Discourse Context Media (2017), https://doi.org/10.1016/j.dcm.2017.11.002

PND is 'talked about' and subjectively experienced. In the UK, the issue is compounded by the recent public funding cuts to maternal and child services, especially health visitors who are often the first point of contact and trained to spot signs of PND. Furthermore, the social context of late modernity and increased mobility seem to have impact on the support structures for pregnant women and mothers. Whereas previous generations relied on information and support from parents and relatives, many women live now far away from their families. There is less time and fewer opportunities to engage with offline friends and family members in general (Ley, 2007). Given the stigma and diminishing offline support, the digital medium has emerged as a channel offering new possibilities for women to tell their pregnancy and motherhood stories including PND (Kantrowitz-Gordon, 2013; Drentea and Moren-Cross, 2005). What kind of PND stories they tell online and which linguistic and other resources they harness to make sense of this illness is the main concern of this paper.

Studying the kind of stories shared by people belonging to stigmatised groups is relevant for at least two reasons. First, narratives are important tools for social groups to establish bonds and legitimacy (Polanyi, 1985; Jones, 2016). They give people a voice and "textual authority" to make their concerns legitimate and hearable in society (Jones, 2016: 320). Conventionalised narrative genres are especially powerful in this respect since they provide a kind of templates that communities use to make sense of personal experience (Bamberg, 2007). Second, narratives are important verbal resources for the formation and display of identity in that they give people the opportunity to tell who they were, who they are and who they would like to be (Schiffrin, 1996; Wortham, 2000). However, rather than just being descriptions of a unified pre-existing self (Wortham, 2000), research in interactional sociolinguistics has shown that storytellers project different aspects of their identity depending on the context and the audience, and exploit different discursive and linguistic devices to do so (e.g. Schiffrin, 1996; Jones, 2010, 2016). When telling a story, people may select a particular kind of narrative and thus a particular position that the narrative makes available. For example, in choosing the narrative genre of exemplum, a storyteller speaks from the position of a 'teacher' (Jones, 2016). Speaking from the position of a teacher requires the existence of the position of a 'student' who accepts to be spoken to by a teacher. A position can therefore be understood as an interactional matrix through which people locate themselves and others interactionally in the stories that they tell – a discursive process which Davies and Harrè (1990) call positioning. In this sense, positions say as much about the teller(s) as about the listener(s) and the relationship between the two.

Linguistic research concerned with positioning stresses three aspects. First, positions are never fully "properties of individuals alone" (Schiffrin, 1996: 196). Rather they are defined by larger cultural scripts or big D Discourses (Gee, 1999) and are sets of social obligations and expectations that 'prescribe' what can be said and what forms of behaviour can be enacted within a particular position. Second, positions can be foregrounded not only through the use of larger narratives but also through the choice of 'smaller' linguistic and paralinguistic devices, for example, when the teller uses reported speech to display an agentive self (Schiffrin, 1996; Hamilton, 1998). The larger narrative structures, content and 'smaller' linguistic devices all work together to emphasise or background particular positions and therefore particular aspects of identity. Third, positions are never fixed pre-discursive entities "ready to be taken off the shelf and to be reproduced" (De Fina and Georgakopoulou, 2012: 163). Research in interactional sociolinguistics has demonstrated that people agently select, resist or shift positions in interactions and in so doing, create tensions between the larger cultural scripts and their own stories (Jones, 2010). It is in these tensions that transformations of positions and thus identity can happen.

Drawing on the notions of narrative, small story and positioning, this study examines stories produced online by women with PND. The data under study is an example of digital storytelling and involves polylogue stories generated in online peer to peer interactions. While the stories vary in length, most are just short fragments retelling recent or still unfolding events. Hence, they largely depart from the prototypical narrative (Labov and Waletzky, 1967) and are examples of what Georgakopoulou (2008: 601) calls *small stories*. This study is particularly interested in what kind of narrative structures and linguistic resources women with PND draw on to tell their stories online, what positions these kinds of stories make available and to what extent these are appropriated, resisted or shifted. This requires essentially a scrutiny of the interactions as they unfold examining in detail the narratives of original (or first) post posted in a discussion thread and responses to those (Giles, 2016).

At the micro level, the analysis reveals that despite the *small* character of the online stories, the forum users draw on two *big* canonical narratives, that is, *confession* and *exemplum*. These two canonical narratives and the positions that they make available are evoked through the choice of specific linguistic devices and offer women a framework to talk about this stigmatised condition. However, the two genres serve different purposes. Whereas confessions are a 'way in' to disclose PND, the exempla that follow serve as tools of alignment and validation helping women to narratively redefine and repair the 'spoiled' identity (Goffman, 1963). At the macro-level, the analysis highlights tensions that exist between hegemonic discourses about motherhood and personal PND stories in which women appropriate and re-work these discourses to break silence and exercise agency. In so doing, this study contributes to a better understanding of narrative practices underlying online peer to peer interactions about stigmatised conditions and show how these practices work together to produce transformative effects of online trouble telling and sharing.

2. Research perspectives on postnatal depression

PND belongs to the category of postpartum mood disorders and is a type of depression which can occur within one year of childbirth (Evans et al., 2012). Symptoms may involve low mood, lack of energy, loss of interest in the world, difficulties in bonding with the baby, suicidal thoughts and self-harm. Although research literature considers history of mental health issues, stressful events and low social support to be strong predictors of PND, the aetiology remains unknown (Evans et al., 2012).

As with many mental health conditions, research on PND has been preoccupied with clinical aspects, mostly label-based descriptions, symptoms and pharmacological management equating PND with a physical condition (Kokanovic et al., 2013). Some argue that such an approach reflects the dominant biomedical model that underlies much of the current thinking about health and illness reducing psychological illness to neurochemical disorder of the brain and leaving out the consequential social, cultural and economic realities (Lafrance, 2007; Rose, 2007).

The criticism of the biomedical model has generated considerable research interest in discourses around depression, including PND. Most of this research has focused on medical perspectives revealing the ways in which medics and media promote a somatic self, for example, by appealing to women's sense of agency and encouraging them to draw on pharmaceutical expertise (Gattuso et al., 2005; Fullagar, 2008). Yet, we know little about the extent to which such practices are adopted by patients who suffer from depression.

Please cite this article in press as: Jaworska, S. 'Bad' mums tell the 'untellable': Narrative practices and agency in online stories about postnatal depression on Mumsnet. Discourse Context Media (2017), https://doi.org/10.1016/j.dcm.2017.11.002