



Unpacking stored and storied knowledge: Elicited biographies of activism in mental health ☆

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ABSTRACT

In this paper we consider the potential of autobiographical narratives for accessing 'storied knowledge' in research around geographies of health voluntarism. We firstly consider what is meant by elicited autobiography and how the narrative approach has been used in research more broadly. Drawing on fieldwork undertaken in Manchester, UK and Auckland, New Zealand we then demonstrate how this approach has helped us to map out and unpack the career journeys of mental health activists working within and across the voluntary and statutory sectors. Through our autobiographical narratives we illustrate how this approach has enabled us to elicit important insights into the triggers and trajectories underpinning mental health activism and how events and moments in time have provided critical junctures in these trajectories. We consider places as sites of significance in activist career paths; and as central to the researcher-participant gestalt within which the autobiography is elicited and recounted. The autobiographical process, we suggest, offers reflective insights into mental health activism that might not otherwise be gained using more conventional methodologies.

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1. Introduction:

For over a decade, geographers have examined the dynamics between health, place and voluntary action. Published work has encompassed a wide range of issues stretching from the political-economic to the practice-based and the personal. In doing so they have made an important contribution to our understanding of how the neo-liberal and post neo-liberal elevation of the voluntary (or third) sector in the provision and delivery of health and welfare is impacting on, and experienced by, those involved in the giving and receiving of differing forms of care and support and the places in which that occurs (see for example, Brown, 1997; Cloutier-Fisher and Skinner, 2006; Milligan, 2000, 2001; Milligan and Conradson, 2006; Mohan, 2003; Mohan and Gorsky, 2001; Owen, 2005; Owen and Kearns, 2006; Skinner, 2008; Skinner and Joseph, 2009).

While we have no wish to underestimate the contribution that these works have made to health geographies of voluntarism, it is nevertheless true, that by and large they have tended toward a methodological conservatism (Thrift, 2000). That is, they have fore-grounded techniques such as interviews, focus groups, surveys, statistical analysis – or some mix of these approaches – as a means of exploring the relationships between voluntarism, health and place. Reworking the ways in which research in this field might be undertaken, we suggest, holds the potential to elicit new insights and different forms of knowledge that might not otherwise be achieved through more conservative techniques. In the broader field of health geography, a few researchers have already begun to engage with more creative approaches as they examine the relationships between health and place. Wiles et al. (2005) for example, used narrative analysis as a strategy for understanding interview talk in research around experiences of informal care-giving; Bingley and Milligan (2007) adopted multi-sensory research methods to explore the long-term influence of childhood play on mental well-being; whilst Conradson (2003, 1975) engaged in participant observation as a tool for uncovering the therapeutic and 'experiential texture' of particular health and voluntary welfare spaces. Others have engaged with written techniques such as diaries and narrative correspondence as mechanisms for uncovering the everyday health-related experiences of older people and family careers (Milligan, 2005; Milligan et al., 2005). In the spirit of contributing to this relatively small

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body of work, our paper discusses the potential of the autobiographical narrative as means of accessing 'storied knowledge'.

Drawing on the experiences of Acheson and Williamson (2001) with disabled activists, our approach involves the gathering of largely self-directed oral accounts (or stories) about a series of events that are significant in a person's life (or specific aspects of that person's life). To illustrate this, we draw on case material from a larger comparative study to highlight some of the ways in which our autobiographical narrative approach enabled us to gain new insights into how the relationships between people, place and health shift and unfold. Hence, following a discussion of the place of autobiographical methods in social research, we briefly locate the activist's stories within the wider study. Using some of the data from mental health activists working in Manchester, UK and Auckland, New Zealand we then illustrate how the autobiographical narratives have enabled us to gain insights into mental health activism. More specifically, we demonstrate how they enabled us to tease out activists' ongoing and embedded stories – revealing what triggered and sustained their activism; their career trajectories; how they move between, and forge connections amongst, voluntary and statutory organisations and how they use the knowledge gained to inform their activism. Secondly we consider how, in the act of telling their autobiographical story, people come to narrate their identity and locate this within those wider structural changes that surround mental health care. Thirdly, we illustrate how the autobiographical approach has enabled us to unpack the importance of time and place in the shaping of people's activism. In other words, we demonstrate how the activists' autobiographical accounts enabled us to tease out how they came to be who they are and how their personal and embodied experiences have been shaped and reshaped by the places and contexts within which they are embedded. Finally, we reflect back on the autobiographical method as operationalised within the project, highlighting both the potential as well as some of the problems experienced in using this approach.

2. What is auto/biographical research?

Interest in *biographical* research arose from "a wide recognition that social science...has become detached from lived realities" and a "concern to link macro and micro levels of analysis". For biographies are not only anchored in a mix of social history and individual personality, but they both "reach forwards and backwards in time" (Chamberlayne et al., 2000, p. 2). Biographical research therefore seeks a better understanding of "how, why and for what (people) transform themselves during their lives" (Finger, 1989, p. 1).

As a type of biography, *autobiography* is commonly understood to be a freely-narrated and reflective account of a person's life by that individual. In our view, biographical research can build on essentially autobiographical accounts, and arguably should do so. This is because the interview format can interrupt the elicitation of storied knowledge that reaches 'forwards and backwards in time'. But whereas a more literary autobiography might be written alone, we maintain that the underlying social-scientific concern (for activism in our case) requires *some* researcher intervention, if only to offer prompts, encouragement and affirmation. Hence we see a symbiotic relation between autobiography and biography in the 'qualitative toolbox' that is symbolised by the nesting of one word within the other: the biographical narrative cannot be constructed without autobiographical knowledge, but the autobiographical account can be usefully facilitated within social science research through the empathetic presence of a biographical interviewer.

Interpretation is a central ingredient in *both* biography and autobiography. As Roesler (2006, p. 575) points out, "the events we experience in our lives do not have meaning in and of themselves, but they acquire meaning in acts of interpretation by the experiencing mind." It is thus important to recognise that as forms of vernacular knowledge informed by place and social context, biographical accounts are *representations*, rather than exact records, of past events and how they were experienced (Reissman, 1993). The same can be said for autobiography, for reflection on any experience – one's own or another's – is an act of interpretation in light of current time, place and social conditions. Hence, as Milligan (2005, p. 222) points out, narratives (regardless of whose) "will always be represented as partial, selective and imperfect". Paradoxically, however, it is within this imperfection that the social-scientific value of [auto]biographical narrative lies. For the 'good story' can restore agency to people whose experience might otherwise be reduced—if not to numbers, then to researcher-imposed categories (Milligan, 2005). Moreover, at least within health-related research, Frank's (1995) classic work *'The Wounded Storyteller'* amounts to an argument for the power of personal narrative to break through the 'received' discourses of profession, policy and practice.

Yet while story-telling has had a long association within the humanities, as Somers noted, until relatively recently social science has tended to regard it as something of an 'epistemological other' (Somers, 1994, p. 606). This situation, however, has been progressively under revision as some social science disciplines have come to embrace narratives as concepts of social epistemology and social ontology. Under such a view our social identities are seen to be constituted through narratives and narrativity—that is, that people come to be who they are by being located, or locating themselves, in social narratives that are rarely of their own making. For us, the *locatedness* of narratives in time and place, and the links between identity, place and well-being mean that an autobiographical approach is ultimately deeply anchored in the links between health and place.

Somers contends that narratives 'are constellations of "connected parts" embedded in *time* and *space* constituted by causal emplotment' (Somers, 1994, p. 616). She emphasises the anchoring of identity in interconnecting networks of relationships that move and change over time and space. In the course of outlining these issues, she indicates four dimensions of narratives which are of relevance to our present discussion. The first, *ontological narratives* are those social stories that actors use to make sense of their lives (that is, they are used to define who we *are* and what we *do*). These stories, in turn, produce new narratives and actions. The relationship between narrative and ontology is thus mutually constitutive and, whilst it involves personal process, it can only exist, and crucially *take place*, in the course of social and structural interactions over time and space. Secondly, Somers refers to *public narratives* which comprise those stories that are attached to cultural and institutional frameworks that are, self-evidently, larger than the individual. These institutions might range from the family and workplace to the church, government or nation. Associated narratives can have the conventional elements of 'drama and plot' but derive their explanation from the selective appropriation of events to construct a story about a specific experience, event or issue. The third dimension of the narrative type refers to *meta-narratives*: those stories which embed us, as contemporary agents, in a temporal and social science framework. In other words these are the 'epic dramas' of our time that are built on grand abstractions. Such a narrative, for example, might be embedded in the rise of feminist, disability and civil rights ideologies in the mid-20th century and the subsequent emergence of feminist, disability and civil rights movements. More contemporary examples might be embedded in the rise of

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