A place for the heart: A journey in the post-asylum landscape. Metaphors and materiality☆

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ABSTRACT

The downsizing of psychiatric hospitals has created a new institutional landscape in the local community to support people with severe mental problems in their daily living. This study explores meeting places in Norway from the users' perspectives. The users used four metaphors to describe these meeting places: "like a home", "like a family", "like a landing ground" and "like a trampoline". The users have decorated the interiors of the meeting places with hearts made from various materials, and these could be considered as symbols of the places. The metaphors used: the hearts and the rooms and interiors, reflect old ideas about calmness and dignity rather than new ideas based on New Public Management.

1. Background

The downsizing of psychiatric hospitals has created the need to shape new institutions in the local community to support people with severe mental problems in their daily living. Providing a home or at least a place to sleep, food, something to do to pass the time and socialise, or a place to work, that were previously carried out by "total institutions", have been outsourced to the community. "New geographies of mental health and illnesses" have been developed in Europe and North America (Parr, 2000, 2008).

In Scandinavia, because of the welfare state model developed there, a division of labour between regional, mostly bio-medical, psychiatric services, and municipality-run social services has taken place. Psychiatric services have become responsible for delivering treatment to people with mental illness, and social services for helping people with disabilities in their daily lives. The main challenge has been to create the social conditions for a normalisation of daily living so that people with severe mental illness (SMI) can exercise citizenship and be part of society (Nirje, 1985).

One of the outsourced functions has concerned activation of these people. Extensive efforts have been made to develop paths to the labour market and to different forms of activities, and these efforts can be seen both as part of normalisation and integration, and as traditional forms of treatment and rehabilitation. Despite these efforts, between 85% and 95% of people diagnosed with SMI are unemployed (Crowther et al., 2001).

Idleness has historically been regarded as a major problem in the management of marginalised groups and a criterion for distinguishing between the "good" and "bad" poor (Alcock, 2006). "Good" poor people would be expected to accept work even in degrading conditions, proving their adherence to the work ethic; "bad" ones would avoid making any effort and thus be excluded from the state's protective system (Alock, 2006). Different forms of community-organised activities and work are usually presented as ways to counteract passivity (a "negative" symptom), which is presented as one of the core symptoms of SMI, and loneliness, described as a consequence of the "ill" person's incapacity and lack of interest in social relationships (Davidson et al., 2004).

To combat the idleness and "asociality" ascribed to persons with SMI, psychiatric and social services have developed a range of places, mostly in the community, which offer the possibility to get together, socialise and participate in different activities. These places are known by different appellations, such as day and day-care centres, drop-in, activity and rehabilitation centres and meeting places (Estroff, 1985; Parr, 2000), and are part of the deinstitutionalised geographies. They have also been described as part of a new type of institution defined as a network of micro-institutions (Topor et al., 2015), and given different and contradictory definitions such as "asylum without walls" (Philo and Metzel, 2005) and "institution of deinstitutionalisation" (Rotelli, 1994).

These spaces organised for marginalised people usually offer cheap meals and coffee and constitute an alternative to drifting on the streets of the city or staying isolated in an apartment. They are also relatively

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free from bio-medical appraisal of the participants, partly because municipality-run services do not select their visitors based on diagnosis, but on need, and partly because the staff lack psychiatric training (Bachke and Larsen, Submitted for publication). At the same time, they tend to limit social opportunities to others with the same type of problem and to staff members, and thus risk contributing to further marginalisation and preventing normalisation. Deegan (2004) formulated this critical point of view: "Our needs are not special. Our needs are the same as your needs. (…) We don't want what you are giving; we want what you have got" (p. 11).

Currently there are only a few studies of these new institutions in the context of welfare states. Andersen et al. (2016) studied texts of house rules in meeting places and sheltered housing in the community. Their findings show that formal language represents the voice of professionals: content concerned with regulating the service user's daily life. The house rules present the service user as a person in need of being controlled, perpetuating the ideological practices of hospital-managed care.

The continuum of these meeting places, from structured rehabilitation to the labour market to just a place to spend time, is analysed in Hansson's (1993) study of their self-presentations. His results were presented as four metaphors coined by the authors. The *gym* was a place of rehabilitation where one did physical exercises. The *waiting room* was a place where one waited for something to happen outside the room because of medical and/or psychotherapeutic interventions. The *living room* was "like a home" (179). Here, the important thing was to get together to do things together beyond any instrumental rationality. The *coffee house* was a place to pop into to have a coffee, meet other people and have a chat.

This article is a part of a study of the new institutional landscape developed in relation to the downsizing of the mental hospitals in Norway (Andersen et al., 2016).

In the study we will firstly look for metaphors used by the visitors to meeting places, because they are central to the development of thought. According to Lakoff and Johnson (1980), our ordinary conceptual system is fundamentally metaphorical in nature. People use metaphors every time they speak and we use them without realising we are using them: They are "metaphors we live by", meaning they are strongly connected to our place in the world, to everyday life and to our material surroundings (Kearns, 1997; Kearns and Barnett, 1999).

The questions are: what metaphors were used by the visitors to characterise the meeting places? How can these metaphors inform us about the meeting places and their significance in the lives of the visitors?

2. Methods

Multi-sited ethnography was selected in order to form a close impression of the everyday life, the language used and the material surroundings in different meeting places for people with mental health problems. Multi-sited strategies focus on the relationships between sites of activity and social locations that are disjunctive (Marcus, 1995). Marcus (1995) states that we always arrive at a second site with the first site in mind, and we have to ask whether there is a reciprocal relation at the level of the imagination, and whether there is a material relation, or whether it is totally virtual. We found multi-sited ethnography appropriate, in conjunction with photos of the meeting places, for obtaining knowledge of the relationships between the material surroundings (buildings, rooms and items) and the people inside the meeting places and the language they habitually used there.

2.1. Sites and participants

The sites were seven meeting places in Southern Norway for adults with mental health problems. They were run by municipalities located in the same county. They all served food and offered different kind of activities. They were open in the daytime, except at weekends. Two of them were also open in the evenings twice a week. Altogether, between 10 and 40 visitors frequented each meeting place. In total, we met about 50 visitors. Six of the seven places had staff members, such as an auxiliary nurse, assistant occupational therapist and health care worker–all of them female; the seventh was run by the service users themselves. Altogether, we met 12 staff members.

2.2. Multi-sited ethnography and photography

We started with open minds, visiting different meeting places and talking to visitors and staff members, and considered ourselves participant observers. In three of the meeting places, we participated on one day each in the daytime, in one we spent time both in the daytime and in the evenings, one was visited 11 times by two master's students (Eidsaa et al., 2016) and another master's student participated four times in two activity groups (Grey, 2016). Most of the time we chatted with groups of visitors, drinking coffee and eating together. We also observed and participated in the different activities offered, and sometimes we sat down with individuals and talked about specific subjects (Hall and Kearns, 2001). In addition, we had conversations with the staff. This approach conforms to what Marcus (1995) terms "following the research topic", meaning that we visited different meeting places, all of which had been built as a result of deinstitutionalisation in the mental health field. This method of participating is called *mobile ethnography*, offering different paths to obtain knowledge of a cultural landscape: in this case a part of the post-institutional landscape. Field notes were written directly after our visits. During fieldwork, we also photographed the interiors and exteriors of the meeting places, using the photographs in addition to the field notes, because we are of the opinion that photos communicate something that might be missing in text (Sontag, 2003). The use of photos gave us a good impression of the material surroundings in the meeting places (Larsen, 2011) and these were compared with the field notes in order to expose any errors in the latter. At the same time, the photos helped us to discover special aspects of the meeting places.

2.3. Analysis

The field notes consisted of about 50 pages of text, and we took about 100 photos. Then we analysed these as follows: firstly, in order to firstly get an overall impression, we examined the field notes carefully. Questions were posed relating to the text on how the service users and staff described the meeting places and what kind of words they used. Secondly, we aimed at detecting patterns and themes in the material (Kvale, 2008). It was striking that both visitors and staff members at the different meeting places used the same metaphors to describe their own experiences of the spaces. Therefore, the metaphors are not our own interpretation of what the participants told us, but are their own words.

The photos were analysed in three steps. First, we asked: "What does the photo show?" Here we described the elements in the photos and what the photographer wanted us to see. We described the material, colours and shapes. Then we asked, "What is the meaning of the elements in the photos?" and we focused on the relationship the materiality might have to the visitors and staff. Lastly, we asked, "What is the function of the elements in the photos, and its meaning?" Here we discussed what kind of culture and knowledge the physical surroundings supported or otherwise (Larsen, 2011).

After these two different analyses, we started to compare the analysis of the field notes and the photos collected. We noticed that the people we had met used metaphors to describe everyday life in the meeting places, and the meaning of these places, and we also noticed that appearing recurrently in the photos were hearts, of all kinds of shapes, materials and colours. We therefore analysed how these photos might be connected to the metaphors used. The most-used metaphors