



**The road to co-research**  
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An introduction

How did I come to engage in co-researching insider knowledges about troublesome voices in the context of psychiatry? I believe an important element has been a certain disquiet about some aspects of psychology and psychotherapy that began soon after I entered Aalborg University (Denmark) to study to become a psychologist. I had concerns specifically about the tendency within psychology and theories of psychotherapy to understand human life in terms of an interior world and a mechanistic view of the mind. Including how understandings of reality and being in the past and in non-Western societies were interpreted in terms of this interior, mechanistic mind, and not accorded much credit in their own right as contributions to the enterprise of understanding how human beings work. Discovering Michael Guilfoyle's (2001) paper 'Problematizing Psychotherapy – The Discursive Production of a Bulimic' was a revelation. Guilfoyle seemed to precisely address what I felt concerning psychotherapeutic practices – that they tend to involve some form of conversion of the client to the authoritative understandings of the therapist. Guilfoyle posed the question whether non-psychological, non-pathologizing frameworks of meaning could be equally adequate and helpful? For example, why construct a pathological person within an interiorized psychological reality and not a subjugated person in a political struggle? I believe this paper very much shaped my earliest idea of a way to understand psychotherapy that explained some of my disquiet.

Later on, I was trained in Cognitive Behavioral Therapy (CBT) and practiced along such lines when I began working in psychiatry at Aalborg University Hospital in 2008. I soon found myself dissatisfied with CBT, and my old concerns lingered. This led me to seek out literature on narrative therapy, and I quite immediately changed my practice, finding that narrative therapy addressed my apprehensions very well. I now sought to enter into the world of the people who consulted me and discover understandings and practices, or creatively create them from the inside, with them. I also became interested in possibilities for sharing knowledges of living non-normal lives in some sort of forum. In 2014 I developed a concept for a group practice. I worked with people experiencing psychosis, and had gotten the impression that problems with having a place in society and social life afforded a sense of belonging, and being able to talk about one's life and having access to a positive identity were very common for people in this situation. This group, or forum as I have come to prefer to call it, was intended to function as a small community in which living non-normal lives and having non-normal experiences and ways of being could be the norm. Here, we might question 'normality' and its usual alternative of 'pathology' and explore other ways of being and living without having to live up to normality, nor being assigned to pathology. The practice consists of telling stories of life to an audience of





people in similar circumstances and having open conversations aimed at responding to those stories with interest, respect, solidarity and curiosity. A place to share knowledges and skills of living non-normal lives.

However, this forum never entailed any focused attempt to document and spread insider knowledges more widely beyond the members of the group. This still existed within small closed forums, like this group or individual conversations. This changed when David Epston and I began to correspond. We had met at a workshop in 2014 and been in touch every now and again since then. But in 2017, a new situation arose. Management at Aalborg Psychiatric Hospital were taking an interest in the forum I had established for knowledges about non-normal living. They asked me to develop this further. I mentioned this to David, and he then suggested developing a co-research practice in relation to psychosis (the field I work in). This led me to a shift in how I looked at things. To being concerned with “How can we find a way to help you out?”, an additional perspective was added: What do you know that others may take inspiration and benefit from?

First, I tried to figure out what the idea in co-research might be and how to do it. I consulted David and made various attempts to describe for myself what style of relating and form of inquiry might be involved in doing co-research as David had done it. I also wondered and wrote to myself and to David about how I might relate with people who have become psychiatric patients in a way that creates room for knowledges of a different kind to the established professional knowledges and how I might do so in a way that empowers such knowledges, making it possible for them to ‘speak’ to established knowledges and have some effect on the social reality of psychiatric patients as well as professionals. David suggested taking inspiration from Anti-anorexia/bulimia, and so I got hold of *Biting the Hand That Starves You: Inspiring Resistance to Anorexia/Bulimia* (2004). I read examples of co-research conversations, and studied an example of a co-research project about Hikikomori in Japan (Ishikawa, 2014). I also took much inspiration from “Co-research: The making of alternative knowledge” (Epston, 1999) and “More Travels with Herodotus: Tripping over borders lightly or “psychiatric imperialism”” (Epston, 2011) and more specifically what follows:

*I would describe an ‘insider knowledge’ as innocent as a newborn child; as delicate as a sprouting seed that has just broken through the soil, as shy and apprehensive as children arriving at what will be their school for their very first day. When we try to speak about them, we can seem as awkward as a fish out of water. ‘Insider knowledges’ are often before or without words, and for that reason, when inside knowers try to speak about their skills/knowledges/theories, they can appear either foolish or to be making unjustifiable claims. [...] For all these reasons, ‘insider knowledges’ find it almost impossible to compete with the well established and sanctioned professional or ‘outsider knowledges’ (Epston, 2011, p. 7).*





Along the way, some tentative principles of co-research developed:

- Ask questions rather than making statements. Elevate the knowing of the other over your own. Relinquish the professional's monopoly of interpretation (Kvale, 2006).
- Authentic involvement and spontaneous excitement and solidarity over neutrality, objectivity and observation (Marsten, Epston & Johnson, 2011).
- A mutual exchange so that both parties benefit from the co-research. An exchange of gifts, rather than an act of charity, an intervention or even exploitation.
- Discover and create distinctive vocabularies of description, rather than assimilate such insider knowledges to known categories.
- Imaginative curiosity towards the unexpected, the unknown, or that which appears common, when endowed with significance becomes uncommon.
- Giving insider knowledges a reception that cherishes and nourishes them while protecting them from indifference and ridicule.

#### How to put this into practice?

As I mulled over these unconventional considerations, I began to think of my collaborations with patients more and more along these lines. As well, some matters from my past that were given little or no significance now came to mind as potentially propitious. It was something Victoria (see "Sitting Through It with the Voices") had told me. As mentioned in our co-authored paper, I recalled that she once said that she had a way of dealing with her voices. Other concerns required our attention, and from the perspective of "how can we find a way to help you out?" the fact that she had a way of dealing with the voices made it something with which I wasn't very concerned. That was her business, although admittedly it did sound interesting. But at that time I didn't think I had any role to play with regards to such a matter. But thinking in terms of 'what do you know that others may take inspiration from or benefit from knowing?' suddenly made Victoria's short statement about those voices auspicious.

I was fortunate that her words had stayed in my mind sufficiently for me to recall it three years later. This was intriguing! I began an inquiry and as our account will tell, she had much to say. When I did so I had no idea whatsoever what she might say or what she might want to share with me. Therefore, I simply did my best to record in handwriting what she said when she provided me with a summary of what she called 'sitting through it with the voices'. Amazed by this practice that she had discovered on her own during her discontinuance and withdrawal from antipsychotics by herself, I asked Victoria if I might share this summary of her practice with David Epston and whether she might be interested in collaborating with me to write a detailed account for the benefit of other people who are able to hear such voices? I am grateful that she generously gave me permission to do so.





Now the time had come to attempt a co-research interview and live up to those principles above! As you might have guessed, I was quite nervous and found myself unable to be nearly as much at ease in Victoria's company as I customarily was.

Although a co-research interview, as I had now come to conceive it, shared its values with my narrative practice up to this point, there was nonetheless a change in the genre of conversation and a wider context to consider. With 'Sitting through it with the voices' my task was not to assist Victoria to find a way. She already had found it. My task was to work with her to describe it as well as honor it, and to give it a form that might serve as inspiration and an example of practice for both those who receive threats from voices and to professionals who wish to assist them. With Victoria's consent, we taped the conversation. I then transcribed it and gave it to Victoria for her review. With her permission, I then translated it from Danish to English to share with David, who had kindly offered to mentor me in this practice.

This did lead to a detailed description of Victoria's practice. However, David made me aware of some problems. I tended to try to summarize what Victoria told me during the interview, but in doing so, I ended up making statements rather than asking questions. This risked creating a situation where a takeover by professional knowing was possible, rendering her words in my words, which positioned me as the interpreter. Was I being a bit of a duplicitous parrot here, repeating her words and then subtly turning them into mine? I resolved that my next interview should have no such 'parroting', and I was quite successful with that. However, there now was room for both my excitement and creative curiosity. This then became my next area to work on. I not only worked on these matters in the context of specifically co-research interviews that were being taped. I began to practice asking questions and avoiding 'parroting' and allowing for more excitement in conversations with psychiatric patients in general.

In terms of asking only questions, it seems to be the case that quite often, the people who consult me are very curious to hear what I think, and are not uncommonly interested in interviewing me about my views on ethics, society, psychology, psychiatry and everyday experience. I do not believe I have yet settled on a specific style. My personal style, my ways of speaking, the context of co-researching and my means of documentation are continuously developing at this point.

Following the collaborations with Victoria and Max to document their knowledges and discoveries about living with voices, I have been exploring another aspect of co-research: the circulation of such knowledges. Having accounts from Victoria and Max at hand has changed my practice. When it happens that I suspect someone I am having therapeutic conversations with might be interested in these knowledges, I have contacted Max or Victoria, informing them that an anonymous person that I know might find their knowledges useful and seek their permission to share it. One practice that has developed from this is that I give extracts from our writing or the entire paper to such a person who consults me and ask him or her to read it and





underline anything that catches their attention or curiosity. I have offered to read the material aloud, but I have generally found that most prefer to be able to read it on their own. The developments that happen by taking inspiration from Victoria and Max is the present state of co-researching how to find a way to live with voices.

I am continuing to document such knowledges in collaboration with the people concerned. As well, I offer that we document our discoveries and co-author a paper about it, should they want to share it at some point. I also seek permission to provide feedback to Victoria and Max, something they have both expressed an interest in and which has been a moving experience on some occasions. This work is still in its infancy, however.

Hopefully this will expand into a growing number of co-researchers and a publically available archive of insider knowledges relating to how to live with voices and similar beings.

Many people have contributed to making the road that my practice has taken possible. Thank you Max, Victoria and several unnamed people with insider knowledges, David Epston for invaluable support and mentorship, Brignall Wood and Michael Guilfoyle both for formative explorations of philosophy, ethics and methods. Thank you to Aalborg Psychiatric Hospital for supporting and encouraging this project.

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