



Editorial

Dare to be a wolf: Embracing autoethnography in nurse educational research



1. Prelude

In May 2019 I was involved in a twitter dialogue in which voices from the academy and management strongly condemned the prevalence of nurses being bullied by managers, peers and junior staff. The exchange signalled for me more justification for increasing autoethnographic activity in nurse educational research-straddling practice. This would display lived organizational realities in detailed ways, inevitably taking service organizational and educational cultures to task for the extent of their complicity in, and shaping of, oppressive practices.

I've been an autoethnographic researcher for many years, and my co-edited published work includes the first British (Short et al., 2013) and first international (Turner et al., 2018) collections, both of which showcase cutting edge contemporary autoethnographic research and practice. I am therefore grateful that, as a consequence of my involvement in the twitter conversation, Billy Lauder – the NET editor – invited me to write this article. As a longstanding member of the journal's International Advisory Board, this invitation gives me an ideal opportunity to hopefully stimulate manuscript submission and sympathetic editorial reception. It also provides me with an opportunity to extend on earlier, related work for the journal (Grant, 2016a; Short and Grant, 2016), in more explicitly and comprehensively introducing readers to the approach. I'll do this in a necessarily personal and selective, rather than exhaustive, way, in the hope that what I have to say will stimulate further reading and autoethnographic research activity.

2. Autoethnography

Autoethnography is a form of narrative qualitative inquiry which values subjectivity, emotions, relationships with others, and epiphany and other strong personal experiences as research resources. The approach focuses on self-culture intersections, in connecting the autobiographical with the socio-cultural. This is done in ways that combine the creative aesthetic sensibilities of the arts and humanities with human and social science respect for empirical data. Grounded in the ontological assumption of the 'self' as a socio-cultural entity, autoethnography interrogates and critiques practices and power imbalances in order to make advances in social justice. This requires that researchers focus on the concrete, detailed and specific aspects of socio-cultural life, while demonstrating emotional involvement, self-scrutiny, deep introspection and high levels of critical reflexivity. Autoethnographers embrace and communicate their individual and shared experiences and vulnerabilities in order to connect with their audiences, rather than instruct them. They do so to make better, critically analytic, sense of the stories within which all of our lives are embedded, and because they anticipate that audiences will locate themselves in these stories in a spectrum of ways, and extend them in

open-ended dialogue (Adams et al., 2015; Grant, 2018a, b, In press-a, In press-b; Grant, 2013; Grant et al., 2013; Holman Jones et al., 2015).

I will proceed to unpack the above characteristics of autoethnography in terms of their relevance for nurse educational research. In so doing, I'll reference my own single- and co-authored work, and that of my close colleagues from the autoethnographic community, illustrating the discussion with italicised vignettes from this work. In bringing my article to a close, I'll describe some key benefits for nurse educational research in embracing the approach.

3. Critical analytic stories told through the lens of culture

Autoethnography needs to be conceptually understood in terms of its three, mutually dependent, component parts. 'Auto' refers to self, 'ethno' to culture and 'graphy' to analytic writing. Stories told about and by a single person, or persons in the case of co-authored autoethnographies, should critically and analytically address the cultural contexts within which they are written. This squares with Wright Mills' (2000) call for researchers of social life to be as aware as possible of the intersection of their biographies with the broader cultural features of the historical period they write within.

Autoethnographers therefore work from insider knowledge to create what Geertz (1973) described as detailed, nuanced 'thick descriptions' of cultural experiences. They do so to facilitate better understandings of these experiences, for themselves and their audiences (Holman Jones et al., 2015). In this context, 'culture' refers to the ways of organizational life within which nurses and their educators are professionally and personally co-inscribed. Specifically, this is composed of structures, and forms or practice and behaviour, which are accepted (how things are) and normative (how things should be). These two aspects of culture are normally regarded as part of the backdrop to practice and therefore often left insufficiently scrutinized. Engaging with culture in a critically reflexive way (Grant, In press-b), therefore, amounts to maintaining a healthily sceptical and courageous experiential eye on the taken-for-granted, and calling out experienced problematic cultural issues through autoethnographic writing when and where necessary. Doing this in an analytic way involves making implicit and/or explicit theoretical sense of what is written about.

With autoethnography proposed as an ideal research approach to respond to what often happens under the radar of normal cultural concern, I should at this point stress that all three component parts – 'auto', 'ethno' and 'graphy' – of the overarching term need to be in evidence in autoethnographic writing. The balance between these three components will vary, depending, for example, on the topic and the aims of the author/s. However, novice researchers often get this balance drastically wrong in ways that undermine the fundamental ethos and purpose of the approach. Examples of this include stories written by

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people about themselves which have little or no analysis, theory, or socio-cultural interrogation or implications; thus, at worst, no apparent useful function beyond the possibility of some kind of twee connection with readers. When the seductive promise of cultural interrogation stated at the beginning of a paper remains unfulfilled by its end, the cultural status quo is left untroubled. Writers of such work might best be described as autoethnographic sheep in wolves' clothing. Many of them also often seem to work in theory-free zones, happily displaying the naïve realist assumption that their particular world is *the world* in a universal sense. At the other extreme, there are those who write texts that are heavy on theoretical analysis and/or cultural critique, but which display either little or very cautious and guarded self-disclosure. Such people arguably feel safest when their Johari windows are firmly shut, and their blinds drawn.

4. Using experiences to critique cultural beliefs and practices

Analytically- and theoretically-light solipsism, and the neglect of displayed cultural interrogation and critical reflexivity, are disappointing tendencies. Autoethnography is predicated on the assumption that – often oppressive – culture flows through self and *vice versa*, and that in all aspects of their lives people are inscribed within dialogic, socially shared linguistic and representational practices (Bakhtin, 1984, Frank, 2005, 2010, Grant, 2018a; Grant et al., 2013). In contrast to more traditional research approaches, the use of personal experience thus strongly implicates valuing reflexive subjectivity as a critical resource in cultural interrogation (Grant, 2013; Grant et al., 2013; Grant, 2018a, b). Quite simply, the lived-experiential body is an ideal site for socio-cultural and political meaning making.

What then are the implications for the relationship between subjectivity and cultural critique for autoethnographies of nurse education? The model of 'functional stupidity' (Alvesson and Spicer, 2012, 2016) has helped me make theoretical sense of why healthcare practice and educational organizational cultures are under-scrutinized. Functional stupidity refers to the cognitively- and affectively- driven unwillingness and inability of organizational members to employ reflexivity, justification and substantive reasoning in their work. In this context, *reflexivity* refers to the active questioning of organizational norms. *Justification* entails workers routinely asking for and being given reasons and explanations for organizational events that impact on professional practice. *Substantive reasoning* constitutes the act of engaging thinking as broadly and respectfully as possible, as opposed to myopically, about professional practice and work problems (Grant, 2018b):

'The debating society

An office in a university school of nursing and midwifery. A deputy head of school, in charge of the delivery of the nursing curricula across all branches. And Dr Alec.

Deputy head: You have an idea, Alec?

Alec: Debating societies...

Deputy head: Why?

Alec: Nurses don't do formal debate...can't debate...nor critique. They think critique and debate amount to being nasty, (confusing this)...with ad hominem attack.

Deputy head: They're encouraged to debate in teaching sessions and critique in their essays.

Alec: (thinks 'Oh God!') You think so?...Have you...seen the 2007 Denzel Washington film, *The Great Debators*?

Deputy head: Yes. How's that relevant?

Alec: Emancipation of an historically under-valued cultural group? Academic confidence-building through preparing to defend your group and principles in formal debate in front of an audience? Couple of wee things, maybe? And it would help reduce the contradictions between what we practice and preach.

Deputy head: What contradictions?

Alec: *The ones that are always apparent (thinks 'but not to you')... Months pass and months turn into years. Every so often along the way, prior to their retirement, Alec reminds the deputy head of school about the idea... (his) successors think about it a lot too, say they love the sound of it and, as of 2017, have great ideas about key people other than themselves and their academic colleagues who might be interested in getting this initiative off the ground.*

And in his 65th year, Alec looks forward to his impending retirement.'

(Grant, 2018b, pp35–56, my brackets)

5. Prizing and celebrating relationships with others

Friendship-based autoethnographic work relationships are crucial in promoting critical sensibilities grounded in reflexivity (Klevan and Grant, in press). Trude Klevan, my close friend and colleague, and I argue for the use of friendship as autoethnographic method. Our theoretical position is that friendship is neither sufficiently encouraged nor taken seriously as both a methodological resource and topic in neo-liberal academic cultures, because of its negative associations with nepotism and unproductive time use. We assert the opposite: that the corporate management of time and relations can inhibit the friendship-mediated development of critical and creative academics, the expansion and exploration of knowledge, and creative ways of generating such knowledge.

In this co-authored autoethnography of our experiences of running a 'friendship as method' workshop at an international autoethnography conference, Trude and I write about our experience of participation discussion and feedback:

...one significant issue emerges for us: in spite of our attempts to carefully clarify the precise nature of the lived experience of our friendship, a few people raise the possible danger of our falling in love when engaging in such close relationships. Although experiencing some degree of irritation, neither of us feels particularly disconcerted by this, as we respond non-defensively – explaining that we have always considered our friendship to be of the agape and caritas kind ... and that we have never had concerns about this happening.

Later, over dinner, we talk about this, recognizing that the issue and question were on one level reasonable and innocent, coming from people motivated by understandable human curiosity. But we agree that we also heard the voice of the academy implicit in their words; the voice that whispers suspicion about the assumed equivalence of relational intimacy with professional boundary breaking and possible hidden and unspoken agendas. Would the question have been posed if Alec as a male was the younger one, or if Trude as a female was in the mentor role? We make sense of this in the context of the restricted cognition of corporate academia...

(Klevan and Grant, in press)

6. Utilizing reflexivity to describe and critically interrogate self-culture intersections

Self-culture intersections can take many forms. One of my autoethnographic interests is in the power of healthcare organizations to do biographical violence to those purportedly being cared for. On the basis of our shared lived experiences of survival in the mental health system, Helen Leigh-Phippard, Nigel Short and myself took this aspect of institutional culture to task:

'From a critical perspective, 'recovery', and by implication 'survival', frequently signify ongoing liberatory struggles against invalidating societal and institutional practices, including those of institutional psychiatry... In this critical context, 'mental health care' becomes a recovery-survival issue when experienced as a narrative assault on the identities of ... service users... (Helen's story).

I was given my medication and sent to my room, but the fact that I had received it had not been recorded. Later that evening, I experienced my arm burning, a side effect I had been experiencing while taking this medication. I asked a nurse for an ice pack to relieve this, but this was declined as I could not be experiencing side effects because there was no record of my medication having been taken. Despite insisting I had, and that the record probably had not been made because of an incident distracting the nursing staff, I was not believed. Assuming that my medication had in fact not been taken, the nurse tried to pressure me to take another dose. I refused and, as a voluntary patient, asked to be discharged, but was told that I could not until a doctor decided this was appropriate... this could not happen for another 36 hours. At this point, I felt that my life was changing in terms of the status of my personhood. I experienced the transition from being a respected, trusted academic to someone who was constantly disbelieved and whose agency as a human being was not taken seriously... A day after a failed attempt to section me to keep me in hospital, I went into town and got my nosed pierced. This was a ridiculous act of rebellion by a 30 something adult, but for me it signalled reasserting control over my own body (and every time I look in the mirror, it is a reminder that I was not sectioned and got control of myself and my life back). I thus came to believe that an honest relationship with institutional psychiatric staff was dangerous, and for several years I learned to respond in a monosyllabic way and say as little as possible to avoid readmission to hospital. This amounted to my deliberately manipulating a system I otherwise felt trapped and powerless in. Five years of silent patienthood signalled resistance to a compliant patient role.'

(Grant et al., 2015, pp 279–282)

7. How might I live, what must I do, and what is the meaning of my struggles?

Helen's vignette serves as a stark example of a survivor of the mental health system negotiating 'recovery' in a covertly resistant rather than institutionally-imposed and -sanctioned way. It illustrates the action she took to preserve her integrity, personhood and agency in the face of institutional pressures to be submissive and compliant.

8. Making life better in the never-ending quest for social justice

It should be clear by now that autoethnography doesn't necessarily sit well with bland and banal topics. Autoethnographers, the most impactful of whom are wolves rather than sheep in their ability to critically call out oppressive socio-cultural practices, are 'cultural tricksters or gadflies whose role is to trouble the complacency of normative cultures and challenge their...assumptions' (Grant, 2018a, p.114). They often tend to write on the basis of personal or shared, and often disturbing, life changing experiences, including epiphanies – key turning point moments in life (Adams et al., 2015; Denzin, 2018; Klevan et al., 2019).

Helen's vignette illustrates this well, and also shows rather than tells some of the benefits and risks of speaking truth to oppressive and disrespectful power. In this regard, Nigel Short (2010), writing about his time as an inpatient in an acute mental health ward in London, evocatively and graphically brings to life the experience of being emotionally and verbally abused by a nursing staff member:

'...I can hear the muffled drone of a vacuum cleaner beyond the closed door. Big Ben is chiming 11am across the river...I think it's Thursday. I am lying still...My unwashed matted hair stinks... The unwanted white bread coronation chicken sandwich sits untouched on top of a cheap paper plate: another reminder that I am worthless. I am off my food... I am tired. The sleeping tablets are working at last. I am slipping in and out of much-needed drug-induced sleep. Somebody...bursts into the room. He hasn't knocked... His sudden appearance startles me. My heart rate increases. 'Are you getting up?', he shouts. 'You have been in bed all day.'

'I am tired', I whisper. I feel afraid again. He has power. 'Don't you want to get better?', he says. He finishes his verbal interaction aggressively by saying, through gritted teeth, 'Get up you cunt.'

...I am worried about saying anything. I eventually get up. I make my way to the nurses' office. The walk down the corridor is long and deliberate. I am walking in slow motion... There are two nurses in the office. One of them is the man who swore at me. I ask him if he has a problem with me. I want to try and repair and resolve this difficulty. He says 'What are you talking about?' I repeat what he said to me. He denies the incident and particularly denies using the word 'cunt'. I walk slowly back to the room, chastised. I lie down on the bed. I cover my body with the duvet and stare at the wall. I am feeling very vulnerable now.'

(Short, 2010, pp131–132)

9. Balancing methodological and intellectual rigour with emotion and creativity

Nigel's vignette well illustrates how creative analytic practices (Richardson, 2000) are often necessarily transgressive, breaking the tacit cultural rules around what's acceptable to say in academic texts. Our combined work more generally signals the importance of the use of narrative fictional devices in autoethnography (see for example Douglas, 2018; Rinehart, 2018; Short, 2018). This serves multiple purposes, including: heightening emotional tension to increase the aesthetic appeal of creative analytic work (Richardson, 2000), sometimes drawing on humour and satire (Grant, 2013, 2018b); complex character representation (Grant, 2018a); and tackling ethical problems of the risk of identity exposure in qualitative writing through the use, for example, of gender changes, and composites and reverse composites (many people fictionalised as one person, and the opposite) (Grant, 2013).

Balancing methodological and intellectual rigour with passionate, creative expression is a demanding task. It requires diligent writing practice, on the grounds that autoethnographic work needs careful preparation and construction to fulfil its creative analytic purpose. Such intellectual craftsmanship (Wright Mills, 2000) signals a commitment to producing novel work, which demonstrates 'researching outside the box' (Grant, 2016a). In this regard, maintaining methodological coherence often necessitates submitted articles for publication which are presented in unconventional article structuring formats.

In illustration of these points, Nigel and I promoted the use of 'poetry as hybrid pedagogy', based on our hyphenated identities as mental health scholar-teachers-survivors of the mental health system (Short and Grant, 2016). Embedded in this paper is a co-written poem, which alludes to Nigel's inpatient experience (described in vignette form and discussed earlier) of impending discharge from an acute psychiatric ward in London:

'Poetry has emerged as a significant resource in nurse education in recent times... As scholars with a background in healthcare, and nurse and mental health nurse education, we believe that (it) has great potential for developing pedagogic practice in undergraduate teaching... poetry touches readers in embodied rather than propositional or cognitive ways... poetry can provide nursing students with powerful insights, increased levels of empathy, and wider frames of conceptual and experiential understanding... The use of poetry as hybrid pedagogy... provides opportunities to develop a healthy scepticism towards the sufficiency of longstanding, dominant professional and institutional narratives for conceptualising and understanding mental health service users and their experiences... always already predicated on a normatively accepted divide between professional nurse and service user...

Peace and quiet give me the comfort I need.
I can hear Big Ben Chiming over the Thames.
...Towards the river: London Eye in view.
Standing with silent anticipation.

Standing with silent expectation...

*The time of London
is the space of London
etched in our madness...*

*The awaited May morning wakes up slowly.
Echoes of my previous darkness begins
to disappear over tall chrome buildings.
Shopkeepers, like me, preparing for a brand new day.*

*Leaving old London,
Pressing it into the past,
We glimpse our future.*

London is alluded to in several senses in the poem... Through our dialogue over the years we have come to regard 'London' as simultaneously a place of decay and... of hope and renewal. It is ironic that we both had previous senior roles in the Institute of Psychiatry – the self-proclaimed 'centre of excellence' for mental health treatment and research in the UK – in the late 1990s... Nigel was a tutor and course leader of 'Psychosocial Interventions for In-patient Mental Health Nursing Staff' while Alec... was external examiner for the Thorn psychosocial interventions programme... In light of our 'survivor' status and... previous professional relationships... 'London' has... grown in our collaboratively developing awareness as an... allegory... emblematic of madness through time.'

(Grant, 2016a, pp60–62, my brackets)

10. Why write autoethnography?: benefits for nurse educational research

Illustrated and hopefully evidenced in the exemplar vignettes presented in this paper, as a critical qualitative inquiry educator and writer (Grant, *In press-a*, *In press-b*) I believe that reader *connection* and engagement is better secured by evocative and creatively expressed autoethnographic work. In comparison, I have argued that traditional and conventional forms of healthcare qualitative writing tend to more implicitly *instruct* readers *via* disembodied themes. These provide a less vital substitute by representing lived experience in abstracted and sanitized ways (Grant, 2014, 2016b). Nursing journals publishing more autoethnographic articles will add to an increase in detailed, thickly-described individual and community lived-experiential voices in nurse education and practice. This can only positively contribute to individual and community therapeutics, through providing one useful antidote for the power-imbued ravages of the organizational lives of nurses.

More specifically, it seems to me that nurse educators who gain experience in writing and publishing autoethnography will be in a credible position to teach their students in practice to do likewise. They will be well-placed to reduce the academy-service critical inquiry gap through, for example, using autoethnography to critique oppressive normative practices in nurse higher education-straddling practice (Grant, 2013, 2018b; Grant and Radcliffe, 2015) and higher education more generally (Klevan and Grant, *in press*; Klevan et al., 2019). This may also hopefully promote greater levels of individual, professional and organizational reflexivity, and theoretical nous.

A further advantage is that an increase in published autoethnography will help readers engage with, and work through, the wide and constantly emerging range of relational and procedural ethical difficulties associated with the approach, beyond the scope of this article to discuss (Adams et al. 2015; Holman Jones et al. 2015; Turner et al., 2018).

Role modelling autoethnography in published articles should also issue an implicit encouragement to nursing research journal editorial staff to take more of a critically reflexive interest in – longstanding and anachronistic – tacit editorial publishing assumptions and practices

(Grant, 2016a). I have argued over several years that as a consequence of these assumptions and practices, conventional forms of qualitative writing practices are privileged, with even the most progressive and creative papers being shoehorned into article structuring formats better suited to positivist research (Grant, 2011, 2012, 2016a). In this regard editorial staff and readers of this journal would do well explore the diverse forms of creative article structuring already evident in well established qualitative research journals such as *Qualitative Inquiry* and *The Qualitative Report*, and look out for (and hopefully contribute to) our new quarterly online *Journal of Autoethnography*, which will be launched in January 2020.

So, embrace autoethnography! Dare to be a wolf!

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