

SHORT TAKES

Listening to the heartbeat': Methodological 'resonance' in anthropological research

Lene Teglhus*
University of Copenhagen

Abstract

This paper addresses the challenges related to anthropological fieldwork as the basis for production of scientific knowledge. Through personal descriptions of my experiences of being a person with a multifaceted identity in an unsettled position, the influence of methodological inter-relatedness is explored. The aim is to discuss anthropological self-reflexivity in relation to the production of knowledge with scientific validity.

Key words: Methods, Anthropological research, Production of knowledge
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Introduction

Knowledge is organized information and the organization means that it is both reductive and selective. It is reductive because it reduces the empiric complexity to statements about a reality and it is selective because the contextualization is never completely inclusive. As Roy Dilley (1994) has argued, contextualization is an act of power and it is thus challenging to represent people and their worlds through contextualization. Context is the result of a reductive and selective process and is not given beforehand; it is constructed by and related to the analytical perspective. Our object of study is thus situated in a particular empiric and theoretical context, which we have to reflect upon because it determines the knowledge we produce. An epidemiological approach will lead to a particular contextualization, where "the local society" is well defined and its characteristics explain for instance the health care behavior of "the local people".

Anthropology, I will argue, should look at

the local society as a landscape where agents practice health care (cf. Ingold 1995, 2000). That leads to another contextualization and thus to a different form of knowledge. Knowledge is always knowledge about something from a particular perspective and it is a relation more than a substance. If we are to claim authority, we must aim at accounting for the relations that direct and form our particular knowledge.

When we engage in research, meaning fieldwork for anthropologists, we seek out an (objective) knowledge *about* the world we investigate, but we must at the same time realize our own participation *in* the world, as part *of* the context as well as part *in* the contextualization. As Tim Jenkins (1994:433) has pointed out, the relation between the observer and the observed is built into the anthropological narrative as if it was an aspect of the observed object itself. Our relations to the object of study thus inflect into our knowledge about it.

I suggest that we take these issues seriously when we engage in anthropology. We should not start our investigations by looking at the possibilities for intervention; neither should we accept the general representation of illness and health as the starting point. Rather, we should

*Institute of Anthropology, University of Copenhagen. Heslegårdsvej 2, 2900 Hellerup, Denmark. Phone: 40263693
E-mail: lteglhus@teglhus.dk

look into the relational dimensions of the knowledge we produce, to leave the door open for new understandings of scientific evidence.

Thus directed by a critical approach to objectivity, I will present an anthropological narrative with focus on the relational dimensions of the knowledge that it produces. However, first I will present briefly the basis of it all, my fieldwork.

Reading people's minds in East Africa

The study: I spent three months in a town center in Western Kenya, in Bondo district with the purpose of studying mothers' practice of childhood nutrition. The working title of the study was "Intra-household allocation of food and care among Luo families of Western Kenya" and as my focus was on children under three years of age, breastfeeding, complementary food and weaning came to play a central role. I arrived in the field with the assumption that knowledge of child health and nutrition somehow determined a mother's actions and choices. I realized that it was far more complicated and first of all I learned to question mothers' knowledge as a process of interaction. I understood that the issue was not to identify the meaning of acts, but rather the question of *why* actions were *meaningful*. Thus, my bicycling in the red¹ landscape, my visits in mother's worlds of struggle turned out to be a study of action and of knowledge processes².

With my senses wide open: Conducting the study, I was not only involved as an anthropologist but also at the same time, the "objective" scientist was a medical nurse, a mother of two young children who have been breastfed according to the recommendations of WHO, and maybe most important, a European. The anthropologist though, became head of

¹ The earth is red in rural western Kenya because of a high content of ochre.

² A lengthy analytical discussion on the project results can be found in Tegllhus forthcoming. See also the article in the present issue of MILA.

understanding and the anthropological self-reflections became a central part of fieldwork, in a way that is reflected in the words of Charlotte Davies:

The relationship between ethnographer and informant in the field, which form the basis of subsequent theorizing and conclusions, are expressed through social interaction in which the ethnographer participates; thus the ethnographers help to construct the observations that become their data (Davis 1999: 5).

Arriving in the field as a European, I was expected to know western medicine and when I started talking about nutrition, people saw me as *the* expert, who should teach them. When I insisted that they should teach me, they tried their best to give me the "correct" answers. This revealed to me that knowledge is certainly situated, and the knowledge they presented showed more about what they consider as "correct" than it gave me insight in their practice.

To share with the reader an important methodological process of recognition, I will describe a core experience of my fieldwork, my first meeting with the main key informant, Joanna³.

My assistant and I met Joanna in her homestead where she was sitting on a mat outside her house. The three youngest of her nine children were around, together with some of their friends from the neighborhood. Joanna was breastfeeding her youngest, a two weeks old baby, when I arrived, but she stopped shortly after, giving him cow's milk from a spoon instead. Seated in a chair one of the children brought from inside the house, and my questions translated into dholuo by my assistant, I asked her why she did this. She answered that he could not survive on breast milk alone. She was aware that "you do that in

³ Identity of informants are hidden by using different names.

the west, but here, conditions are different", she argued. I told her that according to my medical knowledge, all babies in the world can survive on breast milk alone for the first six months of their life and that all mothers can produce enough milk if they only know how. I thought to myself that with my experience as a nurse, I was able to do counseling on this subject in an optimal way. Full of (naïve) enthusiasm, I explained that the production of breast milk increases on demand and furthermore, even if Joanna's diet is neither varied, nor very nutritious, her child would still be fed most advantageously with her breast milk. I also explained about the risk of infection and the immature intestinal system, which is not yet ready for proteins different from those in the mother's milk. I told Joanna to drink the cow's milk herself and explained to her that if she follows my advice both she and her child will benefit from the milk. Joanna listened carefully. She nodded, but did not comment on my counseling further. In the end, I asked her if she understood the advantages of breastfeeding, and just to make sure that she really was aware, I mentioned the most important aspects, such as increased immunity against disease and increased growth. I asked her if she thinks she would change her practice and stop giving the baby cow's milk, and she assured me that she intended to do so.

I ended this my first (and last) counseling, reflecting on my role as both a nurse and an anthropologist. From the beginning I was aware of my multifaceted identity and attempted to put the anthropologist forward. However, the situation had taken me into medical counseling because, in this particular situation I felt more comfortable with the role of a medical expert and the need seemed obvious. Joanna indicated that in her understanding I was most of all a white expert, and with me the "modern" medicine, with all its connotations, visited the homestead of Joanna. Thus, I felt an obligation to help Joanna by providing *the knowledge*. The

biomedical discourse had defined our positions: I was the expert, an agent towards her as a passive, ignorant recipient of *the knowledge*. Eventually, I realized that the counseling hindered access to her knowledge and ideas about child care. However, that was not all there was to it.

Joanna's practice did not change. But then, why did she say that she intended to change her practice? What was she doing by the use of her words and what did the silence afterwards mean, why did she never in our conversations later on, comment on our first meeting verbally? In the time after, Joanna and I shared understandings on these issues, by engaging in each other's worlds. By doing so I soon realized that the question about her non-compliance was not to be asked as a "why don't you do what I/ modern medicine tell you is the best for your child?" Rather, her practice, her agency, her every action holds a key to the mystery. What defined her actions, then? How were actions of child care meaningful to mothers like Joanna?

Listening to the heartbeat: The understanding of the mystery resembles what the anthropologist Unni Wikan talks about with her concept of *resonance*. This means that the understanding was somehow beyond words. I understood by heart more than through words, that Joanna wanted me to see her as a good mother, wanted me to recognize that she did her very best with the conditions in which she was living. "Resonance fosters empathy and compassion", Wikan argues, with reference to a Balinese scholar "it enables appreciation; without resonance, ideas and understandings will not spring alive" (Wikan 1992:465). It is a way of doing what Hastrup encouraged us in the article "Hunger and the Hardness of Facts" (Hastrup 1993), when she urges that solidarity must set the standard for rationality, and points out, with reference to Richard Rorty: "Solidarity is not achieved by inquiry but by imagination, the imaginative ability to see strange people as fellow sufferers; that is to

incorporate others' suffering into a shared concern" (Hastrup 1993:736).

Resonance is a way of attending, to grasp what is at stake for people, what are their concerns and their aims, against, as Wikan put it, "the backdrop of the social relations in which they are engaged and the resistance life offers to them" (Wikan 1992:467). It is a way of dealing with the fact that there is an effect that Joanna and other mothers in Luoland were after, to make relevance of their words and their participation in my study, just as there is an effect they are after in other situations and in the scope of other social relations. Sharing mothers' experiences of motherhood in Luoland was a matter of learning to attend the local world with its opportunities and constraints. My aim became to understand what the mothers were after, what was at stake for them in different situations. The relation between social structures, emergent forms of relatedness and agency became a core issue of my anthropological analysis. However, the issue here is not my anthropological analysis as such but the methodological lessons learned by the described situation.

Authenticity and advocacy: the production of scientific knowledge

The core argument here is that we should not aim at defining our ethnographic data in a objectivistic/positivistic tradition, positioning ourselves as objective and disinterested scientists. Rather, we should follow people as intentional agents engaging in their lives. I could argue that some mothers breastfeed for four months exclusively while others don't, or that some know about optimal feeding practices while others don't. But such an indicative statement misses the agency of mothers; it ignores what is at stake when mothers attempt to exert some degree of control, in balancing between what is given and what is chosen (Jackson 1998).

As Michael Jackson has put it: fieldwork brings home the ontological priority of social

existences, and fieldwork based writing affirms that truth must not be seen as an unmasking which eclipses the appearance of the thing unmasked, but a form of disclosure which does it justice (Jackson 1996:4).

The argument here is not philosophical in character, however, touching on the nature of science and scientific inquiry and evidence¹. What I suggest is that we should identify and highlight the differences, technical and epistemological, and on the level of possible effects.

Anthropology is deeply subjective and inter-subjective. Looking and listening, touching, feeling and reflecting with the people of our studies on key experiences and moral dilemmas of their lives, and our lives with them; that is the core of participant observation, the superior anthropological method of investigation.

Tim Ingold has discussed the different perspectives that could be said to be prescribed for anthropology and "hard science" epidemiology or demography respectively, the local, "sphere" perspective and the global, "globe" perspective. Ingold developed his distinction between the two in an analysis on environmental problems. When we look upon the environment as a globe, it is a view from outside; it is not a life world.

... the life-world, imaged from an experimental centre, is spherical in form, whereas a world divorced from life, that is yet complete in itself, is imaged in form of a globe. Thus the movement from the spherical to global imagery is also one in which 'the

¹ For an inspiring discussion of the more philosophical aspects, see for instance Schepher-Hughes (1997), which also holds a strong case for critical interpretive anthropology and the practice of "anthropology with both feet on the ground". Schepher-Hughes' arguments are more radical than my own, at least in regard to the political responsibility.

world' as we were taught it exists, is drawn even further from the matrix of our lived experience (Ingold 2000: 211).

From the globe perspective, humans are populations, not actors. Life is on the surface, not *in* the world, thus it can be counted and defined in terms of objective structures. Ingold continues by arguing:

It appears that the world as it really exists can only be witnessed by leaving it, and indeed much scientific energy and resources have been devoted to turning such an imaginative flight into an achieved actuality (Ingold 2000: 211).

As this illuminates how a globe perspective is an objective representation, it also indicates how it blocks understandings of the subjective and inter-subjective aspects of all acts and practices and it blurs the relational character.

The sphere perspective is, with Jackson's (2004) words from above, a form of disclosure which does Joanna's acts justice. By focusing on the inter-subjective aspects of the event, we learn a lesson, not only on the relation between knowledge and practice but also on the importance of recognizing our role in social interactions of research. Scientific validity is at least partly about reflecting on the way these interactions influence the knowledge we generate.

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