Making Sense of Collective Events:
The Co-creation of a Research-based Dance[1]

Katherine M. Boydell

Abstract: A symbolic interaction (BLUMER, 1969; MEAD, 1934; PRUS, 1996; PRUS & GRILLS, 2003) approach was taken to study the collective event (PRUS, 1997) of creating a research-based dance on pathways to care in first episode psychosis. Viewing the co-creation of a research-based dance as collective activity attends to the processual aspects of an individual's experiences. It allowed us to study the process of the creation of the dance and its capacity to convert abstract research into concrete form and to produce generalizable abstract knowledge from the empirical research findings. Thus, through the techniques of movement, metaphor, voice-over, and music, the characterization of experience through dance was personal and generic, individual and collective, particular and trans-situational. The dance performance allowed us to address the visceral, emotional, and visual aspects of our research which are frequently invisible in traditional academia.

Table of Contents

---

1 This article is based on a paper presented at *Symbolic Interaction and Ethnographic Research* 26th Annual Qualitative Analysis Conference, University of Waterloo, Renison University College, Waterloo, Ontario, Canada, April 30 - May 4, 2009.

Figure 1: Dancers against wall [1]

1. Background

The generic social process of collective events revolves around the interchanges characterizing particular instances of *relatively routine occurrences, festive occasions*, *confrontational episodes, honorific ceremonies,* and *situated performances,* to name a few (PRUS, 1997, p.133). Regardless of the number of people involved or the substantive nature of particular collective events, these interchanges highlight the need for social scientists to focus attention on human interaction as processual phenomena. The collective event described here is a partnership between scientists (researcher and investigative team) and artists (choreographer, musician, and dancers); the purpose of which was to co-create a dance performance based on a federally funded qualitative study of pathways to care for youth experiencing first episode psychosis. Participant observation field notes and audiotaped transcripts of individual meetings between choreographer and social scientist, and between creative and research teams over a six-month period were used to analyze the collective interchange and document the ways in which the research and artistic teams define (and redefine) their situation through interaction. We found that the unfolding process was characterized by ongoing negotiation to balance differing viewpoints, definitions, and "actions" of all participants. The research team required a shift in their thinking to allow the creative team to (re)interpret the data in the form of movement and music. The choreographer and dancers faced an artistic challenge—to "perform" first episode psychosis in a way that captivated an audience and reflected empirical research findings. [2]

This paper examines the differing and shifting viewpoints, definitions, actions, and adjustments of all participants in this process of using the arts to share qualitative research findings with a wide variety of audiences. The goal was to examine the ways in which individual scientists and artists interpret situations, the role that other people play in the process, the relationships that people develop with others, and the processes by which interaction takes place. When examining human life in processual terms, the emphasis is on the ways in which people actively shape or construct the social worlds they experience in conjunction with others (PRUS, 1987). Building on the human capacities for language and

meaningful activity, this paper stresses the intersubjective and enacted essences of human-lived experience.

Figure 2: Dance rehearsal [3]

1.1 A word about arts-based approaches in health research

I am interested in how we communicate research findings to a wide variety of stakeholders, specifically, the use of creative arts in the design, process, analysis, interpretation, and communication of research results. How can the creative arts elicit and portray essential research findings and promote useable knowledge and understanding? What are the intersections that exist between art and science? Though on the surface, these two disciplines appear worlds apart, they both embrace and celebrate the importance of innovation and creativity. As WAINWRIGHT and RAPPORT (2007) note, repeated themes of form, structure, content, and meaning are shared by the artistic creative process and qualitative research. Artist and researcher take experience and seek to translate it into a form that others can experience and interpret. GADAMER (1975) suggests that all attempts at experiential knowing are aesthetically oriented, and until recently, qualitative research literature has only cursorily mentioned and invited the artistic interpretation of data. It is only in the last few years that there has been an upsurge of arts-based approaches to research, largely in the educational realm and more recently, in health and social care (KEEN & TODRES, 2006, 2007). [4]

Following a recent call for a model of social science which is performative and the subsequent need to rethink the relationship between performance and scholarly representation (DENZIN, 2003; JONES, 2006; JONES et al., 2008), my research team and I have been using arts-based research, involving photography, theatre, and film for both knowledge creation and knowledge dissemination. With respect to our research with young people experiencing a first episode of psychosis, dance was selected as the form of communication. Dance for me was of particular interest—a blending of my two worlds, public and private: my role as a social scientist and my role as a mother, immersed in the dance world (via three daughters deeply involved in dance). I found myself continuously moved by the power of dance to communicate a story—for me, the parallels with the aims of qualitative research were many. Was it possible to develop visual ways to share

research findings about multifaceted subjects like psychosis? In what ways could expressive bodies/performance be used to represent qualitative research? Could it challenge us to engage in a different way with the data and to see differently? To provide context for this discussion, a brief description of the study follows. [5]

1.2 The study: Pathways to care for youth experiencing a first episode of psychosis

Our current understanding of help seeking by youth with psychiatric problems in general and psychosis in particular is limited; yet, understanding how services and supports are obtained in the early stage of psychosis is critical for early intervention (LINCOLN & McGORRY, 1995). Worldwide studies have revealed that individuals suffering from a first episode of psychosis experience an alarming delay between the onset of psychotic symptoms and the initiation of treatment (NORMAN & MALLA, 2001; MALLA, NORMAN, MCLEAN, SCHOLTEN & TOWNSEND, 2003). Understanding the process of help seeking is critical as early psychiatric intervention not only significantly aids recovery in first episode psychosis, but may also reduce subsequent chronic symptomatology (BIRCHWOOD, 1992; BIRCHWOOD & MACMILLAN, 1993). Understanding mental health, help-seeking behavior is essential in designing treatments and addressing the needs of the underserved through outreach or education and empowering youth and their significant others in their decision making about seeking mental health intervention (GLADSTONE, VOLPE & BOYDELL, 2007). Actively learning from individuals and their significant others will assist service providers and policy makers to plan more efficient pathways to mental health services (ADDINGTON, VAN MASTRIGT & ADDINGTON, 2004). [6]

The study upon which the dance was based used a multiple case study approach which involved an in-depth examination of the pathways to mental health care using 10 index cases via maximum variation sampling. It encompassed 60 interviews in total: 2 interviews with each youth and the remaining interviews with key others (including parents, general practitioner, friends, psychiatrists, teachers, and case managers) involved in the pathway to mental health care. In addition, related documents and observational data were used in order to understand the variety of ways in which youth come to seek help from mental health services and the factors that contribute to lengthy treatment. [7]

Findings from this research (BOYDELL, GLADSTONE, & VOLPE, 2006a, 2006b; GLADSTONE et al., 2007; BOYDELL, ADDINGTON et al., 2008; BOYDELL, GLADSTONE et al., 2006) indicated the complex help-seeking process and the ways in which the role of the family, the system of education and community treatment, and the illness experience itself impacted the mental health care pathway. Despite the uniqueness of each individual pathway, there were common threads which encompassed the difficulty in identifying psychosis by general practitioners, psychiatrists, teachers, peers, and family members; the experience of isolation and paranoia that prevented youth from telling others about their experiences and help-seeking activities, the significant role of the school, and the widespread lack of knowledge about psychosis. [8]

Young people in the study indicated that had they known that their symptoms were related to early signs of psychosis, they might have sought help earlier (BOYDELL & JACKSON, 2010). The problem of stigma as a barrier to help seeking was also identified as a critical factor in delay on the part of both young people and their families. The importance of bringing knowledge about psychosis into the community, particularly the school system, was a pervasive theme among young people and their families in the first episode of psychosis study and was also identified in earlier research on rural mental health (BOYDELL, STASIULIS, BARWICK, GREENBERG & PONG, 2008). Consequently, it was critical to the research team that research results be communicated beyond academia—targeting a broader audience, including young people, their families, service providers, educators, and the general public. [9]

To take a subject such as psychosis and a form such as dance and combine them, viewing a phenomenon through both the scientific and the artistic lens has the potential to intensify the strength and depth of meaning (BLUMENFELD-JONES, 1995). The choreographic process is one of sorting, sifting, editing, forming, making, and remaking—fundamentally an act of discovery, an interpretation of a written text (CANCIENNE & SNOWBER, 2003). The dancer can capture an embodied understanding, an indication of the indescribable, unknowable elements of lived experience. Dancing the data induces different ways of knowing and understanding and presents a possibility for capturing the particularity and the universality of a person's experience. [10]

2. Making Sense of the Knowledge Creation Process (the Process of Creating the Dance) as a Collective Event

Figure 3: Dancer warming up [11]

There are a number of sub-processes that are explored when viewing this co-creation as a collective event: 1. getting started and initial involvements; 2. obtaining definitions of the situation from others (and their activities); 3. dealing with multiple (diverse) themes or definitions of the situation; 4. watching things take place over time (developing processual [re]interpretations); 5. engaging the situation at hand and attending to the reactions of others; and 6. concluding, resurrecting, and continuing collective events. [12]

2.1 Getting started and initial involvements

Figure 4: Rehearsal for solo [13]

The availability of "knowledge translation" funds from a research grant presented an opportunity to use the genre of dance to communicate qualitative research findings to multiple audiences. This resulted in a call to Siona, a much admired and respected dance choreographer who had worked with my daughters. I discussed with her the idea of co-creating a dance performance that would be based on the research results from my research team's qualitative work on pathways to care in first episode psychosis. I believed that collaboration between artists and scientists might provide a way to combine both theoretically sophisticated understanding and artistically inspired images. I shared my belief that the choreographic process and the research process were similar in terms of the central role of interpretation. Siona agreed and noted that dance companies and research programs both work similarly and collaboratively, responding to many questions involved in teamwork and organization. She acknowledged that using dance as a communication tool for representing data on early psychosis would not only create an opportunity for people to think about research on psychosis in an accessible, creative, and thoughtful way, but it would also provoke and perhaps disrupt. [14]

When we started to create *Hearing Voices* (the dance title), we realized the challenge in the prospect of taking the subject of psychosis and the genre of dance, combining them into something that would communicate the experience of young people. We talked at length about the ability of dance to explore knowledge physically, emotionally, and mentally while allowing the audience to *experience immediately without analyzing but emotionally experiencing something LIVE,* as Siona stated*.* Moreover, when Siona stated that dance has the capacity to capture individual stories, revisit an experience, and create a voice that no words can describe—but somehow we all understand it in a gesture, a glance, or a silent moment—I knew that we could make something happen. It reminded me of TODRES' work (2007) on embodied inquiry that attends to the relationship between language and the experiencing body. [15]

Embodied research rests on the idea of the lived body and the lived experience, derived from phenomenology; it implies that knowledge is related to lived experience. Embodiment is viewed as an insightful and multifaceted way of conceptualizing the body, movement, and force as embodied rhythms of how possible it is to understand individuals from varied perspectives in nuanced contexts. Embodied inquiry focuses on the relationship between language and the experiencing body; it has the potential to allow an individual's lived experience to come to the forefront. TODRES and GALVIN (2008) state:

> "words are not just tools or skills that are performed; they are also experienced for how they 'feel', and this 'how they feel'—the inner dimension of language—is an aesthetic quality that is central to the process of understanding. … Such language that locates us in relation to others is both personal and interpersonal" (pp.569f.). [16]

This initial involvement was characterized by managing reservations (mine) and taking risks. With respect to "managing reservations"—could we pull it off? Was there enough investment on the part of the choreographer? Many early meetings were canceled at the last minute, causing me to wonder whether this was a characteristic of "creative" types or to query whether there was enough commitment to the project process. This early stage was also characterized by "taking risks." The risk that I felt was taking as an academic related to engaging in a novel form of knowledge translation, typically outside of the realm of dissemination of academic research.

> "The current rhetoric surrounding the important and indeed, essential nature of knowledge translation currently pervading the health care greatly reduces my feelings of uncertainty regarding moving forward." (KB, field notes) [17]

I took comfort in BAGLEY and CANCIENNE's work (2002), one of the few educational researchers (other than BLUMENFELD-JONES [1995] and COLE & McINTYRE [2001]) who have represented research through movement and dance. Because of the recency and novelty of this approach, BAGLEY and CANCIENNE were extremely cautious and chose to choreograph movements that were mostly literal and closely represented the words of their research participants. I was, however, prepared to take some risks in terms of moving away from solely literal movements. [18]

2.2 Obtaining definitions of the situation from others (and their activities)

Figure 5: Choreographer directing [19]

Obtaining a definition of the situation is a fundamental concept in symbolic interactionism advanced by American sociologist W. I. THOMAS (2002 [1923]). It is a type of collective agreement among people on the characteristics of a situation, and from there, a determination of how to appropriately react to it. Our collective agreement was formalized in the shape of a contract produced by the corporate ventures department at my place of employment, a large academic hospital. This document detailed the deliverable produced (the dance) and the ownership rights surrounding this product. There were sections of the contract wherein the two parties (Siona and I) had to agree to collaborative services, fees, representations and warranties, intellectual property rights, indemnity, confidentiality, and term and termination. The definition of the situation on the part of corporate ventures was that of a product that was "purchased" and that had particular rights associated with it. Both creative and research teams resisted this formalization of our partnership together and worked with corporate ventures to simplify the document (which, interestingly, was never signed). [20]

In addition, in order to work together and discuss the research findings in depth, the dance choreographer together with her creative team had to become immersed in the data, consisting of anonymized transcripts as well as observational and reflective field notes. As such, they accessed case study summaries and some of the actual anonymized transcripts. [21]

2.3 Dealing with multiple (diverse) themes or definitions of the situation

Figure 6: Choreographer directing II [22]

Collective behavior is socially constructed, as it requires recognition of the differing (and shifting) viewpoints, definitions, actions, and adjustment of all participants. The experience of creating the dance highlighted the ongoing adjustments and ensuing interactions related to these shifts in plans. The struggle between the content and the aesthetic qualities of the dance was paramount in this process—the problem of balancing didactic and aesthetic claims. I questioned what might have been sacrificed for the sake of performance and Siona questioned what might have been sacrificed for the sake of the research. We arrived at a mutual agreement that it was critical to keep the integrity of the essential features of the experience; however, the ways in which to do so were often ambiguous. [23]

There is a reported tension between the academic literature (educational needs of researchers who are developing arts related health research projects for the purposes of knowledge translation) and the aesthetic requirements of these projects that make the work interesting, complex, and engaging (GRAY, 2007; ROSSITER et al, 2008; SALDAÑA, 2003). This work requires a balance between personal engagement in the material which often deals with complex and intimate lived experience, while staying focused on the needs of the research project, including the systematic examination, analyses, and interpretation needed for a rigorous approach to the work. [24]

The creative team revealed that a dancer must embody the material he or she performs or "translates" in addition to having an intellectual understanding. The research team realized that a dancer also uses his or her own personal experience in the portrayal of a character in order to fully relate to the dramatic material, thus contributing to the narrative research material. This embodiment, while necessary in translating the experiences from the research interviews, also raised questions of the artistic analysis and interpretation beyond the initial analysis of the research material (COLANTONIO et al., 2008).

"As my career developed in dance, I explored choreography and found great satisfaction in telling stories through movement no matter what the subject. That is what choreographers are to me ... storytellers. Creating live pictures that evoke an experience. Music plays a large role in this experience and often completes the choreography like a frame around a picture. Music can be shaped and mixed like choreography and can evoke the same emotion without movement or words. This is why it is such a powerful mix." (Siona, choreographer field notes) [25]

Both creative and research teams worked with very incomplete stocks of knowledge, as they attempted to sort their ways through this particular collective event. The sense of ambiguity and tentativeness on the part of the dancers was apparent to me, as demonstrated by the fact that several of them very much wanted to know (in a very detailed and explicit way) about the experience of first episode psychosis—they needed to know so that they could persuasively "play their parts" in the dance. *Unanticipated interchanges* in the form of backstage conversations took place when dancers would approach me individually to ask specific questions about psychosis and some of the telltale symptoms. They recounted stories of their own personal experiences with former partners and/or friends who exhibited signs and symptoms of psychosis that were described by young people in our study. In turn, the research team was brought into the choreographic process—the very details of using a particular theme or concept from the data and creating an entire "scene" to depict what was happening. [26]

2.4 Watching things take place over time (developing processual [re]interpretations)

Figure 7: Anguished interaction [27]

When Siona asked me to share some of the themes that emerged—actual words or a series of words—to help convey the research findings to her and to inspire the choreography, I felt confident and trusted that she would represent the results that emerged in a meaningful and evocative manner. I provided her with words that represented a dialectic of sorts but occurred along a continuum in the stories of the experiences of young people and their significant others in our study, as they navigated and negotiated pathways to care.

"It was important to me that Siona convey the isolation, the uncertainty, the fear, the hopelessness and also to highlight the hope, the joy, the connection, the moving beyond the illness ... She choreographed the final moments of the performance to reflect the journey as being different for each character—some move forward, some do not." (KB, field notes)

Figure 8: Reaching hands [28]

Following an overview of the definition of psychosis and the general field of early intervention, the research team highlighted the richness of the 10 in-depth case studies that involved qualitative interviews with the young person and everyone they identified in their network who played a role, whether it was a facilitative role. We talked about complexity of the pathway and the fact that although every young person's pathway was unique, there were common experiences across all cases. There was a great deal of help-seeking activity vis-à-vis subtle and not-so-subtle changes taking place (BOYDELL, GLADSTONE et al., 2006). There were a number of persons and multiple systems involved in help-seeking activities; however, they rarely communicated with each other. There were many failed attempts at accessing appropriate services and supports and these efforts were conceptualized as "missed opportunities" (GLADSTONE et al., 2007). We wanted these themes conveyed in the dance. [29]

A method of analysis was undertaken (ROSSITER et al., 2008), one which involved a narrative or dramatic coding of the transcripts, whereby text was identified that could be used for particular narratives or for informing character or scene development in the dance production. This process was critical in identifying the segments of text that were utilized in the musical score accompanying the dance. Siona's "definition of the situation" related to her

intensity at "getting it right," ensuring that what she was creating was "true to the data" and was what the research team wanted. [30]

Siona decided to use a script to keep track of all activities presented in the performance and provide a reference of what she was trying to get across—an organizational tool to communicate clearly. The reason the script was required was a result of the multiple meetings, articles, and data summaries that were available and were somewhat overwhelming. It helped to condense this information into a story-like dance that would educate and not overwhelm an audience. The process unfolded from identifying the symptoms to relating to the individuals in the interviews, building character backgrounds, and finally condensing the entire research into a "general focus" that would give the highest impact. The challenge was to privilege the voices of the particular lived experiences of psychosis and to also emphasize the universality of the experience. [31]

The script marked out the location of the props (the bench) as well as the dancers, the type of mood that was being expressed, the musical and dancer cues, and the emotion (such as breathing). Once the basic script was in place, there was the freedom to layer the stories and the choreography. Although the choreography was excluded from the script, the blocking (patterns of the dancers) was included. The script also served as a communication tool for the composer; the score was incorporated from the beginning so that the ideas on the page inspired the music.

> "I felt the tension of trying to balance my input into the product with a license for Siona to use her creativity—I knew that I had to 'let go' and give her the freedom to work with the data we had shared with her." (KB, field notes)
>
> "I felt that Katherine trusted me right from the very beginning with all that was involved in building this piece. She left me the room to interpret my own vision into hers. This trust made me nervous and excited at the same time. Nervous, as I struggled to understand Katherine's world of writing journals, conducting research, and the constant discussions between her colleagues and the research team ... using terminology that sometimes went over my head! I kept reminding myself that I was someone who has analyzed, observed, and produced in physical form, using the body and music to experience a world that is used to using text." (Siona, field notes) [32]

We arrived at an agreement that it was possible to focus on the particular—the narratives of two young people with psychosis from our series of case studies as well as the universal—common themes that emerged across the descriptions of all pathways to care. For the particular narratives, the first focused on a young woman and her mother and the efforts made by others to help her in acquiring formal mental health care. The second focused on a young man whose voice-over is worked into the musical score to convey to the audience what he was thinking as he experienced early psychosis—his confusion and his withdrawal from friends.

"While these choices reduce the variety of journeys explored in the dance, it did expand the exploration of the role of others in the social network and the isolation experienced. The performance presents various fragments of the pathways experience. It is important to honor the complexity of each person's pathway to care." (Siona, team meeting) [33]

2.5 Engaging the situation at hand and attending to the reactions of others

Figure 9: Three dancers practicing [34]

The process was characterized by developing an agreed upon sense of purpose, identifying the main messages or central themes from the research data. Throughout the process, the reactions to the product as it evolved were varied and included not only my perspective, but also that of the choreographer, the dancers, the musicians and the research team.

"I constantly reminded myself that the purpose of the dance was to communicate what couldn't be described or felt with the text or research journals. Possibly knowledge that was untold, or not sensed. The excitement of impact, curiosity and an alternative way of delivering research exposes new findings or paths to findings. It was important to me not to turn this into an entertainment spot on the program but to express and communicate as closely as we could the youth experience of seeking help as described in their transcribed narratives. This requires less 'technical movement' and more 'character movement'. There was a need to focus on the emotional journey and have the movement reflect that." (Siona, field notes) [35]

The research team involvement was crucial in that it provided feedback into the way in which the performance was evolving and shaped the ultimate product. The meetings held between dancers, musician, choreographer and research team offered a lens into both worlds—the dancers were able to ask their questions about the subject matter and the research team could see the ways in which a thematic concept from the study was integrated into the dance movements. At an early rehearsal, the research team commented that the dance as it was evolving was too focused on individual psychology and needed to reflect the research findings that indicated the help seeking process was not an individual decision making process, but that there were many significant others involved. The

choreographic process then focused more on the relationships between young people with psychosis and the impact of others in their lives. This process demonstrated aspects of the evolving perspectives on ways of presenting the data on youth with first episode psychosis. [36]

Our musician spent many hours working on integrating the musical score into the performance. He states:

> "As a composer working with tangible material and real life scenarios, the challenge was to maintain that honesty expressed by the youth, in the emotive of the music ... Each section of dance needed the appropriate color sonically to convey the character's feelings. The creative process, like the piece itself, has a real journey. There are moments of angst, loneliness and elation and hope. The music must act as an underlying catalyst driving the movement while subtly directing the audience's emotion...

> Watching the reaction of the audience throughout the piece, one could tell they were riveted in an almost stunned silence, transported into the bodies of both the dancers and the youth (cases) they represented. I knew absolutely that this unique process had succeeded when I myself felt that twinge in my heart as the piece hit its climax." (Tim, field notes) [37]

In our exploration of the potential of alternate forms of representation for illuminating the worlds we wish to understand, it is important to measure the audience response. In a transdisciplinary world, we are working outside conventional boundaries and uncovering moments that may be difficult to define or categorize by engaging with new experiences and improvising unorthodox combinations of knowledge. The dance was performed to two very unique audiences; academics and service providers at an international scientific symposium on early psychosis and choreographers, dancers, musicians and actors in a rehearsal held the day prior to the symposium. In both instances, immediately following the performance, spectators were asked to take a few minutes to write their reaction to the dance on a "sticky note" provided to them. They were told that it could be a word, a series of words, or a sentence or two. In the case of the symposium, there were several large poster boards outside of the room and the audience members affixed their responses to the boards on their way out to the break. In this way, the audience was able to see how others responded and this encouraged further dialogue throughout the day.
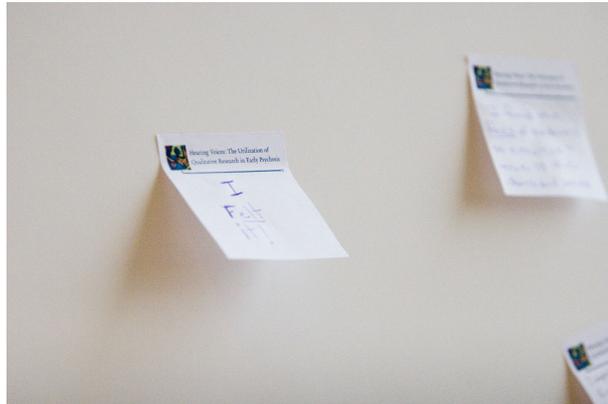
Figure 10: Grafitti wall

SOLITUDE

    SCARRING

You are not alone. (Artist)

Pain-Trying-Cycles-Alone/Not-(dis)connect-Break/broken/flee

So much pain that as a professional I CAN'T fell w/ every person b/c I'll drown but this reminds me why I do my job. Reminds me HOW I should … that words aren't enough to understand. (Health care practitioner)

A beautiful, moving and highly evocative communication of the lived experience of youth and their stories of psychosis. I was brought to tears. A wonderfully innovative way to share and communicate knowledge. (Researcher) [38]

2.6 Concluding, resurrecting, and continuing collective events

Figure 11: Three female dancers [39]

One would anticipate that the partnership of the creative and academic team members would formally conclude once the dance had been fully choreographed, presented and performed; however, the activities continued as we sought funding to empirically study the research-based dance as a form of knowledge translation. Following the original launch, we presented and performed to a variety of audiences, including at risk secondary school students, students at a private girls high school, grand rounds at an academic health science facility, a global conference on the arts and health care, and a policy conference sponsored by the local government. Feedback from these audience members was also solicited through the use of "Post-it" notes which had been overwhelmingly positive. We have since attained further federal funding to explore the impact of using dance and other arts-based research approaches in health care. We now turn to an examination of the need to resurrect the collective event as well as to redefine, readjust, and reassess our collective situation. The journey continues. [40]

3. Concluding Remarks

Focusing on the doing or accomplishing of human group life, generic social processes provide a theoretically coherent way of connecting a variety of seemingly diverse and disjointed activities (PRUS, 1997). Viewing the co-creation of a research-based dance as collective activity has drawn attention to the processual aspects of individual's experiences. It allowed us to study the process of the creation of the dance and its capacity to both convert abstract research into

concrete form and to produce generalizable abstract knowledge from the empirical research findings (i.e., it picked up the generic, universal experience underlying individual stories). Thus, through the techniques of movement, metaphor, voice-over and music, the characterization of experience in the dance was personal and generic, individual and collective, particular and trans-situational. The dance performance allowed us to address the visceral, emotional, and visual aspects of our research which are frequently invisible in traditional academia (CONQUERWOOD in DONKER, 2007). [41]

The use of PRUS' collective events can be likened to French theorist BOURRIAUD's relational aesthetics.[2] BOURRIAUD (2002, p.14) speaks of a relational art; an art which takes as its theoretical horizon "the realm of human interactions and its social context, rather than the assertion of an independent and private space." JONES (2006) identifies this work as a starting point to allow social scientists to ponder issues of aesthetics and strategies for dissemination of research using the arts. He notes that the key principles of relational aesthetics include intersubjectivity, the encounter, and the collective elaboration of meaning; the goal of which is to bring people together and to increase understanding. The resulting (re)presentation of research on psychosis using performative dance described herein is the result of engaging in a relational aesthetic. [42]

The structure for this paper resulted from PRUS' call to attend to the generic qualities of social life. In this manner, researchers can connect the trans-situational components of the study with other pertinent areas of ethnographic work (PRUS, 1996, p.141). Using this framework, I have provided a detailed analysis of the processual and emergent nature of co-creating a research-based dance performance, while paying close attention to the unfolding of the intersubjective and multiperspectival elements. By focusing on the abstract and generic dimensions of collective activity in this form of knowledge production, we hope to inspire further research on other everyday situations and activities.

Figure 12: Against the wall [43]

---

2   I am indebted to Kip JONES (2006) for making this link.

Acknowledgments

References

Addington, Jean; Van Mastrigt, Sarah & Addington, Donald (2004). Duration of untreated psychosis: impact on untreated 2-year outcome. *Psychological Medicine*, *34*, 277-284.

Bagley, Carl & Cancienne, Mary Beth (2002). *Dancing the data*. New York, NY: Peter Lang Publishing.

Birchwood, Max (1992). Early intervention in schizophrenia: Theoretical background and clinical strategies. *British Journal of Clinical Psychology*, *31*, 257-278, http://schizophreniabulletin.oxfordjournals.org/cgi/reprint/22/2/353.pdf [Accessed: August 30, 2010].

Birchwood, Max & Macmillan, Fiona (1993). Early intervention in schizophrenia. *Australian & New Zealand Journal of Psychiatry*, *27*(3), 374-378.

Blumenfeld-Jones, David (1995). Dance as a mode of research representation. *Qualitative Inquiry*, *1*(4), 391-401.

Blumer, Herbert (1969). *Symbolic interaction.* Englewood Cliffs, NJ: Prentice-Hall.

Bourriaud, Nicolas (2002). *Relational aesthetics.* Dijon: Les Presses du Reel.

Boydell, Katherine M. & Jackson, Siona (2010). *Research-based dance as a knowledge translation strategy*. Ottawa, ON: CIHR Knowledge Translation Casebook, http://www.cihr-irsc.gc.ca/e/41594.html [Accessed: January 10, 2011].

Boydell, Katherine M.; Gladstone, Brenda & Volpe, Tiziana (2006a). Understanding help-seeking delay in first psychosis prodrome: A secondary analysis of the perspectives of young people. *Schizophrenia Research*, *86*, S124.

Boydell, Katherine M.; Gladstone, Brenda & Volpe, Tiziana (2006b). Understanding help-seeking delay: Perspectives of youth experiencing first episode psychosis. *Psychiatric Rehabilitation Journal*, *30*(1), 54-60.

Boydell, Katherine M.; Stasiulis, Elaine; Barwick, Melanie; Greenberg, Natasha & Pong, Raymond (2008). Challenges of knowledge translation in rural communities: The case of rural children's mental health. *Canadian Journal of Community Mental Health*, 27(1), 49-63.

Boydell, Katherine M., Gladstone, Brenda; Addington, Jean; Goering, Paula; McCay, Elizazabeth; Krupa, Terry; Stasiulis, Elaine & Volpe, Tiziana (2006). Youth experiencing first episode psychosis: A comprehensive examination of pathways to mental health care. *Schizophrenia Research*, *86*, S116.

Boydell, Katherine M.; Addington, Jean; Gladstone, Brenda; Goering, Paula; McCay, Elizabeth; Krupa, Terry; Stasiulis, Elaine & Volpe, Tiziana (2008). Using the network episode model as a framework to understand pathways to care for youth experiencing first episode psychosis. *Early Intervention in Psychiatry*, *2*(s1), A8.

Cancienne, Mary Beth & Snowber, Celeste (2003). Writing rhythm: Movement as method. *Qualitative Inquiry*, *9*(2), 237-253.

Colantonio, Angela; Kontos, Pia C.; Gilbert, Julie E.; Rossiter, Kate; Gray, Julia & Keightley, Michelle L. (2008). After the crash: Research-based theatre for knowledge transfer. *Journal of Continuing Education in the Health Professions*, *28*(3), 180-185.

Cole, Ardra & McIntyre, Maura (2001). Dance me to an understanding of teaching: A performative text. *Journal of Curriculum Theorizing*, *17*(2), 43-60.

Denzin, Norman K. (2003). The call to performance. *Symbolic Interaction*, *26*(1), 187-207.

Donker, David (2007). Performance, ethnography and the radical intervention by Dwight Conquerwood. *Cultural Studies*, *21*(6), 821-825.

Gadamer, Hans G. (1975). *Truth and method.* New York: Seabury Press.

Gladstone, Brenda; Volpe, Tiziana & Boydell, Katherine M. (2007). Issues encountered in a qualitative secondary analysis of help-seeking in the prodrome to psychosis. *Journal of Behavioral Health Services & Research*, *34*(4), 431-442.

Gray, Julia (2007). Exploring the creative and academic tensions in developing *After the Crash: a play about brain injury*—a research-based theatre project about traumatic brain injury. *Unpublished master's degree thesis, York University.*

Jones, Kip (2006). A biographic researcher in pursuit of an aesthetic: The use of arts-based (re)presentations in "performative" dissemination of life stories. *Qualitative Sociology Review*, *2*(1), 66-85.

Jones, Kip; Gergen, Mary; Guiney Yallop, John J.; Lopez de Vallejo, Irene; Roberts, Brian & Wright, Peter (Eds.) (2008). Performative social science. *Forum Qualitative Sozialforschung / Forum: Qualitative Social Research*, *9*(2), http://www.qualitative-research.net/index.php/fqs/issue/view/10 [Accessed: December 14, 2010].

Keen, Steven & Todres, Les (2006). Communicating qualitative research findings: An annotated bibliographic review of non-traditional dissemination strategies*. Report, Bournemouth University, UK, Centre for Qualitative Research at the Institute of Health and Community Studies*.

Keen, Steven & Todres, Les (2007). Strategies for disseminating qualitative research findings: Three exemplars. *Forum Qualitative Sozialforschung / Forum: Qualitative Social Research*, *8*(3), Art. 17, http://nbn-resolving.de/urn:nbn:de:0114-fqs0703174 [Accessed: May 11, 2010].

Lincoln, Claire V. & McGorry, Patrick (1995). Who cares? Pathways to psychiatric care for young people experiencing a first episode of psychosis. *Psychiatric Services*, *46*,1166-1171, http://psychservices.psychiatryonline.org/cgi/content/abstract/46/11/1166?ijkey=0f9bfd6f172d99c7f362d0605c576659ba8721fc&keytype2=tf_ipsecsha [Accessed: August 30, 2010].

Malla, Ashok; Norman, Ross; McLean, Terry; Scholten, Derek & Townsend, Laurel (2003). A Canadian program for early intervention in non-affective psychotic disorders. *Australian and New Zealand Journal of Psychiatry*, *37*, 407-413.

Mead, George H. (1934). In Charles W. Morris *(Ed.), Mind, self and society*. Chicago: University of Chicago Press.

Norman, Ross & Malla, Ashok (2001). Treating psychosis: Is there more to early intervention than intervening early? *Canadian Journal of Psychiatry*, *46*(7), 645-648.

Prus, Robert (1987). Generic social processes: Maximizing conceptual development in ethnographic research. *Journal of Contemporary Ethnography*, *16*, 250-293.

Prus, Robert (1996). *Symbolic interaction and ethnographic research.* Albany, NY: State University of New York Press.

Prus, Robert (1997). *Subcultural mosaics and intersubjective realities: An ethnographic research agenda for pragmatizing the social sciences.* Albany, NY: State University of New York Press.

Prus, Robert & Grills, Scott (2003). *The deviant mystique.* Westport, CN: Praeger.

Rossiter, Kate; Gray, Julia; Kontos, Pia; Keightly, Michelle; Colantonio, Angela & Gilbert, Julie (2008). From page to stage: Dramaturgy and the art of disciplinary translation. *Journal of Health Psychology*, *13*(2), 277-286.

Saldaña, Johnny (2003). Dramatizing the data: A primer. *Qualitative Inquiry*, *9*(2), 218-236.

Thomas, William (2002 [1923]). William I. Thomas on the definition of the situation. In Nathan Rousseau (Ed.), *Self, symbols, and society: Classic readings in social psychology* (pp.103-115). Lanham, MD: Rowman & Littlefield.

Todres, Les (2007). *Embodied inquiry: Phenomenological touchstones for research, psychotherapy and spirituality*. New York, NY: Palgrave Macmillan.

Todres, Les & Galvin, Kathleen (2008). Embodied interpretation: A novel way of evocatively re-presenting meanings in phenomenological research. *Qualitative Health Research*, *8*, 568-583.

Wainwright, Paul & Rapport, Frances (2007). Conference report: Circles within circles—Qualitative methodology and the arts: The researcher as artist. *Forum Qualitative Sozialforschung / Forum: Qualitative Social Research*, *8*(3), Art. 5, http://nbn-resolving.de/urn:nbn:de:0114-fqs070358 [Accessed: December 14, 2010].

Author

Katherine M. BOYDELL is Senior Scientist in the Learning Institute and Scientific Director of Qualitative Inquiry in Child Health Evaluative Sciences at The Hospital for Sick Children and Associate Professor in the Departments of Psychiatry and Dalla Lana School of Public Health at the University of Toronto, Canada.

Contact:

Katherine M Boydell

Department of Psychiatry
University of Toronto
Child Health Evaluative Sciences
The Hospital for Sick Children
555 University Avenue
Toronto, Ontario
Canada, M5G 1X8

Tel.: +1 416-813-8469
Fax: +1 416-813-8469

E-mail: katherine.boydell@sickkids.ca
URL: http://www.sickkids.ca/

Citation