

# social research Update

## *Begin at the beginning...* Using a lifegrid for exploring illness experience

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- A lifegrid is a chart with rows showing years in a participant's life and columns representing different areas of their life.
- It can be used in an interview to help explore the meaning and experience of illness within people's lives and offers a number of practical benefits for participants.
- It is useful for exploring chronic, fluctuating conditions, in which changes over time are a key feature of the condition
- It helps a researcher to see the stories of people's illnesses in clear temporal order, alongside the way in which they have incorporated the condition into their life, and into the story they tell of their life, enabling a fuller understanding of the course and experience of a condition

In broad terms a lifegrid can be seen as a form of solicited narrative, providing one way to obtain information on participants' life courses and creating a 'diagrammatic chronology' of a participant's life (Minichiello, Aroni, Timewell and Alexander, 1995: 87). Use of a lifegrid enables the illness experience to be incorporated into the life story (Mathieson, 1999) and acknowledges that illness does not just impact on a person's life, but is experienced there (Radley, 1999).

The lifegrid has primarily been used in quantitative research, as a tool for improving 'accuracy' of recalled data across the life course (for example, Blane, 1996). Lifegrids have been less widely used in qualitative research (although timelines, which are based

on similar principles, have been used). Notable exceptions include Parry et al's (1999) qualitative study of life experiences and smoking behaviour and Wilson et al's (2007) study of young people's experience of parental substance abuse, in which lifegrids facilitated engagement on potentially sensitive topics.

### What is a lifegrid?

A lifegrid is a chart with rows showing years in a participant's life and columns the different areas in that life, for example family, work health (Parry et al., 1999). Significant external events (for example sporting, political, international) may also be listed by year. Figure 1 shows an excerpt from the lifegrid of one of the participants (Duncan) in Project 2. Printing the charts from Excel onto

A3 paper means that they can be clearly seen by respondent and interviewer and that cells are big enough for handwritten notes. In our research all notes were entered by the researcher, but it would also be possible for the participant to do this.<sup>1</sup>

### Using a lifegrid to explore experience of chronic pain

This article draws on two qualitative research projects (Richardson, 2005a, 2005b) in order to evaluate the lifegrid's utility for in-depth interviewing in the area of health and illness. Both projects explored people's experience of chronic pain. In Project 2 the lifegrid was used alongside diaries, diary interviews and family member interviews.

In the first project the column of external events, as used in the original lifegrid (Parry et al., 1999), was used, thus making six columns: (1) 'external' (2) years of life from birth to present day (3) 'family/personal' (4) 'work/leisure' (5) 'health/illness', and (6) 'pain'. The column of external events was not used by any participants and, for some, was actually a distraction. Participants used fixed events within their own lives, such as

marriages and births, to reference and locate other life events. It was also difficult to find culturally known and appropriate external events throughout the lives of people aged 60 and above, who now lived in Australia, but may have been brought up elsewhere. Only one interview was possible with each participant and the lifegrid was quite time-consuming, given the participants' ages. It therefore tended to dominate rather than facilitate the interviews. However, using the lifegrid in this limited way highlighted its potential: people did use it to reconstruct their life stories and to tell the story of their pain and their life.

In Project 2 an adapted version of the lifegrid was used, with the external events column removed. However, the original template (including external events) was inadvertently used for four interviews – and it transpired that only one participant actually referred to this column. She used it to talk about her memories of the events listed, for example, recalling in great detail her memory of Kennedy's shooting, but saying little about the World Cup, "because I'm not interested in football". This confirmed the view that this column

did not facilitate the respondent telling the story of their pain and provides further evidence of the difficulty in finding culturally relevant external events.

We include the details of this mistake for two reasons: first, it provides additional information about how participants use the lifegrid, and second, it is a response to Charmaz and Mitchell's (1997) eloquent call for researchers to 'begin at the beginning' in their description of research stories.

In Project 2 the lifegrid interview was transcribed prior to the follow-up interview and used, together with field notes, to construct questions for the later interview, enabling follow-up of issues and exploring life events further.

### Issues in how the lifegrid is used

These projects raised a number of issues in how the lifegrid is used by participants and by researchers.

The lifegrid seems to relieve the participants of having to tell their story chronologically: although the story itself will be chronological, it does not necessarily have to be told that way:

Duncan: [...] It's just trying to remember everything. I keep remembering bits but they are not in chronological order.

It is the authors' experience that participants in in-depth interviews worry about telling their story 'correctly'. The lifegrid can free them from this concern and enable them to produce a story that satisfies both them and the researcher.

Most participants using the lifegrid decided to 'begin at the beginning' but, once they became more comfortable and confident, moved away from chronological progression through their lives. There was an initial hesitancy, marked by acquiescence to the researcher:

Int: [...] It is really up to you, where

Date	Age	Family/Personal	Work/leisure	Health/Illness
			became Outward Bound instructor: 'getting paid for my hobby'	
1979		wife stopped work when daughter (Alice) was born	missed the children (birthdays etc.) when they were young because could be away for 3-4 weeks	
1980	30			
1983		daughter (Emily) born		
1985	35			
1988		wife went back to work part-time		damaged arm while abseiling
1989	38		off work for 6 months, asked to go back, went back to an inside job	accident with motorbike (while at work)
1990	40	wife was offered a full-time job - saw it as 'fate' and did role reversal	finally finished work on Christmas Day	

Figure 1: Excerpt from Duncan's lifegrid

you want to start with it.

Harry: I will start wherever you want to.

In comparison, Eileen was confident from the start about how she wanted to use the lifegrid:

I was hoping, just to do a brief resumé of the pain and treatment because it stimulates too many painful thoughts I've had.

This supports Parry et al.'s (1999) suggestion that participants can control the discussion of sensitive issues. Although Eileen did later discuss sensitive issues, the lifegrid gave her an initial sense of control over structure and content.<sup>2</sup> This increased control can also mean that participants have greater control over the construction of their biographies. This can be seen in contrast to a 'typical' semi-structured interview in which the interviewer has more control. The joint completion of the task created a rapport with participants, building a foundation for the subsequent interviews, which were an important feature of Project 2.

This use of lifegrids alongside other methods raises some interesting issues. The lifegrids focused on pain in a biographical context while diaries were particularly useful in exploring everyday life, in particular, the mundane daily activity of dealing with bodies in pain. The combination of methods enabled an exploration of any tensions and contradictions in accounts, as participants reflect their experience and attempt to create meaning.

We use Duncan's story (see figure 1) to illustrate how a narrative reconstruction can be seen in participant's stories told using the lifegrid. Duncan's lifegrid shows the early story as that of a man taken away from his family by work commitments. As the pain story develops, the life of the 'working man' is disrupted, the family man comes to the fore, and 'puts right'

the wrongs of the working man. The reconstruction of the life story and the repairing of disruption through narrative become clear. Interestingly, the story of the 'role reversal' was also told by Duncan's wife in a separate interview, suggesting that it was a narrative they had constructed together, rather than 'forced' through the use of the lifegrid.

### Recall or reconstruction?

A key issue in the use of a lifegrid is whether it facilitates recall or reconstruction of the story, reflecting wider debates between 'realism' and 'constructionism'. It is not possible to debate this fully within this article<sup>3</sup>; suffice to say that in terms of the broader debate we chose to adopt a 'middle-ground' or pragmatic stance (Roberts, 2002), as advocated by a number of practitioners in this field, acknowledging that health and illness exist outside the research context, but we can only begin to understand them within that context (Murray, 1999).

We did not feel that recall and reconstruction were mutually exclusive: we wanted to know about the meaning of pain within people's lives, how the pain disrupted their biographies as well as their everyday lives, and how they reconstructed their lives and the story of their lives in order to minimise this disruption.

Natalie uses cross-referencing to recall the events in her life that she regards as pertinent in telling the story of her pain:

Natalie: I was off work for a fortnight then it just got worse, worse & worse & [I] never ever went back to work since. That was 7 or 8 years ago now. [...] I was trying to work things out on how old Georgina was. [...] It was probably about 8 years actually.

Not returning to work is a significant event for Natalie; she had previously described how much she loved the job she was doing. The use of the phrase 'I never ever went back to work' suggests a reconstructed and

complete story, despite the fact that Natalie was only in her early forties at the time of the interview. Throughout her interviews she recalled and described her pain in the context of her family responsibilities, hence the linking of the events with the age of her daughter.

Other participants similarly used fixed events within their own lives, such as marriages and births, to locate other life events. The lifegrid can also be useful in interviews where participants have distractions. It is relatively easy to pause an interview and return to the story without the participant (or researcher) losing track, again suggesting that it is a useful tool for interviewing those in ill-health or pain.

Cross-referencing life events in different areas was used to clarify and confirm participants' own 'accurate' recall of dates. However, this was not just about recall of events, but was about participants building up a picture of the experience of chronic pain in the context of their life. Thus the recall aided the reconstruction. Bell (2005) questions the lifegrid's role in improving the 'accuracy' of recalled data, and also suggests that it may lead respondents to focus on the recall of events rather than on reflexive consideration of them. We suggest that accuracy of recall is less important in qualitative research than the meaning of the story, but the lifegrid fits well with a pragmatic approach, helping us to see the stories of people's illnesses in clear temporal order,<sup>4</sup> as well as the way in which they have incorporated the condition into their life, and into the story they tell of their life, enabling a fuller understanding of the course and experience of a condition.

### Conclusion

The lifegrid is one of a number of approaches to in-depth interviewing about experiences of health and illness, and, as such, has advantages and disadvantages.

It may be more useful in some contexts than others and needs adapting to suit the participants who will use it. As mentioned earlier, it is difficult to choose external events that are meaningful to a range of participants of varying ages, backgrounds and cultures. However, it is possible to use other types of external events in the same way. Wilson et al. (2007), for example, chose not to use memory-triggers, but rather age bands related to schooling experience. Their participants were within a narrow age-band and had received their schooling in a standard system where this would be meaningful for all. Porcellato et al. (2008) included a comprehensive column of external events in their research on people's working lives in the North West of England, and found that this was used and useful.

Practical issues also need considering, for example, the length of the interview. One of the lifegrid's strengths is that it is useful for those in ill health because the pace and structure of the interview can be controlled to some extent by the participants. Our impression is that interviews conducted using the lifegrid can feel different from those using standard interviewing methods. There is a sense of achievement from participants in having completed a task which initially appeared daunting.

We suggest that the lifegrid should be used in contexts where a longitudinal focus on historical events in an individual's life is likely to enhance an exploration and understanding of the type of issues the study seeks to illuminate. In other contexts, such as when the primary aim of a study is to explore attitudes, we would support Bell's (2005) suggestion that the lifegrid is less useful.

The best research tools are those that

can be adapted and used flexibly to meet the needs of both the interviewer and the interviewee, and, by that criterion, the lifegrid offers great potential for the exploration of health experiences within a personal and historical context.

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## Notes

1. Although Wilson et al. (2007) reported that very few of the respondents wanted to complete the grid themselves.
2. Eileen's first interview was marked by her need for control. The interviewer gave her control of the 'pause' button on the tape-recorder in order to minimise her fears about being recorded.
3. See Seale (1999a) and others for a fuller outline of the difference between the two approaches.
4. As noted earlier, this does not require that the events in the person's life are explored in a strict chronological order.

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