He came home, and I think he was home for a few more days and, he was unwell again. I remember him lying on the sofa, and he used to complain he was so cold, I could see him shivering, and he would be covered up really well but he was still shivering. I had him heated on but... It was so frightening. He had lost all his finger nails and his toe nails because of the psoriasis, and he looked so awful. ....Then, he was in a coma for ten days, and we lived in the hospital. And, a couple of days before... he had a chat with us, and he told me that it was Aids. And I was so angry.. I was angry with my husband, because I thought, well, now it's going to be me and my son. The doctor said that he wasn't going to come out of it... so they wanted me to give them permission to switch off the machine, and I did. But I knew that he was even... he was dead... he must have died ages ago, you know, in the last few days.1

Prior to interview, Daxa had not spoken to anyone about this experience. Living within a traditional Hindu community, an unspoken agreement with the close family attributed her husband’s death to cancer. Within her circle, Aids was and still is considered taboo. This is one emotive example of many disarming traumatic experiences we have recorded on two separate projects, one on the testimonies of people living with an HIV or Aids diagnosis, and one recording the life histories of prostitutes. Needless to say, within the two projects we find ourselves continually raising issues around trauma and taboo. The recurring question I want to address here is about what vital areas of emotional vulnerability the method of pursing knowledge through oral history can obscure, leave uncontained or, at worst, damaged.

Drawing on anthropological theory, the approach used in this paper is one of ‘reflective’ practice. Reflexivity is understood as ‘opening the way to a more radical consciousness of self in facing the political dimensions of fieldwork and constructing knowledge’.2 It involves ‘the sharing of personal and social experiences of both respondents and researchers, who tell their stories in the context of a developing relationship... thus focus(ing) on the interview process... and the understandings that emerge during interaction’.3 This concept of reflexivity in oral history is not new, though rarely named as such: it generates an enduring, fascinating and far-reaching debate and, in my view, is an intimate part of oral history. It is described in Raphael Samuel’s reading for the Sixth International Oral History Conference on ‘Myth and History’ in 1987:

Reading through the papers, I think it [the conference] approaches one of the secret, unofficial ambitions of oral history, which is to break down the divisions between history and anthropology, and psychoanalysis, to break down the division between past and present, between outward history and inner thought...4

Disentangling reflexive issues as a separate object for discussion is paradoxical since oral history is by nature intimately bound up with them. Finding out about people’s consciousness and the nature of their memory are endeavours that never negate the need for some level of reflexivity. Some feminist oral historians take this further, placing the primary value of oral history itself firmly in the therapeutic frame:

As a method, with a strong emphasis on subjective experiences and interpretation of events, it has become almost a natural extension of consciousness raising, enabling women to understand and overcome their experiences of oppression by examining contradictions in their lives, past and present. This therapeutic dimension of oral history is in many cases considered to be more important than the accuracy of the ‘historical facts’.5

Self-reflexivity has inspired researchers to increasingly share their deeply personal thoughts, and within qualitative research using narrative techniques across a range of disciplines, recent years have seen a trend towards researchers questioning their own role in the interview process much more directly and placing themselves within that process.6 This has both positive and negative features and is gaining increasing and more explicit attention amongst current oral historians. For example, in recent correspondence in Oral History, Jo Stanley characterised the issue as ‘taking care of the psychic costs of an interview both to the interviewer and the interviewee’.7 I would add additional concerns about the impact on...
family, friends and employers of interviewees (surrogate witnesses), the difficult decisions facing archivists in accepting and holding sensitive data and the ethical behaviour of the users of archival sources where interviews are made available to a wider public (public witnesses). One aim of this paper is to explore at a deeper level what is latent in the routine of interviewing people around traumatic issues and taboo subjects in relation to this spectrum of interests.

Considering trauma and taboo in oral history embraces issues of ethics, methodology and copyright. In January 1998, a day seminar on these issues organised by the Oral History Society served as a valuable opportunity to explore areas that have not yet been successfully subsumed within formal ethical codes of conduct. An early draft of this paper was presented at the seminar. Within these broader frames, identity and disclosure issues are paramount, particularly because of oral history’s open-ended nature. Oral history offers the possibility of both affirming and destabilising a personal narrative. Part of its value lies in its subversive potential, which comes out of ‘its performative nature as well as the destabilising influence of the interviewer’s presence’.

It has implications too for the kind of historical record that oral history provides and what it is possible to do with that record. Importantly, it involves questioning to what extent the recording of oral history around traumatic and taboo issues is contributing towards social change itself, potentially acting as a crucial conduit by which trauma is being returned to the public domain. A second aim of this paper is to explore these areas.

There have been a few interesting pieces that isolate key issues in the reflexive process from the interviewees’ perspective. For example, Lynne Echevarría-Howe examined interactive responses within the narrative process by discussing issues of process and product in life history with two African-Canadian women she had interviewed. Yet opportunities for interviewees to have reflective input in oral history are rare, except where it is an intimate part of the method used, such as in reminiscence work and perhaps in social work. Many oral historians do usefully subsume reflective discussions with interviewees about the interview process as part of their wider work or discuss issues privately, off-tape, but these rarely reach a wider audience. Aside from the valuable reflections of oral historians who have been brave enough to be interviewed themselves, I have looked fruitlessly for accounts written spontaneously by interviewees on how they felt about being interviewed. I could find no recorded examples of interviewees talking to each other about the interview experience away from the presence of the interviewer. This indicates a gap in existing work which has clear personal and political implications. For example, a recent meeting to discuss ethical codes of practice in qualitative research, in a room full of professors and researchers of the highest calibre I was struck by the lack of invited input from people who give the data. In a naïve sense it offended the principle of democracy that, for me, underlies oral history. Oral history is a shared experience and I feel that as much in matters of process as in matters of content, interviewees are experts. A third aim here is to step back from a position of dominance as an interviewer to explore the tensions that interviewees recognise and respond to. This is part of a wider aim to facilitate improved dialogue between ‘researchers’ and ‘the researched’. A September 1998 conference entitled ‘Sex Work Reassessed’ was set up to create a non-judgemental forum within which prostitutes could influence the conference agenda and speak alongside researchers, policy makers and service providers. It aimed to have a direct impact on the way prostitution is understood and represented in medical, ethical, legal, health and public debates.

‘DISCUSSION GROUP’ METHOD AND CO-RESPONDENTS

I tentatively approached five people I had interviewed asking whether they would be interested in getting together for a discussion about the interview experience, focusing
BEING INTERVIEWED: REFLECTIONS ON ORAL HISTORY

In one sense, an oral history interview involves simply recording a life history at a particular point in time and preserving it for the future. In another sense it is a complex process – consenting to be interviewed, being interviewed, hearing or reflecting on what was recorded and thinking about what will happen to the tapes in future can raise different feelings and different questions. Oral history offers the possibility of both affirming and destabilising your own personal narrative. Its 'subversive' potential emerges from its potentially unstable and open-ended nature. Sometimes this may be a liberating experience, sometimes it may leave you feeling deeply unsettled or just blank. Also, the interviewer's presence and contribution to the dialogue is acknowledged to affect the resultant recordings and you may feel differently about the interviewer and what you need or expect from them at different points during and after the interview process. The purpose of today's session is to explore some of the positive and negative feelings and ideas about ethics that arise from the experience of being interviewed.

Some guiding questions might be:

How did you feel:

1. Before the interview?
   - about consenting to be interviewed?
   - about what you expected?
   - would you have liked more preparation? What kind?

2. During the interview?
   - about what you found yourself saying?
   - between sessions?

3. After the interview?
   - about what would happen to the tapes?
   - about things you felt you missed out or included too much about?
   - about having continued contact with the interviewer? Was that important? Did
     you feel a need for some kind of support?
   - about your contribution and about why you did it?

4. About recording traumatic or distressing parts of your story?
   - did the interview dig up anything that left you feeling uncomfortable?
   - did you feel deserted with these feelings in any way?
   - how might it be best to deal with this?

5. In what way do you think oral history is different to a therapeutic situation?

6. In what ways do you feel happy or anxious about your recordings? What concerns do you have about ethics, access or copyright issues?

Figure 1: Group guide sheet

explicitly on trauma and taboo. Four people agreed. Each had undertaken a life history interview with me some time during the preceding three years. None of them knew each other prior to the meeting, but each had an on-going acquaintance with me. Each had revealed traumatic issues during his or her own interview which are intimately bound to issues often considered to some extent taboo within wider society at the present time. Coping with an Aids diagnosis, dealing with the suicide of family members, domestic violence, drug addiction, 'coming out', self identity and prostitution, family friction, sex abuse and the internal life of organisations like the Church number amongst such issues.

To provide some background about the people in the group, Anna is Spanish, was born in 1959 and moved to England about ten years ago. She was educated to the equivalent of Secondary School Level. Paul, Jane and Mandy are all English and born in 1962, 1963 and 1965 respectively. Each is educated to degree level and Paul is currently undertaking post-graduate study. It is also important for me to locate myself as the interviewer. I am English, born in 1967. My background is in clinical psychology and I have had some counselling training. In what became a primarily research-based working life. I have worked closely with and for a broad range of statutory and non-statutory health agencies in the Aids sector, in mental health and in health promotion, more recently working for specialist outreach agencies responding to the needs of people working in prostitution. Amongst my peer group, several friends are living with Aids and others are working in prostitution: for me, both are professional and personal concerns.
For the discussion group meeting, I wanted to make some attempt at creating a neutral setting and arranged for the group to gather in a meeting room at the National Sound Archive of the British Library. I gave out an introductory information sheet (Figure 1), and then left them alone in the room with the tape-recorder. With no initial time limit placed on their discussion, they recorded a session of about an hour in length. It was agreed from the start that everyone would receive a copy of the resultant recording and copies of the transcript, and all would be offered the opportunity to have editorial input on the written paper that we aimed to prepare.

This paper aims to highlight the dialogue and sharing that occurred. It is important to emphasise that we recognised at the outset that our method was experimental and we were not seeking conclusive resolution of the issues, nor to be prescriptive. In editing the account, I initially tried to select material that might prompt further discussion amongst oral historians. The co-respondents then provided input that shaped the entire presentation and provided additional reflections which I have included mainly in the concluding section.

**IMAGINING AND CONTROLLING WHAT HAPPENS TO TAPES**

Oral historians have increasingly recognised that in an interview situation, interviewers and those who are interviewed do not share one purpose. The extent to which both sides declare what each wants and gets from the interview varies enormously. Not surprisingly, our discussion revealed that people had a complex range of reasons for deciding to be interviewed and a need for differing amounts of information prior to interview. The primary and on-going concern was about the use of the material and the subsequent deposit of tapes within the archive. For Anna and Paul, their Aids diagnoses gave them an urgency to set down a record of their lives and at the outset, both made assumptions that they would not have to think too much about what might happen to their tapes in the future as they would probably die soon.

**ANNA:**

I said to Wendy, ‘Don’t explain to me nothing... I want to do it... just get on with it.’ ...Sometimes you have to do things without thinking, when you have the gut feeling more than anything... I was dealing with this [Aids], and just wanting to leave the tapes somewhere and forget about it... I now don’t think that way I thought in the beginning...

I thought it was the end, but a short time ago, I don’t know why, I’m starting to get very paranoid with what I have done. I’m starting to think, ah! because I said seven years [restricted access], and I was sure I will be dead by then... I wasn’t sure, but I don’t like the having done it suddenly. But then I became a bit paranoid about many things in life... But I would like to have more information about [access restrictions].

Anna was interviewed in 1995, before the availability of new treatments and at a time when the implication of an Aids diagnosis was generally thought to be certain, imminent death. With the availability of protease inhibitors and combination drugs over the subsequent few years, a new climate of optimism has emerged and Aids has come to be viewed as a chronic illness rather than a terminal disease. Being reminded of the tapes by taking part in the discussion, Anna realised that she had become anxious about her deposit instructions. Paul was interviewed in 1997:

**PAUL:**

My health improved enormously and it became clear to me that this (my recorded life history) was going to take on a life outside me. It wasn’t going to complete my life in some sense, it was going to stand apart from me, and that was very strange, having to work out whether or not to go through with it...

I didn’t really ever discuss it with Wendy, but I thought a lot about it, partly because a lot of what I wanted to put down is very much in conflict with the organisation that I belonged to as it were... That’s why I thought through how I would give access, and I have said that I want to be able to give permission while I’m still alive, and then for ten years after my death, I want my partner and my executor to have at least some scrutiny over who has access. Then I don’t care...my ghost will have gone by then so, like you, I found myself, my situation, changing over the period.

For Jane, access restrictions were foremost in her mind from the outset and, like Anna, on reflection after the interview, she wanted re-confirmation of what had been agreed.

**JANE:**

I think that was my main anxiety as well, who’s going to hear it, when and how long afterwards, and I asked loads of questions before I did it. But immediately afterwards, I can’t remember half of it now, so I want to know it all again.

Unlike Paul and Mandy, neither Anna nor Jane had wanted to have copies of the clearance and deposit instructions or their tapes, partly due to the exposing nature of the material that they had recorded and associated fears that it or documents associated with it would be discovered.
A section of the Wall of Love, an AIDS memorial.
by friends and family if they kept their own copies, but also through a desire to just leave the story somewhere and get on with life. This is a poignant reminder to me to review the way we provide information about access restrictions and the need to repeat it. It also has implications for the need to stay in touch with interviewees for long protracted periods.

It was after beginning the recording that Mandy had doubts about going through with the interview.

MANDY:

... I felt very uncomfortable after I did the first lot of tapes with Wendy, because I talked about my family an awful lot and maybe in the same way that you talked about your organisation, I said lots of quite critical things about my family, and then thought, I can't... it's just not fair to talk about other people. It's fine to talk about me, and to leave that record of me, but to kind of describe my father in a particularly kind of unpleasant light for example isn't very nice, because there's all kinds of other sides of my father.

JANE:

Did you use names, real names?

MANDY:

I tried not to, but I'd slip up and they'd pop in. And, I mean I know I could have got those edited out if I'd really wanted to, but I ended up saying to Wendy, actually I want to start from the beginning and not talk about my family at all, which she agreed to. And, I felt much easier about that, even though I couldn't help but refer to some people, but it was mainly about myself... When I listened to those first tapes, I realised in fact that I hadn't been half as negative as I thought, but still was glad because there were names and it was very specifically my family... so many details and everything.

What Mandy gained was control over her own presentation. Even though I believe her account is invaluable as it stands, what I lost was a full life history account. It opened up questions for me as an interviewer about how to leave an explanation of the reasons for this with the six hour long tapes that we did deposit and, whilst empathising with her choice, some frustration at knowing that I will never be able to put together a comprehensive interpretation of that material.
CHANGING NARRATIVES OVER TIME

Changing your own personal narrative over time and across different life-stages was another associated anxiety the group identified.

PAUL:
I know I was very conscious... that, when I was retelling my life experience as it were, how very differently I would have told the story from other vantage points in my own life, and how radically I’ve changed as a person, particularly, I mean I’m now thirty-five, I could not have foreseen being the person I now am at, say, the age of twenty-five or twenty, and I was very, very conscious of that.... trying to be faithful to who you were, as well as who you are.

MANDY:
I can just change from week to week. really really vehemently ...and yes, over years, I can get completely different ideas about politics and right and wrong and good and bad and all those things, can all completely change.

JANE:
I wonder if that matters though, because I was wondering that afterwards as well. It’s kind of bound to happen in a way isn’t it, because that’s what we’re like, and in a way I thought, well maybe it’s sort of up to whoever listens to it, because it is supposed to be about history, and history is down to the interpreter.

As an interviewer, I have become increasingly aware of the extent to which the dialogue established during an interview changes throughout the course of recording it, but have struggled to conceptualise meanings beyond the ‘frozen’ moment of that interview. Al Thomson’s study of Fred Farrall’s Anzac memories is useful to consider here. Drawing on the work of the Popular Memory Group, he suggests that “we compose our memories so that they will fit with what is publicly acceptable, or, if we have been excluded from general public acceptance, we seek out particular publics which affirm our identities and the way we want to remember our lives... what is possible to articulate and remember changes over time and this can be related to shifts in public perception”.17 It seems that as oral historians we have an added responsibility to reassure interviewees that especially in relation to ‘marginalised’ individuals and groups, this is a natural feature of oral history and should not become a source of anxiety.

PUTTING YOURSELF UNDER A MICROSCOPE

There was general agreement amongst the co-respondents that the process of recording the interview was draining and people felt they relaxed more into it as it progressed and as the relationship with the interviewer developed. This is probably true of all oral history interviews regardless of the subject matter, but perhaps particularly important to recognise for those who consider their lives within a frame of chaos and who divulge traumatic or taboo experiences.

MANDY:
... I wanted to present myself as somebody who wasn’t in chaos but who actually... [laughs]... has a proper life... I managed to relax about that quite quickly... [Throughout the recording]. I went through the whole gamut really of feeling incredibly self-conscious and then feeling actually quite nice and relaxed, and then feeling terribly self-conscious again... I think particularly when we were talking about really intimate things, like sex ... I’d kind of say all these things incredibly straightforward, and you know, no messing about things, and then get to the end of it and think, ‘God! How did I do that to somebody who I’ve only met about four times and don’t really know anything about?’

PAUL:
It’s a very curious experience I found.... I once or twice thought, she [interviewer] must think I’m absolutely crackers, because you know ...there have been a number of changes in my experience, and ...that was odd. I found that strange.

While confirming a high degree of self-consciousness in the way we talk about trauma and subjects that are still widely considered taboo, these accounts also confirm a more general feeling I gain from other interviews that the use of language itself is changing. Some of the taboos themselves are muddied and the boundaries of the language in terms of ‘frank usage’ are changing. Living in a ‘post-modern’ world, perhaps perceptions of the stability and sense of linear continuity that may have characterised the narratives of older generations are broken down so it is now increasingly common to present fragmented or contradictory experiences as part of a life story account. This supports wider sociological evidence that the public realm has become a repository for an increasing range and depth of personal material.18

I am aware that my interviews would turn out very differently if I was not a thirty-something woman who is often interviewing people around my own age and this itself has knock-on implications for better understanding my role as interviewer and conceptualising the kind of record that this form of oral history is moving us towards. It was interesting that my co-respondents specified that my gender and sexuality as interviewer were important factors in the decision to go through with the interview.
ANNA:

Of course I don’t think I will have talked to a man, ...
... I think I am very fussy in a way about the people
I will tell.

PAUL:

... I think with a man, and especially with a straight
man, I would have found it very difficult to say the
things that I wanted to say, which was odd, because
I thought, well I have no control in the end over
who listens to this...

This raises an interesting point about interviewing people
in the context of trauma and taboo. What is often
understood as the 'marginality' of my co-respondents (as
sex workers, people with Aids, lesbians or gay men)
means that the construction of their history is tenuous
or problematic. The interviewer is implicated in this
instability. In interviewing the 'less powerful' about whom
historical narratives have already been constructed, the
interviewer is working within a generally accepted frame-
work, even if he or she is working against it to disprove
certain mythic features of the general narrative (such as
the idea that all sex workers are victims or were sexually
abused as children). Together interviewer and interviewee
bring into the open secrets which in a certain way are
already known but ignored, thereby threatening to expose
knowledge as ignorance (whores are bad girls; gays are
abnormal), and so withdrawing the implied absolving of
responsibility that ignorance allows. In this sense, the
interviewer ‘gets into a closet’ with the interviewee and
it is important that they can identify by virtue of their
own gender, sexuality and socialised experiences. This
can be an affirming and unsettling experience for both.

COMPARISONS AND CONTRASTS WITH
FORMAL THERAPY

The peculiarity of the experience of putting all the details
about your life in one place is also common to all oral
history interviews, but it again perhaps takes on greater
weight in the context of lives that are compartmentalised
by having to be very careful about whom one reveals
certain aspects, such as your sexuality, drug use, life-
style, illicit activities or experiences of violence. It is
well documented that an oral history interview in this
and other harrowing contexts can give the interviewee
affirming insights about connections and meanings in
their life.9 The co-respondents re-emphasised these as-
pects and went on to draw parallels and contrasts with
formal therapy. Anna, Jane and Mandy reflected on their
experiences of formal therapy (recognising of course that
this is an over-generalisation relating to different schools
of thought within the therapeutic movement which we
didn’t explore), whilst Paul acknowledged that he had
resisted becoming involved in therapy.

MANDY:

...and actually listening back to my tapes gave me
quite a few insights which were very rewarding...,
insights that I hadn’t managed to have while I was
having therapy... It was just from listening and hearing
myself. But then when you have therapy you don’t
get that opportunity to listen back to yourself in your
session with your therapist, so, it’s very different.

JANE:

That’s interesting. So you think it was more therape-
utic than the therapy in some ways?

MANDY:

No, I think it’s a lot more dangerous than therapy:
...the whole thing about therapy and the way in which
it is contained, and you have got somebody who’s very
responsible for you, because they’re being paid to be...

In fact in my therapy, my therapist did use to tape
the session in order to then be supervised by her
therapist on what was happening between me and
her... She said ‘I’m not going to let you take these
tapes away’. And I felt quite angry and like a child
and so forth. But it kind of gradually made sense
over the years, that she felt that if I went off and
took these tapes off my own, then everything
that was valuable that happened in that room, in
that hour of that week, would then be gushing out
into the rest of my life, and I could come to all kinds of damaging conclusions about things, and just not have her to help me while I was listening to myself uncovering quite distressing material I suppose.

JANE:

...I wonder if it makes a difference how emotional one feels about it, in a way, because, I felt that most of the things that I talked about, I’d talked about before, so I knew that I wasn’t going to burst into tears over something, or suddenly get really angry and start throwing furniture around, or whatever... I suppose there’s that fear that if there are things that you haven’t really talked about ever. How are you going to feel?

PAUL:

...They sent me to a psychotherapist at the hospital and he phoned me up about two days later and I said I’m not coming again, not in a bad way, but it was just silly. I was very conscious of the fact that I didn’t want it [the oral history interview] to be or resemble anything therapeutic. I had so many people who were trying to get me into therapy at the time and I didn’t want to see it like that. I didn’t think I needed it... I think when you are ill... other people have a need to care for you, especially organisations and institutions, but they have developed their own means of doing that, so you have to conform to... their way of doing it for you.

And I felt much freer with this, I wasn’t having to fight Wendy, to say, you know, ‘No I don’t want you to ask me those questions,’ or, ‘No I don’t want it to proceed in this direction’. It actually unfolded in a way that seemed very proper, it seemed to belong to me in a way, and in a way that I was finding other institutional involvement in my life very intrusive or, at that time very threatening: this was something which was actually the reverse of that.

ANNA:

...It is good you can say everything in bulk, and, without stopping. Because, me, I’ve been in therapy but it was so slow and so... being here [being interviewed] was like, phew... nobody stop me please.... Therapy, it’s not about what you want, what you do: you have to be confronted. And you cannot be everything in one minute, you always have a time limit and a clock... And maybe one day you think you are going to say something, but then maybe you retract yourself and you never say it.

For me, therapy was good because I needed it somehow to reach somewhere, a line of thought or whatever... I tried to discover and uncover things. But this [the oral history interview] was like the finish, it was like, OK, now let go...

It [the oral history interview] makes me proud sometimes in a way... It’s like a small contribution we’ve done. It takes courage... I sort of felt always, and that’s not to a psychiatrist or to a psychologist, I always felt the need, and I realised when I finished the tapes, not before, that I needed to shout something, ...the good part of it is like, wow, done it...

The issue about the importance of oral historians being cautious in assessing the emotional robustness of interviewees, is shown to be a thorny one. As Mandy suggests, moving trauma outside the contained, professional spheres of therapy in an oral history context can feel dangerous. And I think as oral historians, we are incredibly aware of that tension and unsure about how to deal with it. But Paul and Anna’s observations warn the oral historian not to be overcautious or to make assumptions about the meanings interviewees attribute to their own expression of a discourse that is potentially distressing or disapproved of in certain quarters of wider society.

Within such a context, oral history seems to have an important place in straddling the therapeutic and the need for creative, affirming expression. The interesting contribution of this paper is that, as Mandy remarked, even for those with experience in therapy, oral history can inspire different personal insights. This further convinces me that oral history has become a powerful medium for the transformation of trauma in the public domain. The recordings do not raise questions of therapy, rather they expose the way in which therapy itself is potentially used to defuse the subversive nature of those whose direct experience (whose own understanding of truth) is most at odds with truth as it is desired to be known (constructed through complex social media). When the phenomenon of trauma starts to move away from the status of private distress and to attract a creative, self-affirming and public life of its own, then psycho-analytic reduction appears to lose some of its impact.

The perception of the interviewees seemed to be that the oral history interview process, aside from the possible formation of natural supportive friendships, does not provide back up after the event to deal with any emotional fallout in the way that therapy might. Yet, it is a characteristic of my own practice that I will try to stay in touch with interviewees for a while after interview to make sure everything is OK or refer them on to formal counselling agencies or support groups if that is what they want. I certainly do always try to discuss with people the implications there might be for recording a life history in the context of my projects, but am aware that this is always a difficult task to achieve without alarming people unnecessarily and accepting that, as an oral historian with a deep fascination for the subjects I study, it is in my interests and the interests of the archive,
not to discourage people from recording accounts or making them accessible. Since unlike others I have interviewed, none of the four people who took part in this discussion needed any extra kind of formal help, we cannot take speculation too far here. However, the issues of boundaries in oral history was usefully raised by the co-respondents in this context.

MANDY:

...And I did feel this, whether or not to ask her [interviewer] questions about herself off tape, and as somebody who’s done therapy and with a therapist who’s very keen on boundaries and not revealing about herself, so I don’t ask her any questions, I felt that because it was a pseudo-therapeutic situation that I shouldn’t. But then as I spoke more and more to her, I thought, no, this is really silly, I should, otherwise I am just performing.

The boundaries set up between oral historian and interviewee are less formal and prescribed than those set up in a formal therapy situation, in that we tend to get to know our interviewees on a more personal and reciprocal level than a therapist might. I can see quite clearly that this has implications that could be considered as both an advantage and disadvantage in different contexts. There always remains an issue for me about where we set those boundaries with each individual interviewed, why we often choose to set them very differently depending on the person, and how we maintain or change those boundaries over time, either consciously or unconsciously. Although it often seems to unfold naturally, I think it can be an area of difficulty and I am not sure I always get it right. Neither am I always clear whose need I am meeting, mine as interviewer or the interviewee’s? To an extent this is where the interviewer themselves might be in need of therapy after so blatantly being implicated in a subversive event.

AFTER THE INTERVIEW: LISTENING TO THE TAPES

For most oral historians, it is accepted practice to return tapes and transcripts to interviewees, working through the process of editing and interpretation together. Yet this has sometimes proved a difficult feature of my own work. What the following accounts reveal is the extent to which just listening back to your own tapes has huge implications in the context of trauma and taboo. Mandy listened to her tapes all the way through. Paul asked for copies of his, but has not listened to them. Anna made a definite decision not to accept copies of her tapes and not to listen to them, a key concern being that she would see them as a mistake and would want to re-record them differently. Jane listened to some of her tapes and responded to Anna’s rationale as follows:

JANE:

I was thinking, what would I say now. It would openly sound like an apology for what I’d said and you could go on and on apologising ad infinitum. But when I listened back to it, I thought it was actually really obvious that it was somebody who was talking at a moment in time and ...you could hear when I sounded nervous and when I sounded, like, flippant and all that, so, there’s no point in changing it, it’s only going to be the same again: to be wrong in a different way, or right in a different way, I suppose. And ...Actually some of it bored the pants off me. [laughs] ... But some of it was fascinating, and I was amazed how much I agreed with again... So, I think I wouldn’t have changed it a lot.

PAUL:

I only got them [the tape copies] about six weeks ago, and, I don’t know, I decided, it’s a mixture of not having got round to it, and not wanting to just yet. I have every intention of listening to them. I’m not upset by anything I’ve put down and that surprised me. Now they are actually there, it will be good to have access to them.

MANDY:

When I listened to mine, I was in this great hurry to listen to it ...I listened to about an hour of it, and spent the next twenty four hours feeling really depressed ...and just incredibly nervous, and very uncomfortable about these tapes being in my house and being physically there, and somebody coming to my house and being able to listen to them... And then when it got to the weekend... I was in a totally different mood and listened to them all the way through, and felt incredibly positive about them and thought, I’m so glad I’ve made this record ... And I wanted to do more things with them, I wanted to transcribe them and carry on writing about different things. ...But they are kind of sitting there, and it’s funny, their presence, it’s sometimes a really benign presence but it can suddenly be quite a malignant presence.

ANNA:

It is funny, really it is half and half and a very powerful feeling. Sometimes it’s like a spy around the place. You feel, boof, I’m unsafe with this. ... No, but now I’m talking here, and it gives me a very nice feeling in the stomach to listen to them, like now is the moment. I don’t know why I didn’t before, it was good. But it’s like for some things you have to be ready and in a certain mood. And now I’m getting curious of listening to them. But I think it’s very frightening to me. Because I’m very judgmental with myself more than anything.
As an interviewer, I have not spent much time to date warning interviewees that owning a copy of your own life-history tapes and thinking about listening to them can be a disarming experience in itself. On one level it does seem to be something that interviewees are perfectly capable of making up their own minds about, but I liked a suggestion given by Jan Walsley at the recent oral history seminar mentioned earlier, where she described her own practice of listening to tapes with interviewees. However, I know that at present we do not have the resources in terms of time to be able to achieve this and the point I raised at the seminar was that essentially it seems you have to be rich to be ethical: a scary prospect in the current resource-restricted environment. Yet, I think it raises serious issues about the important role that oral historians could potentially play on a collective level in challenging funders and alerting other qualitative researchers to consider ethics and good practice. In this role, again, oral history potentially plays a part in social change.

For interviewees, decisions about letting friends and family listen to the tapes and the implications for revealing to people the fact that you have been interviewed are also difficult.

**ANNA:**

It is weird when you talk to people about it. I say [have talked to friends about it], like three times or four. I thought, shut your mouth you are talking too much, because people get very curious ... sometimes you are not very sure about their interest. It’s like you say, for some people you just think, no way.

**PAUL:**

Two people have asked me if they can listen to them. One is my partner and I would have no trouble about him listening to them. The other is my mother and I was able to say, ‘No, because I put some very, very personal things about you there,’ and she said, ‘Oh I want to know what they are, tell me’. Certainly not. And, I mean there are conditions I think under which I could let her listen to them, but we’d have to talk about it first, and I do now have a good enough relationship with my parents that I could do that, but five years ago ...I mean these people have thrown plates at me before now, you know [laughter]. But, yes I mean... there are very few people I should ever be comfortable with, very few.

**JANE:**

I think that’s why I’m slowly coming to the conclusion to not tell anybody that I’ve done it. I don’t really know why I’ve done it, so I can’t explain to anybody else.

It seems again that people can work this through for themselves, but maybe best practice would mean that we as oral historians should raise this as an issue interviewees should think about before recording. In understanding and responding to the concerns raised above from an ethical standpoint, considering the context within which these issues are currently being raised in oral history is of key importance. ‘Oral histories are typically, though not exclusively, done with two overlapping types of people: older and relatively powerless people’. Yet in projects like ours, younger people are appropriately being interviewed. Interviewees’ comments about concern for surrogate witnesses and about coexisting with their tapes relate to this issue. As yet, I see no straightforward answers outside of restricting access for much more extensive time periods and perhaps being more vigilant in ensuring that anyone who accesses the material (any ‘public witness’) first signs a legally binding declaration form about its use.

I am also nervously aware that, although it is a situation I have not yet had to face, it is here that there are potentially huge risks and dilemmas for oral historians in negotiating conflicting access requirements of interviewees themselves and of surrogate witnesses who are aware, or may later become aware of the existence of the tapes. Within the highly politicised context of AIDS and prostitution, there is also potential for libel action on the part of public but personally connected witnesses, (both individuals and organisations), particularly those who have been mentioned and named on tape and perhaps described or presented in a manner or context with which they may disagree. I welcome further debate on how archival institutions would respond should this situation arise and how interviewers might warn interviewees to be careful in this respect, without unnecessarily influencing the way they tell their story.

**PUBLIC WITNESSES AND THE ANALYTICAL FRAME**

I have already mentioned above some of the issues I, as an interviewer, perceive to be problematic around ‘public witnesses’. In contemplating this further, the group raised serious concerns about the ethical behaviour of those who use archives, particularly in relation to the aspects of their story that are currently considered taboo.

**MANDY:**

...There’s that whole thing about how the tapes can be manipulated in somebody else’s hearing in all kinds of different ways, and subject to all kinds of prejudice.

**JANE:**

People judge us anyway, don’t they... But actually, I then find myself asking, well why, what’s so bad about it. Why be ashamed of it, ...there’s nothing that’s going to kill anybody, it’s not going to bring the walls tumbling down anymore.
PAUL:

It’s not the shame though is it? ... it’s the construct that other people put on it. For instance if somebody who is an established writer of good biography got hold of it, I don’t think I’d have too big a problem; I might even be a bit flattered, I don’t know. On the other hand if the News of the World decided to serialise it, and comment on it, I am not really very sure how comfortable I would feel... the kind of light they’re going to shine on the tapes or the text that is produced from the tapes, is not going to be a nice one. It wouldn’t sell newspapers if it was... There is that curious thing isn’t there about needing to be protected from other people’s mischievousness.

MANDY:

Once you’ve made yourself public in any, however small a way, then you are vulnerable.

PAUL:

...Do you feel responsible for it?

JANE:

Well I do, I think my biggest dilemma is this thing about not being naive about any possible impact that it could have, and at the same time sort of being very self-disparaging to say, well it’s not interesting to anybody else, it’s just my little life. I find that quite hard to judge, really.

The major concern that arises for me out of such self-evident vulnerability is what happens when myself and the archivist move on or are on sabbatical or sick leave. Thoroughly policing the use of tapes when you are still intimately involved in the project is one thing, but when access restrictions of thirty years or more are placed on tapes, I do have anxieties about their subsequent use and interpretation. Three issues emerge: one is about improper and disrespectful use of material; the second is about not gaining permission from or properly crediting the originators of the material; and the third is about meanings and interpretation in the analytical frame.

In relation to the first issue, it seems that because of the open-ended nature of oral history, copyright forms cannot be designed to make specific declarations about exactly how the material can be used over time. As in Paul’s case described earlier, some of my interviewees have drawn up legal documents to deposit with the tapes specifying long term access arrangements. In an ideal world, perhaps all of them should be encouraged to do so, but I accept that such an organised approach is not possible for most. It remains a source of anxiety for me that many users of archival material, I suspect, are often not fully aware of the sensitivities of the material. In my view better monitoring of users is required and
that task ultimately falls on archivists. The flip-side of these debates is that as archivists, interviewers and interviewees, we are usually pleased that material is being used at all, since we champion the motives for taking this material into a public realm, and archivists are all too aware of extensive quantities of oral history recordings that are rarely accessed. It is sad that a wealth and depth of valuable material often lies ignored. Somehow, we need to improve procedures and make them more transparent so that both agendas can be satisfied.

In relation to the second issue, the relationship between the original interviewer and interviewee requires scrutiny. If you are a good oral historian, your interviewee often ends the interview believing that they could have completed the recording by themselves, if they had only had the time and inclination to get around to it. Quite understandably, the interviewer’s role in the process of producing a good interview is often underestimated from the interviewee’s perspective. To me, this is acceptable and in some sense flattering, but other issues about archiving the recordings are neither. Most interviewers work on a freelance basis and it seems to me that existing copyright arrangements very quickly write the interviewer out of the equation. It is not surprising then that public witnesses tend to treat archival material as if it came out of the ether, often crediting the institutional archive, but according no credit to the interviewer or interviewee. I am aware of my own vulnerability as an oral historian in relation to other people lifting and publishing material I have collected without permission or credit to the interviewees or to me. If archival material is misused and published without permission, the institutions which hold the archives are very reluctant to do very much about it, aside from seeking an apology, since they do not want to attract negative publicity. As a committed interviewer, I am aware of this additional aspect of my own vulnerability and would again like to see procedures tightened up.

On the third identified issue about subsequent analysis and interpretation, the group went on to discuss the shifting public historical meanings attributed to issues that were considered traumatic and taboo during the period when our interviews were recorded.

**PAUL:**

... This is a public description of private spaces in which I have had a part, but in which I only had a part, and other people were also implicated in this. I’m thinking in particular of my life in the theological college, which is a very private space, and completely different from the way most people would perceive it, or the way in fact that the Church would like to present it... I was very aware that ....sat would be explosive if it was published now, but it won’t be in twenty years’ time... They would have moved on themselves.

**MANDY:**

Apart from, anything could happen.... something amazing could happen which would mean a sudden upsurge in those organisations... or ... a backlash against any liberalisation, and then what you’ve said would be an incredibly interesting document, like a kind of, something that nearly happened and then it didn’t.

We haven’t actually specified exactly what we’ve been interviewed about, but particularly if what we talk about is really taboo, here and now, today, and may well remain taboo for years and years. I tend to think that the things that are most taboo in this society are the most crucial in a way, most crucial to examine in terms of how our society is developing and what the problems in our society actually are. So to have anonymous records from people who have been right in the middle of that taboo, of whatever kind, is an incredibly useful thing... It’s like not the nitty-gritty of what you do or what you experience or what you’ve said, it’s the fact that you say it within the context of the taboo that makes it frightening or exciting or very useful or whatever.

**PAUL:**

... The interesting thing for me is that in fifty years’ time, I don’t think we can predict what will be interesting and what won’t.

**JANE:**

... And the bits that we assume will be, might not he.

**PAUL:**

... They might be more interested in what we were wearing than what we were doing [Laughter].

And here lies a key uncertainty in framing this paper within the guiding constructs of trauma and taboo. The effect of trying to objectify these constructs as separate issues, shows how the terms themselves are intimately subjective, socially and historically situated and tied into other spheres of life.

**CONCLUDING NOTE**

In one sense, the meeting itself did appear to capture the empathic attitude which ‘enables’ oral history to be recorded. At the end of the session all agreed that they had found the meeting helpful. Anna has since had doubts and although she has given permission for publication of this paper, she could not bring herself to read it. On reading the original transcript of the meeting, she felt her expression was inarticulate and her points less poignant than other people’s. She also wanted to extend the time limit for access permission on the tapes of her
original interview stored in the archive. It leaves me with the question, how many others would do the same if invited to be reflective about the kind of issues raised in this paper?

It has also made me increasingly aware that the practice of reflexivity may not always lessen the tensions: I think Mandy’s final comment about the group not fully revealing to each other why they had been interviewed (that is, for which project) shows that we achieved a remarkable mutual recognition of the delicate line we had to establish in just talking to each other about these issues. We did not make ground rules as you might sensibly do in a more formal discussion. In retrospect, Mandy felt we should have made a promise of confidentiality and discussed the implications of publication of any of this material in much more depth. Selecting images to accompany this article has been another challenge following from a key concern to maintain anonymity and confidentiality.

To me, the issues all the participants discussed were fascinating and I liked the way they actively shaped the telling. Building on the ‘Talking and Writing’ theme of the last issue of Oral History, the resultant paper is a further example of the challenges of reconstructing text outside of the ‘spoken moment’. As with all my oral history presentation, I had dilemmas about how to present it or whether to present it at all. For fairly practical reasons to do with time, and trying not to encroach too much on other people’s busy lives, my final decision was initially to work independently with the transcribed account of the meeting, and then to work through the process of interpretation and editing together. As described above, this attempt in itself was limited. Having the controlling hand, I take full responsibility for any errors in interpretation that remain, and declare that I have been dominant in the boxing and selecting of material to include.

The implications for my oral history practice are invaluable, especially in understanding how complex the exchange process of interviewing can be and how much there is to consider outside the moment encapsulated in the original interviews themselves. As part of this process, I am grateful for the opportunity to set out some of my own anxieties and to have benefited from discussing these with interviewees and presenting them to a wider audience of oral historians.

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Notes
8. Though these issues do seem to have attracted more attention in the past. A valuable discussion in the American context is found in Americas Pry, ‘Reflections on ethics’, Oral History Review, vol 3, 1975, pp 16 - 28.
9. Most ethical codes are terribly abstract, complex documents, written in small, tightly packed script that does not, for the most part, present inviting reading or provide much guidance on specific issues relating to trauma and taboo. Of the ones I have seen, the code of ethics published by the Oral History Society (Alan Ward, Copyright, Ethics and Oral History, 1995) is, rewarding, the most easily digestible, yet like others can give us little guidance in better understanding how to respond to particularly distressing interview situations.
15. The fifth person was interested but was busy spending valuable time with his partner who was unwell at that time.
Work on the Holocaust is the obvious and most often quoted example, but there are many, many others and looking back at past issues of *Oral History*, rarely has an issue been published without some reference to oral history's self-affirming aspect. For example, see Rob Perks, comments on conducting work with Ukrainians living in exile, in ‘Ukraine’s Forbidden History: Memory and Nationalism’, *Oral History*, vol 21, no 1, 1993, p 52.