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Movement, Materiality, and the Mortuary: Adopting Go-Along Ethnography in Research on Fetal and Neonatal Postmortem

Kate Reed[1] and Julie Ellis[1]

Abstract

This article explores the use of the go-along method in research that takes place "behind closed doors" drawing on qualitative research on postmortem imaging. Often favored in community and urban studies, go-along consists of mobile interviews and observations with respondents in their own environments. We conducted go-alongs with various professionals—from pathologists to hospital chaplains—in a range of settings. We also tracked different forms of materiality in and out of the mortuary space. As the article seeks to show, go-along allowed us to appreciate the complex and mobile nature of postmortem, situating it within the wider landscape of bereavement and memorialization. It also enabled us to illuminate the ways in which the mortuary as a place cannot be fixed "indoors," but rather, is continually remade through different types of practice. Our analysis emphasizes the value of using go-alongs in indoor settings, and further reinforces a fluid conceptualization of place.

Keywords

go-along method, mortuary, postmortem, material culture, place

[1]Department of Sociological Studies, University of Sheffield, Sheffield, United Kingdom

Corresponding Author:
Kate Reed, Department of Sociological Studies, University of Sheffield, Elmfield Building, Northumberland Road, Sheffield, S10 2TU, United Kingdom.
Email: k.reed@sheffield.ac.uk

Introduction

> We sit waiting in the lobby of a children's wing in a large teaching hospital. Parents and children fill the busy foyer, and medical staff come in and out. There is a large, loud television sitting high on the wall in the reception area showing children's programmes. After a few minutes, Ava—a pathologist and one of our respondents—arrives and apologizes for being late. As she guides us down a series of corridors, we see signposts for various different departments—from theatre to haematology. After a few minutes we arrive outside a plain door in a long blank corridor. There is no signposting outside or on the door, nothing to describe what this room is or where we are. Ava knocks on the door lightly and someone on the other side, Carmen—a mortuary technician—opens it slightly and peeps out. Once she sees Ava and she knows who we are she lets us in. (Hospital fieldnotes)

These fieldnotes describe an initial visit by two members of our research team to the mortuary, a key fieldsite for our ethnographic study on the role of Magnetic Resonance Imaging (MRI) in fetal and neonatal autopsy. These notes begin to hint at the value of adopting the go-along method in research on sensitive topics in so-called indoor locations. Through using this method as part of our ethnographic study, we were able to negotiate the internal space of the mortuary and expose some of the hidden aspects of postmortem practice. As the article will highlight, go-along also enabled us to explore the ways in which the mortuary as a place—although often shrouded in secrecy—cannot be reduced to one "indoor" site but rather extends across the hospital and beyond.

Over the past decade, we have witnessed a "mobilities turn" across the social sciences, as a range of conceptual and methodological approaches have sought to capture the increasingly fluid and mobile nature of contemporary social and cultural relations (Urry 2007). While movement has always formed an important part of ethnographic research, mobility during fieldwork is something that has been teased out more fully in recent discussions on ethnographic practice (Lee and Ingold 2006; Pink et al. 2010). The go-along method is just one of a number of approaches that seeks to place emphasis on mobility in the research process. Go-along ethnography is a hybrid method involving interviewing and participant observation with research participants in familiar environments (Carpiano 2009; Kusenbach 2003). It involves following informants around a range of different settings, tracking their naturally occurring outings, interviewing them and conducting fieldwork observations in the process (Kusenbach 2003). Proponents of the go-along method argue that it allows for a deeper understanding of the relationships between participants, researchers, and place and can add important contextual detail to qualitative

research (Carpiano 2009). While the use of the go-along method is becoming increasingly popular, it has most often been used in research that takes place in outside settings, in neighborhoods, community, and urban environments (Carpiano 2009; Kusenbach 2003). By detailing our use of go-along ethnography in a UK hospital-based study; therefore, this article seeks to offer an original contribution to existing debates on mobile methods.

Social research in the area of death and dying has emphasized the important intersection of material culture and place, particularly around bereavement and memorialization (Hockey, Komaromy, and Woodthorpe 2010; Maddrell 2016). Ethnographies based on the mortuary have tended to be acutely sensitive to location and to the sensory and material nature of the mortuary (Horsley 2008, 2012). However, such studies have yet to fully investigate the different types of mobility that are often inherent within postmortem practice (such as movement of hospital staff, dead bodies, paperwork, etc.). Furthermore, although these studies often consider the role of the mortuary in the wider hospital context, their focus tends to be specifically on what goes on inside (Woodthorpe and Komaromy 2013). In their study on domestic space, Pink and Leder-Mackley (2012) used video tours to emphasize the value of taking a specifically mobile approach in research that takes place indoors. Furthermore, as Davies (2011) argues, even when research happens behind closed doors much can be gained from paying attention to what goes on outside, to the wider external environment. We wanted to explore what went on inside the mortuary. However, in order to understand the role of imaging in postmortem practice we required a method that allowed us to extend our analysis, capturing the movement of different forms of materiality, people and practices both in the mortuary and beyond. This article demonstrates the value of using the go-along method in order to capture the fluid nature of postmortem practice. In doing so it seeks to extend the focus of existing mortuary research, offering a fresh perspective to the sociology of death and dying.

This article proceeds with a brief overview of literature on the go-along method and research on postmortem and the mortuary. The study on which this article is based sought to explore the impact of imaging technology on the traditional practice of postmortem, examining the experiences of professionals and bereaved relatives. After detailing the project's conceptual focus and method, the article will be split into three sections as follows: using go-along to signpost the mortuary, tracking different forms of materiality across the hospital, and finally focusing on movement and memory in the hospital and beyond. The article will explore the ways in which "go-alongs" with professionals added important contextual detail to our study on a very sensitive and emotive subject, paving the way for later interviews with bereaved

parents. Go-alongs enabled us to examine the multifaceted and mobile world of postmortem practice, as well as situate this practice within the wider landscape of grief and memorialization. The article concludes by arguing that while a go-along method may not be suitable for all research that takes place in so-called indoor settings, it should not be confined to research that takes place "outside." By using go-along we were able to emphasize the different types of mobilities possible within so-called internal and secret places, problematizing common perceptions of what goes on inside the mortuary in the process. We were also able to explore the ways in which places such as the mortuary, although hidden and taboo, are still rarely tied to one location. Rather, their boundaries are fluid and continually being remade through different types of practice (Cresswell 2003).

Mobile Methods and the Rise of Go-Along

Movement in ethnographic research is not in itself a new phenomenon. As Pink et al. (2010) argue, walking in the field was prevalent within ethnographic research throughout the twentieth century.[1] It is only more recently however and as part of a broader "mobilities" turn that movement has taken more of a central role in discussions on ethnographic practice. The connections between fieldwork and walking in the field have begun to be usefully teased out in different ways (Lee and Ingold 2006; Pink et al. 2010). Researchers have drawn our attention to a range of different techniques that place emphasis on mobility—from mobile interviews to walking tours (Moles 2008; Pink 2008). Advocates of mobile methods often emphasize the participatory potential of this type of research. Pink (2008), for example, conducted an urban tour with residents of a Welsh town. She argues that a shared sense of sociability can emerge between researcher and respondent through walking, talking, and eating together during the research process. Walking tours drawing on art-based techniques such as photography were felt to be a particularly useful way of exploring the journey of migration and belonging in a UK-based study (O'Neill and Perivolaris 2015). O'Neill and Hubbard (2010) argue that the process of walking during research both "evokes and invokes" (46) allowing for a sensory, embodied, and collective exploration of place and environment. Rhys-Taylor (2013) highlights the potentially sensory nature of mobile research as researchers are often particularly drawn to the sights, smells, and sounds of the external environment whilst walking in the field. Regardless of the specific approach taken, what all of these studies seek to emphasize is the ways in which movement during the research process enhances the ability of the researcher to build up a rich and detailed understanding of place (Evans and Jones 2011; Lee and Ingold 2006).

The go-along method is one variant of these qualitative approaches which attempts to foreground movement in research. This approach draws on two research tools commonly used in ethnographic research—interviewing and observation. During go-alongs, interviews and observations are conducted by researchers accompanying individual informants on outings in familiar environments (Carpiano 2009). Go-alongs have tended to be conducted on foot (walk-alongs) or by car (drive-alongs), yet others may be possible (e.g., cycling). Some forms of mobile ethnography may be focused around one particular fieldwork event such as a one-off urban tour or a guided walk (Pink 2008; O'Neill and Hubbard 2010). Go-alongs, however, should ideally be rooted in informants' everyday routines (Kusenbach 2003). The social researcher therefore may begin in one setting with their informant(s) (such as a work or home environment). They may then accompany informants during activities in a range of familiar settings (dog-walking, going to the cinema, etc.) asking interview questions, listening, and observing. Go-alongs tend to be subject-driven; therefore, researchers may be invited to go-along with informants on more than one occasion, accompanying them to particular events. During go-alongs, the researcher is effectively taken on a tour by the informant. They are literally walked through an informant's lived experiences of particular locations (Carpiano 2009). It is important to stress in this article, however, that there are many different ways of doing ethnography. Go-along is just one particular version that seeks to emphasize the role of movement in research.

Kusenbach (2003) provides one of the most detailed discussions of the go-along method, drawing on her own fieldwork in five urban neighborhoods in Los Angles. According to her, go-alongs are a more modest, but also more systematic and outcome-oriented, version of "hanging out"—a practice that is often central to ethnographic research. Rather than hanging out with a small group of respondents in one or two places, however, go-along often includes hanging out with a range of different respondents in a number of different locations. Through this process, she argues, the researcher is able to explore spatial practices in less prominent places, and examine the ways in which different places are linked together. Carpiano (2009) emphasizes the particular value of conducting interviews and observations whilst going along with respondents. He argues that go-along can be used to examine participants' interpretations of their contexts while experiencing these contexts, thus offering an important advantage over sit-down interviews or observation alone. It can also bring to the fore a stream of associations that occupy informants while moving through physical and social space, including memories and anticipations (Kusenbach 2003). According to Carpiano (2009), go-along can serve as a means of enhancing the contextual basis of qualitative research,

and can be useful for those unable to commit the time often required for in-depth, long-term observational work.

Kusenbach (2003) argues that go-alongs are a tool particularly suited to exploring two key aspects of everyday lived experience: "the constitutive role and the transcendent meaning of the physical environment, or place" (2003, 458). This emphasis on the interaction of place and lived experience has meant that those adopting this method have tended to draw on interactionist or phenomenological perspectives (Carpiano 2009). While mobile ethnography or go-along can involve journeying with respondents in both indoor and outside spaces (Ross et al. 2009), much research using this method has focused on external spaces—on neighborhoods, community, and urban environments. It is no surprise therefore that go-alongs have often been referred to as "street phenomenology" (Kusenbach 2003). However, rather than focusing specifically on tracking informants' outings in external urban environments, we sought to use the go-along method to follow informants around secret internal locations such as the mortuary as well as external spaces. As we seek to show in this article, this method provided us with a useful tool with which to explore the complex and mobile nature of postmortem practice, and through this process build up an understanding of the mortuary as a fluid and semipermeable space.

Advocates of mobile ethnographic approaches such as go-along tend to emphasize the particular value of this method for understanding place. This has led to the proliferation of a rich and diverse range of approaches used to conceptualize place both in *and through* mobile ethnographic work particularly in research on rural and urban locations (Pink 2008; Pink and Leder-Mackley 2012). Place-making as a "practice" is also often viewed as a central part of mobile research, as researchers can be prompted to reflect on their own role in creating a sense of place as they "go-along" (Pink 2008; Ross et al. 2009). In this article, we focus on postmortem practice and its relationship to the mortuary as place. Practice has become a topic of increasing empirical and conceptual concern within sociology and neighboring fields and can refer to a location or action (Gad and Jensen 2014). Our understanding of practice is informed by the work of Mol (2002), who advocates a philosophical shift away from an emphasis on "knowing" an object (epistemology) to "practising" it (ontologies). According to Mol (2002, 5), this philosophical shift acquires an *ethnographic* interest in knowledge practice. This approach takes the view that there is not one version of reality but multiple forms as constructed through different types of practice. We wanted to draw on this approach to explore the different ways in which postmortem and the mortuary were constructed through different types of practice. A range of practices were observed and explored in our study—from dissection, to imaging, to

dressing babies, through to the practice of social relationships. In order to explore the relationship between practice and place-making, we found it particularly useful to draw on Cresswell's (2003) constitutive notion of place as practice and practice as place. He argues that place is "never complete, finished or bounded but is in a constant state of becoming through practice" (2003, 26). Go-along enabled us to explore and also reflect on the ways in which the mortuary—although taboo and often hidden—is continually remade through different forms of practice in different locations.

Movement and Materiality: Ethnographic Research in the Mortuary

The mortuary is often viewed as a place of mystery and is associated with sadness, grief, or repulsion (Brysiewicz 2007). While the number of qualitative studies on postmortem and the mortuary has increased (Horsley 2008, 2012), few of these focus on the UK context (Woodthorpe and Komaromy 2013). Such studies also tend to focus their analysis on particular professions, most notably pathology and the different sub-specialisms within it, for example, anatomical (Horsley 2012), or forensic pathology (Timmermans 2006). However, other professional groups who occupy a central role within postmortem work such as mortuary technicians (APTs) have until recently been neglected (Woodthorpe and Komaromy 2013). Furthermore, dissection has often formed the central focus of existing research. This is understandable as up until recently dissection has been revered as the prime technique used to establish cause of death (Prior 1987). However, in the UK context, visual technologies such as MRI are starting to be applied to certain areas of pathology such as fetal and neonatal. MRI machines are what Latour (1986) refers to as "immutable mobiles," objects that move but that stay the same. They are large machines that tend to be fixed in radiology departments. However, images produced by MRI are mobile, and the same image can be viewed by staff in any site across the hospital (including in the mortuary) via a computer (Reed, Kochetkova and Whitby 2016). It seems increasingly important therefore to consider the effects of this technology on dissection and also on the role of the mortuary as the key site of postmortem practice.

Mortuary research has tended to be ethnographic in nature, drawing on observations of autopsies and interviews with mortuary workers. Horsley (2012) in her mortuary research in Australia has argued that an ethnographic approach in this particular context is valuable. She argues that necropsy room observations granted her an opportunity to use her senses to "see and smell death to 'feel' its presence from an exceptional perspective" (2012, 550). Such studies in the mortuary have also drawn our attention to issues of place and

space (Woodthorpe and Komaromy 2013). Horsley (2008), for example, refers to the mortuary as a discursive space. She uses her ethnographic work to produce a "map" of the internal environment of the mortuary, including spaces of sentiment (family viewing room), spaces of science (dissection rooms and refrigerator units), and what she calls spirit in spaces that go beyond specific rooms within the mortuary. In our study, we wanted to build on and develop existing ethnographic work that draws our attention to the mortuary as a place (Horsley 2012). We did this not just by mapping the internal space of the mortuary but also by exploring the movement of postmortem practices around the different internal locations of the mortuary. Furthermore, existing studies tend to devote most of their attention specifically to the internal space of the mortuary. We sought to extend this focus by examining the different postmortem routes and practices across the hospital and beyond.

Material culture, or what people do with "things" or stuff, is often placed at the heart of ethnography through the use of photos and other "objects" during interviews and observations (Woodward 2016). Material culture has also been central to research on reproductive loss. For example, research on baby loss has focused on exploring the role of ultrasound images, footprints, photos, and gift giving as part of the creation and maintenance of fetal personhood and memorialization (Garattini 2007; Layne 2000). Attention has been given in wider studies on death and dying to the intersection of material culture and place. In their UK-based study on ash disposal, for example, Prendergast, Hockey, and Kelleher (2006) explore the ways in which family and friends scatter the ashes of deceased loved ones in shared favorite places—such as particular countryside locations—thus emphasizing the important intersection of place and memorialization. In order to understand postmortem practice, we felt it was essential as part of our go-along to pay close attention to the role and movement of different forms of materiality—from baby sleepsuits to biological tissue samples—in the mortuary and beyond. Miller (2010) draws our attention to the centrality of material objects in both shaping and being shaped by everyday practice. He argues that objects are both created by us but also shape our ways of being (Miller 2010). Objects are part of everyday practice and as will be explored in the article, also help to create a sense of place. It was imperative in our go-along therefore to look not just at what respondents said and did as we "went-along" but also to examine the role of material objects in practice.

The Study: Research Design

The main aim of the study on which this article is based was to explore the emerging use of MRI in fetal and neonatal postmortem drawing on the

experiences of professionals working in this area along with parents who had experienced the loss of a baby. In particular we wanted to ask: to what extent is this technology transforming traditional postmortem practice, and how do professionals and bereaved relatives feel about this? The study was funded by the Economic and Social Research Council and ethical approval was received from the UK National Research Ethics Service. It was based primarily in a mortuary connected to a histopathology[2] department at a large teaching hospital in the north of England. This is one of several pioneering centers across the United Kingdom currently using MRI to inform postmortem practice when a baby dies in utero from 16 weeks' gestation in pregnancy right through to 2 years of age. We negotiated access to the mortuary and to staff located there via NHS (National Health Service) collaborators and a clinical co-applicant.

The research design was informed by an advisory team made up of various professionals, representatives from bereavement charities (including bereaved parents), and one manufacturer of MRI systems. The fieldwork was conducted with twenty-seven professional respondents (these ranged from pathologists to hospital chaplains) whose work practices were likely to be affected by the emerging use of postmortem imaging. Prior to conducting any fieldwork, all respondents were given an information sheet about the project and a consent form. They were then given an opportunity to ask questions about the research before informed consent was taken. We sought to adopt a methodological approach that was responsive to the specific needs of respondents and to particular fieldwork contexts. Go-alongs therefore drew on various combinations of tours, observations, and mobile and sit-down interviews with professionals in the mortuary, MRI suite and other related areas—as appropriate. Adopting these different elements of go-along in a flexible manner enabled us to build up an understanding of the complex and sensitive nature of postmortem practice and its relationship to the mortuary.

We also conducted twenty-two in-depth interviews with bereaved parents and other family members once we had built up an understanding of the process of postmortem. Because of the sensitive nature of the research, we did not approach individual parents who had recently been bereaved. Rather, we approached coordinators of support groups and hospital staff and asked them to circulate information about the study. As part of the interview process, we encouraged parents (if they felt comfortable) to bring artefacts or memory objects with them to the interview that could help them talk through their experiences of life and loss. Most parents seemed to welcome this opportunity. Where parents felt they could not take part in face-to-face interviews, we invited them to have a phone interview or to provide a written statement of their experiences. Because of the extremely sensitive nature of the study,

however, we did not "go-along" with parents in the mortuary but interviewed them in their own homes or in public places. Parent interviews, therefore, will not be explored within this article. However, as will be explored here, go-alongs with professionals gave us important insight into parents' use of the mortuary space and did help to inform our later interviews with them.

Collecting Data in "Primrose Villa"[3]

The fieldwork was conducted over a period of eighteen months primarily by the research associate (Julie Ellis) and principal investigator (Kate Reed), who are both sociologists. We began visiting the mortuary collectively and also on an individual basis—conducting interviews, observations, and tours. The staff often referred to the mortuary as *primrose villa*—to us, among themselves, and to parents visiting. It appeared to be both a way of preserving anonymity and also of giving the mortuary a more "homely" sense of place. Go-along is often perceived as an opportunistic method that may lead the researcher into areas perhaps unanticipated or planned for (Carpiano 2009; Kusenbach 2003). This was certainly the case in our study; as a result of "hanging out" with respondents in the mortuary or hospital we often got invited to "go-along" with them to unexpected external locations (e.g., city center memorial services). This unexpected aspect of go-along, as will be illustrated later, sometimes took our research in novel directions, enriching our study in the process.

We went along with key informants (such as the lead pathologist, mortuary manager, bereavement coordinator, and chaplain) on multiple occasions. Going along with respondents in this way enabled us to capture and experience different types of mobility. Observations and interviews, for example, were often conducted while we were literally "on the move" with respondents through different physical spaces (around the mortuary, along hospital corridors). Mobility in the study also referred to our observations of objects and other forms of materiality that were mobile during the postmortem process. For example, we observed minimally invasive postmortems in the mortuary and paid close attention to the role and movement of MR images. According to Carpiano (2009), the go-along can be designed to rely on different interviewing formats—it can be done using an open-ended format providing respondents with little direction regarding what to discuss (i.e., leaving the participant free to comment on whatever they see fit), or it can be conducted using a semi-structured interview schedule. We used both formal interviews and more informal types of conversation during go-alongs as appropriate to each particular research context. As we were often following respondents as they worked, it was not always possible to conduct formal

interviews during go-alongs. Therefore, sometimes sit-down semi-structured interviews were conducted before or after go-alongs. We prepared a semi-structured interview schedule in advance of conducting our fieldwork that we used where appropriate. Some questions also arose inductively as we went along with informants. We tended to begin by asking staff to tell us about their work practices, sometimes as they were actively engaged in these practices. We also asked questions about MR imaging, including how respondents felt it informed their professional practice.

We sought to reflect on our relationship with informants and on the ways in which this might inform our understanding of both postmortem practice and the mortuary as place as we went along (Pink 2008; Ross et al. 2009). We found that professionals often welcomed the opportunity to show us around their different workplaces and talk to us about their professional roles. We were able—in most cases—to just follow professionals around to different places as the opportunity arose. As part of the ethical approval process, we were required to gain consent from the lead pathologist for observations of the actual postmortem examinations. We were always granted access in these cases. Mortuary staff would usually phone us when they had a case involving minimally invasive postmortem and we would go-along to the mortuary. Patient information during mortuary observations remained completely confidential and members of the research team were never present when families were visiting the mortuary. As social researchers, we did worry about how we might feel about being exposed to the actual clinical examination. However, professionals were sensitive about how they introduced us to some aspects of the clinical work. They made sure that we were fully informed about what we were likely to see during the examination. We found that during our fieldwork professionals were keen to demystify postmortem work. For example, they wanted in particular to expose us to some of the hidden care practices that take place in the mortuary, hospital and beyond (e.g., dressing babies and singing to them). As a result, we managed to build up a close relationship with the informants throughout the research.

Fieldnotes, Recordings, and Data Analysis

Go-alongs often involve impromptu movement and therefore recording interviews and observations can prove difficult. In her research, Kusenbach (2003) experimented with a variety of data recording techniques (photos, notes, etc.) and found that digital recording worked best. Carpiano (2009) found that taking good fieldnotes was essential to managing the often informal nature of go-along in his study. We digitally recorded interviews but also took detailed fieldnotes at every fieldwork event. Murray (2009) emphasizes

the value of combining visual and mobile methods in order to capture the discreet interplay between research subject and space. Ensuring the anonymity of patients, professionals and hospital locations is a central part of obtaining ethical approval for research taking place within health care settings in the United Kingdom. While we did take photographs as part of our study, our ability to incorporate these into our dissemination activities has been limited as we cannot guarantee anonymity of the fieldsite. Heath and Cleaver (2004) in their study on shared households show how "word pictures" can be created through sketches, notes, and interview data. We took detailed fieldnotes in order to create "word pictures" and build a visual sense of the mortuary as a place. These notes included detailed descriptions of the role of objects in practice. We jotted down brief notes during the observations and interviews. These were then written into fuller accounts as soon as possible afterwards (Walford 2009). We reflected on these notes throughout the research. We recognize that fieldnotes are partial records, however, as Atkinson (1992) shows they do allow the researcher to recapture some significant actions and build important ethnographic context into the research.

Once we started generating a body of fieldnotes and interview transcripts, we began to analyze the data drawing on a thematic approach. We sought to categorize, summarize and reconstitute data in order to identify the most important emerging themes and concepts (Braun and Clarke 2006). This was an iterative process which took place throughout data collection. A range of themes emerged from the professional fieldwork including the importance of emotional labor and the value of multidisciplinary teamwork. The main findings of the study however are not the focus of this article and will be explored elsewhere. Here we have sought to draw out the usefulness of mobility as it was such an unexpected and beneficial methodological tool in the study. Following informants and tracking postmortem practice in different places enabled us to connect the mortuary with other often unexpected locations. Through this process, we were able to build up a deeper understanding of the mortuary as a semipermeable space that extends beyond one particular location. Although we focus on mobility in this article, we do also acknowledge the value of detailing other aspects of the research process in the context of this study. For example, it would be fruitful perhaps to discuss the emotional labor inherent in doing research on such a sensitive topic and the need for emotional reflexivity in the research (McQueeney and Lavelle 2017). While we cannot do justice to issues like this in the context of this article, we do aim to unpack these in detail in future academic publications. In what follows however, we seek to illustrate, using fieldnotes and quotes, how using the go-along method as part of our ethnography enabled us to understand postmortem and its relationship to the mortuary.

Signposting "*Primrose Villa*" through the "Go-Along" Method

According to Kusenbach (2003), go-alongs should ideally be rooted in informants' everyday routines. We begin the study, therefore, by exploring the internal space of the mortuary as this was where some of our key informants (pathologists, technicians) were based. Conducting observations and interviews with informants in particular settings is, as argued earlier, a key part of most ethnography. However, what we seek to do in this section is to show how certain aspects of the go-along method helped to enrich our understanding of the different internal spaces of the mortuary. In particular, we seek to emphasize the value of highlighting mobility in research. We have already noted that the mortuary—or *primrose villa* as it is referred to here—is a space that is "unmarked" and often difficult to locate within the hospital. The go-along method was useful during our initial visits as it enabled us to "signpost" the mortuary, to find it and locate its place and role within the wider hospital. We took initial guided tours with Carmen, the mortuary manager. We met with her in the main hospital reception area and she guided us along various corridors to the mortuary. Through this process, we were able to reflect on our own experience of locating the mortuary. This process also prompted us to explore how bereaved family members would find and negotiate this hidden space. The fieldnotes below from one of Julie's initial visits demonstrate this:

> I ask about how people know how to get to the mortuary as it isn't signposted in the hospital. Families are asked to report to the main reception first and then this gives the staff a bit of time and "space" (as Carmen explains it) to prepare for them arriving—and to get a sense of how agitated they may be. (Mortuary tour notes)

While field observations provide a natural way for the researcher to acclimatize themselves with a particular locality, advocates of go-along have argued that it is often difficult to examine informants' perceptions of the environment that they occupy through field observation alone (Kusenbach 2003). The go-along method with its emphasis on mobile interviews and observations can be particularly useful in this respect. During go-alongs, the researcher is led on a verbal and spatialized journey by the respondent, learning about the local area via the interplay of the respondent's ideas and the researcher's own experience of the respondent's environment (Carpiano 2009, 267). We found this aspect of go-along particularly useful as we sought to build up an understanding of different internal spaces of *primrose villa*. Dissection rooms, for example, are often presented in TV crime dramas as clinical and technical spaces and the practice of dissection as brutal and gruesome. Both researchers were apprehensive about

visiting the dissection room initially. Going along with Carmen around the different spaces of the mortuary enabled Julie to reflect on Carmen's perceptions of the space and on her own. Through this process, she was able to expose some of the mundane aspects of the mortuary, further challenging her own assumptions about the space:

> We move on to the dissection room and enter this via a few steps which lead into a small viewing gallery which is lined with chairs (2 or 3). This space is dark and we look into the brightly lit dissection room through a large pane of glass. Carmen comments that it isn't at its tidiest at the moment. I don't agree and think it looks rather neat—with various instruments laid out or in little tidy-up tubs and boxes. The dissection surfaces are steel but the walls are cream (I think). The sterile, cold metal-ness I expected of a super-techie space is not really what I encounter—it actually looks more like a classroom or a workshop. (Mortuary tour fieldnotes)

Carpiano (2009) argues that go-alongs may involve various combinations of informal and structured interviews and field observations, and that it is this flexibility that allows one to illuminate different aspects of the area of study. Questions arose as a result of interaction between participant, researcher, and place. Mobile observations often created a sense of place; interview questions could then further illuminate how this space was used in practice. For example, Kate ended her first mortuary go-along with both Carmen and Ava (pathologist) in the conservatory—one of two family spaces in the mortuary. Once we arrived at the conservatory, we continued to wander around the internal space—noting comfy sofas and tea-making facilities. We also wandered over to the window to look out into a small covered courtyard where bereaved parents can go for a moment of solace. By taking this mobile approach, Kate was able to build up a sense of the conservatory as a peaceful, homely place, as illustrated below:

> We arrive at the final room in the mortuary—the conservatory. The conservatory was built by charitable donations and was decorated by Bletchley's (bespoke furniture company). This is actually problematic as it does not meet National Health Service fire safety requirements but the professionals insisted that it be decorated (they tend to keep quiet about the issue of decor) in this way to make it more of a "home" from "home" rather than an institutionalized space. (Mortuary tour notes)

Evans and Jones (2011) argue that interview discussions emerging while researchers and informants are on the move tend to be profoundly affected by the landscapes in which they take place. This was certainly the case in our

study. Interview questions emerged as a result of our go-alongs enabling us to explore the types of postmortem practices—such as consent—that often take place in the conservatory. Moving through different parts of the mortuary with Carmen prompted us to ask questions about different aspects of postmortem practice and how it related to particular spaces. This is reflected in the interview quote from Carmen below:

> When we do consent (for postmortem) it's just really finding a nice relaxed area to do it so we like to do it here in the conservatory because it's just a little bit nicer. (Carmen, Mortuary Manager)

Some types of mobile approaches to research are centered on particular one-off fieldwork events (e.g., walking tours). Go-alongs, however, tend to be subject driven and opportunistic. They may involve going along with one or more informants on several occasions and in different locations. We were led in our study by the opportunities afforded to us by informants. Sometimes they invited us to go along with them for particular reasons (e.g., to observe the process of a postmortem). At other times, we would just arrange to follow one particular member of staff as they went about their day-to-day work practices in different locations. This meant that we went along with informants such as Carmen and Ava both together and also separately. Going along with them together helped us to understand the ways in which different types of practice and place linked together. Conducting go-alongs with them separately and at different times enabled us to access different professional interpretations of the mortuary as place and to tease out particular aspects of professional practice. For example, during a mortuary go-along with Ava we were able to uncover some of the hidden care practices that take place during the actual postmortem examination. Moving around the mortuary with Ava prompted us to ask her a range of interview questions about how the space and the objects within it were used in practice. In the interview quote below she explains how babies are placed very gently on the dissection tables before an examination:

> Holding the head for instance, when we put it on the table, so the head is not just, it's a dead body, it will just go down, just holding the head, and holding the baby, putting the baby carefully on the table rather than just dropping the baby. (Ava, Histopathologist)

Advocates of mobile methods suggest that moving with informants through different spaces often encourages a shared reflection on place (Carpiano 2009; Pink 2008; Ross et al. 2009). Go-along certainly encouraged us to reflect on our own and other's experiences (professional informants and

parents) of navigating *primrose villa* as we were "doing" the research. Once inside the mortuary, we found different aspects of our go-alongs with professionals useful for illuminating the various "internal" and sensory spaces of the mortuary. By paying close attention to material objects and taking detailed fieldnotes, we were able to create "word pictures" and build a sense of the mortuary as place (Heath and Cleaver 2004). Furthermore, combining informal chats, semi-structured interviews and mobile field observation in various ways enabled us to enhance our understanding of different and often hidden types of practice, thus problematizing common-held views of the mortuary. This reinforces the value of using mobile methods to explore internal spaces. It also highlights the ways in which our understandings about what constitutes a particular place are shaped by the practices that take place within that space (Cresswell 2003).

The Postmortem Process: Tracking Materiality across Hospital Space

In order to understand the complex process of postmortem it soon became clear that we needed to extend our analysis beyond the internal space of the mortuary. Postmortem practice may vary according to age of fetus/baby and whether it is an option chosen by parents or ordered by a coroner.[4] Full postmortem is the clinical gold standard and includes dissection, tissue sampling, and if appropriate genetic testing. Minimally invasive postmortem (MIA) is an emerging type of postmortem, often involving tissue sampling and an MRI or computed tomographic (CT) scan. This type of postmortem tends to be offered as a second-line option if parents do not wish to consent to a full postmortem (Whitby 2009). We found it difficult to understand the complex nature of postmortem as different tests were conducted at different times in various hospital locations. As this section seeks to highlight, going along with informants and tracking different forms of materiality (biological and material objects) across the hospital gave us important firsthand insight into how these different practices worked together. It also enabled us to understand the ways in which different places were connected through different types of practice associated with postmortem.

We conducted a go-along with Heather, a bereavement coordinator who was based in the bereavement suite—a separate location from *primrose villa*. We conducted a sit-down interview with her followed by a tour of the different internal spaces of the bereavement suite. The suite is like a mini-mortuary without the dissection room. It includes a family/viewing room, an outside space where parents can spend time with their baby, and a refrigerator room where the babies and fetal remains are kept. There is also another small room

where a range of items (baby sleep suits, nappies, etc.) are stored. After exploring the bereavement suite with Heather, we also went with her to other hospital locations. Through taking this mobile approach, we were able to track the storage and movement of babies, placentas, and fetal remains in the bereavement suite and across the hospital. By going along with Heather, we were able to acquire an understanding of the different types of testing that might occur according to age of fetus/baby and type of consent. We were also able to appreciate the different routes for babies/biological matter into and out of the mortuary space. The interview extracts below are taken from the start of our go-along as we picked up the digital recorder and started moving through different spaces in the bereavement suite:

Interviewer 2: I'm going to carry the recorder, if that's alright. (Laughs)
Heather: So the fridge is in here, and besides the babies and the fetal remains, we keep placentas in here as well, so when somebody consents to have placental histology done . . . (testing the placenta)
Interviewer 1: Is that . . . oh yeah.
Heather: . . . the porters bring the placentas down here and they store them in the fridge, and every morning we have a transport driver come and pick them up and take them over to *primrose villa*.

Movement between different hospital spaces is often central to the work practices of health professionals. This mobility, however, is seldom explored explicitly in the context of health-related research. As argued earlier, one of the benefits of taking a go-along approach is that it enables us to tease out various forms of mobile practice in different ways. For example, babies must be moved by hospital staff between different sites as part of the postmortem process (e.g., between the mortuary and the radiology suite). Our study took place in a children's wing of a busy teaching hospital. It was not deemed appropriate by professionals for children attending hospital with their families to see a dead baby being moved along hospital corridors. Certain props were used therefore to move babies around. Babies were often swaddled in blankets and moved around in a stroller as if they were alive. Through moving across the hospital with various staff, we were able to uncover some of these hidden practises. For example, we interviewed Linda, a hospital administrator and bereavement assistant. She was responsible for moving various materials across the hospital, often using trolleys to do so. This included moving fetal remains, babies, and paperwork as part of the postmortem process. Linda led Julie around the hospital prior to and after a formal sit-down interview. During this process, they were able to reflect on the various uses for these trolleys, including as a vessel within which to transport babies:

Linda: So nobody can see what we've got, because it's all concealed in a box.

Interviewer: So you literally just push that trolley over there and push it back with the babies in.

Linda: Yeah. But if it's a full term baby, we've got a big trolley downstairs, which you wouldn't know, it's got a lid on, and everything, and you wouldn't know.

Interviewer: So you could just be pushing paperwork or . . .

Linda: Paperwork, you wouldn't know, you'd no idea.

Interviewer: And say you bumped into somebody on the way, do they know what you're doing? Do they know?

Linda: No, no, no, no. No, because you'll think that I've got files in that, because it does . . . it's like a normal trolley, but it's a square box and the baby will be inside that box, it'll be all covered in, so nobody would . . . no, no.

In the study, we were particularly interested in parent and professional views about minimally invasive autopsy using MRI. In order to better understand this process we went along with Ellie—a radiologist—to different spaces within the hospital to understand the practices involved. MRI scanners are located some distance away from the mortuary, one in the radiology department and another near the operating theatres. Strolling along corridors and between places prompted both Ellie and the researchers to further reflect—not only on the role of MRI in postmortem—but also on the ways in which babies are taken to and from MRI scanners. This further enhanced our ability to uncover some of the taboos surrounding both the movement and storage of dead bodies. It also enabled us to connect the different types of postmortem practices that take place in different locations:

> There is a fridge in radiology to store the babies. If the baby to be scanned is full term it is dressed in clothes and carried as a live baby—in someone's arms, in a pushchair. Fetuses are placed in a sealed bag before they are placed in the scanner (Radiology suite fieldnotes).

In their work on mobility, Sheller and Urry (2006, 11) have argued that while people and places are continually moving, images and communications are also intermittently on the move too, and that both actual and potential movements structure social life. While go-along facilitated our exploration into the ways in which babies, tissue, and objects moved in and out of the mortuary, it also enabled us to explore the role of images in the process. As argued earlier, MRI machines act as immutable mobiles (Latour 1986). Although the

scan takes place in a fixed location, the actual MR image can be accessed anywhere and at any time, by multiple professionals through hospital computers. By following the process of minimally invasive postmortem through different hospital locations - from the dissection room to the MRI machine to the computer in the mortuary office - we were able to better understand the role and mobility of images in postmortem. This is reflected in the fieldnotes below where both Kate and Julie observed MR images at the end of a postmortem:

> Back in the office, Carmen logs onto the PACS (computer) system and shows us the images for both babies. She explains that these will be interpreted by Ellie (radiologist) who will then give the information to Ava (pathologist) to write a full report. Carmen doesn't know how to interpret the images, but she has learnt how to see certain things—bleeds on the brain for instance. The scans don't really reveal a great deal to our untrained eyes—but it's helpful to see the process—and to realize that multiple clinicians can access and see the images from various locations. (Mortuary office notes)

Prior to conducting fieldwork, we had expected to observe the mortuary as a contained space. Moving with informants across the hospital enabled us to show how postmortem is made up of a diverse and mobile set of practices, requiring a conceptualization of the mortuary that goes beyond its internal space. Mol (2002) in her study on atherosclerosis (a disease of the arteries) suggests there is not one singular version of the disease; rather, there are multiple forms as constructed through different types of practice. The mortuary in our study while hidden and taboo could not be contained as one hospital location but rather was continually being remade through different aspects of postmortem practice in different locations. Material objects are embedded in our everyday social and cultural practice (Miller 2010). They also play an increasingly important role in ethnographic research (Woodward 2016). By including a focus on the movement of different forms of materiality as part of our go-alongs, we were able to illuminate some of the more hidden and sensory practices of the postmortem. As the final section of the article will explore, go-along also enabled us to situate postmortem within the wider landscape of memorialization and remembrance.

Movement and Memory: Walking and Talking beyond the Hospital

The process of memory-making has long been a central focus of studies on babyloss and death and dying more generally (Garattini 2007; Hallam and

Hockey 2001; Layne 2000; Miller 2010). While ethnographies of the mortuary have often explored the emotional labor involved in autopsy work (Horsley 2008, 2012), less is known about the relationship between postmortem, the mortuary, and the broader process of memorialization. As will be explored in this section, by taking a go-along approach and following professionals beyond postmortem (both in the hospital and outside), we were able to highlight the importance of situating postmortem practice in the wider landscape of grief and memorialization. While moving with professionals around the mortuary and bereavement suite, we saw babies being dressed and swaddled with teddy bears and blankets. This process gave us important insight into some of the lesser known professional practices that take place within the mortuary. For example, as articulated in the fieldnotes below, a tour of family spaces conducted by Kate in the mortuary prompted a discussion with Ava on the creation of memory boxes:

> After some general discussion Ava went to get the memory boxes. These are wooden boxes and there are two types: one for babies and one for older children. They include teddies, tiny boxes and little glass cases in which parents can put different things e.g. a lock of hair etc. The hospital also do photos and foot prints and work with parents to personalize the memory boxes. (Mortuary notes)

One of the issues that Kusenbach (2003) identifies as being particular to go-along is the potential for researchers to go with informants to multiple locations. Go-alongs are often spontaneous and opportunistic, leading the researcher into locations beyond the original research sites that may be unanticipated but are often very fruitful (Carpiano 2009; Kusenbach 2003). We sometimes got the opportunity to go along with informants to unexpected places beyond the hospital site. For example, we interviewed Frank, a hospital chaplain, in the hospital chaplaincy. We went along with him to other places such as to a Crematorium where services are held for nonviable fetuses. These services are arranged by the hospital and are generally for pregnancy loss that takes place between 12 and 24 weeks. Some—but not all—bereaved families will attend this service. Frank conducts a short service (15 minutes) that unfolds in a series of religious readings, one poem, and quiet time for reflection and prayer. Going along with Frank to this particular location exposed us to a new place and set of practices. It also gave us access to a broader range of professionals, for example, casket/coffin bearers, who play an important role in the broader landscape of early-life loss. The notes below are taken during a go-along to this service:

> The men are quiet and solemnly go about their work even though there is no one else in the room to witness this. As I chat to them later, they tell me that they never get used to the baby deaths. After a couple of minutes Frank returns to the service room and he and the two men assemble by the large coffin. He says a blessing and both he and the men bow to the coffin. Even though there is no one here to see this, it is still important to provide some ritual for these "babies." (Non-viable fetus service notes)

Frank also invited us to go along with him to a memorial service held in a large church in the city which was a few kilometers away from the hospital. Frank was part of the organizing committee of this annual service and also conducted the memorial service. A number of professional informants from the mortuary and hospital were present at the service—something we had not anticipated. Going along with Frank around the church where the memorial service was being held proved particularly valuable as it enabled us to extend our analysis of different types of professional practice beyond the hospital context. The following fieldnote articulates the centrality of professional informants in this service.

> The presence of hospital staff seems important and they are integrated into the service—one of the obstetricians we interviewed reads a short poem, as does one of the senior nurses from the hospital ward and a consultant obstetrician steps up to read out the names written on each memory card that families were asked to complete on their arrival. (Memorial service notes)

While sit-down interviews are a good way of exploring informants' perceptions of self, others, and place, go-alongs can enable the researcher to examine these situationally (Carpiano 2009; Kusenbach 2003). Interviewing and observing informants "in situ" as they went about different aspects of their jobs in various locations enabled us to understand a range of practices firsthand. For example, during a hospital interview Frank explained that each year bereaved relatives were invited to place an object on a memory tree at the service to symbolize their loss while also taking an object to represent new beginnings. Items gathered by parents during the service were then often included in the memory box given to them in the mortuary. By going along with Frank around the church during the memorial service, we were able to directly observe and reflect on this process with him. This provided us with important contextual information for later interviews with bereaved parents, and further connected the mortuary to the wider process of memorialization. This is indicated in the fieldnotes below:

> We watch as family groups and couples move to the trees and place their leaves on the branches. After doing so they take one of the little wooden acorns from the boxes—something material to take away and keep. Frank explained to us afterwards that this is important that they have something to take away and that sometimes parents collect these different objects from the memorial services and keep them as part of their baby's memory items. (Memorial service notes)

Clinical work associated with postmortem practice—dissection, imaging, and histology—clearly take place in the mortuary and hospital context. However, by going along with professionals after a postmortem examination we have sought to illustrate the ways in which the process of memory-making also begins in the mortuary. This offers a challenge perhaps to popular perceptions of what goes on inside the mortuary. Going along with professionals beyond the hospital on occasion enabled us to further illuminate connections between postmortem, the mortuary, and the broader landscape of grief and memorialization. Connecting these seemingly diverse practices in this way lends further support to a conceptualization of the mortuary as a place whose reach extends beyond closed doors. It also reinforces the argument made by Davies (2011) and others that even when conducting research indoors much can be gained by paying attention to what goes on outside. The opportunistic and mobile nature of go-along facilitates the collection of data in both internal and external spaces. This is something that will be reflected on in more detail in the conclusion.

Conclusion

Movement has always formed an important part of ethnographic research. However, the role of movement during fieldwork is something that has been brought to the fore more recently in discussions on ethnographic practice (Lee and Ingold 2006; Pink et al. 2010). The go-along method is one of a number of approaches that seek to highlight the importance of mobility during the research process. The go-along method, however, tends to be used predominantly in research that explores external environments. Through our own ethnographic work on postmortem imaging, we have sought in this article to show the value of using go-along in research that takes place in internal and sensitive locations. We feel that taking a specifically mobile approach in this context enhanced our ability to pick up on the sensory nature of interior secret places such as the mortuary, while also enabling us to challenge the view of such locations as completely closed. Go-along also enabled us to uncover the different types of mobility possible within an emotionally charged institutional context—from tracking professional mobility and the

movement of fetal remains between hospital sites to observing the mobility of immobile objects such as MRI images. This stands in contrast to traditional go-alongs that have tended to focus on exploring mobility in the context of more emotionally open external environments—walking or driving along streets, markets, parks, and cities (Kusenbach 2003). By extending the use of mobile techniques to our hospital-based research, therefore, the article has sought to offer an original contribution to existing debates on the nature and types of movement that can be explored through the use of mobile methods.

Several authors have argued that movement in research can encourage a reflexive conversation between researcher, respondent, and place. This includes building an understanding of the role of both respondent and researcher in the constitution of place (Pink 2008; Ross et al. 2009). We felt that this was certainly the case in our study. For example, initial tours with professionals enabled us to locate the mortuary and negotiate its internal space. Walking and talking during this process prompted us to reflect on our own and parents' negotiations and understandings of the mortuary as place. Go-alongs inside the mortuary also enabled us to learn about the space via the reflexive interplay of professional informants' ideas and our own experience of the informants' environment (Carpiano 2009). Furthermore, going along from the mortuary to other hospital locations enabled us to reflect on some hidden organizational practices, such as the secret movement of dead bodies. We felt therefore that the use of go-alongs in our study did encourage reflexivity in a range of different ways. It could be argued perhaps that movement in research may encourage what Bourdieu (1999, 608) calls "*reflex reflexivity*" whereby the researcher monitors "*on the spot*," as they are "doing" the research, the effects of the social structure on which the research is taking place.

In our study the flexible nature of go-along as advocated by Carpiano (2009) was also particularly advantageous. Various parts of go-along—tours, informal chats, interviews, observations—were used to illuminate different aspects of practice and place. It also enabled us to explore the ways in which different locations were connected through practice. Through using go-along we were able to show that there was not one type of postmortem or even one mortuary—rather as Mol (2002) argues multiple forms of reality as constructed through different types of practice in various locations. Our go-along therefore reinforced the value of conceptualizing place as something that is not fixed but rather is constantly being remade through different forms of practice (Cresswell 2003).

While ethnographic research often emphasizes the value of analyzing the role of material artefacts in everyday practices (Miller 2010; Woodward 2016), this has seldom occupied a central role in discussions on the go-along

method (Carpiano 2009; Kusenbach 2003). Our go-alongs however were enhanced by paying close attention to material objects. It was only by incorporating objects into our mobile interviews and observations—from tissue samples to dissection tables—that we were able to fully understand postmortem practice and build up a sense of the mortuary as place. Furthermore, while studies on death and dying have focused on the relationship between material culture, memorialization, and place, there is little research that focuses on the mortuary as a site of memory-making. Capitalizing on the often opportunistic nature of go-along, we continued to walk and talk with informants after postmortem, in the mortuary, hospital, and beyond. Through this process, we were able to show that the practice of postmortem and the mortuary itself cannot be studied in isolation; rather, they must be situated in the wider landscape of bereavement and remembrance.

Although the go-along method has been particularly useful in the context of this study, it is not appropriate in all contexts. It may be unfit for some sites and physically exhausting activities that do not facilitate conversation or involve rituals that require silence. Furthermore, as Kusenbach (2003) argues, despite following people in their natural settings go-alongs are still contrived, affected, and disturbed by the social researcher . We found this in our study when we received a phone call from Carmen informing us that a minimally invasive postmortem was about to start and asking would we like to observe. Before we went into the dissection room, she asked whether they should cover the face of an older baby as we may find it distressing to see. This acts as a reminder of the ways in which social researchers affect the research situation even when studying people in so-called "natural" settings. Despite its limitations, however, what we have tried to convey here is the ways in which go-along helped us to penetrate the veil of secrecy that surrounds the mortuary. It enabled us to show that even those locations that appear most hidden from society cannot be reduced to what goes on behind closed doors, but rather are continually remade in different locations through practice.

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Notes

1. For example, the work of Clifford Geertz (see Lee and Ingold 2006) or Colin Turnbull (see Pink 2007).
2. Histopathology is the study of diseased tissue including examination under the microscope. See Royal College of Pathology for further information: https://www.rcpath.org/discover-pathology/i-want-a-career-studying/human-tissue/histopathology-careers.html#sthash.rPPBmmTG.dpuf
3. Names of people and places have been fully anonymized in this study.
4. A coroner may choose to order a postmortem if a death is perceived to be sudden, violent, or unexplained.

ORCID iDs

Kate Reed https://orcid.org/0000-0002-9812-3732
Julie Ellis https://orcid.org/0000-0002-9734-8948

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Author Biographies

Kate Reed is a reader in medical sociology at the University of Sheffield. She is currently Principal Investigator of the ESRC project "'End of or Start of Life'? Visual Technology and the Transformation of Traditional Post-mortem." Her research interests are focused in the area of reproductive genetics, gender, technology and health, and social theory. Kate is the author of *Gender and Genetics: Sociology of the Prenatal* (2012, Routledge).

Julie Ellis is a research associate at the University of Sheffield. She is currently working on the ESRC project "'End of or Start of Life'? Visual Technology and the Transformation of Traditional Post-Mortem." She is interested in the social and relational aspects of death and dying, material culture, and everyday lives and medical sociology. Julie co-convenes the British Sociological Association Study Group, Social Aspects of Death, Dying and Bereavement, and her previous research has explored family life during life-threatening illness.