Shifting landscapes of care and distress: a topological understanding of rurality
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\[ B = f(PE). \] (Lewin 1936, p. 166)

This equation is the core concept at the heart of the eminent social psychologist Kurt Lewin’s topological psychology. For Lewin ‘behaviour depends on the state of the environment and that of the person’ (1936, p. 166), which set the foundations for early social psychological thinking on the relationship between individual bodies and their spatial contexts. Lewin’s approach emerged from a dissatisfaction with the mathematical model of Euclidian geometry, which he argued was too structured and inflexible for a psychological model of spatiality. For Lewin, a viable topological psychology could only emerge through a theoretical approach that was grounded in a philosophy of *intensive*, rather than *extensive*, properties. This required a new conceptual vocabulary (e.g. ‘psychological life spaces’), one that placed emphasis on the emotional and affective organization of spatially distributed psychological experience.

In this chapter I draw on ideas from Lewin’s topological psychology to explore and analyse some of the relationships between mental distress and rurality, with some empirical material taken from interviews with long-term mental health service users living in rural settings. The aim is to highlight some of what is at stake psychologically for service users in rural ‘spaces’. The Lewinian approach is of value as it directs us away from reified notions of space, in which spaces are defined according to a set of inherent properties. Instead I argue that analysis needs to focus on the ways that psychological forces produce intensive connections between bodies and objects (human and non-human) to produce the psychological life spaces that constitute everyday experience. In this sense, to ‘belong’ becomes a topological act of connecting with others. Topological thinking takes seriously the role of bodies and objects, and how psychological processes connect them into individual and collective life spaces (see Tucker and Goodings 2014). To follow Lewin, I argue that to
understand the psychological implications of rurality we need a topological approach as ‘[T]he determination of topological relationships is the fundamental task in all psychological problems’ (Lewin 1936, p. 87). I do not wish to argue that distress is entirely ‘psychological’ in a reductionist way (e.g. cognitive and/or biological), but to suggest that it is ‘spatial’, in a topological sense. As such, the question the chapter addresses is: what kinds of connection/relati... experiences of psychological experience in rural settings?

Rurality and community care

Questions regarding the dimensions of inclusion and exclusion tend to shape research and policy regarding community mental health (Jameson and Blank 2007). These issues are a concern across urban and rural spaces, although the latter is often thought to be particularly susceptible to potential exclusion due to less service provision and a broader geographical spread of need. In sparsely populated landscapes the visibility of mental distress can also be greater than in densely populated urban spaces, and as such, service users can feel more exposed to the gaze of others (Parr 2006). Issues of transport, distance and availability are said to be key challenges to maintaining rural mental health support services. Attempts to contextualize these issues have tended to focus on epidemiology, and mapping the extent and level of existing services (Philo et al. 2003). More recently there has been a shift towards including the narratives of those who experience mental distress in rural landscapes in research (e.g. Aisbett et al. 2007). This fits into a broader movement in mental health research to include the voices of those who use services, so-called service user research (e.g. Wallcraft et al. 2009). The drive behind this move is a desire to gain insight into how practices of inclusion and exclusion are felt by those who live in rural spaces. It is this type of research that this chapter is focused on. Questions regarding the demographic make-up of rural mental health communities can highlight structural aspects of rural communities, but provide less insight of the lived realities of rural mental health.

In this chapter I argue that we should not approach notions of rurality (or urbanity) through a pre-figured view regarding potential exclusion. Instead, we should consider such ideas only so far as they relate to the lived experiences of people in those landscapes. In this sense we should not assume a fixed boundary between urban and
rural, but should analyse lived experience as always already spatial, in terms of giving life to our everyday settings (Tucker and Smith 2014). The utility of this approach is perhaps evidenced by previous claims that in rural spaces ‘practices and experiences of inclusion and exclusion here are fundamentally entwined, shifting and even unpredictable’ (Parr 2006, p. 71–72). This is potentially because the spaces are not ‘fixed’, but are subject to the enacting practices and activities of those who co-constitute them. This is the key to Lewin’s thinking on topology and the psychological life space. The intensive connections made set the conditions for psychological experience and, as such, create the spaces. What we perceive as certain spaces (e.g. community day centres) are to be analysed in terms of the relations (connections) enacted at those times. I am particularly interested in those relations that endure and, as such, provide some perceived stability to on-going psychological experience (and hence distress). In a sense then the focus shifts to temporality, and the on-going relations that come to constitute psychological life spaces in rural landscapes. While not wanting to present a theoretical boundary between space and time, the focus on process and its temporal perspective is useful as it guides us away from a deterministic reading of space. As such, our topological rendering of experience frames rural mental health as emerging and unfolding through ‘space-time’ relations that do not exist beyond the connections through which they come to life.

Empirical studies of rural mental health have started to emerge in recent years, particularly in cultural geography. For instance, Parr et al.’s (2004, 2005) work in the Scottish Highlands throws a broad analytic spotlight on what it means to live with mental health difficulties in rural areas. The potential for increased visibility was identified as an issue, as the small population size of rural communities often meant a service user’s status as a person with a history of mental health problems was commonly known, which increased the chance of discrimination (or what Parr (2006) calls ‘active differencing’). For Parr this could be further cemented as a common social practice through the pressure to repress emotional talk and activity, due to social pressure to be seen to ‘get on with things’, and not let psychological distress be an impediment to community living (Parr et al. 2005). The ambiguity of such spaces in terms of experiences of isolation and exclusion has been reported, with community members often unintentionally engaging in inclusionary as well as exclusionary
activity at different times (Parr 2006). Cultural geographic work has consequently contributed theoretical awareness of how notions of inclusion and exclusion are bound up in relationships between service users and the material and spatial contexts of their everyday lives. These contexts are shaped by discourses of care and formal psychiatric provision, as well as the localized connections between bodies (service users and support workers) and the immediate environment. As such, Parr (and colleagues) provide us with focus on a relationship between distress and space in a very concrete and specific way.

Following this I see a valuable argument for the need to include the spatial contexts of everyday life in understandings of notions of inclusion and exclusion (Smith and Tucker 2015). In this chapter I seek to develop notions of rurality, distress, space and psychology through building on the work of Parr and Philo, and developing work in the growing area of ‘the social psychology of space and place’ (Tucker 2010a, 2010b, 2011, Reavey and Brown 2007). This empirical and theoretical work has offered conceptual understandings of the spatial orientation of social psychological experience, with specific focus on the idea that psychological experience is formed in and through multiple processes, rather than as a combination of stable categorical forms. In a sense this work is ontologically concerned to raise the profile of the role of space as constituting psychological experiences, rather than configuring them as ontologically distinct properties of the world. Hence I am not focused on ‘space’ per se, but on offering a spatialized social psychology that can help us to understand the experiences of service users living in rural communities in the East Midlands area of England. Here we turn in more detail to the topological offerings of Lewin.

**From objects to processes**

As we saw earlier, Lewin’s topology shifts attention away from space as ‘physicality’, namely thinking of specific places as ‘space-objects’ that afford particular kinds of experience unique to them. Instead his approach focuses on conceptualizing how psychological experience is grounded in relation/s between bodies and environment, in a general sense (i.e. space not place). Lewin’s concept of the ‘psychological life space’ that he develops in his *Principles of Topological Psychology* is characterized as the ‘totality of possible events’ (1936, p. 14). This is captured when he states:
from both the theoretical and practical point of view the most important characteristics of a situation are what is possible and what is not possible for the person in this situation. Each change of the psychological situation of a person means just this – certain events are now ‘possible’ (or ‘impossible’) which were previously ‘impossible’ (or ‘possible’). (Lewin 1936, p. 14)

A topological analysis based on these principles focuses on what possibilities for action are present in a given relationship between an individual body and the environment (which Lewin calls ‘situation’). A situation is a spatial condition that can facilitate a previously unknown set of possible events. The notion of possibility is an important one as it directs us towards considering experience as temporal in terms of processes of potential movement and change. In doing so, our focus becomes about what kinds of situation are present in mental health ruralities, and subsequently what events are made possible. Moreover, the kinds of possibilities are subject to change if relations between bodies and environment are reconfigured. Lewin captures this when stating:

If the life space is a totality of possible events, then ‘things’ that enter the situation, especially the person himself and psychological ‘objects’, have to be characterised by their relationship to possible events. (Lewin 1936, p. 16)

A topological reading conceptualizes the individual as unfolding as a relation to the range of possible ‘events’. This principle directs the analytic gaze towards considering the patterns of possible and non-possible events in rural mental health. These are conceptualized as processes rather than stable forms as what is possible at one time may not be at a later date. In this sense the focus is not on how rural spaces are ‘inhabited’ or ‘entered’ (Manning 2009), but rather how a topological approach ‘relationally connects nature and experience, insisting that no single element be a permanent support for changing relations’ (Manning 2009, p. 165). What is developed is a ‘relational network of experience’ (Manning 2009, p. 165) of mental distress and rurality. Topological analysis directs us towards considering experience as grounded in bodies that ‘move’, and in so doing, produce the on-going ‘space-times’ that constitute experience. In this sense mental distress, which is often considered to be
located in the mind, becomes embodied and spatial. These are not ontologically distinct categories, but elements of relational processes of movement through which distress is lived. Distress happens in the mind, but also through connections of experience that are also embodied, material and spatial. To connect all these elements theoretically through a vocabulary of topology is an attempt to illuminate some of the ‘depth’ of experiences of rural mental health, without relying theoretically or empirically on pre-figured notions of inclusion and exclusion. The aim of the chapter is to present such notions, as appropriate, in the form of experience.

The advantage of this conceptualization for understanding rural mental health is that it draws attention to the ways that distress (as experience) is always subject to change depending on the current relationships between individuals and their environments (i.e. their psychological life spaces). As such, we can emphasize that rural mental health does not, by definition, take a specific form, but is actually produced through multiple life spaces. The focus is not on place per se, but on understanding psychology as relational, and processual. The analysis that follows turns towards the kinds of processes made possible in the rural landscapes under focus (the East Midlands).

In the analysis that follows the aim is to identify some of the possibilities for action that unfold in rural landscapes for people with long-term mental health problems. Of particular interest are the practices of support emerging ‘in’ rural spaces, and what they mean for how people feel in relation to their distress. In this sense distress becomes a key element of the spatio-relational form that service users’ lives take. It is not a distinct aspect of their everyday life, but becomes an integral part of the multi-layered unfolding of events whose conditions of possibility emerge according to the organization of psychological life spaces. The analysis comes from a project exploring the role of space in experiences of distress in the lives of long-term mental health service users in rural settings in the East Midlands. The data drawn upon comes from semi-structured interviews.
Shifting topological landscapes

The ways that distress and support come to be distributed across rural spaces are seen to be under pressure due to funding cuts. In the following extract Wendy, a 55-year-old service user) discusses with the project interviewer Lesley-Ann the pressures on her support system, and the potential impacts such changes may have:

Wendy: I mean it is not just me, it is other people, you know, that are going through this thing and don’t realize, I mean there is a lot of people out there that do without, a lot of people don’t know where to go, these are very good, I tell you what, I don’t want these to pack up, I just don’t but there again it is all going to change, everything is going to change.

Lesley-Ann: What with the team here you mean?

Wendy: Yes, the team and everything, everything is having a change around you know?

Lesley-Ann: Oh is it?

Wendy: Oh yes, there is going to be a lot of change about, you know, it is going to be like a more one to one, it is going to be like a one to one … at the moment we are trying to, because we are only going to get two three-hour sessions a week where now we get here on Wednesdays from half past nine to half past one at the moment on the Wednesdays and on a Friday it is from about half past nine to half past three so that is a fair while and we are going to lose some of them and also our Mondays, we shall be using the Mondays if we can’t get something organized in the meantime.

Lesley-Ann: Is that due to funding?

Wendy: Yes.

Lesley-Ann: All down to money, then?

Wendy: Yes, it is all down to money again, yes.

Lesley-Ann: Yes.

In this extract we see the landscape of care in a small rural town under threat of change, primarily in relation to the day centre that is run by a national UK mental health charity. At the time of the interview the day centre was facing funding cuts and as such was having to consider reducing its provision. Here we see how this can
create anxiety in the form of expressed awareness of the potential for change. Fiscal austerity comes to act as a force that threatens topological reconfiguring of rurality in a specific way. The idea of the day centre reducing its provision presents a problem for Wendy in terms of the anticipatory possibilities of a lower level of availability. As Lewin notes, ‘[C]hanges of connection are the most important changes both in the psychological environment and in the structure of the person’ (1936, p. 87). As such, the possibility of change is not to be taken lightly, but can be a major psychological event. In the following extract we see some of what this can mean in terms of creating ‘non-possibilities’ for action:

Wendy: And I mean we would like to keep our group going because there is so many of us, I mean some of my friends in there, I can speak, they know some personal things but there is personal things I don’t speak about, we can speak to each other and we know we can, you know, we can trust each other, in other words she tells me things and I tell her things, as well as … you know, talk to each other about things.
Lesley-Ann: So you might lose that support then?
Wendy: Well this is it, I don’t want to, you know, I don’t want to, I mean I know I could go to [name removed] or somewhere like that but I don’t want to move, I don’t want to stop with this group.
Lesley-Ann: I was going to say because once you have established friendships, it’s, you get trust in friendships, don’t you?
Wendy: Yes, you can.
Lesley-Ann: Yes, you become close et cetera, et cetera so you don’t, I know I have been to one of the day centres, you know, people travel miles not to go to the one nearest to them and it is purely because of the friendships …
Wendy: Friendship, that is it, yes, we do.

We see here how the day centre that Wendy attends comes to act as an ‘anchor point’ for her support. It is not just the space itself (how it is designed and organized), but also the kinds of connection that the day centre makes possible. The extract emphasizes the value of the day centre as a site through which friendships and relationships are formed and nurtured. Wendy talks about the value of the friendships she has formed through her local day centre, and the implications for these of
potential changes to the availability of the space (i.e. reduced opening due to funding cuts). We see how the feeling of trust becomes dependent on the day centre maintaining its current provision. A potential change is felt as a threat to existing patterns of friendships, and the trust they facilitate. Although other day centres may exist, Wendy’s extract demonstrates how they are experienced as individual ‘spaces’, due to the personal friendships that are formed through regular attendance being specific to that day centre. In this sense the support of the day centre cannot be ‘moved’ to another site (even if it provided similar activities), as the friendships are not a property of the space itself, but exist in and beyond the physicality of the space. They facilitate topological connections to be made that are intensive rather than being extensive elements of a defined space. The connections come to be felt as positive emotional forces that help people to cope with their distress. There is a sense of community inclusion that is made possible by the day centre. A change to the make-up of the day centre resonates with service users’ psychological state, producing a feeling of uncertainty in their everyday lives. Here we see how Wendy’s psychological experience (including level of distress) is indelibly bound up in the awareness of a potential change to the day centre, sending spatio-psychological ripples through to service users’ individual embodied sense of belonging. Core here is the potential impact on feelings of trust, which can be fragile for people experiencing on-going distress.

In this case trust acts as a core psychological possibility that has emerged through engaging in the relative stability of the day centre space over time. It is not a property of the (rural) space as such, but emerges as part of the relations formed between Wendy and the other service users attending the day centre. Defining this as about rurality per se is to move us back to a position in which Wendy’s experiences are said to be afforded by the space. Topology shifts this framing towards an understanding of relations and psychological life spaces. Notions that suggest different types of space (e.g. rural, urban) can work to shift attention away from the specificities of the relations that constitute distress in the lives of service users. Here the concept of rurality does not act as a useful analytic starting point, as it brings with it a set of presuppositions that work to pre-figure the kinds of experiences people will be expected to have (e.g. isolation, difficulty accessing services). Wendy’s concerns are
not about rurality per se, but about the potential reconfiguring of the relationships that psychologically sustain her. These could exist equally in spaces defined as urban.

Moreover, we see that habituation can come to strengthen topological connections, which exist and take form outside of their originating situation (i.e. the day centre). Trust comes to underpin the support made possible through the friendships with other service users. The presence of a very visible potential change to service provision in the form of the day centre is felt as a threat to the existing possibilities of existing life space. As such we can see how the psychological experience of support and trust are spatially distributed through the sense of connection formed through habitual engagements with the anchoring space of the day centre. In the following extract with Teresa (53 years old) we see what that can mean in terms of creating supportive connections with multiple functions:

Lesley-Ann: Yes. But you find that now you have got [name of the day centre] you do feel, because I mean you are giving things back now as well, aren’t you?
Teresa: I am giving things back as well because I know that if I can help people even to get out of, like get out of hospital and keep out of hospital, you know?
Lesley-Ann: Yes.
Teresa: And even if they are able to come here, it is, you know, I think this is a crucial place for people to come because if they didn’t have here, people without money couldn’t afford carers all the while, I mean a lot of places are losing their funding, aren’t they, all over really, isn’t it?
Lesley-Ann: Yes, I think funding seems to be an issue with everything at the moment.
Teresa: Yes, yes, yes.

In this extract the day centre features as a hub for connections to be made that allow for support to be provided by service users, not just received. The impact of funding changes can be seen to reconfigure the connections made possible by the day centre (‘a lot of places are losing their funding, aren’t they, all over really, isn’t it?’). This is felt as a threat to Teresa’s feeling of community and support. A reconfiguring through
funding reduction of the shared space of the day centre increases the potential for isolation by threatening the relationships built up through attending the day centre. In a sense, the day centre acts as a central incubator for support and friendship, as such connections expand topologically outside of the day centre. In this extract we see that such connections are not entirely about receiving support, but also providing support to other service users. Mental health services are, by definition, designed to help individuals, to provide support to those who seek and need it. In this extract we see that Teresa is able to develop this in the form of providing support to those entering the day centre for the first time (‘I am giving things back as well’). This provides some temporal insight into the topological ordering of Teresa’s experience. Over time the possibilities of action in the form of ‘body-space’ movement have changed, shifting into new topological patterns, through which Teresa feels she can ‘give back’ in the form of support to new attenders. They may all involve the day centre, but are not felt as properties of that space. Instead they form psychological experience of which living as a mental health service user is a key part. This can not only be helpful for the other service user, but also to Teresa as the feeling of being helpful to others can have a therapeutic benefit itself. The value of being able to connect with others with similar experiences can also be seen in the following extract:

Lesley-Ann: So do you think that if you hadn’t got [name of day centre] would you …
Teresa: I would feel isolated because I don’t get out at night and if things happened and I couldn’t you know, I couldn’t sort them out or have help doing things then you know, I think I could become isolated.
Lesley-Ann: Yes?
Teresa: Yes.
Lesley-Ann: But do you think you, I mean without [name of day centre] though, I mean I know some of your family is around you but do you think you have enough support from your family in the sense that you do now in [name of town]?
Teresa: Well I have support from my sister but she has got four children of her own all in college and school so, and she helps with my mum and dad and my son works so I mean I can’t, I don’t really, he does do a bit of shopping for me on a Sunday and bring it to me so I haven’t got to carry stuff you know, and
but I feel I can’t, I don’t tell him every single thing because I don’t want to burden him, you know?

Lesley-Ann: Yes, and do you find it easier to tell people here?
Teresa: I do find it easier to talk to people here, yes but only staff really and only staff really about problems, like this I am going through now but I do talk to some friends about certain things.

Lesley-Ann: But do you find your friends supportive?
Teresa: Friends here are, yes.

Lesley-Ann: Oh sorry, your friends in [name of day centre]?
Teresa: My friends here, yes. Because I lost all my friends when I had a breakdown because everybody started ringing up to find out where I was and stuff like that, that doesn’t help, does it?

Teresa’s extract raises a question regarding how mental health services relate to other potential support services that service users may have. Teresa discusses her family, and the possible support available from them. We see it is not the case that Teresa is isolated in terms of family; she has a sister, a son, nieces and nephews and parents. Indeed, it may at first appear that Teresa is very supported through presence of family, and potentially not particularly isolated, despite living in a rural location. What we come to see though is that gaining support in and from the family is not a straightforward process. Her family members all have everyday responsibilities that can get in the way of providing support for Teresa. Moreover, there is something particular to the support she feels through her friendships and connections made possible through the day centre. The ‘shared experiences’ nature of the friendships made possible through the day centre are of value precisely because there is a sense that other service users know what it feels like to be experiencing mental distress. For some people the presence of family would be seen as a good thing and potentially a valuable source of support. A topological reading though does not assume support (and the positivities for mental health it makes possible) is by definition a part of existing relations, e.g. the presence of existing amicable family relationships are not assumed to provide sufficient support. Of importance are the possibilities for supportive actions. Teresa’s family have lots of other responsibilities and, as such, do not act as possible topological connections. Instead it is other service user friends that Teresa connects with in a productive and therapeutic manner.
This is the result of shared life experiences acting as foundations for future connections that are ‘open’ in the sense that Teresa feels able to talk and communicate about a large part of their lives. Such possibilities do not always exist in relations with non-service users, even family. Her family relations exist as what Lewin called ‘quasi-social’ facts, as they are not talked about in terms of being shaping forces on a particular momentary situation, but they can be ‘plotted as part of the manifold of possible and non-possible events’ (Brown 2012 p. 154). The family relations act as markers of the life space of Teresa. Interestingly though, they are not discussed in terms of the potential to act as support, but as marking what other kinds of support Teresa needs because the family cannot provide it all. The concern is different than that often featured in topological analysis as the focus is on how topological connections may shrink and diminish, rather than how life spaces can be topologically expanded.

In many ways our concerns about people living with long-term mental health problems should be about topological expansions (e.g. friends, employment, sociality), not restriction and a narrowing of topological regions. It is the latter though that feature as a concern for Teresa. We cannot know for sure the nature of such constrictions as they are not (yet) existing as forces shaping the life space. However, they can be seen to feature as anticipatory forces. Perhaps Teresa is imagining a time when she can no longer meet up with other service users because the day centre is closed. That could be perceived as a time when genuine rural exclusion emerges. These anticipatory or imaginary aspects are equally important parts of the psychological life space. As Brown notes, ‘[P]erception self divides, such that what is apprehended is not just concrete actualities, but also virtual connections, regions and boundaries that inhere in these actualities’ (2012, p. 156). The interview material here provides insight into the topological ‘perceptions’ of the service users. Whether they actually occur is of course not the point. The argument is that they are felt and as such they form part of the life space at that moment in time. Lewin discusses this in terms of topological spaces having multiple levels of reality (including degrees of irreality – psychological imaginations), or what Brown calls ‘levels of abstraction’. For Teresa we see that the life space is made up of the concrete experience of the day centre, along with the perception of possible topological changes. As such, Teresa’s life
space can be seen as multi-layered, made up of several ‘degrees of freedom’, which all relate to possible (and non-possible) forms of current and future connection and movement. Crucially, none of these aspects of the lived experiences are claimed to be afforded by the spaces themselves. They are felt through the connections made between bodies, real and imagined. Here we can see how rurality is working for Teresa, but to use this analysis as a way of understanding the experiences of service users in other ‘rural spaces’ would be anti-topological, as it would not attend to the specifics of the lived experiences of other service users under focus.

Positive topological possibilities

In the final extract I look at a positive topological possibility discussed by John (a 48-year-old service user). In the extract we see some of the ways that John attempts to enact positive topological relations with his environment through art. John’s narrative provides a temporal perspective on the topological making of the rural landscape.

I got interested in art here about a year and a half ago. I had never done any art at all and that was purely by coming here I got into this and I now run, and I exhibit all over the place, and I have been exhibiting in London this past, last month.

For John the local day centre in a rural East Midlands town opened him up to new activities in the form of art. John talks about art not being something he undertook prior to being introduced to it at the day centre. The ‘object’ of art as a practice is something opened up to John through coming to the day centre. It created the possibilities for new positive topological connections to be made through presenting his artwork at exhibitions ‘all over the place’. For these new possibilities to be actualized John needs to be able to access objects for his art to focus on. We see in the following extract how the rural landscape offers potential foci for his art:

Lesley-Ann: So if you was to go and do your artwork sort of like, wildlife. Do you actually go out into, do you actually go out into the open spaces and do your artwork then and there or do you take it from photographs or just use memory?
John: Started off as memory, using memory, then photographs and I have started, you know, if I can get out and I can get the transport to get me from A to B, transport is a real problem for us at [place name], this has always been the case, get me from A to B and back again, then I will take out the sketchpads and stuff.

In this extract we see how John connects with his landscape through the activity of art. This is not a straightforward process of being able to directly observe what he draws, but is mediated by his ability to physically connect with the landscape. John has had to work through a process of moving through memory, photography and in person observations, the latter made difficult due to issues of transport. Here memory can be seen to play a topological role in connecting John to the surrounding rural landscape through his artwork. This follows Brown’s (2012) suggestion of the power of memory as a topological force. For John we see that memory initially served the function of connecting him to the wider environment at a time when he could not physically do so. This had the effect of connecting him with his own immediate environment, and as such memory served as a *virtual* means through which to enact actualized psychological life spaces of art. This shifted through the use of photographs and towards attempting to engage more directly with the landscape through physically travelling there. This latter point is an issue for John, as getting transport to take him (and other members of the day centre) to places to draw and paint is difficult. This presents itself as a challenge for rural living for John. On the one hand rurality acts as a positive opportunity of ‘open spaces’ to inspire his art, and yet on the other hand, he is dependent on physical transport to be able to connect with said open spaces. The activity of art though is not entirely dependent on the physicality of spaces, as John can undertake art through memory connecting him to the landscape at times when physical proximity is not possible. In this sense art becomes a topological way of connecting to the landscape. The question is not solely about John physically moving to places he can draw, but how the activity of art (that originated in the day centre) facilitates positive psychological connections to emerge. Such relations with the landscape are not defined extensively as properties of the spaces as they are psychological ways of connecting with the environment ‘across’ the perceived boundaries of physical spaces (e.g. home, day centre, open spaces).
Towards a topology of mental health

The analysis in this chapter has offered a topological reading of rural mental health that places less importance on framing spaces in terms of traditionally perceived elements (e.g. distance, organization) and instead is concerned to understand how ‘rural landscapes of distress’ come to be enacted through the intensive relations that people form. This means that rural spaces should not by definition be seen as exclusionary because they have limited services. Instead, emphasis is placed on the possibilities enacted in and across rural landscapes for positive mental health and social relations. I follow Parr (2006) in placing significance on the value of ‘others’ for succeeding to live with on-going mental health problems, in all environments.

Taking a lead from Lewin, I argue that one potential way forward is a quasi-conceptual shift in our focus and interest in mental health research. A change in thinking would be beneficial in terms of reducing the presuppositions that often act as starting points for analysis. So, instead of considering rurality as a likely exclusionary and problematic space for service users, we start from the position of ‘mapping’ the possible life spaces of those under the analytic gaze. This has the advantage of focusing attention directly on the lived experiences of those we are most concerned about (e.g. service users). Furthermore, it drives us to consider the topological complexity of their lives, incorporating concrete actualities but also anticipatory possibilities. The latter are present as degrees of irreality, and yet can be seen to have genuine presence in terms of service users’ reflections on their current and future lives.

In the extracts of Wendy, Teresa and John we see that feelings of belonging are highly conditional on the presence of the day centre as a space to create, maintain and harness friendships and connections for providing and seeking support. Here, belonging acts as a psychological intensive force maintained through the relationships that come to flow through the day centre. Belonging is not entirely dependent on the physical activities that take place within the space itself. As such, it is not the day centre per se that creates a sense of belonging in terms of activities that take place within it. Rather it is the connections that extend beyond the space as topological relations. The idea of the loss of the day centre acts as a threat to existing friendships.
Although friendships come to exist topologically outside of the day centre space, the idea of it not existing seems to act as a concern regarding the creation of new ones. As such, imagining the loss of the day centre comes to act as a threat to existing relations as well as the potential for future ones.

A topological approach offers analytic and theoretical grounding in the realities of service users living in rural settings, as well as insight of the ways that actual experiences relate to events of anticipation and imagination. The latter form part of the intensive ways that topological life spaces emerge. Moreover, Lewin’s topology facilitates the development of an approach that troubles pre-existing distinctions that work to reify different ‘kinds’ of space. Dividing space into different categories (e.g. urban, rural), as if it is a substance that exists outside of the human social practices that enliven it, encourages analysis that renders activity as referential to the ‘type’ of space under question. For instance, someone is experiencing isolation because they live in a rural space. While I do not want to suggest that notions of rurality, and urbanity, have no analytic utility (as of course they do), I do want to suggest that they should only be used as a guide to subsequent analysis. They provide context, but any claims as to the value of attributing aspects of the lived experiences of service users to such notions should only happen when they develop from the specific topological unfolding of bodily activity at a given time. As such topology contests pre-existing boundaries of rural and urban, instead arguing that they exist only insofar as they feature in the psychological life spaces of people experiencing on-going mental distress. Consequently, this chapter argues that a re-emergence of early social psychological theories of individual and environment (society) offer much to (re)conceptualizing rural mental health (and beyond). We know that mental health communities in the UK are facing significant challenges due to enduring austerity. We do not yet know the full implications for mental health of such changes. The argument of this chapter is that social scientific responses to the fiscal reconfiguring of distress should be grounded in the experiences of those that are living such changes. Moreover, topological theory provides a theoretically and empirically grounded start to such endeavours.

References


