

‘What your generation probably don’t
understand is ...’: exploring
intergenerational dynamics in
oral history

Kate Mahoney

Introduction

For as long as I have been conducting oral history interviews, I have been aware of the generational differences that exist between myself and my interviewees. When interviewing feminist activists for my doctoral research, my interviewees, many of whom were in their seventies, expressed surprise at my age. One interviewee jokingly suggested that I ‘seemed very young to be a PhD student’. Others had strong opinions on my generation’s attitude to women’s rights. Some stated that women of my generation had not done the work necessary to continue the successes of the women’s movement in the 1970s and 1980s. In these instances, I never felt it appropriate to offer a retort. However, I often felt a little defensive, despite being uncertain about how ‘my generation’ and my identification with it might be defined in the context of feminist activism.

My interviewees’ reflections on my age and generation constituted intergenerational dynamics. In this context, I define intergenerational dynamics as: the interviewer or interviewee making references to their sense of generational identity; the unspoken and spoken assumptions that the interviewer and interviewee hold about their respective generations, and the way these assumptions are projected during the interview; and moments when either the interviewer or participant indicate the generational differences that exist between them. As Chandler argues, whilst oral history interviews often foster ‘inter-generational talk’, there remains scope to understand how ‘generational and age-related dimensions of subjectivity can shape what

and how material becomes available with interviews, or how that material is interpreted'.¹ This chapter therefore analyses how generational difference influences the interpersonal dynamics of oral history interviews.

The analysis in this chapter draws on my own experiences conducting oral history interviews as a postdoctoral researcher on the project 'Body, Self, and Family: Women's Psychological, Emotional, and Bodily Health in Britain, c. 1960–1990' at the University of Essex (2017–22). Whilst in this role, I carried out over thirty in-depth oral history interviews with women born between 1940 and 1970. The interviews focused on their 'everyday health' experiences across the life-course, which provides a pertinent case study for exploring intergenerational dynamics. The life-course approach encouraged women to first reflect on their childhood before documenting how their understandings and experiences of health had changed to the present day. Participants reflected on the social and cultural factors that informed their health experiences at different points in their lives. Many women suggested that particular experiences – such as the distribution of orange juice at primary school and women's current obligation to care for their children and grandchildren alongside their ageing parents – were synonymous with their generation. Our interview guide also contained a question asking participants to consider how their lives had been different to those of their mothers and grandmothers. In response, interviewees often positioned their experiences within an intergenerational framework, citing large-scale changes such as the increased numbers of women in the workplace and at university, and the introduction of the Pill, as key developments that distinguished their generation from their predecessors.

In this chapter, I first explore how interviewees defined their generational positioning in different ways. Second, I consider how and why some interviewees applied their own assumptions about my generation and its behaviours to me. I then examine the generational assumptions that I brought to interviews, focusing on the sense of familiarity I often felt when interviewing women of the same generation as my mother. Unpacking this familiarity also helps me to comprehend why interviewing women of my mother's age triggered deep emotions both during and after the interview, leading to moments of self-discovery relating to my own experiences.² I consider how these momentary revelations influenced the interpersonal

dynamics of the interview. Finally, I briefly summarise how other oral historians have responded to these intergenerational dynamics, both during and after the interview. Intergenerational conversations are an intrinsic facet of oral history. As this chapter demonstrates, during the oral history encounter, 'multiple notions of intergenerationality come into play'.³ Understanding how these different forms of intergenerational dynamics are constructed and resultantly make us feel further expands our understanding of the influence of researcher subjectivity during the oral history process.

Defining a generation

Many of the interviewees that I spoke to offered definitions of their generation and its identifying factors. Theorists of age and ageing assert that understandings of 'generation' can be broken down into three parts: 'the concept of generation in terms of life stage'; 'membership of a birth cohort (which is often ascribed particular characteristics and dispositions based on shared historical position and experience)'; and 'positions within a family structure'.⁴ As Wanderbeck and Worth write, 'these three notions of generation intersect within the context of individual biographies' and are 'not necessarily experienced or understood by individuals in terms of separate dimensions'.⁵ Many of the women that we interviewed for the 'Body, Self, and Family' project drew on this tripartite construction of 'generation' to define their generational identity. Exploring how women defined their generational positioning in this way provides a context for understanding how intergenerational dynamics manifested in their interviews.

Events experienced by a cohort in childhood can 'exert an important, even decisive, influence on the later attitudes and actions of its members', meaning that individuals often align their childhood experiences with their 'generational character'.⁶ Our participants, born in the immediate postwar period, frequently defined their generation by the social and political developments that occurred in their childhoods, notably the emergent welfare state and its health and social benefits. Worth notes that 'the welfare state was the framework that defined the early lives of girls growing up in the post-war period'. She attributes the dominance of the welfare state

in childhood recollections to the fact that it was deemed universal; its introduction affected everyone.⁷

When I interviewed Mo at her home in Witham, Essex, in January 2018, she listed a range of social developments that she had benefited from as a child and young adult. These included the success of grammar schools as a ‘social mobility vehicle’, the advent of the Pill, and a decline in workplace sexual harassment. Born in 1946, Mo stated that: ‘I think probably my generation have had a golden era.’⁸ Other interviewees born in the postwar period echoed Mo’s sentiments. Born in 1944, Susan recalled that she and her brothers ‘were fortunate in a sense of being babies after the war because we had a good diet’.⁹ Susan attributed her healthy eating to National Dried Milk, which was introduced in 1940 as part of the Ministry of Health’s National Milk Scheme. Pregnant women, and mothers with children under the age of one, were entitled to seven pints of free or subsidised milk per week on top of their normal entitlement.¹⁰ Susan also referenced the health benefits of orange juice, which was made freely available to children in schools – another scheme introduced in response to concerns about the health of the general population in wartime Britain.¹¹

Both Mo and Susan drew on popular cultural scripts that present the 1950s as a ‘golden age’, citing the developments in welfare, technology, and infrastructure that occurred across the decade.¹² Interviewees’ employment of these ‘cultural constructions in public discourse’ helped to demonstrate how they constructed their identity or subject position over the course of the interview.¹³ As Michael Roper argues, interviewees’ choices about how they interweave ‘dominant cultural forms’ into their personal narratives ‘can tell us something about individual subjectivity’.¹⁴ In describing the 1950s as a ‘golden age’, Mo was aware that she was drawing on a popular representation of the decade that was potentially problematic, not least because she thought that women’s rights and opportunities were still limited then. However, it remained important for interviewees of this generation to emphasise the benefits of being children of the welfare state, particularly because they still felt as though they were reaping the benefits. Both interviewees cited the generous pensions that they received. Mo also made an intergenerational comparison with her daughter, who had found it far harder to buy a house.

As Worth argues, children born in the 1940s and 1950s were informed from a young age about the benefits of the developing welfare state. Parents told their children that the introduction of the National Health Service (NHS) transformed their access to good-quality healthcare. When interviewed by Worth, Jean, who was born in 1950 to a working-class family, recalled being told 'tales of not going to the doctors because you couldn't afford to go. My mother had two siblings that had died of diphtheria.' This form of 'intergenerational transmission' – reiterated to those born in the immediate postwar period – informed children that their experiences of health and social care were different to those of previous generations; they were the first generation to reap the benefits of the burgeoning welfare state across their life-course.¹⁵ As Mo's and Susan's interviews demonstrate, they distinguished the beneficial effects of the welfare state on their generation not only from their predecessors' experiences, but also from those of subsequent generations.

Interviewees who were born some ten and twenty years after the end of the Second World War defined their generation's key identifiers in different ways. Whereas Mo and Susan foregrounded their childhood experiences in the 1950s, Louise believed that her current caring role within her family exemplified her generation's identity.¹⁶ She aligned her generational identity with both her life stage and position within her family. Born in Lancashire in the mid-1960s, Louise had had children in her early forties. Both children had recently started secondary school. Alongside caring for her children, Louise also looked after her elderly parents and mother-in-law. She was aware of the cultural scripts that defined her current caring responsibilities: 'The press calls it "the sandwich generation" don't they', she stated.¹⁷ A phrase first coined by social work and gerontology researchers in the early 1980s, 'sandwich generation' is typically used to define the 'middle-aged generation who have elderly parents and dependent children'.¹⁸ In the 1980s, the 'sandwich generation' was deemed symptomatic of the emergence of 'four-generation modified extended families' in the mid-twentieth century onwards; a development attributed to the 'lower average age of marriage; a lower median age of parenthood; and a decrease in the number of large families, so that mothers are younger when they have their last child'.¹⁹ Increasingly, however, the 'sandwich

generation' is seen to reflect the fact that people are having children later and living longer. Contemporary definitions of the 'sandwich generation' also cite the prevalence of the 'triple-decker sandwich' – 'people in their sixties helping to care for their grandchildren, which allows their adult children to work, as well as supporting their parents in their nineties'.²⁰

Despite changes in conceptualisations of the 'sandwich generation', researchers have continually emphasised the enduring stress experienced by those who fulfil multigenerational caring responsibilities. As Miller noted in 1981, those in the 'sandwich generation' are exposed to a 'unique set of unshared stressors in which giving of resources and service far outweighs giving or exchanging them'.²¹ Louise reiterated the complexities of her caring role as a member of the 'sandwich generation': 'I'm aware that, that we're sort of the linchpins within the family at the moment when it comes to anything needing to happen,' she asserted. 'We're the ones that are making everything happen for the younger and older generation.'²²

The women that I spoke to for the 'Body, Self, and Family' project therefore defined their generational identities in different ways. Their definitions typically aligned with the tripartite concept of generational identity as constructed via life-course stage, membership of a birth cohort that share specific characteristics, and position within familial structure.²³ As children of the immediate postwar period, Mo and Susan equated their generational identity with the social benefits they had reaped via the emergent welfare state. Conversely, Louise associated her generational identity with her obligation to care for both her children and her parents, a role that was both pressured and stressful. All interviewees drew on cultural scripts, such as the 1950s 'golden age' and the 'sandwich generation', to define their generational position. Their application of these scripts suggested that the interviewees did not feel alone in their experiences, but, rather, part of a collective experience that differentiated them from the lives of those in both preceding and subsequent generations.

Navigating generational assumptions

As I conducted oral history interviews for the 'Body, Self, and Family' project, I became aware that interviewees' generational

identifications also influenced how they perceived me. Several interviewees emphasised how our generational differences ensured our contrasting experiences of life events. I found these generational differentiations interesting. Whilst I could identify with the large-scale developments – such as technological advancement – that interviewees perceived my generation to have benefited from, individual aspects of our experiences and feelings sometimes appeared comparable. My response to interviewees' assertions of generational difference perhaps elucidates the relationship between collective and individual experiences that underpin generational identities. At the same time, my role as interviewer meant that I never countered the generational assumptions that interviewees attributed to me. Consequently, they were not privy to the aspects of their experience that I deemed comparable to my own. This meant that I often became a repository for interviewees' various projections about their own generational positioning and that of succeeding generations, as well as their sense of who I was beyond the role of interviewer.

In March 2018, I interviewed Margaret at her home in Oxted, Surrey. When I originally arranged to meet Margaret via email, she stipulated that the interview would have to be organised around her work commitments as a nurse and her role as a carer for her increasingly frail mother. When I arrived at Margaret's house a month later, she took me into the kitchen and made us a cup of tea. There she calmly told me that her mother had died the week before. I was slightly taken aback by the news and offered my condolences, whilst seeking to ensure that Margaret was still happy for the interview to go ahead. She confirmed that she was. Over the course of the interview, Margaret's grief was palpable. Whilst she did not become visibly upset whilst talking about her mother, Margaret switched between past and present tense when referring to her. Describing his own experience of interviewing fathers and sons, Richard Hall refers to the 'non-fixity' of parent-child relationships. He suggests that these relationships 'remain in perpetual negotiation across the life course [...] This bubbling continuity of feeling is brought vividly to life in oral history interviews, which see men refine and recompose their memories of fatherhood and childhood in real time.'²⁴ Margaret's deviation between tenses appeared to reflect her own attempts to recalibrate her perception of her relationship with her mother in the face of her grief.

During other parts of the interview, Margaret did become visibly upset. Early on, Margaret mentioned that her sister had died of cancer when she was eighteen and Margaret was fifteen. 'I never realised that she was actually gonna die,' Margaret remembered whilst starting to cry, 'because when you're fifteen you don't think like that, you know.'²⁵ As Roper writes, interviewees who have experienced past trauma have 'the capacity for their emotional states to be re-activated – voluntarily and involuntarily – at later moments'.²⁶ This interview reactivated Margaret's emotional state when her sister died. In using the present tense to refer to her teenage self, however, her retelling of the loss of her sister also appeared to induce an expression of her contemporary feelings of grief.

A sense of isolation pervaded Margaret's recollections of her teenage years. Her sister died during the summer holidays, and she found it incredibly difficult not being able to regularly see her friends and to talk to them about it. Margaret couched this discussion of her isolation in generational terms:

What your generation probably don't understand is, when the school holidays came, you left the school and for six weeks [...] our school was, you know, a bus ride away, and people lived in different areas from that bus ride.²⁷

Margaret's emphasis on our generational difference – as articulated through her statement 'what your generation probably don't understand is' – belied her view of the characteristics and dispositions that define my generation. Certainly, for my generation, the advent of the internet and mobile phones has been seen to ensure a greater 'sense of belonging and connectedness' amongst young people, which, as Margaret assumed, might have influenced how I engaged with my friends over the school holidays.²⁸ What I found striking about Margaret's use of her rural isolation to define our generational differences, however, was that her description of teenage life seemed very similar to my own. I grew up in a rural village and attended a school with a large catchment area. Many of my friends lived some distance away, which meant that I saw them less frequently over the school holidays. Even with a landline telephone and a mobile phone, it was hard not to feel isolated at times in this setting.

Margaret reiterated her sense of our contrasting generational experiences when discussing her early comprehension of health.

During her childhood, Margaret became aware of her health because people would routinely comment on her weight. 'I was quite a chubby child, I always thought I was fat,' she stated. 'People used to say, "It's puppy fat" – you probably don't even know that.' Discourses surrounding 'puppy fat' also featured prominently in my own childhood as a concept discussed by adults around me, particularly my mother and grandmother. This is not to say that Margaret and I would have had comparable experiences of discourses surrounding 'puppy fat' whilst growing up. Our growing up in different generations, places, and families meant that our awareness of the concept would have been informed by a variety of different social and cultural influences. The comments made about Margaret's weight as a child also appeared to have a long-standing impact on her sense of self and health. When I asked her how she defined health, she related it to 'your self-esteem' and 'your appearance'.²⁹ I did not experience comparable comments about my weight at that age. However, it remains striking that Margaret viewed 'puppy fat' as a concept grounded in her generational experience, and not mine.

These kinds of intergenerational dynamics help to illuminate how individuals' emotions and experiences align with their generational identities. Margaret associated her childhood feelings about her body and rural isolation with her generational identity. In this way, she attributed these experiences to the specific characteristics of her birth cohort. In interviewing Margaret, I realised, however, that I did not associate my feelings relating to living in the countryside and comprehending 'puppy fat' with my generation; rather, these aspects of my individual experience felt more broadly associated with being a teenage girl and growing up in a rural area. The ways that Margaret and I constructed our respective generational identities felt at odds with one another.

This feeling of disconnect, however, was complicated. In articulating how she thought our generations differed, Margaret repeatedly brought me into the interview. By referencing 'your generation', and guessing what I did and did not know, Margaret established my presence not only as an interviewer and researcher but as an individual with my own life experiences. At the same time, the intergenerational nature of the research encounter meant that Margaret's assumptions about my generation took on an educative quality. She, as a member of an older generation, was obliged to bestow information onto me

as a member of the younger generation. As the interviewer, however, I did not deem it appropriate to counter any assumptions that Margaret made about me, or to highlight where aspects of our experiences converged. In this way, I felt that I did not bring my own identity or experiences to the interview. Rather, the identity that I represented during the research encounter was as a receptacle for Margaret's projections about who I should be, based on her sense of my generation. In this way, the intergenerational dynamics present in the interview highlighted the disparity between the sense of self that interviewer and interviewee each bring to the encounter. Whilst the interviewer learns a lot about the interviewee, the interviewee remains largely unaware of the interviewer's own experiences. Margaret's use of generational signifiers to ascribe to me particular forms of knowledge and experience may have been her way of overcoming this disparity, drawing on her sense of our generational differences to bring me into the interview as an individual with my own thoughts and feelings.

Situating interviews within a familial framework

So far, I have discussed how interviewees projected their assumptions about my generation onto me as the interviewer. However, I was also responsible for projecting my own assumptions or feelings onto interviewees, based on their generational positioning. When I first started conducting interviews for the 'Body, Self, and Family' project, I was struck by the sense of familiarity and ease I felt with some participants. I have always found oral history interviewing nerve-racking. There is the sense of trepidation in the hours leading up to the interview, fuelled by concerns about the recorder working, remembering my interview guide, ensuring that I build the necessary rapport with the interviewee so that they feel comfortable, and the hope that they will find the research encounter a valuable experience. I have typically not known what to expect before an interview. I found that when I entered the physical interview space or joined a Zoom call, I felt palpable relief when I realised I was interviewing a woman of the same generation as my mother. This relief appeared to be grounded in a perceived familiarity. I felt as though I knew how to relate to the interviewee. Micaela di Leonardo discusses

comparable feelings in her exploration of kinship, class, and gender among Italian Americans in 1980s California. When di Leonardo interviewed middle-aged participants, they often perceived her as a daughter figure. The interviewees transposed di Leonardo into an 'established role'. This positioning ensured that di Leonardo built a warm rapport with her participants.³⁰ Yow defines this feeling as 'positive transference', citing that 'when the feelings between the narrator and interviewer are positive, the influence of this on the progress of the interview will usually be positive' too.³¹

On reflection, however, the familiarity I felt when interviewing women of the same generation as my mother was potentially problematic. First, I was placing the interviewee in the 'established role' of my mother, therefore bringing my own projections relating to my relationship with her to the research encounter. Second, I was uncertain whether this familiarity was reciprocated by my interviewees. In the interview I discuss above, Louise was of the same generation as my mother. Her children, however, were over ten years younger than me. It is therefore unlikely that Louise placed me into a comparable familial framework. Third, any perceived familiarity on the part of the researcher has the potential to cloud their capacity to critically conduct the interview. In her exploration of research encounters where she has liked the interviewee 'too much', Yow describes 'hesitating to ask some of the things of narrators for whom I felt affection lest my questions caused them discomfort'. She asserts that researchers should be aware of the effects of positive transference on their capacity to ask 'difficult questions'.³²

As I continued to conduct interviews with women of the same generation as my mother, I came to realise that the 'established role' I placed them in also affected my emotional responses following the interview. I later came to realise that my feelings were influenced by unresolved feelings related to my mum being ill. In the final year of my doctoral degree, I moved back home to live with my parents. Shortly after, my mum was diagnosed with a serious medical condition. She had to undergo invasive surgery and extensive treatment. For a long time, we were unsure of her prognosis. During this period, I tried to avoid speculating and committed to responding only to information that we were given by my mother's consultant. 'We can only work with the information that we have,' I would repeatedly tell myself. When I started conducting interviews for the

'Body, Self, and Family' project a year later, however, I was taken aback by the emotions that I experienced when I interviewed women who were the same age as my mother. By then, she was largely well again and was no longer undergoing treatment. However, my encounters with women of her generation forced me to realise that I had not fully comprehended the impact of my mother's illness, not just on myself, but on my mum too.

Louise, whom I interviewed at her home in Devon in early 2018, was a few years younger than my mother. During the interview, she described being diagnosed with a serious autoimmune condition. Louise recalled the complex emotions that accompanied her diagnosis and early treatment:

Feeling poorly is quite, you know, there's all sorts of things that go alongside that, about how that affects us – the way we feel about our bodies – but, erm, the power relationship with the person who's providing the care, erm, and sort of the agenda, and how that's shared or dictated, erm, and I think it's very easy, as a healthcare provider, to forget the perspective of the person who's receiving the care.³³

As Louise discussed the intricate interpersonal dynamics and emotions that accompanied her diagnosis and treatment, I was struck by the fact that my mum would have experienced a comparably complex array of feelings when she was ill. This realisation was triggered by a sudden sense of how my mum might have responded to the questions that I was asking Louise. I inadvertently visualised my mother sitting in Louise's place, discussing her own experiences with a researcher who did not share the same emotional connection with her that I did.

For Arlene Kaplan Daniels, acknowledging the 'attachments' that we develop during fieldwork can provide 'opportunities [...] for self-discovery, as well as insight into the field of study'.³⁴ This appears to be the case for Verusca Calabria, who shares her experiences interviewing people who received and provided care at the psychiatric institution Mapperley Hospital, Nottingham during the second half of the twentieth century.³⁵ Calabria's own mother had a breakdown when she was a child, but Calabria was 'denied access to my mother's own narrative of events until my mid-twenties'. Over the course of the interviews, Calabria realised that she had 'subconsciously been piecing together what might have happened to my mother during

the worst moments of her illness [...] I was reliving some of the grief from the loss I had experienced from my past when my mother became severely ill'. As Calabria notes, oral historians might typically witness 'not only our informants' unresolved grief but also the triggering of our own unresolved emotions about past events, which may affect our responses'.³⁶

When interviewing Louise, I too realised that I had unresolved feelings about my mother's illness. My perception of how my mother must have felt at the time had been eclipsed by my desire for her to be okay. I had the luxury to 'only work with the information that we had' because I was not the one who was ill. As my mother later told me, every day that she did not receive a prognosis was accompanied by the fear that she might die; a feeling that I simply could not comprehend because I did not want to lose her. Through this realisation, I also understood more readily the 'emotional residues of the past' that I unconsciously brought to interviews with women who were my mother's age.³⁷ These projections naturally affected my positionality as a researcher. Yet, it is only in reflecting on my positionality now that I can start to envisage how it affected my interviewing.

Barbara Erskine expresses comparable concerns in her account of conducting an interview with a man who was a pilot in the Second World War. As the interviewee described flying, Erskine was reminded of her father, who had died in a plane crash thirty years before: 'Dad's face momentarily became that of my informant. I had to ask myself, "Whose story am I listening to?"' As Erskine listened to how the interviewee lost his friends in battle, she too found herself grieving for loss. This 'sharing of feeling', she argues, was a 'springboard to better interviewing'.³⁸ I encountered similar feelings when I envisaged my mother telling her own story during Louise's interview. It suddenly felt as though I was listening to my mum's reflections rather than the interviewee in front of me. Whilst this visualisation helped me to uncover my unresolved feelings relating to my mother's illness, this realisation took me out of the interview encounter. It is therefore questionable whether this was a moment of 'shared feeling'. Rather, I was tuned into my own emotion and no longer focused on Louise's narrative. At the same time, Louise would not have been aware that her account triggered my own self-discovery.

Yow asserts that oral historians must 'attempt to move beyond our own self-schemas, focusing the interview not on what is important in our lives, but what is important to our interviewees'.³⁹ The task of moving outside of ourselves during the interview, however, feels particularly difficult if the self-schemas we bring to the interview are initially unconscious. I did not appreciate how my mother's illness was affecting the interviews I conducted until I had met with several participants. I was deeply affected by the interviews that I conducted with women of my mother's generation. I would frequently drive home crying, but with little comprehension as to why I was so moved. It was not until I visualised my mother whilst interviewing Louise that I started to understand why I felt this way. However, it was difficult to understand how to respond to these emotions whilst in the thick of interviewing. It is only in unpacking these feelings through writing this chapter that I have given myself the space to consider why I felt like this and the impact of these feelings on my interviews.

The intergenerational connection that I experienced during my interview with Louise demonstrated the value in generating the space for myself, both before and after an interview, to comprehend how and why certain emotions might be triggered during the research encounter. Yow suggests a series of questions that researchers can ask themselves when an interviewer is 'too much invested in the topic, too closely identifying with a person or cause'.⁴⁰ Her questions include 'what am I feeling about this narrator?' and 'what are the effects on me as I go about this research?' It now seems obvious to me that speaking to women of a comparable age to my mum about their health experiences just months after her treatment would be emotionally triggering for me. However, despite having a strong emotional reaction after each interview, it did not occur to me to take stock and reflect on why this might be the case.

Some oral historians promote the use of research diaries, particularly for students new to oral history, to record how their project evolves, emerging ideas that they might have about their research, and their responses to each interviewee.⁴¹ It is valuable to begin a research diary before starting a project in order to consider how particular topics and interview cohorts might affect us based on our own life experiences. Such an approach aligns with increasing efforts to factor in and foster the wellbeing of historians when

engaging with sensitive research topics.⁴² Undertaking these preliminary reflections might have helped me to envisage how my recent experiences would result in my manifestation of an intergenerational connection during the interview process; such an awareness could have both aided me to remain mindful and present during my interviews and helped me to contend with any resultant emotional impact.

Conclusion

This chapter has explored how intergenerational dynamics influence the interpersonal dynamics of oral history interviewing. It has done so by analysing my own experiences interviewing women born between 1940 and 1970 about their everyday health experiences across the life-course in late twentieth-century Britain. The women that I interviewed drew on their generational positioning to explore and define their identities. For many of the women, their sense of generational identity was predicated on the fact that the experiences endured by their generation differed to those of older and younger generations. Women born in the immediate postwar period strongly identified with the health and social care developments that they experienced as children of the welfare state and continued to benefit from across the course of their lives. Others identified with contemporary developments affecting their generation, recognising the additional caring responsibilities associated with being a member of the 'sandwich generation'.

Interviewees' generational positioning therefore influenced how they perceived me as a member of a succeeding generation. Several women whom I spoke to made assumptions about my experiences of particular life events, often as a means to imply our generational differences. Exploring where these assumptions of generational difference diverged from my own experiences provides the opportunity to examine the role of projection in the oral history process. Interviewees' suppositions about my life served to bring me into the interview narrative as a person as well as a researcher. However, they also highlighted the contrasting ways that Margaret and I had constructed our respective generational identities. My role as interviewer meant that I did not share my own experiences with

Margaret but, rather, came to represent an identity predicated on her assumptions.

In recognising my own emotions in response to these assumptions, I became aware of the generational assumptions and projections that I also brought to my research encounters. When interviewing women of my mother's generation, I realised that I was situating them within a familial framework. I felt a comforting familiarity in these interviews because I was projecting onto them tenets of my relationship with my mum. Breaking down the emotions that underpinned this intergenerational connection, I came to recognise my unresolved feelings about my mother being seriously ill shortly before the interviews commenced. These encounters highlighted how intergenerational dynamics occurring during oral history interviews can trigger unresolved emotions for both the interviewer and interviewee. Comprehending these transmissions helped me to better understand my positionality as a researcher.

Acknowledgements

The research on which this chapter is based was conducted as part of the Wellcome Trust Investigator Award in the Humanities and Social Sciences, 'Body, Self and Family: Women's Psychological, Emotional and Bodily Health in Britain, c. 1960–1990', WT 208080/Z/17/Z.

Notes

- 1 Sally Chandler, 'Oral history across generations: age, generational identity and oral testimony', *Oral History*, 33:2 (Autumn 2005), 48–9.
- 2 Barbara Erskine, 'Loss and grief in oral history', paper delivered at the Annual Meeting of the Oral History Association, Milwaukee, Wisconsin (19 October 1995), quoted in Valerie Yow, "'Do I like them too much?': effects of the oral history interview on the interviewer and vice-versa', *Oral History Review*, 24:1 (Summer 1997), 75.
- 3 Robert M. Wanderbeck and Nancy Worth, 'Introduction', in Robert M. Wanderbeck and Nancy Worth (eds), *Intergenerational Space* (London: Routledge, 2015), p. 3.
- 4 Wanderbeck and Worth, 'Introduction', pp. 2–3; Robert M. Wanderbeck, 'Intergenerational geographies: age relations, segregation and

- re-engagements', *Geography Compass*, 1:2 (2007); Gunhild O. Hagestad and Peter Uhlenberg, 'The social separation of old and young: a root of ageism', *Journal of Social Issues*, 61:2 (2005).
- 5 Wanderbeck and Worth, 'Introduction', p. 2; Simon Biggs and Ariela Lowenstein, *Generational Intelligence: A Critical Approach to Age Relations* (London: Routledge, 2011), p. 6.
 - 6 Howard Schuman and Jacqueline Scott, 'Generations and collective memories', *American Sociological Review*, 54:3 (June 1989), 359–60; Sean T. Lyons and Linda Schweitzer, 'A qualitative exploration of generational identity: making sense of young and old in today's workplace', *Work, Aging and Retirement*, 3:2 (2017), 210.
 - 7 Eve Worth, *The Welfare State Generation: Women, Agency and Class in Britain Since 1945* (London: Bloomsbury, 2021), pp. 15–17.
 - 8 Mo, interviewed by Kate Mahoney, 29 January 2018.
 - 9 Susan, interviewed by Kate Mahoney, 25 January 2018.
 - 10 Pam Carter, *Feminism, Breasts and Breast-feeding* (Basingstoke: Palgrave Macmillan, 1995), p. 54; Robert Mackay, *Half the Battle: Civilian Morale in Britain during the Second World War* (Manchester: Manchester University Press 2003), p. 242; Ina Zweiniger-Bargielowska, *Austerity in Britain: Rationing, Controls, and Consumption, 1939–1955* (Oxford: Oxford University Press, 2000), p. 131.
 - 11 David Morgan and Mary Evans, *The Battle for Britain: Citizenship and Ideology in the Second World War* (London: Routledge, 1993), p. 26.
 - 12 Nicholas Crafts, 'The British Economy', in Francesca Carnevali and Julie-Marie Strange (eds), *Twentieth-Century Britain: Economic, Cultural and Social Change*, 2nd edn (Harlow, Essex: Pearson Longman, 2007), p. 9; Roland Quinlout, 'Britain in 1950', *History Today*, 51:4 (April 2001): www.historytoday.com/roland-quinault/britain-1950 (accessed 3 July 2022).
 - 13 Lynn Abrams, *Oral History Theory*, 2nd edn, (London: Routledge, 2016), p. 54.
 - 14 Abrams, *Oral History Theory*, p. 100; Michael Roper, 'Re-remembering the soldier hero: the psychic and social construction of memory in personal narratives of the Great War', *History Workshop Journal*, 50 (2000), 184.
 - 15 Worth, *The Welfare State Generation*, p. 18.
 - 16 Wanderbeck and Worth, 'Introduction', p. 2; Biggs and Ariela Lowenstein, *Generational Intelligence*, p. 6.
 - 17 Louise, interviewed by Kate Mahoney, 5 February 2018.
 - 18 Dorothy Miller, 'The "sandwich" generation: adult children of the aging', *Social Work*, 26:5 (September 1981); Elaine M. Brody, "'Women in

- the middle” and family help to older people’, *The Gerontologist*, 21:5 (October 1981); Charles R. Pierret, ‘The “sandwich generation”: women caring for parents and children’, *Monthly Labor Review* (September 2006), 9.
- 19 Miller, ‘The “sandwich” generation’, 419–20.
 - 20 Christine Ro, ‘Why the “sandwich generation” is so stressed out’, *BBC Worklife* (29 January 2021): www.bbc.com/worklife/article/20210128-why-the-sandwich-generation-is-so-stressed-out (accessed 31 July 2022).
 - 21 Miller, ‘The “sandwich” generation’, 419.
 - 22 Louise, interviewed by Mahoney.
 - 23 Wanderbeck and Worth, ‘Introduction’, pp. 2–3.
 - 24 Richard Hall, ‘Emotional histories: materiality, temporality and subjectivity in oral history interviews with fathers and sons’, *Oral History*, 47:1 (2019), 62.
 - 25 Margaret, interviewed by Kate Mahoney, 10 March 2018.
 - 26 Michael Roper, ‘Analysing the analysed: transference and counter-transference in the oral history encounter’, *Oral History*, 31:2 (Autumn 2003), 21.
 - 27 Margaret, interviewed by Mahoney.
 - 28 Jane Burns, Michelle Blanchard and Atari Metcalf, ‘Bridging the digital divide in Australia: the potential implications of the mental health of young people experiencing marginalisation’, in Enico Fero et al. (eds), *Handbook of Research on Overcoming Digital Divides: Constructing an Equitable and Competitive Information Society* (Hershey, PA: Information Science Reference, 2009), p. 103.
 - 29 Margaret, interviewed by Mahoney.
 - 30 Micaela di Leonardo, *The Varieties of Ethnic Experience: Kindship, Class, and Gender among California Italian-Americans* (Ithaca, NY: Cornell University Press), pp. 37–8; Yow, ““Do I like them too much?””, 76.
 - 31 Yow, ““Do I like them too much?””, 78.
 - 32 Yow, ““Do I like them too much?””, 78.
 - 33 Louise, interviewed by Mahoney.
 - 34 Arlene Kaplan Daniels, ‘Self-deception and self-discovery in fieldwork’, *Qualitative Sociology*, 6:3 (Fall 1983), 196.
 - 35 Verusca Calabria, ‘Exploring how care has changed in mental health’, *Hidden Memories of Mental Healthcare*: www.mentalhealthcarememories.co.uk/blog/expolring-how-healthcare-has-changed (accessed 29 August 2022).
 - 36 Verusca Calabria, ‘Self-reflexivity in oral history research: the role of positionality and emotions’, in Peter Bray (ed.), *Voices of Illness: Negotiating Meaning and Identity* (Leiden: Brill Rodolphi, 2019), p. 282.

- 37 Roper, 'Analysing the analysed', 21.
- 38 Erskine, 'Loss and grief in oral history', quoted in Yow, "'Do I like them too much?'"', 74–5.
- 39 Yow, "'Do I like them too much?'"', 73.
- 40 Yow, "'Do I like them too much?'"', 79.
- 41 Janis Wilton, quoted in Alistair Thomson, 'Teaching oral history to undergraduate researchers', in Alan Booth and Paul Hyland (eds), *The Practice of University History Teaching* (Manchester: Manchester University Press, 2000), p. 159.
- 42 Jessica Hammett et al., *Researcher Wellbeing: Guidelines for History Researchers* (June 2021): <https://researcherwellbeing.blogs.bristol.ac.uk> (accessed 29 May 2023).