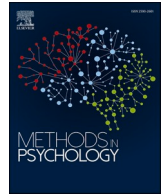


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# Using hybrid qualitative analysis to explore lived experience of motherhood and postnatal depression: A thematic-dialogical approach

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## ABSTRACT

This paper illustrates a novel hybrid approach to analysis which offers unique insights into the experience of postnatal depression in British Pakistani-Muslim women, through the prioritising of voice. To do so, we combine thematic and dialogical analysis, using data from a study on motherhood and postnatal depression. Participants were part of the birth cohort 'Born in Bradford's Better Start'. The rationale for developing a hybridised approach is discussed. The ensuing analyses highlight the role of internal voices and chronotope, which give a detailed insight into women's meaning making of psychological distress and motherhood during the postnatal period. We go on to discuss the strength and limitations of hybridising thematic-dialogical analysis in the context of health research.

## 1. Introduction

The Braun and Clarke (2006, 2019) version of thematic analysis has become ubiquitous in qualitative research and teaching in several disciplines, including Psychology and Sociology. Recently, they have made some interesting comments about how it has become a popular methodology which is, at times, far removed from their initial intentions (e.g. Braun et al., 2022); how in places it has been used as a rigid set of steps when in reality it values contextually based judgements; how certain facets, like inter-rater reliability, are ascribed wrongly to their work. Instead of rules or a recipe, their work, they suggest, is an invitation to dialogue.

In this article we will take up that invitation to dialogue with Braun and Clarke's 'Thematic Analysis' with a Dialogical Approach, based largely on the work of Mikhail Bakhtin (185–1975). Bakhtin wrote extensively on the philosophy of language, ethics and aesthetics and applied a dialogical approach to analysis literary fiction, particularly the work of Dostoevsky. His intellectual and personal life was characterised by a quiet rebellion against formal systems including the bureaucratic formal system of Stalin's Russia and the formal system of language known as Saussurian structural linguistics. For the former, he got exiled to a remote part of Soviet Russia. Through a number of inter-connected concepts and neologisms, he demonstrated that spontaneity,

particularity, creativity and unpredictability defy the order of structure and the instrumental thinking of bureaucracy. Collectively, this ethos and set of concepts has become known as a Bakhtinian 'dialogue'. The key concepts of relevance for data analysis are:

**Chronotope:** Time-space. Time-space is malleable and organisable. For example, a career chronotope values future goals and sacrifices in the present, whilst a nostalgia chronotope values the bygone past. The present is an epilogue to the past and in a 'threshold moment', the present is brimming with potential and pressure. The past is inconsequential and the future indeterminate. Which chronotopes prevail depend on the mix of the genres in a private-public space.

**Genre:** The style of speech we use that organises in turn the word choices, grammar structure, chronotope and inflections of speech. Canonical cultural include the epic genre, the ironic genre, the travel genre, the novel genre, the detective genre, the romantic genre but are only relatively stable as they intersect with one another (Bakhtin, 1981).

**Voice:** Different genres allow for different perspectives on the same theme. A perspective is referred to as 'voice' in Bakhtin's dialogue. These perspectives shape a theme, giving it different accentuations, that may complement or conflict with one another. For instance, the epic will present sacrifice as an honourable step to a glorious victory, whilst an ironic doubt will present it as foolish and avoidable escapade. The two may coexist as ambivalence.

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These three interconnected concepts are what we use here to dialogue with the thematic approach. A significant reason why these are emblematic of the dialogical approach is because they are used as tools to both aesthetically shape ideas and people (in that sense both epistemological and ontological tools) and are constitutive of canonical ideas and people. A number of researchers have taken these philosophical dialogical principles and applied them to data analysis (Gillespie and Cornish, 2010). Here however, we draw mainly on Sullivan (2012) as his work is most concerned with the aesthetics of dialogue and the fullest treatise to date on a dialogical approach.

Taking thematic analysis as a first step, in this article we are keen to demonstrate how themes are aesthetically given perspective through chronotope, voice and genre. Thematic analysis is widely cited and used, compared to a dialogical approach and there are significant other differences in how they ordinarily conduct data analysis. For example, thematic analysis is concerned with the experiences that can be grouped together through common and related codes, while dialogical analysis is more concerned with the organising role of genre in structuring voices of experience in a variety of time-space matrices (chronotope). The basic unit of analysis in dialogical analysis is 'voice' as opposed to meaning ('manifest' or 'latent') in thematic analysis. Through this article, we will examine whether these are compatible units of analysis and invite in turn a broader question as to whether incompatible units of analysis have a place in qualitative analysis. See Madill et al. (2018) for a wider discussion on dialogical analysis, pluralism and other qualitative methods related to thematic analysis.

Typically, qualitative methods are divided by opposing epistemologies (e.g., hermeneutics of suspicion or hermeneutics of trust) and opposing ontologies (e.g., experiential agents or discursive performers) which have acted as a brake on the combination of methods. More recently, this brake has started to relax with the recognition that different epistemologies and ontological commitments can shed light on the same research question and the practical achievement of this combination. As such, there has been a move to methodological pluralism within qualitative psychology over recent years (e.g. Coyle, 2010; Frost et al., 2011). In this context, the relatively agnostic approach of Braun and Clarke's (2006, 2019, 2023) Thematic Analysis appears almost as a meta-epistemology; an epistemology that allows all epistemologies (Madill et al., 2018).

This meta-epistemology is one reason for the success of the method. It offers a good starting point. Indeed, Braun and Clarke (2006) suggest that the first qualitative method of analysis researchers should learn is thematic analysis. This might be because of the basic steps involved required for most qualitative analyses including coding and theme development. Thematic analysis is therefore a method for identifying, analysing, and reporting patterns or themes within data (Braun and Clarke, 2006). Since the widely cited 2006 paper (over 55,000 citations), Braun and Clarke have continued to publish reflections on the use of thematic analysis as well as updated guidance on how to be transparent in the use of thematic analysis (Braun and Clarke, 2019). To ensure clarity in methods sections, Braun and Clarke (2021) outlined three distinct versions of thematic analysis: coding reliability, codebook thematic analysis and reflexive thematic analysis.

Here we will dwell on reflexive thematic analysis as an orienting anchor for a subsequent dialogical analysis. We will do this through the prism of a health research project in the area of post-natal depression (PND) among women of British Pakistani-Muslim background. Like many other areas in qualitative health research, the field of motherhood and postnatal depression has been studied using various methods/methodologies such as Interpretive Phenomenological Analysis (IPA) (Ling et al., 2023; Hannan, 2016; Lamba, 2015; Gardner et al., 2014) and Grounded Theory (Wittkowski et al., 2011). Other methods in this area include narrative analysis, discourse analysis, and content analysis. Our reason for doing a thematic analysis however first of all was the practical advantage it gives in orienting us to the broad range of patterns across a dataset in terms of which were the most commonly reported

features of the post-natal journey (e.g., mood, diet, friendships, support). A subsequent dialogical analysis, would, we hoped, help us to understand the way in which these features were organised by genre, voice and space-time (chronotope). Doing so is relevant in understanding the ongoing dialogue with significant voices (e.g., mother in law, husband, family, medics) in the navigation of these features. These are important to understand what may work in alleviating the pressures of post-natal experiences, e.g., in terms of triggering dialogues. First, we will outline some of the rare existing literature that combines a dialogical with a thematic approach. This offers a good starting point for our efforts to outline the process in finer detail and reflect on the epistemological contradictions and compatibilities.

### 1.1. Existing hybridisations of a dialogical approach

Discussions around combining methodologies and methods have typically focused on quantitative-qualitative blends, often referred to as mixed-methods. In mixed-methods research, typically the main part of the design is quantitative, and a qualitative aspect is usually an add-on. This is common in randomised controlled feasibility trials testing the effectiveness of various interventions (Bowyer-Crane et al., 2019). Qualitative-qualitative combinations have received comparatively little attention in the literature, which can make this option inaccessible to new researchers. This is known as Pluralistic Qualitative Research (PRQ) (Clarke et al., 2016; Frost et al., 2011), where two or more qualitative methods/methodologies are used in one study. Whilst there is much overlap amongst qualitative methods and methodologies, it is important to highlight analytical and theoretical differences, which ultimately shape how data is viewed and analysed (Coyle, 2010). Seminal research by Frost et al. (2011) first demonstrated the use of PQR, highlighting creative tensions and potential benefits of combining qualitative methodologies. Since then, a number of studies have employed PQR methods. Madill et al. (2018) illustrated a novel meta-methodology for pluralist qualitative research, of a secondary analysis on men's sexual health. Four methods of analysis were applied to one dataset to demonstrate how the same data can be analysed in different ways. This included critical discursive psychology, dialogical analysis, interpretive phenomenological analysis (IPA) and psycho-social narrative analysis. They drew on both similarities and differences in findings. All methods apart from dialogical analysis produced a rich description of the interview, whilst dialogical analysis provided a detailed linguistic analysis of a particular area. In this sense it is akin to discourse analysis as the moment-to-moment activity of language is central. Unlike discourse analysis however, it puts 'voice' and the intertextuality of utterances at its centre. Madill et al. (2018) highlights the added value dialogical analysis can provide in PQR, such as adding depth to certain parts of the data which may not have been captured by methods with a broader focus. For example, making sense of and navigating identity and space after a HIV positive diagnosis.

Sullivan and Akhtar (2019) investigated the effect of territorial stigmatisation on ontological security through a qualitative case-study of Bradford politics during the 2015 General Election. The data was analysed via a two-step approach. A deductive (top-down) thematic analysis was conducted first and then selected data was analysed further using Bakhtin's approach to dialogue. Thematic analysis helped to understand some common features of ontological security in the context of the reputation on particular areas. A dialogical analysis subsequently used 'created dialogues' (snippets of different participant's words put in contact with one another under these common themes) to reveal the role of double-meanings and charismatic 'voices' in making sense of territorial stigmatisation in a political context.

Weil (2022) explored the use of thematic and dialogical analysis of place conversations with older adults. Analyses were presented separately and brought together in the discussion. Weil (2022) stated that a strength of thematic analysis is in its coding, to reveal deeper meaning and concepts within data. Dialogical analysis then adds context to this

data by paying attention to emotion and temporal elements. Dialogical analysis highlights the role of dialogue and subjectivity, exploring how individuals discuss their experiences or avoid discussing (a dialogical unconscious). Paying attention to various dialogical features gives insight into how individuals frame their experiences. Paying attention to voices within dialogue can enhance understanding of meaning-making. The emphasis on subjectivity means that it is possible to make more than one interpretation of the data. The work of Sullivan (2012) incorporates Bakhtin’s ideals in dialogical analysis as he states the goal of dialogical analysis is not to “recover a singular meaning, but to make sense of the different and ambiguous ways in which a meaning may be experienced (p. 14)”.

Neely et al. (2024) critically analysed how maternal transitions have been researched to date. Ten of the articles were analysed via thematic analysis, with a major criticism being lack of transparency in methods such as philosophical underpinnings. The lack of theory risks analysis based on habitual normative readings. The literature on transitions to motherhood and postnatal depression in British South Asian women is considerably lacking. Many of the existing studies have utilised thematic analysis, with a specific focus, such as experience of social support, barriers to help-seeking, and understanding perceived causes (Zahid et al., 2022; Moghul, 2018; Hannan, 2016). Whilst such findings are important and help shape support services for British South Asian mothers, nuances in behaviours and thought processes are potentially missed. For example, via thematic analysis lack of partner support during the postnatal period might be identified. This might lead to recommendations for educational campaigns around postnatal depression and motherhood transition for partners. In addition to this, a dialogical focus has potential to delve deeper into these issues to unpick not only the voices of the participant but also the ‘absent voices’ which are bought in to the narrative. From this, a generic educational campaign may be developed into a culturally informed campaign, with greater insight into the vulnerabilities and nuanced experience of the new mother.

Existing PQR would be enhanced by the literary sensibility that dialogical analysis brings especially in the inter-relationship between genre, voice and chronotope. These concepts could combine with thematic analysis to introduce aesthetic subjectivity into analysis. Thus, the aim of this paper is to document and demonstrate the hybridisation of thematic and dialogical analysis in the field of maternal transitions and mental health, in British Pakistani-Muslim women.

## 2. Material and methods

We use data from a previous project exploring motherhood and postnatal depression in British Pakistani-Muslim women. The women were part of an experimental birth cohort known as Born in Bradford’s Better Start (BiBBS), which recruited new mothers, their partners, and infants between 2016 until 2024 (Dickerson et al., 2016). The project conducted 17 one-to-one, semi-structured interviews, which were transcribed verbatim by the first author (AA). The specific research questions of the project include: 1. How do Pakistani-Muslim women experience motherhood during the postnatal period? 2. How do family members react to disclosures of postnatal depression after childbirth? 3. How do Pakistani-Muslim women understand and experience postnatal depression? The analysis process was two-fold; data was first analysed via thematic analysis to develop themes relating to the above research questions.

We take a reflexive approach to thematic analysis, which embraces qualitative values and subjective skills the researcher brings to the process of analysis (Braun and Clarke, 2019). Thus, a research team in terms of coding and theme development is not desired or required for a reflexive approach. Any form of thematic analysis must consider and be transparent in the following areas: type of analysis (rich description/-detailed account) approach (inductive/deductive), level of themes (semantic/latent) and philosophical underpinnings. Our approach is

summarised in Table 1. Once data had been organised and formatted, including the selection of relevant quotes, further dialogical analysis was conducted. A consecutive approach was taken, as thematic analysis was used as a way of developing themes to gain an overall understanding of women’s experiences. This formed the basis of what issues and experiences were pertinent in this sample of women. Whilst it is possible to develop themes via dialogical analysis, this is often most appropriate when looking at a specific angle of the data. The aim of the study was to develop an overall understanding of phenomena first and then delve deeper into the key issues and themes via a dialogical approach.

## 3. Analysis

A consecutive approach taken to analysis was taken, where the data is first analysed using thematic analysis. Through this process master themes and sub-themes are developed. The data from them themes are then subjected to further dialogical analysis to develop richer and nuanced insights. Using Braun and Clarke’s approach (2006:2021), we undertook the following steps. The transcripts were initially read twice before any notes were taken. Some initial comments were made relating to the research questions to aid familiarity and understanding of the data. Field notes were referred to which aided interpretation of the data. An interpretive approach to coding was taken and meaning was explored at the latent level (implicit, underlying, ‘hidden’). Table two provides an example of thematic codes and dialogical comments. By this stage, all the data had been coded and the development of codes into themes began. We searched for patterns across the dataset. This involved transforming codes, which represent a singular idea, into themes which represent different facets of that singular idea. This includes themes such as a change in the sense of self, experience of psychological distress (symptoms), knowledge of motherhood, generational differences of mothering, and popularisation of mental health terminology. Once themes had been developed, they were reviewed and de-duplicated. Once themes had been grouped, a set of master themes and sub-themes were developed. Through this process some master themes and

**Table 1**  
Approach to reflexive thematic analysis.

Vital elements for a quality (reflexive) thematic analysis	Approach taken
Rich description of data set OR detailed account of one particular area?	Rich description of data set
Inductive or deductive approach?	Majority inductive. An inductive approach means themes are strongly linked to the data. Data is coded without trying to fit into a pre-existing coding frame. This type of thematic analysis is data-driven. An example of this is themes around ‘the experience of motherhood during the postnatal period’. To add additional context to the wider qualitative findings, a deductive approach was taken for specific areas of interest. This includes ‘how many participants have heard of the term postnatal depression’ ‘what type of treatment for distress do participants prefer’.
Semantic or latent level themes?	Themes in the current study were identified at the latent level, which go beyond surface meaning. This is done by identifying underlying assumptions, ideologies, and conceptualisations. Thus, analysis took an interpretive and intersectional approach, paying attention to culture, ethnicity, intensive mothering discourse, and generational differences.
Epistemology	Constructionist, which views meaning and experience as socially produced and re-produced. Focusing on the socio-cultural context.

sub-themes were merged as they represented similar issues, leading to re-configuration and re-labelling of themes. This led to the development of the final list of master themes. This marked the completion of reflexive thematic analysis. Themes were supported through identifying appropriate and adequate extracts.

Once extracts for the themes had been selected, further in-depth dialogical analysis was conducted. As outlined by Sullivan (2012), the extracts of the data that could be chosen for the write-up are referred to as ‘key moments’ and ‘sound-bites’, recognised as anecdotes with impact, reflections, beliefs and material that ultimately has potential to end up in the final written form of the research. However, in this case, as a thematic analysis was originally done, we followed the thematic analysis with a focus on chronotope and dialogical features outlined in Tables 2 and 3. Each theme needs to be analysed according to ‘Genre, Emotional Register, Time-Space Elaboration (chronotope) and Context. Paying attention to these features within the extracts deepened analysis, to understand how participants negotiated motherhood and psychological distress, and rehearsed conflict and ambivalence in this context. Bakhtin’s chronotope provided in-depth analysis of how time and space is understood and negotiated, including values ascribed to various chronotope (chronotope of motherhood, chronotope of psychological distress and their emotional valence.

#### 4. Results

Five extracts from different themes have been selected to demonstrate what a thematic-dialogical analysis looks like in this context. We have selected extracts which represent themes around the role of internal voices and the role of Bakhtin’s chronotope/time-space

**Table 2**  
Example of thematic codes and dialogical.

Extract: Interview number 1	Thematic Analysis: codes	Dialogical Analysis
How I went, I was shouting at everyone all the time. I was screaming - arguing over little, little things with everyone. So, I was like that for quite a long time: for 1.5 years I was like that. I was just really, really, I mean I knew it myself sometimes that I’ve gone like that. Shouting and, you know, always arguing with everyone all the time. My mum’s there explaining to me and I used to just start crying at that time; you know when my mum used to tell me off or whilst arguing with my mum or getting into an argument with anybody. I used to start crying about it as well: that maybe I am wrong but then I don’t know whether it was my heart or my mind telling me that “no, I’m not wrong, I’m not wrong”. You know “you lot are all wrong, everybody is wrong”. But I’m like, it was actually the worse experience ever, to be honest. And then I don’t know, it was just all of a sudden that I came back out of it again. I went back to normal again.	Change in the self post-motherhood Symptoms: screaming/arguing/ crying Self-awareness of change Being judged Family member reactions Feeling misunderstood Conflict between others Conflict within the self Questioning own feelings Attempts to validate own feelings Fluidity of feelings: overcome with time	Sore-spot: fear of being wrong about your feelings  Internal conflict through confrontational dialogue  Exchange of ideas between the mind and the heart  Emotional ambivalence  Shift of experience: out of the normal, into the normal, chronotope

**Table 3**  
Dialogical features adapted from Sullivan (2012).

Dialogical features	Meaning
Internal critic	To question and doubt your own experiences and attitudes. The self can be divided against itself and take the perspective of others.
Hidden dialogue	Bringing in the anticipated voices of others, representing reservation and hesitation.
Micro dialogue	An internal dialogue with self, also known as private discourse. Also used when re-creating point of view of the other.
Sideward glance Stylisation	Fearful of the judgment of others, also known as a disclaimer. To agree with others.
Words with a loophole	To escape a definitive statement

configuration. Table 4 provides a thematic overview of the master themes and sub-themes for the postnatal depression project.

#### 4.1. Role of internal voices in the genre of a divided self in postnatal depression

In this section we focus on the role of internal voices and how these shape the sense of self during motherhood. Extract one demonstrates the journey into new motherhood, which can be placed in the broader theme of ‘navigating a change in the self’ during the postnatal period. Encompassing this theme is data around the symptoms experienced during the postnatal period which differentiates the old self from the new self. Navigating the change in self, involves being self-aware, yet being stuck in a divided and conflicted state. The narrative could also be placed under the sub-theme of ‘inter-generational differences in the construction of psychological distress during the postnatal period’. This theme delves deeper into the divided and conflicted state and how generational differences and feeling misunderstood contribute further to psychological distress and meaning-making. Layering the analysis through a dialogical lens, we can now delve deeper into these themes for a more nuanced analysis.

##### Extract 1 (Saifah): the internal critic and genre of a divided self

How I went, I was shouting at everyone all the time. I was screaming arguing over little, little things with everyone. So, I was like that for quite a long time, for 1.5 years I was like that. I was just really, really,

**Table 4**  
List of Master themes and sub-themes.

Master theme	Sub theme
Becoming a mother	- Fracturing identity – becoming a mother again - Embracing motherhood
Expectations of motherhood	- Negotiating and navigating judgmental voices - Cultural postnatal practices
Experience of social support during the postnatal period	- Role of the partner - Role of own mother - Re-producing culture
Medicalisation of psychological distress	- Medicalisation of psychological distress and control - Medicalisation of psychological distress: light and dark
Perceptions of psychological distress within the community	- Rurality and psychological distress - Psychological distress: dramatization vs authenticity of feelings
The self as fluid	- Loss of control - Gaining of control
Psychological distress and control	- The ‘not my usual’ self - Re-discovering the self - Postnatal depression: the self that cannot be hidden
Navigating young motherhood	- Paradoxical motherhood: inner conflict - Early marriage and early childbearing

I mean I knew it myself sometimes that I've gone like that. Shouting and you know always arguing with everyone all the time. My mums there explaining to me and I used to just start crying at that time, you know when my mum used to tell me off or whilst arguing with my mum or getting into an argument with anybody. I used to start crying about it as well, that maybe I am wrong but then I don't know whether it was my heart or my mind telling me that "no, I'm not wrong, I'm not wrong". You know "you lot are all wrong, everybody is wrong". But I'm like, it was actually the worse experience ever to be honest. And then I don't know, it was just all of a sudden that I came back out of it again. I went back to normal again.

In what is a re-presentation of a dialogue, Saifah's mother reacts to Saifah's change in the self in a confrontational, unsympathetic manner ("tells me off"). The voice of the mother touches a sore-spot for Saifah (the fear that her mother is maybe right and that she is actually wrong) – "maybe I am wrong". This is followed by questioning of the self, that are my feelings and behaviours legitimate and justified? Saifah engages in an internal, confrontational dialogue representing an exchange of ideas between her heart and her mind which belies the unity of parallel dialogues between Saifah and 'you lot' 'everybody', which represents her family members. These internal dialogues help Saifah make sense of her distress but also signpost the reader to the emotional ambivalence and overlapping dialogues in searching for the right way to feel in a post-natal context. However, the internal dialogue suggests a 'loophole' out of absolute knowledge. The very fact that she is engaging in an internal dialogue bringing the absolute into contact with doubt. The dialogue ends abruptly with a 'return to normal again'. In this regard the dialogical analysis draws attention to the shifts in 'experiences' – out of normal and into normal; back and forth, as different voices engage in ongoing dialogue both privately and publicly.

Extract two highlights conversations around mental health, including detaching oneself from potentially being labelled as mentally ill. This could be placed under the theme of 'medicalisation of psychological distress'. Amaarah tries to move away from this medicalisation, yet uses the term 'depression' to describe her current state. Further themes around clinical vs non-clinical understandings of depression can be developed, alongside a sub-theme around the popularisation of mental health terminology in everyday vernacular. The impact of this as highlighted by the extract is, referrals which are deemed inappropriate by the patient, who are unwilling to enter treatment. This theme highlights a need for further education around postnatal mental health amongst the general public, and cultural competency training for professionals in contact with new mothers. The dialogical analysis presented next, offers a nuanced insight into the possible reasons for this behaviors, through paying attention to language. This knowledge can then be transferred onto health professionals as an educational tool, when dealing with similar scenarios.

Extract 2 (Amaarah): conversations about mental health

*I was thinking like I will end up going crazy. Like I thought I might go mental because they asked me so many weird questions, like actual mental people. Like obviously I wasn't mental, all that was that I was stressed and depressed and I always used to cry just for my husband. But they were taking it some other way around as if I'm mental or something.*

Extract two begins with micro-dialogue or an internal, self-self dialogue where Amaarah re-assures herself that she is not 'mental' but the process of being wrongly referred in her opinion is distressing. This is followed by a more definitive, direct disclaimer or 'sideward glance' (at the other's judgement) in dialogical analysis. Here, Amaarah makes clear that she is definitely not 'mental' but is experiencing some psychological distress. The role of the sideward glance in this context could indicate awareness of stigma of mental health and judgment that may come with a diagnosis, especially as a mother. Another feature present to deepen analysis is Bakhtin's chronotope, the focus of time and space. Despite the denial of any diagnosable mental health issues, medicalised

terminology is used to describe feelings, namely depression. Medicalised language was used to describe what was considered by Amaarah, a normal or expected response to her husband's absence. This may pose challenges for health professionals when attempting to interpret an individual's mental state based on descriptions given and the type of support to be provided. What was once terminology held by psychiatrists and psychologists in diagnostic settings, is now part of everyday vernacular as an ordinary description of sadness and as an expert codification (Pilgrim, 2015).

The final extract from this section highlights lack of knowledge of motherhood, a theme which reflects the perceived pressures of living up to the good motherhood discourse. This extract in particular is rich in dialogical features, which can help unpick further what the good motherhood discourse means for this new mother and how each action is defined.

Extract 3 (Lubna): navigating judgmental voices

So, once baby was crying because I was changing him and I was new mum, I didn't know at the time, so I was washing his face and I used to put a bit of Johnsons on it to wash his face and he was getting a rash because he doesn't need that he's only a baby, got sensitive skin. But I don't know why I wanted to smell nice cause I thought if my baby doesn't smell nice, they're going to think I'm a dirty woman and I don't look after my kids. So, he's crying and he's got rash on his face and she [neighbour] comes over "you're going to kill the baby off what are you doing? He's being crying for an hour" and then she's ringing my mum and my mum's like "what's going on?" and next minute my mum's down. Next minute I know got the whole family down "what's wrong with the baby?" one's picking him up like this and I'm in the middle thinking "what am I doing wrong?" "why is everyone doing that to the baby for?" they looking at me like I'm the worst mum on the planet. But yeah, it was hard when you have people around you from a different generation; it's very hard to click with them so it's all about surrounding yourself with positive people rather than negative people.

Lubna engages in an internal dialogue revealing her thought process at the time, coupled with sideward glance as she feared being branded as a bad mother. The sideward glance is informative as it provides an insight into Lubna's awareness of what constitutes as good motherhood. It also provides an insight into her vulnerabilities as a new mother, that she is thinking about how each action of hers might be potentially criticised. This is further evidenced by the feature of hidden dialogue, as Lubna anticipates the reactions and opinions of others on her mothering abilities before making decisions. The extract transitions to include the absent others, they are presented as 'judgemental voices'. The way in which they are voiced, portrays a tension filled and fraught situation for Lubna. The voices of the absent others dominate this scenario, whilst Lubna engages in her own internal dialogue. The dialogical feature 'words with a loophole' is present, as amongst the chaos Lubna portrays herself as vulnerable and confused at the reactions of others. The addition of "looking at me like I'm the worst mum on the planet" may function as a disclaimer in which Lubna may be hoping for disagreement in this context from the interviewer.

#### 4.2. Role of chronotope and genre

This section pays attention to the role of Bakhtin's chronotope, a feature of dialogical analysis which pays attention to time, space and value as tied to genres of speaking. For instance, an ironic genre creates a subjective division between the public world and the private world, where the 'true' meaning lies in the private world and the false meaning is in the public world. This is in contrast to an epic for instance, where 'true' meaning is fully public and the public sphere is the key value.

In extract four, themes related to questioning your motherhood abilities, finding your voice, and understanding symptoms as mental

health issues in retrospect, are represented. Within this extract, time and space is relevant as Lubna talks both about the past and present, including how the past has shaped her present thoughts and behaviours. The analysis to these themes can be deepened as we delve into the significance of the reflexive chronotope and genre of voice.

Extract 4 (Lubna): reflexive chronotope in the genre of advice

*The other problem is with Asian families they love to give advice, which you don't sometimes need. So, I was told my baby had clubbed feet because I sat in a weird position, and I hadn't been sitting properly. So, all that unsolicited advice that you're getting that annoys you more so and upsets you and kind of makes you think "well what am I doing wrong?" But now with my fifth child, like I said I've realized that all them lot [family] don't matter, and get them out my life and if they give advice I have an answer back, I say "it's my child I'll do what I feel". Yes pressure, a lot pressure, a lot of expectation, a lot of the thing that I'm doing something wrong; I'm not a good enough mum. I think I must have had depression with my first one, although I didn't realise it was depression. I used to be anxious going places because I hadn't been out in so long, because of the whole idea you not allowed to go out.*

Experiences are made sense of through a reflexive chronotope, which represents changes in thoughts and behaviours across time and space through the act of reflection. Lubna's self-development can be seen from her first child to now fifth child. During her first child, Lubna was more susceptible to being impacted by negative words of others. At the time of her first child, she represented positions of silence and received knowledge (Belenky et al., 1986), as she was accepting of the words of others. Through experience gained after multiple births, by the time of her fifth child Lubna had found her voice and is able to put negative voices to one side and not let them affect her as much. The feature of sideward glance is present in extract five as Lubna continues to anticipate judgement of her mothering abilities. Through internal dialogue, she has a response prepared for judgmental comments against the anticipated other. This demonstrates self-development through time and space, and greater mastering of control when it comes to your role as a mother. A reflexive chronotope is re-visited in the context of depression. The past is characterized by Lubna's lack of awareness of mental health terminology. Thus, at the time she was unable to attach labels to her feelings, which may have hindered the meaning-making and help-seeking process. Through this circular and reflexive chronotope, Lubna is able to participate in a deeper sense of meaning-making, which was not paid attention to in the past.

In the next example in extract five, themes around the experience of therapy are represented in what seems to be an interesting contrast of two worlds: therapeutic and the everyday.

Extract 5 (Aaliyah): cyclical chronotope between the idyllic genre and adventure-ordeal

*It was really good, it was. I think that someone that doesn't know you and whatever you tell them you know it's going to stay with them, so you can be 100%. But, you know when they tell you, that you know you're doing really well, you've got work, you've got family, you've got you know little baby, you've got education, its brilliant this and the other. You feel good about yourself, you think "actually I'm managing well than I think". But then you know the session finishes, you just go out you know in your family doing as normal and, in our families, it's very common thing not to say things very directly but to say things indirectly. And I think that affects you more than direct things and sometimes you would just hear these things and stuff and you would just think "probably I'm not a very good mother, probably I'm not a very good human being".*

Chronotope is represented in a cyclical manner. Therapy provides Aaliyah with a positive and nurturing environment, allowing self-development. Two contrasting spaces are described: the 'therapeutic world' and the 'everyday world'. The 'therapeutic world' is described as positive and nurturing. Predictable comforts such as family, education

and the little baby bring idyllic reassurance. It is a safe space, confidential, anonymous, and free from judgement where Aaliyah can be open and vulnerable. The 'everyday world' on the other hand is described as a toxic space filled with negativity, threatening to undo progress made in the 'therapeutic world'. It is what Bakhtin (1981) refers to as 'adventure-ordeal' insofar as the predictable comforts are replaced by indirect, negative comments that she suffers through it. It is these negative comments which Aaliyah is vulnerable to, which permeate through to her sense of self and self-worth. This is represented by the re-playing of the internal self-critic voice "probably I'm not a very good mother, probably I'm not very good human being". By focusing on chronotope, extract five highlights the importance of considering family and interpersonal contexts in relation to psychological distress after childbirth. Aaliyah engages in a cyclical chronotope as she moves back and forth between the spaces of the 'everyday world' and 'therapeutic world'. Some control over her thoughts is gained through therapy but is compromised once she entered the 'everyday world'.

Through these five extracts, we have sought to demonstrate the process of analysing data through a thematic-dialogical approach. We have demonstrated this by first presenting the themes from the data, via thematic analysis and then how these themes can be analysed further to develop an in-depth and nuanced understanding of phenomena.

## 5. Discussion

The aim of this paper was to outline how thematic and dialogical analysis can be combined to develop a nuanced and richer understanding of the experiences of motherhood and postnatal depression, in a sample of British Pakistani-Muslim women. Separately, thematic analysis allows for a rich description of the dataset, through the development of themes resulting in a holistic understanding of phenomena. Dialogical analysis allows for a detailed analysis of a particular aspect of the data. Both methods of analysis are distinct in their analytic purpose, thus making them ideal candidates for hybridisation.

There are some differences, however, worth noting. In terms of epistemology, meaning is complete (thematic) as opposed to incomplete (dialogical). Both thematic analysis and dialogical analysis are compatible with a social constructionist epistemology. However, grouping codes together by common themes implicitly assumes a finality to the meaning. That is, what the participants say publicly reflects what they mean privately. Of course, there is acknowledgement in a constructionist framework that this meaning is subject to the agenda and construction of the researcher and their research aims and hence meaning is not finalised. However, in a dialogical epistemology, what is said does not reflect a pre-stated position but instead reflects a snapshot in a search for 'truth', working out to oneself and others in dialogue, the meaning of experience – which is what leads to ambivalence, contradiction, and qualification.

Another point of difference is reverence as opposed to irreverence. A thematic analysis assumes a reverential approach to the data. What the participants say is carefully excavated. The dialogical approach also can do this but also has more irreverent tools available – that have not been used in this analysis. These are, the created dialogue; instead of presenting extracts from one participant; presenting bits of extracts that refer to different perspectives on the same theme into contact with one another (see Sullivan and Akhtar, 2019, Sullivan, 2011). Key Moments; instead of systematically working up the data from codes into themes; identifying 'key moments' (moments in the interview that stand out in terms of the research question and could conceivably be used as a quotation). This tool is somewhat incompatible with thematic analysis as the key unit of analysis is the written-up quotation, rather than a particular code.

Despite these differences, there are clearly benefits to combining thematic and dialogical analysis. In the case of post-natal experiences, thematic analysis developed the overarching themes relating to motherhood and postnatal depression. Analysis of issues pertaining to the

sense of self, experience of therapy, navigating motherhood and conversations about mental health were developed. The outcome of thematic analysis provided a holistic overview of the key areas of interest. Dialogical analysis added depth to the themes by unpicking women's voices, their stories to delve deeper into meaning-making, power dynamics, as well as highlighting contextual sensitivity. Different types of voices were illuminated through this hybrid analysis. The internal confrontational voice demonstrated women's thought processes during the onset of psychological distress after childbirth. The subtle nature of symptoms manifesting meant that the mother and people around her struggled to pinpoint a reason for this change in self, and thus assumed negative emotions were displayed on purpose. This led to a divided self as the suffering mother entered into a wave of self-doubt and ambivalence over this change in the sense of self post-motherhood. Dialogical analysis uncovered power dynamics in how voices were bought in and negotiated. The power and weight of absent voices in contributing to women's vulnerability was demonstrated, such as that of the family. The transition of taking control of your own voice and changing the power dynamic via dialogue has been demonstrated.

The 'generalised voice' represents how new mothers' perceive the public to think about them. This includes concerns around whether people will judge you as a mother based on how well you are coping, how clean your kids look etc. This generalised voice can be experienced by all new mothers as they navigate between the romanticised version of motherhood compared to the reality (Hays, 1996; Nicolson, 2006; 2011). However, the generalised voice can transition into a more concrete voice when the new mother directly experiences judgment of her mothering abilities. What is termed as the sub-voice of 'judgemental voices' was shown to be linked with generational differences in post-natal care, child rearing and understanding of psychological distress after childbirth. Women navigating the generalised and judgmental voices demonstrated a vulnerability of absorbing these voices. The generalised and judgemental voices together were found to contribute towards feelings of psychological distress and perpetuated the bad mother discourse.

Dialogical analysis based on Bakhtin's principles of chronotope has developed understanding of the use of mental health terminology in the everyday world. The impact of using the term 'depression' to describe everyday negative emotions can contribute towards misunderstandings between the new mother and health professionals. Thus, resulting in referrals made which are thought to be necessary but ultimately are wasted due to differing constructions and uses of the term 'depression'. At the same time, the normalisation and popularisation of mental illness terminology can be seen as a good thing, as it can contribute towards a positive help-seeking environment. However, the negative side includes blurred lines of what is and is not considered a mental illness. Various grey literature sources have highlighted this as a major issue which contributes towards the sufferer casting doubt on the evaluation of their feelings. This may lead to delayed help-seeking, further contributing towards under/overdiagnosis and wasted time and resources of already stretched mental health services. Dialogical analysis helped uncover the nuances and diversity of experiences within the thematic themes. Dempsey et al. (2022) used a PQR approach to analysing accounts of depression using methods including thematic analysis, narrative analysis and discourse analysis. Similar to the results of our analysis, Dempsey et al. (2022) through a PQR approach was able to draw upon the various approaches to unpick contradictions and tensions within participants accounts of depression. From the medical discourse where participants make sense of their symptoms, to the dramatic discourse where participants question their experiences.

A focus on chronotope has demonstrated how women reflect on their emotions, sense of self, and people around them in relation to motherhood, to enhance self-awareness and self-development. A recognition of negative spaces over time and the impact of this on mental health has implications for behaviour change and help-seeking for psychological distress after childbirth. A thematic-dialogical analysis has developed

understanding of what may contribute to women's fragility and vulnerability during the early postnatal period. In the current case, it is pre-existing concerns of being a good enough mother, coupled with real judgement from close ones. Paying attention to these multi-layered voices has deepened understanding behind women's experiences of motherhood, meaning-making and psychological distress during the postnatal period.

### 5.1. Strength and limitations

Both thematic and dialogical analysis are subjective methods, relying on the researchers pre-understanding of the phenomena, including socio-cultural insights and experiences. This means that interpretations of the data can vary from researcher to researcher, thus multiple meanings can exist which can be considered a limitation. A strength of this study is that intra-thematic tensions and positions can be understood via the use of rhetorical features rather than viewing themes as a homogenous block.

Despite the limitations, hybridising thematic and dialogical analysis has allowed the first author to gain a deeper understanding of British Pakistani-Muslim women's meaning-making during motherhood and psychological distress after childbirth. Paying attention dialogical features supported by thematic analysis has provided a key into the women's sub-conscious, but these are verbally stated. I mention the sub-conscious mind because through communication we all demonstrate a range of dialogical features but this something we might not consciously be aware of and rarely reflect on. Hybridising thematic-dialogical analysis to understand women's lived experience of motherhood and postnatal depression offers a nuanced, contextually rich, and holistic perspective. Highlighting the complex meaning-making processes women go through, this method can contribute to the development of more comprehensive and empathetic approaches to supporting women's mental health during the postnatal period.

## 6. Conclusion

In this article we have demonstrated how thematic and dialogical analysis can be combined to produce a richer, in-depth exploration of women's experiences of motherhood and psychological distress after childbirth. This hybrid analysis is interpretative and thus goes beyond surface level, paying attention to cultural and social influences which shape understanding and experiences of motherhood and help-seeking for psychological distress. Bringing such issues to the forefront can help shape the development of interventions to support new mothers. For example, the illumination of judgmental voices suggests the need for greater awareness of mental health post-birth amongst women's social network.

Dialogical features in interview transcripts are not new, but very little research pays attention to the significance of these. Through thematic-dialogical analysis, we have focused on various dialogical features such as internal dialogue, sideward glance, and the use of double voices where participants bring in the voices of others. This has allowed us to gain a deeper understanding of Pakistani-Muslim women's meaning-making during motherhood and psychological distress after childbirth. Paying attention to dialogical features supported by thematic analysis has provided key insights into the women's sub-conscious, but these are verbally stated. The sub-conscious mind is mentioned here because through communication we all demonstrate a range of dialogical features but this something we might not be consciously aware of and rarely reflect on. Hybridising thematic-dialogical analysis to understand women's lived experience of motherhood and psychological distress offers a nuanced, contextually rich, and holistic perspective. Highlighting the complex meaning-making processes women go through, this method can contribute to the development of more comprehensive and empathetic approaches to supporting women's mental health during the postnatal period.

## CRedit authorship contribution statement

**Amirah Akhtar:** Conceptualization, Data curation, Investigation, Methodology, Project administration, Validation, Writing – original draft. **Paul Sullivan:** Conceptualization, Methodology, Validation, Writing – review & editing. **Yunis Alam:** Supervision, Validation, Writing – review & editing. **Abigail Locke:** Conceptualization, Supervision, Validation, Writing – review & editing.

## Declaration of competing interest

The authors declare that they have no known competing financial interests or personal relationships that could have appeared to influence the work reported in this paper.

## Data availability

The data that has been used is confidential.

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