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"I was at the right place in the right time": The neglected role of happenstance in the lives of people and institutions

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Abstract:

This paper presents coproduced ethnographic material concerning the development of mental healthcare services in Oxfordshire, UK. Our collaborative working method highlights arbitrary events and connections in both individual lives and in the lives of institutions. We introduce the analytic concept of happenstance to make sense of this. Happenstance helps us theorize how chance arises in particular social contexts, contains both randomness and patterning, and becomes entwined with agency. The notion of happenstance thus enables us to retain a sense that chance is social and makes links between individuals or institutions and their social surround independently of structuration or habitus. The anthropology of bureaucracy has focused on the clumsiness of institutional mechanisms and the strategies people adopt in response. We suggest a new angle, combining happenstance with Ian Hacking's notion of "ecological niche" to suggest how an openness to happenstance might create a different kind of evolving institution.

Keywords: Bureaucracy, coproduction, ethnography, mental health, narrative, personhood, ethics

Intersubjectivity and happenstance

Anthropological fieldwork is a famously haphazard business. Carefully designed plans can be upended by chance encounters. Unexpected events become opportunities, moments of good fortune that lead to reframed inquiries, even to new research questions. As Hazan and Hertzog put it, "serendipity is an engine, pulling anthropology forwards" (Hazan and Hertzog 2011: 9). For an anthropologist in the field, it isn't just difficult to stick to plans, but positively a bad idea to try to do so. Negotiating the unanticipated and the indeterminate is a central feature of ethnographic expertise (Rivoal and Salazar 2013: 3). Fieldwork involves a particular kind of awareness, an open-ended intersubjective attentiveness, reciprocal and undetermined: what Fabian calls "the sharing of time" (Fabian 2014: 205). Although not unique to anthropology, it is one of the strengths of the discipline. Other research methods seek more routinized, reproducible forms of knowledge, and in doing so tidy away the messiness and ambiguity of lived experience. Ethnographers can recover this complexity, however theoretically cumbersome, and reintroduce it to oversimplified debate. It can be a challenge, of course, to retain this quality of attention, once the anthropologist has left the field, when friends become designated as informants or interlocutors, and fieldnotes become disciplined academic prose (Lassiter 2005).

This paper is coproduced. It written by an anthropologist with an interest in bureaucracy and mental healthcare (Neil Armstrong) and a psychiatrist whose life and work forms our ethnographic focus (Peter Agulnik). Both the ethnography and argument are the product of shared time. Armstrong did not leave the field and suspend collaboration. Rather, we continued the open-ended intersubjective attentive working, bringing it into the process of thinking and writing. As the anthropologist, Armstrong might be seen to be giving up what McLean describes as the "security of the authorial vantage point" (McLean 2017: 127). But, in this case at least, any loss of security brought with it an opportunity to enter a less

determined, less predictable world of negotiated knowledge production. Our meeting was unplanned. Shared jokes in the pub after a seminar led to a mutual recognition of shared interests and affinities. It would be easy to characterize this relationship as an instance of the kind of "complicity" described by Marcus (Marcus 1997, 2001). It naturally transitioned to an open, exploratory way of working. We had no hypothesis, or even a hunch, about how this might play out.

As we thought through the history of psychiatric institutions in the1960s and 1970s in Oxford, a history in which Agulnik has played a pivotal role, we noticed a particular, distinctive role for chance. In Agulnik's own life, a lot of which might easily be framed as careful deliberation and decision-making, really arose out of random events and coincidences. And, in a rather incongruous way, the institutional biographies we outline below all share an openness to chance, at least in their origins, that goes against the grain of routinized rationality. In each case, neglecting the role of chance would be to miss key parts of the story. But we noticed something more: that chance, understood in context, retained meaning in a way that pure randomness does not. It was still interpretable, still the business of social anthropology. This led us to a theoretical innovation: the notion of happenstance.

Happenstance is a word coined in the mid-nineteenth century, formed by combining two distinct ideas: an accidental happening and circumstance. As a noun, it refers to chance events or circumstances which gain meaning by context. Happenstance may be haphazard, or random, but also coincidental, or lucky. It can be both because randomness occurs in a social setting which makes it meaningful or consequential. Happenstance is impactful but unplanned. It indicates a world neither fully known nor fully under control, but also not wholly chaotic. In *The taming of chance,* Ian Hacking describes how thinking of chance in statistical terms, as probability, had immense political, philosophical, and ethical consequences in the nineteenth century, leading, amongst other things to what he calls "the

sweet despotism of reason" (Hacking 1990: 35). Existing anthropological concepts tame chance by tying individual lives to larger social and cultural formations with reference to qualities or attributes associated with agency. Giddens regards individuals as "perpetrators," rational and sovereign agents, even if they don't always have complete knowledge as to why they act, and even if their actions have unintended consequences (Giddens 1984: 9). It is through their actions that people reflect and recreate structure. Bourdieu's habitus is "a structuring structure, which organizes practices and the perception of practices" such that a person's cognition and affect, habits, skills, tastes, and ethics are tied to wider structures. (Bourdieu 1977: 170). Habitus may be recognizable, a set of shared characteristics that perpetuate privilege, for example. It includes subtle sensibilities, such as an individual's sense of how to navigate social situations, which Bourdieu memorably dubs "feel for the game" (Bourdieu 1990: 66). But it always pertains to individuals as actors.

Happenstance, in contrast, is located on the frontier between individual and society, between structure and agency. It refers not to how structures enter and form the person, but how chance shapes that person and his or her actions, in ways that reflect structure. It refers not to the preconditions of practice but to missteps and surprises, and ends up being crucial. Happenstantial events are neither the product of reasoning, nor instinct, nor strategy. But neither are they simply chaotic or random. What chance looks like in one setting might be importantly different from how it appears elsewhere. Happenstance refers to chance playing out in particular social and cultural settings.

We present two pieces of ethnographic material to illustrate and develop the notion of happenstance. The first is an account of Agulnik's early career trajectory. The second is a description of events in which he played a key role, leading to the creation and development of a mental health institution in Oxfordshire in 1977. Both sets of material describe sequences of events that are loose and open. Agulnik's trajectory is shaped by the arbitrary and the

accidental as much as by deliberation. The world he moves in is messy and full of uncertainty. Chance and arbitrariness are the norm. He goes on to play an impactful role, but his entry into the field is far from determinate, or carefully planned. There is no guiding agency or rationale. Instead, chance, guesswork, ad hoc adjustments to external constraints, and personal networks play key roles. A friend recommends a placement in a congenial hospital that turns out to be a ground-breaking therapeutic community. A long drive from Yorkshire to London was serendipitous because it gave time for ideas to be hammered out and plans formulated, when a shorter journey might have left thoughts unthought and plans undeveloped. Personal connections brought key players together in an atmosphere of trust and collaboration. What emerges is that the play of chance is not random or meaningless. It is highly patterned, bearing the imprint of wider social and cultural forms. Chance is relational, and social. It doesn't displace Agulnik's intentions and efforts. Rather, chance becomes entwined with agency. In this sense, chance doesn't just happen, but is made to happen. Synchrony occurs almost as if it is generated. In a complex environment, both human and nonhuman agency is conspicuous but not exhaustive, and the social life of chance needs to be considered.

Discussions of collaborative working suggest that open, reciprocal, nonhierarchical methods produce a richer ethnography (Curran 2013: 354). But, as Paloma Gay y Blasco remarks, "I know that reciprocal work can help redefine our understanding of complexity in ethnography, its form, and its value, but I have yet to work out exactly how"' (Gay y Blasco 2017: 106). We don't want to claim that we have worked out how, either. But our sense is that a lack of understanding might provide a clue. Not knowing, at least, not knowing in advance, seems a helpful position if one is to be aware of happenstance. Our experience is that where an anthropologist works more conventionally, and less collaboratively, aspects of the interlocutor's self having to do with volition, intentionality, and agency are highlighted.

When presenting themselves to others, individuals often recount their own lives in terms of personal agency. Life histories can be a sequence of decisions, sometimes well reasoned or turning out well, and sometimes not. Narratives describe plans unfolding and ambitions sometimes achieved and sometimes dashed. Interlocutors speak of their attempts to find ways to accommodate their likes and dislikes, through various efforts and strategies and to varying degrees of satisfaction. This hermeneutic of agency brings coherence to the succession of days that make up a life. It enables a person to explain, perhaps even to justify, their life. Charles Taylor suggests self-narratives are a critical part of the process of selfhood, creating a sense of direction, orientation and goal (1989: 48). To Taylor, this is part of being human: "we must inescapably understand our lives in narrative form, as a 'quest'" (ibid.: 52). Framing life narrative in terms of personal agency is a key aspect of narrative medicine (Charon 2006). Creating an agential life narrative can be a therapeutic technique in itself. It is an essential component of all psychodynamic practice, including psychoanalysis; is critical to Cheryl Mattingly's notion of therapeutic emplotment; and is central to mainstream treatments for people with drug and alcohol problems (Madigan 2019; Mattingly 1998; Carr 2011). There are calls for renewed attention to the importance of narrative in psychiatry (Lewis 2011).

In contrast, collaborative working appears to reveal a different aspect of selfhood. Planning, predicting, and deliberating are less foregrounded, as individuals respond, with more or less ingenuity, more or less creativity, to chance shaped by context. It might sound less responsible, even irresponsible. Indeed, locating happenstance can feel slightly transgressive. Even for those not seeking healing, being unable to recount one's life through responsible agency might feel like a moral blemish in an ethical world that demands effective, even legible decision-making from citizens. Co-creation creates a base to explore this moral uncertainty. There is less pressure, perhaps, to offer interpretations that might

explain or justify. Nobody is being held to account. The complicity of collaborative working opens up for anthropological theorizing individuals who are released from exculpatory narrative. Thinking in these terms reveals a shadow world of chance and luck, of good and bad fortune, of muddling along or creatively responding to external events, all within a world in which chance is shaped by local conditions.

One reason to prefer collaborative ethnography is to address power imbalances, perhaps as part of a larger emancipatory political project (Scheper-Hughes 1995). Luke Eric Lassiter suggests that contemporary collaborative ethnography has the potential to draw together feminist and postmodern anthropology, and redirect the discipline towards a more engaged, applied approach (Lassiter 2005). This is potentially very important in mental health research, where coproduction is widely recognized as a means of rebalancing dangerously skewed relationships between clinicians and patients[1] and uncovering and acknowledging neglected voices and experiences.[2] It may seem at first glance not to apply to our work. Psychiatrists, even retired ones, are often seen as the bearers of dominating, even oppressive knowledge (Rose 2019: 150-72). In practice, this status is highly unstable. As we developed our thinking, the need to address anthropological audiences created an asymmetry between us. Agulnik accepted the need to trust Armstrong's reading of literature and theory. The ethnography we produced is a kind of hybrid. From Agulnik's point of view it is a variety of autoethnography, building on memory and reflection and sensitive to the tensions between being an insider and an outsider. As Nancy Taber suggests, it is this dual role that makes autoethnography particularly suited to the demands of institutional ethnography

1. We use the term "patient" throughout this paper. Nomenclature is an intensely contested issue in mental health research. There are no neutral terms. Alternatives, such as "service user" and "consumer" are sometimes preferred. However, they were not in use in the period we describe. By using the term "patient" in both ethnography and analysis, we seek not to indicate a position regarding these debates, but, simply, to reflect popular usage.
2. For example, https://recreatepsychiatry.com/

(Taber 2010). Collaborative working emerges as a method sensitive to, and thus revealing about, power relations. Retaining an awareness of chance events and the sheer haphazardness of life has a political charge. Although sometimes celebrated in accounts of scientific discoveries, indeterminacy is uncomfortable to what Marilyn Strathern called "audit cultures" (Strathern 2000). As we argue below, many of the bureaucratic mechanisms that underpin neoliberal institutional arrangements erase happenstance. The moral discomfort associated with acknowledging happenstance thus indicates something about the location of power. Thus we largely agree with, but tweak slightly, Bob White and Kiven Strohm's comments in a preface to a *HAU* special section on coproduction that the "ethics and politics of ethnographic knowledge take place primarily in the field and not in particular products or political postures" (White and Strohm 2014: 190). Our ethics and politics arise unplanned (and, we hope without posturing) out of coworking, not in the field exactly, but in the process of writing.

In the next section we develop the notion of happenstance, using some cowritten ethnographic material describing how Agulnik ended up as a psychiatrist. Then we turn to happenstance and institutions. We present material on the origins of a mental healthcare institution called Restore, demonstrating the prominent role of happenstance. We then consider how happenstance relates to the anthropological literature on bureaucracy. In particular we focus on how it relates to discretion, trust, and "adhocracy." Finally, we use Ian Hacking's idea of ecological niche to consider how an openness to happenstance might create a distinct kind of institution. We have retained the first person in the material below, so "I" refers to Agulnik.[3]

3. All the names we use are real. The usual anthropological practice of hiding identities is problematic here because Agulnik is personally bound up with the history of the institutions we discuss. Given he is named as an author, concealment isn't really possible. However, the coproduced ethnography we present draws on Agulnik's memory. The events we describe

Happenstance and individuals: Context, Selfhood and Chance

As I approached the end of medical school, I was unsure of what to do next. Medicine itself had not quite seemed like a choice, as it had been instilled into me from an early age that I should follow my grandfather's footsteps into a career in medicine. A friend who was studying for his Primary Membership of the Royal College of Physicians exam recommended Claybury Hospital, a large Victorian mental hospital in Essex, as a pleasant place to work. At that stage I had no thought of entering psychiatry. But I thought that some experience of mental healthcare could always be useful in clinical work, and particularly in general practice, which seemed like my most likely career outcome. So, I successfully applied for a position as a junior doctor at Claybury. Unbeknown to me at the time, Denis Martin, the physician superintendent at Claybury, led a small group of reformist psychiatrists at the forefront of developing the Therapeutic Community approach to hospital care.[4]

This first encounter with the Therapeutic Community model was to shape my future career development. A key part of the appeal was the supportive social environment amongst staff. Denis Martin was a very friendly and approachable man. His thoughtful, considered style was quite a contrast to the rather austere, often critical manner of many senior hospital

occurred many decades ago and none of the material has any potential for reputational damage. We believe our work presents no ethical risk.

4. Therapeutic communities seek to promote better mental health by means of group processes. There are various ways of doing this, and various ways of theorizing how it might be helpful. In the influential *Community as doctor*, the anthropologist Robert N. Rapoport described four principles that are widely seen as critical to a Therapeutic Community: democracy within the community, permissiveness, community members challenging each other (which Rapoport called "reality confrontation") and the creation of a tight-knit, warm social group (Rapoport 1960). Steve Pearce and Rex Haigh have tried to find a way through the complex terrain of Therapeutic Community theory (Pearce and Haigh 2017). They suggest that therapeutic communities work by creating a sense of belonging, promoting social learning and the development of responsible agency, and enabling people to develop self-narratives (ibid.: 53-54).

consultants I had previously encountered. I found I was able to learn much more in settings where I felt relaxed and confident and unafraid of demonstrating ignorance in front of my peers. I enjoyed the open and nondirective discussion at a weekly support group to which all junior doctors were encouraged to attend, and the opportunities for learning through practice rather than theory. My confidence grew, and I went on to work with Denis Martin in Forest House, an inpatient unit run as what David Clark would call a "therapeutic community proper" for people most of whom would now be regarded as suffering from "'borderline personality disorders." [5]

This experience however, also contributed to a personal crisis. I realized I needed to make a decision about my future career. Was I primarily interested in the mind or the body? I was worried that I wouldn't be a "real doctor" if I continued to pursue social psychiatry. But if I did want to take that route, I needed to work at a reputable teaching hospital to advance my career. So, I applied for and obtained a post as senior house officer at The Midland Nerve Hospital in Birminhgam. I had formed a friendship with an American colleague at Claybury, who had subsequently returned to Boston. Experience of American systems of medical care was considered of benefit to an aspiring specialist. We joked that if a BTA (Been to America) was desirable, a BTB (Been to Boston) "degree" was even better. Without having really decided which route to take, I mentioned to Myre Sim, the consultant I was working for, that I would like to go to Boston. Although his primarily medical approach to psychiatry was rather different from my own, he was personally supportive of my plans and able to use personal networks to further them. On my behalf he wrote to Milton Greenblatt, the then Commissioner of Mental Health in Massachusetts, with whom he was friendly. Greenblatt, a leading figure in community mental health in the USA, had previously been physician superintendent of

5. Clark 2013.

Boston State Hospital. [6] *This connection led to a highly educational two-and-a-half year senior residency at that hospital. The temptation to stay longer was considerable, but in 1969 family considerations prompted a return to England.*

When I was working at Claybury I got to know about a number of other mental hospitals which were pursuing a policy of opening their previously locked ward and introducing therapeutic community concepts. So, I had already heard of the changes that Bertram Mandelbrote was initiating in Oxford before I left for the States. If I am honest however, my main imperative, on returning was to obtain a Senior Registrar post linked to a teaching hospital, in order to enhance the prospects of obtaining a decent consultant post in due course. I scoured the British Medical Journal *advertisements, and in one week there were three posts advertised which passed those criteria, and to which I applied. I was called for interview for two, one at the Royal Free Hospital and the other at Littlemore. Fortunately, I was unsuccessful at the former, and thus found myself within the two-week window of opportunity I had set myself, returning home to Boston announcing that the family would move to Oxford. As it turned out, my post was not in The Phoenix Unit, which was the flagship of the therapeutic community approach Mandelbrote was introducing more widely.*[7] *I was part of his "A" division giving ward-based care in a way that emphasized social aspects. This was a contrast to the "B" Division consultants and those based at the Warneford Hospital with its recently endowed university department of psychiatry, which primarily emphasized the "medical model."*[8] *I was initially given psychiatric responsibility for running a day patient service at the hospital and doing liaison psychiatry within the Nuffield Department of*

6. See Greenblatt and Rodenhauser 1992.
7. For a brief description, see Kennard 1998: 78.
8. The Warneford had previously been a private hospital, but now, as a part of the NHS, it had recently become the site of a new Professorial Department of Psychiatry, institutionally linked to the University of Oxford and oriented towards the academically prestigious biomedical approach to psychiatry. There were sometimes quite acrimonious rivalries between these two approaches and the individuals and groups who represented them.

Medicine at the then extant Radcliffe Infirmary. A key feature of the "A" Division was that three times a week all the senior multi-professional staff met together in an open informal meeting to discuss what seemed most pertinent to the gathered members. This set a similar tone and model within the wards and other services of which the division was comprised. At that time, instead of the current pattern of rotating equivalent senior training posts most Senior Registrar posts were assigned to a "firm" of specific consultants, for a period of up to four years, with an option on a fifth. This offered the possibility of developing close working relationships over a period of time, and, in my case, an association with Bertie Mandelbrote that was to be consequential.

Nothing in the narrative seems determined. Other trajectories were possible and the junctions and transitions that make up Agulnik's trajectory are significantly influenced by chance. Agulnik didn't know his preferences in advance, nor seek to match his sense of self with the clinical models on offer. Instead, there was a gradual, iterative process of unplanned events dovetailing with personal preferences and choices. The role given to chance is striking. This is happenstance, rather than mere randomness, because chance plays out in highly specific and highly cultural ways. For example, the shift from general medicine to psychiatry at Claybury arose out of a conversation with a friend and a desire for a more open, enquiring and nonhierarchical social style. At the time there were a number of innovative therapeutic communities in the UK where equable, negotiated sociality was part of the cure. At the time, chance conversations based on fairly inchoate preferences and impressions pointed to psychiatry and to Claybury. Agulnik was not strategizing in Gidden's sense. And not all the chance events may be read as unintended consequences of actions. Neither can we account for his progression solely in terms of Bourdieu's "feel for the game." Agulnik was less agential than that. He was sensing how to proceed, planning and forecasting, but these do not wholly

account for his trajectory. Instead, chance enters the story and ties him as an individual to his structural surround. The same preferences and conversational opportunities with friends at medical school today might suggest very different trajectories and lead to very different chance events. Similarly, a prudential decision to train at a Birmingham teaching hospital with a biomedical approach to mental healthcare, which might have led to a change in orientation, actually facilitated an unanticipated and rather exploratory move to Boston and an exposure to American psychiatric practice. We may discern habitus, as well as energy and curiosity and drive, but locally configured chance events played a key role.

In the narrative, happenstance mediated the rather polarized nature of mental healthcare. Agulnik was presented with rather stark oppositions between psychiatry and general medicine, and within psychiatry, between social and biological approaches. These oppositions are reflected in institutional structures and, indeed, in the built environment. He had to opt either for the body or the mind, and, if the mind, for either social or medical psychiatry. Social psychiatry seemed a good temperamental fit. Although the open, less hierarchical style of working could be demanding and even scary, the atmosphere among staff was supportive and fostered a sense of growing confidence in Agulnik. Encounters with charismatic or influential figures such as Martin and Mandelbrote that were unplanned, and arose out of chance, led him towards social therapeutic approaches and thus away from a more medical style.

Agulnik worked hard. He expended considerable energy, thought carefully, and reflected on his experiences. But that is not to say he wasn't also acted upon as much as he was an actor. Chance events enabled him to find a clinical setting that suited him temperamentally. Because thinking in terms of happenstance tends to undermine agential hermeneutics, more complex and ambiguous life trajectories are revealed. Transitions are more complex, and motivations are more mixed. Plans and preferences play out alongside

random combinations of chance and context. Personal theoretical orientations that might provide coherence to a life narrative become unsteady. Agulnik's move to Boston reflected whimsy as well as judgment, and relied on networks that, by chance, he had access to. The decision to return reflected family reasons. It would be possible for him to frame the events in a purposive and teleological way. Certain kinds of documentary practice (such as CV-writing, for example) might favor such a hermeneutic. Decision-making would be based on careful, methodical deliberation. Transitions might be presented as decisions that reflect long-term planning, organized around the development of interests and the pursuit of career goals. But that would be partial, at best. Framing the events teleologically as quest or journey would be rather against the grain of our coproduced ethnography. Agulnik comes across as more modest, less heroic. There is no consistent goal or sense of progress assessed in terms of changes in proximity to the goal. But neither is there a lack of meaning. Rather, he is cautious about overstating his own autonomy and agency even in the process of his own self-formation.

One reason why Agulnik might frame his narrative such that happenstance was downplayed, and personal agency foregrounded, is that life narratives can form part of a defense of professional theoretical commitments. He is supportive of therapeutic communities and skeptical of care based on medical treatments alone. He might provide evidence for this from clinical trials or cite examples from his clinical work, perhaps mentioning cases where his favored approach was particularly successful or describing lightbulb moments when he suddenly understood things more clearly. Thinking in terms of happenstance promotes a degree of skepticism towards such assertions. There are sound intellectual reasons to prefer, say, the underlying models in social psychiatry when compared to the models in medical psychiatry. But Agulnik's account suggests a more messy and complex process. His commitment to a therapeutic community approach to psychiatry was

not arrived at solely through a process of reasoning or cognitive epiphanies. Rather, chance events played out in his life in such a way as to reflect his social and cultural setting and contribute to his therapeutic vision. Not all autonomy is excluded. But neither is the agential subject insulated from happenstance. Agulnik may have been predisposed to prefer the kind of open, relational practice that was favored by Mandelbrote and the "A" division, but this suitability was also formed during the events related above. And chance events, constituting part of the relationship between self and world, bearing the imprint of the social and cultural environment, intersect with his personal agency in shaping his future. Chance impacts upon the resources for individual deliberation and decision-making. A degree of malleability and permeability of personhood is revealed. And the constituents for a responsible, agential self, pursuing ambitions, or ethical projects, may in part arise out of random processes that are socially patterned.

It might be a concern here that we are theorizing Agulnik's role in negative terms. The category of happenstance is intended to provide theoretical resources to enable a more positive picture. On one hand, in contrast to Agulnik's openness to happenstance, what we might call resistance to happenstance can be understood as a disciplinary project suggestive of governmentality (Foucault 2004). That we imagine ourselves through a professional, perhaps neoliberal, hermeneutic as ambitious, rational subjects entails that we regard openness to happenstance as the absence of planning, or deliberating, or deciding, and so indicative of moral risk. On the other hand, he sees positive value in openness to happenstance. In a sense, being open and responsive is an ethical stance. It is part of his project of self. It places value on being present and attentive to others, being open to what Buber calls *dialogue* (Buber [1947] 2002). Taylor is concerned that our modern tendency to imagine ourselves as insulated or "buffered" from the world is fundamentally mistaken: a failure to recognize the true nature of our ontological status or being in the world (Taylor

2007). We may think of ourselves and experience ourselves as buffered, but this is in some final sense, false. From this point of view, Agulnik emerges as less deceived. He recognizes his own porous personhood where others might adopt narrative strategies that conceal or erase it (Smith 2012). Rather than try to present himself as an orderly, fixed, ideological whole, he sees himself more as what Anand Pandian calls a "fragmentary mosaic" that shifts and changes, forms and reforms, across time (Pandian 2009: 15). And this extends into a preference for open, undetermined clinical modalities. In the clinic, this means care is less standardized, located further from an evidence base, and thus harder to contain in an accountable bureaucracy. This takes us to our second section of ethnographic material: how the making of institutions may be open to happenstance.

Happenstance and institutions

It is hard to escape a sense that bureaucracy is a deeply rational human endeavor. The popular imagination is rather Weberian, in that we understand offices as typified by rule-following, structure, and documentation (Graeber 2015: 32). Offices appear like machines, impersonal enough to be capable of both fairness and ruthlessness, even if we are no longer convinced of their efficiency. For those who work in an office, good practice is practice that is predictable because it complies with procedure (Zacka 2017: 64). So where chance enters the world of bureaucracy, it can be seen as external, oppositional, and undesirable. For bureaucrats, chance is to be concealed, a rhetorical burden (Herzfeld 1992).

Anthropologists have sought to differentiate bureaucratic self-representations from ethnography, stressing that we cannot understand the impact of bureaucracy in these terms alone, but, rather, with reference to what Matthew Hull calls the "host of human and artefactual mediators" that stand between plans and the world they represent (Hull 2012: 207). Building a critique of bureaucracy based on bureaucratic knowledge while critiquing

the epistemic shortcomings of bureaucratic knowledge can clearly place anthropologists at a disadvantage. Nick Manning, for example, in his historical account of therapeutic communities, makes a sharp distinction between what he calls "social influences" (referred to disapprovingly as "the ebb and flow of fashion") and "sober, scientific reflection" (Manning 1989: 104). According to this view, strong, durable institutions are designed, using evidence and expertise, whilst weaker ones evolve in an unpatterned flux. Such a distinction corresponds to bureaucratic knowledge, and, no doubt, local common sense, but should be separated from theory.

This puts happenstance in a distinctive position relative to bureaucratic self-representation and theories of bureaucracy. This is because the erasure of randomness is part of the discursive work of an institution. Chance is tainted: it suggests a lack of professionalism, even of corruption. So, officials often behave as if it is irrelevant even when they know that this is not the case. In her study of state bureaucracy in India, Nayanika Mathur puts it like this: **"**Agents of the state know that rules can never be followed to the letter. Their energies are directed instead at making it appear *as if* the illegibilities have been overcome, *as if* orders have been followed" (Mathur 2016: 3) In his ethnography of development organizations in India, David Mosse describes a profound disconnect between aid agencies and the people they are supposed to be helping (Mosse 2005). He argues that the knowledge produced by these organizations effectively conceals their operations, creating a sealed rhetorical universe (ibid.: 230). Both Mathur and Mosse's ethnographies suggest an ethnographic project focused on how bureaucratic actors create and conceal bridges between rules and actions, intentions and representations. We might also want to add: the ethnographic project is to uncover the role of chance in bureaucratic life, apart from agency, intentionality, skill, planning, or habitus. Thinking in terms of happenstance might contribute to this task. As we will show below, it would be possible to tell the story of Restore as if

more or less everything was a product of procedure and explicit reason, all taking place after, perhaps, some sort of cognitive breakthrough. This would be a way of demonstrating that nothing untoward took place. In this sense it might be a kind of loyalty to Restore, even if it makes a virtue of dissembling. We hope that the notion of happenstance helps us frame the ethnography of Restore independently of bureaucratic self-representation and more accurately: as lacking in a master plan, or formal mode of implementation, but as a sequence of highly local, happenstantial, events, links, and coincidences.

> In a discussion of the history of postwar therapeutic communities that focuses in particular on Claybury, Fussinger remarks:The adoption of the “therapeutic community"’ concept within any given psychiatric institution seems to have rested heavily on the goodwill of those in charge who, having read an article or visited a fellow institution where therapeutic communities has already been launched, felt impelled to implement the model themselves. If this was indeed the case, the modalities of dissemination were extremely informal. (Fussinger 2011:160)

This informal mode of dissemination sounds like happenstance. The role of chance itself is clear: the article might not have been read; the visit might not have gone ahead. But equally, we see the role of context. Although the reading of an article might be a chance event, not just any article or any reader could have such far-reaching effects. They must occur in a favorable or receptive context. Goodwill is required. The chance event must lead to plans that hold appeal to key actors, for example, who might know each other because of a sequence of chance meetings and the discovery of common interests. It may be thought that a particular chance event was lucky, in that it led to significant consequences. But luck is not intrinsic to the occurrence, but, rather, consists in its relationship to context. Our argument is that if chance is underplayed in ethnographic work on bureaucracy, these links between players, and between players, plans, and context, may be lost. In addition, even when they are attentive to

differentiating between bureaucratic self-representation and anthropological analysis, theories of bureaucracy tend to logically oppose routinized working to nonroutinized working. This creates a single, residual category containing what might otherwise be seen as heterogenous notions, such as trust, discretion, intuition, judgment, spontaneity. Part of the analytic work of the notion of happenstance is to illuminate how nonroutinized phenomena differentiate and highlight the role of luck playing out in a given cultural setting, without erasing or excluding other nonroutinized phenomena.

These days, now in my eighties and reflecting on my career and the opportunities that presented, I say that I just happened to be at the right place at the right time. How it is socially constituted is illustrated if I describe the early history of an institution I had a role in creating, known as Restore.

Whilst based in Oxford I had applied on a number of occasions to obtain a consultant post in other parts of England and had never been successful. Time was beginning to run out when a colleague suddenly died. He had been a very dedicated hard-working man, who had taken responsibility for a ward with patients who had severe and enduring mental illnesses and had taken the lead in providing psychiatric input to people living in the hostels for the homeless. His death left a tenured vacancy which I now filled. Relieved of a number of my previous day and general hospital duties, I now took on his ward and community responsibilities, and became a Rehabilitation Psychiatrist. This change of duties was to lead to the foundation of Restore.

Today, Restore is a successful mental health charity that offers support, skills-based training and education, therapeutic activity such as gardening, and coaching in eight locations across Oxfordshire. According to their 2017/18 Report, Restore had an income of

more than £1.6m and through it various programmes supported over one thousand people.[9] *The situation I found in the 1970s was very different. There was a virtual absence of any provision by the local authority or voluntary bodies to provide community programmes for people discharged from the psychiatric hospitals who continued to need support.*

The story of the creation of Restore begins with a chance encounter. Later ennobled as Lord Young of Dartington, Michael Young is now regarded as one of the greatest social entrepreneurs of the late twentieth century.[10] *Michael's oldest son from his first marriage, Christopher, had had life-long mental health problems.*[11] *This had required from time to time various forms of institutional care, and his parents were unsure of what might be for the best in the long term. Through social connections Michael came to hear of innovative community therapeutic activities, including the establishment of group homes and hostels, taking place in Oxford. He approached Mandelbrote, who suggested an initial trial admission to my ward at Littlemore.*

My first impression of this remarkable man, unpretentious, combining diffidence with authority, visibly interested in everything around him, and engaging with people naturally, stays with me. Through openness and curiosity, he came to understand a good deal of the working of the unit and of the hospital. Just as vivid is my first encounter with Christopher. Grinning clandestinely and sheepishly from the corner of his eyes, it seemed to me that Christopher was trying to make contact, express something about his internal

9. https://www.restore.org.uk/

10. Michael Young was an exceptional individual. As a young man he wrote the manifesto of the victorious Labour Party for the 1945 election. Later he was to found The Consumers Association and its magazine *Which*. He wrote a classic sociological text, *Family and kinship in East London* (1957) that had been recommended reading for my first professional exam in psychiatry and an influential (if misunderstood) satire *The rise of the meritocracy* (1958).

11. This fact is cited in the authorized biography of Young and is a matter of public record. See, for example, Briggs 2001: 17. In this paper we do not intrude on Christopher's privacy, but do briefly record Agulnik's personal impressions.

preoccupations. I found that he had a presence that commanded attention. What might be interpreted as an amused teasing, to me also conveyed immense sadness.

It remained unclear which setting might be best for Christopher in the long term, so Michael and I decided to visit Botton village a residential community in North Yorkshire.[12] *Botton was run by the Camphill Village Trust, based on principles drawn from the work of Rudolf Steiner. It was and remains an outstanding community in which all its residents take part in one of the many opportunities for work generated by the community itself. Michael and I were particularly impressed by the craft and horticultural work, and how the resident-staffed shop sold high quality produce and community-made articles to visiting members of the public.*

We thought that the village might not be best suited to Christopher's needs. It was also a very long way away from London where Michael and other family members lived. Nonetheless we were inspired by what we had seen and wondered to what extent the wide variety of work activities that we had witnessed might be adapted to the Oxford situation. On the way back we talked a great deal, and by the time we reached London late that evening had formulated a plan of how to bring something of what we had seen in Botton Hall to Oxford by creating a rehabilitation service which increased the scope of what was currently available.

In the "A" division senior staff meeting, I described my experiences on the visit. The first move was to form a multidisciplinary steering group. Michael was able to secure some start-up funding. The steering group supported the appointment of an independent researcher who was to review the total provision of work and rehabilitation therapy for the mentally ill in the Oxford area. The resulting report argued that there was a need to extend provision, and

12. https://camphillvillagetrust.org.uk/location/botton-village

that this might be done by establishing a small scheme. This would seek to harness on a voluntary and part-time basis otherwise untapped resources in the community. The report suggested that an independent charitable organization be set up, and a coordinator appointed to develop new projects, and link in with existing provision. We set about following the report's proposals. The then responsible Isis Group Hospital Management Committee agreed support to the level of £3000. With this commitment, it was possible to go the Mental Health Foundation, a large national charity, who matched that sum. A gift of £2,500 from a private donor meant we had a total of £8,500. This was sufficient to appoint a coordinator to take the project further.

The next step was to form a charitable company, and here Michael's expertise was invaluable. While the mechanics of this were relatively simple, we needed a name. This emerged over a glass of whisky at my home, brainstorming with an old friend Ted Smith, the inspiring senior tutor of the then nurse training school at Littlemore Hospital. We played with key words: "shop" or "store," as we knew that we would want to sell whatever had been produced; we preferred "work" and "worker" rather than "therapy" and "patient," and saw the key concept to be "rehabilitation." Today it would be called "Recovery." In the end we combined rehabilitation and store to make RESTORE which seemed immediately to tick all the boxes of the concept and provide an apt acronym for Rehabilitation Services Trust for Oxfordshire Re-employment.

From its beginnings, openness to happenstance set the tone of Restore and happenstantial events have hugely influenced its direction, scope, and success. Restore has been able to remain relatively institutionally flexible. In the late 1970s Restore was able to access a government initiative to reduce unemployment and use it to support and expand groups for people training in horticulture, woodwork, and screen printing. And Restore was able to relocate at an opportune moment due to a sequence of fortuitous relocations by larger

institutions. This is the essence of Restore: a context of openness of communication, opportunism, absence of hierarchical structure and flexibility of roles, always linked to focusing on harnessing and nurturing abilities, latent or overt, wherever they may lie.

Restore is now an accountable bureaucracy, regularly monitored and audited, locked into complex networks of institutions and bound into to competitive and highly scrutinized funding arrangements with the local clinical commissioning group. Agulnik's backstory highlights the contingency of its origins. Although he, and no doubt others, had a sense that people in Oxfordshire experiencing mental illness but living independently might benefit from a rehabilitation service, there was no formal statement of this, or higher-level policy steer or research. Within an accountable bureaucracy, good practice is predictable, routinized, impersonal, based on rule-following. The good bureaucrat has a distinct ethical style. Du Gay presents this as a major strength of bureaucracy:

> The ethical attributes of the good bureaucrat … are the product of definite ethical techniques and routines—"declaring" one's personal interest, developing professional relations with one's colleagues, subordinating one's ego to procedural decision making—through which individuals develop the disposition and ability to conduct themselves according to the ethos of the office. (du Gay 2000: 120)

The events we describe look rather different. What du Gay calls "procedural decision making" had a role in the creation of Restore, in that committees were formed and plans made. But the early inspiration was happenstantial: unplanned meetings of like minds, responsive, creative, eventually entrepreneurial, but not really displaying the ethical attributes of the good bureaucrat. There is no suggestion of anything improper, but Restore arises out of the particular and the local. The play of chance, which a good bureaucracy seeks to contain, was essential in the creation of Restore.

The operation of chance mediated local social and cultural formations. It did not appear outlandish, eccentric, or irresponsible, for example, to try to gain funding piecemeal for a locally organized rehabilitation institution that drew on the principles of a therapeutic community. The initial meeting between Agulnik and Michael Young, arose in part because of contacts Young had as a result of his schooling. The way that he envisaged creating a rehabilitation institution reflected his prior experience, which, as we have seen, included serendipitous opportunities to work in leading therapeutic communities at Claybury and with Mandelbrote at Littlemore. The trip to Botton Hall perhaps gave more clarity to these ideas, but, oddly, its location was also important, in that the long drive back to London gave time for plans to be thought through. A shorter drive might have restricted time for conversation leading, perhaps, to a failure to fully develop and push forwards plans for Restore. Michael and Agulnik were able to form a steering group, gain support from the local hospital board and a major mental health charity and make appointments because their ideas had a certain currency at the time. They funded a local piece of planning-oriented research but did not feel the need to refer to an evidence base outlining effectiveness, or value for money, or, indeed, safety. Neither did they seek an association between the planned institution and current funding themes or priorities. Instead, the formation of Restore reflected, amongst other things, local social and cultural capital, accessed and utilized in a rather arbitrary way, reflecting chance but not shedding social meaning. And this seems to have continued. Openness to happenstance appears to have been a key quality of Restore, a quality requiring distinct ways of working that feel less bureaucratic, at least in local understandings of the term. This way of working and organizing is linked to institutional flexibility: openness to happenstance enables an organization to be entrepreneurial and responsive.

However, chance and an openness to happenstance might also be taken to undermine institutions. This is because adherence to bureaucratic norms enables accountability and the

documentation of best practice, whilst the institutional fluidity described above indicates a less rule-bound or routinized way of working. Openness to happenstance might be difficult to differentiate from corruption and nepotism. However, we suggest that the events described above are a story of success. Happenstance is not necessarily the same as imprecision let alone malpractice. Rather, informal social contacts enable a kind of flexibility and creativity. Happenstance is associated with a different way of working that might be seen as having certain advantages. It utilizes existing social capital, for example. Young's contacts were critical in providing access to early funding and his organizational experience shaped the early days of Restore. In what might be described as a relatively free working environment, chance events and connections were resources that could be used. The following thinks through one way of theorizing working with an openness to happenstance.

Ecology, institutions, and fitness

Ethnographic approaches to bureaucracy have highlighted the epistemic shortcomings of formalized, routinized practice. The kind of simple, replicable, actionable categories suited to bureaucratic mechanisms fail to accurately and comprehensively represent the world. In a process dubbed "epistemic degradation" by Jerry Muller, bureaucratic knowledge oversimplifies and generalizes such that erasures or blindspots are produced (Muller 2018; Adams 2013; Keshavjee 2014). A reliance on simplified, rigid forms of knowledge leads to what Graeber calls the "structural stupidity" of bureaucracy (Graeber 2015). James C. Scott shows how it can result in catastrophic failures of state planning (Scott 1998). In this setting, happenstance is just one phenomenon amongst many that falls into a bureaucratic blindspot. However, we suggest that recognizing and theorizing chance events does more than just undo epistemic degradation. Rather, it suggests news ways of contributing to anthropological accounts of bureaucracy.

Investigations of how bureaucracies work beyond the epistemic limitations of their self-representations have tended to focus on the agency and autonomy of individual bureaucrats. Michael Lipsky famously argued that "street-level bureaucrats" such as teachers, police officers, social workers, or judges, exercise far-reaching discretion at work (Lipsky 2010). This discretion consists of selecting which rules and regulations to apply and which to ignore. According to Lipsky, street-level bureaucrats exercise so much discretion that they effectively make policy. Whether or not this is the case, of course, depends on how much discretion individuals really have in a given institution. Stephen Harrison argues that clinical discretion in healthcare in the UK is in decline, due to managerialism and the dominance of evidence-based medicine (Harrison 2015). But he also suggests that clinical autonomy was always rather more limited than it might have appeared. We might also be concerned about this characterization of discretion. Henry Mintzberg makes a distinction between "machine bureaucracy" where work is highly standardized, individual autonomy very limited, and management is relatively straightforward, and "professional bureaucracy" where work is more complex, and workers have a greater degree of autonomy (Mintzberg 1979). In a professional bureaucracy, standardization is achieved by training, which, in Mintzberg's term "indoctrinates" habits, dispositions, ethics, and epistemic preferences. Complex work may demand higher levels of sovereignty, but indoctrination can ensure that it remains patterned and predictable. In this case, the distinction between discretion and routinized working starts to blur as algorithms and procedures that might be located in standard operating procedures are internalized in the professional habitus.

Mintzberg and Alexandra McHugh coined the term "adhocracy" to refer to bureaucracies that are designed to be flexible and responsive by giving considerable autonomy to low level operatives (Mintzberg and McHugh 1985). Bernado Zacka suggests that the atrocities committed in Abu Ghraib arose out of this kind of institutional arrangement

(Zacka 2016). In the absence of rules or even clear guidance, coupled with little monitoring or evaluation, troops found themselves with considerable latitude but without the means to anchor their actions in reasoning. This is not the discretion of skilled street-level bureaucrats who weave a highly informed way through labyrinthine rules and regulations to achieve their goals. Indeed, Zacka suggests that "if an adhocracy is to be successful, it must equip its low ranking operators … with principles and exemplars that can serve to educate their judgement, and with the level of training and monitoring that is required to improve and correct the quality of such judgements over time" (ibid.: 52). Something like these conditions can be achieved in policing or small-scale military operations (Fassin 2013; Belkin 2012). Our ethnography does show Michael Young and Agulnik exercising a kind of discretion. Their actions are creative and entrepreneurial, rather than rule-bound and predictable. They have considerable freedom in formulating plans, although this refers more to the selective use of networks and resources than the application of rules and regulations. But in all these accounts, even if the meaning of discretion is not entirely stable, it always refers to aspects of agency. The same is true of Scott's notion of *metis*: "a wide array of practical skills and acquired intelligence in responding to a constantly changing natural and human environment" (Scott 1998: 313). It is true that Agulnik and Young were highly agential, that their agency includes skills and intelligence and reflects wider cultural forms and patterns (if not quite indoctrination). But what the notion of happenstance brings out is that this agency is applied to chance events, and these chance events themselves also reflect wider culture. Although relatively unbureaucratized working practices might have helped him evade oversimplifications and blindspots, our account describes a messier world where reasoning and skills, both routinized and flexible, interleave with chance events.

Onora O'Neill's short but resonant monograph *A question of trust* makes a contribution here by turning analytic attention towards ethics and affect (O'Neill 2002).

O'Neill argues that we currently live in a "culture of suspicion" in which expert judgment is not trusted and is substituted by institutional mechanisms that seek to constrain, record, and evaluate professional life. According to O'Neill, reliance on trust seems increasingly counterintuitive and imprudent, even irresponsible. Our ethnography shows the world before suspicion took hold. Young and Agulnik were trusted. They were not constrained by doubt or a need to demonstrate their credentials and ways of working at every turn. What is suggestive for our argument is that, rather than the insincerity of protocol, genuine social connections lead to working relationships built on trust. Agulnik got on with Young. If he hadn't, Restore would not exist today. Their ability to work together is a key element of the story, and this required high levels of trust among the key players. This points to a relationship between haphazard, unplanned and spontaneous events and the creation of trusting interpersonal relationships. An openness to happenstance both requires and enables trust and mutual understanding.

The notion of happenstance provides an innovative way of theorizing institutions that casts randomness and luck in a positive light. Indeed, there may be reasons to prefer institutions that have developed through happenstance. To see how, we adapt Ian Hacking's notion of "ecological niche." In *Mad travelers: Reflections on the reality of transient mental illness,* Hacking investigates the relationship between mental disorders and their social and cultural setting (Hacking 1998). We can't understand animal species, Hacking reminds us, without thinking of the context in which they live. If they are to survive, species need to be suited to their environment. Over time they evolve to do so via random mutation. And while "it requires a quite exceptional combination of circumstances for a particular species to emerge in a habitat. … Functionally similar species will evolve in similar niches" (ibid.: 55). This means we can understand why a species takes the form it does by examining its environment and identifying the vectors that might support the species. We can understand

features of a species in terms of their capacity to confer competitive advantage in a given environment.

Hacking applies these ideas to mental disorder. In his view, varieties of madness can have such an interactive relationship with their social and cultural environment that the form they take, and their very survival, depend on this relationship. When applied to institutions, this metaphor suggests that institutions grow in a particular environment, and through random processes, the environment can have a key influence on the nature and success of the institution. A feature of the notion of ecological niche is that it combines the idea of randomness and context in such a way as to bring out the reason why evolved institutions are different from designed institutions. Evolved institutions fit their context. The operation of chance provides a link with the local surround. Evolving institutions survive and grow because they are suited to local needs and preferences. Many of the links between Restore and the wider community have an element of chance: social connections, personal judgments, and intuitions. Each of these can be framed as undesirable, a source of bias and improper conduct, even of corruption. Ecological metaphors show that they might nonetheless be valuable because they resemble random mutations that are tested in a competitive environment. Like any successful institutions, Restore required complex vectors and reflects multiple processes. Chance events may lead to changes to an institution that, like random mutations, might or might not contribute to fitness and might or might not be reproduced over time. In other words, what differentiates Restore is that it evolved and found an ecological niche, and this arose primarily not as the exercise of a different form of reasoning but of praxis: an openness to chance and environment.

Conclusion

This paper proposes and develops the analytic term happenstance as a way of theorizing the social character of chance in individual lives and in the lives of institutions. Happenstance connects structure and agency. Our working method exemplifies happenstance. We met and chose to coproduce ethnography quite spontaneously, out of trust and what Marcus calls complicity. We had no masterplan, (or, indeed, a plan of any kind). But when we started work, we found that adopting a collaborative relationship seemed to have particular epistemic consequences. Coproduction brought out the role of luck in Agulnik's life. Unplanned, haphazard events played a larger role, and reasoning or strategizing a smaller role than conventional life histories might suggest. This leaves a diminished analytic space for agency and shows how agency and happenstance intermingle.

We suggest that happenstance is neglected in ethnographic work, but we do not claim that it is evenly distributed. Some people are more open to happenstance than others. It might be that Agulnik exemplifies unusual openness to happenstance. Acknowledging this could feel slightly transgressive in ways that hint at subtle features of our ethical world. At first glance, an unusual openness to happenstance might seem only to contains risks. It might undermine efforts to make sense of one's life through narrative. There might also be moral questions about responsible agency. A life with less planning, or forecasting, or preparedness might be represented solely in negative terms, as lacking qualities, perhaps even as culpably complacent. But our ethnography shows a person's openness to happenstance can be understood in positive terms as responsivity to context. Creativity and spontaneity might be framed as virtues, to be contrasted with the more familiar but divergent qualities of fidelity and consistency. In this light, we might see Agulnik's trajectory as exemplifying ethical flow.

The notion of happenstance shows how chance plays a role in the building of institutions. It suggests a way of approaching the complex and multifaceted relationship between institution and social context that builds on notions of discretion, autonomy and

trust. Our ethnography of the origins of Restore shows random events, social networks and allegiances playing out. Thinking in terms of happenstance contributes to a rich ethnography. It also suggests that evolving, responsive, local institutions may be analytically separable from more centrally planned, top-down institutions in ways that are both of current practical relevance and develop existing anthropological theory. Our work shows that chance connects institutions to their social setting. We can differentiate Restore from more top-down institutions, but not primarily in terms of opportunities for discretion, or levels of training. Instead, the ecological language proposed by Hacking provides a way of representing chance as something that is helpful to evolving institutions. The history of Restore is not just typified by an absence of formal bureaucratized procedure, but of chance events making a bridge with local context, and of a preparedness to act on such leads and see them as opportunities rather than diversions.

Recent debate suggests that these themes have a timely quality. Bruno Latour points out that good institutions are, by definition, the ones that succeed, and we know what success is, because it is how the good, surviving institutions describe themselves (Latour 1996: 78-79). But this risks missing the point. Current research in mental healthcare tends to focus on interventions, not the institutional context. Evidence-based treatments, delivered by transparent, accountable institutions are seen as the gold standard. There may be a cost in erasing the role of happenstance both in the origin of institutions and in clinical practice. In *Radical help*, Hilary Cottam describes how state welfare institutions in the UK are burdensome and ineffective, unsuited to the problems they are intended to address (Cottam 2018). The problem, she thinks, is that social care is excessively rigid and bureaucratized, creating a gulf between the professionals and they people they try to help. The solution, according to her, lies in a new kind of institution: small-scale, flexible, and participatory,

molded around local conditions and local needs. In our terms, Cottam advocates for an openness to happenstance.

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