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Three stories and a funeral: multiple narrative fictions exploring disAbility osteobiography in Roman Dorset

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Paleopathological study uses complex terminology, including medical jargon, to describe and understand a disease process and/or diseased individual. Such terminology might not be comprehensible and accessible to non-bioarchaeologists, including similarly affected individuals. This is especially the case when considering the interplay of disease with disability. How is disability defined, recognized and understood in past peoples? Can this be communicated using non-traditional mechanisms? Developing other or non-standard mechanisms for communication of bioarchaeological and paleopathological studies is vital for public understanding of and engagement with the discipline. ~~As has been highlighted elsewhere, such as for people of color, members of relevant affected communities have been neglected in research communication (e.g. de la Cova 2023; de la Cova et al. 2024; Watkins 2020).~~ This project studied a small cemetery assemblage from Roman Alington Avenue in Dorset. Osteobiographies were developed for those buried within the cemetery, and then, following grounding in disability theory and using a feminist standpoint theory approach, three interweaving fictive narratives were written about three specific individuals. One of these three ~~Within this cemetery population~~ was an individual previously diagnosed as having Langer type mesomelic dwarfism (Rogers 2002:154-157). ~~Osteobiographies were developed for three of the individuals buried within the cemetery, and then, following grounding in disability theory and using a feminist standpoint theory approach, three interweaving fictive narratives were written.~~ In writing the narratives, the implications of the constructions of possible bodily impairment and socially constructed views of disability were considered. Through this writing, focusing on bodily materiality and object-relations, the constructive effects of the interactions between the three people themselves and between them and their physical and social environments became clear regarding Roman views of disability, thereby producing new knowledge and understanding. This paper explores the potential of integrated narrative fiction to enable communication of the implications of putative disability in one past group~~, both to those inside and outside of academia~~.

As the study of pathological processes in the past, paleopathology commonly focuses on the recognition and identification of infectious disease and/or traumatic processes. It also considers the impact on the individual(s) affected with the condition, and more recently has started also to examine the repercussions of the condition on the wider community around (e.g. de la Cova 2023; DeWitte et al. 2023; Roberts et al. 2023). Following this approach, the medical condition is placed into a wider cultural context and its impact on the community is considered.

Disability is a more subjective term and is considered by the World Health Organization as comprising impairment, limitation on activity, and restriction on participation (WHO n.d.). The WHO Policy on Disability (2021:10) defines disability as "the outcome of the interaction between individuals with a health condition … and personal and environmental factors." This viewpoint has been contentious as, following it, disability cannot simply be reduced to a medical issue, as has been undertaken by some in the medical community, but rather is a social phenomenon (Oliver 1983; Shakespeare and Watson 1997; Thomas 2007; Tremain 2001, 2002). Such an approach highlights the role of the social context in the creation and maintenance of disabled identity. Unfortunately, this perspective can also render the putatively 'impaired' individual as passive throughout the discourse of their disability, as it does not necessarily consider that to be disabled is a highly personal, bioculturally embodied and lived experience that can be altered by numerous factors (Battles 2011;

Pritchard 2021; Roberts 2011; Shakespeare 2013), with the impact of impairment and impact of social barriers being hard to disentangle (Shakespeare 2013). "A person does not have a disability, but rather is disabled by external factors" (Pritchard 2021:7) and thus it is the complex interplay between the individual and the (social) environment that produces disability (Riddle 2013; Shakespeare 2013) with the key being the interaction between traits inherent to the person and the way in which those traits are affected by the surrounding environment (Riddle 2013).

Both the medical and social models of disability categorize disabled people as a distinctive group in opposition to the non-disabled, which can lead to the illusion that the identity trait is static. In reality, an individual can acquire a disability later in life, or adaptations can be made that can diminish some of the effects of a bodily difference (or 'impairment'). To combat this somewhat static perspective of disability, the acronym 'TAB' has been suggested as a replacement for the term 'non-disabled', with TAB being short for 'Temporarily Able-Bodied' (Battles 2011). In this way, and following a critical disability studies approach, disability is viewed as socially constructed and intersectional (Annamma et al. 2013; Byrnes and Muller 2017; Goodley 2014, 2018; Pritchard 2021; Shildrick 2020; Shuttleworth and Meekosha 2017; Wilkie and Kinkopf 2023). The very term 'disability' underpins an implicitly ableist framework (Goodley 2013, 2018; Schalk 2018) as the word stresses the inability of a person to undertake activities or to participate in what is considered to be normal social life for someone at that particular stage of their own life course. Although the binary and mutual dependency of disability (or dis/ability) provides a framing of ableism and disablism, individuals themselves live embodied and intersectional lives that occupy the liminal space between these categories (Annamma et al. 2013; Byrnes and Muller 2017; Goodley 2014, 2018; Schalk 2018; Shuttleworth and Meekosha 2017). Schalk (2018:6) has used (dis)ability to highlight the blurred, shifting and contextual boundaries between ability and disability but we prefer to rephrase the term as 'disAbility' to highlight each person's abilities and gives the individual agency, locating them on a disAbility continuum model. This model highlights that categories are not 'given' or fixed (Annamma et al. 2013) and understands that everyone has an aspect of their identity related to their body's ability, which is visualized on a spectrum of disAbility. A person's position on the spectrum varies contextually and repeatedly over the life course, as their body changes or their social obligations and environment alters (Backstrom 2012; Byrnes and Muller 2017; Pritchard 2021; Schalk 2018; Zakrzewski 2014; Zakrzewski et al. 2017; Zakrzewski and Evelyn-Wright, in press). Viewed using an intersectionality lens, disAbility may be explored in relation to other vectors of power such as gender (Pritchard 2021; Schalk 2018). Such an approach also places the affected individual into their wider community and renders them an active member of that community due to the reciprocal and entangled relationships among community members. We argue that paleopathology must move beyond its descriptive, analytic and prescriptive framework to consider such interactions as, like bioarchaeology more broadly (Buzon 2011; Zuckerman and Armelagos 2011; Zuckerman and Martin 2016), it is a social science. Furthermore, bioarchaeology focuses on past populations, but notions of what might be considered to be a disability vary not only contextually (Annamma et al. 2013; Goodley 2014, 2018) but also temporally, and thus what is considered disabling or impairing will vary by group and time period as both are constructed concepts (Byrnes and Muller 2017; Shuttleworth and Meekosha 2017).

~~When considering museum display,~~ Baxandall (1991) has suggested that museum visitors (viewers) make ~~both connections between and~~ interpretations and connections between ~~of~~ objects on display, such as with their makers, through the reading and interpretation of the labels given to objects ~~labels given~~, and argued that museum visitors occupy some intellectual space between that "object" and its museum label. Using ~~such~~ a similar~~n~~ approach, the "object" here is the paleopathology and the bioarchaeological body affected, with the label being the manner in which the explanation is provided to the intended audience. Baxandall (1991) suggests that display labels are not simply descriptive, but also include the curator's thinking about the object. Similarly, paleopathological writing is not simply descriptive, but usually includes differential diagnosis and the thoughts and/or

interpretation of the osteologist, and bioarchaeological writing includes the contextualization of the human remains with the wider archaeology and social knowledge, thereby including personal viewpoint and interpretation.

Although sometimes critiqued as being poorly defined and theorized (Appleby 2019; Hosek 2019; Hosek and Robb 2019), osteobiography has been used as a method to explore impairment and disability in the past (c.f. Boutin 2016; Boutin and Porter 2014; Hawkey 1998; Martin and Potts 2012). A critical feature of the osteobiography approach is the amalgamation of disparate data, but its focus on the individual can appear to occur at the expense of the wider community. As a form of microhistory, however, osteobiography can switch between individual and sample level analysis in order to move beyond the remit of a case study, leading to a relational and multi-scaler inquiry (Hosek 2019; Hosek and Robb 2019). Paleopathology, by its very nature, has complex technical terminology. Such terms are required for peer understanding and sharing of knowledge but may not be well understood by those outside the academic community. Critical disability studies calls "for a bioarchaeology that is critically reflexive about its foundational use of pathologizing nomenclature and remains open to alternate conceptions of impairment" (Shuttleworth and Meekosha 2017:28). Some of the terminological aspects may be overcome using an osteobiographical approach, but full comprehension still requires detailed precursor knowledge and understanding; an osteobiographical approach also permits varying conceptions of impairment to be explored.

Communication of disAbility in bioarchaeology

Despite the paleopathological and common bioarchaeological focus on disease and pathology, the implications on the individuals affected have rarely been addressed in terms of contextual social meanings and interpretations of disability due to the inherent fluidity and variability in expression and bodily experience. Furthermore, despite disability rights circles emphasizing 'Nothing about us, without us' (Annamma et al. 2013:13), with a few examples (e.g. Heath-Stout et al. 2022; Mackie 2025, Morris 2025), disabled voices within the field have been distinctly lacking and very rare.

Stone (2018:165) argues that "Anthropologists are scientific story-tellers," but these stories are selected and thus affected by the positionality of the bioarchaeologist or anthropologist (Muller 2020; Watkins 2020). We are both based at the University of Southampton, which, through the work of Stephanie Moser (e.g. Moser et al. 2002) has long been an active proponent of a community archaeology approach. We are actively engaged with and in disability groups and felt that there was a need to develop accessible forms of writing in order to better communicate the possibilities of the discipline and, from there, start to develop further research projects with members of those communities. Such a community approach has been highlighted by Muller (2020:208); "Bioarchaeologists increasingly incorporate public outreach programs and education that *not only* disseminate research results to local community members, but also collaborate on *how to conduct* the research *prior* to its commencement." The research described here was undertaken following discussions with disability groups and people who consider themselves disabled, including an individual with an unknown form of dwarfism. Given our situated experiences, the creation of an accessible research output was felt vital at the very outset of this study of disability in the past. Additionally, we hoped that our work might contribute to a scholarship embroiled in an ongoing fight to improve the accessibility and inclusion of disabled people, whether visible or not (Crowther 2007; Dolmage 2017; Milner and Kelly 2009; Rieser 2017).

Fictive narrative writing in archaeology

Fictive narrative writing has a long history of use in archaeology, particularly to foreground the stories of marginalized groups typically overlooked in more traditional academic outputs (van

Helden and Witcher 2020a; 2020b). Feminist archaeologists, such as Janet Spector (1993) and Laurie Wilkie (2003), were among the first to challenge dominant academic narrative styles and demonstrate how literary forms can be used to create credible academic work (Bernbeck 2015). Since then, there has been a steady flow of work that utilizes creative literary forms. In Roman historical discourses, creative writing has been used to great effect in very different ways. Aasgaard (2015) used fictive writing to explore the experience of Constantinople from the viewpoint of a child, exploring the material culture and architecture from the shorter standpoint, whereas Brooten (2015) incorporated insights gleaned from modern experiences of slavery to inform fictive narratives that were used as thought exercises to consider the ramifications of Early Christian codes on the complex identities of the Christian enslaved in the ancient world. In contrast, bioarchaeology and palaeopathology have been slower to create biographical stories, instead tending to focus on population-level research questions (van Helden and Witcher 2020a), although Alexis Boutin (2016) and Christian Laes (2021) present notable exceptions. Both have created fictional life stories based on evidence obtained from human skeletal remains exhibiting unusual impairments, thereby demonstrating the effectiveness of the approach in the field.

The use of fictive narrative in academic archaeological research has not been without opposition. Imaginative storytelling has been dismissed as solely a public engagement tool (Hosek and Robb 2019) or as fanciful misunderstandings or misrepresentations of the past (van Helden and Witcher 2020a). Concerns raised have ranged from issues of anachronism (Bernbeck 2015; van Helden and Witcher 2020b) to the sanitization of the past (Witcher and van Helden 2021), associated with fears that creative writing patronizes or tyrannizes audiences (van Helden and Witcher 2020a). Some scholars have argued that imaginative writing weakens the academic's position as authoritative, objective disciplinary specialists (van Dyke and Bernbeck 2015; Witcher and van Helden 2021) or that the approach may be labelled naïve and lacking academic rigor (van Helden and Witcher 2020b).

Ethical concerns have been raised regarding imputing emotions, feelings and thoughts onto people who lived and cannot speak for themselves (van Helden and Witcher 2020a). The stories created tend to reflect the interests of the modern audience, or at least its author, thereby potentially exploiting the lives and experiences of past people in the service of our own. This criticism could extend to all writing on the past, not just fictive narratives (Witcher and van Helden 2021), and fictive narrative may be explicitly employed to encourage empathy with past people (Boutin 2019; Boutin and Callahan 2019), although there is discussion as to whether empathy with the subjects of archaeological study is beyond our remit and ability (Harris 2010; van Helden and Witcher 2020b). Furthermore, empathetic writing has been argued to overlook genuine cultural differences between present and past societies, and even to distract readers from their complicity in an exploitative colonial system (van Helden and Witcher 2020a; 2020b). It is generally reasoned that emphasizing shared humanity, in spite of the ethical pitfalls detailed, is preferable to dehumanizing the past and the consequences that can manifest as a result, such as the commodification of human remains (van Helden and Witcher 2020b). As well as potentially offering insight into past behaviors, positional empathy is a powerful motivation for research; both authors have personal experience of close family members with disabilities. The research into disability in the past of one author (SEW) was motivated by their own experiences growing up with a disabled sibling whereas the other author (SRZ) has experienced disability in close family members (mostly) developing later in life. Fictive narratives can contribute to a more explicit communication of the role that empathy plays in research. Acknowledging our empathy for past people can form part of a "situated knowledge" approach, as advocated by Donna Haraway (1991), thereby encouraging researchers to be open about their partiality in research. We have also followed a feminist standpoint theory approach, including materiality and object-relations theory, following Susan Hekman (1997) and Sandra Harding (2004), especially in terms of disabled individuals being subjects of knowledge, with embodied and varying experiences of the world. Similarly, following Haraway (1991), in terms of

agency, we believe that meaning arises from interaction both between participants and between participants and non-human matter.

Despite criticism, there are growing calls to harness narrative storytelling techniques still further during the dissemination of scientific research (van Helden and Witcher 2020a) because fictive narrative writing has benefits for both the writer and consumer. In the current study, fictive narratives were explored to help integrate multiple different datasets together, as stated by Alexis Boutin (2012:204): "The use of fictive narrative discourse allows me to weave together all of these contextual sources in a holistic way that enhances and enlarges the stories told by artifacts and skeletal remains." Producing fictive narratives tends to emphasize which areas we know well, areas we know little about, and even areas yet to be considered (van Dyke and Bernbeck 2015; van Helden and Witcher 2020a). Information gleaned through narrative and non-narrative forms may be processed differently, so adopting a more creative writing style can give new awareness and insight into even familiar data and material (Witcher and van Helden 2021).

Multiple fictive narratives

A key concern voiced by critics of the fictive narrative is that fiction may be mistaken for scientific 'fact' (van Helden and Witcher 2020a). Including citation in a creative medium is a challenge. Boutin (2012) used footnotes to signpost the evidence to support the various points in the story; this mechanism offers clear sourcing while minimally disrupting the flow of a story and is used in the narratives below. Harris (2010:11), in his discussion of historical emotions, describes the limited evidence from the ancient world as a few lines on a canvas "which a clever artist can make into a picture of an angel or a crocodile almost at will." In other words, the same historical evidence can be interpreted in multiple ways, creating different impressions of the past.

The ability to explore different interpretive versions while being able to emphasize the uncertainty in the evidence is particularly useful in the context of paleopathology, such as when inferring a pain experience. Pain, the discomfort caused by biological insults, is often an unpleasant part of the experience of an impairment (Martin and Harrod 2016). Pain is a universal but extremely variable human experience, modulated by individual variability, biological and cultural factors (Kjellström 2010; Martin and Harrod 2016). Past lives, with their potentially limited recourse to pain-relieving medicine, are thought to have been full of "unavoidable and mainly unappeasable pain" (Harris 2016:35), with uncertainty regarding the associated pain tolerance. The difficulty is that pathological lesions do not directly correlate with pain experience. For example, of 319 individuals with radiological evidence for knee osteoarthritis, from a sample of nearly 7000, less than half (47%) reported pain (Hannan et al. 2000:1514). Such kinds of discrepancy may lead bioarchaeologists to be conservative in their interpretations, thereby only inferring a pain experience in certain cases, and inevitably overlooking other cases. The multiple narrative approach presented below may offer an alternative that provides an opportunity to explore more than one interpretation of the evidence and more than one possible pain experience.

We have developed three intertwining narratives with three different viewpoints. There were two separate rationales for this. The first was that having multiple narratives might address concerns raised about the potential lack of transparency in fictive narratives regarding researchers' interpretations and choices. Having three interwoven narrative stories developed, depicting the same scene but offering slightly different interpretations and perspectives, avoids potential comparison with the so-called 'just so story' genre. Providing three separate but enmeshed interpretations emphasizes the uncertainty inherent in the process openly. Following Aasgaard (2015), the aim of these narratives is not to create a 'real' reconstruction of the past, but rather plausible and accessible interpretations. The second rationale was that by using different voices, different aspects of personhood (sensu Fowler 2004), e.g. the Bioarchaeology of Personhood model (Boutin 2016; Boutin and Porter 2014), might become clearer. The three individuals chosen for the

development of the narratives were selected from the range of ~~'more traditional'~~ osteobiographies developed for individuals from the cemetery so that embodied structural constraints and intersectionality could be highlighted. This would enable the actual embodied experience of varying levels of putative impairment and disAbility to be explored, with an additional hope that stereotypes and tropes could then easily be dismantled.

Alington Avenue: The case study

Alington Avenue is a cemetery site, excavated in 1984-1987, located less than a kilometer southeast of the town walls of Durnovaria (now Dorchester) in Dorset, southern England (Fig. 1), adjacent to a road approaching the town (Davies et al. 2002). There is evidence for continual human use of the site from the Neolithic through to the Medieval period. There were the 91 extended inhumation burials dating to the Roman period, of which, 37 comprise well preserved skeletons, aged over one year old at time of death and dated to the third-fourth century A.D. The skeletons were recorded according to the standards set by Brickley and McKinley (2004), adapted to incorporate transition age estimation methods (Boldsen et al. 2002), allowing for older age categories to be identified (for full details see Evelyn-Wright 2022). Most of the graves had little in the way of elaborate grave structures or goods (Davies et al. 2002). Alington Avenue lacks secure dating based on artefacts or stratigraphy, but the later coffined burials have been relatively securely dated to the third-fourth century A.D. (Davies et al. 2002).

INSERT FIGURE 1 AROUND HERE

All well-preserved skeletons from the site were studied with basic osteobiographies written. ~~and~~ ~~t~~Three individuals from the site were selected for more detailed osteobiographies, focusing on impairment and disability and their variation over the life course as the person aged and the social expectations placed upon them changed (Evelyn-Wright 2022). The three osteobiographies situated the individuals within the context of their cemetery assemblage and archaeological environment, exploring how common their pathologies were compared to others, how their funerary treatment compared to their peer group, etc. These three individuals then became the topics of three fictive narratives that explore the funeral of one of them (AA852) at Alington Avenue from three different viewpoints. The presence of all these individuals in this event is fictional but possible. Due to dating uncertainty, ~~and~~ the individuals may not actually have been contemporary and so their simultaneous presence at the burial is a possibility rather than certain. The aim is not to create an accurate scene, but to explore the possible interpretations of the data in an accessible way. These three individuals were selected for more detailed osteobiography because of their relatively complete skeletal records and their potential for thought-provoking considerations of what might be considered impairment or disAbility in one specific Romano-British locale. The different voices used in the narratives aim to explore and potentially instigate different reactions in the reader.

INSERT TABLE 1 AROUND HERE

Skeleton AA852

The first person studied in detail was AA852, a much older biological male whose right arm was amputated above the elbow shortly before death. The amputation process removed the forearm and over 50% of the humerus. The distal portion of the humerus, radius and ulna from the right arm were not found in the grave. The transverse surface of the distal end of the remaining humerus shares coloration with the rest of the bone and the surface is not rounded, jagged or rough (Redfern 2010). The regularity of the transverse distal end of the remaining humerus, alongside the serration marks suggests that the surface was made by a sharp instrument, likely through a deliberate

amputation process (Evelyn-Wright 2022; Redfern 2010). There is no evidence of healing or infection, which might be expected to be visible between two days and two weeks after injury (Waldron 2021). This lack of response suggests that the individual did not survive long after the amputation process, providing a strong possible cause of death. The reason that necessitated the amputation is unknown, however punitive reasons seem unlikely as amputation as punishment was seldom used in the Roman world (Mavroforou et al. 2014), and, when practiced, normally only involved the hands or feet, with the amputee expected to survive the ordeal. The theory that amputation was necessitated for medical reasons thus seems more likely (Evelyn-Wright 2022). It is hypothesized that the traumatic death led to changes in the burial rite afforded AA852. While the burial is primary in nature and located within the main burial grouping, like the majority of the Alington Avenue assemblage, two elements of AA852's burial were out of the ordinary compared to the rest of the cemetery context. The body was positioned prone and was buried with a dog. Both aspects of the burial were minority rites, although not unique to AA852, with one other person at Alington Avenue receiving similar burial treatment although AA852 was the only individual to receive both. Thus, the possible link between AA852's burial treatment and his recent trauma was explored in the fictive narrative, thereby including discussion of the idea of a disabled corpse and the impact of a visible impairment at time of death on funerary rite.

Skeleton AA766

The second person studied was AA766, a biological female aged 18-20 years at time of death, whose skeleton exhibited evidence of dwarfism. The individual's stature has been estimated to be 1.23m (Evelyn-Wright 2022:97), following Trotter and Gleser (1952, 1958). It should be noted that standards relating to the stature estimation of adults with dwarfism have yet to be developed (Traversari et al. 2020). Despite her height, all the epiphyses were fused at time of death, indicating the individual was fully grown. AA766 is estimated to have been 36cm shorter than the Roman British female average of 1.59m (Roberts and Cox 2003:396). All the elements of skeleton AA766 are reduced in size, but there is variation as to the extent of growth curtailment, with the middle segments of the lower limbs and jaw being most affected. Differential diagnosis points towards Langer type mesomelic dwarfism as a best fit diagnosis in this case (Evelyn-Wright 2022; Rogers 2002:154-157). The skeleton also exhibited other disease (see Evelyn-Wright 2022 for full details), including lumbar lordosis, spondylolysis and Schmorl's nodes. Lumbar lordosis is known to be associated with dwarfism (Langer 1967; Waldron 2021:276), and is also linked with Schmorl's nodes and spondylolysis, as exhibited in AA766 (Been and Kalichman 2014:93). Schmorl's nodes were found throughout the entire lower spine (vertebrae T12, and L1 through L5), with spondylolysis evident in L5.

The fictive narrative writing process affords the researcher an opportunity to merge multiple datasets together. This advantage was used particularly effectively for this person. Clinical data concerning Langer type mesomelic dwarfism and the condition's development, through childhood, adolescence, and adulthood (Langer 1967), allowed a rare opportunity for an impairment's physiological progression to be mapped alongside a Roman female life course. To enhance this narrative further, data accrued from interviewing a similarly affected person (see Evelyn-Wright 2022), and anthropological writing from people with medical conditions resulting in a similarly shortened stature (e.g. Mairs 1996; Moneymaker 2022) allowed incorporation of some experiential, mental and social aspects of the impairment that cannot be accessed through osteoarchaeological evidence alone. Although we use the medical terms 'dwarfing' and 'dwarfism' here, this paper does not call the affected individual AA766 a dwarf as some individuals with achondroplasia have suggested that this essentializes their short stature (Kruse 2003)~~; some affected people preferred the phrasing 'little people,' but this was also felt by us to be patronizing~~, and so we simply use

'person/people with dwarfism' following Pritchard (2021). The construction of the fictive AA766 story incorporated osteological, archaeological, clinical, and anthropological data sets.

Skeleton AA210

The final example focused on AA210, the skeleton of an older biological male, aged over 60 years at time of death. The skeleton exhibits a complex paleopathological record, accrued over a lifetime. At least two traumatic events in AA210's lifetime are testified through the presence of three fractures in the hand, arm, and ankle, all on the right side. The second metacarpal of the right hand shows a well healed, but poorly set, midshaft, oblique fracture, which would have caused a notable deformity at the base of the index finger (Redfern 2010:459). A well healed fracture is also present in the distal shaft of the ulna. Both these injuries are often associated with interpersonal violence, with the hand fracture being a common boxing injury (Lovell 1997:164) and the arm fracture meeting the requirements for a parry fracture (Judd 2008). The right fibula exhibits an oblique fracture in the lateral malleolus. In contrast to the hand and arm fractures, the ankle fracture type is commonly the result of an abduction and/or lateral rotation, such as a twisted ankle (Lovell and Grauer 2019:364); there was associated active periosteal changes at time of death. The levels of healing evident within the hand and arm fractures are different from the ankle, pointing toward at least two traumatic events. Osteoarthritic lesions were found bilaterally in both femoral heads, in T11, T12, and the lumbar vertebrae. Schmorl's nodes were also present in T11 and T12. AA210 had a depressed fracture to the cranium and additional fractures in the nasal bones and the right mandibular condyle (Redfern 2006:193). Finally, of the 26 surviving teeth sockets (the anterior of the maxilla with the incisors and canines were not preserved), AA210 lost antemortem three 2nd premolars (exception being the maxillary left), all four 1st molars, both maxillary 2nd molars and the right-side maxillary 3rd molar. Additionally, the mandibular left second incisor and first right are worn to the root. AA210 lost a substantial number of teeth by time of death and lacked the nine to ten contacting pairs of upper and lower teeth required for minimum functional dentition (Gotfredsen and Walls 2007). The paleopathological lesions exhibited in skeleton AA210 are not uncommon; AA210 is one of the 49% of Alington Avenue skeletons with spinal pathology evident (Evelyn-Wright 2022:133). The osteobiography of AA210 provided an opportunity to explore the more common alterations in the context of disability and the relationship between impairment and older age.

Fictive narrative 1[1]

The group was troubled — haunted by the sounds of his pain. The once proud man, who had lived through so much, had screamed in agony when the doctor had to take away his precious right arm; a last resort to try to save his life. But all that anguish had been in vain.[2] How could someone, who had died in so much pain, be able to rest peacefully now? It was this question that had so unsettled the community and had bought them here, hoping that after this day, a sense of normality could be restored.

[1] This narrative focuses on the burial of skeleton AA852 and so is in a narrator-like or community voice.

[2] The man being buried had undergone a right arm, above the elbow, amputation shortly before death. The amputation was likely a medical procedure, but the individual did not survive long without their arm given the lack of any bony response.

The somber procession obediently followed the bier[3] bearing the body across the ancient landscape. They awkwardly picked their way up and down the mounds and ditches built by their ancestors long ago,[4] wafting incense[5] and whispering their heartfelt prayers to an array of gods, old and new. Held aloft, the seemingly floating corpse was, at once, horrifying to look at and impossible to turn away from. Despite the efforts of his wife, dressing him in his best garb and shoes, making him look the best she could, he still looked battered, a shell of the man he had been just days before.[6]

Wooden markers signposted their route, few at first, but steadily growing in number as they neared their destination, marking the graves of others, gone before.[7] A small dog bounded along carelessly, incongruous among the assembly. Tethered on a string held by a solemn slave,[8] the stray animal was oblivious to the significance of the day and its own fate. At the back of the group, was a young figure dressed in the tunic of an unmarried Roman woman, just about keeping up with the slow pace of the procession. Her unusually small stature and legs made the uneven ground particularly challenging.[9] Nevertheless, she persisted, keen to see how this would end.

Finally, they reached the spot, in the heart of the village of the dead. The hole had already been dug and the coffin set inside. There had been much debate about how to placate a malevolent spirit after such a violent death. The prayers, location, grave dress, body position and ritual had all been carefully chosen, yet, even then, the speaker was nervous, rattling through the prayers as quickly as he could. The body was lifted gingerly from the stretcher into the ground. No one wanted to touch the stump of the man's right arm, as if the contact would, somehow, still hurt him. As they positioned the body within the hastily bought coffin, it became clear that the man was too tall for it. The legs had to be bent to fit in.[10] The body was laid face down, to confuse any returning ghost.[11] But

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[3] Transporting a body to the grave site using a bier seems the mostly likely scenario. Coffins can weigh around 200kg (Booth 2017: 200); this is a heavy burden to carry, particularly over an uneven terrain like the Alington Avenue cemetery.

[4] The burials at Alington Avenue were dotted around pre-existing prehistoric earthworks, including a long barrow, ring ditch and D-shaped enclosure (Davies et al. 2002). This is not unique to Alington Avenue and is seen as a community's attempt to create relations to perceived ancestors (Esmonde-Cleary 2000; Pearce 2011).

[5] Sculptural reliefs from Rome show the use of incense to disguise decomposition odors during a funeral (Hope 2017).

[6] Funerals tended to take place 2-3 days after death in the Roman world (Horn 2017). There is no evidence for a funeral industry in Roman Britain, so it has been asserted that female family members prepared bodies for burial (Graham 2009; 2011; Hope 2007). Hobnails from a pair of shoes were found in the AA852's grave, which along with anthropologie de terrain analysis points towards individual AA852 being clothed and shod at burial.

[7] The lack of intercutting grave cuts at Alington Avenue alludes to the presence of grave markers in a perishable material (Davies et al. 2002).

[8] The Roman world was a slave empire and Roman Britain was no exception (Redfern 2018). There is no direct evidence of slaves at Alington Avenue, nor is there any indication of status or wealth that might make slave ownership more likely. Slaves have been shown, however, to have key roles in sacrifice preparation and process (Osborne 2017; Warrior 2016; Weddle 2013).

[9] AA766, the focus of the second narrative, is an attendee at the funeral. She was a young woman with Langer type mesomelic dwarfism. She is thought to be an unmarried woman as she was on the cusp of marital age at time of death (Table 1).

[10] AA852 was found in a flexed position which has been interpreted as the result of a too small coffin space for the individual.

[11] To confuse a returning malevolent spirit has been postulated as a reason behind prone burials particularly in the case of violent or sudden death like AA852 (Hope 2014; Shay 1985; Weekes 2016).

this was not enough; a sacrifice was needed, to ensure the community's safety. The slave brought the small dog, cradled in his arms, to the graveside and produced a sharp knife that he had carefully concealed within his tunic. The speaker's voice rose to a crescendo and there was a glint of metal as the blade was swiftly drawn across the animal's throat.[12] The crimson blood gushed over the slave's robe, soaking him to the skin as he cradled the little creature until it was still. He visibly shook with grief as he lowered the small body to lie at the feet of his new master. Everybody said that this sacrifice would please the gods of the underworld. The dog would guide this soul to its new home and, in so doing, protect those left behind.[13]

The sacrifice signaled the end of the funeral and people slowly withdrew, the young woman again trotting to keep up with the crowd. The close family remained to seal the coffin and cover it with earth. They would be back in nine days to revisit the site, to feast and check that all was well.[14] The people were still troubled, but they had done all they could. What the future held, only the gods knew.

Fictive Narrative 2[15]

I wish they would slow down a bit. Even as the solemn procession carefully picks its way across the increasingly uneven ground of the necropolis, I still feel like I'm trotting to keep up.[16] I have to jump out of the way of a swinging elbow, a persistent hazard when you are this height.[17] Being invisible to people however is preferable to their stares.[18] Strangers unashamedly scrutinize my small stature, my large hands, my strange gait, my prominent backside, whispering behind their hands. I feel self-conscious, but I act defiant. I once heard a stranger in the market say that they would have exposed me at birth if they had had a child like me. "What kind of future could she possibly have? Who will marry her?"[19] I struggled to hold back tears until I returned home. My mother had found me

[12] Slaves were a part of everyday life in Roman Britain and performed important roles in sacrifice rituals (Redfern 2018; Osborne 2017).

[13] AA852 was buried with a small dog. Contrary to narrative one, in this story the connection between AA852 and the dog was entirely postmortem. There is evidence for the ritual significance of dogs in Roman Dorset (Morris 2011). In this instance, the dog is interpreted as a guide to help the deceased to cross over to the afterlife (Smith 2006). The dog could also be interpreted as protecting the living from the potential unsettled spirit, which compliments the theory behind the prone burial provision (Smith 2006).

[14] In Roman Britain there is evidence for the Cena Novendialis, a grave-side feast occurring nine days after a burial (Hope 2007; Weekes 2016).

[15] This narrative is focused on one woman attending the funeral, but is written in her voice.

[16] The cemetery at Alington Avenue was developed around pre-existing Bronze age earthworks (Davies et al. 2002). Although the ancient ground surface does not survive, it is possible to surmise that the earlier monuments would have created an uneven terrain to walk upon. Matching the walking pace of other people was mentioned as a difficulty experienced by someone of a similar height to AA766 (Evelyn-Wright 2022; Pritchard 2021).

[17] People of similar stature of AA766 and wheelchair users have reported similar incidents (Evelyn-Wright 2022; Kruse 2003; Mairs 1996).

[18] Staring is a common experience felt by people with visible impairments and is especially experienced when unexpected and/or seen for the first time (Garland-Thomson 2009). Furthermore, anything that appears too small "assaults our sense of what is proper" and commonly leads to stares (Garland-Thomson 2009: 162; Pritchard 2021: 69) or other unwanted attention (Kruse 2003).

[19] Marriage has been identified as an important rite of passage for Roman women (Harlow and Laurence 2002; Allason-Jones 2005). Allason-Jones (2005) reports that the youngest bride in Roman Britain, according to

weeping in a corner. She told me that in Rome, rich, famous men, like the first emperor Augustus, had paid a lot of money to have someone like me in their household.[20] I don't know if this is true, but it ~~comforts~~ reassures me.

Still, I wonder about my future. I am still young, but will I ever find someone to marry? I once saw a bronze statue of the Goddess Minerva at Aquae Sulis.[21] In the dense crowds, I struggled to get a view, until I was directly in front of her. I ran my hands over the lettering on the base.[22] The statue's beautiful, proportioned grace was perfection.[23] Next to her, my hands look strangely large, as my forearms are so small. Even bronze clothing clings and cascades down her figure in a way real fabric just does not on me. My bottom sticks out, making my dresses sit ~~funny~~ differently on my body.[24] I saw that statue and thought "that is not me. I will never be like that."[25]

I am brought back from my musings by the feeling of long, wet grass around my knees. I lift the hem of my dress and refocus. I notice the first of the wooden grave markers of the necropolis, acting as beacons along the route. These outliers seem lonely; I hope I never end up out here. [26] I can smell the sickly-sweet incense and hear vague snatches of mournful laments and the faint whimpers of a dog, carried by the wind from further ahead.[27] The eerie sounds seem to feed the atmosphere as we dutifully follow the bier bearing the body of our friend.

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known epigraphic data, was 19, meaning AA766 was on the cusp of marital age. Exposure and infanticide were practiced in the Roman world, but it is uncertain to what extent (Southwell-Wright 2013; 2014). Exposure was part of the founding myth of Rome, so it is thought that the practice was well-known.

[20] Several Emperors and high-status Romans did have people with visible disabilities, like dwarfism, as slaves or 'entertainers' in their household and there was a high demand for them (Garland 2010). Modern cultural stereotypes of shorter-statured people are multifaceted, but tend to include unflattering characteristics, including childlike, incapable, as well as 'humorous,' which could be interpreted in many ways (Heider et al. 2013)

[21] We imagined this scene to have involved the known statue head from Bath (Aquae Sulis) which is believed to have been part of a life-size cult statue (Cunliffe and Fulford 1982). Bath had a reputation that extended beyond British shores (Gesler 1998) and the town of Dorchester, in close vicinity to the site of Alington Avenue, is directly connected to Bath by the road network.

[22] This interaction mirrors those discussed by Ray Laurence (2007) looking at children's experiences of similar architecture in Pompeii afforded to them due to their shorter stature.

[23] Lisa Trentin (2015) describes how ancient statuary invokes the viewer to compare their own bodies to those artistically rendered. We imagine the effect as similar to the readers of modern fashion magazines comparing themselves to the idealized, air-brushed models.

[24] People with dwarfism report having difficulty finding clothing that fits them and their proportions (Moneymaker 2022). AA766 had a curvature in the lower spine, caused by lumbar lordosis, a condition associated with dwarfism (Langer 1967; Waldron 2021: 276). Lumbar lordosis pushes the supero-anterior portion of the pelvis forward (i.e. hips), making the rear stick out behind (Morrison and Gabbey 2023).

[25] An almost direct quotation from an interview with a woman of similar height to AA766 responding to modern magazines (see Evelyn-Wright [2022] and Pritchard [2021]).

[26] Most of the graves at Alington Avenue were part of a central cluster that developed in close alignment with the pre-existing D-shape enclosure dating to the Bronze age (Davies et al. 2002). There were, however, four graves that were located separately (Davies et al. 2002). While there is no surviving direct evidence of grave markers at Alington Avenue, the lack of intercutting between the graves suggests their positions were marked (Davies et al. 2002).

[27] Valerie Hope (2017) has reconstructed the sensory landscape of the Ancient Roman funeral which included the use of incense and musical laments.

He had died suddenly. My father refused to tell me the details of the incident, even though I pressed him, but nothing could block out the sounds of that ill-fated surgery.[28] An elder said that sudden deaths like this cause the ghostly spirits to be restless and we needed to protect ourselves. The community therefore decided that, in the circumstances, the body needed to be buried quickly and face down.[29] I helped the other women wash and clothe the battered remains, which was a difficult task as the corpse had become rigid.[30] The arm looked so odd, ending in a stump just below his shoulder. The rest of the arm is still missing. Only the gods know where it has gone.[31]

Now here we are at the center of the burial-ground, and we encircle the already prepared grave with the open coffin waiting inside. The elder continues to implore the gods and our ancestors for our friend and to protect us from restless spirits.[32] The bier bearers lower the body to the ground and begin to cram the prone corpse awkwardly inside the too-small coffin. It does not look the most comfortable or dignified of resting places.[33] A man leads the whimpering dog up to the grave side. I feel a pang of compassion towards the vulnerable little creature; the dog was the old man's faithful pet, who has descended into melancholy on the death of his master, refusing to leave his side, to eat or sleep. His wife decided that he should be with his friend in death as in life.

The cloud of incense engulfs us, stinging my eyes and making them water. Through my blurred vision, I see the flash of the knife raised high and I squeeze my eyes tight shut. There is a small yelp and the dog is dispatched. I rub my streaming eyes with the palms of my hands and look up to see the little dog placed in the coffin at the feet of his master.[34]

The funeral ends quickly. People are scared, eager to get away and put as much distance as possible between themselves and this place. As I turn away, I wonder about the future. One day I will belong here, within this ancestral heart land, but hopefully not for a long time to come.[35]

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[28] The imagined funeral is that of AA852. The individual experienced a, likely medically necessitated, amputation of the right arm above the elbow.

[29] There is evidence for the belief in ghosts in the Roman world (Esmonde-Cleary 2000). Prone burial (face-down) is an atypical burial position, which was thought to be able to confuse a malign spirit (Milella et al. 2015; Shay 1985). People who died violently or suddenly, like AA852, have been identified as more likely to be the recipient of irregular burials, perhaps as they were seen as more likely to leave behind a malevolent spirit (Hope 2014; Shay 1985; Weekes 2016).

[30] There is no evidence for a professional undertaker industry in Roman Britain (Phillpott 1991). It has been suggested therefore that the immediate family of the deceased were responsible for the preparation of a body for burial, particularly women (Graham 2011; 2015). The narrator has described the effects of rigor mortis, occurring between 2 and 36 hours after death.

[31] There is no evidence that the amputated arm was buried with AA852, despite being removed shortly before death.

[32] The location of a cemetery on the site of prehistoric structures is interpreted as a community fostering relations with ancient ancestors (Esmonde-Cleary 2000; Pearce 2011).

[33] The skeleton was excavated from a narrow grave cut with flexed legs, alluding to the use of a coffin that was too small for the individual (Evelyn-Wright 2022).

[34] The skeleton of a small dog was found in the grave with AA852, lying in direct contact with the right leg. In this narrative, we explore the idea that the dog was a beloved pet. Dogs have been included as representations of fidelity and loyalty in iconography from Roman Britain. Dogs were kept as pets in the Roman world and written accounts also allude to the killing of pets on the death of their owner so that they could be together in the afterlife (Toynbee 1971; Smith 2006).

[35] AA766 was buried at Alington Avenue, a short distance away from AA852's grave site.

Fictive narrative 3[36]

"I wish they would slow down a bit," he thought, as he struggled to keep sight of the bier carried ahead.[37] His ankle was swollen and hurting him, making him limp like an old man.[38] He looked down at his body with frustration; his ankle had proved a persistent aggravation since his fall, months and months ago. "Why wasn't it healing?" he thought. He remembered when he had broken bones in his arm and hand in a fight.[39] The army doctor had patched him up well, leaving little more than a wonky knuckle on his right hand to tell the tale.[40] He cracked his knuckle, in that way that set his wife's teeth on edge and grinned at the remembrance of the reckless encounter and that punch; "you should see the other guy" he thought to himself. He had been young, strong, and fearless then, but now … His ankle twinged, snatching back his attention. It particularly aggravated him at times like this. He was walking on the damp grass, across the mounds of the cemetery ground, following the trail he had followed so many times before.[41] The procession moved on around him, leaving him in its wake, seemingly oblivious to the man struggling within their midst. He felt bitter resentment, but he was also too proud to ask for help.

He soon found himself at the rear of the group. There he saw the young, short girl, also trying to keep up with the pace. He stared at her. She was as short as a child, but she was dressed in the unmistakable garb of an unmarried Roman woman.[42] Her arms were so peculiar, that bracelet she wore looked like it rested half-way up her arm, rather than at her wrist.[43] He remembered when the girl had been born; "Had it really been that long ago?" he thought. The birth of a baby with misshapen arms and legs had caused a stir in the community. His wife had clutched her amulet and muttered about evil portents and exposure,[44] not that anyone could have prized that infant from the

[36] This narrative is focused on one man (AA210) attending the funeral.

[37] It is likely that biers were used to transport the deceased to a grave location especially on uneven terrain like Alington Avenue as coffins can be heavy (Booth 2017: 200). The lid was likely placed on the coffin in the ground to allow the placement of loose objects in the burial before closing (Booth 2017).

[38] This story is from the point of view of AA210, a biological male who died aged 60+ years old (Table 1). There is evidence of a fracture in the fibula in the location of the ankle on the right side. There are periosteal changes on the bone, active at time of death, suggesting some infection. This kind of fracture is often associated with a twisted ankle and swelling and pain are common experiences of this injury type.

[39] The skeleton of AA210 has well-healed fractures in the right second metacarpal midshaft and right distal ulna (Table 1). These injuries are often the result of interpersonal violence episodes.

[40] Army doctors likely offered medical care to soldiers and local populations alike (Israelowich 2015). Army medics were well practiced at fracture setting (Jackson 1988).

[41] The uneven terrain at Alington Avenue is surmised based on the archaeological evidence for pre-existing Bronze age earthworks, such as a long barrow and ring ditch (Davies et al. 2002).

[42] This young woman is AA766, a skeleton from Alington Avenue with Langer type mesomelic dwarfism (Table 1). For Roman Britain, AA766 is on the cusp of marital age and so likely to be unmarried which may have represented through dress (Allason-Jones 2005).

[43] Langer type mesomelic dwarfism affects the forearm and shin bones more than other limbs. The image of the bangle on the wrist comes after SEW saw a photograph of a patient with Langer type mesomelic dwarfism wearing a watch in a clinical paper (Langer 1967). The grave of AA766 did not have any evidence of a bangle or similar grave goods.

[44] The exposure and infanticide of infants with physical impairments was a legal practice in the Roman Empire until 374 CE, but it is uncertain to what extent it occurred (Southwell-Wright 2013; 2014). People with dwarfism were believed to have apotropaic capabilities to ward off the evil eye; this perceived power may be linked to themselves being perceived as evil (Garland 2010).

mother's grasp. We had thought that maybe the girl would just grow out of it,[45] but if anything, she now looked even stranger. He caught her eye, and she smiled at him pityingly. His feeling of resentment doubled; "How could he be pitied by someone like her?" he thought. He had been on so many processions like this before that it was almost a routine now. The same route was followed, so he was able to avoid the lumps and bumps of the uneven ground without thinking about it. The smells of the incense, the sounds of the *nenia,*[46] all belonged here in this place; one of the few spaces in his world that remained mostly unchanged since his childhood. Only the markers had gradually increased in number[47] as he had buried family, friends and acquaintances, more than he could recall. Not that the circumstances of this burial were routine, anything but. He shuddered slightly, stared once more at the young woman and quickened his steps. No matter how much his ankle throbbed, he did not belong back here with her.

He looked down at the man in the coffin. He looked old, but he was about his age.[48] He supposed he was an old man too now. He was certainly walking like one and he even sounded like one when he spoke, lisping and slurring through a mouth that lost many, many teeth.[49] He remembered he used to tease old men who sounded like him when he had been young; "Are you drunk?" he had said to one esteemed elder, smirking as the man sucked his lips over his toothless gums and reddened. He flicked his tongue around his own mouth and landed on a painful spot of yet another tooth going bad, making himself wince. The man in the coffin had good teeth though. "How had he done that?" he thought, "Some people are so lucky."[50] He shook his head at that thought when his eyes glanced over the absent right arm.[51] He clicked his knuckle again and questioned the logic of performing an amputation. Had he lived, he would have been humiliated, left with one hand and the sinister hand at that, and he would have needed care. That is not how men should live,[52] not that this mattered now. He looked down again into the coffin in the ground. The ceremony was over. The incense had almost completely dissipated. He watched as relatives placed the body carefully into place. He was laid face down, so that the ghost could not come back, but with a little dog curled up at his feet, one paw laid protectively over his ankle.[53] Our hopes rested on this small animal. They hoped that the dog's natural homing instincts would lead them both to where they needed to go, the dog back to its

[45] Past people would not necessarily have had the same understanding of impairments as people today, e.g., regarding about the permanent nature of impairments like dwarfism (Latour 2000).

[46] The *nenia* was a lament that was believed to encourage spirits to move on. The incense and *nenia* are known elements of the Roman burial process (Hope 2017).

[47] There is no direct evidence for burial markers at Alington Avenue, however the lack of inter-cutting graves suggests that grave positions were marked with object that have not survived (Davies et al. 2002).

[48] AA210 and AA852 were both categorised as 60+ years old (Table 1, Evelyn-Wright 2022).

[49] AA210 lost 10 teeth antemortem, with an additional 2 incisors worn down to the root. This level of tooth loss would affect a person's speech and masticatory function (Appleby 2018, 2019).

[50] AA852 had good dentition compared to others in his age group at Alington Avenue (Evelyn-Wright 2022).

[51] AA852 had undergone an above-elbow amputation of the right arm that the individual did not survive long after.

[52] To be the recipient of care has been described as a challenge to a Roman man's masculinity (Flemming 2000). Left-handedness has been described as a social disability (Humer 2012).

[53] One theory behind prone burials is that the burial position served as a protection for the living against any malevolent spirit, thought to be a particular hazard in the instance of a violent or sudden death like AA852's (Hope 2014; Shay 1985; Weekes 2016).

master, the gods of the below.[54] His ankle twinged again. He looked up across the horizon and groaned to himself; it was a long walk back and he was going to ache tomorrow. “Maybe next time I visit here, I will be being carried,” he thought to himself ruefully, “but not yet. Not yet.”

Reflections on Writing the Narratives

Through rendering the osteobiographies into a fictive narrative format that had wider accessibility, it became apparent to us that fictive writing had untapped potential in palaeopathology. Such writing of fictive narratives, synthesizing archaeological, historical and other data, as a mechanism to both disseminate knowledge and to spur research processes, has been called the writing of ‘faction’ (Laes 2007). Writing the fictive narratives generated new interpretative ideas regarding life and death at Alington Avenue as it required the concrete visualization of a potential situation. Fictive narratives are not easy outputs to create and may not suit all researchers or all readers, but the study of the past is, in itself, an imaginative process (Helden and Witcher 2020a). Our own views and understandings of Roman Alington Avenue and the putative disabilities changed during the process and writing and re-writing these narratives; here we evaluate the process and our learning from them.

Our experience is that faction writing does not lack academic rigor but rather can help illuminate where gaps exist in the knowledge and thus require deeper research to enrich the story (Boutin 2019). Indeed, fictional narratives have been argued in other disability situations to enable experience to be imagined “with a remarkable degree of sympathy and nuance” (Hsy 2016:477). When writing about disability, one particularly needs to be aware of and avoid as best as possible literary tropes, such as presenting disabled people as victims (Garland-Thomson 1997). The concerns described above about narratives are not unfounded, and fictive narratives are not an unequivocal force for good, but nor does this negate the potential or value obtained through the writing of faction. Many of the issues raised by scholars concerning faction can be mitigated through the careful and conscious reflection on behalf of the writer.

In an earlier version of AA766’s story, we realized that we had unconsciously cast AA766 as a victim. In that version, her reaction to the statue appearing different to her body was partially based on how we thought we would react in such a situation, which was as somewhat distressed and self-conscious. That initial reaction was also based on our interpretations of Roman society, which commonly did not grant women much agency, and thus we had fallen into a trope (for both women and disabled people) of apparent helplessness. The narrative changed after further careful consideration of some dwarfism-specific scholarship and from rethinking and revisiting the interview with a shorter stature individual (for interview transcripts, see Evelyn-Wright 2022). This interview was especially relevant as the individual interviewed has no fixed diagnosis of the cause of their shorter stature and thus was a good fit for AA766. When our interviewee was asked about the impact of magazines and media showing models and societal representations of beauty which did not include her shape, her responses were very different from our own presumptions and her reactions were thus used verbatim in the first narrative.

During development of the narratives, ~~it was~~ we felt that the best way to avoid the one-dimensional stereotypes of disabled characters was to base their characters on real people known by the authors. Such an approach, albeit potentially heavily relying on only one voice, enables interpolation of broader disability experiences and attitudes, and enables the gulf between past and present

[54] This narrative suggests that the connection between dog and the deceased manifested postmortem. During this period there were mythological links between dogs and the underworld in Roman, Germanic, Nordic, Celtic and Etruscan religions (Egmond 1995; Ferris 2018; Mazzorin and Minniti 2006; Smith 2006; Toynbee 1973).

embodied experiences to be bridged. As noted above, the reactions of AA766 were based on one individual interviewed. AA210 was based on one of our elderly relatives, and his frustration with, in his words, his failing body in his later years. This was felt to be the best way of creating a discourse and decreasing the influence of personal desires or presumptions and thus to ultimately find a relatable voice. Furthermore, "Roman Britain was a society where impairment was an inescapable aspect of daily life" (Southwell-Wright 2013:84) and so multiple narratives permitted a range of bodily difference, albeit based on the skeletal record, to be explored.

At the outset, we hypothesized that the creation of multiple and varied narratives ~~was hypothesized to create~~ would signal a more authentic level of doubt. Reflecting back, we feel that some aspects of this uncertainty have been made clear by the intertwined and interacting natures of the narratives and their different voices. Such an approach enabled the social construction of ability to be clearly recognized (cf. Annamma et al. 2013). As noted earlier, the three individuals chosen for the narratives represent individuals with embodied differences. Bodies in that sense have material properties, but are also malleable and plastic (Sofaer 2006) and so "are always in the process of becoming; moreover they are always social and historical" (Novak and Warner-Smith 2020:2).

~~Conclusion~~

The social and historical context is key to the identification and discussion of disAbility. Other intersecting identity traits, some of which might not conform to the ideal Roman body standard, are important to consider in conjunction with disAbility as they have implications for societal expectations and embodied experience. AA766 was not only a person with dwarfism, but she was also both a woman and relatively young in age. The patriarchal nature of Roman society meant that sex ~~at birth~~ had considerable impact upon the individual gendered life course. For example, the naming ceremony took place on either the eighth or ninth day after birth depending on the sex of the infant (Harlow and Laurence 2002), and so gender identity likely influenced AA766's life course long before the extent and permanence of her bodily differences were recognized. Women in the wider Roman world were categorized, alongside minors and people with specific impairments as a group that required legal guardianship (Vlahogiannis 1997) and so had reduced agency. Furthermore, in classical sources, the effect of impairment on a woman's marital prospects was implied to be negative (Gevaert 2012) but marriage was key stage of the Roman life course (Allason-Jones 2005).

In this manner, AA766 was 'impaired' both due to her mesomelic dwarfism and by being female. But she was given a burial following normative patterns (Table 1). There are three other known Romano-British individuals with skeletal morphologies suggestive of dwarfism and two of these (one male and one female) received normative burials whereas the third (a female) was found in a military context and received a very different burial rite from the local norm (Southwell-Wright 2013). Such patterning shows the locally varying and contextual differences in intersecting identities of individuals with shorter stature in Roman Britain. ~~Similarly,~~

The narrative for AA210 explores the potentially severe consequences caused by some relatively common palaeopathology found in the osteoarchaeological record. Like AA766, it could be argued that AA210 is impaired by two factors, the biological lesions and their age. The intersection between older age and disability was, therefore, the main theme within the narrative of AA210. In ancient medicine literature, the ageing process is pathologized, viewed through the lens of the theory of four humors as a cooling of the body and a gradual, but inevitable, physical and mental deterioration (Nutton 2013). This attitude is mirrored today with impairment being considered as a social norm of ageing, a biographical inevitability (Priestley 2006: 84). This sense of inevitability has consequences

on the support for and offered to an older person with impairments (Kelley-Moore 2010; Sanders et al. 2002). Old age identity can override the concept of disability and other identity traits (Kelley-Moore 2010).

AA852 had his right arm amputated. Punitive amputation was rarely used within the Roman world as it appears to have been condemned as too cruel (Wirth 2010), thus the amputation was likely medically required by AA852. However, this amputation left AA852 with the primary use of only a left arm. The right hand has additional ideological importance in the Roman world; classical texts provide evidence of a disabling attitude to those who had impairments necessitating the use of the left hand (Wirth 2010) and Romano-British iconography shows preference for right hands (Eckardt 2014). Furthermore, a Roman citizen's body was expected to be inviolable (Fögen and Lee 2009). AA852 thus had intersecting and enmeshed gender, age and bodily identities, and so could have been considered more functionally disabled by the community than AA766.

In contrast to AA766 and AA210, AA852 received a non-normative burial rite, and the interpretation of it is a key feature of the fictive narratives. While interpretation of what the rite represented varies, the burial rite is testament to a strong reaction to the marked change in the individual's disAbility spectrum position at time of death. The amputation occurred shortly before death and so represents a temporally short but likely traumatic time span. The community reaction to the body in its new form had an impact that survived archaeologically. Thus, although most disabling attitudes and behavior are archaeologically invisible, a potentially disabled corpse is perhaps the clearest evidence for disAbility. Such interactions, and the associated burial of the dog, have their own meaning and agency (cf. Haraway 1991, 2008). The use of the three intertwined narratives highlighted that all bodies require understanding and interpretation, and that the TAB are as equally specific and varying as those that might be considered to be disabled or different from some putative norm. The narratives also emphasized the fact that the TAB should not be viewed as bioarchaeologically normative individuals, but rather as specific embodied people in exactly the same way as the putatively disabled.

We are aware that aspects of the narratives may be uncomfortable to modern sensibilities. While we did not set out to be controversial with the subject matter we included in the narratives, neither did we want to shy away from difficult topics. For example, the inclusion of the topic of slavery within the voiced narrative of AA766 received comments from reviewers. We feel the context is important as the presence of slaves with dwarfism within the households of the Emperors is one of the few pieces of historical evidence we have relating to these people's existence. The ideas explored within the narratives are not comfortable for the authors; they are not meant to be, but rather highlight that we are portraying a very different society and a very different set of attitudes than our own. Similarly, we defend the use of terms like 'pitied' within the narrative as the kind of language often found within disability discourses. These do not represent what we ourselves think, but have been carefully written to encourage discussion and thought about these kinds of issues.

Conclusion

Through these narratives, we have tried to show that variability can exist in a society for people evidencing differential embodiment or 'impairment' of a particular kind relative to the temporally perceived (potentially ableist) 'norm' [i.e. right-handed Roman male] (cf. Shildrick 2020; Shuttleworth and Meekosha 2017). By focusing on materiality, the narratives have enabled us to question the constructions of disability and demonstrate the imbrication and overlapping of TAB/non-disabled and disabled identities in one Romano-British context. The only certainty in life is death, and the one place with which these individuals were connected was their own burial ground. To get to be buried in this burial ground, a deceased individual's body had to be moved there. In the Roman world, this likely involved a public procession over uneven cemetery terrain to get to the

specific burial site. Situating the narratives in the cemetery with its uneven terrain enabled meaning to develop from the interactions between the individuals in the narratives and their environments (cf. Haraway 1991). This provided a framing and starting point for the imaginative process, and so delineated our thoughts about the implications and interactions of bodily traits inherent to each person for their own engagement with the situation. Through writing the narratives, questions of embodiment, identity and agency have been explored in all three individuals. We have not presumed to know the impact of bodily differences but have considered the implications of the constructions of possible bodily impairment and socially constructed views of disability.

As "Disability is not a minority issue, affecting only those people defined as disabled people" (Shakespeare 2013: 221), we believe it is vital that the narratives communicate and engage with both an academic and a wider audience. All trepidation about putting out creative output was overridden by strength of conviction about the responsibility to make a story about disability more accessible to a wider audience and thus engage that community with the development of future research questions and approaches. Osteoarchaeologists are trusted with the responsibility for the care and curatorship of human remains, but the human remains cannot *belong* to them. Heritage collections belong to everyone and research that is achieved through their use should be accessible to all who wish to know about them. We believe that the writing of these narratives developed new bioarchaeological knowledge while maintaining academic rigor and content, but were also accessible, self-reflexive and open about the limitations and potential of the evidence. We leave it to the readers to decide.

Ethics Statement

Bioarchaeological analyses were undertaken with the permission of Dorset County Museum, following the ethics policies and permissions of the University of Southampton. The code of practice and guidelines of the British Association for Biological Anthropology & Osteoarchaeology were followed at all times.

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Map ouf southern Britain locating Alington Avenue and Aquae Sulis

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