

**Asymmetry in interaction on a men's relationship counselling
helpline: Managing the competing relevancies of troubles-telling
and service provision**

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Disclaimer

The views expressed in this thesis are the researcher’s own and do not necessarily reflect those of *MensLine Australia*.

Abstract

The present thesis examines the nature of calls to an Australian men's relationship counselling helpline. The focus is on explicating how the helpline's institution-specific goals are played out, in practice, in sequences of interaction.

Men's help-seeking has become a popular topic of academic interest in recent years due to an apparent paradox: in the Western world, men experience greater morbidity and mortality than women, yet are reportedly less likely to seek help for health-related issues. When men *do* consult health professionals, it is argued that they display a characteristic masculine preference for action-oriented, solution-focused outcomes. To date, most studies describing such male preferences have been based on survey and interview data. Such methods do not provide detailed information about how help-seeking is routinely accomplished, *in situ*, in naturally-occurring interactions. The present research addresses this limitation by employing Conversation Analysis (CA) to analyse a corpus of 169 calls fielded by a men's counselling helpline.

Consistent with the mainstream literature on men's help-seeking, the helpline from which the data in this thesis was collected works from the framework of a solution-focused model of counselling. The helpline has two main aims in its over-the-phone interactions: (1) providing callers an opportunity to talk about their relationship problems, and (2) assisting callers with the development of practical coping strategies and solutions in respect of such problems. These institutional aims correspond to the relevant call-taker categories of troubles-recipient and service provider, respectively. In the CA literature, these categories are often viewed as separate and contradictory in that they orient to two different aspects of talk-in-interaction: whereas a troubles-telling is focused on the teller and his/her experience, a service-encounter is focused on the problem at hand, its properties, and ways to fix it. The

aim in this thesis was to explicate the skilled ways in which counsellors managed the competing relevancies of their dual institutional role in sequences of talk-in-interaction recorded from the helpline.

The analysis showed that when callers indicated that they had called the helpline for the explicit purpose of receiving advice, counsellors oriented to this type of account as a sufficient demonstration of accountability. By contrast, there were a number of interactional difficulties associated with the production of narrative reports on a trouble. These difficulties manifested in sequences of interaction where counsellors attempted to turn the reason-for-call from troubles-telling to service provision, and where callers routinely resisted these attempts. Through an examination of this resistance, a pattern of interactional asymmetry or difference in orientation between caller and counsellor to the purpose of calls taking place between them was described. Whereas the majority of callers appeared to call the helpline for the explicit purpose of ‘talking to’ someone, counsellors routinely oriented to the importance of service provision *as well as* troubles-receipting in their interactions with callers. This asymmetry arguably has important consequences for the pervasive assumption that men display a preference for solution-focused outcomes, and for the services shaped by this assumption. The implications of this observed pattern for research and institutional practice are discussed.

Declaration

This work contains no material which has been accepted for the award of any other degree or diploma in any university or other tertiary institution and, to the best of my knowledge and belief, contains no material previously published or written by another person, except where due reference has been made in the text.

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Chapter 1

Introduction

1.1 Overview

This thesis examines the interactional organisation of calls to a men's relationship counselling helpline. Calls are examined, using the methodology of Conversation Analysis (CA), for the ways in which the institution-specific goals of the helpline are enacted in sequences of talk-in-interaction. These institution-specific goals are shaped by the assumption that men display a preference for a particular style of interaction when consulting health professionals – the provision of practical management strategies and action-oriented, solution-focused outcomes. The present research examines the ways in which these goals can, at times, conflict with the reasons that male callers offer for contacting the service, resulting in specific patterns of interaction in this institutional environment.

By analysing, turn-by-turn, the interactions that take place between callers and counsellors, I explicate a number of interactional difficulties associated with talk on a trouble in this context. I show how these difficulties play out in sequences of interaction where callers resist counsellors' attempts to attend to the relevance of their institutional role of service provider. Through an exploration of this resistance, I highlight an interactional pattern regarding an asymmetry or difference in orientation between callers and counsellors to the purpose of calls taking place between them. Specifically, whereas the majority of callers appeared to orient to troubles-talk as their sole reason for contacting the helpline, counsellors were observed, routinely, to orient to the relevancies of both service provision and troubles-receipting in their interactions with callers. Through an exploration of this interactional

asymmetry, I argue that some male callers to the helpline display a preference for simply talking on a trouble. This observed asymmetry arguably has important consequences for the pervasive assumption that men display a preference for solution-focused outcomes in their interactions with health professionals, and for the services that are shaped by this assumption.

This introductory chapter provides a background to the analysis on this interactional asymmetry. I begin by providing an overview of the current literature on men's health and help-seeking. I focus specifically on the paradox in men's health whereby men are reported to experience poorer health outcomes in comparison to women yet are less likely to seek professional help for health-related issues. The aim is to demonstrate that most research arguing for men's reluctance to seek help for health care, as well as their preference for solution-focused outcomes, is based on survey and interview data. To date, few studies have examined men's *actual* use of health services, particularly helplines. Hence, there is currently limited understanding of how men typically present problems during telephone (or other) health service encounters and how, or whether, men's purported preference for action-oriented problem-solving manifests itself interactionally. Nonetheless, most health interventions aimed specifically at men tend to rely on this purported preference as a means of providing support. The present thesis works to address the methodological limitations associated with the investigation of men's help-seeking practices by examining actual calls fielded by an Australian men's relationship counselling helpline, *MensLine Australia*.

The chapter then moves to focus specifically on helpline interaction in the CA literature, which will act as a cornerstone for the analyses undertaken in the present thesis. The aim in providing this overview is to demonstrate that much of the CA work on helpline interaction has focused on examining the ways in which institution-specific goals and philosophies are enacted and played out in sequences of talk-in-interaction. This research provides a framework for analysing how *MensLine Australia's* institution-specific goal of

service provision (i.e., the provision of practical coping and management strategies with respect to relationship issues) becomes consequential for the conduct of callers and counsellors, and how these goals can lead to various sources of interactional difficulty or disfluency that need to be managed over the course of calls.

The chapter concludes by providing an outline of the aims of the present thesis as well as outlining the structure of each subsequent chapter. First, I provide an overview of the mainstream literature on men's health and help-seeking behaviours.

1.2 Men's health and help-seeking behaviours

Mainstream research into men's health and help-seeking has typically focused on an exploration of gender differences in such health-related areas as health outcomes, health service use, the types of problems that prompt men and women to seek help, and the type of help that is typically preferred by men in comparison to women. In this section I provide an overview of this research, focusing specifically on studies that provide evidence for (1) a paradox in men's health (i.e., gender differences in health service use), (2) gender differences in help-seeking for emotional issues, (3) the concept of hegemonic masculinity as a theoretical explanation for men's poorer use of health services in comparison to women, and (4) men's purported preference for practical strategies and solution-focused outcomes when consulting health professionals¹. The aim here is to demonstrate that most research arguing for men's reluctance to seek help for health-related concerns, as well as their purported preference for action- and solution-oriented health care encounters, is based on questionnaire and interview data. I describe the limitations of such methods for investigating the complexities of real-life interaction, and argue the advantages of using actual records of conduct for examining men's help-seeking practices.

1.2.1 Paradox in men's health.

Men's health has become a popular topic of academic study in recent years. In particular, discussion has focused on an apparent paradox: in the western world, men exhibit a greater range of general and psychological health problems than women, yet consult health professionals less frequently. One of the most commonly reported gender discrepancies in health is life expectancy. In Australia, men die, on average, five years earlier than women (ABS, 2011). Gender discrepancies in terms of life expectancy are also evident in a number of other countries including the US, Canada, Japan (ABS, 2011), New Zealand (McKinlay, 2005), and a number of European countries (White & Cash, 2004, have reported similar figures for Finland, Sweden, Ireland, the UK, Denmark, Norway, the Netherlands, Austria, Germany, Luxembourg, Belgium, Switzerland, Italy, Portugal, Greece, Spain and France).

Apart from life expectancy, there are a number of other indicators that suggest men suffer poorer health outcomes in comparison to women. For instance, Australian men are more likely than women to suffer from substance-abuse disorders (drugs and alcohol) and to die prematurely from causes such as diabetes, cardiovascular disease, lung and skin cancer, emphysema, liver disease, Parkinson's disease, chronic lower respiratory disease, accidents, and suicide (Broom, 2004; Mahalik, Levi-Minzi, & Walker, 2007; White, 2002). Again, similar patterns are evident across a number of western countries including the US (Courtenay, 2003), New Zealand (McKinlay, 2005), and several European countries (e.g., the UK, Sweden, Switzerland, Italy, Norway, the Netherlands, Spain, France, Austria, Greece, Finland, Germany, Belgium, Denmark, Portugal, and Ireland) (Galdas, Cheater, & Marshall, 2005; White & Cash, 2004).

Given the general patterns concerning men's poorer health outcomes, there has been increasing community and academic interest in repeated findings that men are less frequent users of health services than women, particularly in relation to visiting general practitioners

(GPs) (ABS, 2010; Barney, Griffiths, Jorm, & Christensen, 2006; Meryn & Jadad, 2001; Parslow & Jorm, 2000). As well as GPs, Australian men typically consult other health professionals, including drug and alcohol counsellors and mental health professionals, less frequently than do women (Parslow & Jorm, 2000; Reavley, Cvetkovski, Jorm, & Lubman, 2010). Again, similar patterns are evident in a number of Western countries including the US (Courtenay, 2000a; Mansfield, Addis, & Mahalik, 2003), the UK (Galdas et al., 2005), and New Zealand (McKinlay, 2005).

As well as gender differences in terms of general use of health services, a number of studies have reported gender differences in the *types* of problems for which men and women typically seek help. Studies into help-seeking for primary health care have typically demonstrated that men are more likely than women to focus on physical symptoms as the reason for their visit, and are less likely to disclose mental, psychological or emotional issues (Schofield, Connell, Walker, Wood, & Butland, 2000; Smith, Braunack-Mayer, & Wittert, 2006). A study employing questionnaires to explore sex differences in general practice attendance in the UK among a sample of 204 women and 80 men found that the presence of psychosocial problems and distress predicted consultation behaviour for women but not for men (Corney, 1990). Despite reporting the same number of social problems as women, men reported that they were less likely to have contacted a social agency (e.g., social worker), psychiatrist or psychotherapist in the prior 12 months. By contrast, men were the more frequent users of Accident and Emergency Services, physiotherapists, and osteopaths.

An Australian study measuring help-seeking in response to emotional and psychological problems among a sample of 715 adolescents confirmed this general pattern (Rickwood & Braithwaite, 1994). Specifically, whilst there were no gender differences in terms of reported levels of psychological distress, male adolescents were less likely than female adolescents to have sought help either from health professionals or from their social

networks in the 12 weeks prior to the study. This finding remained significant after controlling for symptoms. The authors concluded that gender differences in help-seeking for emotional and psychological problems were the result of gender differences in help-seeking styles, not symptom severity.

Similar findings regarding men's purported reluctance to seek help for emotional issues have also been identified in interview studies with health professionals. In the UK, for instance, Seymour-Smith, Wetherell, and Phoenix (2002) conducted interviews with GPs and nurses, and identified a number of interpretive repertoires through which participants constructed representations of male patients. One pervasive repertoire concerned men's reluctance to talk about emotional issues during consultations. The GPs and nurses indicated that male patients often relied on their female partners to explain their emotional problems. One participant claimed that attempting to elicit information about emotional issues from male patients was like "pulling toenails" (Seymour-Smith et al., 2002, p. 259).

Given these general patterns regarding men's underutilisation of health services, a number of biological, cultural, and social theories have been put forth to explain men's reluctance to seek help for health-related issues. I turn next to an examination of one of the most popular theoretical explanations provided in the help-seeking literature to account for gender differences in health service use – hegemonic masculinity.

1.2.2 Hegemonic masculinity.

The concept of hegemonic masculinity is typically viewed as the traditional, normative, dominant, and idealised notion of masculinity in contemporary Western culture (Connell, 1995). It consists of "an ideal or set of prescriptive social norms" (Wetherell & Edley, 1999, p. 336) that dictate how men should act in any given situation. These prescriptive social norms require men to be strong, self-sufficient, controlled, silent,

independent, stoical, rational, and emotionally inexpressive (Addis & Mahalik, 2003; Cameron & Bernardes, 1998; Courtenay, 2000b; Davies et al., 2000; Galdas et al., 2005; George & Fleming, 2004; Mahalik, Good, & Englar-Carlson, 2003; Möller-Leimkühler, 2002; O'Brien, Hunt, & Hart, 2005; Smith, Braunack-Mayer, Wittert, & Warin, 2007, 2008a; White, 2002). These typically masculine traits are thought to represent a challenge to the successful accomplishment of help-seeking for interpersonal as well as health-related issues, resulting in men's lower rates of health service utilisation (Galdas, Johnson, Percey, & Ratner, 2010; Smith et al., 2006).

Much of the interview-based research investigating the reasons behind men's reluctance to seek professional help for health-related concerns has largely provided support for this theoretical explanation. In these studies, men have typically explained their reluctance to seek help in terms of a fear of being perceived as weak or vulnerable (Chapple, Ziebland, & McPherson, 2004; Davies et al., 2000; George & Fleming, 2004). For instance, an American study employing focus group interviews to investigate male college students' health concerns found that participants' greatest perceived barrier to help-seeking was men's socialisation to be independent and to conceal their vulnerability (Davies et al., 2000). Participants routinely expressed fear at seeking help prematurely, or without sufficient reason, and being judged negatively by their fellow students. A recent Australian study investigating older men's understandings of their help-seeking behaviours supported these general patterns (Smith et al., 2007). In a series of semi-structured interviews, participants typically explained their reluctance to seek help in terms of a need to remain independent and in control.

Interview-based studies investigating men's help-seeking for specific health concerns, such as cancer, have also identified similar patterns of responses. A UK study employing narrative interviews to investigate men's reasons for delaying treatment for testicular cancer

found that participants typically explained their tendency to delay help-seeking as being caused by a fear of appearing weak, a hypochondriac, or lacking in masculinity (Chapple et al., 2004). Similarly, in a phenomenological study investigating men's use of a charity-based service for early detection of prostate cancer in Northern Ireland, participants indicated that men's willingness to seek help was often affected by negative perceptions associated with men talking openly about their health (George & Fleming, 2004). In a series of semi-structured interviews, participants claimed that they did not seek help for fears of appearing paranoid, a hypochondriac, weak, inappropriate, and not masculine.

Similar findings regarding men's reluctance to seek help for health-related issues have also been reported in the context of focus group and interview-based research with nurses, GPs, family physicians, and other health professionals (e.g., Seymour-Smith et al., 2002; Tudiver & Talbot, 1999). In a Canadian study investigating family physicians' perceptions of men's help-seeking behaviours, physicians identified a number of barriers to men's help-seeking that were consistent with the concept of hegemonic masculinity (Tudiver & Talbot, 1999). These barriers included: a fear of being perceived as vulnerable, difficulty relinquishing control, and a belief that seeking help was not an acceptable behaviour for men.

In terms of actual health service encounters, participants in George and Fleming's (2004) phenomenological study investigating men's use of a service for early detection of prostate cancer typically explained their reluctance to seek help for health-related issues based on a perception that health care providers are likely to be too busy to provide a high quality of service. In their semi-structured interviews, participants routinely expressed fears that they may be perceived as wasting a practitioner's time or that they are using an under-resourced health service. Given these general patterns, men have largely reported delaying help-seeking for health-related concerns by ignoring or tolerating symptoms, and only consulting health professionals when problems became sufficiently serious (e.g., if they

required emergency hospitalisation, or the problem interfered with ability to work), or when prompted by a female partner (Broom, 2004; Cameron & Bernardes, 1998; Chapple et al., 2004; Coles et al., 2010; Davies et al., 2000; Evans, Brotherstone, Miles, & Wardle, 2005; Galdas et al., 2005; George & Fleming, 2004; O'Brien et al., 2005; Smith et al., 2008a).

In addition to well-documented gender differences in health service utilisation, a number of studies have shown that when men *do* consult health professionals they typically display a preference for a particular *style* of interaction that is consistent with the concept of hegemonic masculinity: a focus on action-orientation and the provision of practical solutions and outcomes. This purported preference is said to stem from a general assumption concerning men's coping styles and preferences: that "men act foremost by using problem-focused coping strategies" (Adamsen, Rasmussen, & Pederson, 2001, p. 532). In the next section I provide an overview of the research that provides evidence for this pervasive assumption. Men's purported preference for action-oriented, solution-focused outcomes is important to examine because a number of male-specific health interventions tend to rely on this assumption as a means of providing support. *MensLine Australia*, the helpline from which the present data are taken, represents one such service.

1.2.3 Men's purported preference for solution-focused outcomes.

Studies that have focused on men who do consult health professionals have typically highlighted a masculine preference for practical outcomes and solutions (e.g., Adamsen et al., 2001; Klemm, Hurst, Dearhold, & Trone, 1999; Robertson & Fitzgerald, 1992; Smith, Braunack-Mayer, Wittert, & Warin, 2008b; Vingerhoets & Van Heck, 1990). Vingerhoets and Van Heck (1990), for instance, explored gender differences in coping strategies by administering the *Ways of Coping Checklist* among a sample of 465 men and 532 women from the Netherlands, and concluded that men were more inclined to employ active, problem-

focused coping strategies whereas women displayed a preference for emotion-focused coping, and seeking social support.

The medium of counselling was the focus of another study that confirmed this general pattern. In an investigation of whether men's reluctance to seek help for health-related issues was the product of gender role socialisation, Robertson and Fitzgerald (1992) examined American male college students' attitudes towards two counselling interventions – traditional counselling that focused on self-awareness and self-disclosure, and an alternative form of counselling that offered self-help materials, classes, and workshops. The latter form of counselling focusing on self-help and action-orientation was seen to be consistent with traditional male socialisation. Participants' attitudes towards each type of counselling were measured via their evaluations of brochures that advertised the two services in which they were asked to rate their likelihood of seeking help from each service. Participants who scored higher on masculinity measures reported a greater likelihood of seeking help from the alternative rather than traditional form of counselling. The researchers concluded that this finding confirmed the general assumption that men display a preference for action-orientation when consulting health professionals, and that focusing on practical outcomes as a means of advertising counselling (i.e., using terms such as classes, workshops, and seminars) may encourage men with highly masculine attitudes to use such services.

Studies examining the use of health care interventions designed specifically for people with cancer have also provided evidence of a male preference for action-oriented health care. Klemm et al (1999), for instance, examined the content of online posts in internet cancer support groups (ICSGs) and found that, in male-only ICSGs (i.e., prostate cancer support group), posts most commonly took the form of information giving/seeking related to, for instance, nutrition, treatment, and pain control. By contrast, in women-only ICSGs (breast cancer support group), messages relating to personal experience with cancer-related issues,

such as chemotherapy, coping, and self-esteem, were most frequent. Overall, men were more than twice as likely to provide messages containing information whereas women were more than twice as likely to give messages of encouragement and support such as “keep up the good work” and “wishing you all the best” (Klemm et al., 1999, p. 68).

Adamsen et al (2001) investigated how a Danish intervention program that focused on action-oriented outcomes affected the wellbeing of a group of men with cancer. The intervention involved 13 two-hour group sessions. The first half of sessions comprised of a series of physical activities including back exercise and training, and Tai Chi. The second half of sessions involved a keynote address by an invited lecturer. Topics addressed in lectures included food, pain, sexuality, and alternative medicine. The researchers conducted semi-structured focus groups with the 17 participants and observed their participation in the program. In their focus group interviews, participants reported that their participation in the program increased their energy and self-confidence. In terms of observation, participants were noted rarely to discuss their disease and that their interactions focused on action-orientation and training rather than pain, suffering, and symptoms. The researchers argued that the positive benefits that male participants routinely reported as a result of their participation in the program “confirm[ed] that activity-orientated intervention appeals to men with cancer” (Adamsen et al., 2001, p. 535).

Similar findings regarding men’s preference for action-oriented health care encounters and the provision of practical outcomes have also been identified recently in an Australian context. Smith et al (2008b) conducted semi-structured interviews with 36 South Australian men in order to determine the qualities that male patients valued when communicating with GPs in the context of primary care. One of the core qualities that participants identified was the adoption of a ‘frank’ approach to communication about health, as well as prompt resolution of health issues. This displayed preference was argued to be

consistent with men's propensity for "direct, result-oriented and decisive communication" in all areas of interaction (Smith et al., 2008b, p. 619).

Studies arguing for a male preference for action-oriented health care encounters have provided the rationale for a number of health interventions aimed specifically at men. That is, male-specific health interventions tend to provide a style of support that is consistent with gendered stereotypes of hegemonic masculinity whereby men are more concerned with solutions and outcomes rather than their emotions (Coles et al., 2010). In the next section, I outline the limitations of the methodological procedures typically employed in studies exploring men's purported propensity for action-oriented health care. As a means of overcoming these limitations, and for the development of future research and institutional practice, I advocate the advantages of examining men's help-seeking practices *in situ* in the context of real-life, naturally-occurring health care interactions.

1.2.4 Limitations of the current research on men's help-seeking.

The methods employed in studies arguing for (1) men's reluctance to seek help for health-related concerns, and (2) a male preference for solution-focused outcomes, are largely based on questionnaire, focus group, and interview data. A range of problems with using such methods to conduct research has been raised (see e.g., Edwards & Stokoe, 2004; Silverman, 2001; ten Have, 2004). Potter and Hepburn (2005), for instance, argued that methods such as questionnaires, focus groups, and interviews are based on an assumption that people can act as reliable reporters on "events, actions, social processes and structures, and cognitions" (p. 298). Through these research methods, participants' talk and responses are treated by researchers as reflective of actual thoughts, beliefs, and attitudes. Potter and Hepburn argued that focus groups and interviews are best viewed as specific types of social interaction whereby participants' talk is occasioned for a particular purpose, and where such talk can be

seen to accomplish a range of social actions (e.g., justifying, excusing, defending, blaming) (see also Putcha & Potter, 2004, for a discussion of focus groups as a kind of social interaction in their own right rather than merely a medium through which researchers can identify participants' thoughts and beliefs).

Recent critiques of interviewing as a method for investigating men's purported preference for solution-focused outcomes have highlighted similar limitations of this research methodology. Seymour-Smith (2008), for instance, argued that

Although there may be some currency in the notion that men prefer action oriented approaches ... discussions about a 'preference for action' *may be linked more to the presentation of a hegemonic masculine identity than to a real preference for action.* (p. 795. Original emphasis)

In other words, when focus groups, interviews, and questionnaires are employed to explore men's help-seeking behaviours (i.e., to get them to talk about hypothetical health care encounters), it is likely that, in these specific situations, men are engaging in practices of 'doing being masculine'. That is, through their responses, men are working to present themselves *as* ideally masculine by explaining their help-seeking behaviours in terms of a need to receive information and advice rather than emotional support. Seymour-Smith stressed the importance of recognising and attending to the *performativity* of talk generated through interviews and focus groups by examining the range of actions that such talk accomplishes for the occasions on which it is produced.

Given the reliance in the help-seeking literature on questionnaires, focus groups, and interviews, there is currently limited understanding of how, and whether, men's purported preference for practical information and problem-solving manifests itself interactionally in *actual* health care encounters, and whether services shaped by this assumption are adequately reflective of men's health needs. The present thesis addresses these limitations by examining

actual calls fielded by a men's relationship counselling helpline, *MensLine Australia*. Through the method of Conversation Analysis I examine, turn-by-turn in a sequential fashion, how men interact with health professionals in the context of an over-the-phone counselling environment. By focusing on the performative nature of talk-in-interaction, the thesis represents a break in tradition from questionnaire and interview studies investigating men's help-seeking and works to generate fresh insights into men's help-seeking preferences.

In the next section, I provide more information about the helpline, *MensLine Australia*. I explicate specifically how *MensLine Australia* works to overcome some of the difficulties that men routinely report when seeking help from health professionals, as well as outlining, in detail, the counselling framework from which the helpline operates.

1.3 MensLine Australia

MensLine Australia (hereafter *MensLine*) is a government-funded, telephone support, information, and referral service dedicated to men experiencing relationship difficulties. *MensLine* works to provide a 'male-friendly' counselling environment in respect of relationship issues by offering support through the medium of the telephone rather than face-to-face. According to information on *MensLine's* website (<http://mensline.org.au/What-We-Do.html>), the following features of over-the-phone interactions, as compared to face-to-face encounters, are said to make telephone counselling more appealing to men:

- Visual privacy
- A high level of control by the caller over the situation
- An immediate response
- Anonymity, enabling greater honesty in the caller
- A 'quicker' counselling process

By ensuring anonymity, confidentiality, and that callers remain in control of the situation (i.e., that they can terminate calls at any time), *MensLine* offers men the opportunity to talk about relationship concerns in ways that do not undermine their independence, and whereby potential fears of being perceived as weak and vulnerable are minimised.

As well as working to overcome some of the difficulties that men routinely report when seeking help from health professionals, *MensLine* aims to provide the type of support that men are argued to prefer in their health care consultations: the provision of practical management strategies and solution-focused outcomes. In the next section, I explicate how this purported preference forms part of *MensLine's* counselling framework. Providing an overview of *MensLine's* counselling framework is important for understanding how the interactions examined in the present thesis are shaped by the institution-specific goals in place in this specific counselling context.

1.3.1 *MensLine's* counselling framework.

Consistent with the mainstream literature on men's help-seeking behaviour, *MensLine's* counselling practices are shaped by the assumption that men display a preference for action-oriented health care encounters. Counsellors who staff the helpline adhere to a solution-focused model of counselling where the aim is to provide callers with practical strategies for dealing with, and better managing, relationship difficulties (R.N. John, personal communication, October 19, 2010). The following statement, which can be found on the helpline's website (www.MensLineaus.org.au/What-We-Do.html), provides a rationale for this counselling framework:

MensLine Australia offers a counselling style preferred by men

When faced with a problem, men are often more focussed on outcomes and practical solutions than their emotions and internal world. MensLine Australia counsellors recognise this preference and offer a down-to-earth, practical approach to counselling, whilst also encouraging men to deal with important emotional issues in an effective way.

In terms of practice, *MensLine* counsellors draw on a solution-focused model of counselling with the embedded contingency that they avoid the *direct* provision of advice. That is, counsellors are instructed to *assist* callers to develop strategies and skills to better manage relationship difficulties by offering advice in the form of suggestions or recommendations, and by providing callers with referrals to other health care providers, such as face-to-face counsellors and anger management programs. *MensLine's* solution-focused counselling framework therefore does not focus solely on working to solve callers' reported problems, but also on working to assist callers in managing their negative reactions to these problems. In turn, a discussion concerning coping and management strategies forms part of counsellors' duty of care to ensure the immediate and long-term safety of callers and their families, particularly their children (<http://www.mensline.org.au/Duty-of-care.html>).

As well as assisting male callers to develop practical management strategies in respect of relationship issues, *MensLine* promotes its service (via advertising and on its website) as offering men 'a safe and private place to talk about concerns' (www.menslineaus.org.au/What-We-Do.html). This focus of *MensLine* as a place where men can talk about their problems is reinforced in the helpline's official logo and the associated tag line 'talk it over':

Figure 1. MensLine Australia logo



Institutionally, then, counsellors on *MensLine* can be seen to have two primary aims in their over-the-phone interactions: (1) listening to callers' troubles (i.e., providing them the opportunity to talk about problems), and (2) assisting callers with the development of practical coping strategies and solutions in respect of such problems. These aims, in turn, correspond to the relevant call-taker categories of troubles-recipient and service provider, respectively. The interactional roles of troubles-recipient and service provider have been studied in a number of interactional contexts, most notably by Jefferson and Lee (1992) who identified a source of interactional trouble associated with the convergence of these two categories in the context of mundane interactions. Below, I provide an overview of the categorical roles of troubles-recipient and service provider and how their convergence can lead to interactional difficulties.

1.3.2 Troubles-telling vs. service provision.

In the CA literature, the categories of troubles-recipient and service provider are typically viewed as “separate and contradictory” (Pudlinski, 2008, p. 111) in that they orient to two different aspects of talk-in-interaction. Specifically, the role of troubles-recipient is seen to involve a focus on the troubles-teller and his/her experiences, whereas the role of service provider is seen to involve a focus on the problem-at-hand, its properties, and ways to

fix it (Jefferson & Lee, 1992). Accordingly, the roles of troubles-recipient and service provider are typically enacted very differently in sequences of interaction. The role of troubles-recipient is typically accomplished through the provision of acknowledgment tokens (e.g., 'yeah') and continuers (e.g., 'mm'), or affiliative responses that are implicative of emotional reciprocity (e.g., 'Oh my', 'Jesus') (Jefferson, 1988a; Jefferson & Lee, 1992; Pudlinski, 2005). By contrast, the role of service provider is routinely accomplished through the provision of information, recommendations, or advice (Heritage & Sefi, 1992; Vehviläinen, 2001).

Interactional problems have been argued to ensue when the roles of troubles-recipient and service provider converge, such as when the co-interactant who has hitherto been acting as a troubles-recipient attempts to offer advice. According to Jefferson and Lee (1992), the provision of advice in the midst of a troubles-telling results in a shift in categorical roles such that the troubles-recipient becomes the advice-giver and the troubles-teller is positioned as the advice-recipient. Concomitant with this shift in categorical roles is a shift in the focus of the interaction away from the troubles-teller and his/her experiences, towards the trouble itself (Jefferson & Lee, 1992). When this shift occurs, troubles-tellers can often be seen to reject the advice offered in an attempt to maintain the status of the interaction as a troubles-telling (i.e., to maintain the focus of the interaction on the teller and his/her experience).

Recently, Butler, Potter, Danby, Emmison, and Hepburn (2010) described the interactional environment of counselling as a 'hybrid' between a troubles-telling and a service-encounter in that "standard practice maintains a focus on the 'teller and their experiences,' even though much counselling involves clients talking about a 'problem and its properties'" (p. 281). In other words, counselling represents an institutional context in which the roles of service provider and troubles-recipient routinely converge (i.e., the convergence of a service-encounter and troubles-telling forms part of standard institutional practice).

According to Butler et al (2010), managing the “competing relevancies” (p. 281) of these two categorical roles can present a challenging task to counsellors. That is, counsellors often need to demonstrate an orientation to clients’ problems and potential ways to fix them without appearing dismissive of clients’ experiences.

The aim in this thesis is to examine the ways in which *MensLine* counsellors manage the potentially competing relevancies of their institution-specific goals of troubles-receiving and service provision in sequences of talk-in-interaction. Analysis focuses specifically on the interactional difficulties that can arise from counsellors’ attempts to enact to their role of service provider. These interactional difficulties represent a related, but somewhat different, phenomenon to that identified by Jefferson and Lee (1992) in that these difficulties do not arise from the provision of advice *per se*, but from counsellors’ attempts to turn the call from a troubles-telling to a service-encounter in which the reason for the call *becomes* the provision of advice or information rather than simply talking on a trouble. This analysis draws on previous CA work on helpline interaction that has focused on the ways in which institution-specific goals and mandates are routinely enacted in sequences of talk-in-interaction. The next section provides an overview of this research.

1.4 CA research on helpline interaction

The majority of CA research investigating the ways in which the institution-specific goals of helplines are implemented in institutional practice has focused on the interactional environment of advice-giving. In a number of these studies, the focus has been on how counsellors/call-takers work to avoid the direct provision of advice in accordance with institutional mandates. *Kids Help Line*, an Australian service for children and young people, represents one helpline setting where the practice of advice-giving is shaped by the institution-specific goals of non-directiveness, client-centredness, and empowerment. In this

institutional environment of client-centred therapy, counsellors were often faced with a dilemma: callers routinely presented with problems, and would often solicit advice with respect to these problems, yet the explicit delivery of advice was inconsistent with the helpline's institutional mandates. Recent work has shown how counsellors managed this dilemma in sequences of interaction that culminated in the provision of advice (Butler et al., 2010; Emmison, Butler, & Danby, 2011). In these sequences, rather than providing advice directly (i.e., telling callers what they should do), counsellors worked to uphold the helpline's institution-specific goals by helping callers "to identify and evaluate the options available to them for dealing with a particular situation" (Butler et al., 2010, p. 269).

One routine way in which *Kids Help Line* counsellors were observed to offer advice in accordance with the institutional mandates of client-centredness and empowerment was through the employment of advice-implicative interrogatives that asked callers about their experiences and capacities in ways that alluded to particular courses of future action (Butler et al., 2010). These interrogatives contained embedded solutions that callers could employ and enquired into callers' capacities and willingness to undertake those solutions (e.g., ".Hhh (0.7) Is there any way that- (0.7) dthat you can: uhm: maybe replace it with an eyeliner th't (.) you can affor;d?", Butler et al., 2010, p. 271). By incorporating a potential solution in the form of an interrogative, a counsellor could be heard as 'doing suggesting', which placed a normative dimension on the interaction (i.e., the counsellor positioned the advice as normatively relevant), as well as displaying the counsellor's knowledge and epistemic authority in dealing with the problem with which the caller had presented. However, by enquiring into a caller's ability to undertake that action, the counsellor worked to privilege the *caller's* epistemic authority above his/her own thereby enacting the helpline's principles of client-centredness and empowerment.

Another way in which advice was observed to be provided on *Kids Help Line* in accordance with institutional mandates was through the employment of ‘script proposals’ (Emmison et al., 2011). Script proposals involved counsellors packaging their advice as something a caller might say at some future point to a third-party (e.g., “And to: e: - you know explain to them how you ↑feel↑ an say look oh you know (0.9) when this other girl did ↑this↑ it made me feel lo:nely and it made me feel sa:d=and I’d jist really like us all to be frie:nds again.”, Emmison et al., 2011, p. 16). Through these proposals, counsellors adopted the speaking position of callers and modelled for them potential scripts of future interaction (i.e., they provided examples of what callers *could* say rather than what callers *should* say). By adopting the speaking position of callers, counsellors worked to position callers as the arbiters of that advice, thereby enacting the institution-specific goals of empowerment and client-centredness².

The sequential placement of script proposals also worked to uphold these basic principles. Script proposals were typically produced in third position following an initial attempt by a counsellor to make relevant a potential course of future action either through the employment of (1) an advice-implicative interrogative, or (2) an interrogative that worked to elicit a suggestion from the *caller* regarding a potential solution to his/her stated problem. In second position, a caller typically provided a response that either (1) identified some problem with the counsellor’s proposed course of action, or (2) worked to provide a suggestion regarding a potential course of future action. By designing their script proposals with reference to these second position utterances, counsellors were able to tailor their proposals to callers’ specific contributions (i.e., to incorporate callers’ suggestions, ideas, and words into their script proposals), thereby enacting the helpline’s client-centred philosophy.

Another over-the-phone institutional context where interactions are shaped by a dilemma regarding the provision of advice is *Child Health Line* (Butler, Danby, Emmison, &

Thorpe, 2009). *Child Health Line* is an Australian helpline that offers information and support for parents and families regarding issues of child development and parenting. The helpline is staffed by nurses who are guided by an institutional mandate to avoid the provision of *medical* advice. Much like calls to *Kids Help Line*, this institutional philosophy was reported to pose a dilemma for nurses in that a number of callers contacted the helpline for the explicit purpose of receiving such advice. These requests were seen to operate from an assumption on the part of callers that nurses had the professional authority and institutional warrant to offer medical advice. These institutional guidelines resulted in multiple constraints and tensions that needed to be managed by nurses over the course of calls.

Nurses were observed to manage these tensions by avoiding the provision of medical advice in the following ways: (1) explicitly referencing their membership as a nurse in order to establish boundaries of expertise, (2) privileging parental authority in terms of decision-making regarding treatment, and (3) respecifying ‘medical’ problems as child development issues (Butler et al., 2009). In the first case, nurses avoided the provision of medical advice by making explicit reference to the limitations of their knowledge and institutional capacities in offering medical assessments and diagnoses. In these instances, nurses typically encouraged callers to seek medical advice from other health professionals, such as doctors or pharmacists. By placing boundaries on their epistemic entitlements and privileging the epistemic authority of doctors, nurses worked to avoid the provision of medical advice whilst still attending to callers’ requests for such advice.

Nurses typically worked to privilege parental authority in those instances where parents explicitly requested nurses to provide an assessment of whether a problem required medical attention, and where there was some ambiguity as to whether seeking such attention was a warranted course of action. In these instances, nurses typically provided information regarding the types of problems for which one might seek help (e.g., a high temperature) but

deferred decisions regarding treatment to callers. The third, and final, way in which nurses avoided the provision of medical advice – respecifying medical problems as child development issues – differed in that it involved them in attempts to *privilege* their epistemic authority. By respecifying a problem as one of child development rather than a medical issue, nurses were able to provide information and advice with respect to their domain of expertise. In this way, nurses avoided the provision of *medical* advice that callers may have originally been seeking whilst still attending to callers’ concerns regarding the welfare of their children.

Warm lines represent another institutional over-the-phone context where the implementation of institution-specific goals can lead to a number of constraints that need to be managed over the course of calls. Warm lines aim to provide social support to people suffering from mental disabilities, and, unlike helplines, they are staffed by peers rather than professionals (Pudlinski, 1998, 2002, 2005). These peers, or working consumers, are members of a community mental health agency. In this institutional context, Pudlinski (1998, 2001, 2008) identified three institution-specific goals or ‘themes’ that could be seen to shape the over-the-phone interactions. These themes were seen to be contradictory or conflicting in nature leading to specific patterns of interaction.

The first of these themes – non-directiveness – involved working consumers respecting clients’ (i.e., callers’) autonomy and their capacity for decision-making by avoiding the direct provision of advice. This theme was seen to be in direct contrast to that of problem-solving whereby working consumers were encouraged to assist clients to discover solutions to their problems. In assisting clients to develop strategies to solve their problems, Pudlinski (1998, 2008) argued that working consumers inevitably assumed some of the responsibility for problem-solving thereby undermining client autonomy. The third theme – connectedness – involved working consumers in attempts to establish and maintain peer support networks, and to build long-term peer relationships with clients. Pudlinski (1998)

argued that the theme of connectedness was contrary to that of problem-solving in that helping clients to solve problems inevitably involved an assertion of expertise and knowledge on the part of working consumers, which undermined the establishment of a peer relationship.

Given these three contradictory themes, Pudlinski (1998) argued that working consumers had to manage multiple, conflicting goals when interacting with clients over-the-phone. Working consumers were seen to uphold these conflicting institutional mandates by offering advice in the following indirect ways: (1) incorporating a solution within a query, (2) describing their own problem and solution, and (3) giving information about a potential solution. These means of providing advice were seen to take the form of speakers doing X while also doing Y, whereby X and Y exemplified contradictory themes. For instance, by incorporating a solution within a query, working consumers appeared to be merely enquiring about a client's problem/circumstances (doing X), thereby enacting the theme of connectedness, whilst also making relevant a potential solution (doing Y), thereby enacting the theme of problem-solving. Incorporating a solution within a query shared similarities to the advice-implicative interrogatives described by Butler et al (2010) in the context of calls to *Kids Help Line* in the sense that, through these interrogatives, working consumers worked to implement a suggestion, but in the context of merely enquiring into a client's specific circumstances and their willingness/ability to undertake that solution.

Sharing one's own problem involved a working consumer detailing his/her experience of a problem similar to that of a client's (Pudlinski, 1998). This detailing often culminated in a description of the ways in which the working consumer was able to solve his/her problem. Through this detailing, working consumers made relevant a potential solution to the client's problem (doing Y) but in the context of merely sharing similar experiences (doing X). Working consumers were therefore able to offer advice but in such a way that the decision

regarding the implementation of that advice remained with clients. Sharing one's own problem also worked as a vehicle for establishing empathy in that it positioned working consumers as peers with similar problems to those of clients. This display of empathy was seen to uphold the warm line's theme of connectedness.

The final method of providing advice – giving advice as information – again took the form of 'doing X while doing Y' in that working consumers made relevant a potential solution (doing Y) within the context of simply providing information (doing X). Giving advice as information involved working consumers providing details about a potential solution, which positioned them as knowledgeable in solving client's problems. However, by not actively encouraging the client to adopt that solution, the responsibility for decision-making was seen to remain with the client. The client was then able to respond to the working consumer's information either by treating it simply as news, and potentially irrelevant, or by treating the information as a suggestion to be implemented. By making relevant a potential solution, but without encouraging the client to adopt that solution, giving advice as information again enabled working consumers to uphold the warm line's contradictory themes of non-directiveness and problem-solving.

Similar to the studies outlined above, the aim in the present thesis is to investigate the extent to which the institution-specific goals and operational philosophies of *MensLine's* telephone counselling are played out, in practice, in sequences of interaction. Consistent with a number of studies on helpline interaction (e.g., warm lines and *Child Health Line*), the institutional philosophies in play in this particular context – troubles-receipting and service provision – are potentially conflicting and contradictory. The focus of the analysis is on how the tensions or dilemmas that can arise from the implementation of these institutional philosophies become consequential for the conduct of participants, and how these tensions

are managed in sequences of talk-in-interaction. The next section provides a more detailed outline of the focus of the thesis, as well as providing an outline of each subsequent chapter.

1.5 Aims of thesis

The present thesis examines the ways in which the institution-specific goals of a men's relationship counselling helpline, which are shaped by the assumption that men display a preference for solution-focused outcomes when consulting health professionals, are achieved and implemented in interactional practice. I examine the ways in which callers and counsellors manage the "competing relevancies" (Butler et al., 2010, p.281) of a troubles-telling and a service-encounter by focusing on how counsellors' attempts to attend to their dual institutional role are negotiated, more or less successfully, at particular points in the call. By analysing how the helpline's institutional mandates become consequential for the conduct of participants, I explicate (1) the skilled ways in which counsellors orient to and manage their potentially contradictory or competing roles of service provider and troubles-recipient, and (2) how counsellors' attempts to attend to the relevance of the role of service provider become a regular source of interactional difficulty or disfluency in calls.

Specifically, I focus on those sequences of interaction where callers display resistance to counsellors' attempts to attend to the relevance of their institutional role of service provider. This resistance arguably displays callers' orientation and preference to the reason-for-call as one of troubles-telling *only*. In explicating this preference I demonstrate evidence of an interactional asymmetry or difference in orientation between callers and counsellors to the purpose of calls taking place between them: whereas most callers appear to orient to troubles-talk as their reason for calling the helpline, counsellors routinely orient to the relevancies of service provision *and* troubles-receipting as the focus of calls. This general pattern of a difference in orientation arguably has consequences, both in terms of practice and

research, for the pervasive assumption that men display a preference for action-oriented, solution-focused outcomes in their interactions with health professionals.

The next section provides an outline of each subsequent chapter in the thesis.

1.5.1 Outline of chapters.

The present thesis is comprised of eight chapters. The next chapter provides an overview of the methodological procedures employed in the present thesis including data collection and transcription. I also provide more information about the data and the data source, *MensLine Australia*, as well as the analytic approach of Conversation Analysis.

The first analytic chapter (Chapter 3) focuses on call-opening sequences in the *MensLine* corpus and provides a background to the analyses undertaken in subsequent chapters. The aim is to demonstrate how the absence of a standard institutional service request in counsellors' opening turns places the onus on callers to initiate a first topic for talk. I identify two main ways in which callers initiate this first topic: (1) an indication that they have called the helpline for the explicit purpose of receiving advice, and (2) narrative reporting on a trouble. In this chapter I examine, in detail, reason-for-call accounts that focus on advice, and demonstrate the unproblematic nature of such accounts for the ensuing interaction between caller and counsellor.

Chapters 4-7 focus on the interactional difficulties routinely associated with narrative reporting on a trouble in this specific institutional context. I show how these difficulties play out in sequences of interaction where counsellors attempt to attend to the relevance of their institutional role of service provider, and where callers routinely resist these attempts. Through an analysis of caller resistance I provide evidence of an interactional asymmetry between caller and counsellor whereby they appear to demonstrate different orientations to the purpose of calls taking place between them. I explicate two types of interactional

difficulty that provide evidence of this interactional asymmetry: (1) establishing reason-for-call, and (2) third-party complaints.

Chapters 4 and 5 focus on the first of these difficulties: establishing reason-for-call following narrative reporting on a trouble. This interactional difficulty appears to stem from the format of callers' tellings. Specifically, these tellings routinely take the form of not being self-evidently concluded at any point. In Chapter 4, I describe a sequential pattern whereby, following these reports, counsellors can be seen, routinely, to attempt to establish a reason-for-call that is in line with *MensLine's* aims of service provision. By working to establish the reason-for-call as one of service provision, counsellors demonstrate their orientation to talk on a trouble as insufficient evidence of a specific reason-for-calling in this helpline context. In Chapter 5, I examine the routine ways in which callers respond to counsellors' attempts to establish reason-for-call, and which typically display resistance to counsellors' attempts to frame the reason-for-call as one of service provision rather than one of troubles-telling alone.

Chapters 6 and 7 focus on the interactional difficulty associated with caller complaints against non-present third-parties (e.g., a wife or ex-wife). In Chapter 6, I describe an interactional pattern whereby counsellors tend to respond only minimally to these complaints in an arguable attempt to maintain the relevance of service provision for introducing at a later point in the interaction. Following these minimal responses, callers can be seen, routinely, to attempt to elicit the preferred response of affiliation. Complaint sequences in the *MensLine* corpus therefore routinely undergo sequence-expansion creating difficulties for counsellors in terms of sequence-closure. One routinely employed resource for managing the delicate issue of transitioning from troubles-telling to problem-solving is discussed in Chapter 7. This chapter again provides evidence of an interactional pattern regarding caller resistance in response to counsellors' attempts to frame the interaction as one of service provision.

The aim in these analytic chapters is to provide evidence of an interactional pattern regarding an asymmetry or difference in orientation between callers and counsellors to the purpose of calls taking place between them. Specifically, whereas the majority of callers regularly report calling the helpline for the explicit purpose of talking to someone, counsellors can be seen to orient to the relevancies of both troubles-receipting *and* service provision. Repeated orientation on the part of callers to the activity of troubles-telling represents a challenge to the pervasive assumption that men display a preference for solution-focused outcomes. In the final chapter (Chapter 8), I provide an overview of the analytic findings of the thesis, as well as discussing the implications of this observed asymmetry for research and practice.

Chapter 2

Method

2.1 Overview

The present chapter provides an outline of the methodological procedures involved in the present study beginning with a description of the data source – *MensLine Australia* – as well as the processes of data collection and transcription. Following this, the chapter provides an overview of the methodological and analytic framework employed in the present thesis – Conversation Analysis (CA). The aim is to provide a brief outline of the basic tenets of CA upon which the present analysis is based. I outline four key CA concepts: turn-taking, sequence organisation, sequence-expansion and preference organisation.

2.2 Data source

The data under analysis consist of a corpus of recorded telephone calls made to the helpline *MensLine Australia*. *MensLine Australia* is a national, government-funded relationship counselling helpline managed by Crisis Support Services (CSS), a professional telephone counselling and training provider (www.crisissupport.org.au). *MensLine* is promoted, through brochures and on its website, as a “unique telephone support, information and referral service, helping men to deal with relationship problems in a practical and effective way” (www.mensline.org.au). The types of ‘relationship problems’ that can be dealt with through the helpline include relationships with intimate or romantic partners, children, friends, family members, or work colleagues; however, the majority of calls involve talk about relationship issues involving romantic or intimate partners.

The *MensLine* helpline service runs 24 hours a day and is staffed by paid professional counsellors. *MensLine* counsellors have a diverse range of qualification backgrounds including psychology, social work, and different counselling modalities, and all have experience in dealing with men's issues (R. N. John, personal communication, October 19, 2010). *MensLine* receives and handles calls not only from men but also from women who are concerned about a male in their lives, as well as health professionals. Female callers comprise approximately 9% of all callers to the helpline. For the present thesis, calls made either by females or by health professionals have not been included in the data corpus.

In 2009-2010, approximately 47,000 calls were made to *MensLine*, with 71 per cent of calls being answered by counsellors. Topics addressed in these helpline calls included interpersonal issues (e.g., ending a relationship and managing the separation process, or attempting to establish and maintain a relationship), legal or financial issues (e.g., legal rights and responsibilities after a separation, debt or financial difficulties, problems with Family Law/Courts), parenting issues (e.g., separation from children, denial of access to children, disagreements about parenting), physical and mental health (e.g., depression, anxiety, or stress), sexual issues, and work issues. In addition to the helpline, *MensLine* offers a Call Back Service where callers can talk to the same counsellor over a period of six calls, and also operates an online support forum through its website www.menslineaus.org.au.

MensLine's head office is located in Melbourne, Australia where counsellors work an average of six hours per shift. The number of counselling staff working at one time depends on the time of day. The largest number of counsellors staffing the helpline is approximately twelve and occurs at 1pm on weekdays. The number of counsellors working per shift then gradually declines into the evening and night with approximately two or three counsellors staffing the helpline at 7 am.

Counsellors do not make detailed case notes for each call they handle, except on the Call Back Service where such information is important for the purposes of continuity. Counsellors record only general information including demographics (e.g., location of caller, date of birth, language spoken at home and occupation), the main issue discussed in a call, and the call-type (R.N. John, personal communication, May 16, 2011). This information is then incorporated into *MensLine*'s monthly and annual call statistics.

The 'main issue discussed' in a call can be coded into one of eight categories:

1. Interpersonal
2. Parenting
3. Physical/mental health
4. Financial/material/legal
5. Safety
6. Sexual
7. Work
8. Social

These categories are then broken down into over a hundred different sub categories.

Call-type can comprise one of 22 different categories, 19 of which apply to incoming calls. These call-type categories include counselling, information, referral, triage to another service, or a combination of these categories (e.g., 'counselling, information, and referral' or 'counselling and information'). Other, less common, call-type categories include general enquiries about the service, administration, thanks and appreciation, complaint calls, inappropriate calls, calls where the caller did not engage, early disconnection, hang ups, and wrong numbers. Counselling calls constitute the most common call-type, comprising just

under half of all calls to the helpline.

2.3 Data recording and collection

The data for the present thesis consist of a corpus of 169 telephone calls to *MensLine*, amounting to just over 106 hours of audio recordings. The calls were collected over an eight month period between December 2008 and July 2009 and range in length from 15 to 64 minutes, with an average call length of 37.9 minutes. As stated previously, all calls in the data corpus are from men, and all but two are from first-party callers. Of the 169 calls in the corpus, four consist of calls where the counsellor returned a call to the caller either because their prior interaction had to be terminated (e.g., the caller was busy at work or looking after his children), or because the caller left a message on the helpline's answering machine.

Counsellors were recruited to take part in the present research project via an information session provided by the researcher. In this information session, counsellors were informed of the nature of the project and were also provided with an information sheet (see Appendix A). Expressed, written consent was provided by the counsellors who wished to take part in the project (See Appendix B for this consent form). Initially, four counsellors consented to take part in the study. A further two counsellors then consented to take part during the data collection process, resulting in a total of six counsellors taking part in the project over the eight months of data collection.

Calls to *MensLine* are already recorded as part of counsellor education and training, and so no additional recording equipment was required for data collection. Prior to their conversations with counsellors, callers are provided with a recorded message that informs them that their calls may be recorded for quality assurance. This incoming message is reproduced below:

Welcome to MensLine Australia. We strive to keep improving the quality of our service. Your call may be recorded for quality assurance purposes. Also, your counsellor may ask you for some demographic information. All information collected is securely stored and callers remain anonymous. Please let us know if you don't want your call or information recorded.

During data collection, this recorded message was altered to inform callers that their calls may also be recorded for research purposes. All counsellors who consented to take part in the study had their calls recorded during the data collection period (unless, of course, callers opted not to have their calls recorded).

Caller consent was obtained verbally. Counsellors were provided a choice as to whether they gained consent from callers at the beginning or end of their conversations. All counsellors who took part in the project opted to obtain consent from callers at the end of their telephone calls as most counsellors felt that obtaining consent at the beginning of a conversation would undermine the establishment of rapport. As such, consent was usually obtained from callers following the deployment of a series of questions that aimed to elicit basic demographic information from callers (e.g., post code, place of birth. See recorded message above regarding the solicitation of demographic information). The script that was provided to counsellors in order to obtain consent from callers can be found in Appendix A.

Once callers consented to take part in the project, counsellors informed *MensLine's* CEO who then uploaded the recorded calls on to a secure, password-protected website that could only be accessed by the researcher.

2.4 Data transcription

Transcription of the raw data (audio recordings) was assisted through the use of the software program Wavepad Audio Editing Software. The recorded calls were transcribed using the Jeffersonian Transcription system (Jefferson, 2004). This system of transcription enables a detailed description of interaction including not only the words that are spoken, but *how* they are spoken. The basic premise behind this transcription system is that even minute details of talk, such as pauses, elongation, volume, stress, inbreaths, and overlapping speech, are constitutive of the actions that talk performs and so cannot be ignored in transcription. These vocal features of talk are then denoted using different transcription symbols (Appendix C provides an outline of the symbols used in the present thesis).

In the transcripts reproduced in the following analysis, all potentially identifying features (e.g., names, locations) have been omitted or replaced with pseudonyms in order to ensure caller anonymity. The transcripts along with the raw data (the audio recordings) were analysed using the methodological framework of Conversation Analysis, an outline of which is provided below.

2.5 Conversation Analysis

Conversation Analysis (CA) is concerned with the examination of the ways in which social actions are enacted through real-life, naturally occurring talk-in-interaction (Hutchby & Wooffitt, 1998). The basic premise of CA is that talk is action-oriented and that these actions are accomplished in a sequential and orderly fashion. The focus of analysis is on how participants, *in situ*, orient to the actions that talk accomplishes and how these participant understandings or orientations are made evident in speakers' turns-at-talk.

In this methodological framework, talk is seen as both context-dependent and context-renewing. That is, turns-at-talk are positioned with reference to the preceding utterance and

the action that it implements, as well as projecting a particular action for the next speaker (Arminen, 1999). CA therefore works to examine talk-in-interaction by focusing on the sequential positioning of turns-at-talk. This involves an examination of (1) what occasions a particular utterance (i.e., how a speaker understood the prior utterance), (2) what that utterance is doing (i.e., how it is shaped by the prior utterance), and (3) what kind of talk will be occasioned by *its* production (Whalen, Zimmerman, & Whalen, 1988).

A speaker's display of his/her understandings of the actions accomplished in his/her interlocutor's prior turn-at-talk is referred to as the next-turn-proof-procedure (Hutchby & Wooffitt, 1998). It is this property of talk – the fact that participants in a conversation display their understandings of the unfolding talk in order to produce an appropriate next action – that conversation analysts exploit in order to provide a systematic analysis of the ways in which social actions are accomplished through talk (Goodwin & Heritage, 1990; Whalen et al., 1988). The aim in the present thesis is to employ CA to examine the social actions that are implemented through participants' talk on a men's relationship counselling helpline. The analysis relies on a number of key CA findings derived from the analysis of mundane, everyday interaction. These findings have acted as the cornerstone for CA research examining talk and social interaction in a number of other contexts, including institutional settings such as the helpline interactions examined here. Before providing an overview of some of the basic tenets of CA upon which the findings in this thesis are based, I will focus first on the role of CA in the analysis of institutional interaction.

2.5.1 Institutional interaction.

The conversation analytic investigation of institutional interaction typically involves the analysis of talk that takes place in goal- or task-oriented settings, such as general practice consultations (e.g., Drew, 2006; Gafaranga & Britten, 2003; Gill, 1998; Heritage &

Robinson, 2006), court rooms (e.g., Drew, 1992; Ehrlich, 2002), classrooms (e.g., Macbeth, 2004; Radford, Blatchford, & Webster, 2011; Razfar, 2005), and various counselling contexts, including HIV and AIDS counselling (e.g., Kinnell & Maynard, 1996; Silverman & Perakyla, 1990), educational counselling (e.g., Vehviläinen, 2001, 2003), psychotherapy interactions (e.g., Antaki, 2008; Vehviläinen, 2008), and face-to-face (e.g., Hutchby, 2002; Hutchby, 2005) as well as over-the-phone child counselling (e.g., Butler et al., 2010; Emmison & Danby, 2007). Importantly, conversation analysts do not presuppose that talk in these settings is inevitably 'institutional' in character (Schegloff, Koshik, Jacoby, & Olsher, 2002). That is, CA does not presuppose that a particular context, such as a medical, therapeutic or legal setting, constitutes an external constraint that automatically restricts the ways in which participants in a conversation will interact (Arminen, 2006). Rather, CA seeks to examine how, and whether, participants' orientations to the specific context in which talk is occurring become consequential for their conduct (Schegloff, 1991). That is, CA examines whether participants display for one another, as well as for analysts, their orientation to the wider context in which their talk is taking place, and how these orientations manifest themselves in sequences of talk-in-interaction (Hutchby & Wooffitt, 1998).

A cornerstone of CA work on institutional interaction involves explicating how, and whether, talk in institutional settings can be seen to differ from that of mundane conversation (Hutchby & Wooffitt, 1998). Most CA research has shown that talk in institutional settings is typically adapted or specialised from that of mundane interaction to allow for the successful accomplishment of institution-specific goals (Drew & Heritage, 1992; Hutchby & Wooffitt, 1998). For instance, the openings of calls to emergency services, where the institution-specific goal is one of third-party emergency dispatch, typically display systematic variations and reductions on call openings in mundane settings. These variations and reductions are seen to assist with the accomplishment of the institution-specific goals of responding to a caller's

reported emergency (Whalen & Zimmerman, 1990; Zimmerman, 1992a). The openings of calls to emergency services will be discussed further in Chapter 3 (Section 3.3).

As with previous CA research in institutional settings, the aim in the present thesis is to examine how, and whether, callers and counsellors on a men's relationship counselling helpline orient, in their turns-at-talk, to the wider context in which their interaction is taking place. That is, the focus is on how callers and counsellors demonstrate their orientation and understanding that a call is taking place on a relationship counselling helpline, and for the explicit purpose of talking on a trouble and/or gaining advice and information. The present thesis contributes to the growing literature on helpline interaction by explicating how the particular institutional framework in place in this counselling context – a solution-focused model of counselling – is talked into being and made relevant by, and for, participants in the ongoing interaction. Calls are examined for how counsellors orient to their institution-specific tasks of listening to callers' problems and providing them with solution-focused strategies, and how these tasks can, at times, conflict with callers' orientations to the purpose of the interaction taking place (i.e., the reasons they provide for contacting the helpline).

The chapter now moves to examine the basic tenets of CA that underpin the analysis to follow, including turn-taking, sequence organisation, sequence-expansion, and preference organisation. Although the scope of CA investigation is broader than these specific features of talk-in-interaction, the aim here is to provide an overview of the fundamental principles of CA and to explicate how they are relevant to the analysis in the present thesis.

2.5.2 Turn-taking.

One of the fundamental organising principles of talk-in-interaction from a CA perspective is turn-taking (Schegloff, 2007). Turn-taking refers to the ways in which turns-at-talk are organised so as to allow for minimal gap and overlap between speakers (Schegloff,

2007). This is usually achieved by one guiding principle: one person talks at a time (Hutchby & Wooffitt, 1998; Sacks, 2005). Turn-taking is also guided by the production of discrete units of talk, known as turns-at-talk. Turns-at-talk are built out of turn-constructive units (TCUs), which constitute a recognisable action such as a request, granting, or offering (Sacks, Schegloff, & Jefferson, 1974). Not only are TCUs shaped in terms of the action that they are implementing, they are also organised with reference to grammar and can be fashioned out of sentences, clauses, phrases, and lexical items (Schegloff, 2007; Sidnell, 2010). TCUs are also organised with reference to intonational packaging, which refers to the phonetic production or phonetic realisation of talk (Hutchby & Wooffitt, 1998; Schegloff, 2007; Sidnell, 2010).

The completion of a TCU, in terms of the action that it is implementing as well as its grammatical and intonational structure, provides for the relevance of speaker transition (Hutchby & Wooffitt, 1998; Schegloff, 2007). The span between the completion of one TCU and the commencement of another is referred to as a 'transition-relevance place' (TRP) (Hutchby & Wooffitt, 1998; Schegloff, 2007). A TRP represents a space in which speaker transition *may*, but not necessarily will, take place (Schegloff, 2007; Sidnell, 2010). If speaker transition does not occur, the speaker who produced the TCU that reached a TRP may legitimately continue speaking. In this way, speakers' turns-at-talk can be fashioned out of multiple TCUs.

Apart from turn-taking, talk-in-interaction can also be organised in terms of sequence, that is, the ways in which turns-at-talk, and the actions that they implement, are linked to one another (Arminen, 2006). The next section provides an outline of sequence organisation.

2.5.3 Sequence organisation.

First, it is important to differentiate between sequence organisation and sequential organisation. Whereas sequential organisation refers more generally to turn-taking, sequence organisation refers to the organisation of actions that are implemented through turns-at-talk (Schegloff, 2007). From a CA perspective, sequences are seen as vehicles for the accomplishment of actions (Schegloff, 2007). The most basic sequence through which an action can be accomplished is the adjacency pair.

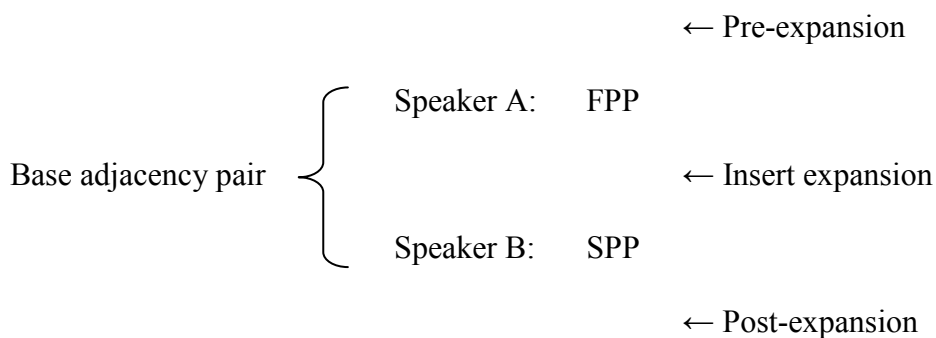
An adjacency pair consists of two adjacently placed turns-at-talk produced by two different speakers (Schegloff, 2007). The two turns that make up an adjacency pair are ‘relatively ordered’ (Schegloff, 2007, p. 13). That is, they consist of a first pair part (FPP) and second pair part (SPP) where the FPP initiates a particular action (e.g., a request) and the SPP responds to that action (e.g., a granting or refusal). Not only are adjacency pairs relatively ordered but they are also pair-type related. That is, not any SPP can follow a FPP – FPPs and SPPs have to come from the same *pair-type*. The regular occurrence of paired actions is explained through the property of conditional relevance whereby a FPP makes relevant and expectable a particular SPP response (Maynard & Clayman, 2003). Specifically, greetings have to be followed by greetings, questions by answers, requests either by a granting or a refusal, and so on.

It is through the minimal adjacency pair sequence that participants in a conversation display their understandings of the ongoing talk-in-interaction. Specifically, a FPP can be seen as responsive to a prior action (i.e., having backwards or retrospective import), as well as projecting the relevance of a limited set of possible pair-typed SPPs (i.e., having forwards or prospective import) (Schegloff, 2007). Although the minimal adjacency pair constitutes the basis of sequence organisation, not all sequences are necessarily made up of this simple two-turn sequence. Adjacency pairs can be expanded at a number of different points leading

to the production of long stretches of talk centred on an adjacency pair. Next, I provide an outline of sequence-expansion.

2.5.4 Sequence-expansion.

Sequence-expansion can occur in three different places: prior to the FPP of an adjacency pair (pre-expansion), in between the FPP and SPP (insert expansion), and following the SPP (post-expansion) (Schegloff, 2007). These three possible points of sequence-expansion are best represented through the following schematic outline:



Pre-expansion sequences are typically initiated by the speaker of the base FPP and are preparatory to the implementation of a particular action (Schegloff, 2007; Sidnell, 2010). Specifically, they work to project a particular action, such as inviting, and check whether a condition or contingency exists for the successful accomplishment of that action (Sidnell, 2010; ten Have, 2010).

Insert expansion sequences are typically initiated by the recipient of the base FPP (Schegloff, 2007). Insert sequences delay, but do not delete, the relevance of an upcoming SPP. They perform some preliminary work that will enable the successful production of the SPP. An insert sequence can either deal with matters relating to the production of the FPP or the upcoming SPP. Insert expansions directed towards the FPP are known as ‘post-first’

expansions (Liddicoat, 2009; Schegloff, 2007; Sidnell 2010). Post-first expansions typically constitute repair sequences, that is, attempts to repair some problems in hearing or understanding of the FPP. Insert expansions related to the SPP are called ‘pre-second’ expansions (Liddicoat, 2009; Schegloff, 2007; Sidnell 2010). Pre-second expansions typically do some work relevant to the upcoming SPP. For instance, if the base FPP constitutes a request, speakers of the SPP can provide a pre-second insert expansion that performs some preparatory work designed to facilitate the granting of that request (Liddicoat, 2009).

Post-expansion sequences can be minimal or extended. Minimal post-expansion typically consists of sequence-closing thirds such as ‘oh’ and ‘okay’, as well as minimal third-turn assessments (Schegloff, 2007; Sidnell 2010). Extended post-expansion can include other-initiated repair, topicalisation, rejecting/challenging/disagreeing with SPPs, and reworkings of FPPs (Schegloff, 2007). Extended post-expansion sequences are central to the analysis presented in Chapter 6. In this chapter I demonstrate how counsellors’ non-affiliative responses to callers’ third-party complaints result in subsequent post-expansion work by callers in which they attempt to elicit the preferred response of affiliation.

Intrinsically linked to sequence organisation and sequence-expansion, and also forming a central part of the analysis in the present thesis, is preference organisation. Preference organisation refers to the ways in which different SPP responses are organised with respect to systematic preferences for particular types of responses. The categorisation of preferred and dispreferred responses has consequences both for sequence-expansion and sequence-closure (i.e., preference organisation is one of the key determining factors in whether a sequence will be expanded beyond a single adjacency pair). Below, I provide an outline of preference organisation.

2.5.5 Preference organisation.

Although a range of potential SPPs can be made relevant following a FPP, not all responses are of equal value. Some responses will be ‘preferred’ whereas some will be ‘dispreferred’. The concept of preference relates to the action that a FPP embodies rather than a speaker’s psychological state. That is, preferred responses work to further the action-trajectory embarked upon in a FPP and to align with the stance exhibited in the prior speaker’s turn (Schegloff, 2005). By contrast, dispreferred responses work to undermine or hinder the accomplishment of the action projected in a FPP. For instance, the acceptance of an invitation works to advance the trajectory of the sequence underway, and the action being implemented through that sequence (i.e., inviting), therefore constituting the preferred response. By contrast, a blocking response, such as a refusal or rejection of an invitation, works to hinder the accomplishment of the action being implemented through the FPP, and therefore constitutes a dispreferred response. Responses are therefore preferred or dispreferred in terms of their interactional import, not a speaker’s personal desires (Liddicoat, 2009)³.

Preferred and dispreferred responses are typically designed so as to demonstrate their relative preferred and dispreferred status (Sidnell, 2010; ten Have, 2010). Preferred responses are produced immediately and with little delay or accompanying talk that accounts for the response. By contrast, dispreferred responses are typically delayed relative to the FPP and are accompanied by some sort of account, excuse, or disclaimer (Schegloff, 2007). The production of preferred and dispreferred responses demonstrates the preference for contiguity in conversation; that is, the preference for SPPs to immediately follow FPPs (Liddicoat, 2009). The fact that dispreferred responses routinely break contiguity with the FPP demonstrates their status *as* dispreferred responses (Liddicoat, 2009; Pomerantz, 1984). Common devices for delaying the production of a dispreferred SPP and breaking contiguity

with the FPP include silences, pre-pausals (e.g., um, well, uh), inbreaths, hedges (e.g., I don't know), discourse markers (e.g., well), anticipatory accounts, palliatives (e.g., appreciative tokens and apologies that work to mitigate the negative valence of a dispreferred response), and pro forma agreements (i.e., agreement followed by disagreement, the canonical form of which is "yeah but...") (Schegloff, 2007; Sidnell, 2010).

Typically, preferred responses are sequence-closure relevant whereas dispreferred responses are sequence-expansion relevant (Schegloff, 2007)⁴. Preferred responses are sequence-closure relevant in that, once the preferred response is provided, further turns-at-talk are not required for the completion of the sequence initiated by the FPP. If further turns-at-talk are provided, they typically consist of minimal post-expansion responses that do not contribute any further to the action-trajectory of the sequence. By contrast, dispreferred responses are sequence-expansion relevant because, following such responses, speakers typically do some work to elicit the preferred response. One way in which they do so is by reworking their FPP so that the production of a preferred response is made easier (Sidnell, 2010). For instance, speakers can modify a FPP so that the dispreferred response foreshadowed by a continuity breaking device (e.g., turn-initial delay) becomes the preferred response.

The sequence-expansion relevance of dispreferred responses is pertinent to the analysis in Chapter 6. In that chapter I examine how callers attempt to elicit the preferred response of affiliation to their complaints following the routine provision of dispreferred responses from counsellors. These attempts from callers took the form of extended post-expansion work that expanded the complaint sequences underway. This sequence-expansion then created interactional difficulties for counsellors in terms of closure of the troubles-talk/complaint sequence.

As well as action-type preference, SPPs can be organised in terms of a grammatical or polarity preference. This preference organisation is typically reserved for the production of interrogatives. Yes/no interrogatives (YNIs), for instance, can be formatted grammatically so as to set a preference either for a ‘yes’ or a ‘no’ as the preferred response. This grammatical or polarity preference can be unrelated to the action-preference of the interrogative. That is, a speaker can produce a request such that the action- and polarity-preference align (i.e., invite the same response), or such that they do not. For instance, if a request was formatted as “can you give me a ride home”, both the action-type and polarity preference invite a ‘yes’ or a granting response (Schegloff, 2007; Raymond, 2003). By contrast, if the request were negatively framed as “you can’t give me a ride home can you?”, the action-type and polarity preferences differ. Specifically, the action-type preference remains the same – a preference for a granting rather than a refusal – whereas the polarity preference invites ‘no’ as the preferred response (Schegloff, 2007; Raymond, 2003). In this instance, the YNI exhibits what Schegloff (2007) called “cross-cutting preferences” (p. 76).

The preference organisation of interrogatives informs the analyses presented in Chapters 5 and 7 where I focus on callers’ responses to counsellors’ attempts (1) to establish reason-for-call, and (2) to transition out of troubles-talk, respectively.

2.6 Chapter summary

The present chapter has provided an overview of the methodological procedures employed in the present thesis including data recording, collection, and transcription, as well provided information about the data source – *MensLine Australia*. The present chapter also provided an overview of the methodological framework employed to analyse *MensLine’s* over-the-phone counselling interactions – Conversation Analysis. This chapter has demonstrated how CA works to identify systematic patterns regarding the accomplishment of

social actions through talk-in-interaction. The basic tenets of CA examined in the present chapter were turn-taking, sequence organisation, sequence-expansion, and preference organisation. These features of talk-in-interaction underpin the analyses of the helpline interactions presented in subsequent chapters. In these chapters I expand on a number of areas of CA investigation outlined here, namely sequence-expansion and preference organisation, as well as discuss other prior CA research as it becomes relevant to the analysis.

The thesis now moves on to the analysis of the data corpus. The focus of the analysis is on the ways in which *MensLine*'s institution-specific goals are played out in sequences of talk-in-interaction, and how these goals may not necessarily coincide with callers' stated reasons for contacting the helpline. The first analytic chapter, Chapter 3, provides an examination of the opening sequences of calls in the data under analysis, paying particular attention to the ways in which callers account for their calls to the helpline and initiate a first topic for talk, and how these accounts shape the ensuing interaction between caller and counsellor.

Chapter 3

The interactional organisation of call-opening sequences

3.1 Introduction

This chapter examines the opening sequences of calls in the *MensLine* data corpus. The aim of the analysis is to demonstrate how the absence of an organisational request, such as “how can I help you?”, in counsellors’ opening turns, works routinely to place the onus on callers to initiate first topics of talk. I identify two main ways in which callers regularly introduced a first topic: by the use of (1) reason-for-call accounting that indicated callers had called the helpline for the explicit purpose of receiving advice, and (2) narrative reporting on a trouble. I demonstrate that reason-for-call accounts that indicate a caller is seeking advice are routinely oriented to by counsellors as sufficient reasons for calling the helpline. By contrast, a number of interactional difficulties were observed to be associated with narrative reporting on a trouble in this counselling context. Exploration of the types of difficulty that were routinely associated with the production of troubles-talk in this institutional setting forms the major focus of subsequent analytic chapters.

The present chapter begins by providing an overview of the previous CA work on call openings, beginning with call-opening sequences in mundane telephone calls and then turning to an examination of call openings in institutional settings. The aim is to demonstrate that institutional call openings display a number of systematic variations on mundane call openings. Typically, these variations are made evident in the ways in which talk is specialised, reduced, or otherwise adapted to suit the institution-specific goals of a particular

organisation. Both mundane and institutional telephone calls will be used as a basis of comparison for how call openings unfold in the *MensLine* corpus.

3.2 The structure of mundane telephone call openings

The openings of telephone calls are routinely oriented to accomplishing interactional business such as establishing identification or mutual recognition, assessing the availability of the called party to enter into an over-the-phone interaction, and initiating a first topic of talk (Schegloff, 1986). In the context of mundane telephone calls, Schegloff described these elements of call openings in the form of a four-part canonical sequence:

- summons/answer
- identification/recognition
- greetings
- “how-are-yous”

Reproduced from his work, below, is a typical example of the opening of a mundane telephone call:

[Item #1. (HG) - from Schegloff, 1986, p. 114]

1 ((ring))
2 Nancy: H' llo:?
3 Hyla: Hi:,
4 Nancy: Hi::.
5 Hyla: Hwaryuhh=
6 Nancy: =Fii:ne how'r you,
7 Hyla: Okay:[y

8 Nancy: [Goo:d,
9 (0.4)
10 Hyla: mkhhh[hhh
11 Nancy: [What's doin,

The summons/answer sequence consists of the ring of the telephone and an answer response (e.g., “H’llo:?” , line 2). This sequence opens a channel of communication and establishes the availability of the called party (Nancy) to enter into an over-the-phone interaction. The answer response provides a voice sample that the caller (Hyla) might recognise, and allows her to determine whether s/he is speaking to the intended recipient. Part of the work of identification/recognition, then, is achieved, according to Schegloff (1986), in the summons/answer sequence. If the caller recognises the sample provided, s/he typically displays this recognition in his/her first turn-at-talk (e.g., by a return greeting, “Hi:,” , line 3). The caller’s first turn-at-talk then provides a voice sample that the *called party* can use to recognise *his/her* interlocutor. If recognition is achieved, the called party typically displays this recognition in his/her next turn-at-talk. Most commonly, this recognition is done through a return greeting (e.g., “Hi:.,” , line 4). The identification/recognition and greetings sequences, then, cannot be separated – it is through the greetings sequence that the caller and called party are able to claim their recognition of one another. Following the greetings exchange, and forming the last part of the canonical sequence, is the exchange of “how-are-yous” (lines 5-8). Such enquiries enable interlocutors to make relevant for the interaction an assessment of, and subsequent talk around, their current states of being.

Following an exchange of “how-are-yous”, the interaction reaches what Schegloff (1986) termed the *anchor position*. This is the slot where the first topic of talk is opened up – a topic of talk separate to that which might be opened up following a “how-are-you” enquiry. Typically, the onus is on the caller to fill this slot (i.e., to generate a first topic of talk)

(Schegloff, 1968). As a result, the anchor position is often occupied with issues of accountability, that is, a justification from the caller for his/her initiation of an over-the-phone interaction with the called party. The term given to this demonstration of accountability is reason-for-call accounting (Couper-Kuhlen, 2001; Schegloff, 1986).

Typically, institutional telephone calls display variations on the canonical call-opening sequence identified by Schegloff (1986), which has consequences for when and how reason-for-call accounting is achieved. Next, I provide an overview of call openings in various institutional contexts and examine how they differ systematically from the openings of mundane telephone calls, as well as outlining how reason-for-call accounting is typically achieved in these settings. I focus specifically on three institutional environments that will act as a basis of comparison for how call openings unfold in the *MensLine* corpus: calls to (1) emergency services, (2) a UK child protection helpline, and (3) an Australian children's helpline.

3.3 The structure of institutional telephone call openings

The systematic differences routinely observed between call openings in mundane interactions and call openings in institutional settings are typically reflective of the institution-specific goals in place in a particular organisation. Calls to emergency services, for instance, typically display reduced openings in comparison to everyday telephone calls, allowing for reason-for-call accounting to occur in a caller's first turn-at-talk (Whalen & Zimmerman, 1990). The example below represents an instance of such a reduced opening:

[Item (1) [MCE/20-7a/191] - from Whalen & Zimmerman, 1990, p. 468]

- 1 CT: Mid-City police and fire
2 C: Yes kin ya get uh kin ya get somebody over here right away we've got
3 uh gal that's just .hh ready tuh pass out. She's hh o:h (1.0) she's
4 passed out, okay

CT = Call-Taker

C = caller

Whalen and Zimmerman (1990) and Zimmerman (1992a) argued that the features of call openings typically present in mundane telephone calls – such as greetings and “how-are-you” – were absent in calls to emergency services because they were not relevant to the interaction at hand: reporting on an emergency. The truncated openings of calls to emergency services enabled callers to produce their reason-for-call accounts in the first available slot to talk (Zimmerman, 1992a). The reduced openings therefore demonstrated callers’ and call-takers’ orientations to the specific institutional practice taking place – reporting an emergency – which required a fast response and timely action. Call-takers also displayed a preference for categorical/institutional identification over recognition in their opening turns (Hopper, Doany, Johnson, & Drummond, 1990; Whalen & Zimmerman, 1987). This preference for identification was said to occur because the interlocutors were strangers and so voice recognition was not possible (Whalen & Zimmerman, 1987). Identification was established through explicit, categorical identification of the call-taker only – identification of the caller rarely occurred (Whalen & Zimmerman, 1987).

In emergency-services calls, reason-for-call accounting was observed to be achieved in one of three ways: (1) direct requests for assistance (e.g., making a request for an ambulance or the police), (2) naming or reporting a policeable trouble (e.g., break-in), and (3) narrative reporting whereby callers produced descriptions of events that could be heard as

requiring emergency assistance (Whalen & Zimmerman, 1987; Zimmerman, 1992a, 1992b). I return to these narrative reports in detail in the next chapter as a basis of comparison for how narrative reporting on a trouble typically unfolds in the *MensLine* corpus. First, I continue, here, to examine how call openings typically unfold in various institutional settings.

Similar patterns to those observed in calls to emergency services have been described in the openings of calls to a UK child protection helpline, which receives and handles calls from third-party callers reporting on a potential child abuse issue relating to, for instance, a grandchild or neighbour (the National Society for the Prevention of Cruelty to Children, NSPCC) (Potter & Hepburn, 2003). In this institutional context, call openings were typically reduced (i.e., “how-are-yous” and greetings were absent), allowing for reason-for-call accounting to occur in callers’ first turns-at-talk. The following fragment provides an illustration of the truncated nature of call openings on the child protection helpline:

[Item 3. WO Gran abuse worries – from Potter & Hepburn, 2003, p. 211]

- 1 ((phone rings))
- 2 CPO: Child protection helpline.= good morning.
- 3 Caller: Hallo love.=Er I’m ringin because I’m a bit
- 4 concerned about me granddaughter.

CPO = Child Protection Officer

By contrast to the UK child protection helpline, in calls to an Australian children’s helpline, *Kids Help Line*, where calls are made by children or young adults who are reporting on difficulties that they are experiencing first-hand, reason-for-call accounting was observed rarely to occur in callers’ first turns-at-talk (Emmison & Danby, 2007). The openings of calls in this institutional setting typically displayed a hybrid structure between mundane telephone calls and emergency service interactions whereby the greetings and “how-are-you” sequences

typical of mundane telephone interactions were present, as was the categorical, institutional identification typical in calls to emergency services. The fragment below demonstrates an example of this hybrid structure:

[Item 5. Call 2_1_11 - from Emmison & Danby, 2007, p. 72]

- 1 CT: Hi Kids Help Line,
2 (0.2)
3 C: .hh hi Um gidday how are you,
4 CT: Hullo (.) good thanks,
5 C: Um look (.) I'm just a bit worried right now .hh
6 CT: Mm hm,
7 C: I'm in a stage of my life (0.2) where I'm um (.) developing (0.4) I
8 don't know (.) different like to the rest of the boys in my class?
9 CT: Mm,
10 C: A:and I (.) it's sort of becoming like (0.4) I wait for them (.) to
11 get to me (0.2) and tease me?
12 CT: Okay,
13 C: It's become really irritating now,
14 (0.2)
15 CT: °Right°,
16 (1.0)
17 C: I dunno what to do.

Not only was reason-for-call accounting produced in different slots in the openings of calls to the UK child protection helpline and *Kids Help Line*, the *type* of account produced by callers to the two helplines was also markedly different. In calls to the UK child protection helpline, callers typically stated their reasons-for-calling through a canonical “I’m concerned about X” structure, as illustrated in Item 3 above (lines 3-4) (Potter & Hepburn, 2003). A

focus on ‘concerns’ was argued to enable the third-party callers to demonstrate that they were appropriately motivated callers of the helpline, and not busybodies ‘dobbing’ on their neighbours, for instance.

By contrast, in calls to *Kids Help Line*, following greetings and “how-are-yous”, callers typically provided a troubles announcement in the form of a narrative report (see Item 5 above, lines 5-13) (Emmison & Danby, 2007). Emmison and Danby argued that these reports were a function of counsellors’ opening turns wherein a standard offer of help was routinely absent. That is, counsellors’ opening turns placed “greater onus on the caller to announce what comes next” (p. 73), which routinely led to the production of tellings that were “not self-evidently concluded at any point” (p. 81). Following this troubles announcement, callers typically formulated their reasons-for-calling through sequence-closing devices such as “I don’t know what to do” (Item 5, line 17). In other words, callers did not let their narrative reports on a trouble stand alone as evidence of their reasons-for-calling. It was to these sequence-closing devices that counsellors oriented their substantive responses. This orientation was treated as evidence that counsellors were interpreting these sequence-closing devices (i.e., statements of not knowing what to do) as callers’ reason-for-call accounts. Emmison and Danby (2007) argued that such sequential organisation was evidence that callers routinely “differentiate between the trouble or problem they have encountered and a specific reason for why the call is being made” (p. 70).

A similar pattern to that identified in calls to *Kids Help Line* was identified in the *MensLine* corpus: the absence of a standard institutional service request in counsellors’ opening turns led to the regular production of caller tellings that were not self-evidently concluded at any point. In subsequent analytic chapters I explicate a number of interactional difficulties that were often associated with the production of these reports. As a background to this analysis, the present chapter describes how call openings typically unfold in the

MensLine corpus. I focus specifically on reason-for-call accounts in which callers indicate that they are ringing for the explicit purpose of receiving advice. I show how, by contrast to callers' narrative reports, these reason-for-call accounts are routinely oriented to by counsellors as sufficient demonstrations of callers' accountability. I move now to describe how call-opening sequences typically unfold in the *MensLine* corpus.

3.4 Call-opening sequences in a men's relationship helpline

The openings of calls to *MensLine* appear most similar to the hybrid structure of calls to *Kids Help Line* (Emmison & Danby, 2007). In both helplines, call openings display features characteristic of everyday telephone calls – greetings, “how-are-yous”, and the exchange of names (Schegloff, 1986) – as well as a feature that characterises calls to emergency services – categorical identification (Hopper et al., 1990; Whalen & Zimmerman, 1987). The extract below provides an example of this hybrid structure:

1. Call 38:

1	((ring))	Summons
2	CO: good afternoon MensLi:ne Au:str↑alia?	Answer to summons:
3	(0.9)	greeting +
4	this is <u>C</u> asey speaki:ng?	identification
5	CA: °oh g'day Casey°	Return greeting
6	(1.1)	
7	CO: it's actually <u>e</u> vening sorry ah	
8	ah g- I- I should say good evening	
9	CA: °oh good evening°	
10	CO: tch.h who have I got on the line?	Request-for-name
11	CA: °Toby:°	sequence
12	CO: Toby.	
13	CA: °mm°	

14	(1.2)	
15	°um°	
16	CO: how're you doing Toby?	"How-are-you"
17	CA: u:m just having a tough time of it	Problem-oriented response
18	CO: yea::h?	Initiation of diagnostic sequence
19	(0.4)	
20	CA: °um° (2.4) hh (0.8) °>um<° (1.4) I know	Problem report in narrative format
21	I've been responsible for the breakup	
22	of a relationship I've been in for over	
23	four years	
24	(0.5)	
25	CO: mhm	
26	CA: now ah regretting it very mu:ch	

CO = Counsellor

CA = Caller

Here, the four sequences of the canonical call-opening sequence of everyday telephone calls – summons/answer, greetings, identification/recognition, and “how-are-you” – are present. The summons/answer sequence involves the ring of the telephone and the counsellor’s opening turn, which consists of a greeting (“good afternoon”, line 2), institutional identification (“MensLi:ne Au:str↑alia?”, line 2) and personal identification (“this is Casey speaki:ng?”, line 4). The counsellor’s institutional identification coupled with the typical features of everyday calls (e.g., greetings and “how-are-you”) provides for the hybrid structure of the call-opening sequence.

The institutional identification accomplishes the work of informing the caller that he has reached the service that he was seeking (Marquez Reiter, 2006; Pallotti & Varcasia, 2008; Schegloff, 1986). Arguably, the identification also sets (or starts to set) the tone of the call:

that is, an institutional, rather than a mundane, telephone call in the sense that there is some ‘business’ to be done, or service to be provided. Pallotti and Varcasia (2008) argued that providing an institutional identification is one way of optimising the call-opening sequence in over-the-phone service-encounter interactions, in that once callers know they have reached the intended institution, they can proceed directly to the reason-for-call (i.e., the ‘business-at-hand’). This optimisation, though, does not appear to occur in the example above (i.e., the caller does not proceed to the business-at-hand in his first turn-at-talk). As I argue below, the caller’s displayed hesitancy in proceeding to the business-at-hand and initiating a first topic of talk is likely a function of the absence of a standard organisational request in the counsellor’s opening turn.

An interesting feature of the counsellor’s opening turn is her self-identification. In most institutional over-the-phone contexts that have been examined to date (e.g., *Kids Help Line* and the UK child protection helpline), call-takers do not self-identify in their opening turns. Emmison and Danby (2007) argued that counsellors on *Kids Help Line* avoided self-identification as a way of preserving callers’ anonymity (i.e., because counsellors did not provide their names, callers were not obliged to provide theirs in return). By contrast, counsellors on *MensLine*, by routinely providing a personal identification in their opening turns, typically evoked callers’ names in return. As Sacks (2005) argued in relation to calls to a suicide helpline, one way to obtain someone’s name without explicitly asking for it is to provide one’s own. Importantly, when a caller to *MensLine* does not provide his name, counsellors routinely request it, as evidenced in the example above (line 10)⁵.

Considering that *MensLine* counsellors perform specific interactional work to obtain callers’ names (i.e., they first self-identify and, if this is not successful, explicitly request callers’ names), it is of analytic interest to ascertain the purpose of this solicitation of names for the ensuing interaction. In an investigation of mundane and institutional call openings

between strangers and intimates, Hopper and Drummond (1992) argued that exchanging names is one way in which strangers develop a relationship and establish rapport. Arguably there are only limited opportunities in which interactants, particularly strangers, can negotiate the status of their relationship in over-the-phone encounters. In the present data, although the caller and counsellor are demonstrating to one another that they are strangers (i.e., by self-identifying they demonstrate a lack of previous acquaintance that means voice recognition is not possible), by exchanging names, they are also orienting to a shift from this relationship status towards 'relationship development' (Hopper & Drummond, 1992, p. 193). Counsellors on *MensLine* further demonstrate an orientation towards building a relationship with callers by repeatedly using callers' names throughout calls, for example, when asking questions or offering suggestions regarding the implementation of solution-focused strategies.

Following the completion of the request-for-name sequence in the example above, the counsellor moves to initiate a "how-are-you" exchange (line 16), the final sequence of the four-part canonical opening sequence of everyday telephone calls. The caller provides a problem-oriented response to this enquiry. That is, he informs the counsellor of the presence of a trouble but stops short of explicitly saying what that trouble is: "u:m just having a tough time of it" (line 17) (see Coupland, Coupland, & Robinson, 1992, for an examination of similar problem-oriented responses in the context of primary-care interactions). The provision of problem-oriented responses is the most common way in which callers in the *MensLine* corpus responded to counsellors' "how-are-you" enquiries⁶. As was typical following such responses in the data set, here, the counsellor prompts the caller to elaborate on his problem-oriented response (i.e., to explicate or unpack the trouble/problem to which he has alluded). The counsellor's prompts takes the form of a question-intoned continuer ('yea::h?', line 18). This continuer works to initiate what Sacks (2005) called the 'diagnostic sequence' (p. 560). According to Sacks, in everyday conversation, the diagnostic sequence

was typically initiated following a negative value state descriptor (e.g., ‘lousy’) as an attempt to ascertain ‘what was the matter’ (i.e., why a speaker was ‘lousy’).

By means of this diagnostic sequence in the example above, the caller is afforded an opportunity to provide an account for his problem-oriented response (i.e., to begin talk on a trouble about why he is having a ‘tough time’). The caller produces this talk on line 20 in ways that show considerable indications of interactional difficulty (e.g., the gap on line 19 and turn-initial delays, including placeholder and inbreath). This displayed difficulty is likely a function of the counsellor’s response on line 18 – “yeah?”. As a general rather than specific topic-initial elicitor, ‘yeah?’ works to invite a candidate topic for talk from the caller. That is, it places the onus on the caller to design his entry into talk on a trouble with little interactional warrant from the counsellor and he displays some difficulty in doing so⁷.

An important feature of the opening sequence in the call above is the absence of a standard institutional service offer (e.g., “can/may I help you?”) in the counsellor’s opening turn. The absence of such requests in counsellors’ opening turns represents a robust pattern in the *MensLine* corpus and is the focus of analysis in this and subsequent chapters. As was the case in calls to *Kids Help Line*, the absence of a specific request in counsellors’ opening turns can be seen to place greater onus on callers to decide what comes next (i.e., to initiate a first topic for talk). This format of counsellors’ opening turns is of interest considering *MensLine*’s adherence to a solution-focused model of counselling. As Robinson (2001) argued with regard to doctor-patient consultations, offers such as “how can I help you?” or “what can I do for you?”, display an orientation to the forthcoming interaction as a service-encounter. As outlined in Chapter 1 (Section 1.3.2), when an interaction is framed in this way, the relevant categorical roles of the participants are that of service-seeker and service provider, and the focus of the interaction is on the problem-at-hand, its properties, and ways to fix it (Jefferson & Lee, 1992; Robinson, 2001).

By not providing an institutional request in their opening turns, *Kids Help Line* counsellors were seen to avoid the assumption that callers had called the helpline for the explicit purpose of receiving advice (Emmison & Danby, 2007). In turn, avoidance of this assumption was seen to uphold the helpline's tenets of client-centredness and empowerment (see Chapter 1, Section 1.4, for more on this institutional philosophy). By contrast, *MensLine* counsellors adhere to a solution-focused model of counselling. As one of the aims of *MensLine's* over-the-phone interactions is service provision, it might be expected that counsellors orient to this focus in their opening turns by providing an institutional service request. Importantly, by not providing this request, calls are not clearly framed, at the outset, as constituting a service-encounter.

It is possible that the absence of an institutional request is one way in which *MensLine* counsellors manage, in sequences of interaction, the competing relevancies of their dual institutional role of troubles-recipient and service provider. That is, by not explicitly framing calls as one of service provision, counsellors can be seen to avoid an assumption that callers want advice, and instead provide callers the opportunity to talk on a trouble. Despite the fact that calls are not framed, at the outset, as constituting a service-encounter, counsellors, at some point in their interactions with callers, will work explicitly to adopt the role of service provider. Considering that counsellors routinely orient to the importance of service provision in their interactions with callers, yet they do not display this orientation in their opening turns, call openings in the *MensLine* corpus appear to be characterised by ambiguity in terms of the type of interaction that is to take place between caller and counsellor (i.e., whether it is a service-encounter, troubles-telling, or both). It is likely this ambiguity that accounts for some of the various sources of interactional difficulty that counsellors routinely encounter when they attempt to adopt their institutional role of service provider. These interactional difficulties will be described in detail in subsequent analytic chapters.

First, I will provide five further examples of call openings in the *MensLine* corpus that display a hybrid structure between everyday (e.g., greetings and “how-are-you”) and institutional (e.g., categorical identification) telephone calls. These examples are provided to demonstrate that the features discussed with regards to Extract 1 above (e.g., the absence of a standard institutional request and the ambiguity that this can create) represent robust patterns in the opening sequences of calls to *MensLine*. The extracts also serve to provide illustrative examples of *how* callers routinely initiate first topics for talk following the opening sequences of calls, which I move to examine next.

In each of the examples below, the hybrid nature of *MensLine* call-opening sequences is again evident in the categorical identification present in each of the counsellors’ opening turns as well as the presence of greetings (Extracts 3, 4, 5, and 6) and “how-are-you” (Extracts 2, 3, and 6). In two of the extracts (Extracts 3 and 4), the counsellors also request callers’ names.

2. Call 7:

1 CO: MensLine it's Ja:son speaking
2 (0.4)
3 CA: o:hh how you going there.
4 (0.4)
5 CO: good
6 CA: I just wanted to get a bit of advi:ce really on u::m situation I've
7 ghot with a relationship
8 (0.5)
9 CO: yes:: hh

3. Call 34:

1 CO: .hh ah good afternoon MensLine Austra:lia this is Casey speak↑ing?
2 CA: hi how you g↓oing.

3 CO: not too ba:d.
4 (0.2)
5 CA: <th[at's good.>]
6 CO: [thanks >what about y]ourself<
7 CA: .hh o:hh look I:'m< I:'m a l↑ittle bit out of so:rts
8 CO: ↑yea:h?
9 CA: .h an' um (0.7) .h (0.7) like I'm desperate to talk
10 CO: ↑ye::s
11 CA: c'[z]
12 CO: [is it] possible to have your first name?
13 CA: ah Harry.
14 (0.4)
15 CO: Harry
16 CA: yep
17 (0.9)
18 CO: °okay°
19 (0.5)
20 .h so u:m what- what's happening is it=u:m (0.8) something out of
21 the blue, or is it a [SITUAT]ION that's
22 CA: [nah it] it's be[en going]
23 CO: [TRYING] for you
24 CA: yeah=oh it's been going for a whi:le but um (1.0) .h we're- (0.4)
25 going through a separation?
26 CO: mm:?

4. Call 21

1 CO: MensLine it's ↑Jason speaking?
2 CA: .hhh hi there .h u:m (1.0) I I've- >I've just called up becauseu:m
3 I I I've had an u:m >bit of an altercation< with a:h former partner?
4 an' it's: over my my child?
5 CO: okay. yeah? .h wh[at's] what'[s the] (problem)

6 CA: [yep] [so] .h u::m (1.5) I- I wouldn't
7 mind (0.6) >I don't know< just getting some feedback? about my
8 situation?
9 CO: yea:h sure
10 CA: okay
11 CO: what was your first name mate?
12 CA: Joshua
13 CO: Joshua
14 (0.4)
15 .hh [s-
16 CA: [an- and your name is?
17 CO: Jason
18 CA: Jason
19 CO: yea:[h] .hh [Joshua h]ear you say=yeah an altercation what's what's
20 CA: [hi] [um]
21 CO: goin' on
22 CA: well (0.6) u:m I've- I've go:t my my my child on a >sort of a< (0.2)
23 a:h an ongoing basis: you know a:h maybe a couple of nights a week
24 whatever
25 CO: okay yep?

5. Call 11:

1 CO: good evening Me:nsLine Austra:lia this is Casey speak↑ing?
2 CA: ((clears throat)) oh hello
3 (0.6)
4 CO: good evening.
5 (0.5)
6 CA: um °tch.hh° (1.0) >righto jus<t struggling a bit with ah ((clears
7 throat)) (0.9) with ah- ah- (0.3) on- ONgoin' problem >that's been<
8 .hh (0.3) °((clears throat))° goin' on for (1.0) coupla years now
9 >but< °.hh°
10 CO: ohkay

6. Call 145:

- 1 CO: .h hi this is Terry from MensLine Australia hello:
- 2 (1.0)
- 3 CA: hi how are [ya
- 4 CO: [hi not bad how are you doing
- 5 CA: not too bad .hh yeah I'm just ringin' up just tuh (.) have a chat
- 6 CO: yea:h [you can talk to me
- 7 CA: [um
- 8 yeah I just (0.4) I've just had a bit of problem in me life y'know
- 9 (1.2) um .hh >me l- um< my: ah marriage has broken down
- 10 CO: has it
- 11 CA: .h an' I'm just tryna sorta get it back together
- 12 CO: yes

Importantly, in Extracts 2-6 above, the counsellors' opening turns do not contain a standard offer of help and, as such, the onus is on callers to initiate a first topic for talk following the core opening sequences (i.e., following greetings and "how-are-yous")⁸. These extracts provide illustrative examples of the two main ways in which callers can be seen to initiate a first topic for talk: (1) an indication that the caller has called the helpline for the explicit purpose of receiving advice (Extracts 2 and 4), and (2) narrative reporting on a trouble (Extracts 3, 5, and 6). Explicit formulations of advice (or help or feedback etc.) are rare in the data under analysis, occurring in only 18% of calls⁹. Narrative reporting on a trouble is therefore the most common way in which callers initiate a first topic for talk in the *MensLine* corpus. These narrative reports can be prefaced by an explicit account from callers of having called the helpline 'to talk' (e.g., Extract 3) or to have 'a chat' (e.g., Extract 6). These accounts arguably work to project callers' upcoming narratives and can therefore be seen as preparatory in nature. That is, they prepare the ground for an upcoming telling.

Preparatory accounts occur in 34% of all calls where callers produce a narrative report on a trouble as a means of initiating a first topic for talk.

Regardless of whether callers' narratives are prefaced by an explicit reference to talking, the structure of callers' tellings remains the same. Specifically, these tellings, much as in calls to *Kids Help Line*, regularly take the form of narratives that are "not self-evidently concluded at any point" (Emmison & Danby, 2007, p. 81). The structure of these tellings can arguably be seen as a consequence of the sequential environment in which they are produced: in the absence of a standard institutional request. In the absence of such a request, callers are not constrained in terms of the design of their subsequent turns-at-talk. That is, callers are permitted to introduce a wide range of potential reasons-for-calling, and these reasons need not focus on advice or how a caller wants to be 'helped'. Not only are callers permitted to introduce a wide range of topics as possible talkables, because callers are not prompted by counsellors to introduce a particular topic for talk, they are also permitted to do decide when, and how, their tellings will be complete. The absence of a standard service request therefore likely accounts for callers' frequent production of tellings that are not demonstrably concluded at any point.

My aim in subsequent chapters is to demonstrate how these tellings can create various sources of interactional difficulty for counsellors in terms of adherence to a solution-focused model of counselling. As a point of comparison, in the remainder of this chapter, I focus on those calls where callers provide an indication that they have called the helpline for the explicit purpose of receiving advice – what I have called 'ringing for advice' reason-for-call accounts. Through an examination of these accounts, I describe an interactional pattern regarding the *unproblematic* nature of these accounts for the ensuing interaction between caller and counsellor. That is, 'ringing for advice' reason-for-call accounts are easily

recognised and oriented to by counsellors *as* callers' reasons for contacting the helpline and, most importantly, as *sufficient* reasons for calling the helpline.

3.4.1 'Ringing for advice' reason-for-call accounts.

Below is an example of a 'ringing for advice' reason-for-call account. This example represents the canonical form of callers' 'ringing for advice' reason-for-call accounts in the *MensLine* corpus.

7. Call 24:

- 1 CO: .h hello MensLine Austra:lia David speaki:ng
2 CA: ah sorry who is it?
3 CO: my name is David
4 CA: .h oh hi there .h um: tch I just (.) ah wanted to: check with
5 somebody about I guess: h some advice .hh on um: w- hh >what I need
6 to do really< .h=I've=um ((swallows)) tch my wife and I have sinc:e
7 um oh probably (.) earlier sorry late last week .h sort of had a few
8 (.) issues with um .h well she's uh divulged to me that she's
9 feeling a bit um .hh (off of) wi- our relationship our marriage
10 which is abou:t=u:m eight years? h and we've got two children, .hh
11 [um:] and she: (.) a:::h hh sort of >.h< well actually (.) just
12 CO: [°yeah°]
13 CA: today I've just found um some e-mails on our computer .hh um from
14 her work which um (0.4) um hh ah suggest she's having some s- .h
15 sort of an affair with ah one of the guys at work, .h[h] um: now
16 CO: [yeah]
17 CA: I'm we've got an appointment with ay=um tch.hh a marriage guidance
18 counsellor next Tuesday, .h[h]
19 CO: [y]eah=
20 CA: =u:m which >is the earliest we can get in<=but um ((swallows)) tch
21 I'm just wondering w- hh w- w- hh what the >best thing to do wi- sh-

22 .hh< (y'know) should I: sort of confront her about it with those e-
 23 mails or .hh u:m: (0.7) or:=a:h (0.2) you know I'm sorta coming up
 24 with these h .hh sort of weird and wonderful plans about how I
 25 should- try and break the news that I knowh and and or is it is it
 26 best to wait til we get to the counsellor¿ and sort of .hh and spill
 27 the beans then¿ >and sort of< put her on the spot? I think it would
 28 be a bit unfair but um .h h- have you got any adv↑ice? on where you
 29 think the best way to go ↑is? hh
 30 CO: the first um ((clears throat)) the first question is ah how you got
 31 to: access the e-m↑ails?

Here, the caller's reason-for-call account is positioned following some of the routine features of call openings that give calls to *MensLine* their hybrid structure. Specifically, the caller, following his repair initiation on line 2, provides a greeting: “.h oh hi there” (line 4). The caller's ‘ringing for advice’ reason-for-call account is then produced immediately after this greeting (i.e., it is interlocked with the caller's greeting and produced in his first available turn-at-talk. Schegloff, 1986, provides an explanation of the serial and interlocking organisation of the core elements of the canonical call-opening sequence).

There is some displayed hesitancy on the part of the caller in the production of his account. This is evidenced by the presence of perturbations including placeholders, epistemic markers (“I guess”, line 5) and intra-turn pauses. This displayed hesitancy is likely a function of the sequential environment in which the account is produced. That is, the counsellor's opening turn does not contain an organisational request and so no interactional warrant has been provided for the caller to initiate a first topic for talk. It is therefore up to the caller to decide what comes next upon the completion of the call-opening sequence and he displays some difficulty in doing so. The displayed hesitancy evident in the example above represents a robust pattern in the data under analysis. That is, callers' attempts to initiate a first topic for

talk – whether they indicate that they are seeking advice, or whether they produce a narrative report on a trouble – typically display some evidence of hesitancy or difficulty. I provide further illustrative examples of callers’ displayed difficulty in initiating a first topic for talk in Extracts 8 and 9 below, as well as in Chapters 4 (Section 4.3) and 6 (Section 6.3). It is important to point out that although the absence of a service-request likely accounts for these interactional difficulties (and indeed there appears to be substantial evidence to show that this is the case), because there were no instances in the data set where counsellors provided a standard offer of help in their opening turns, there was no basis of comparison for how calls might unfold following such offers. The interactional consequences associated with the employment of standard service-requests therefore require further empirical investigation (see Chapter 8, Section 8.5, for further discussion).

The caller’s ‘ringing for advice’ reason-for-call account in the extract above comprises multiple turn-constructive units (TCUs). First, the caller provides an initial, explicit formulation of ‘advice’: “I just (.) ah wanted to: check with somebody about I guess: h some advice” (lines 4-5). This formulation is then unpacked through narrative reporting on his trouble (lines 6-20). Following this narrative report, the caller provides a more specific formulation of his initial ‘advice’-formulation, which is packaged in the form of an interrogative (e.g., “have you got any advice? on where you think the best way to go is?”, lines 28-29). This interrogative provides an upshot of the caller’s narrative report and works to bring that report to a close by providing a transition-relevance place (TRP) for the counsellor to offer a substantive turn-at-talk. The incorporation of ‘wondering’ in the caller’s interrogative (line 21) arguably demonstrates high contingency over whether the request can be granted, that is, whether the counsellor can provide the advice that the caller is seeking (see Curl & Drew, 2008, for a similar analysis of ‘wondering’ in out-of-hours calls to the doctor and mundane telephone calls). This orientation likely further demonstrates the caller’s

hesitancy in producing a topic for talk in the absence of an organisational request from the counsellor. That is, because the caller has not been asked how he can be helped, he displays hesitancy in whether the counsellor is able to facilitate his request and whether this reason-for-calling is appropriate.

The caller's 'ringing for advice' reason-for-call account therefore appears to comprise a three-step sequence involving: (1) an initial, explicit formulation of 'advice'; (2) the unpacking of that formulation through narrative reporting on a trouble; and (3) the formulation of a specific request for advice packaged in the form of an interrogative. This three-part structure of callers' 'ringing for advice' reason-for-call accounts represents a robust pattern in the data under analysis. Importantly, the counsellor appears to orient to this three-part sequence *as* a formulation of the reason-for-call. This is evidenced by the fact that the counsellor does not provide a substantive turn-at-talk until the caller's account reaches possible completion (lines 30-31). The substantive turn-at-talk that the counsellor provides constitutes a preliminary move or pre-second insert expansion designed to facilitate the granting of the caller's request (i.e., designed to do some preparatory work relevant to the forthcoming SPP. See Chapter 2, Section 2.5.4, for more on insert expansions).

Not only does the counsellor's substantive response on lines 30-31 demonstrate his orientation to the caller's 'ringing for advice' reason-for-call account as a formulation of the reason-for-call, it also demonstrates his orientation to this account as a *suitable* and *sufficient* reason-for-calling the helpline. That is, rather than orienting to this account as problematic, the counsellor treats the account as enabling him to begin the business of counselling. This orientation on the part of the counsellor is interesting because, on the surface, it might appear that a reason-for-call account focusing on advice would enable the counsellor to attend to only one of his institutional roles: that of service provider. However, the caller's reason-for-call account sequence includes a narrative report on a trouble that can be seen to fulfil the

counsellor's other institutional duty/requirement of providing the caller the opportunity to talk on a trouble. In this sense, the caller's reason-for-call account is consistent with the counsellor's dual institutional role: it enables him both to offer advice and to provide the caller the opportunity to talk about his concerns. This canonical structure of callers' 'ringing for advice' reason-for-calls therefore appears to account for the unproblematic nature of interactions that routinely ensue following these accounts.

Below are some additional examples of callers' 'ringing for advice' reason-for-call accounts. These examples follow the canonical three-part structure of 'ringing for advice' reason-for-call accounts outlined above (i.e., an explicit 'advice'-formulation¹⁰, unpacking of the 'advice'-formulation, and a specific request for advice), and demonstrate counsellors' orientations to this three-part sequence *as* callers' reason-for-call accounts. In these examples, callers' reason-for-call account sequences and counsellors' associated responses are arrowed and numbered from 1-4.

8. Call 14:

- 1 CO: °.h° um ah good- good morning sorry. ah MensLine Austra:lia
 2 this is Casey speaking¿
 3 CA: hello how are you today
 4 CO: I'm not too bad thanks: >what about you.<
 5 CA: u:m not too good.
 6 CO: no:t too goo:d?
 7 CA: huh heh no what I mean is:: (0.8) ~my wife has ahsked me to
 8 lea:ve,~
 9 (0.6)
 10 CO: tch oka:y,
 11 (0.8)
 12 CA: >.hih h .hih h .hih hh<
 13 CO: I'm sorry to hear tha:t

14 CA: → 1 >hih< .hhh ~and I need some ah legal advice,~

15 CO: ye::ah?

16 (0.3)

17 CA: → 2 ~on whether I should leave because .hih .hih~ (1.1) ~I'm the
18 home carer my wife works.~

19 (0.9)

20 CO: tch oka:y so you're- you've been the person at home?

21 CA: → 2 yes ~I have no money~

22 CO: oka:y

23 (0.8)

24 CA: → 3 ~so I don't know whether to lea:ve?~

25 CO: ye::s

26 CA: → 3 ~or whether to sta:y and~ (1.4) ~I don't know you kno:w~

27 CO: ye::s

28 CA: so anyway hh u:m

29 CO: → 4 are you on a uh are you on a public phone at the mo[ment?]

30 CA: [no I'm on

31 the home phone

32 CO: → 4 you're on your home phone ok[ay] and have you got a bit of

33 CA: [>yep<]

34 CO: → 4 time on your hands n[ow]

35 CA: [YE]A:H I got all the time ~in the wo:rd~

36 CO: → 4 o:kay .h look I think you know w- we can ta:lk about this but

37 we come back to the .h to- a- actually what I'll do first of

38 a:ll=

39 CA: =ye[p]

40 CO: [is] it possible to have a name?
(6 lines omitted where CA checks that CO is asking for his
name))

41 CO: → 4 hi °samuel° .hh and I'm sorry you're finding yourself in this

42 situation .hh a:n' what I'll do is I'll give you a phone

43 numb[er first of] a:ll okay?

44 CA: [hhh] yeah?
45 CO: → 4 ah where you can ask about whether it's a good idea to le[ave]
46 CA: [yep]
47 CO: home or no:t,

9. Call 123:

1 CO: .h MensLine Australia good aftern^oon?
2 CA: → 1 .hh oh yes u:m I was given your: number by: a:h >the child
3 support agency?<
4 CO: mm
5 CA: → 1 u:m .hh just in::=a:h terms of: (.) whether you might be able
6 tuh possibly give me some advice or point me in the right
7 → 2 direction [.hh u:m essentially: what's happened he:re i::s
8 CO: [mhuh
9 CA: → 2 I:'ve been (0.4) u::m paying child support_t ah privately [.h
10 CO: [mm_z
11 CA: → 2 u:m to my ex partner
12 CO: yeah
13 CA: → 2 u::m and effectively I've paid (.) about four thousand dollars
14 over what she actually ah was due to receive,
15 CO: mhuh
16 CA: → 2 u:m due: to a bit of a (0.2) .h well a bi:t of a breakdown in
17 communication we'll call it aheh heh .h [u::m
18 CO: [oh okay
19 CA: → 2 [she turned around and started
20 CO: [.h so this is according to the scales of a child support
21 agency is it [that she's been o- .h has she been overpaid
22 CA: [what's that sorry
23 CO: according to the scales of the child support agency?
24 CA: → 2 .h well hh this i- this is where the issues coming down .hh
25 okay because it was a private arrangement .h u::m: (0.8) the
26 chi- a- a- an' even though I have receipts an' an' ledgers an'

27 it's been signed off properly by her and myself an' that sort
28 of thing .h u::m (0.2) she's turned around and now wants the
29 chi:ld support agency to collect (.) u::m as opposed to just
30 me paying her dire:ctly

31 CO: mm̩

32 CA: → 2 u:m by doing that h um (1.3) the child support agency:: has
33 basically said well unfortunately .hh even though I have paid
34 that money (0.7) they can't take it into account because they
35 haven't been told to collect until this particular day which
36 was just last month

37 CO: mhuh

38 CA: → 3 .hhh now hh (0.4) I mean I I don't know what you- you guys'
39 role is or anything like that or:: where you ca:n:: (0.4)
40 direct me on this particular instance .h but there's
41 effectively four thousand dollars of overpayment .h that u::m
42 see es ay ((CSA)) have tried to go through and have a look at
43 their different records an' they simply can't (0.5) allocate
44 it to child support because of the the way the system works.
45 .hh u::m: an' [I wanna know if there's any sort of legal

46 CO: [yes okay

47 CA: → 3 recourse that I may be able to have .h to get that money
48 back from her.
49 (0.6)
50 .hh

51 CO: → 4 .hh ah have they not been able to advise you on tha:t did you
52 say or or

The callers' 'ringing for advice' reason-for-call accounts in Extracts 8 and 9 comprise the three-part structure evident in Extract 7: (1) a specific 'advice'-formulation (→ 1 on the transcripts), (2) the unpacking of this 'advice'-formulation through narrative reporting on a trouble (→ 2), and (3) the closure of the narrative report through a specific formulation or

upshot of the initial ‘advice’-formulation (i.e., a specific request for advice → 3). Again, these accounts are produced with a number of markers of hesitancy including placeholders and intra-turn pauses. The caller’s account in Extract 9 also contains low modality operators (e.g., “might”, line 5) and adjuncts (e.g., “possibly”, line 6) that work to downgrade the counsellor’s obligation to provide advice and display the caller’s uncertainty and tentativeness in making this request of the counsellor (c.f. the caller’s ‘wondering’ in Extract 7). This displayed hesitancy on the part of callers can again be seen as a product of the sequential environment in which callers’ accounts are produced – in the absence of an interactional warrant from counsellors.

Importantly, in each of these examples, counsellors typically move to provide advice, or at least do some work preparatory to the provision of advice, upon the possible completion of callers’ accounts (Extract 8, lines 29-38 and 424-47; and Extract 9, lines 51-52). Once again, these substantive responses provide evidence for counsellors’ orientation to callers’ ‘ringing for advice’ reason-for-call accounts as their demonstrations of accountability. Importantly, by moving to provide advice, or by providing a substantive turn-at-talk that works to facilitate the subsequent provision of advice, counsellors also demonstrate an orientation to callers’ ‘ringing for advice’ reason-for-call accounts as *sufficient* demonstrations of accountability. That is, these accounts are not treated as problematic or unsuitable reasons for calling the helpline. As argued previously, counsellors do not appear to orient to these accounts as problematic because they are routinely accompanied by narrative reporting on a trouble that can be seen to fulfil counsellors’ additional institutional goal of troubles-receipting (i.e., providing callers the opportunity to talk about their concerns). Further evidence to support this interpretation comes from a small number of calls – only two instances in the data set – where callers’ ‘ringing for advice’ reason-for-call accounts do not contain a narrative report on a trouble. In these instances, counsellors can be seen to orient to

callers' accounts as problematic as evidenced by their subsequent attempts to negotiate a reason-for-call that also involves troubles-talk. This negotiation on the part of counsellors is evident in the example below (arrowed):

10. Call 100:

- 1 CO: tch.h good afternoon MensLine Australia this is Casey speaking
2 CA: ah yes good afternoon my name's Trevor h u::m I'm enquiring about
3 some advice o:n managing anger a:nd=ah managing conflict in a
4 relationship.
5 CO: → okay .h do you want to talk about this today or are you really just
6 after the referrals today
7 CA: I wouldn't mind having a talk toda:y yes.

Here, the caller's 'ringing for advice' reason-for-call account (lines 2-4) does not take the canonical form evident in Extracts 7-9 above, but consists simply of a direct request for advice in respect of managing anger. In her response to this request (lines 5-6), the counsellor demonstrates an orientation to her dual institutional role of service provider and troubles-recipient. Specifically, by working to negotiate a reason-for-call that also focuses on troubles-telling, the counsellor demonstrates that the caller's explicit request for advice enables her to attend to only one of her dual institutional roles: that of service provider. The counsellor can therefore be seen to negotiate a reason-for-call that allows her to attend to her additional institutional role of troubles-recipient. This call provides further interactional evidence that counsellors orient to the canonical form of callers' 'ringing for advice' reason-for-call accounts as *unproblematic* because these accounts involve narrative reporting on a trouble, as well as a request for advice, that enables them easily to enact their dual institutional role¹¹.

The type of negotiation that takes place in Extract 10 above is rare in the data under analysis – there are only 2 instances in the data set where a counsellor can be seen to

negotiate a reason-for-call involving troubles-talk following a ‘ringing for advice’ reason-for-call account. In the next chapter I report on a different interactional pattern in those calls where callers produce narrative reports on a trouble as a means of initiating a first topic for talk. When callers produce a narrative report on a trouble, counsellors can be seen, routinely, to attempt to negotiate a reason-for-call that also focuses on service-provision. These attempts to negotiate a reason-for-call focusing on service provision demonstrate that, from the perspective of counsellors, simply talking on a trouble is not sufficient evidence of a reason-for-calling in his helpline context. That is, narrative reporting on a trouble only does not enable counsellors easily to attend to their dual institutional role of troubles-recipient *and* service provider.

3.5 Chapter summary

The present chapter has examined the opening sequences of calls in the *MensLine* corpus. The analysis demonstrated that the openings of calls to *MensLine*, much like those of *Kids Help Line*, constitute a hybrid between everyday and institutional telephone calls. Specifically, these sequences contained the greetings and “how-are-you” sequences typically found in everyday telephone calls, as well as the institutional identification typically found in calls to emergency services. Unlike most helpline interactions, such as calls to *Kids Help Line* (Emmison & Danby, 2007) and calls to the UK child protection helpline (Potter & Hepburn, 2003), *MensLine* counsellors routinely self-identified in their opening turns-at-talk. By self-identifying, counsellors typically evoked callers’ names in return. If callers did not self-identify, counsellors could be seen, routinely, to request callers’ names. This exchange of names arguably functioned to assist in building rapport between callers and counsellors.

Although counsellors’ opening turns contained an institutional identification that enabled callers to know that they had reached the intended organisation, these turns did not

contain offers of help such as “how can I help you?”. As such, the onus was on callers to initiate a first topic for talk (i.e., to decide what came next after the conclusion of the call-opening sequence). I identified two main ways in which callers worked to initiate a first topic for talk following the completion of call openings: (1) an indication that the caller had contacted the helpline for the purpose of receiving advice and, most commonly, (2) narrative reporting on a trouble. In the present chapter I focused, in detail, on those calls where callers initiated a first topic for talk by indicating that they had called the helpline for the explicit purpose of receiving advice, which I referred to as ‘ringing for advice’ reason-for-call accounts.

I demonstrated that callers routinely displayed some hesitancy and uncertainty in the production of their ‘ringing for advice’ reason-for-call accounts, which was likely due to the absence of an organisational request in counsellors’ opening turns. That is, because callers had to initiate a first topic for talk with little interactional warrant from counsellors, they regularly displayed difficulty in doing so. Despite this displayed hesitancy, there did not appear to be any interactional difficulties in terms of counsellors recognising these accounts *as* the reasons that callers had contacted the helpline. Following the completion of these accounts, counsellors typically worked to offer a substantive turn-at-talk. These turns-at-talk worked to initiate the provision of advice, or at least do some work preparatory to the provision of advice.

I argued that counsellors did not orient to callers’ ‘ringing for advice’ reason-for-call accounts as problematic because these accounts were routinely accompanied by narrative reporting on a trouble. This reporting in the context of a reason-for-call account focusing on advice arguably enabled counsellors to enact the helpline’s basic tenets of providing callers the opportunity to talk on a trouble, and providing recommendations in respect of coping and management strategies. ‘Ringing for advice’ reason-for-call accounts therefore enabled

counsellors easily to attend to their dual institutional role of troubles-recipient and service provider. In the next chapter I describe a different interactional pattern with regards to narrative reporting on a trouble: callers' narrative reports on a trouble are not oriented to by counsellors as callers' specific reasons for having contacted the helpline. This orientation is evidenced by counsellors' routine attempts to negotiate a reason-for-call that aligns with *MensLine's* institutional aim of service provision. The next chapter therefore examines one source of interactional difficulty routinely associated with talk on a trouble in the *MensLine* corpus: establishing reason-for-call.

Chapter 4

Establishing reason-for-call following narrative reporting on a trouble

4.1 Introduction

As outlined in the previous chapter, in calls to *MensLine*, counsellors do not provide a standard offer of help in their opening turns. This format of counsellors' opening turns is similar to that of counsellors' opening turns on *Kids Help Line*. In the context of calls to *Kids Help Line*, Emmison and Danby (2007) argued that these opening turns placed a greater onus on callers to decide what came next. This was seen, routinely, to lead to the production of tellings that were not self-evidently concluded at any point. Following these reports, callers typically formulated their reasons-for-calling through sequence-closing devices such as "I don't know what to do". That is, they separated the statement of their problem/trouble from their stated reason for making the call. These sequence-closing devices were seen to act as solicitations for advice: they signalled to counsellors that callers' problems had been sufficiently described and that they were ready for counselling advice (Emmison & Danby, 2007).

As outlined in the previous chapter, a similar pattern was present in the *MensLine* corpus: the absence of a standard service request resulted in the regular production of caller tellings which had the form of not being self-evidently concluded at any point. I turn now to focus on the structure of these tellings in more detail. Specifically, what I demonstrate here is a noticeable difference in the sequential organisation of narrative reports on *MensLine* compared to *Kids Help Line*. Whereas callers to the children's helpline routinely shut down

their tellings using sequence-closing devices such as “I don’t know what to do”, on *MensLine* it is *counsellors*, rather than callers, who routinely work to separate callers’ troubles-tellings from the specific reasons that have occasioned their calls. In other words, the responsibility for establishing the reason-for-call falls regularly to counsellors on *MensLine* calls. It is the sequences of interaction in which counsellors attempt to negotiate the reason-for-call following narrative reporting on a trouble that are the focus of the present chapter.

What is most interesting about these sequences of interaction is the *type* of reason-for-call account that counsellors routinely attempt to establish. When callers initiate a first topic for talk through narrative reporting on a trouble, counsellors can be seen, routinely, to negotiate a reason-for-call that also focuses on problem-solving. My focus is on a collection of interrogatives that counsellors employ in order to negotiate this type of reason-for-call. The aim is to examine the *action* that these interrogatives work to implement – that is, what they are designed to do. Specifically, I demonstrate that by attempting to establish the reason-for-call as one of service provision, counsellors demonstrate an orientation that talking on a trouble is not sufficient evidence of a reason-for-calling in this institutional context. This is not to say that talk on a trouble is an inappropriate reason-for-calling the helpline – indeed this does *not* appear to be what counsellors are orienting to through their interrogatives. Instead, by working to establish the reason-for-call as one of service provision, counsellors demonstrate an orientation that troubles-talk *alone* does not inform them how, or whether, callers want/need to be helped. That is, talk on a trouble does not enable counsellors, properly, to attend to their service provider role. In working to establish the reason-for-call, then, *MensLine* counsellors demonstrate that talk on a trouble constitutes only *part* of a sufficient reason-for-calling the helpline¹².

The interactional pattern outlined in this chapter appears to be specific to *MensLine*. That is, in a number of over-the-phone institutional environments with similar aims of service

provision, such as calls to emergency services (Zimmerman, 1992a) and calls to a computer software helpline (Baker, Emmison, & Firth, 2007), reason-for-call accounting is routinely accomplished reflexively through narrative reporting on a trouble. The negotiation that occurs surrounding reason-for-call accounting in calls to *MensLine* appears to represent one way in which the helpline's institutional mandates – a solution-focused counselling framework with the associated institution-specific goals of troubles-telling and service provision – are talked into being in sequences of interaction. Callers' responses to counsellors' attempts to establish the reason-for-call will be examined in Chapter 5.

The analysis below is structured around three key examples. In these examples I focus on (1) the sequential environment that necessitates the production of counsellors' attempts to establish the reason-for-call, that is, caller tellings that are not self-evidently concluded at any point; and (2) the *action* or *design-orientation* of counsellors' interrogatives – that is, the way in which they demonstrate counsellors' orientation to talk on a trouble as insufficient evidence of a specific reason-for-calling. First, I provide an overview of the way in which reason-for-call accounting is routinely achieved through narrative reporting in calls to emergency services, and calls to a computer software helpline, as a basis of comparison for the interactional patterns surrounding reason-for-call accounting in the *MensLine* corpus.

4.2 Narrative reporting as evidence of a reason-for-calling

As outlined in the previous chapter (Chapter 3, Section 3.3), one way in which callers to emergency services provided a reason for their calls was by producing a narrative report on a policeable trouble (Zimmerman, 1992b). In these instances, callers did not work to separate their narrative reports from the specific reasons for why they were calling, as was routinely the case in calls to *Kids Help Line* (Emmison & Danby, 2007). That is, callers did not produce sequence-closing devices such as “so can you send the police” or, alternately, “I

don't know what to do". Indeed, Emmison and Danby argued that it would be almost inconceivable to hear formulations of not knowing what to do following callers' narrative reports in calls to emergency services. In this specific institutional context, the act of placing a call, and the description of a policeable trouble, were routinely understood by call-takers as demonstrations of callers (1) knowing what to do, and (2) having taken appropriate action. In other words, call-takers routinely oriented to callers' problem-reports as requests for emergency assistance (i.e., as their reasons-for-calling) without those requests being made explicit. In the context of calls to emergency services, then, reason-for-call accounting was seen to be achieved, routinely, through the details of a caller's narrative report, which enabled call-takers to begin the interactional business of providing third-party emergency assistance.

A similar pattern regarding reason-for-call accounting to that identified in calls to emergency services has been observed in calls to a computer software helpline. In this helpline context, callers' problem-reports did not contain sequence-closing devices that might be hearable as a reason-for-call, such as a request for assistance (e.g., "how do I fix this?") (Baker et al., 2007). As in calls to emergency services, in the absence of such devices, call-takers routinely oriented to callers' problem-reports as their reasons for having contacted the helpline. The example below demonstrates a typical call to the computer software helpline where the caller initiates a first topic for talk through narrative reporting (the opening sequence of the call that occurred prior to the call-taker's institutional service request on line 1 was not included in this example in the original paper):

[Item Extract 2- from Baker et al., 2007, pp. 44-45]

- 1 CT: how can I help you?
- 2 (0.4)
- 3 C: erm I've installed (.) office ninety-seven
- 4 (0.8)

5 .hh and (.) erm my negative figures are different
6 (0.8)
7 in excel (.) from this time=an' I think it's
8 somewhere in the setup I haven't-
9 (0.8)
10 selected something
11 (0.5)
12 CT: the- when you have negative numbers in your cells? (.)
13 erm how are they displayed

In this example, the caller could have formulated his reason-for-call as a direct request for assistance (e.g., “how do I change the way in which negative figures are displayed in excel?”). Despite not doing so, the caller’s problem-report was easily recognised by the call-taker as a specific formulation of the caller’s reason-for-calling, as evidenced by the call-taker’s diagnostically relevant turn-at-talk on lines 12-13. Like calls to emergency services, then, in the context of calls to a computer software helpline, callers’ reasons-for-calling were inferred directly from their narrative reports on a trouble/problem.

The interactional pattern evident in the *MensLine* data corpus differs from that in calls to emergency services and calls to a computer software helpline in that, following narrative reporting on a trouble, *MensLine* counsellors work explicitly to establish why callers have contacted the helpline. In this specific counselling context, then, reason-for-call accounting is *not* achieved reflexively through troubles-telling. I move now to examine those sequences of interaction where counsellors work to establish the reason-for-call following narrative reporting on a trouble, and demonstrate how this work forms part of an attempt by counsellors to attend to their institutional role as service provider.

4.3 Establishing the reason-for-call on *MensLine*

I will first provide a brief overview of the different types of interrogatives employed by counsellors to establish the reason-for-call before moving on to examine (1) the sequential environment that necessitates their production (i.e., caller tellings that are not self-evidently concluded at any point), and (2) the action-orientation of these interrogatives (i.e., what they are designed to do).

There are two main types of interrogative that counsellors employ in order to establish reason-for-call: (1) yes/no interrogatives (hereafter YNIs) and, most commonly, (2) wh-questions (i.e., questions beginning with ‘who’, ‘what’, ‘where’, ‘when’, ‘why’ and ‘how’. See Stivers, 2010, for an overview of wh-questions in American English). There is only one instance in the data set where a counsellor employs an alternative question (see Extract 8, below, for this call). The difference between YNIs and wh-questions concerns the type of responses they make relevant from participants. Specifically, whereas YNIs restrict responses to one of two alternatives (‘yes’ or ‘no’), wh-questions invite clausal/phrasal responses (Stivers, 2010).

In the data under analysis, when YNIs are employed to establish the reason-for-call, they provide a candidate reason-for-call for callers to dis/confirm. The candidate reason-for-call tends to vary depending on what callers have called to talk about but nonetheless maintains a focus on service provision. For instance, counsellors may provide a candidate reason-for-call that focuses on ‘doing’ something about the caller’s stated problem, as in Extract 1 below (arrowed). In this, and subsequent examples in the present chapter, the opening sequence of the call has been included to provide a background/context to (1) the caller’s stated problem, and (2) the counsellor’s attempt to establish a reason-for-call.

1. Call 139:

1 CO: good afternoon MensLi:ne this is Casey speaki:ng?

2 CA: oh good afternoon um tch.hh a::h hhh (0.5) look I':m in a h
3 difficult situation=I've phoned up before,
4 CO: mm:?
5 CA: and I am having counselling=I've been li:ving with a lady an':::
6 (0.2) her behay=haviour can be a bit ↑odd, [.hh but her dau:ghters
7 CO: [mm?
8 CA: are running her down to me all the time an' everything too. h .hh
9 a[n' (ah)
10 CO: [they're running her down to [you
11 CA: [yea:h
((7.4 seconds of talk omitted in which CO requests CA's name))
12 CO: → are you: (0.2) ringing to see: u:m whether there's something that
13 you can do about this? o[r
14 CA: [ye:s yes I I I (0.2) I've ju:st got to tuh
15 stage where I've never been in a situation like thi:s an' I just
16 don't (0.4) know how tuh handle it=I've tr:ie:d to handle it, .hhhh
17 u:m hh ((swallows)) tch.h you just can't get anyone tuh h sort of
18 say what they mea:n,

It is noteworthy that in this example where the counsellor employs a YNI, the caller displays acceptance of the counsellor's attempt to establish the reason-for-call as one of service provision (line 14). This call represents only of two instances in the data set where such acceptance is displayed. In the other instance, the counsellor also employs a YNI, however, the embedded candidate is different. Specifically, the counsellor can be seen to negotiate a reason-for-call that involves the provision of referrals¹³. Callers' responses to counsellors' attempts to establish the reason-for-call will be examined in more detail in Chapter 5.

By contrast to YNIs, wh-questions typically work to elicit candidate reason-for-call accounts from *callers*. In the *MensLine* corpus, there is a small subset of wh-questions that

restrict the type of candidate reason-for-call that callers can provide in second position. This type of wh-question involves counsellors enquiring what a caller wants to 'do' about his stated problem. An example of this type of interrogative is provided in Extract 2 below (arrowed):

2. Call 53:

- 1 CO: .h thi:s is Terry from MensLine Australia hello
2 (0.3)
- 3 CA: oh g'day mate how are ya
4 CO: not bad how are you doing
5 (0.2)
- 6 CA: O::Ho:h h yeah I'm not too bad.
7 CO: m[m?
8 CA: [u:mh justh (.) h:ad a bit of a drama oh's- been a bit of drama
9 been going on at home for a whI:le 'n (.) all th[at gear]
10 CO: [yeah]
11 (0.7)
- 12 CA: but=ay::=um hh the are aye ((RA)) or whatever well yeah the are aye
13 ((RA)) 'n I- (0.8) °been° taken off the premises last night not to
14 (0.2) not did anything really wrong but apparently I did 'n .hhh
15 CO: so [the]
16 CA: [BUT ANYW]AY
17 CO: so the police have come?
18 (0.3)
- 19 CA: yeah
(1 minute and 30 seconds of troubles-talk omitted)
- 20 CO: → so .hh S::Ohh well I sp↑ose ↑the f↑irst th↑ing what were you hoping:
21 we might do:?
22 (0.3)

23 CA: well hhh u::m (0.8) hh I've s- (0.4) spoken well sort of I:'ve they
 24 asked me have I spoken to anybody who >m- m- blu-< most important
 25 (0.3) fact of it all is; .hh
 26 CO: mm?
 27 CA: i:s the A↑TTitude that she has=she has towards the kids.

Wh-questions that reference ‘doing’ something about a caller’s problem arguably restrict the responses that callers can make to those that focus on the provision of a suggestion regarding the implementation of practical management strategies. In employing this type of wh-question, counsellors can be seen, once again, to be negotiating a reason-for-call that focuses on service provision. Wh-questions are, however, less restrictive than YNIs in that they invite clausal/phrasal responses rather than a ‘yes’ or ‘no’ response. In that such wh-questions restrict callers’ SPP responses to a reason-for-call account focusing on service provision, I will refer to this subset of wh-questions as wh-questions involving a *candidate* reason-for-call. Although it is arguable whether a reference to ‘doing’ something about a caller’s stated problem can be considered a candidate reason-for-call (i.e., this type of interrogative arguably still works to invite a candidate reason-for-call from callers), the terminology is used here as a means of distinguishing this type of interrogative from wh-questions that do not contain a reference to ‘doing’ something about a caller’s stated problem as the reason-for-call.

Wh-questions that do not contain a candidate reason-for-call account (i.e., that do not involve a reference to ‘doing’ something about a caller’s stated problem) are the most common type of interrogative employed by counsellors in the *MensLine* corpus. This type of wh-question involves counsellors enquiring, more generally, after a caller’s ‘purpose’ or ‘reason’ for his call or what he ‘needs’ from it. Examples of such interrogatives are provided below as Extracts 3-6 (arrowed):

3. Call 11:

- 1 CO: good evening Me:nsLine Austra:lia this is Casey speak[↑]ing?
- 2 CA: ((clears throat)) oh hello
- 3 (0.6)
- 4 CO: good evening.
- 5 (0.5)
- 6 CA: um °tch.hh° (1.0) >righto jus<u>t struggling a bit with ah ((clears
7 throat)) (0.9) with ah- ah- (0.3) on- ONgoin' problem >that's been<
8 .hh (0.3) °((clears throat))° goin' on for (1.0) coupla years now
9 >but< °.hh°
- 10 CO: ohkay
- 11 CA: I've got (0.3) I'm trying to make it simple li's cut it short but
12 ((clears throat)) °tch.hh° I've got five (.) of my kids that (0.9)
13 lef- >wivmenen my-< the wife my wife divorced me two years ago or a
14 bit over two years ago .hh (0.4) she took seven of my nine kids
15 an=thn one come home straight away the next day=another one come
16 home nine months later .hh and ah the five little ones=what I call
17 the five little ones are still with their mother in ((location)).
((9 minutes and 15 seconds of troubles-talk omitted)).
- 18 CO: → where where are you at now an' an' what what's your um (0.3) .h your
19 ah reason for for contacting today? what what is the .h
- 20 CA: the [issue
- 21 CO: [the sort of issue today;
- 22 CA: the issue that's been ongoing is the fact that I can't see my kids.

4. Call 119:

- 1 CO: .hh good afternoon MensLine Austra:lia this is (.) uh Lesley
2 speaki:ng?
- 3 CA: oh hello (you ha-)=how are you
- 4 (0.4)
- 5 CO: not too bad thanks: ah who have I got there on the line;
- 6 CA: ah you've got Joel on the line h[ere actually

7 CO: [oh hi
8 hi Joel
9 CA: how ya goin' alr[ight?
10 CO: [not too ba:d yeah what about yourself?
11 CA: ↑oh not t:oo ba:d yea::h yeah not too bad at all actually .h um::
12 tch yea::h just u:m (0.7) oh y'know you just have one of those down
13 days don't you an' .h u:m (0.6) yea:h when [you
14 CO: [yes certainly happens
15 does it relate to a relationship your go- uh ya- ya- you're in? or
16 CA: u::m ye:ah sort of does actually yea[:h .h um::: just through::
17 CO: [mm?
18 CA: probly: y'know not being honest with everyone an' that sort of
19 thin:g
((14 minutes of troubles-talk omitted in which CA talks about his
cross-dressing habits and the fact that he has not informed his
female partner))
20 CO: → wher:e do you want to get with this ca:ll um ah [Joel I mean what
21 CA: [o:h
22 CO: what's the purpose [eh
23 CA: [I probly want to: just be really honest an' tell
24 her?

5. Call 69:

1 CO: tch.h ah good afternoon MensLine Austr^ralia this is Casey speaking?
2 CA: hi um it's ah Tony here how are you
3 CO: a:h not too bad thanks is it Tony is it?
4 CA: To:ny y[es
5 CO: [Tony okay
6 CA: yes .h u:m I'm ah I'm ringing up today just for um a bitta talk=I'm
7 feeling a bit=ah .hh u:m bit=ah low
8 CO: m[m?]
9 CA: [ab]out my:=ah .h um my family situation

((21 minutes of troubles-talk omitted))

- 10 CO: → w- what do you ah what do you need from this call today Tony?
- 11 [ah y'know
- 12 CA: [just to be able to talk to someone.

6. Call 126:

- 1 CO: .h good afternoon MensLine Australia this is Lesley speaki:ng?
- 2 CA: oh how ya goin'.
- 3 CO: not too bad thanks
- 4 (0.6)
- 5 who who have I got. (0.4) on the l[ine
- 6 CA: [Devon
- 7 (0.2)
- 8 CO: Devon
- 9 (0.4)
- 10 CA: from ((location))
- 11 CO: okay
- 12 (0.6)
- 13 CA: U:M (0.5) I: just ring yous guys u:p everytime I see my ki:ds,
- 14 (0.9) .h not getting any better; h it's gettin' worse (1.6) I'm
- 15 goin' through the fam'ly law courts a:nd (1.2) the mother's lyin'
- 16 about everyfin'
- ((26 minutes and 30 seconds of troubles-talk omitted))
- 17 CO: → .hh look h (0.3) what what what's the m:ain purpose for your call
- 18 today Devon is it i- i- can- y'know wh- eh- .h
- 19 CA: I'm I'm
- 20 CO: what what [what's prompted it WHAT PROMPTED the call] what prompted
- 21 CA: [.h I am worried about my children]
- 22 CO: the call today
- 23 CA: cos I saw my children today <an' they are startin'> to be more an'
- 24 more sca:red

Wh-questions that do not contain candidate reason-for-call accounts (i.e., interrogatives that do not involve a reference to ‘doing’ something about a caller’s stated problem) permit a wide range of reasons-for-calling to be produced as SPP responses. Callers’ responses to counsellors’ attempts to establish the reason-for-call will be examined in the next chapter. Here, I focus on the sequential environment that appears to necessitate the production of the different types of interrogatives outlined above – that is, caller tellings that are not self-evidently concluded at any point – as well as the design or action-orientation of these interrogatives.

The analysis is centred on three key examples. The first two examples, below, consist of interrogatives that contain candidate reason-for-call accounts that focus on ‘doing’ something about callers’ stated problems. In the first of these examples (Extract 7), the counsellor’s interrogative is formatted as a YNI, whereas in the second example (Extract 8) the counsellor’s interrogative is formatted as an alternative question. Despite the different structure of these interrogatives, the candidate reason-for-call account that they contain clearly demonstrates that they are working to establish the reason-for-call as one of service provision. By contrast, Extract 9 is an example of a wh-question that does *not* contain a candidate reason-for-call. The purpose of providing this example is to demonstrate that despite the absence of such a candidate, the interrogative can still be seen to perform the same action as those interrogatives that contain candidate reason-for-call accounts: to establish the reason-for-call as one of service provision.

The first example, below, demonstrates the counsellor practice of working to establish the reason-for-call through the employment of a YNI. The aim is to show how this negotiation on the part of the counsellor demonstrates her orientation to the caller’s talk on a trouble as insufficient evidence of a specific reason-for-calling in this helpline context.

7. Call 139:

- 1 CO: good afternoon MensLi:ne this is Casey speaki:ng?
- 2 CA: oh good afternoon um tch.hh a::h hhh (0.5) look I':m in a h
3 difficult situation=I've phoned up before,
- 4 CO: mm:?
- 5 CA: and I am having counselling=I've been li:ving with a lady an':::
6 (0.2) her behay=haviour can be a bit ↑odd, [.hh but her dau:ghters
7 CO: [mm?
8 CA: are running her down to me all the time an' everything too. h .hh
9 a[n' (ah)
- 10 CO: [they're running her down to [you
- 11 CA: [yea:h
- 12 CO: okay
13 (0.5)
- 14 CA: [a-
- 15 CO: [.h is it possible to have your first name at all?
- 16 CA: Steven h
- 17 CO: Steven
- 18 CA: yeah h
19 (0.3)
- 20 CO: .h (0.8) okay so::
- 21 CA: hh
- 22 CO: are you: (0.2) ringing to see: um whether there's something that you
23 can do about this? o[r
- 24 CA: [ye:s yes I I I (0.2) I've ju:st got to tuh
25 stage where I've never been in a situation like thi:s an' I just
26 don't (0.4) know how tuh handle it=I've tr:ie:d to handle it, .hhhh
27 u:m hh ((swallows)) tch.h you just can't get anyone tuh h sort of
28 say what they mea:n, or what's going o:n,

Although call-opening sequences have been examined in detail in Chapter 3 (Section 3.4), it is important, here, to point out the absence of a standard institutional service offer

such as “can/may I help you?” in the counsellor’s opening turn. As argued in the previous chapter, the absence of a specific request in counsellors’ opening turns can be seen to place greater onus on the caller to initiate a first topic for talk. Here, like the majority of calls in the data corpus, the caller initiates a first topic for talk by producing a narrative report on a trouble (beginning line 2). There are a number of perturbations in the production of the caller’s report (e.g., intra-turn pauses and placeholders), which arguably demonstrate the caller’s difficulty in initiating a first topic when little interactional warrant has been provided by the counsellor. Similar perturbations were observed in the production of callers’ ‘ringing for advice’ reason-for-call accounts. It was argued that these perturbations could also be seen as a product of the sequential environment in which the accounts were produced – without a prior interactional warrant from the counsellor (see Chapter 3, Section 3.4.1).

On lines 2-3, the caller engages in a form of pre-telling that projects a more extended account of his problem – detailing the ‘difficulty’ of his situation. Pre-tellings, in general, routinely work up the appropriateness of the telling that they project (Liddicoat, 2009; Schegloff, 2007). That is, they establish that some pre-condition for doing the activity of a telling is satisfied (e.g., that the recipient does not already know the story to be told), or they provide an assessment about the upcoming news as good or bad, giving the recipient a framework in which to interpret the telling (Liddicoat, 2009; Schegloff, 2007). Here, the caller appears to provide just such an ‘interpretive framework’ (Liddicoat, 2009, p. 286) in terms of which the counsellor might successfully receive and understand the import of his story. Pre-tellings such as this are routinely employed in the present data corpus. Although they will not be analysed in detail in this thesis, further illustrative examples are provided in this chapter (see, for instance, Extract 8 below) as well as in Chapter 6 (Section 6.3).

In response to the caller’s narrative report, the counsellor provides minimal acknowledgments at transition-relevance places (TRPs) (e.g., lines 4 and 7). These

acknowledgment tokens work to receipt and display understanding of the caller's telling whilst allowing him to continue the activity of narrative reporting on a trouble. There are two insert sequences within the caller's narrative that momentarily delay the activity of troubles-telling. Both of these sequences are initiated by the counsellor. On line 10, for instance, the counsellor initiates repair. This insert sequence is then brought to a close on line 12 through the counsellor's sequence-closing third (SCT) 'okay'. Importantly, following this SCT, the caller is provided the opportunity to resume his troubles-talk, that is, to resume the activity that was occurring prior to the initiation of repair. The caller does not immediately do so and a gap of 0.5 seconds ensues (line 13).

The caller does appear to attempt a turn-at-talk on line 14, however, the onset of this turn is simultaneous with the counsellor's turn on line 15 and so the caller drops out. Through her turn-at-talk on line 15, the counsellor initiates the second of the two insert sequences. Specifically, the counsellor requests the caller's name after he failed to self-identify in his opening turn (see Chapter 3, Section 3.4, for a discussion of request-for-name sequences). This sequence is then brought to a close on line 18. Similar to the repair sequence, once this request-for-name sequence is brought to a close, the caller is once again provided the opportunity to resume the activity of his telling. Once again, though, the caller does not do so.

Importantly, by allowing gaps to ensue in the conversation following the insert sequences, and by responding to the caller's telling only minimally, the counsellor provides the caller with the interactional space to continue his telling and, arguably, to allow a reason-for-call account to emerge from that telling. That is, by declining to take up the available speaking turn and produce a substantive turn-at-talk, the counsellor can be seen to orient to the caller's reason-for-call account as yet-to-be-formulated. A similar observation regarding counsellors' minimal receipting was made with reference calls to *Kids Help Line*. Emmison and Danby (2007) argued that callers' narrative reports routinely contained pauses and

placeholders that provided interactional space for counsellors to offer receipt through acknowledgment tokens, but also to respond substantively. Typically, though, counsellors reserved the production of substantive responses, such as information-seeking (i.e., responses that would begin the business of counselling), until the reason-for-call (i.e., the sequence-closing device of “I don’t know what to do”) was formulated.

In the example above, though, the counsellor does not appear to orient to such a reason-for-call account as having been formulated or made explicit by the caller. This orientation is evidenced by her turn-at-talk on lines 22-23, in which she works to elicit the caller’s explicit reason for having contacted the helpline. Much like the caller’s narrative report, there are a number of perturbations within this turn-at-talk that arguably display some hesitancy or difficulty in making this request. These perturbations could demonstrate the counsellor’s orientation to her request as constituting a delicate action (i.e., making the caller accountable for not explicating a reason-for-calling). The perturbations also likely display her uncertainty about how to respond to and treat the caller’s telling in the absence of (what the counsellor considers to be) a specific reason-for-calling.

The counsellor’s attempt to elicit a reason-for-call consists of a YNI that contains a candidate reason-for-call (i.e., that the caller is ringing to ‘do’ something about his stated problem) for the caller to dis/confirm. The counsellor’s YNI is framed to receive acceptance of the candidate reason-for-call account that focuses on problem-solving. This preference structure is evidenced, primarily, through the use of the ‘are you’-preface, which creates a positive polarity preference for a ‘yes’ response (Raymond, 2003) (see Chapter 2, Section 2.5.5, on polarity preference). As stated previously, YNIs, such as that employed here, are rare in the *MensLine* data corpus. Most commonly, counsellors attempt to establish the reason-for-call through wh-questions.

Importantly, in the example above, by attempting to establish the reason-for-call, the counsellor demonstrates her orientation that such an account has not been directly inferred from the caller's problem-report. That is, despite the fact that the caller has explicated a trouble, this trouble is not treated as a sufficient demonstration of his *accountability* for contacting the helpline. By providing a candidate reason-for-call, the counsellor demonstrates what *is* a suitable demonstration of accountability (or reason-for-calling) – *doing* something about the problem. In other words, the counsellor works to establish a reason-for-call account that aligns with *MensLine*'s institutional goal of service provision. This attempt to establish the reason-for-call as one of service provision is arguably evidence that, in this specific helpline environment, narrative reporting on a trouble is not treated as a specific reason-for-calling. In other words, the counsellor's interrogative is working more than just as a straightforward request for information or a yes/no response: it is demonstrating that, in this helpline context, a sufficient demonstration of accountability requires more than the explication of a trouble.

Importantly, evidence for this interpretation of the counsellor's interrogative comes in the form of the caller's response to the interrogative. Here, the caller provides the preferred aligning response to the counsellor's YNI (i.e., 'yes', line 24). The caller's preferred response is then followed by an explicit account for this displayed agreement (i.e., an account for why he needs to 'do' something about his stated problem) (lines 24-28). Despite its yes/no format, the counsellor's interrogative is treated here by the caller as working to do more than just receive a simple acknowledgement token. Specifically, the caller treats the counsellor's YNI as acting as a request for information about *why* the caller needs to do something about his stated problem.

The caller's account contains a similar formulation of not knowing what to do (i.e., "an' I just don't (0.4) know how tuh handle it", lines 25-26) as was routinely observed from

children calling *Kids Help Line*. As outlined in the introduction to the present chapter, in *Kids Help Line* calls, an indication that a caller did not know what to do was taken as evidence of a caller “being ready to let the counselor begin the work of advice giving” (Emmison & Danby, 2007, p. 81). In other words, these sequence-closing devices were seen to function as callers’ demonstrations of accountability for calling the helpline in that, through these devices, callers worked to solicit advice from counsellors (i.e., callers were seen to be calling because they did not know what to do and required expert assistance). Similarly, in the example above, the caller arguably works to demonstrate that he has contacted the helpline for the same reason that any reasonable person might call a helpline – he has a problem that he does not know how to handle. Within his account, the caller also indicates that he has tried to address the problem prior to contacting the helpline. In this sense, he is indicating that he is calling the helpline as a last resort. Thus, the caller presents himself as appropriately motivated; he is not wasting the counsellor’s time (i.e., calling without having already tried to solve the problem on his own).

Explanatory accounts such as that provided by the caller in the example above are not typical following the provision of preferred responses (Schegloff, 2007). The placement of the caller’s account arguably demonstrates his orientation to the *design* or *action-orientation* of the counsellor’s interrogative, not just its grammatical structure. That is, by providing an account of why he needs to do something about his stated problem, the caller is arguably orienting to the counsellor’s YNI not just as a direct request for a yes/no response but as inviting a *demonstration of accountability*. That is, providing a suitable and sufficient reason for having called the helpline.

What is interesting about this example – and all counsellors’ attempts to establish the reason-for-call in the data corpus – is that the counsellor employs an interrogative in order to establish the reason-for-call as one of service provision. The counsellor arguably could have

performed the same action through a declarative statement/topic proffer such as “okay let’s talk about what you can do about this”. Alternately, the counsellor could have moved to provide advice or offer a referral. By employing an interrogative that asks the caller to confirm that doing something about his problem is why he has called, establishing the reason-for-call becomes a *collaborative* process (i.e., something for the caller and counsellor to negotiate turn-by-turn). In this way, the counsellor is provided with information on how best to assist the caller in dealing with, or better managing, his relationship difficulty. Employing an interrogative rather than moving to provide advice can therefore be seen as one way in which the counsellor enacts her role of service provider whilst simultaneously upholding the helpline’s mandate of avoiding the direct provision of advice (see Chapter 1, Section 1.3.1, where this institutional philosophy is discussed).

Importantly, what the example in Extract 7 shows is that by working to establish the reason-for-call as one of service provision, the counsellor has not oriented to the caller’s talk on a trouble as sufficient evidence of a reason-for-calling. That is, the callers’ troubles-talk has not been sufficient (1) to inform the counsellor how to respond to the telling, and (2) to enable her to begin the business of counselling (i.e., to adopt the role of service provider). Importantly, this does not mean that talking on a trouble is inappropriate in this helpline setting. Rather, the counsellor appears to be orienting to the fact that talk on a trouble enables her to attend to only *one* of her institutional roles: that of troubles-recipient. As such, she can be seen to negotiate a reason-for-call account that would enable her to attend to her other institutional aim: that of service provider.

Below, I provide a further example from the data corpus where the counsellor attempts to ascertain the caller’s reason-for-calling following his narrative report. Here, the counsellor employs a different type of interrogative to that employed in Extract 7. Despite, its

different format, the interrogative can still be seen to perform the same action: establishing a reason-for-call that also focuses on problem-solving.

8. Call 127:

1 CO: tch.h good evening MensLine Austra:lia this is Lesley speaking
2 CA: who's speaking?
3 CO: it's (.) Le:sley. h (.) [el ee es el ee why
4 CA: [hi Lesley (ah-) Logan
5 (0.3)
6 CO: oh Logan is it?
7 CA: yeah
8 CO: ok↑ay
9 (0.3)
10 how are you going tonight?
11 CA: not too bad=I w'z givin' your: number by Lifeline?
12 CO: mm?
13 (0.3)
14 CA: I'm I'm a man,
15 CO: mm?
16 CA: I'm a bit confused about my sexuality?
17 CO: yeah
18 CA: yeah.
19 (0.8)
20 CO: okay u:m .hh (0.8) can you tell me a bit more ↑about ↑that Log↑an?
21 CA: U::M:::=u::[m:
22 CO: [wh- where where is the confu:sion exactly?
23 CA: u:m when I was about twelve uh: is it Lesley?
24 CO: yes yeah
25 CA: um I used tuh I used tuh masturbate in my mother's sto:ckings.
26 (1.2)
27 CO: yeah

28 CA: an' I'm: nearly thirty seven Saturday week an' I still do it?=an'
29 .hh yeah (I'm/um) ((coughs)) .h an' I have shaved my legs once `n .h
30 never again though

31 CO: mm;

32 CA: yeah [(some of it)

33 CO: [was it was it hurtful

34 CA: yeah cut me:: an' .h [I told my psychologist my psychiatrist about

35 CO: [o:h yeah

36 CA: it an' he said .hh we all he said it's (0.3) e- e:everyone's got a
37 feminine side of `em?

38 CO: mm

39 CA: yeh co- I just like dressin' up in girls' clo:thing for some reason

40 CO: okay

41 (0.6)

42 .hh well y'know there are lots of um tch.h there's lots of
43 variation. hh ah within: thuh: the the sexual spectrum I suppose you
44 [could say

45 CA: [yeah cos I used to wear lipstick but I've I I've got out of that
46 habit,

47 CO: mm?

48 (0.6)

49 an' an' why did you (0.3) get out of that [do you think

50 CA: [I don't know duh: I've
51 got a b(h)ea(h)rd an' doesn't [look good

52 CO: [o:h oh [ok(h)ay

53 CA: [doesn't look good

54 CO: → yea:h yeah okay .h so: (1.0) y'know what what do you want to do
55 about it is there anything at all you want to do, or are you just
56 wanting to sort of ah explore this a bit today? o[r

57 CA: [oh probly explore
58 it w'z on my mind a bit I mean I do do like girls a lo:t actually

Here, as in Extract 7, the caller engages in narrative reporting on a trouble as a means of initiating a first topic for talk. The caller also provides a pre-telling on lines 14 and 16 that provides the counsellor with a framework in which to interpret the projected telling. Also, as in Extract 7, the caller's report is structured so as to provide the counsellor with a number of opportunities to respond. On lines 11 and 16, for instance, the caller's turns-at-talk are produced with turn-final questioning intonation, which works to invite a response from the counsellor. At a series of TRPs (lines 12, 15, and 17), the counsellor provides only minimal responses. That is, she declines to take up the available speaking turn in order to produce a substantive turn-at-talk.

On line 18, the caller appears to bring his topic initiation/pre-telling to a close through a SCT (i.e., his 'yeah' closes off the sequence embarked upon by the topic initiator and its receipt by the counsellor). In providing this minimal turn-at-talk, the caller does not contribute any more to the activity of troubles-telling (i.e., he does not elaborate any further on the particulars of his trouble). The caller may have declined to contribute any further to his telling at this point because the counsellor responded only minimally to his pre-telling on line 17. In other words, the caller could have been looking for more substantive uptake from the counsellor that would have assured him that he is talking on the right type of topic.

The counsellor does not immediately take up the available speaking turn on line 19. By not producing a turn-at-talk at this point, the counsellor is arguably demonstrating that she has not yet heard the reason-for-call. That is, instead of turning to the business of counselling (e.g., advice-giving or the provision of information/referrals) at this point, the counsellor demonstrates an orientation to the caller's telling as incomplete and leaves the interactional floor open for him to continue. Much like Extract 7, then, the counsellor, prior to requesting the reason-for-call explicitly, appears to be providing the caller the opportunity to continue his telling and to allow a reason-for-call to emerge from that telling (i.e., for the caller to

separate his problem – his confusion about his sexuality – from the specific reason that has occasioned his call).

When the caller fails to take up the available speaking turn on line 19, the counsellor provides a prompt to elicit more information, which is produced with a number of perturbations (e.g., the ‘u:m .hh’ and pause at line 20). This prompt is once again taken as evidence that the counsellor has not heard a reason-for-call. That is, what the caller has told her is not enough to allow her to take up the role of speaker and begin the business of counselling despite being provided the interactional opportunity to do so (i.e., despite the availability of the speaking turn). The perturbations also likely demonstrate her difficulty in responding to the caller’s telling in the absence of a specific reason-for-call account (c.f. the counsellor’s interrogative in Extract 7, lines 22-23, which contained similar perturbations). Prior to the counsellor’s explicit attempt to elicit a reason-for-call (lines 54-56), then, there is interactional evidence of some difficulty surrounding the caller’s report (i.e., that the caller’s narrative reporting on a trouble is not sufficient evidence to signal to the counsellor a specific reason-for-calling and so does not allow the counsellor to begin the business of counselling).

The caller initially responds to the counsellor’s prompt with an elongated placeholder (“U::M:::=u::[m:”, line 21), which is arguably evidence of some displayed difficulty on the part of the caller in granting the counsellor’s request (i.e., in providing more information). The counsellor appears to deal with this displayed difficulty on line 22 by initiating repair and providing a more specific prompt (i.e., she directs the caller towards the provision of particular information regarding his stated trouble by changing the turn-initial format of her interrogative from ‘can you tell me’ to ‘where is the confusion’). The problem that the caller has called to talk about is arguably delicate in nature, which could account for his displayed hesitancy/difficulty in responding to the counsellor’s request-for-information. There is also prior evidence of this difficulty in the call-opening sequence. On line 9, for instance, the

caller does not initiate a first topic for talk despite being provided the opportunity to do so. Of course, this displayed hesitancy in initiating a first topic for talk also likely stems from the fact that the counsellor did not provide an organisational request in her opening turns, and so the onus was on the counsellor to initiate the first topic for talk.

Despite the initial hesitancy, the counsellor's repaired prompt on line 22 is successful in eliciting a resumption of the activity of troubles-telling by the caller. The structure of the caller's telling once again provides a number of interactional opportunities for the counsellor to respond (e.g., lines 26, 27, 31, 38, 40, and 47). The counsellor responds only minimally at these TRPs, which is further evidence that the counsellor has not yet heard the reason-for-call and so is reserving any substantial response that might begin the business of counselling until this reason is heard. In this instance, though, it is the counsellor, rather than the caller, who once again works to separate the caller's problem/trouble from the specific reason that has occasioned his call.

The interrogative employed by the counsellor in order to elicit the reason-for-call contains the same displayed hesitancy as evidenced in Extract 7 (i.e., intra-turn pauses and elongation as well as the self-repair). The form of the interrogative, though, is different. Specifically, the counsellor begins with an open-ended wh-question that contains the candidate reason-for-call of 'doing' something about the caller's stated problem. The format of this interrogative invites a clausal/phrasal response from the caller (Stivers, 2010). That is, it does not restrict the type of response that the caller can provide in the same way as the counsellor's YNI in Extract 7. The counsellor then repairs this wh-question to an alternative question in which she presents the caller with two possible options to choose from: "is there anything at all you want to do or are you just wanting to sort of ah explore this a bit today?" (lines 54-56).

In changing the format of her interrogative, the counsellor restricts the type of response that the caller can provide to one of two alternatives rather than to a clausal/phrasal response. By altering the format of her interrogative from “what do you want to do” to “is there anything you want to do”, the counsellor can also be seen to mitigate the presupposition inherent in her initial wh-question: that the caller wants to do something about his problem and that this is why he has called the helpline. The counsellor further mitigates her attempt to establish the reason-for-call by including the term “anything” (line 55) in her first alternative reason-for-call account. In the context of primary-care consultations, Heritage, Robinson, Elliott, Beckett, and Wilkes (2007) showed that ‘anything’ can be oriented to by recipients as a negative polarity item (i.e., as inviting a ‘no’ response). This mitigation on the part of the counsellor arguably demonstrates her orientation to the delicate nature of her action – making the caller accountable for not having explicated why he has contacted the helpline.

By reworking her interrogative in order to avoid the presupposition that the caller wants to do something about his problem, the counsellor also arguably works to reduce potential resistance to this presupposition. In Chapter 5, I will show how callers routinely work to resist the presupposition embedded in wh-questions that contain the candidate reason-for-call of ‘doing’ something about their stated problems. Nonetheless, in the example above, the caller still displays resistance to the counsellor’s attempt to establish the reason-for-call as one of service provision as evidenced by his displayed acceptance with the second alternative reason-for-call account. That is, the caller does not display acceptance to the alternative of having called to ‘do anything’ about his stated problem.

Importantly, the fact that the counsellor performs extra interactional work in order to establish the reason-for-call is arguably evidence of her orientation to the caller’s narrative report on a trouble as insufficient evidence of a specific reason-for-calling. That is, despite the fact that the caller has explicated a problem, this troubles-talk has not been sufficient to

signal to the counsellor the specific reason that prompted the call to the helpline, nor how the counsellor should best respond to this troubles-talk. I provide one final example, below, to further illustrate this general pattern. This example is slightly different to the two examined so far in that it consists of a wh-question that does not contain a candidate reason-for-call. Despite the different format of the interrogative I argue that it is working to do the same thing: establishing the reason-for-call as one of service provision following a caller's narrative report.

The example is also different to Extracts 7 and 8 in that, in the opening sequence of the call, the caller provides what appears to be a reason-for-call account: "I'm ringing up today just for um a bitta talk" (lines 6-7). This turn-at-talk, though, is not produced in sequence-closing position (i.e., as a device to shut down the caller's telling thereby separating his problem from the specific reason that he has made the call) but prior to the telling itself. What this account does, then, is *project* the caller's upcoming telling (see Chapter 3, Section 3.4, for more on these preparatory accounts). More specifically, the account projects for the upcoming interaction a troubles-telling *only*. So even though the caller provides an explicit account of why he has called the helpline – for talk – the type of telling that this account projects is the same as what was seen in Extracts 7 and 8. Specifically, the caller's telling is not self-evidently concluded at any point. It is arguably this telling that necessitates the counsellor's attempt at lines 24-25 to establish a reason-for-call that is in line with *MensLine's* institution-specific goal of service provision.

9. Call 69:

- 1 CO: tch.h ah good afternoon MensLine Austr+alia this is Casey speaking?
- 2 CA: hi um it's ah Tony here how are you
- 3 CO: a:h not too bad thanks is it Tony is it?
- 4 CA: To:ny y[es
- 5 CO: [Tony okay

6 CA: yes .h u:m I'm ah I'm ringing up today just for um a bitta talk=I'm
7 feeling a bit=ah .hh u:m bit=ah low

8 CO: m[m?]

9 CA: [ab]out my:=ah .h um my family situation
((21 minutes of troubles-talk omitted. This talk concerns CA's
relationship in which his wife took the 'dominant' role and CA the
'submissive' role. Just prior to the continuation of the extract
below the caller is talking about his wife's behaviour on
antidepressants))

10 CA: y'know it's like Doctor Jekyll and Mr Hyde

11 CO: mm::

12 CA: definitely there's no: two ways about it

13 CO: .hh okay [so it it it could be ha- has she been on on that

14 CA: [(now that)

15 CO: medication for a long time? or [what that ah

16 CA: [yes.

17 CO: okay

18 (0.5)

19 .h but maybe the mixing y'know the the the mixing it up with the
20 alcohol might have made a difference

21 CA: oh definitely

22 CO: yea:h

23 CA: y[eah um definitely .hhh [°(I'd say so)°

24 CO: → [yeah [(something)° .h but look w- what do you
25 ah what do you need from this call today Tony? [ah y'know

26 CA: [just to be able to
27 talk to someone.

28 CO: are you are you (1.1) looking at discussing some some .hh strategies
29 for yourse:lf in terms of management of this situation °or°

30 CA: well I've I've guess I've spoken to so: many people in the last few
31 weeks about strategy that .hh sometimes I just need to talk.

32 CO: m[m?

I will not comment in detail on what happens in the 21 minutes preceding the counsellor's interrogative at lines 24-25 other than to say, here, that the caller's talk appears to take the form of a complaint about his wife – an analysis of complaints will be undertaken in Chapter 6. My focus, here, is on the interrogative itself, what occasions its production and what it is designed to do. For the purposes of the present analysis, I will simply point out that during these 21 minutes, the counsellor maintains the role of troubles-recipient. That is, she responds only minimally and does not attempt to adopt the role of service provider prior to her attempt to negotiate a reason-for-call at lines 24-25. Importantly, in this troubles-telling, the caller does not appear to explicate a specific reason for his call to the helpline. Evidence for this interpretation once again comes from the counsellor's attempt to establish the reason-for-call on lines 24-25.

Here, in order to elicit a reason-for-call, the counsellor provides an open-ended wh-question in which she elicits a candidate reason-for-call account from the caller. I will discuss the nature of the caller's response to this interrogative in detail in the next chapter. My main interest for the purpose of analysis lies with the counsellor's turn on lines 28-29 in which she responds to the caller's arguable resistance (i.e., his 'to talk to someone' reason-for-call). It is this turn that demonstrates that her prior wh-question was working not to elicit *any* type of reason-for-call but to elicit a *specific* reason-for-call – one that aligns with *MensLine's* institution-specific goal of service provision. This function of the counsellor's interrogative is illustrated by her explicit topic proffer relating to the discussion of management strategies. This work to establish the reason-for-call as one of service provision again demonstrates the counsellor's orientation to the caller's narrative report on a trouble, lengthy as it was, as insufficient evidence of a reason-for-calling. That is, despite the caller's explication of a trouble, the counsellor does not orient to this trouble as the *reason* the caller has contacted the

helpline. The caller's report is therefore not treated as allowing the counsellor to attend to her institutional role of service provider. As such, the counsellor works to negotiate a reason-for-call that also focuses on service provision rather than talking on a trouble only.

Next, I move to explicate how the patterns outlined here differ from those identified in other over-the-phone contexts and provide some possible explanations to account for why these different patterns might be observed.

4.4 Discussion

The interactional pattern outlined here – counsellors' orientation to talk on a trouble as insufficient evidence of reason-for-calling – appears to be specific to *MensLine* interactions. As outlined in the introduction to this chapter, reason-for-call accounting is routinely achieved through narrative reporting on a trouble in such institutional contexts as calls to emergency services and calls to a computer software helpline. Emmison and Danby (2007) argued that, in these institutional environments, it would be almost inconceivable to hear caller formulations of not knowing what to do as the reason-for-call. Similarly, I argue that, in the institutional environments of calls to emergency services and calls to a computer software helpline, it would be almost inconceivable to hear a *request* for a reason-for-call similar to those employed by *MensLine* counsellors. In calls to emergency services, call-takers might employ interrogatives that work to elicit more information and assess whether a situation requires emergency assistance. If a policeable trouble is announced, though – for instance, if a caller indicated that his car had been vandalised – a call-taker is not likely to ask “are you ringing to see whether there's something that you can do about this?” or “so what were you hoping we might be able to do?”. In the specific institutional context of calls for emergency assistance, the act of placing a call and the description of a policeable trouble (e.g., vandalism, a break-in, etc.) are taken as evidence of a caller's reason-for-calling.

A similar argument can be made with reference to the institutional environment of calls to a computer software helpline. That is, if a caller states a problem such as “my negative figures are different (0.8) in excel (.) from this time=an’ I think it’s somewhere in the setup I haven’t- (0.8) selected something”, as in Item 2 presented above, a call-taker is not likely to provide a response such as “what were you hoping we might do?”, or “is there anything at all you would like to do about this?”. Again, like calls to emergency services, the act of placing a call and the description of a problem (here, an anomaly in the functioning of a software program) are taken as evidence of callers’ requiring, and having called for, expert advice and assistance. That is, their problem is the reason they have called and a reason that enables call-takers to attend to their institution-specific goals and duties.

The different patterns of reason-for-call accounting in calls to emergency services and to a computer software helpline in comparison to *MensLine* are interesting considering that each service has similar aims: broadly, that of service provision. The interrogatives employed by counsellors in the present data corpus arguably reflect the *types* of problems that are routinely reported on *MensLine* in comparison to these other two institutional environments. Emmison and Danby (2007) reported a similar difference with respect to the types of problems routinely addressed on *Kids Help Line*. Specifically, they argued that the problems callers were observed to report on could be considered ‘generic life problems’ (p. 81). The type of assistance provided on *Kids Help Line*, then, is not a utilitarian form of assistance, such as in the dispatch of a third-party (ambulance, police etc.), but assistance “in the form of verbal advice on how to manage, resolve, or otherwise handle a problem or trouble that the caller has encountered” (Emmison & Danby, 2007, p. 66).

In calls to *MensLine*, callers are also calling about ‘generic life problems’, although these problems can be specified somewhat as ‘relationship problems’. Unlike calls to emergency services where the dispatch of a third-party can address a host of different

problems, or calls to a computer software helpline where there is also arguably one way in which a problem can/should be fixed, in the data under analysis there are arguably myriad ways in which callers' complex, individual life problems might be managed and solved. That is, there is no one solution that might be fitted to each situation that counsellors encounter and for each individual with whom counsellors speak. As such, providing generic or one-size-fits-all advice may not be a feasible option when enacting a solution-focused model of counselling. Counsellors can therefore be seen explicitly to ascertain why callers have contacted the helpline in order, properly, to attend to their service provider role. That is, they ask in order to best assist callers in respect of management and coping strategies. The provision of interrogatives that work to establish the reason-for-call is therefore one way in which *MensLine's* institution-specific goals of troubles-receipting and service provision are accomplished in interactional practice.

On a final note, the sequences of interaction analysed here suggest evidence of an interactional pattern concerning a potential difference in orientation between caller and counsellor to the purpose of the interaction taking place between them. That is, counsellors are orienting to the relevance of service provision, in conjunction with troubles-telling, as the reason-for-call yet, in these sequences of interaction, they do not appear to orient to callers' tellings as enabling them to adopt their service provider role. In other words, by explicitly negotiating service provision as the reason-for-call, counsellors are likely orienting to the fact that callers have not called explicitly for this purpose. That is, callers have not asked for advice but rather, through their narrative reports, projected for the ensuing interaction a troubles-telling only.

In the next chapter I explicate this potential asymmetry in orientation in more detail by examining the ways in which callers typically respond to counsellors' attempts to establish reason-for-call, and how these responses routinely display resistance to counsellors' attempts

to establish the reason-for-call as one of service provision rather than troubles-talk alone. It is through callers' responses to counsellors' attempts to establish the reason-for-call that it is evident that callers and counsellors have a different orientation to the purpose of the interaction taking place between them. I also explicate this asymmetry further in Chapters 6 and 7 where I examine third-party complaint sequences and counsellors' attempts to transition from such sequences.

4.5 Chapter summary

In the present chapter I have focused on those sequences of interaction in which counsellors attempt to establish a reason-for-calling when callers have resorted to the production of narrative reports on a trouble as a means of initiating a first topic for talk. These tellings or narrative reports, much like those produced by callers to *Kids Help Line*, routinely took the form of not being self-evidently concluded at any point. Unlike the narrative reports regularly produced by callers to *Kids Help Line*, in the data under analysis, it was counsellors, rather than callers, who worked to separate callers' problem-reports from their specific reasons for contacting the helpline. That is, the responsibility for explicating a reason-for-call was observed to fall regularly to counsellors. In these sequences of interaction, counsellors were seen, routinely, to negotiate a particular *type* of reason-for-call: one focusing on service provision. These interrogatives were seen as part of an attempt by counsellors to attend to the relevance of their institutional roles of troubles-recipient *and* service provider.

Importantly, the employment of interrogatives that worked to establish the reason-for-call as one of service provision arguably demonstrated counsellors' orientation to callers' troubles-talk as insufficient evidence of a reason-for-calling in this specific helpline context. That is, despite the fact that callers routinely explicated a problem or trouble, these

troubles/problems were not treated as sufficient demonstrations of *accountability* for contacting the helpline. This did not mean that counsellors oriented to this troubles-talk as inappropriate or as not in keeping with *MensLine's* aims; rather, they oriented to this troubles-talk as (1) presenting difficulties in terms of how best to respond to that talk, and (2) not allowing them to attend to their service provider role. In other words, troubles-talk was seen to constitute only part of a sufficient reason-for-calling the helpline.

This orientation on the part of counsellors represented a different interactional pattern to a number of over-the-phone institutional contexts that have similar aims of service provision, including calls to emergency services and calls to a computer software helpline. In these contexts, call-takers routinely oriented to narrative reports on a trouble/problem as callers' demonstrations of accountability. That is, in these interactional environments call-takers did not work explicitly to establish the reason-for-call: reason-for-call accounting was seen to be achieved reflexively through the details of callers' narrative reports on a trouble.

I argued that the employment of interrogatives that worked to establish the reason-for-call were present in the *MensLine* corpus, but not in calls to emergency services or calls to the computer software helpline, due to the *types* of problems routinely reported by *MensLine's* callers. That is, because callers were calling about complex relationship problems, there were potentially a number of different ways in which these problems could be solved or managed. By working to negotiate the reason-for-call, counsellors simultaneously worked to ascertain specifically *how*, or *whether*, callers could be helped in this context so that counsellors could properly attend to their service provider role.

I also argued that these sequences of interaction highlighted a potential asymmetry between caller and counsellor in regard to the purpose of the interaction taking place between them. That is, the fact that counsellors were working to establish the reason-for-call as one of service provision demonstrated that this role was not readily available to them through

callers' troubles-talk. In this way, counsellors could be seen to demonstrate an orientation that callers had not called explicitly for the purpose of seeking advice (or at least making this clear), and so they worked to negotiate this as the reason-for-call in conjunction with troubles-talk. In the next chapter I discuss this potential asymmetry in more detail by examining how callers routinely respond to counsellors' attempts to establish the reason-for-call as one of service provision. Specifically, I focus on the various ways in which callers work to resist these attempts. Through an examination of this resistance it becomes evident that callers and counsellors have a different orientation to the purpose of the interaction taking place between them.

Chapter 5

Callers' responses to counsellors' attempts to establish reason-for-call: The interactional organisation of resistance to wh-questions

5.1 Introduction

The present chapter focuses on callers' responses to counsellors' attempts to establish reason-for-call following narrative reporting on a trouble. I focus on two types of responses: (1) responses that avoid answering the question, and (2) answer-like responses. Through this resistance callers can be seen to undermine counsellors' attempts to establish a reason-for-call as one of service provision, and demonstrate their orientation to the reason-for-calling as one of troubles-telling only. Here, then, I explicate one type of interactional difficulty or disfluency associated with talk on a trouble in this institutional context. Specifically, whereas most callers appear to contact the helpline for the explicit purpose of talking to someone, counsellors routinely orient to the relevance of the categorical roles of troubles-recipient *and* service provider. The present chapter therefore demonstrates one way in which a pattern of difference in orientation between caller and counsellor plays out in sequences of interaction.

Importantly, this interactional pattern of resistance surrounding counsellors' attempts to establish the reason-for-call as one of service provision arguably has consequences for the pervasive assumption that men display a preference for solution-focused outcomes when interacting with counselling and other health professionals. What I show here is that the majority of callers in the *MensLine* corpus appear to display a different preference – a

preference for simply talking on a trouble. I explicate this displayed preference further in Chapters 6 and 7 through an examination of callers' third-party complaints, as well as callers' resistance to counsellors' attempts to transition out of these complaint sequences and to open up a problem-solving frame for the interaction.

I begin the analysis below by outlining the distribution of caller responses to counsellors' attempts to establish the reason-for-call as one of service provision (i.e., the number of calls that display acceptance in comparison to those that do not, and which types of interrogatives appear to secure acceptance). I then move on to examine the two types of resistance identified in the *MensLine* corpus.

5.2 Distribution of caller responses

There are only two examples in the present corpus in which callers display overt acceptance of counsellors' attempts to establish the reason-for-call as one of service provision. Both examples are discussed in Chapter 4 (Section 4.3). In both of these calls, collaboration is achieved through the provision of a YNI by the counsellor. The grammatical preference structure of YNIs in the *MensLine* corpus (i.e., the fact that YNIs are formatted with a positive polarity preference), arguably makes it difficult for callers to produce the dispreferred action of rejection. Through this displayed acceptance, callers provide an agreement that problem-solving will become a focus for the interaction, at least at some point. Advice-giving does not necessarily become an *immediate* topic for talk – this happens in only one of the examples where callers display acceptance. However, by securing acceptance, counsellors establish the relevance of advice-giving as a topic for talk thereby making it difficult for callers to undermine counsellors' subsequent attempts to adopt the role of service provider. The fact that advice-giving does not necessarily occur immediately following callers' displayed acceptance indicates that counsellors' attempts to establish the

reason-for-call are not working as topic transition devices *per se* (i.e., to move immediately from troubles-talk to service provision, although this can happen). Rather, these interrogatives are working to negotiate service provision as an appropriate frame for the interaction *at some point*. I examine topic transition in more detail in Chapter 7.

Not only is displayed acceptance important for the *initiation* of advice-giving, it also has important interactional consequences in terms of caller acceptance of counsellor advice. In other words, without securing acceptance from callers that advice-giving will become a focus for the interaction, the relevance of advice-giving as a topic for talk is not established. If counsellors then work to provide advice, callers can be seen, routinely, to reject this advice. The interactional pattern evident in the *MensLine* corpus is such that in the two instances where callers display acceptance to counsellors' attempts to establish the reason-for-call, they also display acceptance to counsellors' subsequent advice. By contrast, when callers do not display acceptance to the reason-for-call as one of service provision, they can also be seen to reject subsequent advice that counsellors attempt to provide. Although an exploration of advice-giving sequences is not the main aim of the present thesis, I provide some illustrative examples of caller rejection of counsellor advice in Chapter 7 which discusses topic transition, as well as in Extract 3 of the present chapter.

Despite the fact that YNIs appear to be successful in establishing the reason-for-call as one of service provision, and securing subsequent acceptance of advice, they are rarely employed by counsellors in the *MensLine* corpus (only three instances in 169 calls). As outlined in the previous chapter, counsellors typically attempt to establish reason-for-call through the employment of wh-questions that work to elicit candidate reason-for-call accounts from callers. By contrast to YNIs, myriad SPPs are available to callers as potential responses to wh-questions. That is, there is no clear-cut preference for a particular type of response following a wh-question (Bolden, 2009a), other than a conditionally relevant

response (i.e., an answer) (Stivers & Robinson, 2006)¹⁴. An arguable exception to this preference structure, of course, is the small number of wh-questions employed in the present corpus that contain a reference to ‘doing’ something about a caller’s stated problem. As outlined in Chapter 4 (Section 4.3), this type of wh-question arguably makes relevant a SPP response that focuses on service provision (i.e., a suggestion regarding the implementation of practical strategies) (see Section 5.4.1 below on responses to this type of interrogative).

What is most striking about the responses that callers provide to counsellors’ wh-questions (both those with, and without, a candidate reason-for-call account) is that they do not involve a reason-for-call that focuses on service provision. That is, through counsellors’ wh-questions, callers are arguably invited to provide a candidate reason-for-call *other* than troubles-talk. The responses that callers typically provide, though, rather than indicating that they have called the helpline for the explicit purpose of seeking advice, involve some sort of upshot or reformulation of what they have already been doing – talking on a trouble. An important question for analysis is: can these responses be taken as evidence, alone, of resistance? That is, just because callers have not explicitly stated that they want advice, does this mean that are they necessarily resisting the premise of the counsellor’s question as establishing the reason-for-call as one of service provision? The analysis in the present chapter addresses this question.

In order to demonstrate that caller responses to counsellors’ attempts to establish reason-for-call are indeed resistive, I focus here on how these responses come to be seen, and oriented to, as resistive in sequences of interaction. I focus specifically on how callers and counsellors orient to these responses as resistive in that they are not working to solicit advice (i.e., to establish the reason-for-call as one of service provision), but rather form part of an attempt by callers to maintain the reason-for-calling as one of troubles-receipting. Importantly, the sequences of interaction in which callers routinely resist counsellors’

attempts to establish the reason-for-call as one of service provision demonstrate an interactional environment where an asymmetry or difference in orientation to the purpose of the call can be seen to manifest between caller and counsellor.

Prior to examining this caller resistance, I will first provide a brief overview of the CA literature on resistive and evasive answers to questions. This work will act as a basis of comparison for the types of resistive responses typically provided by callers in the *MensLine* corpus.

5.3 Resistive and evasive answers to questions

The analysis provided in the present chapter relies on prior CA work on evasive responses to questions that has been undertaken in both mundane and institutional settings. I provide an outline here of two institutional environments in which such responses have been identified: broadcast news interviews and press conferences analysed by Clayman (1993, 2001), as well as MacMartin's (2008) work on resistance in narrative and solution-focused therapies. I begin with mundane interactions.

In the interactional context of mundane conversations in both Japanese and English, Stivers and Hayashi (2010) showed that recipients of a YNI can work retroactively to adjust the question posed to them in two ways: (1) term-transformations, and (2) agenda-transformations. Term-transforming answers work to resist a question's design, whereas agenda-transforming answers work to resist both the design of a question as well as the action that it is implementing. Typically, when working to transform the terms of a question, recipients target the lexical, syntactic, or morphological components of the question and adjust them in some way. These terms can be adjusted in two main ways: through (1) specification/qualification of the YNI (i.e., narrowing the scope of what the recipient was

being invited to dis/confirm), as in Item 8 below (arrowed), or (2) replacement (i.e., replacing one or more terms of the question in the answer), as in Item 11 below (arrowed):

[Item (8) RD 19.00 from - Stivers & Hayashi, 2010, p. 9]

- 1 Mark: So_ (1.0) ya know. (3.8) Didn't really have too much
2 conversation with Jack or Mike today,
3 (2.5)
4 Mark: Little bit but_°
5 (2.5)
6 Kim: Did they work?,
7 (0.8)
8 Mark: Mm hm,
9 (0.8)
10 Kim: Both of `em worked?
11 Mark: → Mike work- er Jack worked today an' Mike works tonight.

[Item (11) HM - from Stivers & Hayashi, 2010, p. 11]

- 1 LAN: This's smelling goo:d_ I might start eating raw meat,
2 (0.2)
3 JUD: S::ee:?
4 (1.0)
5 LAN: Yeah but I'm not [that weird.]
6 GIO: [I th(h)ink] it's just all the spices.
7 (0.2)
8 LAN: It is.
9 JUD: =Have you <ever eaten> steak tartare?
10 (0.8)
11 GIO: → I tried it once.

The other routine form of adjustment to YNIs described by Stivers and Hayashi (2010) – transforming the agenda of the question – involves challenging either (1) the question’s focus (i.e., what the question was about. See item 15 below, arrowed), (2) its bias (e.g., transforming a request for a relative evaluation, say, whether something is close, into a request for an absolute measure, say, a measure of distance), or (3) the presupposition(s) on which the question was based (see Item 20 below, arrowed):

[Item (15) SB 2 58:29 – from Stivers & Hayashi, 2010, p. 15]

- 1 CEC: Are you excited to meet her? ((As Nancy prepares to leave))
 2 (1.2)
 3 NAN: → just hope that it’s normal. and that we c’n:
 4 → totally talk without there being any (0.5)
 5 CEC: °Hostility.°=
 6 NAN: → =resentment, competition, er anything like that.

[Item (20) TC G&S – from Stivers & Hayashi, 2010, p. 19]

- 1 Shi: ... she fee:ls ez though, .hh yihkno:w
 2 her mother is in: such agony now that w’d
 3 only make it worse.=
 4 Ger: =.hh Wul will the remaining three yea:rs uhm
 5 see her in pai:n
 6 Shi: → .hhh She already is in a great deal of pain;

This type of transformative answer – resisting or transforming the agenda of a question – is akin to the resistance identified by Clayman (2001) in the institutional setting of broadcast news interviews.

Clayman (2001) argued that there are two dimensions of interviewees' resistance to journalists' interrogatives: positive and negative. Negative resistance involves the provision of answers that do not contain any information that could be seen to address the premise of the question. This includes answers that are partial or incomplete, or answers that only address one part of a two-part question. Positive resistance involves responses that move beyond the parameters of a question. For instance, recipients worked to change the topic of the question, or perform an action or task other than that specifically asked for.

According to Clayman (2001), negative and positive resistance can be performed overtly or covertly in news interviews. Overt practices of resistance included (1) explicitly requesting permission from the interviewer to shift the agenda of the question, and (2) minimising the divergence or discrepancy between the interviewee's response and interviewer's question by downplaying the agenda shift as insignificant, or by justifying it through an account. Covert practices were typically associated with positive resistance and involved avoiding any overt reference to the agenda shift taking place. For instance, recipients worked to link their responses to interviewers' questions by repeating key words from those questions, or by employing anaphoric pronouns. Through these pronouns and lexical repetitions, an interviewee could be seen, on the surface, to answer an interviewer's question whilst changing the terms of the question and providing an answer other than that asked for in the question.

Another commonly employed technique for covertly resisting the premise of an interviewer's question was re-formulating or paraphrasing the question prior to answering. By altering the premise of the question, even in subtle ways, recipients were able to fit the response to their reformulated question rather than to the interviewer's original question. In this way, recipients could effect a shift in topic or agenda without overtly orienting to, or displaying, this attempted shift, which may have encountered resistance from the interviewer

(see also Clayman, 1993, on question-reformulations as a device for avoiding answering questions in news interviews and press conferences).

Extending the work by Clayman (1993, 2001), MacMartin (2008) investigated patients' resistance to therapists' optimistic projections in narrative and solution-focused therapies. Optimistic questions worked to elicit patients' opinions concerning the strengths and abilities that enabled them to deal with stressful and difficult situations (i.e., the situations that had prompted them to seek therapy, e.g., “.Hg (.) hgh=what do you think it says about you that you've- you were able to:, (0.2) to:, ↑not ↑leave to stay there (0.5) to make the choice to stay: an' kind of deal with (0.2) things that were going on.”, MacMartin, 2008, p. 84). MacMartin identified two types of responses to therapists' optimistic questions: (1) answer-like responses, and (2) non-answer responses. Non-answer responses displayed misalignment with therapists' questions in that they typically consisted of patients' explicit reference to their unwillingness or inability to answer the question (c.f. Clayman's, 2001, overt resistance). By contrast, answer-like responses appeared to align with the polarity of an optimistic question. Nonetheless, therapists treated these turns as problematic.

Patients' answer-like responses included: (1) optimistic downgraders, whereby patients downgraded the optimistic projection of a therapist's question and “sequentially drifted” (MacMartin, 2008, p. 86) from the optimistic agenda set by the question; (2) refocusing responses that shifted the focus of the optimistic question to *non-optimistic* matters (e.g., patients re-attributed optimistic characteristics projected on to them by therapists' questions to other people or to factors outside of their control); and (3) joking and sarcastic responses. Therapists' orientation to these responses as problematic was evidenced in their subsequent turns-at-talk, which typically involved them in attempts to recycle or reissue their optimistic questions, often by incorporating elements of patients' prior non-aligning responses.

5.4 Callers' responses to wh-questions in the *MensLine* corpus

Drawing on the work of Stivers and Hayashi (2010), Clayman (1993, 2001) and MacMartin (2008), I identified two types of resistive responses to counsellors' attempts to establish the reason-for-call in the *MensLine* corpus: (1) responses that do not answer a counsellor's question but resist the premise/agenda of that question, and (2) responses that answer the question but which are nonetheless oriented to by counsellors and callers as resistive or problematic. Following MacMartin's (2008) terminology I have called this latter response-type, 'answer-like responses'.

Unlike in the institutional environments examined by Clayman (1993, 2001) and MacMartin (2008), resistance in the *MensLine* corpus does not involve callers explicitly refusing to answer counsellors' questions. In this sense, callers' resistance appears to constitute a *positive* rather than a negative dimension of resistance in Clayman's (2001) terms. That is, through their resistance, callers typically work to effect a shift in topic or agenda away from that initiated by counsellors' interrogatives. Callers' resistive responses therefore share some similarities with the agenda-transforming responses identified by Stivers and Hayashi (2010). Unlike in Stivers and Hayashi's data, though, callers' resistive answers in the *MensLine* corpus are responsive to wh-questions rather than YNIs. In this chapter, then, as well as providing evidence of an interactional pattern regarding a difference in orientation between caller and counsellor, I will also contribute to the CA literature on resistance to wh-questions.

I begin the analysis on caller resistance to counsellors' attempts to establish the reason-for-call by examining responses that avoid answering counsellors' questions and which work to shift the focus of the agenda set forth in those questions.

5.4.1 Avoiding answering the question.

Responses that avoid answering the question are typically designed to address wh-questions that contain candidate reason-for-calls of ‘doing’ something about callers’ stated problems (e.g., “what were you hoping we might be able to do?”). As argued in Chapter 4 (Section 4.3), wh-questions that contain a candidate of ‘doing’ something about callers’ stated problems arguably work explicitly to establish the reason-for-call as one of service provision. Callers can be seen to resist the premise of this type of interrogative by not providing suggestions for how counsellors can assist them in better managing their relationship difficulties. The fragment below provides an illustrative example of such resistance. The opening sequence of the call has been included to provide a background to the caller’s stated problem.

1. Call 53

1 CO: .h thi:s is Terry from MensLine Australia hello
2 (0.3)
3 CA: oh g'day mate how are ya
4 CO: not bad how are you doing
5 (0.2)
6 CA: O::H=o:h h yeah I'm not too bad.
7 CO: m[m?
8 CA: [u:~mh justh (.) h:ad a bit of a drama oh's- been a bit of drama
9 been going on at home for a whI:le 'n (.) all th[at gear]
10 CO: [yeah]
11 (0.7)
12 CA: but=ay::=um hh the are aye ((RA)) or whatever well yeah the are aye
13 ((RA)) 'n I- (0.8) °been° taken off the premises last night not to
14 (0.2) not did anything really wrong but apparently I did 'n .hhh
15 CO: so [the]
16 CA: [BUT ANYW]AY

17 CO: so the police have come?
18 (0.3)
19 CA: yeah last [ni·ght· yeah]
20 CO: [and now=and] and got you an' m: made you leave the home
21 CA: well yeah they had ta (.) well .h they had ta tAke me cos I couldn't
22 drive put it th(h)(h)a(h)at w(h)ay .h and ah yeah it's only cos I'd
23 had too much to drink not wasn't violent throu- through the course
24 of that (0.5) drinking either so
25 CO: so [why h'they] why did they take you away
26 CA: [((unclear))]
27 (0.2)
28 B↑E::cAU:s:e the: (0.8) pohhh the chi- no- h the children o' my
29 (0.4) a::h partner and I
30 CO: yeah
31 CA: u::m (0.4) well (0.5) WE don't- (0.3) not the children (0.9) g- my
32 (0.3) well I wouldn't have called me PArtner anymore cos they'd had
33 enou(h)gh=but u::m (0.4) we just don't see eye to eye anymore
34 a::n[d ((unclear))]
35 CO: [so th- so your P]Artner's children and you: don't get on
36 (0.3)
37 CA: >no no no [I mean th]ere's< nothing wrong with the children it's
38 CO: [no]
39 CA: just her
40 (0.6)
41 CO: oka[y]
42 CA: [u>:::m (1.5) a::nyway I's just (1.5) >I HAVE bit of a< I j- just
43 started a bit of a shouting match over a bit of (0.3) over some
44 (what's the word) hh u::m she reckoned I was tryna make the kid eat
45 >that he didn't want or something last night so< (0.8) anyway=u:m
46 (0.6) in retaliation then I went and turned all the power off in the
47 house so she called the police but .hh I w'z just ((unclear)) what
48 hohhh >I's when I's< speaking to the police last night

49 CO: mm

50 CA: .h (0.7) 'n I ask- I said why why did I've always gotta go: (0.7)

51 you know why's it always you know the man's fault and=u:m (0.2) I

52 sort of explained it to 'er well the situation is not the situation

53 ↑is at the house

54 CO: mm

((10 lines of talk omitted in which CA informs CO he is staying at a friend's house after being removed from his home. The reference term 'they' on line 58 refers to the police who escorted CA from his home.))

55 CO: ALright that's good so .hh S::Ohh well I sp↑ose ↑the f↑irst th↑ing

56 what were you hoping: we might do:?

57 (0.3)

58 CA: well hhh u::m (0.8) hh I've s- (0.4) spoken well sort of I:'ve they

59 asked me have I spoken to anybody who >m- m- blu-< most important

60 (0.3) fact of it all is: .hh

61 CO: mm?

62 CA: i:s the A↑TTitude that she has=she has towards the kids. I=mean

63 she's a:h very: (0.3) um how would you say this she's (.) I don't

64 know she's (1.6) reminds me of a real (0.7) tough prison warden so

65 to speak if you do--[it's either done] her way or no way and the way

66 CO: [mm:]

67 CA: she talks to th'kids=there's ↑no there's no=it's always (0.4) e::h

68 very (0.9) (o::r) dir↑ect (0.3) there's no th↑ere's no l↑ove ↑in any

69 >↑in any anything<

The counsellor's attempt to establish the reason-for-call (lines 55-56) consists of a wh-question with a candidate reason-for call that focuses on problem-solving (i.e., 'doing' something about the caller's stated problem). Embedded in this interrogative is the presupposition that there *is* something that the caller wants the counsellor (or *MensLine* more broadly) to do about the situation that he has reported on and that this is why he has called the

helpline. That is, rather than framing her question as a YNI that would first establish this presupposition (e.g., “are you ringing to see whether there’s something that you can do about this?”), the counsellor orients to this presupposition as already established. This assumption is evidenced by her employment of the past tense in the form of ‘were’, as well as the present continuous tense in the form of ‘hoping’ (line 56). The counsellor’s interrogative therefore restricts the type of response that the caller can provide. It is arguably the presupposition that the caller wants to do something about his problem that he is working to undermine in his next turn-at-talk (lines 58-69).

The caller’s resistance is achieved, first, by the fact that he does not provide a suggestion regarding how the counsellor might be able to assist him in doing something about his problem (i.e., he avoids providing a reason-for-call account that focuses explicitly on service provision). The caller appears to avoid providing this suggestion by changing the topic or agenda introduced by the counsellor’s interrogative. This agenda-shift is achieved, and masked, by the prefatory component of the caller’s response: “most important fact of it all is” (lines 59-60). Through this turn-initial component the caller can be seen to initiate a new direction for the conversation but in such a way that the topic appears related to the agenda of the counsellor’s question. That is, the caller produces a matter that, whilst on-topic (i.e., talk about a relationship difficulty), might be considered ancillary. Through this prefatory component, the caller appears to perform what Greatbatch (1986) called a ‘pre-answer agenda shift’ (p. 443) – a shift that creates the opportunity to talk about something that falls outside the domain of relevance established by the prior speaker’s question.

Specifically, the caller’s response does not focus on what he had been talking about – the topic that the counsellor’s question is oriented towards (the fact that he has been moved from his family home by the police). Instead, the caller provides what appears to be a complaint against his partner and her behaviour (the form and structure of complaints in the

MensLine corpus will be examined in Chapter 6). The caller's response can therefore be seen to go outside the limits of the counsellor's question and provide something other than what was explicitly asked for. Much like interviewees' attempts to reformulate interviewers' questions in broadcast news interviews (Clayman, 2001), here, by changing the premise of the counsellor's question from 'doing' something about the problem to 'the most important fact', the caller works to change the topic/agenda initiated by the counsellor's question and to avoid providing a suggestion that would turn the reason-for-calling from troubles-talk to service provision.

There are a number of other features of the caller's response that indicate it is working to avoid answering the question to which it is appended. First, the caller's response is 'well'-prefaced (line 58). This 'well'-preface is repeated following the caller's first attempt at repair (i.e., it is also the turn-initial component of the caller's second attempt to answer the question). The 'well' could be working to do one of two things: (1) to signify the non-straightforwardness of the upcoming answer, or (2) to signal an upcoming dispreferred response. Schegloff and Lerner (2009) argued that 'well'-prefaced responses to wh-questions were indicative of, or worked to signal, the 'nonstraightforwardness' (p. 91) of an upcoming response. 'Well' has also been shown, routinely, to signal an upcoming dispreferred response, particularly in the environment of assessments (Pomerantz, 1984).

As Schegloff and Lerner (2009) argued, non-straightforward responses and dispreferred responses are not necessarily the same thing. Specifically, preference in a CA sense usually refers to two competing alternatives (e.g., acceptance/rejection)¹⁵. Such alternative response-types are not available following wh-questions. In this sense, it is arguable that the caller's 'well' is working not to signal a dispreferred response *per se*, but to demonstrate that the response provided is not as simple or straightforward as it could be. This non-straightforwardness is then evidenced by the fact that the caller does not offer a

suggestion (i.e., he does not provide what the counsellor asked for). Through the ‘well’-preface, then, the caller arguably works to reject the presupposition that there *is* something that he wants to do about his stated problem and that doing something about his problem is why he has called the helpline. In other words, if this presupposition was treated as accurate then the caller’s response would arguably be much more straightforward.

The caller’s turn is also produced with a number of perturbations including placeholders (e.g., lines 58, 63, and 67), intra-turn pauses (e.g., lines 58, 60, 63, 64, 67, and 68) and self-repair in which he changes the direction of his answer (lines 58 and 59). These turn-initial components not only demonstrate some difficulty on the part of the caller in answering the counsellor’s question, but work to displace the caller’s eventual response to the counsellor’s interrogative (i.e., to break the contiguity with the FPP). These turn-initial components therefore work further to effect a shift away from the topic/agenda initiated by the counsellor’s interrogative.

In this example, then, by avoiding answering the premise of the counsellor’s question, the caller can be seen to resist the counsellor’s attempt to transform the reason-for-call into one of service provision. In doing so, the caller can be seen, arguably, to orient to the reason-for-call as one of troubles-telling only. The resistive nature of the caller’s response is illustrated further when the counsellor attempts, approximately 11 minutes after the sequence above, to provide the caller with advice in respect of his stated reason-for-calling (i.e., with respect to dealing with his partner’s behaviour and ensuring the safety and well-being of his children). The caller’s resistance to this advice further demonstrates the resistive nature of his response to the counsellor’s attempt to establish the reason-for-call. That is, this response was not working to transform the reason-for-call into one of service provision but, rather, can be seen as part of an attempt to maintain the reason-for-calling as one of troubles-telling only.

A similar observation regarding resistance was made by Jefferson and Lee (1992) in the interactional environment of advice-giving. As outlined in Chapter 1 (Section 1.3.2), Jefferson and Lee observed that in everyday talk, advice was often rejected when provided in the midst of a troubles-telling. They argued that such advice was rejected because it worked to bring about a change in the categorical role of participants, such that the co-interactant who had up to that point been acting as the troubles-recipient became the advice-giver. The routine rejection of advice was therefore seen as an attempt on the part of troubles-tellers to maintain (1) the interaction as a troubles-telling, and (2) their co-interactant's role as troubles-recipient. The resistance illustrated in the example above demonstrates a related, but somewhat different, phenomenon to that identified by Jefferson and Lee in that the counsellor has not yet offered advice. The caller's displayed resistance, then, does not involve the rejection of proffered advice in which the counsellor adopts the role of service provider (although this happens later), but resistance to attempts to turn the reason-for-call *into* the provision of advice/information rather than talking on a trouble. Although the resistance occurs in a different interactional environment to that analysed by Jefferson and Lee, it can also be seen to form part of an attempt by the caller to maintain, or at least orient to the relevance of, the reason-for-calling as one of troubles-telling rather than service provision.

The resistance displayed by the caller in Extract 1 can also be seen to share similarities with te Molder's (2008) single case analysis of a call to a helpline in the Netherlands that deals with callers' concerns about general health problems. In the particular call analysed by te Molder, the caller could be seen to portray herself as needing someone to talk to rather than as needing help. Specifically, in response to the counsellor's displayed assumption that the caller had contacted the helpline in order to seek and receive 'help', the caller formulated her reason-for-calling in the following way: "No, I just want to hear somebody right now" (te Molder, 2008, p. 155). In doing so, the caller was seen to position

herself as an ‘ordinary person’, rather than as a help-seeker. Te Molder argued that the construction of this identity worked to undermine the institutional nature of the interaction taking place. That is, by positioning herself as an equal interlocutor to that of the counsellor (i.e., by turning the interaction into one of ‘everyday’ talk), the counsellor’s identity ceased to be that of ‘help-giver’. In this interactional environment, then, much like Extract 1 above, the participants were seen to display different orientations to the caller’s reason for contacting the helpline, which led to negotiation surrounding the relevant categorical identities of caller and call-taker.

Importantly, the caller’s orientation in Extract 1 to the focus of the interaction as one of troubles-telling only demonstrates a key interactional pattern in the *MensLine* corpus, and one that provides evidence of an interactional asymmetry between the caller and counsellor to the purpose of the interaction taking place between them (i.e., what the reason-for-call should be). Specifically, whereas the counsellor is arguably orienting to the reason-for-call as one of service provision, in conjunction with troubles-telling, the caller does not appear to orient to his reason-for-call in this way. This displayed resistance on the part of callers, and evidence of an interactional asymmetry, is arguably an important pattern for investigation because it represents a challenge to the general stereotype that men display a preference for practical solutions and outcomes in their health care and counselling encounters. In the remainder of this chapter, as well as in Chapters 6 and 7, I show further evidence of an interactional asymmetry between callers and counsellors that works to challenge this stereotype. The practical implications of these interactional patterns in terms of research and institutional practice will be discussed in Chapter 8.

The extract below provides another illustrative example of a caller response that avoids answering the premise of the counsellor’s question, and which provides interactional

evidence of an asymmetry or misalignment. Again, the opening sequence of the call has been provided to give a background to the caller's stated problem.

2. Call 6:

1 CO: .h hello this is Terry from MensLine Australia hello:
2 CA: .h oh g'day Terry it's u:m Bob ((last name)) calling from
3 ((location)) how you going today
4 CO: not bad thanks Bo:[b
5 CA: [that's a shot .hh u:m >th-th-the main reason I'm
6 giving a call< is:=um tch I've got u:m I've been evicted from my
7 ho:us:e=u:m by: o- on the tenth of May this year by my former
8 domestic partner .hh a:nd (0.4) where I've concerns i:s that u:m
9 (0.3) >I believe that< she's made a false statement to polic:e a:nd
10 or false alleguations to police to have me evicted or wrongly moved
11 from the home

((2 minutes and 45 seconds of talk omitted where CA informs CO of an
incident where his partner rammed her car into his))
12 CA: what happened that particular day wa:s um a:h .h she was in an
13 emotional she's highly emotional type person? tch[.hh u:]:m thee: I
14 CO: [mm::]
15 CA: wen'='nd u:m she was in her room cry:ing, it was in the evening, I
16 knocked on the door .h I said I've made you a hot cup of tea: do you
17 wanna come out and ta:lk, .hh u:m I left her- I didn't enter the
18 roo:m just knocked on the door I walked out in the hallway sat back
19 in the lounge room chai:r .hh u:m she left her bedroo:m u:m uh- uh-
20 run down the hallway screaming at me=how dare you wake me from a
21 deep sound sleep (it wz jus) .h she was obviously sitting there just
22 crying in her room you could hear her clearly .hhhh and=um hhh she's
23 come down=she's thrown a whole hot cup of tea over top of me h and
24 then king hit me to the side of the face like stood over the chai:rs
25 I's sitting back in the lounge chair? .h and gave me a full right
26 hand punch to the face? tch.hh u:m this is [not the] first time

27 CO: [.hh]

28 CA: she's punched [me: an'

29 CO: [I just wanna say look I don't I- I- mean I I I don't

30 wanna stop you from te- from telling telling me what it is y'know if

31 it's of benefit but what sort of are you hoping that we might be

32 able to do

33 CA: well what I'm saying is I've gone to police to make a statement

34 a::nd u:m they're basically not interested in my statement

35 CO: mm

36 (1.0)

37 so that's really a legal (0.8) that's really a legal=this is a

38 legal,

39 CA: yeah well look what I'm saying [is ((unclear)) the] the polic:e

40 CO: [scenario isn't it]

41 CA: need to: tch.hh u:m I can't belie::ve that the polic:e u::m it it's

42 tch.h an abusive process; where ah- y'know the person [who

43 CO: [so that might

44 be an ombudsman or a it sou:nds as though it's more of a l:egal:

45 (0.3) u:m dilemma that you're experiencing? rather than a:: (1.9)

46 [yeah] rather than any anything else that we can do?

47 CA: [((unclear))]

The counsellor's attempt to establish the reason-for-call at lines 29-32 nicely demonstrates her orientation to her dual institutional role of troubles-recipient and service provider. That is, the counsellor indicates that *both* troubles-recepting and advice-giving are relevant actions for the purposes of the call. In other words, talking on a trouble, whilst relevant, only constitutes part of the focus for the interaction – the caller and counsellor also need to address how to fix the problem¹⁶. The counsellor's interrogative can be seen be based on a similar presupposition as that in the counsellor's interrogative in Extract 1 – that the caller wants to do something about his stated problem and that this is why he has called the

helpline. This presupposition is also evidenced by the counsellor's subsequent attempts to transform the caller's problem into a legal issue whereby the appropriate person from whom to receive assistance becomes an ombudsman rather than the counsellor. It is again this presupposition that the caller can be seen to undermine through his response to the counsellor's interrogative.

The caller's response shares a number of features with the caller's response in the previous example. Specifically, the response is 'well'-prefaced, and contains a turn-initial component that works to change the trajectory embarked upon by the question: "well what I'm saying is" (line 33). As in the previous example, the 'well' arguably works to signal an upcoming non-straightforward response. The non-straightforwardness of the caller's response is evidenced by the fact that he does not actually answer the counsellor's question. That is, the caller provides an upshot of his telling, and so his response can be considered on-topic, but he does not provide a suggestion regarding what the counsellor, or *MensLine*, can do to assist him. He therefore does not collaborate in turning the reason-for-call into one of service provision. As with the previous example, this agenda shift is achieved through, and masked by, a turn-initial component: "what I'm saying is". This turn-initial component arguably reformulates the premise of the counsellor's question and demonstrates that, from the caller's perspective, the counsellor has not yet understood the import of his story.

Importantly, in this example, there is interactional evidence that the counsellor is orienting to the caller's response as resistive or problematic. Immediately following the caller's response, the counsellor provides a minimal acknowledgment (line 35) that gives space for the caller to elaborate. This token appears to demonstrate the counsellor's orientation to the caller's response as insufficient or incomplete and requiring some unpacking. This acknowledgment token is then followed by a substantial gap¹⁷ of one second (line 36), which further demonstrates the problematic nature of the caller's response. In her

subsequent turn-at-talk, the counsellor attempts to reformulate the caller's problem as a 'legal' issue (line 37). This reformulation then enables her to provide a suggestion for how the caller might solve his problem (lines 43-46). Through her reformulation, the counsellor can be seen to attempt to transform the caller's response – his stated reason-for-call – into one where he is enquiring after legal help (i.e., a reason-for-call focusing on service provision). In doing so, the counsellor arguably displays an orientation to the caller's initial response on lines 33-34 as resistive, or at least insufficient in terms of providing a suitable reason-for-call account.

In response to the counsellor's reformulation, the caller works to reiterate his response from lines 33-34 as evidenced by the recycled turn-initial component: "well what I'm saying is" (line 39). Again, this turn-initial component demonstrates the caller's orientation to informing the counsellor that she has not understood the import of his story and therefore that her reformulation is irrelevant. The caller also comes in at a TRP but not at a point where the counsellor's turn is semantically, grammatically, or prosodically complete, as evidenced by the continuing intonation (line 38). Here, it is arguable that the completion of the counsellor's turn is projectable by what she has said, and so the caller comes in prior to this completion and before the counsellor can provide the upshot of her reformulation of the caller's problem as a legal issue.

The caller's response to the counsellor's reformulation on lines 39-42 appears to take the form of a complaint against the police (c.f. the caller's response to the counsellor's attempt to establish the reason-for-call in Extract 1, which took the form of a complaint against his wife). The caller's turn is also produced with a number of perturbations, most notably the two attempts at self-repair (c.f. the caller's multiple attempts to answer the counsellor's question in Extract 1). By producing this complaint, the caller arguably indicates that *this* is his purpose for calling the helpline – that is, to comment upon what he sees as an

‘abusive process’ (line 42), not to receive advice about how to fix it. The counsellor, though, does not align as a complaint-recipient¹⁸ but can be seen, once again, to orient to the relevance of establishing the reason-for-call as one of service provision. Specifically, by once again reformulating the caller’s problem as ‘legal’ (line 44), the counsellor works, this time, to suggest a possible solution to the caller’s problem: seeking help from an ombudsman.

Importantly, this example clearly demonstrates that the caller and counsellor each have a different orientation to the purpose of the call taking place between them. As with Extract 1, by resisting the counsellor’s initial attempt to establish the reason-for-call as one of service provision on lines 33-34, and then working subsequently on lines 39-42 to resist her attempts at reformulating his reason-for-call, the caller can be seen to orient to his reason-for-calling as one of troubles-telling only. By contrast, in working, first, to establish the reason-for-call on lines 29-32 and, subsequently to transform the caller’s stated reason-for-calling into one where he is seeking advice (lines 37-38 and 43-46), the counsellor can be seen to attend to the relevancies of service provision *as well as* troubles-receipting. This example therefore once again provides evidence of an interactional asymmetry or misalignment between caller and counsellor in terms of their respective orientations to what the reason-for-call should be.

I move now to examine callers’ answer-like responses to counsellors’ interrogatives. I show that although these responses work to answer, rather than avoid, counsellors’ questions, they nonetheless are oriented to, and come to be seen as resistive in the unfolding sequence of interaction. Importantly, these responses once again provide evidence of an interactional asymmetry between caller and counsellor.

5.4.2 Answer-like responses.

Unlike the responses examined in the previous section, answer-like responses can be seen to answer counsellors' interrogatives that work to establish the reason-for-call. That is, not only do these responses satisfy the conditional relevance of providing an answer to a question, they also conform to the constraints of that question and do not move away from its topical agenda. By contrast to responses that avoid answering the question, answer-like responses are typically designed to address wh-questions that do not contain candidate reason-for-call accounts but enquire, more generally, into the 'purpose' or 'reason' for a caller's call to the helpline. Myriad potential SPPs are available to callers as responses to this type of wh-question and, even if these SPPs do not focus on service provision, they can still be considered legitimate responses.

In the sense that answer-like responses conform to the constraints of counsellors' questions and do not move away from their topical agenda, they do not appear, at the outset, to be resistive of the action that counsellors are working to implement. Much like MacMartin's (2008) investigation of clients' answer-like responses to therapists' optimistic questions in narrative and solution-focused therapy, the aim here is to demonstrate how answer-like responses in the *MensLine* corpus come to be seen as resistive in sequences of interaction. That is, I focus on how counsellors orient to these responses as problematic or resistive. This orientation on the part of counsellors is evidenced by their routine attempts to transform callers' stated reasons-for-calling – their answer-like responses – into reason-for-call accounts focusing on service provision.

In the following analysis of answer-like responses, I also build on the work conducted by MacMartin (2008) by focusing on the ways in which *callers* respond to counsellors' attempts to transform their stated reasons-for-calling into ones focusing on service provision. Specifically, I focus on the ways in which callers typically display resistance to these

attempts. Through this resistance callers arguably display an orientation that their answer-like responses are working to maintain the reason-for-calling as one of troubles-telling and not to transform the reason-for-call into one of service provision. In this sense, callers can be seen to demonstrate an orientation to their answer-like responses as resistive to the action that counsellors are working to implement.

I examine two instances of answer-like responses. In the first example below, the sequence of interaction in which the caller resists the counsellors' attempts to transform his stated reason-for-calling into one of service provision is extensive, and so this extract is necessarily lengthy. The caller's answer-like response occurs on line 26 and is arrowed.

3. Call 11:

1 CO: good evening Me:nsLine Austra:lia this is Casey speak↑ing?
2 CA: ((clears throat)) oh hello
3 (0.6)
4 CO: good evening.
5 (0.5)
6 CA: um °tch.hh° (1.0) >righto jus<t struggling a bit with ah ((clears
7 throat)) (0.9) with ah- ah- (0.3) on- ONgoin' problem >that's been<
8 .hh (0.3) °((clears throat))° goin' on for (1.0) coupla years now
9 >but< °.hh°
10 CO: ohkay
11 CA: I've got (0.3) I'm trying to make it simple li's cut it short but
12 ((clears throat)) °tch.hh° I've got five (.) of my kids that (0.9)
13 lef- >wivmenen my-< the wife my wife divorced me two years ago or a
14 bit over two years ago .hh (0.4) she took seven of my nine kids
15 an=thn one come home straight away the next day=another one come
16 home nine months later .hh and ah the five little ones=what I call
17 the five little ones are still with their mother in ((location)).
(9 minutes and 15 seconds of troubles-talk omitted)

18 CO: look eh- eh- you're you're um this is obviously a sort of ah a long
19 running an' an' quite complex .hh family situation eh to start with
20 there's so many members of the family? y'know you've got ah ah .h
21 more children than most people have but .hh i- y'know where where
22 are you at now an' an' what what's your um (0.3) .h your ah reason
23 for for contacting today? what what is the .h[h
24 CA: [the iss[ue is th't
25 CO: [the sort of
26 issue today;
27 CA: → the issue that's been ongoing is the fact that I can't see my kids.
28 CO: okay yes [yep
29 CA: [an' (0.4) um (0.3) my dear old mum is: ninety: .h (0.2)
30 nearly ninety she's eighty n- ah eighty eight [((unclear))
31 CO: [grandmother yeah
32 CA: m- my mother
33 CO: mm so grand[ma to the children
34 CA: [((clears throat)) yeah
35 CO: mm
36 CA: an' she's in a nursing home an' .hh I ring her (.) once a fortnight
37 or so have a long talk to her she's in ((location)) in a nursing
38 home an' .hh she keeps saying to me over an' over again she says
39 when I: I finally pass on an' she said it must be coming up soon .hh
40 she said you take your inheritance (0.2) >which she's gonna share
41 with ya sisters< an' you go an' you get to see your kids you go back
42 to court .h an' you get to see your kids
43 CO: mm?
44 CA: an' I I always thought that's what I'd do,
((8 minutes and 50 seconds of troubles-talk omitted))
45 CO: okay .h so look it comes back to that question then doesn't it
46 y'know around your children an' your contact with them=an' your
47 desire tuh .h to get back some sort of physical contact with them;
48 an' being able to spend some time with them here an' there, .h what

49 what are your chances I mean what are your options to ah pursue now
50 that y- that .h might get you that at some some stag:e ah down the
51 track;

52 CA: .hh well um there's nothing else I can do; except write 'em letters
53 an' send 'em .hh >so I send 'em bir-< e- every time it's their
54 birthday >one of their birthday<=I send 'em a card with fifty
55 dollars in it

((7 minutes and 52 seconds of troubles-talk omitted))

56 CO: uh huh °okay yes°=.h look where does it leave you though; y'know in
57 terms of um (1.2) your: ah situation now and and ah .h obviously
58 (0.4) being quite distressed at at not having (0.2) .h (0.3) not
59 having any certainty with regards to these five children of yours

60 CA: well the the situation that I seem to se- how I see it is .hh that
61 I've (.) now been a father to these four kids for four for three
62 years,

63 CO: mm?

64 CA: they got no complaint they t(h)ell me,
((5 minutes and 13 seconds of talk omitted. In this talk CA informs
CO about his children before moving on to talk about his lawyer.
When CA is talking about labels below - line 91 - he is referring to
an incident where he hit his son))

65 CA: the girl that I had as a lawyer w'z a local lawyer firm here in
66 ((location)) (0.3) y'know not very big it's not a very big town .hh
67 an' she was green as grass she d- she didn't even know what she was
68 d(h)oiing anyw(h)ay .hh and the other woman was very (0.3) on my
69 wife's lawyer was very (0.2) professional.

70 CO: mm

71 CA: an' they just (0.2) wouldn't listen to anything that was said in my
72 favour nothing

73 CO: mm

74 CA: it's like I said once those labels hang around your neck you got no
75 hope

76 (0.7)

77 CO: [.hh

78 CA: [may as well give up

79 (1.3)

80 CO: we::ll yes:: I I I (0.3) I hear that, .hh but y'know the the the

81 reality is that three years has passed, three an' wa- was it almost

82 three isn't it?

83 CA: three years on the first of March y[eah

84 CO: [ye:s and y'know you: you now

85 have (0.7) y'know (0.4) lived with your your older children they can

86 account for, .h your behaviour:, and and and um .hh y'know how you

87 have um r- been able to relate together an' th[at (thing)

88 CA: [w- w- we've never

89 we:'ve never had a hiccup we've never had a hard wor:d

90 CO: mm mm

91 CA: um

92 CO: .hh

93 CA: I've I've been there for them when y'know they've had .h

94 relationship problems with opposite sex an' .h different things have

95 come up an' that=>an' †I've always< been here for 'em an' I intend

96 to always [be here for ['em,

97 CO: [yea:h? [yes yes [.h so what I'm saying is i- y'know

98 CA: [an'

99 CO: I'm wondering if you're short changing yourself a bit when you say,

100 .h that y'know once you have that label that's it forever sort of

101 thing y'know an' .h and and i:: I'm wondering if there's a ray of

102 hope somewhere where you may be able to .hh because y'know that now

103 that um e:h the system has changed quite a bit even in this last

104 three: years. .h ah the family (.) court ah system .h and (0.6) you

105 can actually request that your children have a ah their own .h

106 representative in the cou:rt now (0.7) ah an' the children will then

107 be able to independently .h spea:k with a professional in the court

108 I think it's usually a psychologist >or a (.) social worker °or
109 something°< .h u:m an' they can then express y'know without the
110 interference of um .hh someone who might otherwise y'know control or
111 otherwise um .h influence .h a:h they can do: that so .h I'm
112 wondering if if if you: if you have (0.8) thought about that or have
113 you considered it=have you discussed it with anyone?
114 CA: well the s- the answer always comes back to money. .hh I can't (0.2)
115 d- I can't go back to court unless I got money [to pay [to pay the
116 CO: [oh money [okay
117 CA: lawyer.hh and um ((swallows)) thee thuh thuh couple of lawyers I've
118 asked they've said .hh it could get- depends how how complicated it
119 gets I don't know that til I get involved in it .h but they said
120 it'd be unwise to even start thinking about doin' it unless I had
121 twenty thousand dollars
122 CO: .hh so you wouldn't (0.5) they they un- would- I mean obviously a
123 lawyer wouldn't recommend you to represent yourself but I mean there
124 is that option of representing yourself, [.h an' you've gotta do
125 CA: [(°yeah°)
126 CO: quite a bit of wor:k to [do that you've gotta understand how it
127 CA: [o:h look I
128 CO: works
129 CA: I just haven't look I I kno:w myself well enough .hh I haven't got
130 the intelligence

Here, the caller's answer-like response (line 27) can be seen not only to satisfy the conditional relevance of providing an answer to a question, but it also addresses the premise of the counsellor's question rather than moving away from its topical agenda. On the surface, then, the caller's response does not appear resistive. The resistive nature of this response is arguably not evident at the outset due to the format of the interrogative to which it is responsive. That is, because the counsellor's interrogative does not contain a candidate

reason-for-call that focuses on service provision it is not clear that the counsellor is working to establish service provision *as* the reason-for-calling. My aim, here, is to show how this response comes to be seen as resistive in the unfolding sequence of interaction.

Immediately following the caller's answer-like response, the counsellor provides a minimal acknowledgment ("okay yes", line 28) that can be seen to receipt the caller's stated reason-for-call but also to provide room for elaboration. In other words, this minimal acknowledgment is arguably evidence that the caller's response is insufficient or incomplete and requires some unpacking (c.f. the counsellors' minimal acknowledgement in Extract 2, line 35). Although the caller maintains the speaking turn and unpacks his response from line 27, he does not work to transform this talk into a resource for problem-solving (e.g., he does not request assistance in this matter) but can be seen to maintain the focus of the interaction on troubles-talk.

On lines 45-51, after extensive troubles-talk from the caller, the counsellor works explicitly to transform the caller's stated reason-for-call into one of service provision. The turn-initial component of this turn – "it comes back to that question" – arguably indicates that the caller's talk following her attempt to establish the reason-for-call has not focused on his stated reason-for-calling (not being able to see his children). The counsellor can be seen to turn this stated reason-for-call into one that focuses on service provision by enquiring into the strategies that the caller can employ in order to gain access to his children (i.e., in order to find a solution to his stated problem)¹⁹. The fact that counsellor attempts to transform the caller's answer-like response into a reason-for-call focusing on service provision demonstrates that, from her perspective, this response does not constitute the type of reason-for-call account that she is working to elicit (i.e., it is problematic).

In his subsequent turn-at-talk (lines 52-55), the caller resists the premise of this interrogative by indicating that there is nothing he can do in order to gain access to his

children. In other words, the caller resists the counsellor's attempt to transform his stated reason-for-calling into one where he is seeking advice (i.e., a reason-for-call focusing on information/suggestions about what he can do in terms of managing his present difficulty). What is evident through this resistance, then, is that the caller's answer-like response is not working to solicit advice (i.e., to transform the reason-for-call into one of service provision). The counsellor's interrogative on lines 45-51, though, demonstrates *her* orientation to the importance of the caller's stated reason-for-call as one of service provision *as well as* troubles-telling. It is therefore through the counsellor's interrogative on lines 45-51, and the caller's associated response on lines 52-55, that the caller's answer-like response comes to be seen as resistive. As the sequence continues to unfold there is further interactional evidence to support this interpretation of the caller's answer-like response.

Following his turn-at-talk on lines 52-55, the caller continues troubles-talk for just under eight minutes before the counsellor can be seen, once again, to attempt to transform the caller's stated reason-for-calling into one of service provision (lines 56-59). Again, this interrogative works to engender extensive troubles-talk from the caller (lines 60-64 as well as the talk omitted from the transcript). The 'well'-preface of the caller's response likely indicates that his response will not be straightforward (i.e., it will not conform to the premise of the counsellor's question). The self-repair (line 60) arguably further demonstrates the non-straightforwardness of the caller's response and also likely displays his difficulty in providing an answer to the counsellor's question. The caller's turn-at-talk on line 78 – “may as well give up” – also appears to do important resistive work. Specifically, through this turn-at-talk, the caller indicates that there is little that he can do in order to solve or better manage his present difficulty (i.e., his stated reason-for-calling), thereby once again demonstrating his orientation to his stated reason-for-calling as constituting one of troubles-receipting rather than service provision.

On lines 97-113, though, the counsellor moves to provide advice with respect to the caller's stated reason-for-calling – not having access to his children. In doing so, the counsellor again attempts to transform the caller's candidate reason-for-call into one focusing on service provision. The counsellor's interrogative on lines 111-113 presents the option of hiring a representative for his children in court. By enquiring whether the caller has thought about this course of action, the counsellor can be seen to downgrade or mitigate the normative dimension of her advice. That is, she merely enquires whether the caller has thought about this course of action rather than suggesting that he undertake it, whilst still presenting it as a viable option. This type of interrogative has been examined by Butler et al (2010) in the context of calls to *Kids Help Line* as one way in which the helpline's mandates of client-centredness and empowerment are enacted in sequences of interaction (see Chapter 1, Section 1.4, for a more in-depth discussion of these interrogatives).

The counsellor's advice-implicative interrogative invites a 'yes + information' or a 'no' response. However, neither of these responses is forthcoming (lines 114-121). Instead, the caller provides a non-conforming response – a response that does not conform to the grammatical constraints of a YNI (Raymond, 2003). According to Raymond, non-conforming responses are typically indicative of dispreferred responses²⁰. This is because, by not accepting the constraints of a YNI, non-conforming responses indicate some misalignment with the YNI (i.e., they treat the design of the interrogative and the action it delivers as problematic). Here, the caller can be seen to resist the premise of the counsellor's interrogative by indicating that the caller's suggestion – gaining a court-appointed representative for his children – is not a viable option due to inadequate funds. In doing so, the caller arguably demonstrates his orientation to the counsellor's interrogative as working to transform his stated reason-for-calling into one of service provision (i.e., to provide a solution to his problem), whilst working simultaneously to undermine this attempt (i.e., he

treats the design of the counsellor's question and the action that it is implementing as problematic). Importantly, this resistance provides further interactional evidence that the caller's answer-like response is not working to solicit advice which would turn the reason-for-calling into one of service provision.

Despite this resistance, the counsellor attempts, once again, to provide advice at lines 122-128, this time by informing the caller that he has the option to represent himself in court. In providing this advice, the counsellor works to overcome, and provide a solution to, the caller's prior resistance (that he does not have sufficient funds for legal representation), thereby again working to transform his stated reason-for-calling into one of service provision. The caller resists this advice by informing the counsellor that he does not have the intelligence to represent himself in court (lines 129-130). This rejection is nicely designed to resist further advice from the counsellor because it is framed in terms of a dispositional trait – the caller's intelligence – which is something that cannot easily be altered.

What is evident in this example is that, in her subsequent turns-at-talk following the caller's answer-like response, the counsellor is orienting to this response as resistive or, at least, problematic. Specifically, in these turns-at-talk, the counsellor works repeatedly to transform the caller's answer-like response – his stated reason-for-calling – into a reason-for-call focusing on problem-solving. The fact that she does so arguably indicates that, from her perspective, the caller's response is not sufficient to establish the reason-for-call as one of service provision. In turn, the fact that the caller does not collaborate with the counsellor's attempt to transform his reason-for-calling into one where he is seeking advice is arguably an indication that *he* is not orienting to his stated reason-for-calling in this way. Rather, the caller can be seen to demonstrate an orientation to his reason-for-calling as constituting one of troubles-telling only. The caller and counsellor can therefore be seen to have different

orientations to the purpose of the call taking place between them (i.e., what the reason-for-call should be).

I provide one final example of an answer-like response from the present corpus. Again, this response can be seen to answer the counsellor's question rather than moving away from its topical agenda. This example is slightly different to that analysed in the previous extract in that, in response to the counsellor's attempt to establish reason-for-call, the caller explicitly references talking on a trouble as his reason for having contacted the helpline: "just to be able to talk to someone" (line 26-27). On the basis of the caller's proffered reason-for-call account, it could be tempting to argue that the response is resistive to an attempt to establish the reason-for-call as one of service provision. That is, through this response, the caller clearly states that he has called for the purpose of talking to someone and not to receive advice. Such an interpretation, however, is inadequate from a CA perspective and this is because of the format of the interrogative to which the answer is directed – a *wh*-question that does *not* contain a candidate reason-for-call. In other words, because it is not clear from the format of the counsellor's interrogative that she is working to establish the reason-for-call as one of service provision, it is not clear, at the outset, that the caller's response is resistive to this action. Here, as with the previous extract, I focus on how, in the unfolding sequence of interaction, this response is oriented to as resistive by both caller and counsellor.

4. Call 69:

- 1 CO: tch.h ah good afternoon MensLine Austr[†]alia this is Casey speaking?
- 2 CA: hi um it's ah Tony here how are you
- 3 CO: a:h not too bad thanks is it Tony is it?
- 4 CA: To:ny y[es
- 5 CO: [Tony okay
- 6 CA: yes .h u:m I'm ah I'm ringing up today just for um a bitta talk=I'm
- 7 feeling a bit=ah .hh u:m bit=ah low

8 CO: m[m?]

9 CA: [ab]out my:=ah .h um my family situation
 ((21 minutes of troubles-talk omitted. This talk concerns CA's relationship in which his wife took the 'dominant' role and CA the 'submissive' role. Just prior to the continuation of the extract below the caller is talking about his wife's behaviour on antidepressants))

10 CA: y'know it's like Doctor Jekyll and Mr Hyde

11 CO: mm::

12 CA: definitely there's no: two ways about it

13 CO: .hh okay [so it it it could be ha- has she been on on that

14 CA: [(now that)

15 CO: medication for a long time? or [what that ah

16 CA: [yes.

17 CO: okay

18 (0.5)

19 .h but maybe the mixing y'know the the the mixing it up with the

20 alcohol might have made a difference

21 CA: oh definitely

22 CO: yea:h

23 CA: y[eah um definitely .hhh [°(I'd say so)°

24 CO: [yeah [°(something)° .h but look w- what do you

25 ah what do you need from this call today Tony? [ah y'know

26 CA: [just to be able to

27 talk to someone.

28 CO: are you are you (1.1) looking at discussing some some .hh strategies

29 for yourse:lf in terms of management of this situation °or°

30 CA: well I've I've guess I've spoken to so: many people in the last few

31 weeks about strategy that .hh sometimes I just need to talk.

32 CO: m[m?

33 CA: [an' an' be heard

The caller's turn-at-talk on lines 6-7 was analysed in the previous chapter (Chapter 4, Section 4.3). In this chapter it was argued that, although this turn-at-talk might be hearable as the caller's specific reason for having contacted the helpline, it can be seen to project a telling that is not self-evidently concluded at any point. As described in Chapter 4, in this institutional setting, tellings that take the form of not being demonstrably concluded at any point routinely necessitate the production of interrogatives such as that produced by the counsellor on lines 24-25.

Here, the counsellor's attempt to establish the reason-for-call takes the form of a wh-question in which she attempts to elicit from the caller a candidate reason-for-call focusing on what he 'needs' from the call (i.e., "h but look w- what do you ah what do you need from this call today Tony", lines 24-25). The format of the counsellor's interrogative does not restrict the type of response that the caller can provide. Many potential responses are available to the caller as legitimate SPPs, and these responses need not focus on problem-solving. Indeed, the response from the caller indicates that he has *not* contacted the helpline for the explicit purpose of seeking advice. Specifically, the caller responds to the counsellor's interrogative by providing, in overlap with the counsellor, a turn-at-talk that indicates what he 'needs' from the call is simply to talk to someone: "just to be able to talk to someone" (lines 26-27). His stated reason-for-call therefore involves what he has already been doing – talking on a trouble. The essentialiser 'just' (line 26) works to reinforce the caller's account by indicating that the *only* thing that he needs from the call is to talk.

In the sense that the caller does not provide a reason-for-call account other than what he has already been doing, it could be tempting to argue, on this basis alone, that the caller is displaying resistance to the counsellor's attempt to establish a reason-for-call that focuses, not just on troubles-talk, but on service provision also. Due to the format of the counsellor's interrogative, though, it is not necessarily clear what *type* of reason-for-call account the

counsellor is working to establish. That is, although the counsellor is arguably indicating that a reason-for-call has not been inferred from the caller's troubles-talk, by not providing a candidate reason-for-call, she has not informed the caller what would be a suitable reason-for-call account. In this sense, it is not sufficient to argue, from a CA perspective, that the caller's response on lines 26-27 is resistive of the action that the counsellor is working to implement. The way in which the counsellor *treats* this response, however, provides evidence of her orientation to this response as resistive.

Specifically, through her interrogative on lines 28-29, the counsellor demonstrates an explicit orientation to her prior interrogative on lines 24-25 as working to establish the reason-for-call as one of service provision. In reissuing a modified version of her interrogative from lines 24-25, the counsellor can be seen to orient to the caller's response to this interrogative – his reason-for-call account focusing on troubles-talk – as resistive, or at least inadequate. So here, although the caller's answer-like response constitutes a legitimate SPP given the way in which the counsellor's interrogative is formatted, by once again attempting to establish reason-for-call, the counsellor demonstrates an orientation to the caller's response as performing a dispreferred *action*. The counsellor also declines to acknowledge the caller's response, even minimally (e.g., through a turn-initial 'okay'), thereby deleting the sequential import of the caller's resistance.

This second attempt at eliciting the reason-for-call on lines 28-29 is accomplished through a YNI. Embedded in this polar interrogative is a candidate reason-for-call that focuses on service provision. This candidate is evidenced through the counsellor's explicit reference to management strategies. There are a number of perturbations within the production of this interrogative (e.g., the turn-initial repetition and substantial pause on line 28), which display some difficulty on the part of the counsellor in working to elicit the reason-for-call following the caller's answer-like response. Importantly, by changing the

format of her interrogative to a YNI, the counsellor restricts the type of response that the caller can provide to a 'yes' or a 'no' response. The counsellor's interrogative is also formatted to receive acceptance of the candidate reason-for-call of discussing management strategies (i.e., it displays a preference for a 'yes' response) as evidenced by the 'are you'-preface.

The caller, though, does not provide a 'yes' or a 'no' response (i.e., "well I've I've guess I've spoken to so many people in the last few weeks about strategy that .hh sometimes I just need to talk", lines 30-31). Here, as in Extract 3 (lines 114-121), by providing a non-conforming response, the caller can be seen to avoid accepting the terms of the counsellor's interrogative and to displace the action being implemented through that interrogative (i.e., talk about management strategies). This displacement is also achieved through the caller's explicit reference, once again, to 'just needing to talk' as his reason-for-calling (line 31). Here, then, rather than aligning with the counsellor's candidate reason-for-call of discussing management strategies, the caller reiterates *his* candidate reason-for-call that focuses on troubles-telling (i.e., talking to someone).

Through his turn-at-talk on lines 30-31 the caller also performs important stake-management work to account for his non-conforming, dispreferred response. This stake-management serves to mitigate the negative valence of his dispreferred action. Specifically, the caller claims to have spoken to "so many people" (line 30) about strategies that he can employ to better manage his situation. In other words, the caller indicates that he has taken measures to discuss management strategies. The employment of the extreme case formulation 'so many' works to portray the caller's efforts as exhaustive. The caller therefore presents himself as not resistant to suggestions about coping strategies in general (i.e., he has spoken to people about this in the past) but just *at this time*. This orientation is further evidenced on line 31 by the caller claiming that 'sometimes' he just needs to talk, the upshot being that this call

is one of those times. Through this stake-management, the caller resists the counsellor's attempts to establish the reason-for-call as one of service provision, but in such a way that he does not undermine the relevance of advice-giving nor his willingness to accept advice in general. The caller's non-conforming response can therefore be seen as less confrontational or adversarial than a straightforward, type-conforming 'no' response.

Here, as in previous examples, the caller's resistance to the counsellor's attempts to establish the reason-for-call can be seen as part of an attempt to maintain the reason-for-calling as one of troubles-telling only. By contrast, the counsellor can be seen to orient to the activities of problem-solving, as well as troubles-telling, as the reason-for-call. The counsellor's attendance to her role as troubles-recipient is evidenced during the 22 minutes of narrative reporting²¹ (transcript not shown), and her attendance to the role of service provider is evidenced by her attempts to establish a reason-for-call focusing on service provision. This example once again clearly demonstrates that the caller and counsellor each has a different, and arguably competing, view as to what the reason-for-call should be.

5.5 Chapter summary

The present chapter has focused on the ways in which callers responded to counsellors' attempts to establish reason-for-call. I showed that callers rarely aligned with counsellors' attempts to elicit the reason-for-call as one of service provision. The only time that callers appeared to collaborate with counsellors' attempts to establish the reason-for-call was following the provision of YNIs. The analysis in the present chapter has therefore provided some evidence that counsellors might be more successful in eliciting a reason-for-call that focuses on problem-solving through the provision of YNIs. However, this interactional pattern requires further investigation due to the low numbers of YNIs in the present corpus. In the Discussion (Chapter 8, Section 8.5), I consider some possible reasons

for why YNIs might be more successful than wh-questions in establishing the reason-for-call following narrative reporting on a trouble.

Callers' resistance to counsellors' attempts to establish the reason-for-call as one of service provision was usually responsive to wh-questions. I identified two types of resistance:

1. Responses that avoided answering the premise of counsellors' questions and instead moved away from their topical agenda, and
2. 'Answer-like' responses: responses that could be seen to answer counsellors' questions but were nonetheless oriented to by counsellors and callers as resistive.

The first type of response was typically designed to address wh-questions that contained candidate reason-for-call accounts of 'doing' something about callers' stated problems. These responses were hearably disjunctive in comparison to the FPP interrogatives to which they were directed, in that they worked to bring about a change in the topic or agenda initiated by counsellors' questions. That is, these responses did not provide candidate reason-for-calls that focused on 'doing' something about callers' stated problems, but rather worked to maintain the reason-for-call as one of troubles-telling. As such, these responses were seen as resistive to counsellors' attempts to establish the reason-for-call as one of service provision.

By contrast to responses that avoided answering counsellors' questions, answer-like responses did not move away from the topical agenda of counsellors' questions. On the surface, then, these responses did not appear resistive. The resistive nature of callers' answer-like responses was arguably not evident at the outset because they were designed to address wh-questions that did not contain candidate reason-for-call accounts. As such, callers were afforded myriad potential reason-for-call accounts as SPP responses and, even if these

accounts did not involve an explicit reference to problem-solving, they could still be seen to address the question-at-hand. The way in which counsellors routinely oriented to answer-like responses, however, demonstrated their orientation to this response-type as resistive and problematic. Specifically, counsellors were seen, routinely, to attempt to transform callers' answer-like responses into reason-for-call accounts focusing on service provision. In doing so, counsellors demonstrated an orientation to callers' answer-like responses as not working to establish the reason-for-call in this way. In turn, callers routinely displayed resistance to counsellors' attempts to transform their stated reasons-for-calling into one of service provision. This resistance arguably demonstrated callers' orientation to their reasons-for-calling as constituting one of troubles-telling only.

The present chapter has therefore explicated one type of interactional difficulty routinely associated with talk on a trouble in this institutional context – establishing a reason-for-call that is in line with *MensLine's* institution-specific goal of service provision. This interactional difficulty provides evidence of an interactional pattern regarding a difference in orientation between caller and counsellor to the purpose of the call taking place between them. Specifically, whereas callers appeared, routinely, to orient to troubles-telling as their sole reason-for-calling the helpline, counsellors appeared to be orienting to the relevance of the helpline's institutional aims of service provision in conjunction with troubles-receipting. This interactional pattern surrounding a difference in orientation can be seen to challenge the stereotype that men display a preference for solution-focused outcomes in their interactions with counselling and other health professionals. In the next two analytic chapters, I will show further evidence of interactional patterns in the *MensLine* corpus that work to challenge this stereotype by focusing on the types of interactional difficulties that were routinely associated with callers' third-party complaints.

Chapter 6

The interactional trouble of caller-complaints in an institutional environment of solution-focused counselling

6.1 Introduction

The first analytic chapter of this thesis (Chapter 3) argued that, given counsellors' opening turns do not contain standard institutional requests (e.g., "how can I help you?"), the onus is on callers to initiate a first topic for talk. As outlined in Chapter 3, the most common way in which callers initiate a first topic for talk is through narrative reporting on a trouble. Chapters 4 and 5 demonstrated how these narrative reports routinely become resources of interactional trouble for counsellors in terms of establishing callers' reasons-for-calling the helpline. In the present chapter, I focus on another interactional difficulty routinely associated with narrative reporting on a trouble in this specific institutional context (relationship counselling for men): complaints against non-present third-parties (e.g., a wife or ex-wife).

Similar to the previous chapters on establishing the reason-for-call, here I examine another sequence of interaction – this time involving complaints – where a difference in orientation can be seen to manifest between caller and counsellor. Specifically, in these sequences of interaction, callers appear to orient to the relevance of affiliation in response to their complaints, whereas counsellors routinely withhold the production of such affiliative responses. I argue that one possible reason why counsellors withhold affiliation is so as to maintain the relevance of problem-solving as the prime activity of the interaction, and their key role as service provider within it. An interactional difficulty associated with the provision of dispreferred responses from counsellors, though, is that it routinely leads to expansion of

the complaint sequence. This chapter again shows how interactional difficulties are routinely associated with talk on a trouble in this specific institutional context because (1) counsellors are working to maintain the relevance of their role as service provider, and (2) service provision is not the reason that the majority of callers report in their accounts of why they have contacted the helpline.

I begin the present chapter by providing an overview of the activity of complaining in the CA literature, focusing specifically on the types of responses (1) that complaints make relevant, (2) that are considered preferred, and (3) that are typically provided in mundane interactions. I then move to examine complaint sequences in the present corpus. The aim is to demonstrate how the provision of dispreferred responses by counsellors works, potentially, to circumvent one type of interactional difficulty – affiliating with caller complaints – whilst simultaneously creating another difficulty in terms of sequence-closure. The next analytic chapter (Chapter 7) will examine one routine way in which counsellors attempt to shut down these complaint sequences, which can again lead to interactional difficulty or disfluency.

6.2 Complaints

In most counselling and therapeutic settings, problem formulations or troubles-tellings typically involve an orientation on the part of the speaker to his/her moral stance towards the problem being reported on. As Kurri and Wahlstrom (2005) argued, “problem formulations in therapy are not neutral” (p. 352). In the specific context of couples’ therapy, they noted that “negotiations on the question ‘what is the problem’ will eventually turn towards the question ‘who is responsible for solving it’” (p. 352). When speakers work to apportion blame in the telling of a trouble, as well as placing responsibility for resolution of that trouble on to others, they simultaneously engage in moral work. That is, they provide “a basis for evaluating the “rightness” or “wrongness” of whatever is being reported on” (Drew, 1998, p. 295).

A similar observation to that made by Kurri and Wahlstrom (2005) can be applied to the present data: in the *MensLine* corpus, callers' tellings are not neutral descriptions of an event or the actions of a third-party. Specifically, callers' problem-descriptions or troubles-tellings are routinely formulated as complaints against third-parties (typically, as this is a relationship helpline, a caller's wife, ex-wife, or ex-partner). These complaints take the form of descriptions that provide an account of the egregiousness of a third-party's conduct. As with complaint sequences in everyday settings, complaints in the *MensLine* corpus typically constitute "morally implicative stories" (Edwards, 2005, p. 8) whereby the actions of a complained-about party are worked up as transgressions of the "normative standards of conduct" (Drew, 1998, p. 297). These transgressions are typically depicted as *deliberate* actions on the part of the complained-about party. That is, the complained-about party is typically depicted as at-fault for the event or incident that the caller is reporting on. Complaint sequences in the *MensLine* corpus therefore contain an element of blame whereby a caller works not only to allocate responsibility for the trouble or problem being reported on, but also for *resolution* of that trouble, to the complained-about party.

Schegloff (2007) argued that, in everyday settings, complaint sequences make relevant a number of possible second pair part (SPP) responses including agreeing, disagreeing/rejecting, offering a remedy, co-complaining, counter-complaining, and defending. Schegloff (2007) argued that not all possible responses to complaints will be relevant on any particular occasion and for different complainant/recipient combinations. For instance, in two-way interaction where the recipient of the complaint is also the complained-about party, counter-complaining or defending would be a legitimate next move to the speaker's complaint. By contrast, in two-way interaction in which the complaint-recipient is *not* the complained-about party, as in calls to *MensLine*, counter-complaining and defending would not be considered relevant SPP responses. In these instances, the relevant responses to

a speaker's complaint would include agreeing, disagreeing/rejecting, offering a remedy, and affiliating.

The CA literature examining complaints in mundane interactions has typically argued that, in the case of complaints against non-present third-parties (hereafter third-party complaints), the preferred response from the complaint-recipient(s) is affiliation (Stivers, 2008; Traverso, 2009). This affiliation typically involves some sort of recognition on the part of the complaint-recipient(s) that the complaint-teller's negative feelings are warranted (Traverso, 2009). That is, that the situation, object, person or event being complained about constitutes a legitimate complainable. Drew (1998) noted that this affiliation is routinely oriented to a speaker's report on his/her reaction to a transgression (i.e., a speaker's description of how the transgression made him/her 'feel'). Through a display of affiliation in this local interactional environment, complaint-recipients typically work to mirror the indignation expressed by the complainer. Affiliation is therefore considered the preferred response to third-party complaints in that it works to align with the stance exhibited in the prior speaker's turn, thereby furthering, rather than hindering, the action of complaining (see Chapter 2, Section 2.5.5, for more on preference organisation).

Although affiliation is routinely present in mundane interactions, in the institutional environment under consideration here – calls to a men's counselling helpline – there was a noticeable difference in terms of the sequential organisation of responses to caller complaints: the routine *absence* of affiliation from counsellors. That is, in response to caller complaints, *MensLine* counsellors can be seen, routinely, to avoid engaging in any overt displays of affiliation (i.e., they do not appear to adopt the same stance as that exhibited by callers)²². Instead, when callers produce tellings that focus on complaining, blaming, and providing unfavourable accounts of another's behaviour, counsellors engage in a range of dispreferred responses that include: silences at transition-relevance places (TRPs), minimal

acknowledgments, interrogatives that provide a FPP with different sequence trajectory, and disagreement.

A question of analytic interest is why this interactional pattern is evident in the *MensLine* corpus. One possible reason concerns the interactional consequences of displaying affiliation with a complaint in an institutional environment that focuses on service provision. As stated previously, as well as allocating responsibility for callers' relationship difficulties with third-parties, callers' complaints can also be seen to allocate responsibility for *resolution* of those relationship difficulties with those same third-parties. That is, through a complaint, a third-party is typically depicted as at-fault and, by association, as responsible for solving the problem. By displaying a similar stance as that exhibited by callers (i.e., by affiliating), counsellors would be displaying a similar orientation to that third-party's behaviour as complaint- and blame-worthy. In this way, counsellors could be seen to align with a caller's description of the *cause* of his problem as residing with someone else, and someone with whom the counsellor is not currently speaking, arguably placing the counsellor in a difficult position to broach the topic of advice-giving. As such, the routine provision of dispreferred responses from counsellors can be seen as part of an attempt, arguably, to attend to the relevance of the role of service provider. This does not mean that they are adopting this role in these sequences of interaction – indeed, I show that this is not the case – but that they may be maintaining its relevance for introducing at a later point in the interaction.

A similar pattern of responses to those provided by *MensLine* counsellors in response to caller complaints was noted by Ruusuvuori (2005) in the context of Finnish homeopathic and general practice consultations. Specifically, Ruusuvuori argued that the most common practitioner responses to patients' troubles-tellings included minimal acknowledgments, silences, and/or a continuation of the task related activity at hand, such as interviewing the patient. These responses were seen to demonstrate practitioners' orientation to the importance

of solving, or finding a remedy to, patients' problems as the main activity or focus of the interaction. In other words, avoiding a display of affiliation with patients' troubles-tellings (i.e., not acknowledging the affective displays routinely evident in these tellings) was seen to be one routine way in which practitioners worked to maintain the relevance of problem-solving in sequences of interaction. It is important to point out that although a similar pattern to that identified by Ruusuvuori (2005) appears to be evident in the *MensLine* corpus – that is, an absence of affiliation can be seen as one way in which counsellors attend to the relevance of service provision – because *MensLine* counsellors did not offer affiliation in complaint sequences, there was no basis of comparison for how interactions might ensue following such affiliation. As such, the extent to which a display of affiliation on the part of counsellors might hinder the successful accomplishment of service provision/problem-solving is a matter that requires further empirical validation.

My main focus in this chapter, therefore, is on the interactional consequences that arise from the routine provision of dispreferred responses by counsellors. It was shown in Chapter 2 (Section 2.5.4) that dispreferred responses are typically sequence-expansion relevant (i.e., they work to engender post-expansion talk). This expansion routinely occurs when a speaker works to secure some sort of displayed agreement from the recipient in an attempt to reconcile the misalignment that is created through the provision of a dispreferred response (Liddicoat, 2009; Schegloff, 2007). Unlike preferred responses, then, dispreferred responses do not constitute a readily available resource for sequence-closure. A similar pattern regarding sequence-expansion is evident in the *MensLine* corpus. Following counsellors' dispreferred responses, callers routinely work to elicit the preferred response of affiliation by: (1) appealing for uptake, (2) providing a subsequent FPP complaint, or (3) building on their prior complaints incrementally. The complaint sequence in which callers

work to elicit preferred responses following counsellors' dispreferred responses is outlined schematically as follows:

1. FPP complaint
2. Dispreferred SPP response
 - a. Silence
 - b. Minimal acknowledgment
 - c. Interrogative
 - d. Disagreement
3. Attempt to elicit the preferred response
 - a. FPP complaint
 - b. Increment to complaint produced at Step 1
 - c. Appeal for uptake

Following Step 3 in the sequence above, if a counsellor provides another dispreferred response, the caller typically provides another complaint (i.e., the caller reverts to Step 2). If the counsellor once again provides a dispreferred response to *this* complaint, then the caller once again reverts to Step 2. In other words, following the provision of dispreferred responses, callers continually work to elicit the affiliation that is missing. As a result, the complaint sequence is continually recycled, creating an interactional problem for counsellors in terms of sequence-closure (i.e., transitioning out of the complaint sequence). In the *MensLine* corpus, then, although the provision of dispreferred responses arguably works to circumvent one type of interactional problem that might undermine adherence to a solution-focused model of counselling (i.e., affiliating with a complaint), another problem is inevitably created.

The analysis below is structured around three main examples that will be analysed in detail for how (1) callers' complaints make relevant a display of affiliation from counsellors, (2) counsellors work to avoid providing such responses, and (3) callers work subsequently to elicit the preferred response. Following analysis of these extracts, I will provide two brief examples that further illustrate the interactional difficulties associated with complaints in this institutional context. Through an examination of these complaint sequences, the present chapter provides further evidence of an interactional asymmetry between callers and counsellors.

6.3 Complaint sequences in the *MensLine* corpus

Extract 1, below, is an example from the data set in which the caller's telling consists of a complaint against his wife. The complaint follows the general three-part structure outlined above, that is:

1. FPP complaint
2. Dispreferred SPP response
3. Attempt to elicit the preferred response

Following the call opening sequence (lines 1-6), the caller commences his telling on line 8.

1. Call 88:

- 1 CO: h:ello MensLine Austra:lia David speaking.
2 CA: who've I got?
3 CO: yeah my name is David
4 (1.1)
5 CA: oh yea:h? how you doin?

6 CO: yeah good thank you
7 (1.7)

8 CA: yeah mate yeah I (.) I:=u:m m:: (2.2) where do I start ↑A::H (0.8)
9 >havin' a bit=of=ah< having a really hard time there brother me (.) wife
10 has u::m (1.7) taken up with another bloke?

11 CO: mhuh
(51 seconds of talk omitted where CA informs CO that his wife wants him
to move out of the house and that he recently moved interstate))

12 CA: .hh but she started having an affair with a bloke on on the phone?

13 CO: yeah?

14 CA: on the internet?

15 CO: y:es.

16 CA: and she built it u::p built it up and it went on for months right like
17 tha:t?
18 (1.0)
19 anyway last week she went overseas to see him and she spent the
20 weekend with him.
21 (1.8)
22 not last wee- >weekend before last<.
23 (2.1)
24 she went to ((location)) and spent the weekend with him in an
25 expensive hotel 'n: had sex with him and everything y'know she came
26 back and told me about it
27 (1.9)

28 CO: .hh so when she was going where did she tell you she was going

29 CA: she said she was going tuh see: him

30 CO: o:h right so she was quite open about it

31 CA: Y:UP.
32 (1.7)
33 that's what hurts the most.
34 (0.7)

35 .h it's like she's just gone (1.1) you're a piece of shi:t, (0.7) and I
36 don't care what i- i- if I hurt your feelings I just don't care .h
37 (2.4)
38 A:::H tell ya what mate
39 CO: mm::
40 CA: I mean this is a woman I lived with for twenty two years my friend we
41 were married for seventeen

Before examining the caller's complaint in detail, I will first highlight some of the interactional difficulties evident in the opening sequence of the call that are arguably occasioned by the structure of the counsellor's opening turn. As is consistent with the general pattern identified in Chapter 3, the counsellor's opening turn (line 1) consists of a greeting, institutional and personal identification, but no institutional service request. The caller initiates a "how-are-you" enquiry on line 5 and, although it is responded to by the counsellor (line 6), the enquiry is not reciprocated. Following the counsellor's response, a substantial gap of 1.7 seconds ensues (line 7). In this example, then, as in the majority of calls in the corpus, no interactional warrant has been provided for the caller to initiate a first topic for talk. As such, it is up to the caller to decide what comes next, and difficulty is displayed in his attempts to do so. This difficulty is evidenced also by the substantial pauses as well as by his explicit claim on line 8: "where do I start".

The caller's subsequent narrative report on a trouble (beginning line 9) provides an account of his wife's affair which has led to their present relationship difficulties. In the following analysis of this transcript I focus on four features of this sequence including: (1) *how* the caller's complaint about his wife is built up (i.e., how the caller works to position his wife's behaviour as blameworthy and morally reprehensible), (2) the *types* of response that the caller's complaint makes relevant, (3) *how* the counsellor responds to the caller's complaint (i.e., how he avoids engaging in any value-laden judgements of the caller's wife),

and (4) *how* the caller, following the provision of dispreferred responses from the counsellor, works to elicit the preferred response of affiliation.

The caller's narrative report on his trouble begins on lines 9-10. This turn-at-talk constitutes a pre-telling that provides an assessment of the caller's upcoming story (see Chapter 4, Section 4.3, for a more in-depth discussion of pre-tellings), and also performs important blaming work. That is, rather than informing the counsellor that his marriage has ended (which might be considered a mutual decision), the caller informs the counsellor that his wife as "taken up with another bloke" (line 10). In doing so, the caller minimises his agency in the breakup of the relationship and implicitly allocates responsibility for his present relationship difficulties with his wife.

On line 18, the counsellor is provided an opportunity to respond to the caller's account of his wife's affair, however, no response is forthcoming and a substantial gap of one second ensues. Although the caller's turn-at-talk on lines 16-17 arguably makes relevant a response from the counsellor (i.e., the caller's turn is *semantically* complete and so provides a TRP), the caller's turn does not appear to constitute the climax or end-point of his story, as evidenced by the turn-final slight rise in intonation (denoted by the combination of an underscore and colon. See Appendix C for more on this transcription notation). The fact that the caller's turn-at-talk is prosodically incomplete could account for the counsellor's lack of uptake on line 18. The caller's turn, though, does provide a morally-implicative account of his wife's behaviour in that this behaviour – having an affair – is not consistent with the category of 'wife'. It is therefore possible that some affiliative uptake could have been provided in response to this account.

The caller's subsequent account of his wife's behaviour on lines 19-20 arguably makes relevant from the counsellor a SPP that provides some sort of affiliation. This is evidenced in two ways. First, the design of the caller's turn indicates that a response is

relevant at this point. That is, the caller's turn is semantically complete and produced with turn-final *falling* intonation that signals the prosodic completion of his turn-at-talk²³ (Szczepek Reed, 2004). Second, the caller's turn-at-talk provides an important moral upshot that unpacks the gloss of 'affair' provided earlier on line 12. Specifically, the caller's wife is depicted as breaching the "normative standards of conduct" (Drew, 1998, p. 297) associated with the category of wife because this category, typically, does not include behaviours such as going away for a weekend with another man. By providing an account of his wife's engagement in this activity, the caller can be seen to comment upon the reprehensibility of her conduct (i.e., the caller can be seen to be 'doing complaining'). Following this turn-at-talk, then, it is plausible for the caller to expect some sort of display of affiliation or, at the very least, some sort of news receipt from the counsellor.

The counsellor, though, does not respond following this turn-at-talk, and a substantial gap ensues on line 21. This gap arguably foreshadows a dispreferred response, such as a lack of affiliation with the caller's complaint against his wife's behaviour (Liddicoat, 2009; Schegloff, 2007). That is, if the counsellor were to provide the preferred response of affiliation, that response would be produced immediately and with no break in contiguity with the FPP (the caller's complaint). The fact that the counsellor does not immediately produce a response indicates that a preferred response is not likely to be forthcoming at this point. Importantly, silence at this juncture enables the counsellor to *foreshadow* a dispreferred response, but to avoid directly providing that response (i.e., to avoid any overt display of disagreement or lack of affiliation with the caller).

Following the substantial gap on line 21, the caller self-selects as next speaker by initiating repair (line 22), and in doing so turns the inter-turn gap on line 21 into an *intra*-turn pause. The caller's repair-initiator appears to address the counsellor's prior lack of uptake by providing a subsequent TRP for the counsellor to respond²⁴. The counsellor's lack of uptake

on line 21 can therefore be seen to engender sequence-expansion. Despite the caller's attempt to elicit the preferred response, again, such a response is not forthcoming and another substantial gap ensues (line 23). Following the gap on line 23, the caller again works to provide another TRP for the counsellor to respond. Specifically, the caller recycles his prior turn on lines 19-20 ("anyway last week she went overseas to see him and she spent the weekend with him.") and builds upon it: "she went to ((location)) and spent the weekend with him in an expensive hotel 'n: had sex with him and everything y'know she came back and told me about it" (lines 24-26). In doing so, the caller demonstrates his orientation to his prior turns-at-talk on lines 19-20 and 22 as making relevant a response from the counsellor. The lack of uptake from the counsellor (i.e., the provision of a dispreferred response), this time on line 23, therefore works, once again, to engender post-expansion work from the caller.

Schegloff (2007) argued that when there is interactional evidence of trouble following a FPP, such as a long transition space that could signal upcoming disagreement, speakers can revise their FPP in such a way that the prior dispreferred response (e.g., disagreement) becomes the preferred response. On lines 24-26, the caller appears to do the opposite. That is, rather than altering his turn-at-talk from lines 19-20 and 22 so that the lack of affiliation foreshadowed by the gaps on lines 21 and 23 becomes the preferred response (e.g., by minimising or downplaying his complaint), the caller *upgrades* his complaint so that affiliation continues to be the preferred response. The caller works to upgrade the action implemented in his prior turn-at-talk – complaining – by working to justify that complaint (i.e., by portraying his wife's behaviour as a legitimate complainable). There are several ways in which the caller upgrades his complaint in order to elicit the preferred response of affiliation.

First, the caller provides a description of the hotel at which his wife stayed: 'expensive' (line 25). Through this descriptor, the wife's behaviour is depicted as

conspicuously bad not just because she is having an affair but because of *how* she conducts the affair – in an expensive hotel. Second, the caller unpacks his prior gloss ‘she spent the weekend with him’ (lines 19-20) to “spent the weekend with him in an expensive hotel ‘n: had sex with him and everything” (lines 24-25). By unpacking this gloss, the caller works to undermine potential *counter*-interpretations of his wife’s conduct such as that she simply stayed in the same hotel as a man who is not her husband. The extreme case formulation ‘everything’ (line 25) similarly works to defend against possible milder interpretations of the wife’s behaviour, and serves to legitimise the caller’s complaint about the egregiousness of her conduct (Pomerantz, 1986). Once again, then, the caller can be seen to engage in important moral work by positioning his wife’s behaviour as a transgression of the normative standards of conduct for someone belonging to the category of ‘wife’.

Although the counsellor responds to the caller’s upgraded description on lines 24-26, he does not provide affiliation. Instead, after a substantial gap (line 27), the caller provides an interrogative that sequentially deletes the preferred response (line 28). Although the counsellor’s interrogative is *topically*-aligned (i.e., it works to elicit details about the caller’s story) it does not display alignment with the stance exhibited by the speaker. In this sense, the caller’s interrogative can be seen to dis-attend to the caller’s complaint. Similarly, although the counsellor’s minimal post-expansion on line 30 provides an assessment of the wife’s behaviour (“o:h right so she was quite open about it”), this assessment is not value-laden. That is, the counsellor does not appear to comment on the *reprehensibility* of the wife’s behaviour as the caller has been doing. Instead, this assessment works to convey the acquisition of news (as evidenced by the turn-initial change of state marker) and offers what is arguably a milder interpretation of the wife’s actions. Through this turn-at-talk the counsellor can therefore be seen, once again, to dis-attend to the caller’s complaint.

Although the caller provides third position agreement with the counsellor's assessment (line 31), which could be taken as evidence of the caller's orientation to this assessment as constituting some sort of displayed affiliation, the counsellor's assessment does not work to shut down the complaint sequence. Rather, the counsellor's assessment engenders substantial post-expansion talk from the caller who works, once again, to provide a complaint regarding his wife's behaviour (lines 35-36). The production of this complaint provides further evidence that the caller is orienting to the counsellor's assessment on line 30 as a dispreferred rather than a preferred response. Prior to the production of this complaint the caller also provides a number of TRPs for the counsellor to provide a substantive turn-at-talk (e.g., lines 32 and 34) but these responses are not forthcoming.

The caller extends his complaint on lines 35-36 by engaging in reported speech. The type of reported speech provided here is not *direct* reported speech (i.e., a repetition of what his wife had said at some earlier point in time. See Clift, 2006; Holt, 1996; 2000, for a discussion on direct reported speech). Rather, the caller's reported speech appears to take the form of *hypothetical* active voicing (see Simmons & LeCouteur, 2011, for a discussion of hypothetical active voicing in the context of Cognitive Behavioural Therapy sessions whereby counsellors modelled talk that clients could employ in future conversations). Through this hypothetical active voicing, the caller adopts the speaking position of his wife in order to produce a potential self-speech or inner dialogue. This shift in footing is marked out through “.h it's like she's just gone” (line 35), which makes the ‘you're’ on line 35 recognisable as a reference to the caller and the ‘I’ on lines 35 and 36 a reference to the caller's wife.

The caller's use of hypothetical active voicing works here to provide a dispositional account of his wife's behaviour. That is, rather than excusing her actions, the caller's hypothetical active voicing works to provide evidence for the veracity of his complaints

about his wife's behaviour, and to contribute further to his account of the reprehensibility of her conduct. Through hypothetical active voicing, the caller also performs important blaming work. That is, the caller's wife is depicted as acting callously and with little regard for him – actions that resulted in the present difficulties in their marriage.

Importantly, the caller's hypothetical reported speech provides an account of his wife's actions as complaint-worthy, thereby making relevant a response from the counsellor that displays some sort of affiliation (i.e., a response that exhibits a similar stance as the caller in orienting to the wife's behaviour as reprehensible). The substantial gap that ensues on line 37 is again evidence that this response is not forthcoming. The caller's response cry ("A:::H) and idiomatically formed turn-at-talk ("tell ya what mate") on line 38 work to provide a subsequent TRP for the counsellor to respond (i.e., to provide the relevant SPP) thereby once again extending the complaint sequence. Drew and Holt (1988) argued that idiomatic expressions were commonly used in complaint sequences to portray the egregious behaviour of a complained-about party "at a point where there is some conflict or lack of alignment between complainant and recipient" (p. 398). Similarly, here, the caller's idiomatic expression is employed following a dispreferred response from the counsellor (i.e., in a slot following a lack of alignment).

Drew and Holt (1988) also argued that idiomatic expressions can work to bring about closure of a complaint sequence. This does not happen in the example above. Following the caller's idiomatic expression, the counsellor provides a minimal acknowledgement (line 39), which avoids any value-laden assessment of the caller's wife (i.e., it withholds a display of overt agreement or affiliation) (Drew & Holt, 1998; Stivers, 2008). As such, this minimal acknowledgment can be seen as a dispreferred response. That is, although it allows the caller to maintain the speaking turn, by not displaying affiliation with the caller's accounts of his wife's behaviour, the counsellor declines to align as a complaint-recipient thereby

undermining the caller's action of complaining. The status of the counsellor's minimal acknowledgment as a dispreferred response is further evidenced by the caller's subsequent turn-at-talk on lines 40-41 in which he works, once again, to extend the complaint sequence underway. By responding in this way, the caller demonstrates an orientation to the counsellor's minimal acknowledgment as insufficient evidence of affiliation. As such, the caller works, once again, to elicit this affiliation from the counsellor.


To sum up, in the example above, following the opening sequence of the call, the caller provides a narrative report on a trouble – his wife's affair. In this report, the caller provides a complaint against his wife's behaviour that works up an account of her actions as morally reprehensible (i.e., as transgressing the normative standards of conduct for someone belonging to the category 'wife'). The caller's complaint makes relevant a number of responses from the counsellor with affiliation being the preferred response. The counsellor, though, does not provide this response. This could be because, if the counsellor were to offer affiliation, he could be seen to align with the caller's account of the reprehensibility of his wife's behaviour (i.e., that the wife's behaviour is complaint- and blame-worthy), which could undermine the work that needs to get done (problem-solving). It is arguable, then, that the provision of dispreferred responses to the caller's complaint is one way in which the counsellor orients to the relevance of service provision.

It is important to note that the responses provided by the counsellor in this sequence of interaction do not actually work to take up the role of service provider. That is, the counsellor is not providing advice, such as suggestions or recommendations, in response to the caller's complaint. By reserving such responses, and instead providing minimal acknowledgments, the counsellor can be seen to enact one of the helpline's basic tenets of providing callers the opportunity to talk on a trouble. However, by declining to affiliate with the caller's complaint, the counsellor can also be seen to orient to the relevance of service

provision for introducing at a later point in the interaction. Providing minimal acknowledgments and declining to align as a complaint-recipient can therefore be seen as one way in which the counsellor skilfully manages the competing relevancies of his dual institutional role of troubles-recipient and service provider.

Despite the counsellor's attempt to attend to these competing relevancies, what is evident in the example above is that the caller's complaint is oriented towards the purpose of receiving affiliation, not advice. In the previous chapter, I demonstrated that callers routinely resisted counsellors' attempts to establish the reason-for-call as one of service provision, which was evidence of a misalignment or asymmetry between caller and counsellor to the purpose of the interaction taking place between them. Here, in another sequence of interaction, the same asymmetry appears to be occurring. That is, the caller has called to talk about a trouble, a trouble that he deems complaint-worthy, whereas the counsellor is withholding affiliative responses in an attempt, arguably, to orient to the relevance of service provision.

Although the provision of dispreferred responses arguably forms part of an attempt to overcome one type of interactional difficulty that might be associated with complaints in this institutional context, another interactional difficulty is inevitably created: expansion of the complaint sequence. This expansion or recycling of the complaint sequence can be outlined schematically as follows:

1. FPP complaint
 2. Dispreferred SPP response
 3. Attempt to elicit the preferred response
- 

The caller's telling therefore provides few, if any, resources for the counsellor to move out of troubles-talk and move into problem-solving. Indeed, an attempt to initiate problem-solving in response to the caller's complaint might not only be treated as inappropriately positioned within the larger sequence of action (i.e., as an inappropriate response to troubles-talk), but as constituting a blatant disregard for the caller's expressed feelings. One routine way in which counsellors attempt to circumvent this interactional difficulty (i.e., to initiate problem-solving with no prior interactional warrant) will be discussed in Chapter 7.

Before moving to this analysis, I provide another example of a caller's narrative report that demonstrates the robustness of the sequential pattern of callers' tellings identified above. Specifically, the caller's telling constitutes a complaint against a third-party (his wife). Like Extract 1, in Extract 2, below, the counsellor does not engage in any value-laden judgements of the caller's wife, and instead provides a number of dispreferred responses at TRPs. Following the provision of these dispreferred responses, the caller works to elicit the preferred, affiliative response from the counsellor thereby extending the complaint sequence. The caller begins his telling on line 6.

2. Call 128:

- 1 CO: h:ello MensLine Australia David speaki:ng
2 CA: DAVID?
3 CO: .h yeah David
4 CA: how are you
5 CO: yeah good thank you
6 CA: .hh u:m uh just um (1.2) haven't rung for a long ti:me, (0.2) u:m
7 .hh things have been going (.) good .h[h I just u:m (0.8) a::h it's
8 CO: [yes?
9 CA: hard to explain um (0.5) .hh (1.4) .hh I just um:: (1.3) A:H=HH god
10 s'hard=so hard tuh .hhh (1.1) get off my chest what I need to get

11 off my chest um .h (0.5) I split up with my ex:: s'been about nine
12 months now?

13 CO: mhuh

14 CA: .h an' we've got a two year old daughter. .h invo:lved .h[hh

15 CO: [oka[y

16 CA: [y'know

17 CO: y[ea:h

18 CA: [a:nd I share custody with with her?

19 CO: yes

20 CA: .HHH HH an' for the past HH (0.6) two months .hh (0.7) (or) when I
21 left the house I left the do:g, h the cat y'know (0.4) all the pets
22 everything

23 CO: yeh

24 CA: an' moved out the flat. (1.0) me ex (1.0) basically: (1.1) forgot
25 about (0.2) the feedin' the cat 'n the dog .hh an' for the last hh
26 three or four weeks .h the n:eighbours h somehow got my phone
27 number; (1.1) .h an' be ri:ngin' me an' saying hey look ya dogs:
28 (0.7) had no food
29 (0.3)
30 for days.
31 (1.2)
32 an' stuff like tha:t .hh an' I questioned my ex about it an' she um
33 (0.6) said o:h no I feed her no it's a lie .hh (0.6) so I looked at
34 me dog an' it was like a greyhound so .hhhh for the last four weeks
35 I been hhh (1.2) workin' full time an' takin' the dog, (0.7) its
36 cost me about six hundred seven hundred dollars to get the dog back,
37 (0.4) from the vet
38 (0.4)
39 cos it was really sick;

40 CO: mm:

41 CA: okay so I had to buy her a special hous:e .hh (0.2) I've got it here
42 right now on the bed with me=and um (1.5) ↑yeah I'm just I'm just
43 pissed man because I'm .h <doin' everything> (.) still
44 (1.0)
45 y'know what I mean?

46 CO: yeah

47 CA: I'm not in a relationship (0.2) sh- sh- she's got the house .h
48 surely she can feed a damn dog .hhh but she ↓doesn't.
49 (0.7)
50 .hh an' (1.3) then when I ↑take the dog my little gi:rl rings up an'
51 goes (0.3) um have you got the doggie? I said yeah I got her right
52 here and an' my little girl wants tuh .hhh know more about the
53 doggie h then (0.7) .h MY day h::uh [it's like ghod .hh[h
54 CO: [mm: [huh huh
55 h[uh

56 CA: [y'know? it's just like (0.2) I'm do:in' all this (0.3) for
57 everyone an' .h (0.5) my little girl rings up to say goodnight an'
58 she's I kno:w she's a ba:by an' I I know she loves me but .h it's
59 just so fr:ustrating
60 (1.7)
61 m- y'know what I mean?

62 CO: .h yes but I think ah it's easy to forgive the little gir:l,
63 CA: °y[ea::h°
64 CO: [a:h (0.8) an' a:n' a:n' (0.4) [((unclear))
65 CA: [(I know it's not me) she loves
66 me=I know she loves me my little girl
67 CO: yeah an' you ca[n
68 CA: [she's loves the dog. she just wanted to know where
69 the dog was that's all
70 CO: .h an' I think the fact that y'know a::h she loves the dog, you can
71 use it (0.6) in a positive way .h ah you start it y'know the: like

72 an icebreaker you can u:h i- it becomes a a point of ah (0.4)
73 conversation an' and discussion e:ven i:f she:'s [(directs) she's
74 CA: [yeah
75 CO: not asking you about you [.h ah you can use that as a shared
76 CA: [yeah
77 CO: interest
78 CA: .h well that's right I said I've go- dad had tuh take the doctor to
79 the:: doctor?=the dog to thuh doctor cos she was sick [.hh an'
80 CO: [mhuh
81 CA: daddy's gonna bring her back tomorrow .hh an' she goes oh okay see
82 ya ↑dad talk to ya tomorrow=she (was fine) .h but my ↑ex gets on the
83 phone like oh an' how's the dog goin' like so concer:ned I fhelt
84 like just screa:min' at her .h why the ef didn't you feed her for
85 the la:st six weeks you sick (0.7) bi:tch .h=huh=.h y'know I'm sorry
86 I'm just .h I'm just (0.4) completely (0.2) bamboo:zled why someone
87 would do that to a ↑pet

Here, as in Extract 1, the caller is not provided an interactional warrant to initiate a first topic for talk either by a standard institutional service request (e.g., “how can I help you?”) or via a “how-are-you” enquiry. As such, the onus is on the caller to decide what comes next in the interaction following the completion of the core opening sequences (i.e., the counsellor’s response to the caller’s “how-are-you” enquiry), which likely accounts for his overt claim of difficulty in doing so (lines 7-11). This example therefore further illustrates the interactional difficulties that, potentially, can arise in the opening sequences of calls in the absence of specific institutional requests from counsellors (see Chapter 3, Section 3.4, and Chapter 8, Section 8.5, for further discussion of the potential consequences of the absence of an organisational request in counsellors’ opening turns).

As in my analysis of Extract 1, the aim here is to explicate how the caller’s telling works to make relevant a response of affiliation from the counsellor, and how the counsellor

avoids providing such affiliation. First, the caller performs important moral and blaming work on lines 24-30 by depicting his wife as negligent in forgetting to feed the dog. The emphatic production of 'days' (line 30) arguably works to highlight the reprehensibility of her behaviour (i.e., the caller's wife neglected her duties for a considerable amount of time). The turn-final falling intonation on line 30 indicates that the caller's turn-at-talk has reached completion, creating a TRP for the counsellor to respond to the blaming work done by the caller. A response from the counsellor is not forthcoming, prompting the caller to self-select as next speaker and provide another complaint against his wife on lines 32-37.

Following the completion of this complaint on line 37, again, no response is forthcoming from the counsellor (line 38), which engenders the caller's increment (Schegloff, 2001) on line 39. This increment arguably demonstrates the caller's orientation to the absence of a response from the counsellor on line 38 as implicative of a dispreferred response, and so he works to address this lack of alignment by providing a subsequent TRP for the counsellor to respond (Ford, Fox, & Thompson, 2002). Importantly, this increment does not contribute any additional information to the caller's complaint and so do not work to progress the action of complaining *per se*. As such, the increments can be seen, primarily, as working to elicit a particular response from the counsellor – a display of affiliation. The counsellor responds to this increment but only minimally, thereby withholding overt affiliation. Following this minimal acknowledgment, the caller provides another FPP (lines 41-43) that works, once again, to extend the complaint sequence underway, and which also demonstrates his orientation to the counsellor's minimal acknowledgment as a dispreferred response.

The caller's turn-at-talk on lines 41-43, much like his turn-at-talk on lines 24-30, performs important blaming work. First, the caller informs the counsellor that he 'had to' buy a house for the dog, and, moreover, he describes that house as 'special' (i.e., not just any house but a 'special' house, c.f. the 'expensive hotel' in Extract 1). The mode of obligation

(‘had to’) as well as the descriptor ‘special’ again work to portray the caller as burdened by his wife’s actions. Similarly, the extreme formulation ‘everything’ (line 43) works to emphasise his current imposition. The caller also produces a subjective assessment of his own state: ‘I’m just pissed’ (lines 42-43) which, much like complaint sequences in everyday talk, provides for the counsellor an account of how his wife’s behaviour has made him feel. Together these lexico-semantic resources serve to intensify the caller’s complaint against his wife and further portray her actions as reprehensible.

Importantly, the caller’s turn-at-talk on lines 41-43, particularly the subjective assessment, works to elicit a response from the counsellor. As stated previously, Drew (1998) argued that in everyday complaint sequences, when speakers report on how a transgression made them ‘feel’, complaint-recipients usually respond with reciprocal affiliation. However, there is no uptake following the caller’s complaint on lines 41-43, once again foreshadowing a dispreferred response. Following the substantial gap that ensues on line 44, the caller explicitly appeals for uptake (line 45), thereby demonstrating an orientation to his prior complaint as making relevant a response from the counsellor. Although this appeal works to secure uptake, the counsellor responds only minimally (‘yeah’, line 46). In response to this minimal acknowledgement, the caller works, once again, to extend the complaint sequence by providing another FPP complaint (lines 47-48). Through this complaint, the caller again demonstrates an orientation to the counsellor’s minimal acknowledgment as constituting a dispreferred response (i.e., it is not the type of response that he is working to elicit through his complaint).

The caller’s subsequent complaint – ‘surely she can feed a damn dog’ – again does important moral work in positioning the wife as negligent and blameworthy. Specifically, the use of ‘surely’ (line 48) portrays the wife’s actions as constituting a deliberate act of neglect (i.e., there is no plausible reason for his wife not to have fed the dog). ‘Surely’ also appears to

work as a recognisability marker, providing the counsellor with an assessable item despite the fact that he does not have first-hand knowledge of the complained-about party. As such, 'surely' arguably works to invite a display of affiliation from the counsellor in response to the caller's account of his wife's conduct. Here, then, like Extract 1, rather than modifying the form of his FPP complaint in order to change the foreshadowed dispreferred response (i.e., a lack of affiliation) into the preferred response, the caller upgrades his prior complaint so that affiliation continues to be the preferred response.

After a lack of uptake from the counsellor on line 49, the caller provides a complaint against another third-party – his daughter (line 50). Like the complaints against his wife, this complaint invites a response from the counsellor that displays some sort of affiliation. Also, like the complaint against the caller's wife, no response is forthcoming following this complaint (line 60) thereby foreshadowing a dispreferred response (i.e., a lack of affiliation or potential disagreement with the caller's description of the daughter's behaviour as complaint-worthy). The counsellor's laughter on lines 54-55 could also indicate that he is not treating the complaint as legitimate but dismissing it as minor. Importantly, the caller appears to orient to the silence on line 60 as signalling an upcoming dispreferred response as evidenced by his subsequent appeal for uptake (line 61). Through this uptake marker, the caller once again orients to a SPP to his complaint as conditionally relevant. In the slot made available through the caller's appeal, the counsellor produces the dispreferred response that was foreshadowed on line 60. The counsellor's overt disagreement can be seen to display a lack of alignment with the caller's prior complaint in that it does not exhibit the same stance as that of the caller (i.e., it does not demonstrate an orientation to the daughter's behaviour as a legitimate complainable).

The counsellor's disagreement/lack of affiliation is produced with a turn-initial 'yes' (line 62). By beginning his turn with displayed agreement ('yes') then employing a contrast

marker ('but') to transform the turn into *disagreement*, the counsellor provides what Schegloff (2007) called 'pro forma agreement'. Pro forma agreements, such as 'yeah but...', orient to the relevance of agreement as the preferred response to a prior speaker's turn whilst simultaneously acting as contiguity breaking devices that serve to delay the dispreferred response of disagreement (Liddicoat, 2009; Schegloff, 2007). The counsellor expands on his disagreement turn on lines 70-77 by attempting to rework the caller's complaint. Specifically, the counsellor provides a suggestion for how the caller can interpret his complaint (his daughter's behaviour) positively. Although the caller displays agreement with the counsellor's suggestion (lines 78-82), on line 82, the caller employs the contrast marker 'but' to transform his turn-at-talk from displayed agreement to a subsequent complaint about his wife. The emphatic production of the caller's turn on line 84, as well as the swearing on line 85, serves to intensify the severity of his complaint and works further to portray the wife's behaviour as a legitimate complainable. Here, then, although the counsellor's lack of affiliation is successful in shutting down the complaint sequence concerning the caller's *daughter*, it is not successful in shutting down the complaint sequence against his wife. In other words, the counsellor's dispreferred response again engenders sequence-expansion, making sequence-closure an increasingly difficult task for the counsellor. Importantly, by resuming his complaint, the caller demonstrates that the counsellor's attempt to provide advice and to reformulate his complaint as positive is not the type of response that he is working to elicit.

To sum up, here, the caller is engaged in a complaint against two third-parties, in which he works to elicit affiliation from the counsellor. The counsellor can be seen to avoid engaging in any value-laden judgements of the caller's wife or daughter, and instead produces a number of dispreferred responses. The counsellor likely avoids providing affiliation because it could place him in a difficult position in terms of opening up a problem-

solving frame for the interaction. That is, if the counsellor were to affiliate with the caller's complaint, he could be seen to display an orientation to the wife's behaviour as complaint- and blame-worthy (i.e., that the wife is responsible for the relationship difficulty that the caller is reporting on and, by association, responsible for resolution of that problem). Through the provision of these dispreferred responses, then, the counsellor arguably demonstrates an orientation to the relevance of service provision as a focus for the interaction, at least at some point. Although the provision of dispreferred responses arguably works to circumvent one type of interactional trouble (i.e., aligning with the caller's complaint), it simultaneously creates a *different* type of interactional trouble: transitioning out of the troubles-talk sequence.

Importantly, what this extract shows is that the caller and counsellor can be seen to orient to the purpose of the ensuing interaction in different ways. Specifically, the caller appears to be orienting to the importance of receiving affiliation, not advice, in response to his complaints, whereas the counsellor is avoiding the production of such affiliation. This example therefore provides further evidence of an interactional asymmetry between caller and counsellor. One final extract will be used to illustrate the general patterns regarding callers' complaints in the *MensLine* corpus. After analysing this extract, I will provide two further examples but will not analyse them in detail. They are presented to illustrate the robustness of the patterns examined in the present chapter.

3. Call 1:

- 1 CO: .h hello this is Terry from MensLine Austra:lia hello
- 2 CA: hello:
- 3 CO: how you going
- 4 (0.5)
- 5 CA: not too bad been better=but anyway:
- 6 CO: ↓o:h that's good hhh

7 CA: >heh he[h<

8 CO: [heh heh heh .h

9 (0.8)

10 CA: mm:

11 CO: so how can I help you today.

12 CA: o::h I just have some relationship problems th[at I a::h have a

13 CO: [yes?

14 CA: lot of trouble with? so

15 CO: yes

16 CA: I thought I'd (0.6) .hh >MAYBE TALK TO SOMEONE?<
 ((13.5 seconds of talk omitted where the counsellor informs the caller that he can talk to her))

17 CA: a::h well I've (0.5) I:: live with my partner (0.5) a::h w- it's

18 it's BEEN heh a r(h)ocky sort of relationshi[p I su]ppose

19 CO: [mhm]

20 (0.3)

21 CO: yes=

22 CA: =u::m we live in my house (1.0) and um she's moved out a few times

23 and it looks like it's happening again
 ((61 seconds of talk omitted concerning the caller's difficulties in sleeping and eating as well as his partner's lack of emotional response to the break up))

24 CO: tch.h so:: (0.7) so she's (0.3) made the decision to go;

25 CA: .h well no [I kick]ed her ou:t actually

26 CO: [or] oh [okay]

27 CA: [cos um] (0.4) hh I tried tuh (.) ta:lk to

28 her (0.2) .h and communicate (0.5) and al- she just y↑ells at me

29 all the time n' no matter what I suggest or say or anything

30 CO: mm::

31 CA: ah n' this goes on all the ↑time=an' I just (wear) an' think o:h god

32 okay well shut up John I won't I won't say anything I'll just do

33 what I'm t↑old

34 CO: .hh

35 CA: and that's really not my ch- character

36 CO: no?

37 CA: .hhh A:ND s'like I- (0.5) do that n' then it just comes to a head

38 someti:mes 'n (0.4) I just can't ta:ke it anymore

39 CO: mm:

40 CA: an' I say things that I don't wanna say but it's not really what I

41 want I'm [just really] sorta crying out to her to- to (0.3)

42 CO: [mm:]

43 CA: communic[†]ate with me

44 CO: mm::

45 CA: but ah it comes out all wro:ng h .h

46 (1.0)

47 (.h I) [((unclear)) h

48 CO: [so what's the what what I wonder what the anger's about

49 what's what's happening (0.3) there i[s that something]

50 CA: [well I thi- she's t]en years

51 older than me so I think she kinda puts it over me a lot

Again, here, the counsellor's opening turn (line 1) does not contain a specific institutional service request, which appears to lead to interactional difficulty. First, the caller's opening turn-at-talk (line 2) consists only of a greeting. That is, he does not move to initiate a first topic for talk. Following this greeting, the counsellor initiates a "how-are-you" enquiry (line 3) to which the caller provides a problem-oriented response (i.e., 'been better', line 5). The turn-final component of this response, 'but anyway' (line 5), works as a "lexical marker of topical discontinuity" (Drew, 1997, p. 76) providing for an exit from talk that might be generated through the problem-oriented response. The caller's 'anyway', along with the subsequent laughter (line 7), gap (line 9), and placeholder (line 10), arguably demonstrates his difficulty in initiating a first topic of talk. As such, the counsellor provides a

specific request on line 11. Such requests are rare in the data under analysis but, when produced, they typically work to address the difficulty that callers are displaying in articulating their tellings. Following his indication that he has called the helpline to talk to someone (see Chapter 3, Section 3.4, for similar instances of such preparatory accounts), the caller moves to produce a narrative report on his trouble.

As in Extracts 1 and 2, the caller begins his telling by performing important blaming work (lines 22-23). Here, the caller informs the counsellor that his partner has moved out of their shared home previously and is likely doing so again. The partner is therefore positioned as the instigator of the relationship difficulty that the caller has called to talk about, which works to reduce the caller's agency in the breakup. This blaming work, though, has to be redone following the counsellor's interrogative on line 24, which provides an upshot of the caller's prior turn: that his partner has chosen to leave their shared home. On line 25, the caller responds to the counsellor's interrogative by indicating that, rather than the partner making the decision to leave, the caller had evicted his partner from their shared home ('I kicked her out actually'). This is a markedly different account of the caller's relationship difficulty than was provided on lines 22-23. On lines 27-29, the caller works to *re-allocate* blame for the relationship breakdown with his partner. The caller does so by providing a FPP account of his wife's behaviour that justifies his decision to kick his partner out of their shared home.

Specifically, the caller's account on lines 27-29 constitutes a 'script formulation' (Edwards, 1995). According to Edwards (1995), "script formulations are descriptions of actions and events that characterize them as having a recurring, predictable, sequential pattern" (p. 319). Here, the caller works to portray his partner's behaviour – the behaviour that prompted him to kick her out – as routine by employing the extreme case formulations 'all the time', 'no matter', and 'anything' (line 29). These extreme case formulations depict

the partner's behaviour (e.g., her yelling) as a dispositional trait – something that does not alter regardless of what the caller does. The essentialiser 'just' ("she just y↑ells at me", line 28) works further to portray the partner's behaviour as typical rather than as provoked by the caller. The caller's decision to kick his partner out of their shared home can therefore be seen as arising from situational factors; that is, a justifiable response to his partner's dispositional behaviour. The caller's script formulation therefore performs important blaming work to allocate or, more specifically, to *re-allocate* responsibility for the relationship breakdown with the partner.

Importantly, because the caller's script formulation provides an account of the partner's unfavourable behaviour, the caller can be seen to engage in a complaint against this behaviour. This complaint, in turn, makes relevant a response from the counsellor that displays some sort of affiliative evaluation of the wife's conduct. Rather than providing such affiliation, the counsellor provides a minimal acknowledgement ("mm:::", line 30), which allows her to receipt the caller's prior turn-at-talk but to avoid any direct affiliation with that turn. Similar to Extracts 1 and 2, here, the caller orients to the counsellor's minimal acknowledgment as a dispreferred response, as evidenced by his subsequent increment that works to extend the complaint sequence (lines 31-33). This increment further contributes to the caller's script formulation. Specifically, the extreme case formulation 'all the time' (line 31) again works to position the partner's behaviour as routine.

The emphatic production of the extreme case formulation, as evidenced by the stressed production of 'time' and the jump to high pitch, is indicative of heightened emotive involvement (Selting, 1994, 2010). Through the employment of this extreme case formulation, the caller therefore also makes relevant his reaction to his partner's behaviour (i.e., how it makes him feel). The response cry 'oh god' appears to do similar work. Drew (1998) argued that response cries were a routine way for speakers engaged in complaining to

display their reaction to the transgression being reported on. The caller's display of heightened emotive involvement therefore works further to legitimise his complaint (i.e., to position his partner's behaviour as reprehensible and therefore complaint-worthy) and to elicit affiliation from the counsellor.

The counsellor's inbreath on line 34 is a potential indication of upcoming disagreement – as Schegloff (2007) argued, inbreaths are one resource that speakers can rely on in order to delay dispreferred responses. Of course, the inbreath could be indicative merely of an upcoming turn-at-talk. The caller's turn on line 35, though, appears aimed at addressing a potential dispreferred response. That is, the caller's turn-at-talk assumes the slot where the counsellor could have displayed disagreement and provides another TRP for the counsellor to respond. Through this turn-at-talk, the caller engages in important blaming work by once again portraying his behaviour as situationally positioned; as a response to his partner's dispositional behaviour (i.e., “and that's really not my ch- character”, line 35). The counsellor's subsequent continuer on line 36 (i.e., “no?”) again avoids providing the preferred SPP of affiliation and instead invites elaboration from the caller thereby further extending the complaint sequence.

The caller's subsequent turns-at-talk on lines 37-45 further contribute to his script formulation of his partner's behaviour by portraying his actions as out-of-character and as the result of her dispositional nature (e.g., “an' I say things that I don't wanna say but it's not really what I want I'm [just really] sorta crying out to her to- to (0.3) communic[↑]ate with me”, lines 40-43). Importantly, these turns-at-talk are incrementally produced. That is, they work to address the counsellor's prior lack of alignment (i.e., the fact that the counsellor has not provided the preferred response of affiliation), and to mitigate the negative resonance of this lack of alignment, by creating subsequent TRPs for the counsellor to respond and offer affiliation (Ford et al., 2002; Schegloff, 2001).

Following the caller's turn on line 45, a substantial gap of one second ensues on line 46, following which both caller and counsellor attempt to assume the speaking turn. The caller drops out in favour of allowing the counsellor to continue. In this turn-at-talk, the counsellor provides an interrogative (lines 48-49) that avoids the production of the preferred SPP response (affiliation) and provides a FPP with different sequential import (i.e., a FPP that attempts to change the trajectory of the sequence away from complaining). Specifically, the counsellor's interrogative works not to focus on the reprehensibility of the partner's conduct but on, potentially, what may be causing it. In this way, not only does the counsellor avoid making any value-laden judgements about the partner, but she can be seen to orient to the relevance of diagnosis and/or problem-solving.

There is arguably some ambiguity in the counsellor's turn-at-talk on lines 48-49 in terms of *who* is in possession of the anger that she is working to topicalise. The caller, however, orients to the anger as his partner's and in doing so accomplishes important blaming work. That is, the caller's response consists of an account of his partner's behaviour that can again be seen as 'doing complaining' ("she kinda puts it over me a lot", line 51). The counsellor's interrogative on lines 48-49 is therefore not successful in shutting down the complaint sequence but works to engender post-expansion work from the caller thereby demonstrating its nature as a dispreferred response.

Here, then, like Extracts 2 and 3, the provision of dispreferred responses works to extend the complaint sequence underway thereby making it increasingly difficult for the counsellor to transition out of that sequence and on to problem-solving. The next chapter (Chapter 7) focuses on one routine way in which counsellors attempt to transition out of complaint sequences and on to problem-solving. First, I provide two further examples of caller complaints. The extracts below will not be analysed in detail, but are provided to illustrate the general pattern concerning interactional difficulties associated with complaints

in this specific institutional context, and how these difficulties show further evidence of an interactional asymmetry between caller and counsellor.

4. Call 77:

- 1 CO: hello: this is Terry from MensLine Australia good mor:ning.
- 2 CA: .h good mo:rn^hing how are you
- 3 CO: not ba:d how are you doing
- 4 (0.4)
- 5 CA: yea:h no:t too bad thank y[ou:]
- 6 CO: [°mm?°]
- 7 (1.1)
- 8 CO: °(how [can (we)] help you)°
- 9 CA: [a:h]
- 10 (0.3)
- 11 .hh o:h I just wanted to to >talk to somebody actually?<
- 12 CO: y[eah] talk to me?
- 13 CA: [a:h]
- 14 (1.5)
- 15 I'jus: having little issues at ho:::me h and hh a:h we've just got a
- 16 new baby:: (0.2) a:::nd .h a:h my partner's got a coupla o:lder kids
- 17 .h °a a-° a:::nd (1.0) ↑yeah h I jus jus got rea::lly (0.2) I guess
- 18 hurt this morning from th[e (.) upteenth ti:me that uh I feel >like
- 19 CO: [mm:]
- 20 CA: she keeps on ignore=my partner keeps on ignori:ng me?<
- 21 CO: mm?
- 22 (0.5)
- 23 CA: a:::nd then blatantly does it h like in my face (0.5) to go the exact
- 24 o:pposite way, .hh a:nd h I-
- 25 CO: say that [last bit again?
- 26 CA: [(an'-)
- 27 .hh well she'll she'll do something for the the (complete) o:pposite
- 28 to it,

29 (1.3)

30 CO: like for e- I'm not sure what you mean

31 CA: okay well >the the the g- great example I was< one=ah the the her
32 young boy?

33 CO: mm=

34 CA: =a:h doesn't um he's r:eally picky on his food he only only eats
35 like brea:d 'n .hh 'n 'n >stuff like that an'< he's .hh nine years
36 o::ld an's probably got the brain of a three year old y'know he
37 can't rea:d he can't wri:te y'know he's he's just not taking any
38 informa:tion on .hh whereas my background is all about envi:ronment
39 about education about 'en y'know knowledge of plants and materials
40 and >stuff like that an'< .h an' so I I've been encouraging to try
41 an' ea:t.

42 (0.8)

43 and h and as he has been eating different thi:ngs, he he's been
44 getting (y'know) it's been a lot better for him

45 (0.4)

46 CO: mm?

47 CA: (okay) we go to schoo:l this morning they go for we we ride them to
48 school, I went y'know went down to have a bit of fun to ride with
49 'em, .hh a:nd .h a:nd (0.2) I get do:wn there and she takes them
50 straight into a shop .h to go buy them bread ro:lls ay I've ask- I
51 asked her >as before she walked in I said look it's a fruit shop as
52 well get them some fruit come on let's do something nice< .hh a:nd
53 she comes back ou:t, h with bread ro:lls

54 CO: °mm::°

55 CA: an' an' I know that sounds petty but that's just a great exa:mple of
56 it

57 CO: ye::s

58 CA: s:traight in my fa:ce an' I'm li[ke

59 CO: [yea:h

60 (0.7)

61 CA: why did you do that?
62 (0.8)
63 CO: °y[ea:h°
64 CA: [y'know an' it's (0.3) it sorta drives me ↑nuts
65 CO: °mm::°
66 CA: >I'm like an' like I know< that sounds petty but that's just a a g-
67 a simple example of it [.hh]
68 CO: [mm]
69 (0.7)
70 CA: a:nd (0.3) y'know an' then I I I I'm going I guess: (0.4) y'know it
71 it's started steadily getting worse for me when .h she didn't wanna
72 breastfee::d a::nd (0.6) y'know feeding them bottled milk and then I
73 do research into bottled milk and find out >that it's not the best
74 thing on the block< .hh a::nd (1.2) ↑yeah but it r- rea::lly (0.6)
75 upsets me.
76 CO: yea:h how old's the little one? the new baby?
77 (0.6)
78 CA: nine weeks.
79 CO: congratulations
80 (0.5)
81 CA: thank you huh
82 ((24 seconds of talk omitted surrounding caller's new born child and
83 how his partner's children have reacted to the new born))
84 CA: yeah no they love her an' we y'know communicate .hh but y'know I
85 mean I guess a:::h .h >I do a lot of< child education and training
86 an' stuff like that and do different thi:ngs,

Here, again, interactional difficulties are apparent in the opening sequence of the call as evidenced by the substantial gap on line 7, where the caller could have initiated a first topic for talk. The counsellor's prompt (line 8) arguably attempts to deal with this difficulty and elicits the caller's reason-for-call account on line 11 (c.f. the counsellor's prompt in

Extract 3, which is also employed to address the caller's difficulty in initiating a first topic for talk). The caller's subsequent telling (beginning line 15) constitutes a complaint against his wife that invites affiliation from the counsellor (note the subjective assessment on lines 17-18 in which the caller describes his reaction to his partner's behaviour). On line 54, the counsellor is provided the opportunity to offer such a response but no such affiliation is forthcoming. Instead, the counsellor provides a minimal acknowledgement that receipts the information provided by the caller and avoids providing any value-laden judgements of the complained-about party. Following this dispreferred response, the caller works to elicit the preferred response of affiliation by providing an increment to his complaint (lines 55-56), thereby extending the sequence underway.

The counsellor, though, responds only minimally to the caller's increment (line 57) thereby eliciting another increment from the caller on line 58. The caller continues to build on his telling incrementally, or through FPPs, in order to address the counsellor's lack of uptake, until line 76 when the counsellor attempts to open up a different sequence. Specifically, the counsellor provides a FPP with different sequential import to that of complaining – talk about the caller's new-born child. Although the caller collaborates in the production of this sequence (e.g., “yeah no they love her an’ we y’know communicate”, line 84), he then works to shut it down and return to his complaint. The ‘but y’know’ works not only as a marker of topic transition, but demonstrates the caller's orientation to a response to his complaint as conditionally relevant. That is, the caller's ‘y’know’ works explicitly to elicit uptake from the counsellor thereby demonstrating his orientation that a preferred response is yet-to-be-produced. The caller therefore appears to treat the counsellor's interrogative as initiating an insert sequence; a sequence that delays but does not displace the relevance of the forthcoming SPP (i.e., the counsellor's response to the caller's complaint).

In the example above, then, although the provision of dispreferred responses from the counsellor works to avoid any value-laden judgements of a third-party, and to circumvent the interactional difficulties that such responses might create in terms of problem-solving, it also works to *extend* the sequence underway. In this sense, the provision of preferred responses creates a *different* type of interactional difficulty in terms of adherence to a solution-focused model of counselling – how to exit from the complaint sequence and transition into problem-solving. Importantly, the fact that the caller routinely attempts to elicit affiliation from the counsellor, whereas the counsellor repeatedly withholds this affiliation, again demonstrates that the caller and counsellor have different orientations to the purpose of the call taking place between them. That is, whereas the caller appears to be orienting to the relevance of troubles-telling only, the counsellor is arguably orienting to the importance of troubles-telling *and* service provision.

One final example is presented below to illustrate the general pattern relating to the sequence-expansion of complaint sequences and how this sequence of interaction provides evidence of an interactional asymmetry.

5. Call 25:

- 1 CO: .hh hello MensLine Austra:lia David speaking.
2 (1.2)
3 CA: sorry. who is i:t?
4 CO: >yeah< my name is David
5 CA: David
6 CO: ye:s
7 CA: o:h okay it's Joseph here
8 CO: how a:re you Joseph?
9 CA: goo:dhh
10 (1.3)
11 °>.h<° I was just um:: (0.6) going to:: (0.4) mediation tomorro:w.

12 (1.1)

13 CO: o[kay]

14 CA: [for]:=um: (1.6) ↓yea:h (1.5) °just see how that works outh°

15 ((16 minutes of talk omitted where CA informs CO about his divorce.

16 Just prior to this next part of the transcript CA is talking about

17 transporting his children to their various sporting commitments))

18 CA: .h yeah I know but that's: the other thing I'm thinking (0.2) stu:ff

19 it. (0.3) I'm (0.5) y'know w'I mean? we'll sha:re it in future

20 (1.0)

21 instead of me doing everything

22 (0.3)

23 CO: u↓hu::h [(okay)

24 CA: [um HH (0.5) y'know w'I mean? I:'ve done it all

25 (0.7)

26 I've taken her to water polo at six o'clock in the morning.

27 (1.0)

28 y'know w'I mean? I've taken 'em tuh s:occer practice on Wednesday,

29 and y'know netball on Friday an' .h soccer again on (0.2)

30 s:::aturday, and .hhh HH (2.4) >an' I mean< she's done nothing.

31 (2.5)

32 I mean she's not seen <one soccer game> of his, (0.5) in three years

33 (2.1)

34 .hh

35 (0.2)

36 CA: [so

37 CO: [but while but while (0.4) though that takes a lot of your time it

38 can also be: (1.3) a great opportu:nity for you to bond with them

39 (1.4)

40 CA: yea:h=↓yeah

41 (1.2)

42 I know I just (0.5) y'know w'I mean?

43 (0.4)

44 CO: yeah

45 CA: what what is she doing

Here, the caller's telling provides a number of TRPs for the counsellor to respond (e.g., lines 20, 22, 25, 27, 31, and 33). The silences that occur at these TRPs are evidence of an upcoming dispreferred response from the counsellor (i.e., a lack of affiliation) and, as such, engender subsequent complaints from the caller, either in the form of FPPs or increments. These complaints, in turn, work to extend the sequence underway. The dispreferred response that is foreshadowed by the counsellor's lack of uptake is eventually provided on lines 37-38. Here, rather than aligning with the caller's complaint, the counsellor works to position the complaint in a positive light (c.f. Extract 2, lines 70-77). The substantial gap that occurs on line 39 is indicative of a dispreferred response (e.g., disagreement), this time from the *caller* in response to the counsellor's attempt to move away from complaining. The disagreement or lack of alignment that is foreshadowed on line 39 is made explicit on lines 42 and 45 when the caller works to resume his complaint about his ex-wife. The caller's appeal to recognisability (Barnes & Moss, 2007) on line 42 (i.e., "y'know what I mean?") not only works to secure an affiliative response from the counsellor but also demonstrates that the counsellor's turn-at-talk on lines 37-38 was not the type of response being made relevant by the caller's complaint.

Here, then, although the counsellor's dispreferred response on lines 37-38 arguably attempts to move the focus of the interaction away from complaining, this attempt is not collaborated with by the caller. As such, the counsellor's dispreferred response works to *extend* the complaint sequence underway rather than to shut it down. Similar to Extracts 1-4, in Extract 5 above, the complaint sequence undergoes substantial sequence-expansion thereby creating interactional difficulties in terms of shutting down that sequence in favour of

a different topic of talk, namely problem-solving. The next chapter focuses on how counsellors routinely work to circumvent this interactional difficulty.

Importantly, in this example, as with all the examples examined in the present chapter, the sequence of interaction where the caller works to elicit affiliation and where the counsellor works to avoid such affiliation, arguably demonstrates an asymmetry between the caller and counsellor in terms of their respective orientations to the purpose of the call taking place between them. The next chapter on topic transition demonstrates further evidence of this asymmetry by focusing on the ways in which callers routinely resist counsellors' attempts to move away from troubles-talk.

6.4 Chapter summary

The analysis in the present chapter has focused on the structure of callers' complaints by examining (1) *how* these complaints worked to provide descriptions of the reprehensibility of another's behaviour, (2) the *types* of responses that complaints made relevant (i.e., affiliation as the preferred response), (3) *how* counsellors responded to callers' complaints (i.e., how they avoided engaging in any sort of affiliative assessment or evaluation of non-present third-parties), and (4) *how* callers worked to extend the complaint sequence following the routine provision of dispreferred responses.


Callers' tellings in the *MensLine* corpus typically constituted complaints regarding the reprehensibility of another's conduct. These complaints worked to focus the interaction on what had happened, and who was to blame, rather than what *could* happen. That is, what callers could do either to solve their problem or at least better manage it. Although this type of talk (or talk on a trouble more generally) is arguably part and parcel of explaining one's problem to someone who is unfamiliar with it, the interactional difficulty associated with

such complaints in a setting such as *MensLine* is that callers were not telling these stories in order to receive advice: they were working to receive affiliation.

In response to these complaints, counsellors were observed, routinely, to avoid providing the preferred response of affiliation. Instead, counsellors provided a number of dispreferred responses at TRPs including silences, minimal acknowledgements, interrogatives with different sequential import, and disagreement. I argued that counsellors likely provided dispreferred responses because a display of affiliation could potentially undermine the activity of service provision. Specifically, if a counsellor was to provide the preferred response of affiliation then the counsellor would be displaying a similar stance as that exhibited by the caller (i.e., that the third-party was responsible for the problem that the caller had called to talk about), arguably placing the counsellor in a difficult position to broach the topic of advice-giving. By providing dispreferred responses, counsellors could be seen to avoid engaging in any value-laden judgements of third-parties and to maintain the relevance of the provision of solution-focused strategies. However, considering that counsellors did not provide affiliation in complaint sequences and that therefore there was no basis of comparison for how interactions might ensue following such affiliation, this explanation was merely a suggestion based on indicative patterns.

What I focused on in this chapter, then, were the interactional consequences of the routine provision of dispreferred responses by counsellors in response to callers' third-party complaints. I demonstrated that although counsellors' dispreferred responses appeared to be employed in order to circumvent one type of interactional difficulty – affiliating with callers' complaints – they simultaneously created another type of interactional difficulty: these responses worked to engender substantial sequence-expansion. This expansion occurred when, following the provision of dispreferred responses, callers worked to elicit the preferred response of affiliation from counsellors by providing further FPP complaints or by providing

increments to their prior complaints. In response to these subsequent complaints, counsellors again produced dispreferred responses. In turn, these dispreferred responses worked to elicit subsequent complaints from callers. As such, complaint sequences in the *MensLine* corpus were continually recycled, as evidenced by the schematic outline below:

1. FPP complaint
 2. Dispreferred SPP response
 3. Attempt to elicit the preferred response
- 

This recycling created interactional difficulties for counsellors in terms of exiting from the troubles-talk sequence. The analysis in the next chapter demonstrates one routine way in which counsellors attempt to deal with the interactional problem of sequence-closure identified here. That is, how they attempt to shut down a troubles-talk sequence that has undergone substantial sequence-expansion in order to initiate problem-solving as a topic for talk. In this chapter, I focus on the ways in which callers routinely resist these attempts – often by reverting to their complaints – which again demonstrates evidence of an interactional pattern of asymmetry or difference in orientation between caller and counsellor, as well as further demonstrating the problematic nature of complaints – or talk on a trouble, more generally – in the *MensLine* corpus.

Chapter 7

Callers' resistance to counsellors' attempts to transition out of troubles-talk: An interactional 'tug-of-war'

7.1 Introduction

The analysis presented in this thesis has focused on a number of interactional difficulties associated with talk on a trouble in the institutional context of calls to a men's counselling helpline. This final analytic chapter examines another source of interactional difficulty by focusing on one routine way in which *MensLine* counsellors attempt to exit from troubles-telling sequences. Specifically, the analysis focuses on a collection of open-ended, future-oriented interrogatives that enquire into the courses of action that callers can undertake in order to solve, or at least better manage, their relationship difficulties (e.g., "so what do you think you might do?"). These interrogatives are most commonly employed following callers' complaints that have undergone substantial sequence-expansion (see Chapter 6), but can also be employed to shut down tellings that do not focus specifically on complaining, or following counsellors' unsuccessful attempts at establishing the reason-for-call as one of service provision (see Chapter 5).

I have called these interrogatives 'perspective-display interrogatives' (hereafter PDIs) due to the similarities they share with the interrogatives employed in the perspective-display series identified by Maynard (1989, 1991). These interrogatives can be seen as advice-implicative (Butler et al., 2010) in that they work to make problem-solving relevant as a next topic for talk. These interrogatives, though, do not contain advice as did the interrogatives examined by Butler et al (2010) in the context of calls to *Kids Help Line* (see Chapter 1,

Section 1.4, for a more in-depth discussion of these interrogatives). Rather than working to offer recommendations in respect of management and solution-focused strategies, these interrogatives work to elicit such suggestions from *callers* as a means of transitioning out of troubles-talk. By inviting suggestions from callers regarding the implementation of solution-focused strategies, the routine employment of PDIs works to privilege callers' epistemic authority in relation to counsellors', thereby upholding the helpline's basic tenet of avoiding the direct provision of advice. The focus in the present chapter is on the ways in which callers routinely resist counsellors' attempts at topic transition through the employment of PDIs.

In the *MensLine* corpus, callers resist counsellors' attempts at topic transition in two main ways: (1) non-answer responses (i.e., "I don't know"), and (2) resumption of troubles-talk, typically in the form of a complaint. Through this resistance, callers work to undermine counsellors' attempts to open up a service-encounter frame for the interaction and work, instead, to maintain the focus for the interaction as one of troubles-telling. In the face of these resistive responses, counsellors rely on a number of resources to shift the focus of talk towards problem-solving. These techniques include: reissuing their PDIs; the formulation of interrogatives that work to topicalise callers' resistive responses or their prior troubles-tellings as a locus for problem-solving; providing advice; or overtly sanctioning/challenging callers' resistive responses, particularly their complaints.

In these topic transition sequences, what appears to happen is that the caller and counsellor are each working to frame the ongoing interaction in different ways: the caller is working to maintain the focus of the interaction on troubles-telling, whereas the counsellor is attempting to transition out of this troubles-talk and on to problem-solving. However, because both caller and counsellor are attempting to perform these actions *at the same time*, neither is successful in framing the interaction as either a troubles-telling or a service-encounter. Instead, an interactional tug-of-war appears to ensue between the interactants. The term 'tug-

of-war' is not used here to refer to sequences of interaction in which the caller and counsellor continually interrupt or talk over one another, or where the interaction culminates in what might be seen as an argument or conflict. Instead, the term is used to describe an interactional frame-struggle: that is, a sequence of interaction where the caller and counsellor can be seen to work simultaneously to provide a different frame for the ongoing interaction.

Much like the resistance examined in Chapter 5, the sequences of interaction in which this tug-of-war occurs share similarities to the rejection of advice examined by Jefferson and Lee (1992) in the context of mundane interactions. As outlined in Chapters 1 (Section 1.3.2) and 5 (Section 5.4.1), Jefferson and Lee argued that the rejection of advice in mundane settings was often the result of the inappropriate positioning of that advice in response to talk on a trouble. That is, troubles-tellers often rejected advice provided by co-interactant(s) who had, up to that point, been acting as a troubles-recipient. The rejection of this advice was seen to form part of an attempt to maintain the focus of the interaction on troubles-telling. Similarly, in the topic transition sequences examined here, callers appear to resist counsellors' attempts to transition on to problem-solving in order to maintain the interaction as a troubles-telling and their role as a troubles-teller. Unlike the case in Jefferson and Lee's mundane interactions, *MensLine* callers' resistance is not directed to counsellors' advice *per se* but to counsellors' attempts to *transition into* advice-giving.

Importantly, the sequences of interaction where counsellors attempt to transition to problem-solving, and where callers resist these attempts, once again demonstrate a difference in orientation between caller and counsellor in regard to the purpose of the interaction taking place between them. That is, counsellors are working to adopt the role of service provider, whereas callers are undermining these attempts in order to maintain the counsellors' role as that of troubles-recipient. I have examined a similar asymmetry or difference in orientation in different sequential environments in this thesis, including call-opening and complaint

sequences. The present chapter demonstrates another local interactional environment in which such asymmetry is evident: topic transition. Similar to the analyses presented in previous chapters, the present chapter focuses on an interactional difficulty associated with talk on a trouble in this particular helpline environment.

I begin the present chapter by providing an overview of the CA literature on the perspective-display series, as well as on topic transition, as a basis of comparison for the PDIs employed in the data under analysis. I then move to examine the deployment of PDIs in the *MensLine* corpus. I focus specifically on how these interrogatives work to initiate topic transition, and how callers work to resist this transition in order to maintain the focus of the interaction as a troubles-telling. The analysis will be centred on four key examples that demonstrate the interactional practice of a tug-of-war or frame-struggle in the specific environment of topic transition.

7.2 Perspective-display series and stepwise transition to advice

The perspective-display interrogatives examined in the present chapter take their name from the perspective-display series identified by Maynard (1989, 1991). This series is a three-part, question-answer sequence designed to elicit, and take into account, another's perspective prior to the implementation of an action that requires a display of caution on the part of the speaker (e.g., providing an opinion). This three-part sequence is represented schematically as follows:

- 1 An opinion query or 'perspective-display invitation'
- 2 The reply or recipient's opinion
- 3 Asker's subsequent report

In interactions between doctors and parents of children with developmental disabilities, Maynard (1991) demonstrated that doctors routinely employed this three-step perspective-display sequence in order to elicit parents' opinions regarding their children's progress prior to providing a diagnosis. By eliciting parents' opinions prior to providing their own, doctors were able to create an alignment between their diagnosis and parents' perceptions of their children's abilities thereby minimising potential instances of disagreement.

Although the perspective-display series was not originally developed to describe the provision of advice, the employment of similar 'perspective-display invitations' as identified by Maynard (1989, 1991) has been examined in a number of institutional contexts including educational counselling and mediation. In these contexts, the sequences of interactions in which these perspective-display invitations are employed are typically viewed as a hybrid between the perspective-display series and the stepwise entry to advice identified by Heritage and Sefi (1992). In the context of interactions between health visitors and first-time mothers, Heritage and Sefi showed how health visitors, prior to the provision of advice, first worked to make relevant a problem that required the health visitors' expertise. In its most elaborate sequential form this stepwise entry involved five turns-at-talk:

- 1 HV: Initial enquiry
- 2 M: Problem indicative response
- 3 HV: Focusing enquiry into the problem
- 4 M: Responsive detailing
- 5 HV: Advice-giving

According to Heritage and Sefi (1992), by providing an initial enquiry at Step 1 (e.g., "And you feel- (0.3) you're alright ba:thing (.) her?"', p. 379), health visitors allowed a problem and

its subsequent solution to “emerge as the joint construction of the participants” (p. 380). That is, by enquiring into a mother’s typical habits or behaviours, a health visitor was able to establish a potential problem in those behaviours and structure her subsequent advice to fit that problem. By positioning their advice as responsive to problems identified by mothers, health visitors worked to minimise resistance to that advice, although such resistance routinely occurred.

In the context of career-guidance counselling sessions in a Finnish adult education setting, Vehviläinen (2001, 2003) identified two variations of a stepwise entry to advice (Heritage & Sefi, 1992) that incorporated elements of Maynard’s (1989, 1991) perspective-display series. The first variation on the stepwise entry was a question-answer sequence whereby the counsellor’s initial question, typically in the form of a YNI, worked to topicalise or confirm the student’s opinion on a particular issue, such as their work preferences. After eliciting this opinion, the counsellor then worked to fit his/her advice to the student’s response. This sequence is outlined schematically as follows:

- 1 CO: Question: topicalising or eliciting student’s opinion
- 2 ST: Response: confirming or displaying the elicited opinion
- 3 CO: Advice: grounded in the view established in the prior turns

The second variation identified by Vehviläinen (2001) involved the counsellor positioning his/her advice so as to challenge the student’s perspective. This was achieved by the counsellor first eliciting the student’s opinion on a particular task, such as how they planned to tackle a particular problem. After this detailing, the counsellor then modified certain aspects of the student’s plan or rejected the student’s plan altogether and provided an alternate course of action. Vehviläinen called this second variation a ‘planning sequence’ in

that the student and counsellor collaboratively produced a viable course of future action that the student could undertake. This sequence is represented schematically below:

- 1 CO: Activation of a problem: eliciting the student's ideas regarding a particular task
- 2 ST: Response: description of plans, ideas, intentions
- 3 CO: Advice: commentary turn in which the counsellor evaluates the student's response

Much like the stepwise entry to advice identified by Heritage and Sefi (1992) and the perspective-display series identified by Maynard (1989, 1991), in the interactional environment of educational counselling, by working to elicit students' opinions, counsellors worked to align their advice with students' proffered opinions and to minimise resistance to that advice. The sequences identified by Vehviläinen (2001) can therefore be seen as a hybrid between a stepwise entry to advice and the perspective-display series. Even though counsellors worked to minimise resistance to advice by first topicalising students' opinions, Vehviläinen found that resistance was a common response to that advice.

A similar sequence to Vehviläinen's (2001) planning sequence has been examined by Garcia (2000) in the institutional environment of mediation hearings. In this context, the most common way in which mediators embarked on a discussion regarding dispute resolution was by soliciting suggestions from the disputants (referred to as mediator-solicits). Mediator-solicits routinely worked to elicit a move away from disputants' complaints and storytelling to talk about problem-solving. In soliciting suggestions from disputants, mediators provided first pair parts (FPP) with the expectation of a second pair part (SPP) in which the disputants provided a suggestion for potential resolution. Often, though, disputants resisted providing the preferred SPP through silences, or by producing talk other than a suggestion for

resolution (e.g., resumption of a complaint or storytelling). Following this resistance, mediators either permitted the resumption of complaint-talk by aligning as a complaint-recipient, or they pursued the preferred response to the FPP by reissuing their solicit until a suggestion for resolution was provided, which often took several attempts before it was successful.

The PDIs employed in the data under analysis appear most similar to the interrogatives employed in Vehviläinen's (2001) 'planning sequence', as well as the mediator-solicits identified by Garcia (2000), in that they work to topicalise callers' opinions regarding the implementation of potential courses of future action in respect of coping and management strategies. In this sense, the sequences of interaction in which counsellors work to open up a problem-solving frame for the interaction through the provision of PDIs appear to constitute a hybrid between a stepwise entry to advice and the perspective-display series. That is, PDIs work to topicalise callers' opinions (like the perspective-display series) but as a resource for advice-giving (like the stepwise entry to advice). The PDIs employed in the *MensLine* corpus not only form part of an attempt to enter into advice-giving in a stepwise fashion, they also form part of an attempt to transition *out* of troubles-talk. That is, these interrogatives act as *topic transition devices* that work to shut down an ongoing troubles-talk sequence and make advice-giving the relevant next action in the call. In order better to understand the nature of PDIs as topic transition devices, as well as to ascertain what *type* of topic transition device PDIs constitute (i.e., whether a stepwise or a disjunctive form of topic transition²⁵), I now move to provide a brief overview of topic transition in the CA literature.

7.3 Topic transition

Topic transition can occur in two ways: (1) it can be designed so as to 'flow' from the prior topic of talk (i.e., designed to connect with the prior topic of talk), or (2) it can occur

disjunctively (i.e., represent a break from the prior topic of talk) (Button & Casey, 1988; Liddicoat, 2009; Schegloff, 2007). In the former case, topic transition typically occurs “effortlessly” via a step-by-step process (Schegloff, 2007, p. 193). Jefferson (1984), for instance, identified a stepwise transition out of talk on a trouble that consisted of five steps: (1) the troubles-teller sums up the heart of the trouble, (2) the troubles-teller turns to matters that, although on-topic with and part of the trouble, are not at the heart of the matter, but *are ancillary*, (3) the troubles-recipient produces talk that topically stabilises the ancillary matters, (4) the troubles-recipient produces a pivotal utterance; one that, though recognisably on topic, has independent topical potential, and (5) matters that may specifically constitute the *target* of a series of moves are arrived at (pp. 202-204).

Button and Casey (1988) argued that stepwise topic transition, such as that identified by Jefferson (1984), can represent a difficulty for participants who ‘bring’ to a conversation a particular topic of talk to be discussed (i.e., speakers who have ‘business-at-hand’ to which they need to attend). Specifically, Button and Casey argued that speakers may face difficulties in opening up this topic if their only resource to do so is prior talk. That is, if prior talk does not furnish an appropriate place for the speaker to initiate the topic that s/he has brought to the conversation, then that topic might never be introduced. This is clearly a problem in the *MensLine* corpus: counsellors bring with them a particular topic of talk – that of problem-solving – yet callers’ tellings are not self-evidently concluded at any point (see Chapter 4), and routinely consist of complaints that undergo substantial sequence-expansion (see Chapter 6). In this sense, callers’ tellings do not furnish an appropriate place for the smooth, stepwise transition out of troubles-talk and on to advice-giving.

By contrast to stepwise topic transition, disjunctive topic transition typically involves the initiation of a topic of talk that is not grounded in prior talk but which represents a break from it (Button & Casey, 1988; Jefferson, 1984). There are a number of ways in which this

type of topic transition can occur. For instance, one participant might abandon his/her ongoing turn-at-talk and launch a new topic or sequence mid-turn (Schegloff, 2007). Alternatively, speakers might employ topic-initial elicitors, itemised news enquiries or news announcements to generate a topic for talk (Button & Casey, 1984, 1985, 1988). These topic transition devices each work to initiate a new topic for talk in slightly different ways. Topic-initial elicitors are general enquiries that work to elicit a candidate topic for talk from the recipient (e.g., “What’s new,”, Button & Casey, 1984, p. 168), itemised news enquiries work to elicit specific topic-talk based on a co-participant’s news (e.g., “When ih you gettin yer: ↑dining room suite”, Button & Casey, 1985, p. 6), and news announcements work to generate a topic for talk based on the speaker’s news (e.g., “I’ve jus’ got u – I’ve jus’ been getting suh-uh buying uh doing my shoppin:g”, Button & Casey, 1985, p. 24). The PDIs employed by counsellors in the *MensLine* corpus appear to take this disjunctive form in the sense that topic transition is not grounded in prior talk (i.e., troubles-talk) but represents a break from it. I provide further evidence of the disjunctive nature of PDIs in Section 7.4 below.

Button and Casey (1988) argued that disjunctive topic transition devices were routinely employed by speakers, both in mundane and institutional settings, when prior talk did not furnish an environment for the initiation of a particular topic, such as a topic that a participant had brought to the conversation. In other words, these disjunctive topic transition devices worked to overcome some of the interactional difficulties associated with stepwise topic transition. An interactional problem associated with disjunctive topic transition devices, though, is that, in order for topic transition to occur, recipients need to collaborate with the closure of the prior sequence and the initiation of the new sequence (Button & Casey, 1988; Drew & Holt, 1998). In this sense, disjunctive topic transition, like stepwise topic transition, can *also* present a problem for speakers who bring to a conversation a particular topic to be discussed. That is, if recipient(s) of the disjunctive topic transition device decline to talk on

the topic that a speaker is attempting to initiate, then that topic might not be introduced. This was arguably the problem that occurred in the mediation hearings examined by Garcia (2000). That is, disputants did not provide suggestions for resolution and so problem-solving did not become a focus for the interaction.

The collaborative process of disjunctive topic transition is also a problem that is routinely encountered in the *MensLine* corpus. Specifically, counsellors bring with them a particular topic of talk – that of problem-solving – yet callers rarely provide suggestions for the implementation of solution-focused management strategies following counsellors' solicitations for such suggestions (i.e., following their PDIs). In this sense, callers rarely collaborate with counsellors' attempts to transition out of troubles-talk and on to problem-solving. As such, problem-solving is not established as a relevant topic for the interaction and counsellors' attempts to attend to their institutional role of service provider are undermined. I move now to examine counsellors' attempts at topic transition through the employment of PDIs and callers' routine resistance to these attempts. The aim is to show how these topic transition sequences result in an interactional tug-of-war or frame-struggle, which provides further interactional evidence of an asymmetry between callers and counsellors in terms of their respective orientations to the purpose of calls taking place between them.

7.4 Perspective-display interrogatives

There are two types of PDIs employed by *MensLine* counsellors: (1) general PDIs, which do not specify the type of suggestion that is required, nor to what aspect of the caller's problem that solution should be addressed (c.f. topic-initial elicitors, Button & Casey, 1984), and (2) specific interrogatives that provide an indication of the type of solution that counsellors are working to elicit or to which aspect of the caller's problem the solution should be addressed. Below are examples of these two types of interrogatives:

General

1. Call 85:

- 1 CO: → so what do you think you might do
2 (0.6)
3 CA: have no idea

2. Call 9:

- 1 CO: → SO: (0.8) what d'ya do?
2 (1.3)
3 CA: I don't know h:uh .hh (1.0) maybe move out h ((swallows))

3. Call 101

- 1 CO: → so what do you think you might do?
2 (1.1)
3 CA: ((clears throat)) u:m (1.5) tch.h well: h .hh I think I should be on
4 my own?

Specific

4. Call 53:

- 1 CO: → what are you support what what do you think what supports can you
2 get perhaps for the boy:s
3 (0.8)
4 .h [what do they have
5 CA: [(yeah like what)
6 CO: o:h just sort of [a bit of emotional- have they got grandparen:ts
7 CA: [o:h >yeah yeah yeah<
8 CO: an'
9 CA: oh
10 (0.2)
11 [yeah they have,

12 CO: [aunts cousins yeah?

13 CA: yea:h u:m (0.4) my mum an' dad u:m but they live up in ((location))

5. Call 19:

1 CO: [what do you want Christian?

2 CA: .hh oh h ↑I wouldn't mind working it ou:t

3 CO: → .hh [so okay what's your strategy? in order to do that at the moment

4 CA: [(y'know w'I mean?)

6. Call 132:

1 CO: → can I um I just wanna fast track it just a little bit so what cou-

2 what do you think you might be able do to:: >is it< what're the sort

3 of things you can do tuh (.) reconnect perhaps

4 CA: oh well [I'll do very nice things

5 CO: [or:

6 alright tell me (.) what are the sort of things

7. Call 126:

1 CO: → .h so what can you say ↑to ↑them?

2 (0.4)

3 .h I'm just wanting to get something if possible from you, .hh that

4 (0.7) is going to give the children some comfort at this

5 [point=because .h it's three months before court

6 CA: [well what

7 oh ((unclear)) she'll stuff up before then I guarantee it

The turn-initial components of counsellors' PDIs provide further evidence that these interrogatives are working as *disjunctive* topic transition devices. The PDIs are routinely preceded by 'so' (e.g., Extracts 1, 2, 3, 5, 6, and 7). The extracts that will be examined below (Extracts 8-11) also contain examples of PDIs that are 'alright'-prefaced. In turn-initial position, markers such as 'so' and 'alright' are argued to be one way in which speakers mark

out an imminent, disjunctive change in topic (Button & Casey, 1988; Drew & Holt, 1998; Kelly, 2007; Liddicoat, 2009; Rendle-Short, 2003; Schiffrin, 1987; Sidnell, 2007). This is because these turn-initial components work to demonstrate that a speaker's upcoming turn is disengaged or topically incoherent with prior talk. As such, these topic transition markers work to shut down a prior topic and suspend its relevance while allowing for the introduction of a dichotomous item (Button & Casey, 1988). More specifically, in the case of 'so', Bolden (2009b) argued that when employed to preface sequence-initiating actions, such as questions, 'so' demonstrates that the upcoming action is not contingent on prior talk. That is, it signals that the activity being launched has been pending rather than touched off from something that the co-interactant said. The turn-initial components of counsellors' PDIs therefore demonstrate not only that the action that they are implementing (i.e., problem-solving) is independent of prior talk but that it is an action that counsellors 'bring' to the conversation by virtue of their institutional role of service provider.

As evidenced by Extracts 1-7, in the *MensLine* corpus, PDIs are always formatted as wh-questions. In this sense, these interrogatives do not carry a grammatical preference for a particular type of response (Stivers & Robinson, 2006) (see Chapters 4 and 5 for more on wh-questions). However, PDIs arguably carry an action-type preference in the sense that they invite callers to put forth suggestions in their next turns-at-talk. In other words, PDIs constitute FPPs that make relevant SPP responses from callers that provide a suggestion for a potential solution/management strategy (c.f. the mediator-solicits in Garcia's, 2000, data that contained the same action-type preference). The *conditionally relevant, preferred* response to these interrogatives is therefore a suggestion. As stated previously, callers rarely provide this preferred response. I now move to examine the types of responses that callers provide instead, and describe how these responses work to resist counsellors' attempts to transition

out of troubles-talk. I also focus on the ways in which counsellors typically work to overcome this resistance resulting in an interactional tug-of-war between caller and counsellor.

7.5 Callers' resistance to topic transition

Similar to the mediation setting examined by Garcia (2000), in the *MensLine* corpus, one main way in which callers resist providing the preferred response to counsellors' PDIs is through the provision of extended responses that go beyond what is asked for in the interrogative. These extended responses most typically form part of an attempt to resume troubles-telling in the form of a complaint. A second response-type that was present in the *MensLine* corpus was not observed in Garcia's data: "I don't know" responses (see e.g., Extract 2 above) or some variant thereof (e.g., "have no idea", Extract 1, line 3)²⁶.

In the CA literature, "I don't know" is routinely referred to as a non-answer response for the simple reason that it is not fitted to the action of the FPP to which it is directed (Sidnell, 2010; Stivers, 2010; Stivers & Robinson, 2006). That is, although non-answer responses constitute a "normatively viable action in response to a question" (Stivers & Robinson, 2006, p. 371), in that they satisfy the conditional relevance of providing a response, they do not work to further the action-trajectory embarked upon in a FPP (e.g., inviting). In this sense that non-answer responses do not satisfy the preference for progressivity in action, they are viewed as performing a dispreferred action (i.e., they are a dispreferred response-type) (Stivers & Robinson, 2006; Liddicoat, 2009; Sidnell, 2010).

A number of CA studies have demonstrated how the deployment of "I don't know" is an interactional achievement (i.e., a conversational resource employed in a particular interactional environment and for a particular purpose) rather than a purely cognitive construct (i.e., reflective of the fact that a recipient does not know the answer to a question, although it may be treated in this way to achieve a particular end). In the context of mundane

and institutional (e.g., legal and medical) interactions, Beach and Metzger (1997) demonstrated how claims of insufficient knowledge in second position worked to withhold acceptance of invited and requested actions. Specifically, they argued that a claim of insufficient knowledge, such as “I don’t know”, can “delicately delete appropriate or expected ‘nexts’ (e.g., immediate acceptance of an invitation) by replacing them with a displayed inability to ‘answer’” (Beach & Metzger, 1997, p. 579).

In a case study of a single counselling session between a child and therapist, Hutchby (2002) demonstrated how “I don’t know” was employed strategically by the child as a way of avoiding answering the counsellor’s therapeutic questions. These questions typically worked to topicalise therapeutically relevant matters such as the child’s feelings toward the breakup of his parents’ marriage and why his parents appeared to be fighting or disagreeing. In this particular interactional environment, Hutchby (2002) argued that “I don’t know” was a resource that the child relied on in order to “close down an undesired line of counsellor questioning” (p. 158)²⁷.

Similar to Beach and Metzger (1997) and Hutchby (2002), I will demonstrate how non-answer responses in the *MensLine* corpus, in conjunction with extended responses, work to undermine the action being implemented through counsellors’ PDIs. That is, non-answer responses and extended responses both work to avoid providing a suggestion for resolution or management of callers’ stated problems when such suggestions are due. These responses therefore displace the SPP that is conditionally relevant following counsellors’ PDIs. In this sense, these responses can be seen to resist the premise of counsellors’ interrogatives – transitioning out of troubles-talk and on to problem-solving. Callers’ resistance can be seen to hinder the action of topic transition such that advice-giving does not become a topic for talk. That is, because callers do not suggest viable courses of action that they can undertake as part of a management strategy, counsellors are not presented with a resource with which to discuss

solution-focused outcomes with callers. The interactional pattern outlined here therefore represents a contrast to patterns evident in the educational counselling setting examined by Vehviläinen (2001), where such suggestions were routinely provided.

Importantly, evidence that both non-answer, as well as extended, responses are resistive comes from counsellors' subsequent attempts to pursue an advice-giving trajectory for the interaction following such responses. That is, unlike the mediators in Garcia's (2000) mediation hearings, counsellors do not align as complaint/troubles-recipients following callers' attempts to resume troubles-talk, but work explicitly to adopt the role of service provider. Most typically, counsellors pursue this trajectory by re-issuing their PDIs, or by providing focusing enquiries that work to topicalise either (1) callers' resistive responses, or (2) components of their prior troubles-tellings, as a locus for problem-solving. Less commonly, counsellors work to effect a shift out of troubles-talk following caller resistance by offering advice, typically in the form of an interrogative. This advice is routinely rejected by callers, as might be expected considering that callers have not collaborated with a shift to problem-solving as a topic for talk. A final way in which counsellors respond to callers' resistance is by overtly challenging that resistance. Typically, these challenges are responsive to callers' complaints whereby they work to impart blame to a third-party (see Chapter 6 for a discussion of third-party complaints in the *MensLine* corpus).

The sequence of interaction in which counsellors work to transition out of troubles-talk and on to problem-solving, and where callers resist these attempts, is represented schematically as below:

1. PDI
2. Resistive response
 - a. Non-answer (e.g., "I don't know")

- b. Troubles-talk (typically, a complaint)
- 3. Subsequent attempt to pursue problem-solving trajectory
 - a. PDI
 - b. Focusing enquiry
 - c. Advice
 - i. Interrogative
 - ii. Suggestion (rare)
 - d. Challenge (rare)

If resistance occurs following counsellors' subsequent attempts at topic transition (i.e., following Step 3), then counsellors can be seen, once again, to attempt to transition out of troubles-talk (i.e., counsellors revert to Step 3). Much like the complaint sequences that PDIs are routinely employed to shut down, the sequences in which counsellors attempt to transition *out* of troubles-talk can also involve substantial post-expansion. It is these extensive sequences of interaction that demonstrate an interactional tug-of-war between caller and counsellor. In other words, it is through these sequences of interaction that it becomes evident that caller and counsellor are each working to provide a different frame for the ongoing interaction. I examine this frame-struggle through the use of four key examples.

The first example, below, occurs approximately 8 minutes into a 20 minute call. During these 8 minutes (transcript not shown), the caller is engaged in troubles-talk during which the counsellor can be seen to attend to her institutional role of troubles-recipient. The extract, below, begins with the caller engaged in troubles-talk in the form of a complaint (lines 1-21). The counsellor's attempt to transition out of this talk through the employment of a PDI occurs on lines 31-32 (arrowed). The various components of the three-step topic transition sequence, outlined above, have been arrowed and labelled for ease of reference.

8. Call 16:

1 CA: the whole problem that (.) that I can't understand with life
2 right? (0.3) .h everyone has problems in their life right?
3 CO: mm
4 (0.3)
5 CA: an' when other people stick their big beak in right? (0.4) .h
6 u::m (0.4) you generally find (0.2) that people, (0.5) .h they
7 are in the same scenario (0.9) they wouldn't even take their own
8 advice;
9 CO: .h so who's sticking their beak in
10 CA: .h oh these people down at the restaurant when we were down in
11 ((location)) right? when my daughter was sexually abused by her
12 stepfather an' she came into my car:e; (0.5) .h she had a school
13 teacher: friend that she's going to school with she turned
14 around and told .hh told my wife look .h his daughter hasn't
15 been sexually abused or otherwise the police would have charged
16 him straight away: right? blah blah blah my wife started
17 belie:ving it an' I went down one day: .hh an' she was standing
18 there=if it hadda been a guy she wouldn't have been wa:lking,
19 turn around said .hh your daughter is tellin' a bullshit story
20 .h an' the only reason you want your daughter is so you can get
21 family [tax benefit.
22 CO: [hh alright let's just (.) yeah look I (.) that's this
23 is that's (0.2) too much and too hard for this call
24 unfortun[ately I'm [yeah
25 CA: [oh I know [an' I I've had tuh put up with this garbage
26 right?
27 (0.7)
28 CO: so they're the people who are interfering
29 CA: yep
30 CO: 1 yea:h .hh (0.2) alright so let's get back to thuh h to thuh hurt
31 → you've experienced with your wife saying those things ha==what

32 do you think you might do.

33 (2.2)

34 CA: 2a → I don't know I [I

35 CO: [I mean

36 CA: I just feel like

37 CO: 3a → you've been through you've been through a lot (0.2) already? as

38 you as you've said. .h (0.8) how (0.5) how have you: (0.7) like

39 †how have you gotten through those hard times together

40 (1.0)

41 what's your strength the two of you have together what's ya

42 (0.6) what's ya PART[nership

43 CA: [bec- because I love my wife like I

44 [((unclear))

45 CO: 3b → [and what role does she play; does she what does she must do

46 something too?

47 CA: yea:h at times she she really (.) she really lets you know,

48 (0.2) no:t by saying the word I love you but by (showing) how

49 she loves you you understand what I mean?

50 CO: mhuh

51 CA: 2b → .hhh but when the pressures pile up right? (0.3) then, (.) she

52 goes haywi:re

53 CO: °mm°

54 (2.7)

55 CA: 2b → and (0.5) I (0.7) y'know (0.2) I:'ve (0.8) I've tried to accept

56 it the cultural thing right?

57 CO: mm:

58 (1.0)

59 CA: 2b → but I can't take other people that are trying tuh undermine all

60 the time.

61 CO: 3a → alright so what are you gonna do- what are you and your wife

62 gonna do

63 (0.2)

64 3d → you're the you're the two who have got the ball's in your court
65 the two of ya you s[o
66 CA: 2b → [cos I try tuh (teak tuh her) (0.2) I try to
67 speak to her .h she knows everything that's going on but she
68 doesn't want to know.
69 (1.9)
70 2b → she's acting dumb y'know wh'I? (.) you get where I'm coming
71 from=[an' that's where it r:eally (0.2) [gets to me
72 CO: [.h [.h
73 °m°
74 CA: 2b → she is an intelligent woman the only thing she can't read and
75 write, .h because she can't read and write .h these people are
76 using her because she can't get a food handler's certificate=if
77 she got a food handler's certificate .hh the:n she could get a
78 job anywhere .h she w:orks [hard
79 CO: 3a → [alright let's get back to you two
80 though this is the thing .h [>what's happ'ning with you tw<=so
81 CA: [because
82 CO: how are you gonna communicate with her
83 CA: 2a → I don't know how (0.3) because at the moment she doesn't want
84 tuh communicate
85 CO: 3ci → alright so could you give her a little (0.2) um (0.2) break from
86 that?
87 (0.3)
88 CA: yea:h (0.6) like I didn't I (0.2) last night I didn- .h I didn't
89 I didn't say anything about the money I didn't (0.5) didn't say
90 anything right? .h I said if it's gone it's gone that's it.
91 (2.2)
92 y'know what I mean? [an'
93 CO: [yea:h
94 (1.0)
95 CA: 2b → it's (2.7) <I just like her:,> (.) tuh openly (3.0) say what she

96 really wants.
97 (1.0)
98 if she r:eally wants something right?
99 (0.4)
100 okay talk about it openly .h an' if that's the way it is that's
101 the way it is .h but it's it's not that way .h <stop. playing.
102 the damn games.>
103 (0.2)
104 because <it's tearing. me. apart.> an' affecting my: health.

On lines 22-24, the counsellor interrupts the caller's ongoing talk in an attempt to shut down the troubles-talk sequence. Specifically, the counsellor's turn-initial 'alright' (line 22) can be seen to acknowledge the caller's troubles-talk and to propose closure of the sequence (Beach, 1995). The counsellor's attempt to shut down the troubles-talk sequence constitutes a dispreferred response to the caller's telling and is therefore accountable. Following various dispreference markers (i.e., intra-turn pauses and self-repair), the counsellor provides an account in terms of an assertion that the caller's topic for talk is "too much and too hard for this call" (lines 23-24) (i.e., that the telling is inappropriate for the purposes of *MensLine*). The use of 'unfortunately' (line 24) arguably shows that the counsellor is attending to the caller's telling as important but as one which cannot be told here.

Although the caller displays agreement with the counsellor's claim in overlap (i.e., 'oh I know', line 25), he nonetheless continues his telling as evidenced by the turn-final 'right' (line 26), which invites uptake from the counsellor. This uptake is not immediately forthcoming and, after a gap (line 27), the counsellor works once again to bring the trouble-talk sequence to a close by providing an upshot/summary of the caller's telling (line 28). What is evident so far is that the counsellor is working to shut down the troubles-talk

sequence but that the caller is not complying with this attempt: he is working to keep the sequence open.

In her next turn-at-talk (lines 30-32), the counsellor employs a PDI that works to transition from troubles-talk to problem-solving. This PDI is prefaced with 'alright', which regularly works as a change-of-activity token indicating a marked shift in activity (Gardner, 2005). A shift is also marked out explicitly through the turn-initial component: "let's get back to". Rather than working merely to revert to an earlier discussion of the caller's problem (i.e., to continue troubles-telling on a different, more appropriate, issue), by appending a PDI to her turn, the counsellor works to elicit a suggestion from the caller regarding how he plans to manage the relationship problem he had called to talk about. In other words, the counsellor topicalises, for the current talk, a focus on the hurt that the caller described in the opening sequence of the call (transcript not shown) and what he plans to do about this problem. That is, she works to make problem-solving the focus of the interaction.

The caller responds to the counsellor's PDI, after a substantial gap (line 33), with a non-answer response: "I don't know" (line 34). Grammatically speaking, "I don't know" is a relevant response to the counsellor's interrogative. It does not, however, work to advance the action launched through the FPP (Liddicoat, 2009; Sidnell, 2010; Stivers & Robinson, 2006). Here, by claiming insufficient knowledge, the caller can be seen to delete the appropriate next action of providing a suggestion regarding a potential course of action that he can undertake to solve, or at least better manage, his relationship difficulty (Beach & Metzger, 1997). In this sense, the caller's response can be seen as a dispreferred response in terms of the action that the counsellor's PDI is working to implement (i.e., opening up a service-encounter frame for the interaction). The status of the caller's turn as a dispreferred response is further evidenced by the substantial gap on line 33 that works to break contiguity with the FPP to which the response is addressed (i.e., the counsellor's PDI).

It is possible that the caller's non-answer response could be treated as a cognitive construct – as reflective of the fact that he does *not* know what to do. If the callers' response was working in this way then it would arguably open up a slot for the counsellor to do advice-giving (i.e., for the counsellor to provide the solution that the caller cannot). Following his non-answer response, though, the caller appears to resume troubles-telling rather than align as a potential advice-recipient (i.e., the caller opens up a topic for talk regarding how he 'feels', line 36. C.f. the complaints analysed in the previous chapter where such subjective assessments were common). In this way, the caller can be seen to perform further interactional work to shut down or evade the counsellor's line of questioning (i.e., her attempt to transition out of troubles-talk and on to problem-solving).

The counsellor appears to orient to the caller's response to her PDI as resistive as evidenced by her interrogative at line 37, which is produced prior to the semantic completion of the caller's previous turn-at-talk. The interrogative is slightly different to her PDI on lines 31-32 in the sense that it is backward-looking rather than forward-looking (i.e., it does not ask what the caller *will* do about his problem but what he has done in the past to deal with similar problems)²⁸. In employing this interrogative, the counsellor is arguably working, once again, to elicit from the caller a suggestion regarding how he can better manage his relationship trouble (i.e., by relying on strategies that were successful previously). Importantly, this interrogative is evidence that, from the counsellor's perspective, the caller's prior response was working to thwart transition out of troubles-talk and on to problem-solving rather than being indicative of his actual knowledge state (i.e., that he does not know what to do).

Again, the caller's response to this interrogative (line 43) is resistive as evidenced by the fact that he does not work to inform the counsellor how he and his partner have managed relationship difficulties in the past. Instead, the caller focuses on a dispositional trait that he

possesses (i.e., “because I love my wife”, line 43). In providing this response, the caller avoids the premise of the counsellor’s question that focuses on how he and his partner have managed problems ‘together’ (lines 39 and 41). Again, the counsellor appears to orient to this turn-at-talk as resistive as evidenced by her subsequent interrogative on lines 45-46 (i.e., “and what role does she play, does she what does she must do something too?”). This focusing enquiry works to challenge the caller’s previous response by indicating that it was insufficient (i.e., that she was looking for an answer that focused on what the caller and his partner have done together, as a partnership, to solve their relationship problems). In other words, the focusing enquiry works to constrain the caller’s response to the premise of her prior question and to topicalise his previous experience with his partner as a locus for problem-solving.

Although the caller appears to answer this interrogative on lines 47-49, he then engages in post-answer agenda-shift work (Greatbatch, 1986, p. 443) on lines 51-60. Specifically, on lines 51-52, the caller appears to formulate a complaint against his wife’s behaviour (i.e., “she goes haywi_re”), and on lines 59-60, he reverts to the topic of talk that the counsellor worked to shut down at the beginning of the extract (i.e., people interfering). As outlined in Chapter 5 (Section 5.4.1), in the context of news interviews, Greatbatch (1986) argued that post-answer agenda-shifts were one way in which interviewees worked to effect a shift away from the topical agenda initiated by interviewers’ questions. Similarly, in the example above, through his post-answer agenda-shift, the caller avoids maintaining a focus on problem-solving following his initial response to the counsellor’s focusing enquiry. That is, his talk does not focus on what he can do to manage his problem, or what he and his wife have done in the past to manage their relationship difficulties, but resumes troubles-talk in the form of a complaint. In this way, the caller can be seen to undermine the counsellor’s attempts to transition out of troubles-talk.

On lines 61-62, the counsellor once again attempts to shut down the caller's resistive talk through a PDI. Again, the turn-initial 'alright' signals a marked shift in activity (Gardner, 2005) and demonstrates that the caller's prior talk was off-topic (i.e., not in keeping with the counsellor's attempts to transition out of troubles-talk). The counsellor's interrogative also works to maintain a focus on what the caller and his wife can do together to manage their relationship difficulties, a topic which she worked to topicalise on lines 37-39 and 45-46 (note the emphasis on 'wife', line 61, which underscores the importance of the caller providing a response that focuses on what he and his partner can do together to solve their problem). The metaphor "the ball's in your court" (line 64) arguably works as a challenge to the caller's prior post-answer agenda-shift. The upshot of this metaphor is that the onus is on the caller and his wife to fix their current relationship problems. The caller's prior post-answer agenda-shift (i.e., talk that focuses on other people) is therefore oriented to by the counsellor as irrelevant for the purposes of problem-solving. The counsellor's interrogative can therefore be seen to invite the caller to provide a relevant response to her PDI – a suggestion regarding how he and his wife can work together to manage their relationship problems.

The caller, though, does not provide such a suggestion. Instead, on lines 66-78, the caller engages, once again, in a complaint. Through this complaint, the caller does important work to impart blame to his wife by indicating that he has tried to communicate with her in the past but that she has thwarted his attempts (lines 66-68). In doing so, the caller works to undermine any potential advice that the counsellor might provide that involves the management strategy of talking to his wife. The caller orients to the relevance of a response from the counsellor following his complaint, as evidenced by the substantial gap on line 69. When this response is not forthcoming, he explicitly seeks it out by appealing for uptake (line 70) and providing a subjective assessment that focuses on how he feels in response to his

wife's behaviour (line 71). Recall from Chapter 6 that such appeals and subjective assessments are common in complaint sequences in the *MensLine* corpus following a lack of uptake from counsellors. It is clear here, then, that through this complaint, the caller is working to maintain a focus for the current talk on troubles-telling rather than problem-solving.

The counsellor responds only minimally to the caller's complaint on line 73. By declining to align as a complaint-recipient, the counsellor can be seen to orient to the relevance of problem-solving as a focus for the interaction (see Chapter 6 for a discussion of how minimal responses work to undermine the action of complaining and to dis-attend to a caller's complaint). On lines 74-78, the caller appears to introduce a new topic for talk (i.e., he again engages in a post-answer agenda-shift). Specifically, the caller produces a complaint against his wife's employers and their actions. In other words, he moves beyond focusing solely on the topic of talk that the counsellor is working to topicalise: what he and his wife can do about their problem. Once again, then, the caller can be seen to resist the counsellor's attempts to transition out of troubles-talk and on to problem-solving.

Again, the counsellor orients to this talk as off-topic, as evidenced by her subsequent PDI (lines 79-82). The counsellor's interrogative constitutes a specific, rather than a general, PDI in that it works to elicit a suggestion regarding a particular aspect of the caller's problem (i.e., how he will communicate with his wife). Through this PDI, the counsellor once again emphasises that talk regarding people apart from the caller and his wife (e.g., his wife's employers) is irrelevant. This is evidenced by the contrastive "though", which can be seen to shift the focus for the talk, as well as "this is the thing", where the deictic 'this' can be seen to refer to the caller and his wife. Similarly, the emphasis on 'you' (line 79) works to underscore the importance of talk concerning the caller and his wife rather than third-parties outside the relationship (c.f. the counsellor's emphasis on 'wife', line 61). The counsellor also comes in

prior to the semantic completion of the caller's turn thereby reducing the turn transition space. Through this turn-at-talk, the counsellor indicates that, from her perspective, the focus of talk should be on the caller and his wife and what they plan to do together to solve their relationship difficulty, and that the caller has yet to collaborate in establishing this focus for the interaction.

Again, the caller resists this line of questioning by producing a non-answer response (line 83), which is followed by an explicit account for its production. Such accounts are common following non-answer responses, and further demonstrate their status as dispreferred responses. Specifically, Stivers and Robinson (2006) argued that accounts "reveal what is potentially problematic about non-answer responses" (p. 373). That is, although non-answer responses show that a response is conditionally relevant (i.e., they address the relevance of providing a response to a question), they fail to promote the progression of the activity underway. Here, not only does the caller's account demonstrate that his non-answer response is working to undermine the advancement of the action-trajectory sequence, the caller also does important blaming-work through this account. Specifically, he claims that he does not know how to communicate with his wife because she does not want to do so. In other words, the caller's inability to answer the counsellor's question can be seen as a result of his wife's actions. In this way, the caller downplays his resistance to the counsellor's interrogative and works, once again, to undermine any potential advice that the counsellor might provide with respect to communication.

Following this turn-at-talk, the counsellor moves to provide advice in the form of an interrogative that enquires into the caller's ability to undertake a particular course of action (lines 85-86) (see Butler et al., 2010; Pudlinski, 2002, for an investigation of advice packaged in the form of an interrogative in the context of calls to *Kids Help Line* and calls to warm lines²⁹ respectively). It is possible that, through this advice, the counsellor demonstrates an

orientation to the caller's "I don't know" response as a cognitive construct – as an indication that the caller does *not* know what to do. In this sense, because the caller cannot provide an answer, the counsellor works to provide a solution for him. The caller, though, does not accept the counsellor's proffered advice. He indicates that he has already implemented the counsellor's suggestion (lines 88-90) before proceeding to appeal for uptake (line 92) and formulating another complaint in which he also embeds a subjective assessment (lines 95-104). Through this response, the caller demonstrates that his prior "I don't know" was not working as a cognitive construct (i.e., demonstrating his lack of knowledge, particularly considering his indication that he has already implemented the suggestion offered by the counsellor) but served to resist the counsellor's line of questioning.

To sum up, in this example, the caller repeatedly resists the counsellors' attempts to transition out of talk on a trouble and on to problem-solving through the provision of non-answer responses (i.e., "I don't know"), as well as extended responses that typically take the form of complaints. As a result of the caller's continued resistance, an appropriate place for the provision of advice is not negotiated or secured. That is, because the caller does not offer a suggestion with respect to management strategies, the counsellor is not provided with a resource in order collaboratively to produce a solution to the caller's problem. When the counsellor *does* attempt to provide advice, it is not accepted by the caller.

Importantly, what appears to be happening in this sequence of interaction is that the counsellor is working to transition *out* of troubles-talk, whereas the caller is attempting to *maintain* a troubles-telling frame for the interaction. The counsellor, though, does not align as a complaint/troubles-recipient, nor does the caller align as an advice-recipient. As such, the interaction is neither a canonical troubles-telling nor is it constitutive of a regular service-encounter. The caller and counsellor therefore become engaged in what can be seen as something of an interactional tug-of-war. That is, they are simultaneously working to frame

the ongoing interaction in very different ways. Through this frame-struggle, the topic transition sequence, rather than successfully establishing advice-giving as a topic for talk, undergoes substantial post-expansion. That is, much like the troubles-talk/complaint sequences that counsellors are routinely working to shut down, the sequences in which they attempt to transition *out* of troubles-talk are also continually recycled:

1. PDI
2. Resistive response
3. Subsequent attempt to pursue problem-solving trajectory



Importantly, this interactional tug-of-war clearly demonstrates a difference in orientation between caller and counsellor in regards to the purpose of the interaction taking place between them; that is, whether it is constitutive of a troubles-telling or service-encounter. I will explore the interactional negotiation that routinely takes place in topic transition sequences in the *MensLine* corpus, as exemplified by the three-step sequence above, through a further three examples.

In the first of these examples below, the caller has called to talk about his relationship with his live-in partner and the fact that she has again moved out of their shared home. As with Extract 8, the various components of the three-step topic transition sequence have been arrowed and numbered accordingly. The extract begins with the counsellor attempting to transition out of troubles-talk through the employment of a PDI. The opening sequence of this call, including the caller's complaint, can be found in Chapter 6 (Extract 3).

9. Call 1:

- 1 CO: 1 → so how do you think you're gonna manage this this
- 2 CA: 2a → I don't [know I ((unclear))

3 CO: 1 → [through this time so what's the plan

4 CA: 2b → .h we:ll it's probably the usual I I bring my pa:rents in to it

5 I don't want to it's just because I've I I feel I've got nowhere

6 tuh .h tuh tu:r:n .h u:m (0.2) because I just tear myse:lf apart

7 but ah (0.2) I think gosh I need tuh h I need tuh talk to people

8 CO: 3ci → so would you seek- would you seek some professional assistance

9 th[is time

10 CA: [I've yeah I've I've done that in the pa:s[t I ((unclear)) she

11 CO: [yeah?

12 CA: she reckons I (0.3) you know I got serious problems an'

13 everything an' (0.2) it's funny but other people say that ↑she

14 has an' my pa:rents think so (0.2) an' other people have said oh

15 do- y'know what she did the:re was really o:dd (0.2) I thought

16 well I thought that too but anyway [((unclear))

17 CO: 3d → [but you keep going back for

18 more so it really doesn't matter what anyone thinks:

19 CA: I know I [ca-

20 CO: 3a → [let them all put their two bobs worth in what are you

21 gonna do about it?

22 CA: 2a → yeah heh well I don't kn[o:w

23 CO: 3b → [so y- y- you s:: started to say that

24 you did go and see someone what [what sort of: what sort of

25 CA: [yep

26 CO: assistance did you get

27 CA: ↑u::m ↑a:h it was okay I didn't >sorta continue with it<=she put

28 me on anti depressants for a while;

29 CO: 3b → so it was a doctor or a coun[sellor or a?

30 CA: [((clears throat)) counsellor=I went

31 to my doctor an' then he recommended a counsellor I went and

32 s[aw her .hh u::m (0.2) an' a lot of it's to do with y'know

33 CO: [yep

34 CA: the i:solation of my work an' stuff an' >I I< tend to probably

35 .hhh snowball things .hhh (0.2) a:h hh and the relationship
36 [I ((unclear))
37 CO: 3b → [and did you learn did you learn some sorta techniques: for bout
38 thought stopping type of s[tuff or
39 CA: [she did show me some=>I did [it a
40 CO: [yea:h
41 CA: little< while ago an' I've probably heh (0.2) .hh um h I should
42 dig it out again and read it but ah
43 CO: 3ci → well would you go and see someone?
44 CA: u::m: ↑well ↑yeah u::m .h I s- I said (0.4) that we should go
45 toge:ther an' just have a talk to this wo[man .hh and so we did
46 CO: [mm:
47 CA: 2b → that (0.7) an' my partner just (0.6) ridiculed me all the time
48 an' an' to this counsellor an' said y'know he's got this problem
49 he's this an' that an' .h
50 CO: that's generally what happens yeah
51 CA: o::h an' I [thought geez
52 CO: [cos it's a big opportunity for people tuh say those
53 things that
54 CA: I know
55 CO: that's the way it [sorta (works)
56 CA: [an' the counsellor even s↑aid to me she said
57 she's not good for y↑ou
58 CO: mm
59 CA: I thought hh heh
60 CO: 3a → so okay so what are you what will you do this time
61 CA: 2a → I don't ↑know that's why I'm sort of I thought I I'll ring this
62 number because they (0.2) advertise it and if you get depressed
63 about these sorts of things you should ((unclear)) and do
64 something about it=espe:cially with my my thoughts [.hh
65 CO: [so
66 whereabouts in Australia are you ringing from

In this extract, as with Extract 8, the counsellor attempts to transition into problem-solving through the employment of a PDI after extensive troubles-talk from the caller (the extract begins approximately 13 minutes into a 40 minute call). The caller initially responds to the counsellor's PDI with a non-answer response ("I don't know", line 2), however, this response is produced in overlap with the counsellor's continuation of her turn-at-talk from line 1. In response to the counsellor's completed PDI, the caller details a potential course of action that he can undertake to manage his problem (lines 4-7). The caller's response is 'well'-prefaced, which arguably signals that his upcoming response will not be straightforward (Schegloff & Lerner, 2009). Tracking through the caller's response, it is possible to see why it is not straightforward. Specifically, although the caller appears, on the surface, to answer the counsellor's question, he does not provide a suggestion regarding a *suitable, future* course of action that he can undertake to better manage his relationship difficulty. Instead, the caller informs the counsellor how he has managed his problem in the past. He does not endorse this course of action as something he *wants* to do, nor as a viable option, but presents it as his only choice. The less-than-desirable nature of this option is reinforced by the two 'because'-prefaced accounts on lines 5 and 6. These accounts perform important resistive work in that they can be seen as constitutive of troubles-talk. Specifically, the caller provides subjective assessments of how he is feeling. He also indicates that he 'needs to talk to people' which, in itself, is resistive of attempts to transition *out* of troubles-talk. In providing this response (i.e., by not detailing a suitable plan), the caller can be seen to resist the action being implemented through the counsellor's interrogative – transitioning out of talk on a trouble and on to problem-solving.

In her subsequent turn-at-talk, the counsellor provides advice in the form of a YNI (lines 8-9). The solution embedded within this interrogative is that the caller might seek professional assistance. This advice is positioned as an upshot of the caller's prior turn-at-talk

(i.e., because the caller's usual course of action is not a viable option, the logical conclusion is to undertake an alternative course of action, such as seeking professional help). In providing advice as an upshot of the caller's prior turn, the counsellor can also be seen to orient to the caller's proposed course of action as unsuitable. Importantly, by providing advice at this point, the counsellor declines to acknowledge the caller's prior accounts – to which affiliation might be expected (i.e., “I feel I've got nowhere tuh .h tuh tu:r̩n u:m (0.2) because I just tear myse:lf apart”, lines 5-6). By dis-attending to the relevance of the caller's troubles-talk and working instead to provide advice, the counsellor can be seen to open up a problem-solving frame for the interaction at this point (note that such advice was not routinely provided in the complaint sequences examined in Chapter 6).

The caller resists the advice embedded in the counsellor's interrogative by referring to his specific circumstances – information to which only he is privy – that would hinder the successful implementation of the suggestion. Specifically, the caller indicates that he has already implemented the suggestion (line 10), before moving on to explain why it did not work (lines 10-16). The caller's account for his rejection of the counsellor's advice takes the form of a complaint against his partner. Implicit in this complaint is the caller's blame against his partner (i.e., *she* has problems, so the caller seeking professional help is not a relevant option). The caller's blaming work further demonstrates the problematic nature of complaints in an institutional setting such as *MensLine* where the aim is one of service provision, in that complaints work to focus the interaction on what has happened, and who is to blame, rather than what can happen. The caller's complaint also takes the form of a post-answer agenda-shift (Greatbatch, 1986). That is, the caller's response is non-conforming (Raymond, 2003) in that it goes beyond what is asked for in the counsellor's YNI – a straightforward ‘yes’ or ‘no’ response – and in doing so, works to shift the topical agenda initiated by the counsellor's interrogative. Through this complaint the caller can therefore be seen, once again, to produce

a dispreferred response that resists the advice-giving trajectory that the counsellor is attempting to pursue for the interaction, and to work instead to maintain the focus of the interaction on troubles-telling.

The counsellor, though, does not abandon an advice-giving trajectory in the face of this resistance. Her response to the caller's resistance overtly challenges the complaint embedded within that turn ("but you keep going back for more so it really doesn't matter what anyone thinks:", lines 17-18) and her subsequent PDI ("what are you gonna do about it?", lines 20-21) works once again to effect a shift away from troubles-telling. Through her challenge, the counsellor can be seen to perform the same work as that performed by the counsellor in Extract 8 (lines 64-65). Specifically, she indicates that what other people think or say is irrelevant to the focus of the interaction: it is the caller's responsibility (and his partner's) to solve their problem. The emphatic production of 'you' on line 20 further underscores the notion that it is the caller's responsibility to fix his stated problem (c.f. the emphatic production of 'you' in Extract 8, line 79).

The counsellor's PDI is not successful in eliciting a suggestion from the caller regarding his plans to manage his relationship difficulty. Instead, the caller provides a 'well'-prefaced non-answer response (line 22) that can be seen, once again, to avoid producing the requested action (a suggestion for resolution/management). The counsellor's subsequent turn (lines 23-26) is produced just prior to the completion of the caller's non-answer response (i.e., in pre-terminal overlap, Jefferson, 1986). This turn takes the form of a focusing enquiry that works to topicalise the caller's past experience of consulting a health professional. At the point at which the counsellor comes in, the completion of the caller's turn – "I don't know" – is arguably projectable by what he has said. By not waiting until this response is complete, the counsellor works to reduce the turn-transition space following the caller's turn. That is, by coming in at pre-terminal overlap, the beat of silence that typically comprises the transition

space (Liddicoat, 2009) is not present and a small amount of overlapping talk ensues between the caller and counsellor. As Liddicoat argued, a reduced transition space is an interactional achievement and may be deployed to achieve particular ends. Here, by reducing the transition space, the counsellor's turn-at-talk inhibits the caller from producing further talk (i.e., from engaging in a post-answer agenda-shift) that would once again thwart the counsellor's attempts to transition into problem-solving.

The caller's response to the counsellor's focusing enquiry (line 27-28) is delayed by placeholders that work to break contiguity with the FPP thereby signalling an upcoming dispreferred action. The caller further displaces his SPP response from the counsellor's interrogative by first providing an assessment of the help that he received, even though this assessment was not invited by the counsellor's interrogative. In providing an assessment, and, more importantly, by providing an *unfavourable* assessment, the caller can be seen, once again, to resist the counsellor's line of questioning. That is, the caller works to undermine the counsellor's suggestion of seeking professional help as a viable option thereby resisting her attempts to open up problem-solving as a topic for talk. On lines 29 and 37-38, the counsellor produces further focusing enquiries that work to maintain as a topic for talk the caller's past experience of consulting a professional. Again, on lines 32-36, the caller's response arguably goes beyond the topical parameters of the counsellor's prior question (i.e., whether he consulted a doctor or a counsellor). Rather than attending specifically to this turn-at-talk in a way that might display affiliation, the counsellor, through her subsequent focusing enquiry (lines 37-38), works to sustain the transition out of troubles-talk and on to problem-solving.

The caller's concession on lines 41-42 (i.e., that he should revisit the thought-stopping techniques he learnt from his face-to-face counsellor) arguably provides a relevant space for the provision of advice. This advice (line 43), like that produced on lines 8-9, is formatted as an interrogative and packaged as an upshot of the caller's concession (i.e., the caller has just

claimed that he should probably revisit some of the techniques that he learnt, so the logical conclusion, once again, is that he seek professional assistance). The caller resists the advice embedded in the counsellor's interrogative as evidenced by the high-pitched, turn-initial 'well' (line 44). His indication that he has already implemented the suggestion and that it did not work is also a sign of resistance (c.f. the caller's resistance on lines 10-16). The caller's account for his claim, that seeking professional help did not work, again takes the form of a complaint against his partner ("my partner just (0.6) ridiculed me all the time an' an' to this counsellor an' said y'know he's got this problem he's this an' that an' .h", lines 47-49). That is, the caller resists the counsellor's advice by invoking the blameworthiness of his partner. This resistance again demonstrates the problematic nature of complaints in a setting such as *MensLine* that focuses on service provision.

Following this unsuccessful attempt at providing advice, the counsellor employs another PDI on line 60. The turn-final temporal reference "this time" arguably demonstrates the counsellor's orientation to the news that the caller's previous efforts at management have not been successful, hence, he needs to try a new course of action. In other words, she is still orienting to the relevance of advice-giving despite the caller's resistance. Again, rather than producing a suggestion for what a suitable course of action might be, the caller provides a non-answer response and an associated account for that response (c.f. the caller's account in Extract 8, lines 83-84). The caller's account does important stake-management work. The caller indicates that he has already done what he should do in terms of managing his problem: he has called the helpline. This account is an important demonstration of the caller's accountability for having contacted *MensLine*, which could potentially be undermined or called into question by the counsellor through his repeated resistance to problem-solving³⁰.

On lines 65-66, the counsellor moves to provide a referral even though the caller has not agreed to seek professional assistance. As in Extract 8, then, the counsellor appears to

treat the caller's prior non-answer response, and the associated account, as a cognitive construct – as indicating that the caller does not know what to do. As such, the counsellor works to provide advice regarding the caller's options in terms of management strategies. As might be expected, the counsellor's subsequent attempt to provide a referral (transcript not shown) is rejected by the caller. In this resistance, he again invokes his partner as a hindrance to the implementation of practical management strategies (he explicitly asks “one person can't make it work can they?”). This resistance again demonstrates that the caller's non-answer responses are not working merely as cognitive constructs reflective of his knowledge regarding what strategies to employ: his non-answer responses are working to resist the counsellor's attempts to transition out of troubles-talk and on to problem-solving.

Much like Extract 8, here, the caller and counsellor are working to do very different things through their turns-at-talk: the counsellor is working to adopt the role of service provider and position the caller as a service-recipient, whereas the caller is working to maintain the role of troubles-teller and the counsellor's role as that of troubles-recipient. The counsellor's attempts at topic transition, and the caller's attempts at topic-maintenance, are not successful (as they are occurring in tandem) and, as such, the caller and counsellor become engaged in an interactional tug-of-war. I provide two more examples that demonstrate this interactional pattern, and show how it is evidence of difference in orientation between caller and counsellor to the purpose of the interaction taking place between them. These extracts will not be analysed in as much detail as the previous two, but are provided to demonstrate the robustness of the patterns identified here. In the first of these examples below, the caller has called to talk about his relationship with his partner, which she has just ended in order to re-establish her relationship with her husband. Again, the various components of the three-step topic transition sequence have been labelled and arrowed. The extract begins approximately 16 minutes into a 22 minute call.

10. Call 130:

1 CO: 1 → I'm just wondering how ya gonna manage for the next few days and
2 weeks and so [ho:w- >what what what< are some of the things that
3 CA: [o:h
4 CO: you can draw on perhaps that you that you when ya cope from when
5 ya (0.2) cope from ya own marriage breakup an' .h co:s i:t sounds
6 as though ya have a deep affection for this woman, .hh that you
7 are very giving in the relationship (0.2) an' that you feeling
8 (.) quite (0.5) upset about i:t, or [hurt about it,
9 CA: 2b → [I said I told her to her
10 face I said (0.3) I just said (0.3) ↑you just fuckin' ↑used ↑me
11 (0.9)
12 CO: 3a → [so what do you
13 CA: 2b → [I said to her I
14 (0.2)
15 CO: 3a → [what do you think
16 CA: [>actually that's what I said to her.<
17 (0.5)
18 CA: 2b → I said you just used me.
19 (1.1)
20 CA: 2b → an' I an' I (0.8) an' yeah an' I just >left it at that.< I just
21 went you just used me a:nd I said well what are you gonna do. you
22 gonna allow him back here an' what ya gonna think of me or think
23 of him.
24 (0.6)
25 an' then I said see ya later goodbye I just walked out the door
26 CO: 3a → so how do ya think you might manag:e how are you gonna manage in
27 the next few da:ys
28 CA: .h oh like I said I'll just go back to wor:k [an'
29 CO: 3b → [what do you do so
30 work's a good (.) outlet for you?
31 (0.5)

32 CA: oh look I've got lots of things to do. [(u:m as I said a) woman
33 CO: [°yep°
34 CA: 2b → ain't gonna d- i- it's not gonna depress me
35 (0.8)
36 2b → so this lady had a chance for a change of li:fe, (0.8) she's
37 forty three seven years she's fifty. (0.2) I said to her d'ya
38 wanna wash his jocks for the next twenty years?
39 CO: mm::
40 CA: 2b → it's her choice. she's forty three
41 CO: mm:
42 CA: 2b → I'm forty one
43 CO: mm:
44 CA: 2b → y'know >do ya wanna d'ya wanna< come with someone who respects
45 you an' someone that you know that you getta (0.4) know that you
46 get along with (0.3) or do you wanna go back to the same old thi-
47 =he (will) hit.
48 (0.3)
49 †he won't change

Here, the counsellor's PDI (line 1) is associated with an account for its production (lines 5-8). Accounts are not typical following PDIs in the *MensLine* corpus. This could be because callers can focus their subsequent responses on these accounts rather than on the PDIs, as does the caller in the example above. Here, the caller's response to the counsellor's account appears to take the form of a complaint against his partner. The jump to high pitch peak on "used me" (line 10), for instance, is indicative of heightened emotive involvement (Selting, 1994, 2010). Similarly, Selting (2010) argued that swearing, such as that on line 10, is a verbal cue that, rhetorically and lexico-semantically, signals emotive involvement in telling a story, particularly with reference to displays of anger and indignation. This appears to be what is happening here: the caller is displaying his indignation at his partner's

behaviour which works to highlight the reprehensibility of her conduct. In other words, the caller is 'doing complaining'. Through this turn-at-talk, then, the caller avoids attending to the counsellor's interrogative that focused on what he can do about the problem and attends only to the final component of the counsellor's turn (i.e., her account and her assessment of the caller as "upset", line 8). By formulating a complaint against his partner, the caller arguably works to maintain the interaction as a troubles-telling rather than to collaborate with the counsellor's attempt to transition into problem-solving.

Following his turn-at-talk on lines 9-10, the caller provides a slot for the counsellor to respond to his complaint (line 11), but a response is not forthcoming. Importantly, as in Extracts 8 and 9, by not affiliating in response to this complaint, the counsellor demonstrates her orientation to the importance of problem-solving as a focus for the interaction at this point. Rather than affiliating, on line 12, the counsellor arguably works to reissue her PDI, however, the onset of her turn is simultaneous with that of the caller's on line 13 and she drops out. Through his turn-at-talk, the caller recycles elements of his prior turn that did not receive uptake. In doing so, not only does he work to maintain a troubles-telling frame for the interaction but he also demonstrates that a response was relevant to his previous turn-at-talk (c.f., the complaint sequences examined in Chapter 6 where callers routinely recycled their complaints in order to receive uptake). On line 15, the counsellor again dis-attends to the caller's complaint in an arguable attempt to provide a PDI but again drops out.

On lines 26-27 following the completion of the caller's complaint, the counsellor works once again to reissue her PDI and this time is successful. Again, by employing this interrogative she can be seen to dis-attend to the caller's complaint and demonstrate her orientation to the importance of problem-solving as the current focus for the interaction. On line 28, the caller answers the counsellor's PDI by providing a potential solution for management (i.e., working). Through her subsequent focusing enquiry on lines 29-30, the

counsellor works to sustain this topic of talk (i.e., problem-solving) for the conversation. The caller, though, does not appear to collaborate with this attempt. Instead, he provides a vague response (i.e., “oh look I’ve got lots of things to do.”, line 32) that works to bring the sequence embarked upon by the counsellor’s interrogative to a close (as evidenced also by the turn-final intonation), before once more formulating a complaint. This complaint accomplishes important post-answer agenda-shift work (lines 32-49) whereby the caller moves the topic for talk away from the agenda established by the counsellor’s interrogative and back to troubles-talk.

What is clear from this exchange is that the caller and counsellor are displaying different orientations to the purpose of the interaction taking place between them. Specifically, the counsellor is working to move the interaction towards problem-solving, whereas the caller is working to maintain the interaction as a troubles-telling. That is, the caller is focusing on what has happened and who is responsible for it, whereas the counsellor is working to focus on what can or will happen (i.e., what the caller can do about his problem). This example once again demonstrates that the caller orients to complaining (or talking on a trouble more generally) as his reason for contacting the helpline. The counsellor, though, can be seen to attend to the relevance of service provision as a focus for the interaction at this point. When the counsellor attempts to move the interaction towards problem-solving, the caller routinely resists these attempts resulting in a tug-of-war between the interactants that exemplifies their differing orientations to the purpose of the interaction.

In the final example below, the caller has contacted the helpline to talk about the breakdown of his marriage and the fact that he and his wife are not on good speaking terms. The caller only contacts his ex-wife via e-mail, and he had sent one on the morning of his call (this is the e-mail referred to by the counsellor on line 15). These e-mails are usually in reference to parenting issues for their two teenage children. Just prior to the extract, which

takes place approximately 17 minutes into a 37 minute call, the caller had been talking about his son (Ben, in the transcript) who has an autoimmune disease and is about to travel overseas. The caller informs the counsellor that he does not want his son to fly due to the recent swine flu epidemic, however, his ex-wife does not see this as a concern.

11. Call 136:

1 CA: now cos Ben is susceptible to anything going around
2 CO: mm::
3 CA: that's it an' a lot of medication also he can't have .hhh so
4 (0.8) that (.) because I said that that prompted her to get
5 moving on a travel medicine? .h it pro:mpted her to go: to the
6 specialist (.) at the royal children's hospital which I asked
7 her to .h but she didn't=but I said well if you're not going to
8 (0.2) well (.) I'm gonna have to .hh but then who's gonna pay
9 b'cuz she's paying for all the kids? .hh tu:h find out (0.2) e-
10 cos he's a nephrologist he's to do with the renal system or the
11 kidney system? (0.2) to find out the effects of all this (.)
12 different types of travel medicine, .hh u:m a- an' there's about
13 four different types of shots that he's gotta have?
14 CO: 1 → alright so what what what do you think you might do about this=so
15 you sent the e-mails what what
16 CA: oh sorry [okay well
17 CO: [yeah (that's alright) are you able to talk to him about
18 it?
19 (0.8)
20 CA: to who
21 CO: ya son.
22 CA: 2b → .h to my son. [we:ll what I did was I said (0.2) okay. Ben. this
23 CO: [yeah
24 CA: morning. .hh I'M (0.2) >letting you know< this I said (0.5) I- I
25 would advise you to start watchin' telly about the swine flu:

26 an' I said because it's it's GONE from a situation where people
 27 .h poo hooded it .hhh two months ago to no:w (0.4) they'r:e
 28 predicting that one in five aussies will get it. .hh an' I said
 29 now if the FLU:, >an' a lot of people get the flu< an' get over
 30 it an' it's no big deal however .hh u::m (0.2) they are making a
 31 big deal about it? (.) a::nd (0.8) >so therefore it is a big
 32 dea:l< an' I said an' you:: a::re you ha:ve you have a
 33 compromised immune [system
 34 CO: 3a → [so what's happ'ning what's gonna happen
 35 let's just [(move to that)
 36 CA: 2a → [WELL I I DON'T KNOW: I don't know what's [gonna happen
 37 CO: 3d → [but he's
 38 gonna make a de- he he he's probably gonna make a decision based
 39 on what mum says an' what dad says .hh an' he's gonna make the
 40 decision by the sounds of i:t
 41 CA: 2b → ((swallows)) [WELL I said
 42 CO: [unless you forbid him to go
 43 CA: 2b → well I said well there's two things mate you've just broken (0.5)
 44 since Monday you've just broken a bone in your foot you've now
 45 got a cast on? .hh an' it (.) you're due to go on the first of
 46 July, you've now got a cast on ya an' you've been told you have
 47 to wear the cast for at lea:st three weeks .hh an' then we're
 48 gonna ta:ke it off, an' we're gonna see how it is now you're
 49 going [away
 50 CO: 3a → [but how are you gonna manage wh- h:ow're ya gonna manage
 51 this through is it do you think it's ultimately his decision? how
 52 old is he? sixteen
 53 CA: ah seven↑teen
 54 CO: 3b → seventeen so [do you think it's ultimately his decision? or is it
 55 CA: [yeah
 56 CO: 3b → i- i- is he are you .h gonna give you as much information a-
 57 [as you can

58 CA: [I CAN give him as much int- information as I li:ke an' what I
59 [(think about)
60 CO: 3b → [an' are you okay with his decision?
61 CA: wuh u[::m
62 CO: 3b → [if he chooses to go [what happens
63 CA: [that's if that's if he's got the right
64 information? .h [u:m
65 CO: 3d → [but you've given it to him haven't you
66 CA: 2b → yeah but a:ll yeah but I know he's what I'm the problem is he's
67 heavily swayed by his³¹ wife who because .hh she went ahea:d like
68 a bull (0.2) she went ahead an' bought the tickets .h an' she
69 didn't take out travel insurance medical travel insurance [.hh
70 CO: 3d → [so you
71 can always add that i:n
72 CA: no you it's too late now for [swine flu
73 CO: [is it
74 okay

This extract begins with the caller engaged in troubles-talk regarding his son. The counsellor works to shut down this troubles-talk in favour of problem-solving by employing a PDI (line 14). Again, note the turn-initial 'alright', which signals that the counsellor is working to effect a marked shift in activity or focus for the interaction. The counsellor's interrogative engenders an extended response from the caller that appears to take the form of troubles-talk (lines 22-33). Importantly, this talk does not focus on what the caller can or will do about his situation, but focuses on what *has* happened. The counsellor works once again to shut down this topic for talk by coming in at pre-terminal overlap (line 34) in order to reissue her PDI. The design of the counsellor's turn arguably demonstrates her orientation to the caller's prior response as resistive. Specifically, "let's just move to that" – where 'that' can be seen as referencing a discussion about what *will* happen rather than what *has* happened –

demonstrates that the caller has not aligned with the counsellor's attempts to transition out of troubles-talk and on to problem-solving. Similarly, the turn-initial 'but' on line 37 works as a contrast marker to indicate that the caller's talk is not the type of talk invited by the counsellor's prior interrogatives.

The caller again does not collaborate with this proffered topic shift as evidenced on lines 43-49 by his resumption of the topical talk that the counsellor worked to shut down on lines 34-35. The counsellor also orients to this talk as resistive, as evidenced by her subsequent PDI on lines 50-51. Following this PDI, the counsellor continually provides focusing enquires and/or challenges (e.g., lines 51-52, 54-57, 60, 62, and 6) in an arguable attempt to sustain a transition out of troubles-talk. On line 61, for instance, the counsellor comes in at a point where the caller's turn is not semantically, grammatically, or prosodically complete. In doing so, she works to reduce the transition space thereby constraining the caller's responses to the parameters of her question (c.f. Extract 9, line 23). The caller, though, resists this line of questioning by formulating a complaint against his wife (lines 66-69). Although the counsellor arguably works to challenge this complaint on lines 70-71, the caller appears, successfully, to undermine this challenge on line 72 as evidenced by the counsellor's newsmark (i.e., "is it", line 73) and rejection finaliser ("okay", line 74).

Like the extracts examined in this chapter, here, the caller and counsellor appear to be engaged in an interactional tug-of-war whereby they are working simultaneously to frame the interaction in very different ways. Specifically, whereas the counsellor is working to transition out of troubles-talk and on to problem-solving, the caller is repeatedly resisting these attempts in order to maintain the focus of the interaction as one of troubles-telling. Importantly, these instances of an interactional tug-of-war again demonstrate difference in orientation between caller and counsellor towards the purpose of the interaction taking place

between them. In the next chapter, I discuss practical applications of this observed asymmetry both for clinical practice as well as research.

7.6 Chapter summary

The present chapter has focused on one of the routine ways in which *MensLine* counsellors work to transition out of troubles-talk: through the employment of interrogatives that work to elicit suggestions from callers regarding the implementation of solution-focused management strategies. I called these interrogatives ‘perspective-display interrogatives’ due to the similarities they shared with the interrogatives employed in the perspective-display series identified by Maynard (1989, 1991). I focused specifically on the most common way in which callers responded to these interrogatives: through resistance. I identified two types of resistance: (1) non-answer responses (e.g., “I don’t know”), and (2) extended responses that formed part of an attempt to resume troubles-telling, typically in the form of a complaint. Through this resistance, callers avoided providing the relevant response invited by the counsellors’ interrogatives – a suggestion for the implementation of management and coping strategies. In this way, callers undermined the action being implemented through counsellors’ interrogatives, and thwarted counsellors’ attempts to transition out of troubles-talk and on to problem-solving.

Importantly, this resistance demonstrated an interactional problem of disjunctive topic transition: in order for topic transition to occur successfully, the recipient(s) needs to collaborate with the proposed closure of the ongoing sequence and with the initiation of a new sequence. If this does not happen, then the proposed topic for talk is not embarked upon. In the sequences of interaction examined here, because callers did not collaborate with counsellors’ attempts to transition out of troubles-talk, advice-giving did not become a suitable topic for talk. Unlike other interactional environments where similar perspective-

display interrogatives were employed (e.g., educational counselling), the employment of PDIs in the *MensLine* corpus was not successful in establishing the provision of advice. Instead, the sequences examined here appeared most similar to those examined by Garcia (2000) in the institutional setting of mediation, where disputants routinely resisted mediators' attempts to solicit suggestions for resolution.

Unlike Garcia's (2000) mediation data, though, in the face of resistance, counsellors in the *MensLine* corpus did not maintain their role as troubles-recipient, as callers were working to position them, but worked routinely to transition on to problem-solving and to adopt the role of service provider. I identified a number of ways in which counsellors worked to effect this transition including: reissuing their PDIs; providing focusing enquiries that worked to topicalise callers' resistive responses or their prior troubles-tellings as a locus for problem-solving; providing advice; or overtly sanctioning callers' resistive responses, typically in response to their complaints. Of course, if these subsequent attempts at topic transition were not successful (i.e., if callers again displayed resistance), then counsellors typically worked, once again, to effect this topic shift. This pattern resulted in an interactional tug-of-war between caller and counsellor such that counsellors were working to transition out of troubles-talk and to open up a service-encounter frame for the interaction, whereas callers were working to maintain the interaction as one of troubles-telling. The sequential environment examined here again demonstrated a different orientation between callers and counsellors to the purpose of the interaction taking place between them: callers regularly oriented to the focus of the interaction as one of troubles-telling only, whereas counsellors routinely oriented to the relevance of the categorical roles of service provider and troubles-recipient.

The next and final chapter will provide a summary of the analyses presented in this thesis and discuss the implications of this observed asymmetry in orientation for research and clinical practice.

Chapter 8

Discussion

8.1 Introduction

In this chapter I provide an overview of the main analytic findings of the thesis. I also discuss the contributions this thesis makes to the field of Conversation Analysis (CA). Finally, I outline the potential methodological and practical implications of the present findings.

8.2 Overview of chapters

The first analytic chapter, Chapter 3, examined call-opening sequences in the *MensLine* corpus. The aim was to provide a background to the analyses presented in subsequent chapters where I explicated a number of interactional difficulties associated with talking on a trouble in this specific helpline context. In this chapter, I demonstrated how call-opening sequences constituted a hybrid between mundane telephone calls and calls to emergency services. Specifically, *MensLine* call-opening sequences routinely contained the greeting and “how-are-you” exchanges that are typical of mundane telephone interactions, as well as the categorical, institutional identification typical of calls to emergency services.

In this chapter, I also described a feature of *MensLine* call-opening sequences that demonstrated a different interactional pattern to a number of other helpline and telephone-based service providers: the routine self-identification by counsellors in their opening turns-at-talk. This self-identification was seen as a strategic move on the part of counsellors to provide a slot for counsellors to self-identify in return. Evidence for this interpretation came

from those calls where such self-identification was absent. In these instances, counsellors could be seen, routinely, to request callers' names, thereby demonstrating their orientation to the relevance of caller-identification.

Counsellor self-identification and the explicit practice of requesting callers' names have not been documented in other helpline settings. In calls to *Kids Help Line*, the absence of self-identification in counsellors' opening turns was seen as a resource that counsellors employed to ensure caller anonymity (Emmison & Danby, 2007). By contrast, in the *MensLine* corpus, the elicitation of callers' names appeared to form part of an attempt by counsellors to establish rapport with callers and to contribute to relationship development (i.e., to move away from a relationship status where the interactants were strangers). Counsellors further demonstrated an orientation to the importance of building a relationship with callers by repeatedly employing their names, for instance, when asking questions, providing assessments, or offering advice.

A robust feature of call-opening sequences in the *MensLine* corpus, and which informed the analyses undertaken in subsequent chapters, was the absence of a specific organisational request in counsellors' opening turns. The routine absence of such requests was interesting considering *MensLine's* adherence to a solution-focused model of counselling. Such requests would have positioned the interaction, at the outset, as a service-encounter whereby the focus of the interaction was on the caller's problem and ways to manage it. The absence of such requests was potentially one way in which counsellors managed – in sequences of interaction – the competing relevancies of their institutional roles of troubles-recipient and service provider. That is, by not providing an offer of help, counsellors avoided assuming that callers wanted advice, which provided callers the opportunity to talk on a trouble. Despite the absence of a standard institutional request in their opening turns, counsellors, at some point in their interactions with callers, oriented to the

importance of service provision, as well as troubles-receipting, as a focus for the interaction. As such, the absence of a standard service request in counsellors' opening turns appeared to create an ambiguity in call-opening sequences in terms of the type of call that was to take place (i.e., whether it was a troubles-telling, a service-encounter, or both).

The absence of a standard institutional request in counsellors' opening turns also placed greater onus on callers to initiate a first topic for talk. I identified two ways in which callers routinely initiated this first topic: (1) an indication that they had called the helpline for the explicit purpose of receiving advice, and (2) narrative reporting on a trouble. I showed that an indication that callers had contacted the helpline for the explicit purpose of receiving advice (what I referred to as a 'ringing for advice' reason-for-call accounts) was routinely oriented to by counsellors as a sufficient demonstration of callers' accountability for contacting the helpline. I argued that this was due to the canonical structure of these accounts, which routinely took the form of a three-step sequence involving:

1. An explicit 'advice'-formulation
2. The unpacking of that formulation through narrative reporting on a trouble
3. A specific request for advice packaged in the form of an interrogative.

Counsellors routinely oriented to this three-step sequence as a demonstration of callers' accountability for contacting the helpline (i.e., as their reason-for-call account). This orientation was evidenced by counsellors' moves to provide advice following the completion of the three-step sequence. The fact that counsellors reserved the production of substantive responses until the completion of this sequence was evidence that they not only oriented to this sequence *as* callers' reason-for-calling but, most importantly, as a *suitable* and *sufficient* reason for calling the helpline. I argued that this orientation on the part of counsellors was

evident because ‘ringing for advice’ reason-for-call accounts enabled counsellors easily to attend to their dual institutional role of troubles-recipient and service provider. That is, these accounts contained both a request for advice and narrative reporting on a trouble. These reason-for-call accounts therefore enabled counsellors to uphold the helpline’s two main aims of discussing coping and management strategies (i.e., adopting the role of service provider), and providing callers the opportunity to talk on a trouble (i.e., adopting the role of troubles-recipient). As such, calls where callers produced ‘ringing for advice’ reason-for-call accounts were not subject to the interactional difficulties and disfluencies routinely associated with narrative reporting on a trouble.

Although ‘ringing for advice’ reason-for-call accounts typically allowed for an unproblematic interaction between caller and counsellor, they were rarely employed in the *MensLine* corpus – ‘ringing for advice’ reason-for-call accounts were present in only 18% of calls. Most typically, callers initiated a first topic for talk through narrative reporting on a trouble. Chapters 4-7 focused on a number of interactional difficulties routinely associated with the production of these reports. Broadly, I identified two types of interactional difficulty: (1) establishing reason-for-call, and (2) third-party complaints. Through an exploration of these difficulties I explicated an interactional pattern of asymmetry between caller and counsellor. Specifically, whereas callers regularly oriented to the purpose of their call as one of troubles-telling only, counsellors were observed, routinely, to attend to the categorical roles of troubles-recipient *and* service provider.

Chapters 4 and 5 focused on the first of type of interactional difficulty that provided evidence of this interactional asymmetry: establishing reason-for-call. In Chapter 4, I described an interactional pattern whereby counsellors could be seen, routinely, to negotiate a reason-for-call that focused on problem-solving following narrative reporting on a trouble from callers. By working to establish the reason-for-call as one of service provision,

counsellors demonstrated an orientation to talk on a trouble as insufficient evidence of a reason-for-calling in this institutional context. This did not mean that counsellors oriented to callers' talk on a trouble as inappropriate, or as not in keeping with *MensLine's* aims – indeed, this did *not* appear to be the case. Instead, by working to establish the reason-for-call as one of service provision, counsellors demonstrated an orientation that troubles-talk *only* did not inform them how, or whether, callers wanted/needed to be helped. That is, talk on a trouble did not enable counsellors, properly, to attend to their service provider role.

The negotiation surrounding reason-for-call accounting that routinely occurred following narrative reporting on a trouble represented a difference to routine practices that have been described on other helplines (e.g., a computer software helpline) and telephone-based providers (e.g., calls to emergency services) that have similar aims of service provision. In these institutional contexts, reason-for-call accounting was routinely achieved reflexively through narrative reporting on a trouble. I argued that a different interactional pattern was evident in the *MensLine* corpus because of the types of problems being reported on: relationship troubles. Unlike calls to emergency services where the single action of dispatching a third-party could address a host of different problems, or calls to a computer software helpline where there was also arguably one way in which a problem could be fixed, in the data under analysis there were, arguably, myriad ways in which callers' complex, individual life problems could be solved or managed. Counsellors, therefore, worked explicitly to ascertain why callers had called the helpline in order, properly, to attend to their service provider role. The provision of interrogatives that worked to establish the reason-for-call was therefore one way in which *MensLine's* institution-specific goals of troubles-receipting and service provision were accomplished in interactional practice.

I identified two types of interrogatives that counsellors employed to establish the reason-for-call: (1) yes/no interrogatives (YNIs), and (2) wh-questions. YNIs were rare in the

MensLine corpus (only 3 instances in 169 calls). These interrogatives typically contained a candidate reason-for-call account for callers to accept/reject. The candidate accounts provided by counsellors varied in each call, but typically involved an explicit reference to service provision. For instance, a counsellor could enquire whether a caller had contacted the helpline in order to determine what he could ‘do’ about his stated problem, or a counsellor could enquire whether the caller had contacted the helpline to receive a referral. By limiting callers’ responses to a ‘yes’ or a ‘no’ response, and by displaying a positive polarity preference for a ‘yes’ response, YNIs worked explicitly to establish acceptance of a reason-for-call that focused on service provision.

By contrast to YNIs, wh-questions invited clausal/phrasal responses from callers. I identified two types of wh-questions employed by counsellors: (1) those that contained candidate reason-for-call accounts (i.e., a reference to ‘doing’ something about a caller’s stated problem, e.g., “what were you hoping we might be able to do?”), and (2) open-ended interrogatives that did not contain such candidates but enquired, more generally, into a caller’s ‘purpose’ or ‘reason’ for calling the helpline (e.g., “what’s the main purpose for your call today?”). Wh-questions with the embedded candidate of ‘doing’ something about a caller’s problem arguably worked to restrict the responses that callers could provide to those focusing on the provision of suggestions regarding the implementation of practical management strategies. This type of interrogative therefore clearly worked to establish the reason-for-call as one of service provision. By contrast, wh-questions that did not contain candidate reason-for-call accounts invited myriad potential SPPs as responses. This type of wh-question was the most common form of interrogative employed by counsellors to establish the reason-for-call following narrative reporting on a trouble.

Chapter 5 focused on the ways in which callers routinely responded to counsellors’ attempts to establish reason-for-call following narrative reporting on a trouble. I identified

only two instances where callers displayed clear, overt acceptance of counsellors' attempts to establish the reason-for-call as one of service provision. In both instances, caller acceptance was responsive to the provision of YNIs. By contrast to caller responses to YNIs, caller responses to wh-questions typically displayed evidence of resistance to counsellors' attempts to establish the reason-for-call as one of service provision. I examined two types of resistance:

1. Responses that avoided answering the premise of counsellors' questions and instead moved away from their topical agenda, and
2. 'Answer-like' responses that could be seen to answer counsellors' questions but which were nonetheless oriented to as resistive or problematic.

Responses that avoided answering the question were typically responsive to wh-questions that contained candidate reason-for-call accounts focusing on service provision (i.e., candidates of 'doing' something about callers' stated problems). These responses were seen as resistive in that they did not align with the candidate reason-for-call embedded in counsellors' interrogatives. That is, callers avoided providing suggestions with respect to 'doing' something about their stated problems, and instead worked to bring about a shift in the topical agenda initiated by these interrogatives. In this way, callers worked to resist the presuppositions upon which counsellors' interrogatives were based: that callers wanted to do something about their stated problems and that this was why they had called the helpline. In doing so, callers could be seen to orient to troubles-telling *only* as their reason-for-calling.

By contrast to responses that avoided answering the question, answer-like responses actually addressed the premise of counsellors' interrogatives. In the sense that answer-like responses did not work to effect a shift in topic/agenda from that initiated by counsellors'

interrogatives they did not appear, at the outset, to be resistive of the action that counsellors were working to implement. The resistive nature of these responses was arguably not evident at the outset because they were typically designed to address wh-questions that did not contain candidate reason-for-call accounts. Myriad potential reason-for-call accounts were therefore available to callers as legitimate SPP responses to counsellors' interrogatives. The way in which counsellors and callers typically treated answer-like responses, though, demonstrated their orientations to this response-type as resistive. These orientations were evidenced when counsellors worked to transform callers' answer-like responses into reason-for-call accounts focusing on the provision of advice, and when callers routinely resisted these attempts. The fact that counsellors routinely worked to transform callers' stated reasons-for-calling (i.e., their answer-like responses) demonstrated that counsellors did not orient to these responses as suitable reason-for-call accounts (i.e., ones focusing on service provision). In turn, the fact that the callers did not collaborate with counsellors' attempts to transform their reasons-for-calling into ones focusing on service provision was arguably an indication that they were not orienting to their reason-for-calling in this way.

In summary, Chapters 4 and 5 focused on an interactional difficulty routinely associated with talk on a trouble in this specific helpline environment: establishing reason-for-call. Through an exploration of this difficulty I explicated an interactional pattern regarding reason-for-call accounting that demonstrated how counsellors oriented, in sequences of interaction, to their dual institutional role of troubles-recipient and service provider. I also demonstrated that, through their routine resistance to counsellors' attempts to establish the reason-for-call as one of service provision, callers could be seen to orient to the purpose of their calls as one of troubles-receipting only. An exploration of this interactional difficulty therefore provided evidence of a pattern regarding a difference in orientation


between callers and counsellors to the purpose of calls taking place between them. This interactional pattern was explicated further in Chapters 6 and 7.

Chapters 6 and 7 focused on the second type of interactional difficulty routinely associated with talk on a trouble in this specific institutional context: third-party complaints. In Chapter 6, I showed how these complaints took the form of descriptions that provided an account of the egregiousness of a third-party's conduct, and in which the complained-about party was typically depicted as at-fault for the event or incident that the caller is reporting on. Complaint sequences in the *MensLine* corpus therefore contained an element of blame whereby a caller worked not only to allocate responsibility for the trouble or problem being reported on, but also for *resolution* of that trouble, to the complained-about party. Through these complaints, callers worked to elicit affiliation from counsellors in which they exhibited a similar stance to that of callers regarding the reprehensibility of another's conduct. In these complaint sequences, counsellors could be seen, routinely, to avoid any displays of affiliation and instead employed a number of non-affiliative, dispreferred responses including: (1) silences, (2) minimal acknowledgements, (3) interrogatives that provided a FPP with different action-trajectory, and (4) disagreement.

One potential explanation for this observed pattern of counsellor responses involved the interactional consequence of displaying affiliation with a complaint in the interactional environment of solution-focused counselling. Specifically, by displaying a similar stance as that exhibited by a caller (i.e., by providing the preferred response of affiliation), a counsellor would arguably have displayed an orientation to a third-party's behaviour as complaint- and blame-worthy. In this way, a counsellor could be seen to align with a caller's description of the *cause* of his problem as residing with someone else, and someone with whom the counsellor was not currently speaking, thereby placing the counsellor in a difficult position to broach the topic of problem-solving with the caller. As such, the routine provision of

dispreferred responses from counsellors arguably formed part of an attempt to attend to the relevance of service provision. However, because there was no basis of comparison in the *MensLine* corpus for how interactions might ensue following a display of affiliation, the interactional consequences associated with the provision of affiliation by counsellors require further empirical investigation.

In this chapter I focused on the interactional consequences that were routinely associated with an absence of affiliation from counsellors. Specifically, I described an interactional problem/difficulty associated with the provision of dispreferred responses to caller complaints: sequence-expansion. This expansion occurred when callers worked to elicit the preferred response of affiliation following counsellors' dispreferred responses. These subsequent attempts could take the form of subsequent FPP complaints or increments. In response to these complaints, counsellors typically continued to provide dispreferred responses, prompting callers to work, once again, to elicit the preferred response of affiliation. Callers' complaint sequences were therefore continually recycled, resulting in the following sequence of interaction:

1. FPP complaint
 2. Dispreferred SPP response
 3. Attempt to elicit the preferred response
- 

In the *MensLine* corpus, then, although the provision of dispreferred responses worked to overcome one type of interactional difficulty that could potentially undermine adherence to a solution-focused model of counselling – affiliating with callers' complaints – these responses simultaneously created another type of interactional difficulty that posed a similar problem: exiting from the complaint sequence.

Chapter 7 focused on one routine way in which counsellors worked to shut down complaint sequences that had undergone substantial post-expansion, and how these attempts resulted in an interactional ‘tug-of-war’. I examined a collection of interrogatives – what I called ‘perspective-display interrogatives’ (PDIs) – in which counsellors worked to elicit suggestions from callers regarding the implementation of solution-focused strategies. Although these interrogatives were typically employed in the local interactional environment of complaints, they could also be employed to shut down troubles-tellings that did not focus specifically on complaining, or following a counsellor’s unsuccessful attempt to establish a reason-for-call. I showed that these interrogatives worked not only to initiate advice-giving in a stepwise fashion (i.e., to progress to the provision of advice over a number of turns-at-talk), but they also worked to transition out of the complaint/troubles-talk sequence in a disjunctive fashion. That is, they worked to shut down the complaint/troubles-talk sequence and open up a separate, distinct topic for talk that focused on the provision of practical management strategies. By inviting suggestions from callers regarding the implementation of solution-focused strategies, the employment of PDIs also worked to privilege callers’ epistemic authority in relation to counsellors’, thereby upholding the helpline’s basic tenet of avoiding the direct provision of advice.

Callers typically worked to undermine counsellors’ attempts to transition out of troubles-talk by providing the following dispreferred responses in second position: (1) non-answer responses (e.g., “I don’t know”), and (2) extended responses, in which callers attempted to return to troubles-telling, typically in the form of a complaint. These responses worked to resist the premise of counsellors’ interrogatives in that they displaced the relevance of the forthcoming SPP – a suggestion regarding the implementation of solution-focused strategies – and worked instead to maintain the focus of the interaction on troubles-telling. In the face of this resistance, counsellors could be seen, once again, to attempt to initiate topic

transition by: (1) reissuing their PDIs, (2) providing focusing enquiries that worked to topicalise callers' resistive responses or components of their prior troubles-tellings as a locus for problem-solving, (3) offering advice, and (4) overtly challenging or sanctioning callers' resistance, particularly their complaints. These subsequent attempts at topic transition were again met with resistance from callers.

In these topic transition sequences, then, callers were working to maintain the focus of interactions on troubles-telling (or complaining), whereas counsellors were attempting to transition out of troubles-talk and on to problem-solving. However, because both caller and counsellor were attempting to perform these actions *at the same time*, neither was successful in framing the interaction as either a troubles-telling or a service-encounter. Instead, an interactional tug-of-war appeared to ensue between the interactants. The term 'tug-of-war' was not used to describe a sequence of interaction in which the caller and counsellor continually interrupted or talked over one another, or where the interaction culminated in what might have been seen as an argument or conflict. Rather, the term was used to describe a frame-struggle whereby caller and counsellor worked simultaneously to frame the ongoing interaction in very different ways. Through this frame-struggle, and much like the sequences of interaction that counsellors were working to shut down, the sequences of interaction in which counsellors worked to transition *out of* troubles-talk/complaining involved substantial sequence-expansion. This expansion could once again be seen to undermine counsellors' attempts to adopt their institutional role of service provider.

Through an exploration of callers' complaints and the 'tug-of-war' or frame-struggle that regularly ensued when counsellors attempted to transition out of these sequences, Chapters 6 and 7 again provided evidence of an interactional pattern regarding an asymmetry or difference in orientation between caller and counsellor to the purpose of the interaction taking place between them. Specifically, whereas callers repeatedly oriented to the relevance

of troubles-telling (or complaining more specifically) as their reasons for contacting the helpline, counsellors routinely oriented to the importance of service provision *as well as* troubles-receipting as the focus of interactions. This interactional pattern of an asymmetry arguably has important consequences for the pervasive assumption that men display a preference for solution-focused outcomes in their interactions with various health professionals, as well as for the services that are shaped by this assumption. Before moving on to explicate these consequences in detail, I first provide an overview of the contributions that the present thesis has made to the field of Conversation Analysis.

8.3 Contributions to the field of CA

The findings outlined in the previous section have contributed to the CA literature on helpline interaction by demonstrating how the institutional philosophies and goals of a men's relationship counselling helpline, which are shaped by an assumption that men display a preference for solution-focused outcomes, are played out in sequences of interaction. I explicated a number of key differences in respect of other helplines and telephone-based service providers, particularly in terms of reason-for-call accounting (Chapter 4), and demonstrated how the different interactional patterns that can be observed in these various institutional settings result from the implementation of different institution-specific goals. Through an exploration of these differences, I have contributed to the development of a "unique fingerprint" (Drew & Heritage, 1992, p. 26) for over-the-phone interactions on *MensLine* whereby the interactions that take place can be seen to share features with, and to differ from, those in other institutional environments as well as those identified in mundane telephone interactions.

This thesis has also contributed to the CA literature on resistance by showing how resistance can occur, not with reference to advice *per se* (although such resistance routinely

occurred in the data corpus), but in interactional environments that might be considered *advice-implicative*. That is, in the interactions analysed in the present thesis, caller resistance did not occur with reference to the explicit provision of advice (although this happened on occasion), but with reference to counsellors' attempts to attend *to the relevance* of their institutional role of service provider. In the sequences of interaction examined here, then, counsellors were attempting to turn the call from a troubles-telling to a service-encounter in which the reason-for-call would *become* the provision of advice or information rather than simply talking on a trouble. Callers therefore appeared to be resisting a shift in categorical roles that was *about* to take place, and where they would inevitably be relegated to the position of service- or advice-recipient, rather than a shift that had *already* taken place. The resistance examined here therefore might be best categorised as pre-emptive or anticipatory in nature – as premonitory to the actual provision of advice.

The findings in the present regarding caller resistance have also built upon those identified by Jefferson and Lee (1992) in the context of mundane advice-giving interactions. As outlined in Chapter 1 (Section 1.3.2), Jefferson and Lee noted that resistance to advice in everyday talk routinely occurred when advice was provided in the midst of a troubles-telling. Jefferson and Lee argued that this resistance formed part of an attempt from troubles-tellers to maintain the interaction as a troubles-telling and to resist their relegation to the categorical role of advice-recipient. Although the resistance examined here occurred in a different interactional environment to that examined by Jefferson and Lee (i.e., prior to the provision of advice), it shares similarities in that, in the *MensLine* corpus, caller resistance also appeared to form part of an attempt to maintain the interaction as one of troubles-telling.

Through an examination of caller resistance, the present thesis has also contributed to the CA literature on asymmetry in talk-in-interaction. Most CA work on interactional asymmetry has focused on the differences in epistemic authority and knowledge that can

manifest in (1) advice-giving encounters (e.g., Heritage & Sefi, 1992; Waring, 2007), and (2) lay-professional interactions, for instance, doctor-patient interactions (e.g., Ariss, 2009; Pilnick, 1998; Robinson, 2001). Drew (2006) examined a slightly different form of asymmetry that occurred in after-hours calls to a doctor's surgery whereby the caller and doctor could be seen to orient differently to the purpose of the doctor's diagnostically-relevant questions. Specifically, callers appeared to orient to the doctor's diagnostic questions as offering the interactional space to provide a convincing argument for the doctor to make a home visit. By contrast, the doctor appeared to be relying on these diagnostic questions to confirm his already formed decision *not* to make a home visit based on an assessment that the caller's condition was non-urgent.

The findings in the present thesis provide evidence of an interactional asymmetry not in terms of epistemic authority or knowledge but, like the interactions examined by Drew (2006), in terms of *competing participant orientations*. Rather than demonstrating competing orientations to the purpose of a particular type of question, callers and counsellors demonstrated competing orientations to the *purpose of the interactions* taking place between them. I showed how such competing orientations manifested themselves in sequences of interaction and how they became consequential for the conduct of callers and counsellors. Importantly, this interactional pattern regarding an asymmetry between caller and counsellor arguably has consequences for the pervasive assumption that men display a preference for action-oriented, solution-focused health care encounters, both in terms of the methodological procedures that are typically employed to investigate men's help-seeking practices, as well as for the male-specific health interventions that are shaped by this assumption. I move now to explicate the consequences of this observed asymmetry for research and institutional practice.

8.4 Contributions to the literature on men's help-seeking

This study was the first of its kind to examine men's help-seeking practices *in situ*. As such, the results generated here differ markedly from those produced through questionnaire, interview, and focus group research. Unlike the majority of studies advocating for men's purported preference for action-oriented health care (e.g., Adamsen et al., 2001; Klemm et al., 1999; Robertson & Fitzgerald, 1992; Smith et al., 2008b; Vingerhoets & Van Heck, 1990), men in the *MensLine* corpus appeared to display a different preference – a preference for simply talking on a trouble, over and above a discussion concerning coping and management strategies. The findings of the present thesis therefore represent a challenge to the pervasive assumption that men display a clear preference for solution-focused outcomes when interacting with various health professionals, and provide evidence that this assumption is likely to be an oversimplification of the types of interaction that men may be seeking.

The findings in the present thesis have also provided support for Seymour-Smith's (2008) claim that men's purported preference for solution-focused outcomes “*may be linked more to the presentation of a hegemonic masculine identity than to a real preference for action*” (p. 795). As argued in Chapter 1 (Section 1.2.4), the methods typically employed to investigate men's help-seeking practices, such as focus group interviews, are likely to result in specific patterns of interaction whereby men's reported preference for action-oriented health care is based on a performance of traditional masculine ideals (i.e., ‘doing being masculine’), rather than an actual preference that manifests in real-life health care encounters. The findings generated in the present thesis provide support for this argument by showing that, in actual interactions taking place on a men's counselling helpline, men appear to display a preference that is *inconsistent* with hegemonic masculine ideals – a preference for talking on a trouble rather than the provision and receipt of practical management strategies.

By examining men's help-seeking *in situ* and providing evidence of a male preference for talking on a trouble, the present thesis also demonstrates the importance of examining *actual* records of conduct when investigating men's help-seeking practices. Traditional research methods, such as questionnaires, focus groups, and interviews, are not likely to capture the complex, nuanced interactions that take place when men consult various health professionals. Such traditional methods provide only a partial or limited picture of men's help-seeking behaviours. As such, future studies examining men's help-seeking practices might focus on how these practices are played out in sequences of real-life, naturally-occurring talk-in-interaction.

Future studies examining men's help-seeking behaviours would benefit not only from an investigation of men's help-seeking *in situ*, but from an investigation of the interactions that take place in a variety of naturally occurring health care encounters. Patterns of interaction are likely to vary between settings where different institutional goals are in place and where men consult for different types of problems. Through an investigation of the ways in which men interact with health professionals in a range of health care contexts, researchers will generate a better understanding of men's health needs and preferences and whether, and to what extent, these preferences are context-specific. It is possible, for instance, that the repeated orientation to talk on a trouble observed in the present data was due to the *type* of problems being discussed – relationship problems – as well as the fact that interactions were taking place over-the-phone. Such orientation to troubles-talk may not be evident when men consult health professionals on the basis of physical symptoms, or when they consult health professionals in the context of face-to-face encounters.

Nonetheless, through an exploration of men's help-seeking practices *in situ*, the findings of the present thesis have shown that men as help-seekers should not be treated as an homogenous group – that is, not all men necessarily display a preference for solution-focused

outcomes. In turn, health care interventions aimed specifically at men need to reflect these differing preferences in order to address men's health needs adequately. The applications of these findings for institutional practice will be outlined next.

8.5 Practical implications

The potential practical implications of findings from the present thesis relate to ways that *MensLine* counsellors might be able to minimise the resistance that is routinely encountered when they attempt to attend to the relevance of their service provider role. In providing these recommendations I am not arguing that *MensLine's* counselling framework is inappropriate and that they should avoid providing advice – after all, some callers *do* ask for advice, and these discussions form part of counsellors' duty of care to ensure the long- and short-term safety of callers and their families. Rather, by showing specifically where, how, and why in sequences of interaction caller-resistance typically occurs, the present thesis provides some insight into how this resistance might be mitigated.

One implication from the present study is that it might be beneficial for counsellors to include a standard offer of help or institutional service request in their opening turns. This may help to resolve some of the ambiguity surrounding 'what type of call this is' (e.g., troubles-telling or service-encounter). It may also prime callers to hear this request as an informing that advice-giving or problem-solving will, at some point, become a focus for the interaction, perhaps minimising subsequent resistance to counsellors' attempts to attend to their role of service provider. Providing a service request may also minimise the routine production of caller tellings that are not self-evidently concluded at any point, thereby minimising the need for counsellors to establish the reason-for-call, which, as I have shown, is routinely a source of interactional difficulty in the form of resistance from callers. However, considering that counsellors did not provide a standard service request in their

opening turns and that therefore there was no basis of comparison for how interactions might unfold following such requests, this suggestion remains merely that – one based on indicative patterns in the data corpus. The extent to which such requests are successful in reducing resistance in actual practice is a matter that requires further empirical investigation.

Another potential practical implication concerns the types of interrogatives that counsellors could employ if they are attempting to establish reason-for-call. The findings in the present thesis provided some evidence that YNIs were more successful than wh-questions in establishing the reason-for-call as one of service provision. This interactional pattern could have been evident because YNIs did not contain a presupposition that callers wanted to do something about their stated problems, but merely enquired whether service provision was what a caller wanted/needed from the call. YNIs also did not enable callers to provide myriad potential SPP responses in which they could work to resist the topical agenda initiated by counsellors' interrogatives. Through the provision of YNIs, then, counsellors were able to establish the relevance of problem-solving as an appropriate reason-for-calling but in such a way that this framing was positioned as something that the caller wanted/needed rather than as an institution-specific goal that needed to be enacted. In this way, it was potentially difficult for callers to undermine the action that counsellors were working to implement. Due to the low numbers of YNIs employed by counsellors in the *MensLine* corpus, however, the success of YNIs in establishing the reason-for-call as one of service provision is a pattern that requires further investigation. By employing YNIs in their interactions with callers, *MensLine* counsellors may gain a better understanding of whether such interrogatives are successful in establishing the reason-for-call as one of service provision or whether, across a large number of instances, they are likely to be met with resistance.

The specific recommendations provided above are tentative in nature and require further empirical investigation. Ideally, what the analysis in the present thesis provides in

terms of practical applications is an avenue for *MensLine* counsellors to use the identified patterns, as well as the audio recordings and written transcripts, in group training workshops. Within these workshops, counsellors can reflect on their own and each others' practices and collaboratively discuss ways to reduce caller resistance in various sequences of interaction (e.g., call-opening sequences and when counsellors attempt to transition away from caller complaints). Through having access to the recorded helpline interactions, counsellors are able to 'see' the interactional consequences of certain routinised forms of interaction and methods of practice, and to consider alternative response-types that might be more successful in accomplishing institutional and interactional goals. Such workshops have been successfully implemented in other helpline contexts, including calls to a childbirth helpline (Kitzinger, 2011) and a neighbour mediation helpline (Stokoe, 2011), in which conversation analytic materials were used to assist in the training and development of communicative skills, and to enable call-takers to identify more effective ways of dealing with interactional trouble.

On a final note, it is important to point out that the repeated orientation on the part of callers to the activity of troubles-telling could be due to the *type* of counselling that is taking place: a one-off counselling encounter. Although many callers are repeat callers, they do not necessarily speak to the same counsellor each time they call. As such, the calls analysed here do not contain the same type of continuity that would be found in face-to-face counselling, or the helpline's Call Back Service where callers speak to the same counsellor over a period of six calls. In the one-off counselling encounters examined here, then, callers may orient to the importance of troubles-telling over problem-solving because counsellors are unfamiliar with their story. In addition, the absence of a follow-up interaction means that there is not the same onus on callers to implement counsellors' proffered suggestions, and they are not likely to be held accountable for not doing so. The type of counselling encounter taking place here could therefore account for some of the observed resistance in the *MensLine* corpus.

A number of callers in the corpus also indicated that they consulted face-to-face counsellors. It is therefore possible that talk about management strategies takes place in these settings. In this sense, it is possible that callers may be using *MensLine* merely as an avenue to talk about their problems prior to their next appointment with a face-to-face counsellor, again accounting for the observed resistance. An interesting point of comparison to the interactions examined here, then, would involve an investigation of calls to the helpline's Call Back Service, where continuity may place greater onus on callers to become involved in a discussion concerning coping and management strategies (i.e., in these interactions, counsellors would be looking for callers to make some strides in managing their relationship difficulty rather than discussing the same problem or going over the same ground each time they call). An examination of the interactions that take place in this specific interactional environment would provide a better understanding of whether the resistance and repeated orientation to talk on a trouble identified in the present thesis is a consequence of the one-off style of counselling taking place. An investigation of calls to the Call Back Service would also further contribute to the development of a unique fingerprint of *MensLine* interactions.

8.6 Conclusion

The present thesis examined the nature of calls to a men's relationship counselling helpline, *MensLine Australia*. The aim was to examine how the helpline's institution-specific goals and mandates were enacted, in practice, in sequences of interaction. Consistent with the mainstream literature on men's help-seeking, the helpline works from the framework of a solution-focused model of counselling. As well as assisting callers to develop practical management strategies to better deal with their relationship difficulties, *MensLine* counsellors have a second institutional aim: providing callers the opportunity to talk on a trouble. The

helpline's aims of (1) listening to callers' troubles (i.e., providing them with the opportunity to talk about problems), and (2) assisting with the development of practical coping strategies and solutions in respect of such problems, can be seen to correspond to the call-taker categories of troubles-recipient and service provider, respectively. A number of CA studies have focused on the contradictory nature of these categorical roles. The aim in the present thesis was to examine how, and whether, these contradictory roles created competing relevancies for counsellors, and how counsellors could be seen to manage these competing relevancies over the course of their interactions with callers.

The analysis demonstrated that when callers indicated that they had called the helpline for the explicit purpose of seeking advice, interactions between callers and counsellors appeared to run smoothly. That is, counsellors oriented to these reason-for-call accounts as sufficient reasons for contacting the helpline. This observed pattern was accounted for by the fact that these accounts enabled counsellors to attend to their dual institutional role. By contrast, when callers did not indicate that they were seeking advice, but resorted to the production of narrative reporting on a trouble, a number of interactional difficulties routinely ensued. These difficulties occurred when counsellors attempted to attend to the relevance of their institutional role of service provider, and when callers routinely resisted these attempts. This resistance was taken as evidence of callers displaying their orientation to the purpose of the interaction taking place: talking on a trouble rather than discussing practical management strategies. In these sequences of interaction, then, an asymmetry or difference in orientation could be seen to manifest itself between caller and counsellor, which took the form of competing orientations to the purpose of the calls taking place.

Considering that *MensLine*'s adherence to a solution-focused model of counselling is consistent with the mainstream literature on men's help-seeking, it was interesting to find in this interactional context that, not only did callers rarely request advice, they also routinely

resisted counsellors' attempts to attend to the relevance of their service provider role. Most research arguing for men's preference for action involves questionnaire and interview studies where men report on hypothetical health care situations. When questionnaires and interviews are employed as a means to explore men's help-seeking behaviour, it is likely that men are engaging in practices of 'doing being masculine'. That is, men are working to present themselves *as* men by explaining their help-seeking practices in terms of a need to receive information and advice rather than emotional support. By examining the actual interactions that occur on a men's counselling helpline, a different pattern emerged that represented a challenge to the assumption that men display a preference for action-oriented, solution-focused outcomes. In the data analysed here, there was also evidence of a preference by men for talking about problems, rather than simply seeking solutions. The findings generated in the present thesis based on analysis of actual practice therefore provide evidence that men's purported preference for solution-focused health care is likely an over-simplification of a more complex system of interactional organisation.

This interactional pattern regarding men's help-seeking preferences also has important consequences both for future research and institutional practice. In terms of research, the present thesis has demonstrated the importance of examining actual records of conduct when investigating men's help-seeking behaviours. In terms of interactional practice, the findings provide fresh new insights into how services dedicated to men might be developed and designed to ensure closer matching with men's help-seeking needs. The analysis has shown that men as help-seekers cannot be treated as an homogenous group: it cannot be assumed that *all* men display a preference for solution-focused outcomes, and services dedicated specifically to men need adequately to reflect this. Addressing men's health needs is important in reducing men's reported reluctance to seek help for a variety of

health-related issues, and to ensure that men who do consult health professionals are satisfied with the service offered and that they continue to seek help in the future.

Notes

¹ 'Health professionals' is used here to refer collectively to various health care providers including doctors, nurses, counsellors, and mental health professionals etc.

² Simmons and LeCouteur (2011) provide an analysis of a similar phenomenon in the context of Cognitive Behavioural Therapy (CBT) interactions. In this institutional setting, therapists routinely engaged in hypothetical active voicing (HAV) whereby they adopted the speaking position of clients in order to enact hypothetical talk (typically between the client and a third-party) that clients could use in future situations. HAV was typically employed in sequences of interaction where clients had displayed resistance to therapists' prior proposals for behaviour change. In these proposal sequences, HAV worked to pre-empt further resistance from clients by forestalling "predictable resistance responses such as, "I don't know what to say", or "I wouldn't know how to deal with that situation", and so on" (Simmons & LeCouteur, 2011, p. 3179).

³ Although agreement may be seen as the preferred response in most instances, in that it would work to further the action projected in the FPP, this is not always the case. For instance, in the case of self-deprecations, *disagreement* is typically considered the preferred response (Liddicoat, 2009; Schegloff, 2007).

⁴ One exception to this rule concerns the provision of preferred responses to topic proffering sequences, which work to engender sequence-expansion rather than sequence-closure (Schegloff, 2007).

⁵ In 35% of calls where counsellors self-identified in their opening turns, callers also self-identified. Of those calls where callers did not self-identify, 40% involved a request-for-name from the counsellor. There were only two calls in the data corpus where counsellors did not self-identify in their opening turns. Counsellors are encouraged, via their guidelines, to provide their first name only. *MensLine* does not appear to have any guidelines in place that instruct counsellors to seek out callers' names in return.

⁶ 47% of all "how-are-you" enquiries initiated by counsellors were answered, by callers, with a problem-oriented response. Other response-types included troubles-premonitory responses (e.g., "not too bad"), and responses where callers did not allude to the presence of a problem/trouble (e.g., "I'm good"), the latter of which were rare in the data under analysis (only 8 instances in 169 calls).

⁷ It is also noteworthy that, in this example, the caller's "how-are-you" is not reciprocated by the counsellor. Of the 73 calls where callers initiated a "how-are-you" enquiry, counsellors returned the enquiry on 52% of occasions.

⁸ Counsellors did, at times, provide prompts in their subsequent turns-at-talk. These prompts rarely took the form of an offer of help but were of the more general form "what's happening?". Counsellors produced these

open-ended interrogatives either (1) following a problem-oriented response to a “how-are-you” enquiry (as discussed with reference to Extract 1), (2) if the counsellor interrupted the caller in order to request his name (e.g., Extract 3, lines 20-21 and 23; and Extract 4, lines 19 and 21), or (3) when a caller was displaying difficulty in initiating a first topic for talk (i.e., when the caller did not initiate a first topic for talk despite being afforded the interactional space to do so. See Chapter 6, Section 6.3, for examples of this type of prompt).

⁹ This includes a small number of calls where such requests occur outside of the call-opening sequence (e.g., following narrative reporting).

¹⁰ Callers did not always use the term ‘advice’. Some callers ask for ‘help’ or ‘feedback’, but these formulations were less common.

¹¹ This call also provides interactional evidence that counsellors orient to *both* of their institutional roles – that of troubles-recipient and service provider – as equally important (i.e., they do not appear to privilege one role over the other).

¹² As I show in subsequent chapters, callers appear to demonstrate a different orientation. That is, callers routinely orient to the activity of troubles-telling *as* their reason-for-calling. It is these competing orientations by callers and counsellors to the reason-for-call that provide evidence of an asymmetry or misalignment. I explain this asymmetry in more detail in subsequent chapters.

¹³ In the *MensLine* data corpus, providing callers with referrals (e.g., to face-to-face counsellors or anger management programs) is one routine way in which counsellors work to enact their institutional role of service provider. That is, offering a referral provides counsellors with a resource to ensure that callers have a strategy to better manage their relationship difficulty. As such, working to negotiate a reason-for-call that focuses on the provision of a referral can be seen as part of an attempt by counsellors to negotiate the reason-for-call as one of service provision.

¹⁴ Although wh-questions may not restrict the types of responses that recipients can provide to the same extent as YNIs, they do specify what *type* of SPP response is relevant from the recipient in the next turn (Schegloff, 2007). For instance, an interrogative beginning with ‘who’ makes relevant a person reference whereas an interrogative beginning with ‘when’ makes relevant a time reference (Schegloff, 2007; Raymond, 2003). According to Schegloff (2007), “when a response delivers the type of answer the question made relevant; it is ‘type-conforming’; if the response is an answer, but the answer is not fitted to the type made relevant by the question, it is ‘non-conforming’” (p. 78). For instance, if a speaker provided a time reference SPP in response to

a wh-question beginning with ‘who’, then this response would not conform to the answer-type specified in the speaker’s FPP interrogative and so would be considered non-conforming.

¹⁵ Although not always (c.f. preference for recognition over non-recognition) (Schegloff & Lerner, 2009).

¹⁶ Part of the interactional problem in this call is arguably that the counsellor cannot provide assistance because the caller’s problem constitutes a legal matter – something that *MensLine* is not equipped to deal with. This could have been part of the problem in Extract 1 as well. Legal issues, though, are only problematic insofar as counsellors work to adopt the role of service provider. In other words, the problem in these sequences of interaction still arguably stems from the fact that counsellors are not able to do their job of service provision. Hence, in this extract, the counsellor offers a candidate service provider: an ombudsman. It is therefore possible that the interactional trouble evidenced in various calls in the corpus, such as when counsellors attempt to establish reason-for-call, is due to the *types* of problems being discussed and dealt with, in addition to a tension between troubles-telling and service provision. Further empirical investigation of troubles-tellings and problem presentations in various helpline contexts would be required to explore this possibility.

¹⁷ Jefferson (1988b) argued that in conversation there is potentially a ‘standard maximum silence’ of about one second. Hence, a one-second gap (and any other gaps over one second) is considered substantial.

¹⁸ Chapter 6 will show further instances where counsellors decline to adopt the role of complaint-recipient.

¹⁹ This type of interrogative, what I have called ‘perspective-display interrogatives’, will be examined in Chapter 7.

²⁰ The status of the caller’s turn as a dispreferred response is further illustrated by the turn-initial ‘well’.

²¹ This is not unusually long in this institutional environment considering the average length of calls is approximately 38 minutes.

²² This does not mean that affiliative responses were absent in the data set – they were present, but not in the interactional environment of complaints. One local interactional environment in which affiliation was common was in call-closing sequences. In these sequences, counsellors often complimented callers on their decision to ring the helpline and/or on their abilities to manage the stressful situations that they have called to talk about. The affiliation provided in call-closing sequences was therefore different to that which callers are seeking in the interactional environment of complaints.

²³ Turn-final low-fall pitch is not the only prosodic marker of turn completion. See Szczepek Reed (2004) for a more in-depth discussion.

²⁴ The caller's repair-initiator also demonstrates another type of preference in conversation: the preference for answers over non-answers (Sidnell, 2010).

²⁵ Stepwise topic transition is not necessarily the same as a stepwise entry to advice. As I show here, although counsellors are working to enter *into* advice-giving in a stepwise fashion (i.e., over a series of turns-at-talk) by eliciting callers' suggestions prior to the provision of advice, they are actually working to move *out* of troubles-talk in a disjunctive fashion.

²⁶ Callers can also be seen to respond, at first, through silences like those in Garcia's (2000) mediation data. However, these silences, rather than constituting a caller's response in its entirety, worked to delay an upcoming SPP thereby signalling the imminent provision of a dispreferred response. That is, these silences are typically followed by resistive responses. In this sense, these silences can be seen to 'premonitor' callers' upcoming resistance. See Simmons (2010) for an examination of silences as premonitory resistance devices to advice in the context of Cognitive Behavioural Therapy interactions.

²⁷ Hutchby (2002) did show how the therapist could *treat* the child's "I don't know" responses as a cognitive construct (i.e., as reflecting his limited knowledge) in order to achieve specific ends (i.e., reworking the child's resistance as therapeutically relevant in the sense that the child should *not* know why his parents are fighting because he is only a child).

²⁸ Although such interrogatives can be employed in the *MensLine* corpus, they are rare in comparison to future-oriented PDIs. Importantly, like future-oriented PDIs, they also differ from the advice-implicative interrogatives examined by Butler et al (2010) in that they do not actually contain advice.

²⁹ Recall that warm lines differ from helplines in that they are pre-crisis and staffed by peers rather than professionals.

³⁰ Indeed, there is one example in the data set where a caller's accountability is challenged by the counsellor following his repeated resistance to the counsellor's advice. It is noteworthy that, in this example, the counsellor attempted to transition into advice-giving through the employment of a PDI, and that these attempts at topic transition were routinely resisted by the caller. The caller's resistance to the counsellor's advice occurs on line 8-9 in the extract below, and the counsellor's associated response, in which she attempts to challenge the caller's resistance by calling into question the caller's accountability for contacting the helpline, occur on lines 10-16 (arrowed):

Call 132:

1 CO: an' check in with him an' say look y'know if you can't if you can't really explain
2 to me today, when I come back .h t- to see you about the x box in two weeks or
3 whatever I would like to spend (0.2) y'know fifteen minutes with you or half an'
4 hour .h where you can somehow explain to ya daddy (.) why you can't come to see me.
5 (0.6)
6 or c- why we can't spend time together so it might be that you're meeting for a
7 mo:vie: .h it might not be a formal thing where he comes to you and st[ays with you
8 CA: [but y'know if
9 I insist too much I I feel very b:ad within myself I feel as if I am a [bad person
10 CO: → [oh okay well
11 that's that's fine, but .h (0.6) I mean (0.8) it's good you ring us but if it's the
12 same thing over and over we we would wanna be expecting some sort of (0.3) sh:ift or
13 change that's what we'd be looking for=in the relationship .h in your understanding
14 of it (0.4) whatever it might be an' that would be an' I'm getting the s:ense that
15 it's just pretty sitting s- ah little bit like the water in the puddle it's just
16 sitting there
17 CA: °m°
18 CO: → no splashe:s, (0.8) no being dried up no being filled up it's just sitting there

Importantly, here, the way in which the counsellor orients to the caller's resistance once again demonstrates an orientation to her dual institutional role of troubles-recipient and service provider. That is, the counsellor can be seen to orient to the importance of the caller contacting the helpline not only to talk about his problem, but also to develop ways to better manage that relationship difficulty and his reaction to it.

³¹ Here, the caller employs the reference term 'his wife', however, it is assumed that this is meant to be 'my wife' (i.e., his son's mother).

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Appendix A: Information Sheet for Counsellors



SCHOOL OF PSYCHOLOGY INFORMATION SHEET FOR COUNSELLORS

Project Title:

Men's presentation of concerns on a relationship counselling helpline

Purpose of the study:

You are invited to participate in a study that is being conducted by researchers from the University of Adelaide along with Crisis Support Services, the organisation responsible for managing *MensLine Australia*. The project aims to gain a better understanding of how men use the helpline, *MensLine Australia*. Of particular interest is how men introduce their concerns, or reason for the call, over the telephone. Please note that the aim of the study is *not* to evaluate the performance of counsellors.

What the study involves:

This project involves analysing samples of telephone conversations that will be recorded by *MensLine Australia* over a period of about six months. As calls to *MensLine Australia* are already recorded, it will not be necessary to set up any new recording equipment.

If you consent to participate in this research, all of your telephone calls will be recorded during the data collection phase unless a caller specifically requests at the beginning of his or her call that they do not wish for their conversation to be recorded. You will be asked to invite as many callers as possible to participate in the project and will be provided with a standard consent script to follow in order to obtain caller consent. This consent script will inform callers of the purposes of the research and their rights regarding the use of their recorded telephone conversation.

You will be asked to obtain consent from callers at the end of each telephone call. First, you will be asked to follow a standard script (see below) in order to invite callers to participate in the research. An example of the script is shown below:

“Before we finish this call I want to ask if you would do something else to help us to develop our service. You may recall that the message at the beginning of the call mentioned that we sometimes record calls. I want you to know that this call has been recorded and, with your permission, I would like to keep the recording for research purposes. Would that be okay with you?”

If callers do not express interest in participating in the research project then you will be able to end the call-taking process as usual. If callers do express interest then you will be asked to follow a standard consent script in order to provide them with information regarding the research. An example of the standard consent script is shown below:

“Thank you for expressing interest in this research project. Before we finish up I need to let you know a few more things about the research. We are doing this research to help improve the delivery of services to men in Australia. Your participation is completely voluntary; you do not need to take part if you do not wish to. A researcher external to MensLine Australia will be listening to the call and typing up what we have both said word for word. Some parts of your call that have been transcribed may be included in research that is published in scientific journals. Any information that might identify you personally, such as your name and location or those of anyone else you mention will be removed or changed. More information about the research can be found on the MensLine Australia website and the results of the research will be available on the website at the end of the project.”

Do you have any questions about this?

Do you understand what we have discussed?

Do you agree for us to use your call in the research?”

Benefits of the study:

The potential benefits of this research include encouraging more men to use telephone counselling and referral helplines such as *MensLine Australia*, providing information to governments that can be used to develop policy on men’s health and well-being, and further tailoring the services that are offered by *MensLine Australia* to suit the types of needs that are expressed by callers.

Ethical considerations:

If you agree to take part in this study, your identity will not be made public in any way in the research. Any information that might identify you (e.g., the use of names or places) will be changed in any written reports or presentations of the general research findings. If you agree to take part in the research, you should also be aware that you may withdraw from the study at any time, should you change your mind, and any of your calls that have been recorded will not be used for research purposes. If you decide not to participate in this research your non-involvement will not affect either your employment status or your working environment at *MensLine Australia*.

Consent:

If you would be willing to participate in this study, we please ask that you read and sign the attached consent form.

Feedback:

General results regarding observed patterns in callers’ presentation of their concerns will be presented to Crisis Support Services at regular intervals throughout the duration of the project (approximately every six months). Written summaries of the ongoing findings can also be made available to consenting counsellors at this time and at all stages we encourage input and feedback from counsellors involved in the project.

For any concerns or questions feel free to contact the researchers from the University of Adelaide:

Associate Professor Amanda LeCouteur
Room 510 Hughes Building
University of Adelaide, North Terrace Campus
Phone: 8303 5557

Rebecca Feo (PhD Candidate)
Room 254 Hughes Building
University of Adelaide, North Terrace Campus
Phone: 8313 0077
E-mail: rebecca.feo@adelaide.edu.au

For anything concerning the ethics of this request, please contact the convenor of the Subcommittee for Human Research in the School of Psychology, Dr. Paul Delfabbro, 8303 4936

Appendix B: Consent Form for Counsellors



THE UNIVERSITY OF ADELAIDE HUMAN RESEARCH ETHICS COMMITTEE

STANDARD CONSENT FORM FOR PARTICIPANTS IN A RESEARCH PROJECT

1. I,..... *(please print name)*

consent to take part in the research project entitled:
Men's presentation of concerns on a relationship counselling helpline

2. I acknowledge that I have read the attached Information Sheet entitled:
Men's presentation of concerns on a relationship counselling helpline

3. I have had the project, so far as it affects me, fully explained to my satisfaction by the research worker. My consent is given freely.

4. Although I understand that the purpose of this research project is to improve understanding regarding how men present their concerns on a relationship counselling helpline, it has also been explained that my involvement may not be of any direct benefit to me.

6. I have been informed that, while information gained during the study may be published, I will not be identified and my personal results will not be divulged.

7. I understand that I am free to withdraw from the project at any time and that this will not affect my employment status or working environment.

8. I am aware that I should retain a copy of this Consent Form, when completed, and the attached Information Sheet.

.....

(signature)

(date)

Appendix C: Transcription Notation

Below is a list of the symbols used within the Jeffersonian Transcription System (Jefferson, 2004) to denote various features of talk. This list is not exhaustive but provides a definition of all the symbols that have been used in the present thesis.

(.)	Micropause; pause less than 0.2 seconds
(0.2)	Numbers in brackets measure pauses in seconds, e.g. 2 tenths of a second
hh	Aspiration (out-breath)
.hh	Inspiration (in-breath)
?	Questioning or sharp rise in intonation
¿	Moderate questioning intonation
,	Continuing or slight rise in intonation
.	Final or stopping intonation
↑	Sharp rise in, or upward, pitch (i.e., shift into especially high pitch)
↓	Sharp fall in pitch (i.e., shift into especially low pitch)
kno:w	An underscored letter followed by a colon represents a falling intonation in which the pitch falls within the word (i.e., at the underscored part of the word).
kno:w	An underlined colon indicates a rising intonation in which the pitch rises within the word. The pitch shifts marked with colons and underscores are not as pronounced or sharp as those marked by arrows.
m::e	Colons indicate the place in a word where a speaker has stretched out the preceding sound. The more colons, the more elongation of the

	prior sound. One colon is used per syllable-length.
end=We	Equal signs indicate that speech is linked and runs on. The ‘latching’ of successive talk can be that of the same or a different speaker.
[]	Square brackets mark the start and end of overlapping speech
<and then>	Speech enclosed by these symbols is spoken more slowly in comparison to surrounding talk
>he said<	Speech enclosed by these symbols indicates speeded-up talk; talk that is noticeably faster than surrounding talk
STOP	Capitals mark speech that is louder than surrounding speech due to raised volume
<u>can</u> ’t	Underline used to indicate emphasis
heh, hah, huh	Laughter particles
◦ ◦	Words enclosed by these symbols are spoken noticeably quieter compared to surrounding speech
m(h)ight	An ‘h’ enclosed by brackets indicates a word produced with laughter
mhlight	An ‘h’ not enclosed by brackets indicates a breathy sound in the production of a word
-	Indicates the production of a word has been abruptly cut off
.shih	Sniff
~ ~	Words enclosed by tildes are pronounced in a ‘wobbly’ voice typically indicative of crying
hhh .hjh h	Combinations of “hhs” – some of which have full stops before them to indicate that they are inhaled rather than exhaled, and many of which have voiced vowels – are indicative of sobbing
()	Words enclosed by brackets indicate what a speaker may have said but which was difficult to discern from the recordings

(()) Description of non-talk activity e.g., telephone ring or clearing of throat. Also used to denote potentially identifying material (e.g., phone number or location).

((unclear)) Used to denote unclear talk (i.e., talk that could not be properly deciphered).