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On being heard in emergency calls. The development of hostility in a fatal emergency call

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Abstract

This article analyses misalignment and the development of hostility in a series of three consecutive emergency calls by the same caller. Using Conversation Analysis as methodology, I show how problems of establishing intersubjective understanding and interactional alignment led to spiraling hostility, ending in aggravated conflict involving insults and threats. The focus of analysis is on the operators' displays of hearing, understanding and acceptance of the caller's request. The first type of misalignment involves the establishment of mutual understanding concerning the location and the physical state of the patient. Second, problems of alignment are caused by the operators withholding displays of acceptance, substituting such receipts by continued interrogation. The development of hostility follows a pattern where this alleged lack of response is treated as potential rejection and made the object of complaints by the caller. The caller's complaints are in turn met by reproaches for improper behavior and by requests to "calm down", sparking off even more emotional complaints. The analysis thus shows how problems of alignment may lead to conflict by the participants' treating each others' disaligning actions as indications of uncooperativeness and hostility.

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1. Introduction

In January 2010 a Turkish woman residing in Oslo, Norway, died from a heart condition while an ambulance was waiting for 15 minutes just around the block. The reason the ambulance personnel did not enter the building was that the operator of the emergency service had reported that the caller had acted in a hostile and threatening way, and that they should wait for police assistance. This article analyses the development of conflict and hostility in the series of three emergency calls that preceded this fatal decision. The analysis shows how problems of establishing intersubjective understanding lead the participants to mutually attribute to each other an attitude of uncooperativeness and hostility.

In these calls, the callers make explicit allegations of not being heard. Already in the first call the caller says: "You're not listening to what I'm saying buddy". And in another call, a different family member voices the same frustration: "You're not listening to me. I wish it was *your* grandmother". The current analysis will focus on the development of hostility between the callers and the operators, with special attention to the question of how the operators display their hearing, understanding and acceptance of the request made by the callers.

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2. Misalignment and disaffiliation in emergency calls

The concept of *misalignment* refers to a mismatch between structural properties of different conversational contributions, so that the projected sequence or activity is in some way hampered (cf. Stivers et al., 2011, p. 21). For instance, a disaligning response to a question or a request may not accept the presuppositions expressed in the first pair part or conform to the projected design of the answer. Such misalignment may or may not lead to mismatches at the interpersonal level, such as disagreement, rejection or outright hostility. This type of mismatch concerns the *affiliation* between the parties. The topic of the current article is how misalignment at the structural level, caused by for instance problems of hearing and understanding, develops into hostility between the parties, manifested by disaffiliative actions such as rejections, complaints, reproaches and insults.

Previous studies of emergency calls have identified recurring problems of alignment which may constitute potential sources of disaffiliation. One such feature is the way the request for assistance is formulated. Usually, requests are formulated as a statement of a need ("I need the paramedics please?"), an explicit question ("can you send an ambulance..."), or a description of a medically actionable condition ("we have a little boy who can't breathe") (Zimmerman, 1992). Larsen (2010) shows that statements of need display a lower degree of entitlement to service than explicit requests and are more easily rejected by the call-taker. In her data, this request format is used more by second language speakers than by native speakers, and thus contributes to putting this group at disadvantage. In a different study, Whalen et al. (1988) present a case study of a failed emergency call where the caller does not use any of these formats, but instead says: "I'd like tuh have an ambulance at..." (p. 346). They note that this form of requesting does not present the provision of service as a contingent matter but rather takes the entitlement to service for granted. As such, it seems to belong to a different type of service encounter. Tracy (1997) considers such a format as invoking a "customer service frame" rather than a "public service frame" since it resembles the type of request used in commercial service encounters, such as ordering a taxi. Furthermore, she presents interview data where call-takers express a negative attitude to this form of emergency request (p. 323).

A second potential source of disaffiliation is the caller's frustration with the operator's questions in the "interrogative series" (Zimmerman, 1992). Given that callers often do not know the institutional logic motivating the questions asked (cf. Sarangi and Slembrouck, 1996) they may experience them as unnecessary, "bureaucratic" or irrelevant, and see them merely as delaying or obstructing the provision of help (Heritage and Clayman, 2010). For instance, in the call analyzed by Whalen et al. (1988) the caller responds to the operator's questions by comments that question their relevance and legitimacy (such as "How thuh hell do I:: know", p. 352). Tracy (1997) explains this sort of frustration by the callers' orientation to the customer service frame, where they do not expect to be required to justify their request.

Third, hostility may arise from the call-taker explicitly or implicitly expressing doubt about the validity of the caller's report or the legitimacy of the request for assistance. A report about a state of affairs may be vulnerable to doubt concerning two things, the requirements of adequate description and the caller's epistemological position, that is, his or her perceptual access to the events and social positioning towards them (Whalen and Zimmerman, 1990; Cromdal et al., 2008). The request for assistance may be vulnerable to doubt concerning its institutional relevance (in this case its status as a medically actionable ("doctorable") condition, cf. Heritage and Robinson, 2006). Other features that may give rise to doubt include inconsistencies in the report and seemingly irrelevant information (Garcia and Parmer, 1999). Doubt may be expressed implicitly by (repeated) requests for confirmation or clarification, or explicitly by requests for accounts of the perceptual and epistemic basis of the report (Jönsson and Linell, 1996; Landqvist, 2001).

Finally, the caller's expression of frustration and the call-taker's handling of it, may itself become a source of further hostility. Dissatisfaction with the call-taker's handling of the request may lead the caller to start complaining. A complaint is an argumentative move, and may induce the call-taker to respond in kind, for instance by defending herself or by returning the complaint. For instance, in the case described by Whalen et al. (1988) the caller attacks the operator's competency and character, and the operator responds by defending her position rather than resuming the interrogation. Further, when the complaints become increasingly exasperated, she responds by commenting on his language and thereby produces a complaint in return: "Sir, don't curse me" (p. 353). In this way, the activity of interrogation is "contaminated" by the activity of argument. A central feature of the latter is that the participants do not respond to the communicative action performed by the interlocutor but instead *return* the personal attack contained in it (cf. Goodwin and Goodwin, 1987). Tracy and Tracy (1998) outline some further features of different forms of *face attack* that occur in emergency calls that develop into disputes.

Many of these features may be observed in the current case as well. However, a different problem seems to be even more central to the development of conflict, namely the callers' impression of not being heard. Evidence for this impression is found both in explicit metacomments and in their response patterns. The analysis is therefore focused

¹ Jönsson and Linell's (1996) study is of police interrogations and also includes more drastic expressions of mistrust, such as confronting the reporter with contrasting information or probing for alternative versions of the events, but these types do not seem relevant here.

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