

A caring interview: Polar questions, epistemic stance and care in examinations of eligibility for social benefits

Ekström, Mats, Bruhn, Anders and Thunman Elin

This version submitted Feb 28, 2019.

Published in *Discourse Studies* 2019, 21: 375-397

Author e-mail adressess

mats.ekstrom@jmg.gu.se

anders.bruhn@oru.se

elin.thunman@soc.uu.se

Abstract

Based on conversation analysis, this study investigates central practices in what is defined as a caring interview, in the context of welfare administration. Caring refers to (1) a helpful interviewing in reformulations of questions taking interviewees' difficulties to answer into consideration; (2) a caring attitude in the framing of questions, showing understanding of clients' circumstances; and (3) professional's enactment of expertise in assessments of clients' disabilities and care needs. Data includes a corpus of 43 recorded interviews in which officials at the Swedish Social Insurance Agency interview clients who have applied for benefits. The study adds to research on interactional sensitivity, polar questions and epistemic stance in institutional interaction. The study shows how the interviewer prioritizes confirming polar questions, takes responsibilities of knowing into account and reduces the epistemic gap to the interviewee in practices of a caring interview. This makes the interviewing markedly different from standardized and bureaucratic interviewing.

Key words

Conversation Analysis, caring, epistemic, interview, institutional interaction, polar question, sensitivity, social benefits, welfare administration, yes/no questions

Introduction

Interviewing plays a central role in the professional work of welfare administration. In different agencies, interviews are conducted to investigate clients' perceptions of the services provided to them, to identify clients' problems and needs, to obtain information for actions and treatment, and to assess and decide on eligibility for services (Antaki, 2002; Antaki and O'Reilly, 2014; Antaki, Young and Finlay, 2002; Heritage and Clayman, 2010; Iversen, 2012; McCabe et al, 2017; Raymond, 2006; Summerson Carr, 2010; Suoninen and Jokinen, 2005). This study focuses on the latter. Determining eligibility for services and economic support is a professional task involving assessments in the application of rules, the results of which often have serious consequences for clients in difficult life situations. This study builds on telephone calls in which officials at the Swedish Social Insurance Agency interview individuals who have applied for benefits within two areas of compensation: sickness compensation (a form of disability pension) and childcare allowance (a compensation for parents with a child with serious diseases or disabilities).

The study has two *aims*, interrelated to form one *general argument*. The first aim is to investigate central practices in what we describe as a caring interview. Previous research has shown how interviewers, for example, reframe scripted questions and deviate from neutral interviewing in orientations to interactional sensitivity and care (Antaki, Young and Finlay, 2002; Houtkoop-Steenstra and Antaki, 1997). How actors in the design of their talk display a "sensitivity to the particular other(s) who are the co-participants" (Sacks, Schegloff and Jefferson, 1974: 727) is a general object of study in conversation analysis (Heritage and Clayman, 2010). We use the concept of caring interviews to refer to particular forms of sensitivity and care in interviews with clients in institutional settings. More specifically, we explore three different forms of caring: (1) *helpful treatment* of clients in their participant role as *interviewees*, referring for example to how questions are designed to consider clients' difficulties in answering; (2) care for the client as a *person with troubles*, given that through the framing of questions professionals can show *attentiveness and understanding* to a client's circumstances and problems; and (3) enactment of the *professional's expertise in care*, because in the context of the interviews studied, professionals not only asked questions from unknowing positions, but displayed expert knowledge about care and health issues.

Second, the aim is to add to the research on epistemic stance and question design in institutional interaction (Heritage and Clayman 2010: 140; Heritage, 2012; Heritage and Raymond, 2012; Raymond, 2006, 2009). Epistemic stance here refers to how participants' in interaction display and manage their relative access to knowledge and their rights and responsibilities to know (see also Drew, 2018). The design of question turns index what Heritage (2012:6) describes as the "epistemic gradient between an unknowing (K-) questioner and a knowing (K+) recipient". A declarative question format that invites confirmation is, for example, different from an interrogative polar question or a q-word question, in indicating more knowledge regarding the matters asked about. As Drew (2018: 165) emphasizes, in conversation analysis (CA) epistemic is about attributions of knowledge (not what individuals actually know); that is how participants "attribute (states of) knowledge to themselves and one another". In interviews, the epistemic stance is central to how the questioners manage their own responsibilities of knowing (or not knowing) and what they can expect (or not expect) the interviewee to know (and tell).

In the case investigated, we observed an intriguing discrepancy between institutional guidelines and actual practices of interviewing. The guidelines recommend that "open" (q-word) questions be given priority in the examination of eligibility: "[a] basic principle of the conversations is to use open questions as far as possible, that is, questions that cannot be answered with only yes or no" ("Guidelines for the examination of sickness compensation"). However, in measuring the

1,473 questions from 43 interviews included in our study, we found that 68 percent are polar questions (based on definitions in Stivers and Enfield, 2010), many of which are designed for confirmation of information. These are questions in which the questioner invokes knowledge and takes a knowing stance (Heritage, 2012; Heritage and Clayman, 2010: 140). Several studies have observed the centrality of polar questions (interrogatives designed to favor a particular answer and declaratives inviting confirmation) in institutional contexts (e.g. Houtkoop-Steenstra and Antaki, 1997; McCabe et al 2017; Thompson, Howes and McCabe, 2016). In our study, the interviewers' tendency to prioritize confirming polar questions is indicated not only in the frequency of such questions but in the actual design of question turns and sequences. We found frequent cases of q-word questions reformulated into polar questions within the question turn. These are question turns in which the interviewer's epistemic stance and the related epistemic gradient is amended (Drew, 2018; Heritage 2012). We became interested in the role of confirming polar questions in the context of the interviews. In our data polar questions are used, for example, in follow-ups to clarify the information given in clients' answers (cf. Antaki 2002). However, in this study we focus on the epistemic stance displayed in caring interviewing.

This leads us to our general argument: indicating knowledge and reducing the epistemic gap between interviewer and interviewee are central to the practices of a caring interview. These characteristics render the caring interview a form of institutional interaction that is different from standardized and bureaucratic interviewing. While the questioner in standardized interviewing tends to (and is expected to) design questions from an unknowing position, in caring interviewing the questioner invokes knowledge, manage and correct their epistemic stance as a resource to (1) be *helpful* to the interviewee (caring 1), (2) be *attentive and understanding* to clients' problems and circumstances (caring 2), and (3) be an *expert* regarding the problems involved (disorders, illness, etc.) (caring 3). The distinction between a standardized and caring interview does not refer to two distinctive activities, but rather orientations in the design of questions, shaping more or less bureaucratic or caring relationships with clients (cf. Raymond 2006).

By fulfilling the two aims of the study, we also seek to contribute to applied CA. Knowledge regarding how orientations to care shape practices of interviewing is of considerable relevance for professionals. CA provides an understanding of how tasks and social relations are managed in question design, with great potential to facilitate professionalization and improvements in institutional practices. We discuss the applied aspects of the study, including some concrete initiatives, in the concluding section. In this context, we address the more general issue of how officials have to balance professional roles and tasks in interaction, and the tensions between caring forms of interviewing and specific institutional requirements and needs of information (cf. Antaki, 2002; Antaki and O'Reilly, 2014; Thompson, Howes and McCabe, 2016).

The next section briefly presents previous research. We then provide information concerning the institutional context, method and data, before proceeding to analyze the three forms of the caring interview.

Previous research: caring and epistemic stance

Several studies have shown how interviewing in institutional settings is adapted to the sensitivity of the interviewee when institutional goals and guidelines are transformed into practice. Helpful interviewing was observed and analyzed by Houtkoop-Steenstra and Antaki (1997) in a study focusing on how interviewers reformulated questions and deviated from the script of a standardized Quality of Life questionnaire. More complex questions were reformulated into yes/no questions. This general practice was applied in different situations in the interviews. When interviewees displayed difficulties in answering, the interviewers reformulated the initial question

in a third turn and provided a yes/no questions making the task of answering easier. The simplified polar question was also provided in first turn positions when respondents displayed difficulties in answering the scripted questions in the prior interaction. Houtkoop-Steenstra and Antaki (1997: 302) also show how reformulated questions tend to project a positive and optimistic answer.

In a study of interviews with people with learning disabilities concerning the service they receive at a publicly funded agency, Antaki, Young and Finlay (2002: 452) provide further examples of how polar questions are used in “treating the respondent ‘helpfully’” by offering what Pomerantz (1988) describes as “candidate answers”, i.e., questions that specify a particular information to be confirmed (or not) by the respondent. This study also highlights practices of interviewing that embody care for the individuals and their personal situations. In analyzing comments and advice in interviewers’ third turns, Antaki, Young and Finlay (2002) identify a shift in footing from impartial interviewing towards a more personal form of talk enacting a role as a caring professional. They explain the interviewers’ practices as an indication of a “dilemmatic choice between treating her or his interlocutor as a simple interviewee or a person for whom they have a duty to care” (Antaki, Young and Finlay, 2002: 444).

In another study of interviews in this institutional context, Antaki (2002) shows how epistemic access is invoked in practices of helpful interviewing. Examples demonstrate how interviewers insert sequences in response to what is deemed an inadequate answer, revise more general questions, and provide candidates with answers that indicate that “the interviewer ‘knew better’ than the respondent what the proper answer to the question ought to be ...”. The context makes sense. The interviewers are care staff who know their respondents. Antaki also identifies distinctive practices in how shared knowledge is invoked in the question design. For instance, interviewers refer to episodes from respondents’ lives as well as information that respondents have reported that, as Antaki (2002) notes, makes it difficult for them not to confirm.

How professionals, in the design and framing of questions display attentiveness and concern for patients or clients’ circumstances have been analyzed mainly in research on medical visits. In a study of questions used by psychiatrist in clinical encounters, Thompson, Howes and McCabe (2016) observe a positive impact of declarative questions on the therapeutic relationships. This is explained with reference to how such questions are used to display empathy an understanding of the patient’s stance and feelings. Two normative principles have been identified: the principles of optimization and problem attentiveness (Heritage, 2009; Heritage and Clayman, 2010; Stivers 2007). The first suggests that questions by default “should be designed so as to allow patients to confirm favorable framed beliefs and expectations about themselves, their health, and their circumstances” (Heritage and Clayman, 2010: 144). Orientations to the principle of optimization have been observed in different institutional contexts. For example, in a study of psychiatric assessments, Antaki and O’Reilly (2014) demonstrate how in the design of alternative questions, practitioners tend to put more negative alternative and serious states of affairs as the first of two alternatives, rendering them less expected and likely answers. However, in questions concerning the health problems that represent the reasons why the patients contacted the doctor, optimizing can be considered inappropriate, and problem attentiveness is instead the default principle (Heritage and Clayman, 2010:145; Stivers 2007). The principle suggests that questions should be framed so that the problems and reported symptoms are assumed and not questioned.

This research thus provides evidence of different forms of caring in interviews with clients: (1) the interactional care of the interviewee, and (2) the care of the client, his or her problems and circumstances. Although these can be interrelated in practices of interviewing, they are sensitive to the individuals in different respects, and relate to different norms and moral responsibilities. In

the first form, caring is about helping the interviewee to fulfill normative obligations of answering the questions asked (Heritage and Clayman, 2010: 23). In caring for a client with troubles, interviewers relate to moral responsibilities and normative principles. The research also highlights examples of what we described in the introduction as (3) the enactment of the professional's expertise in care. This is illustrated in Antaki's (2002) observation of how care staff interviewers claim exclusive knowledge in treating clients' answers as inadequate and suggesting a better answer to the question.

The data and examples referred to in the research described above largely consist of polar questions, often designed with preference for confirmation. We thus have reasons to assume that such questions are of particular relevance in caring interviews. A distinctive feature of polar questions is the way in which the questioner is positioned as more or less knowledgeable in relation to the respondent (Heritage and Raymond, 2012; Raymond, 2006). As Heritage and Clayman (2010:141) illustrate for example in yes/no declarative questions, the questioner takes a knowing stance and invites confirmation of what is assumed to already be known.

The significance of epistemic access and stance in helpful and caring interviewing is indicated in the research illustrated above. As Pomerantz (1988: 372) argues, polar questions typically include "candidate answers" indicating some knowledge about the situation. In providing candidate answers, the questioner can make answering less demanding, display attitudes to the respondent and embody a cooperative relationship. Furthermore, problem attentiveness and an understanding of a client's circumstances requires the questioner to take shared knowledge – what has been learned about the client/respondent from prior interaction – into consideration in the design of questions (Heritage and Clayman 2010: 145).

The relationship between knowing stance and caring is further analyzed in this study. Translated into the context of these interviews we can expect the principle of problem attentiveness to apply in more or less sensitive questioning regarding the client's problems that constituted the reason why they applied for specific benefits. However, the institutional context is different from previous research. The institutional task of officials is to examine the client's problems in order to assess his or her eligibility for support, and not (for example) to promote the health of the patients through providing diagnoses and treatment. It is in this particular institutional context that we explore the three forms of caring in interviews.

The institutional context

This study includes data from two different areas of compensation handled by the Swedish Social Insurance Agency: *sickness compensation* and *childcare allowance*. Sickness compensation is intended for people with such permanently reduced work ability that they cannot function in regular work, at least not full-time (Bruhn, Thunman and Ekström, 2017). Reduced ability should be assessed as permanent. Most often, compensation becomes an option for those who have been on sick leave for a long time and where several measures from different actors have been made for rehabilitation without any progress being made. Childcare allowance is a form of compensation paid to parents who have a child who is sick or has a disability. This includes costs for daily care and medicine, and assistive devices. The child's need must continue for at least six months.

Applications are handled by officials specialized in investigating these cases. In both compensations a medical certificate must be enclosed with the application. The examination calls analyzed in this study are in most cases required in an official's investigation of the applicant's eligibility for compensation. In the case of sickness compensation it is principally the applicant's *work ability* that should be examined, while in childcare allowance it is the *care needs*.

The internal guidelines for the examination calls describe the aim of the call, the topics to be included, and general recommendations for how the questions should be framed. For example, when it comes to sickness compensation, work ability should be examined through questions concerning work as well as leisure activities. However, there is no standardized script to follow and the guideline emphasizes that the interviews should be adapted to the particular case. The calls recorded for this study also display clear differences in how the examinations are performed. In some cases the officials systematically go through question by question on a number of themes, while in other cases a more limited number of questions are asked. It is beyond the scope of this study to explain the differences. The practices analyzed in this paper are observed across different interviews.

Method and data

The study follows the methodological practices of conversation analysis (CA), thus carefully examining the participants' design of turns and actions, and the sequential turn-by-turn dynamics of the interaction (Sidnell, 2010). In institutional CA, the method is essentially applied to understand how professional work is carried out and institutional objectives are achieved (Heritage and Clayman, 2010).

The data includes 43 examination calls from four regional offices and 17 officials, recorded during 2017 and 2018. The length of the calls varies from about 15 to 70 minutes, except a few that were significantly shorter. The total time of the data is about 2 hours. All recordings were first transcribed turn by turn, albeit without detailed indications of pauses, overlapping talk, intonation and other aspects of speech delivery. Based on a first preliminary analysis (using the rough transcripts as well as listening through the calls) a selection of sequences was then transcribed in greater detail according to the conventions of CA. The excerpts presented in the article have been selected to illustrate more general practices identified in the analyses of the data. Thus, for each of these practices there are many more examples in the data.

The study was conducted with the informed consent of all participants and was approved by the Swedish ethical vetting board. Officials at the four offices were informed at a staff meeting and on paper about the aim of the study, the methods, confidentiality and voluntary participation. Those who were willing to participate notified and signed a consent form. In this regard, the officials are thus recruited through self selection. A recording device was installed on their phone and they were asked to record calls for about two weeks. The informed consent with clients was associated with more critical considerations. It was not possible to inform with a pre-recorded voice before the conversation began, partly because in some cases it was the officials who called the client. We also found it unethical to inform at the end of the call when it has already been recorded. Instead the officials asked about informed consent in the opening of the call. The disadvantage is of course that this makes the call openings different from an ordinary conversation. All data presented outside the research team has been anonymized, and the data is stored on hard drives protected from intrusion in accordance with the data security routines at the department.

Analysis

Caring 1: Being helpful to the interviewee

The interviewer can design questions in ways that take the difficulties or demands of answering into consideration. This is what we describe as caring for the client in her role as an interviewee. We are not referring to the more general feature of polar questions offering candidate answers that renders it relatively easy for the respondent to answer (Pomerantz 1988), but the practices of interviewing where the helpfulness and reduced demands placed on the interviewee are made explicit in the interaction. We present two examples in which the interviewer treats the client helpfully in follow-ups responding to the clients' articulated difficulties of answering, and then one example in which the question is more carefully reformulated in a way that takes the demands of the interviewee into consideration. All three examples at the same illustrate how the interviewer shifts from q-word questions to polar questions offering candidate answer (over sequences as well as within the question turns). In reformulating the questions the interviewers correct their epistemic stance (cf. Drew, 2018), and reduce the information requested.

In example 1, the official is interviewing a client who has applied for sickness compensation. The question relates to the applicant's abilities to handle various everyday activities and asks more specifically about the help he receives from relatives.

Example 1 (FK 090)

(O=official, C=Client)

- 45 O pt vad är det dom hjälper dig med då?
pt so what are they helping you with then?
- 46 (0.5)
- 47 C ja: (.) vad sa du?
yes (.) what did you say?
- 48 O vad är det dom hjälper till med då
what are they helping with then
- 49 är dä handlinge:n
is it shopping
- 50 eller är [det-
or is it
- 51 C [ja jajamän precis
yes yeah exactly
- 52 O eller städning och tvättning
or cleaning and washing
- 53 och det där också,
and that too
- 54 C ja: (.) allt

yeah everything

The sequence starts in a q-word question. The client displays problems in answering, and more specifically problems in hearing the question (line 47) (cf. Houtkoop-Steenstra and Antaki, 1997). In a third-turn repair (line 48), the official repeats the questions almost literally and adds a series of candidate answers (line 49), which are all confirmed by the client (partly in overlap). The concrete activities (shopping, cleaning, washing) suggested make it easier for the client to answer (confirm) and the sequence initially asked about “what” ends with the clients “yeah everything” (Line 54). In this upgrade response the client cumulatively brings the selection of activities together and at the same time indicates that no more candidate answers are required.

This practice of offering a candidate answer in response to difficulties in answering is further illustrated in example 2 (also regarding *sickness compensation*). However, this example is also different with respect to the difficulties created by the opening question, how the difficulties are displayed as well as in the resources used by the official in offering a helpful polar question. The official opens a section in the interview on everyday activities, by asking a grand tour question (Spradley, 1979). Such questions, in which the respondent is typically asked to describe how things are in everyday life, were used in most of the interviews and can be seen as one way in which the officials implemented the recommendations in the guidelines to ask “open questions”. As the example shows, grand tour questions can be difficult to answer.

Example 2 (FK 107)

- 62 O ((...))be dej beskriva lite
ask you to describe a little
- 63 hur vardan å så fungerar
how it works your daily life and so
- 64 å hur du har det runt omkring dej,
and what it's like around you
- 65 C .hh Oj hehe .hh ja: du .hh e:m den-
.hh Oh hehe .hh well .hh eh it-
- 66 e:h ja kan man säga ja andas bara hehe
eh what can you say well just breathe hehe
- ((Lines omitted, the client display problems in answering))
- 75 C eh va e de du vill ve[ta ()
eh what d'you wanna know
- 76 O [ja he-
yes he-
- 77 C eller hur .hh min dag ser u[t eller vadå hehe,
or what .hh my day looks like or what hehe
- 78 O [ja men-
yes but-

- 79 O .hh ja men precis
.hh yeah but exactly
- 80 så här ja har ju läst i läkarutlåtandet å då står de så här
it's like I've read in the medical report and it says that
- ((Lines omitted))
- 83 att du till exempel får en del hjälp av din pappa, (.)
that for instance you get quite a lot of help from your dad
- 84 stämm[er de,
is that right
- 85 C [ja: han kör ju å((fortsätter))
yeah he's driving and ((continues))

The client receives the question with an “Oh” and a short laughter (line 65). As a “change of state token” (Heritage, 1984), the “Oh” seems to indicate an understanding of the question as unexpected and demanding. After some hesitation, the client produces a short answer (“I just breathe”) followed by another laugh particle (line 66). Previous research shows that such laugh particles can “modulate” the nature of an action (Potter and Hepburn, 2010) and handle for example uncertainty (cf. Glenn, 2003).

In the omitted part of the interaction, the client keeps trying to provide an answer. In lines 75-77 the client expresses problems in handling and understanding the question, and asks for a clarification. The official solves the problem by providing a helpful candidate answer referring to available external information in the medical report and adds a turn final tag “is that right” (line 84).

If the opening grand tour question presents very little guidance as to what response is expected, the candidate answer helps the client to narrow down both the topical and the action agenda (Heritage and Clayman, 2010: 136). The client’s response turn overlaps with the turn final request for confirmation (line 85), indicating less difficulties in responding. Examples 1 and 2 illustrate significantly different epistemic resources invoked in helping the client to provide an answer. In example 2, the official invites the client to confirm information in the documents available. In example 1 (lines 48-49), the polar question infers a reasonable assumption from the content of the q-word question.

Example 3 is taken from the second area of compensation included in our study. In examining eligibility for *childcare allowance*, the officials should consider the extra care needs related to a child’s disabilities. Therefore, parents are asked about time spent on various everyday activities. The example shows how a question turn is reformulated, shifting from a q-word to polar interrogative taking the expected demands of answering into consideration.

Example 3 (VB 11)

- 618 O .h hur eh- hu:r e:h-
 .h how eh- how e:h-
- 619 om du kan uppskatta i tid
 if you can estimate the time
- 620 >alltså inte i tid exakt< utan
 I mean not the time exactly but
- 621 .h [hur-
 .h how
- 622 [°m°
- 623 tycker du att det är (.)mycket tid som går åt till
 do you find that it's a lot of time spent on
- 624 själva eh matdelen eller måltidsdelen,
 the eh food part itself or the meal part
- 625 C ja det är mycket tid ((fortsätter))
 yeah it's a lot of time ((continues))

The official's wording begins with what seems to be becoming a q-word question. After some hesitation (line 618), the official self-repairs and downgrades her entitlement to request the information, acknowledging the potential difficulties in providing the desired information (lines 618-619) (cf. Curl and Drew, 2008). Another 'how' is stopped (line 621) and reformulated into a polar question with a candidate answer. The self-corrections, the stated contingency ('if you can', line 619) and the mitigation ('not ... exactly', line 620) clearly suggest that the polar question that follows deals with and is a strategy to reduce the efforts expected from the interviewee. The client produces a type-conforming response in which the wording in the question "a lot of time" is recycled, and then continues and explain why.

As Pomerantz (1988: 372) concludes, candidate answers "can guide the respondent to know what would satisfy the purpose-for-asking." The examples presented above demonstrate how the expectation of a satisfactory answer is reformulated, taking the interviewees' displayed or anticipated difficulties in answering into consideration. In being helpful, the officials specify (example 1) and restrict (examples 2 and 3) the information sought. In example 3, the interviewer indicates that a confirmation of "a lot of time spent" satisfies the purpose for asking and thus more detailed information regarding the time the parents spend on specific activities is not expected.

Caring 2: Attentiveness and understanding clients' problems

In this section we shift the focus to polar questions enacting care concerning clients' problems and circumstances. The clients have applied for benefits due to problems about which the officials are supposed to ask. As will be shown, the principle of problem attentiveness explored in

doctor-patient interactions (Heritage and Clayman, 2010: 145; Stivers, 2007) also applies in these contexts. In medical encounters the principle is observed in questions that assume and seriously consider the main problems reported by the patient as a reason for the visit. But how is problem attentiveness oriented to in interviews where the overall task of the professional is to investigate clients' abilities and needs to make decisions concerning eligibility for benefits?

In our data, attentiveness to clients' problems and circumstances are frequently articulated in assumptions embedded in polar questions. In example 3 (above), the reformulated question (line 623) not only takes the demands of answering into consideration, but shows an attentiveness to the client's situation in assuming that "a lot of time" might be spent on food. The yes/no interrogative is designed with preference for a 'yes' answer and the questioner indicates that she is informed about the client's problems and indirectly the care requirements.

The next example is from an interview regarding *sickness compensation*, and the section specifically concerns the client's leisure activities. This example has been selected to show how the interviewer, in the design of a question, negotiates and corrects assumptions regarding the client's problems.

Example 4 (FK 094)

- 315 O e:hm jag tänker- orkar du med nånting
e:hm I'm wondering- do you have the energy for anything
- 316 på din fri:tid efter arbetsdagens slut,
in your spare time after work
- 317 så du säger att du tar (.) en promena:d så där då men
so you say that you like take a walk or so but
- 318 C j:[a näej
yeah noeh
- 319 O [orkar du vara socia:l å: har du
do you have the energy to be socially active and d'you have
- 320 nåt liksom [så
anything like
- 321 C [dä har- dä har ju minskat väldigt
that's gone down a lot you know

The yes/no interrogative (line 315) in the first part of the question turn invokes the client's problems by assuming that the client might not have the energy to do much (and possibly nothing) at leisure. In the expansion of the turn, the official refers to what the client has said in prior interaction: that she actually does something for leisure (she takes a walk) (line 317). The question is reframed (specified from "anything" to "social active") in overlap with the client's answer (lines 320-321).

The assumptions embedded in the question not only demonstrate an understanding of the client's circumstances but also manage responsibilities of knowing. As Stivers (2011: 106) argues,

questioners have responsibilities “to design their questions in ways that take into consideration what they have epistemic access to.” Stivers shows how such responsibilities are interactionally managed in cases when assumptions in questions are treated as problematic by the recipient. Example 4 illustrates how assumptions embedded in the question are negotiated within the question turn. The client’s restricted ability, taken as a common ground in the question (line 315), is corrected and mitigated by the official treating herself as responsible for knowing (line 317). The question turns thus show the delicacy of making assumptions and of being attentive to the client’s problems in the design of polar questions.

Elaborated question turns in which questions are reframed, taking knowledge regarding the client’s situation into consideration, occur frequently in our data. They generally show a form of interviewing sensitive to the interactional context. Example 5 concerns the examination of care needs and provides another example of problem attentiveness in which the interviewer infers from prior interaction (Line 821) and reframes the polar question.

Example 5 (FK VBS 8)

- 818 O .h rent generellt eh
.h generally speaking eh
- 819 tycker du att det är svårt
do you find it hard
- 820 (.) att bryta mönster alltså hans mönster
to break pattern that is his pattern
- 821 >jag hör ju det på dig att det är det<
cause I can hear from you that it is
- 822 .h alltså tycker du
.h I mean do you find it
- 823 att det är svårt att
hard to
- 824 avbryta få honom å byta spår
interrupt make him change his ways
- 825 ja från spelet till nåt annat
that is from the game to something else
- 826 till att äta bara eller
to just eating or
- 827 O [göra nånting duscha eller vad som
do something shower or what
- 828 C [ja det är det han e:h (.) ((fortsätter))
yes it is he e:h (.) ((continues))

The opening question is designed with preference for the confirmation of problems. Instead of waiting for an answer, the official provides the answer in rushed talk (line 821) and then starts to reframe the question. In the form of candidate answers the official asks about more specific

situations and activities related to the general problem (lines 822-827). The problems are confirmed by the client (line 828). The practice of interviewing displays a caring attitude. The questions are designed for confirmation of the client's problems and the candidate answers are helpful in specifying the problems. In referring to what the client has said (line 821), the official displays knowledge about and an attitude towards the client's circumstances. In the "cause I can hear from you," the official articulates a degree of trust and commitment to the client's problems (compare "so you say," example 4, line 317).

Examples 4 and 5 demonstrate practices of reframing questions in relation to displayed knowledge within the question turn. Another practice of reframing questions, taking knowledge of clients' problems into consideration, is the adding of candidate answers to a q-word question. We present two examples from the examination of work ability (example 6) and care needs (example 7).

Example 6 (FK 094)

- 228 O e:h va äre för arbetsuppgifter du gör som-
e:h what kind of tasks that you do are-
- 229 som- .h förvärrar ditt tillstånd så att säga
Are .h making your condition worse so to speak
- 230 det är just när du suttit länge
it's just (precisely) when you've been sitting for a long time
- 231 eller stått länge [å-
or standing for a long time
- 232 C [ja det är ju- det är ju vid datorn
yes that's it- it's at the computer

Example 7 (VB 28)

- 275 O hur funkar det med eh duschning och sånt,
how does it work with eh taking a shower and things like that
- 276 är det nånting som man behöver hjälpa honom med?
is that something he needs a hand with?
- 277 C ja:
yes
- 278 O =m
- 279 C eh man måste hjälpa å tvätta håret och sånt där
eh you gotta help him wash his hair and stuff

In example 6 (line 228) and example 7 (line 275), the officials frame q-word questions pertaining to the institutional tasks of examining work ability and care needs, respectively. In both cases, candidate answers are added in the form of a declarative (example 6) or interrogative (example 7)

polar question, which are then confirmed by the clients. In shifting the stance from an unknowing to a knowing (or assuming) stance, the officials acknowledge the clients talk about problems in prior interaction. However, the way in which this talk is raised differs between the two cases, indicating varied forms of assumptions. In example 6, the “just” (line 230) refers back to the client’s telling in prior interaction (not in the transcript) concerning her back pain when sitting and standing in front of the computer. The declarative form displays a high chance of knowing. The candidate answer can be heard as a way of repairing a question from being ignorant. In example 7, the candidate answer (line 276) infers from the more general topic of the conversation regarding the type of support the child requires, but does not explicitly refer to prior talk. In the interrogative form, the official is taking up an unknowing stance, but nevertheless presumes that the child needs help with showering. In both examples the additional polar questions display attentiveness to clients’ problems and at the same time restrict the question agenda and the information sought.

Caring 3: The enactment of the professional expertise in care

The caring interview is formed by the care of the interviewee/client, as well as the enactment of the interviewer’s professional expertise in care. The interviewing of clients or patients in different institutional settings is typically integrated into conversations where the professionals enact a combination of roles. In care visits, doctors’ interviewing of clients regarding their problems precede diagnosis and treatment recommendations. Research demonstrates how doctors’ professional authority and expertise is expressed in these different roles in the interaction with patients (Heritage and Clayman, 2010: 103, 155). Different professional roles can also be merged within the activity of interviewing. Antaki, Young and Finlay (2002) show how in interviewing clients about the quality of the care, care staff merge their role as interviewers and caring professionals to treat respondents helpfully, providing candidate answers and offer advice. The interviews in our study are conducted in a different institutional context: the interviewers are not care staff but officials with the task of handling applications for social benefits. However, in this context the officials also act in different roles, such as when they give advice and make assessments of a client’s problems. We narrow down the analysis, focusing on the latter. The assessments provide insights into how officials, in the context of interviewing, enact a form of professional expertise and claim a knowing position that is even stronger than in the declarative polar questions analyzed above.

The fact that officials provide assessments of the client’s problems is partly related to their general task of not only gathering information but also translating this information into suggestions for decisions. This translation of information that takes place primarily outside the conversation with clients. However, assessments are also produced within the sequences of interviewing. Two examples are selected, both from the part of the sequences where the official introduces a new topic, in order to illustrate three features more generally observed in the data: (1) officials’ positioning of themselves as experts vis-à-vis the particular problems discussed (expert knowledge); (2) the construction of assessments as interpretations of clients’ prior talk (shared knowledge); and (3) the collaborative orientation in the presentation and confirmation of assessments (shared knowledge).

In example 8, the official introduces a topic concerning the child's personal hygiene, one of the areas addressed in the interviews to determine the need for care. The topic has been discussed earlier in the interview, but not in the just prior interaction. The official's claim, "I'm thinking about this" (line 589) marks a topic shift in the interview. The assessment (lines 592-595) is thus delivered at a position in the conversation where a question would form an alternative given the more common organization of these interviews.

Example 8 (FK VBS 10)

- 589 O .h jag tänker på det här- eh
I'm thinking about this- eh
- 590 d- dä här med hans personliga
the question of his personal
- 591 omvårdnad och dusch och hygien
care and shower and hygiene
- 592 .h <där är han ju> (.)
.h there he's
- 593 som jag hör inte (0.5) ålders:adekvat
as I hear it not adequate for his age
- 594 >eller självständig<
or independent
- 595 i alla f[all=
at least
- 596 C [näej
noeh
- 597 O =så som andra sjuttonåringar
like other seventeen year olds
- 598 .h sku[lle kunna vara
.h would be
- 599 C [näej
noeh
- 600 O nä,
nah
- 601 C °nej°
no
- 602 O min[sann inte
def'ly not
- 603 C [näej
Noeh

In the assessment (lines 592-595), the official positions herself as an interpreter of the child's problem ("as I hear it"). The interpretation is delivered as firm and authoritative (Sw "där är han ju"), and the official further indicates expertise in using technical language (Sw "åldersadekvat"). The "as I hear it" at the same time refers to prior information about the child. In suggesting "independent at least" (line 594) as a less serious description of the child's problems, the official makes it easier for the client to confirm (line 596). In what follows (lines 599-603), the participants collaboratively confirm the assessment.

In example 9, the official introduces another topic to the interview, concerning the child's social ability.

Example 9 (FK VBS 10)

- 876 O .h ja kommer osökt in på nästa område
.h which leads me to the next area
- 877 som jag tror också kan va be>kymmersamt<
which I think might also pose some problems
- 878 med tanke på det vi- det du pratade om nu
considering what we- what you talked about now
- 879 .h dä är den här sociala förmågan
so it's this social ability
- 880 med jämnåriga och
with others of the same age and
- 881 andra (.) människor överhuvudtaget
other people in general
- 882 .hh [dä
.hh that
- 883 C [ja,
yes
- 884 O dä- dä blir ju knepigt
tha- that will of course be tricky
- 885 (0.5)
- 886 C ja det blir knepigt och det
yes it gets tricky and it
- 887 funkar eh han- han får snabbt nya
works eh he- he's quick at making new
- 888 vänner men dom försvinner snabbt
friends but they disappear quickly
- 889 O jaha

- aha
 890 förbrukar han dom
 he wears them out
 891 C ja[:
 yes
- 892 O [orkar dom inte med honom
 they grow tired of him
- 893 C näej så skulle jag nog säga att det är
 noeh I would say that it is

The “I think” (line 877) marks the assessment as being dependent on her expertise. The official designs the turn as an authoritative interpretation of the child’s problems based on what the client has told in prior interaction (lines 878-880). The assessment is confirmed by the client (lines 883 and 886). In the follow-up questions (lines 890 and 892), the official further demonstrates her understanding of the problems rather than asking for unknown and institutionally relevant information. The client provides type-conforming responses (lines 891 and 893).

The assessments are sites in which the official demonstrates expertise in a client’s problems. As regards the epistemic stance, however, the assessments also indicate a continuum rather than qualitative differences from the knowing stance articulated in the declarative polar questions. The distance in knowledge between the official and the client is further reduced. In the caring interviewing analyzed in this study, assessments as well as polar questions are cooperative in being designed for confirmations.

Conclusion

We have analyzed three forms of what we describe as a caring interviewing. First, a helpful form of interviewing is shaped by the interviewer’s reformulation of questions into polar questions that are easy to confirm, taking the interviewees’ displayed or expected difficulties to answer into consideration. Second, the interviewers enact a caring attitude in the framing of questions, showing attentiveness and understanding of clients’ problems and circumstances. Third, in assessments interviewers express professional expertise and knowledge regarding the circumstances pertaining to clients’ disabilities and care needs.

The orientation to helpfulness and care is evident in the design of questions, and most clearly in the practices of reformulating the questions within the question turn and in follow-ups. The reformulations demonstrate the role of candidate answers, and the related invitations to confirm information, in the interviewer’s (the official’s) management of their relationships with the interviewee (client). Epistemic stance, is central to how their relationships are managed (cf. Heritage 2012:6) and the reformulations of questions provide an example of what Drew (2018: 174) describes as “epistemic amendments” in social interaction. Based on examples from ordinary conversation, Drew concludes that speakers almost always move from K+ positions to K- positions (for example from declarative to interrogative constructions) in correcting themselves. In the practices we have observed as typical for a caring interviewing, the questioners move in the opposite direction, from unknowing to knowing positions. The study adds to

observations in previous research regarding the ways in which polar questions are designed to embody a care of the interviewee and client (e.g. Antaki, Young and Finlay, 2002; Pomerantz, 1988). Moreover, the study shows how the normative principle of problem attentiveness, previously observed in care visits, is enacted in a different institutional context: the examination of eligibility for social benefits.

A general argument of the study suggests that epistemic access and epistemic stance in question design and assessments are central to practices of caring interviewing. Relying on findings in the research on epistemic and question design (e.g. Heritage and Raymond, 2012; Raymond, 2006), we have highlighted how the different forms of care involve interviewers' indications of knowledge based on available documents, prior talk or general assumptions. Knowing about clients' circumstances is a *resource* in careful interviewing, enabling the design of questions easy to confirm and attentive to client's problems. The practices of caring interviewing, at the same time, show how interviewers take their *responsibilities* of knowing into account when designing questions in interaction (cf. Drew, 2018: 164; Stivers, 2011).

The practices of interviewing observed in this study show a tendency of reducing the information gap between interviewer and interviewee. The information requested is restricted when the interviewer provides candidate answers that (1) consider difficulties in answering and (2) are attentive to client's circumstances; or (3) when interviewers provide professional assessments in positions of the interaction where a question would be an alternative. The observations reflect more general conclusions in research on information seeking in interaction. Research shows how questions carefully handle the information states between participants and how, in many contexts, the questioner selects a question that asks for relatively small informational increment (Heritage and Clayman, 2010: 141; Pomerantz, 1988; Siemund, 2017). This has been explained in relation to the efficiency in the strategies of obtaining the information needed, a principle of not asking for more than needed, as well as questioner's avoidance of being ignorant. However, the actual handling of the information states between the participants also shape the distinctiveness of the professional work within a particular institutional context. The ways in which the officials in our study design questions, indicating knowledge and understanding of the clients' problems, reflect a professional caring attitude, and a professional interviewing markedly different from forms of standardized interviewing typically associated with the asking of questions from unknowing positions.

Helpful and caring interviewing may in some cases reduce the information provided from clients, with implications for the task of making informed and impartial decisions on the eligibility for social benefits. The professional work involves a balancing of a care for the individuals and the institutional requirements of information gathering. This is a challenge that the officials in our study share with professionals interviewing people with social and health problems in various institutional settings. This is not to suggest that caring interviewing generally prevents the fulfillment of information gathering. Sensitivity and care are prerequisites for interviewers to establish relationships that contribute to respondents' willingness to provide high-quality information. To understand how different practices of interviewing serve the needs of information we have to analyze the answers provided in the interviews, a task beyond the aim of this particular study. However, professionals orientations to care in interviewing clients should not be understood mainly as strategies in more or less efficient information gathering. In asking

questions, officials shape the relationships to clients and balance the enactment of professional roles. And as Zacka (2017) argues, being completely indifferent and uncaring as a professional is considered a pathology in most (if not all) contexts of public administration.

Within our project, we have shared our observations and results in workshops with officials conducting the interviews included in the data, as well as in discussions with managers at different levels. The experiences show how the detailed analyses of interaction contribute knowledge that is largely lacking within the organization. The research informs about how the professional work is carried out in interaction, the conditions involved in the design of questions, and the various resources available in order to achieve the institutional tasks. The workshops with officials confirm the benefits of a CA approach that informs about concrete practices, and based on which participants can discuss authentic examples and related challenges that they recognize from experience. The distinction between the three forms of caring provides one basis for organizing the discussions on different practices of interviewing, what is achieved and what is appropriate (or non-appropriate) in specific situations. We are in the process of organizing more work shops and they will then be evaluated. We do not expect the applied CA to be translated into entirely new practices. Some guidelines might be revised. Most important, however, we believe that the workshops contribute in the development of professional identities and expertise (cf Bruhn, Thunman and Ekström, 2017).

Finally, the analyses of conversations provide evidence to a broader discussion concerning the policy and ethos of the authority. In recent years, it has been a clear trend within the Swedish Social Insurance Agency to strive for increased standardization and systematic examinations to make assessments and decisions on eligibility for benefits less dependent on variations in circumstances of individuals. This is manifest in internal documents, policy statements, monitoring and control of decisions. Given the ethos of the agency articulated in different documents, officials are at the same time expected to consider peoples' life situation and meet people with understanding and empathy. As for many other professionals in the public sector (often referred to as street level bureaucrats), it is absolutely central to their work to translate and adjust general rules in assessments of and interactions with clients in unique situations (Bruhn and Ekström, 2017). Conversation analysis shows how an ethos of the agency is shaped in situated interactions and becomes 'real' for the participants. The practices of caring interviewing and the related design of questions analyzed in this study embody helpful and understanding relationships (cf. Raymond, 2006). It might be possible for the agency to increase the standardization of the examinations through refined guidelines, internal training etc. However, most important, a more straightforward bureaucratic and standardized form of interviewing cannot be implemented without shaping significantly different social relationships to clients.

References

- Antaki, C (2002) Personalised revision or 'failed' questions. *Discourse Studies* 4: 411-428.
- Antaki, C, Young, N and Finlay, M (2002) Shaping client's answers: Departures from neutrality in care-staff interviews with people with a learning disability. *Disability & Society* 17: 435-455.
- Antaki, C and O'Reilly, M (2014) Either/or questions in child psychiatric assessments: The effect of the seriousness and order of alternatives. *Discourse Studies* 16: 327-345.
- Bruhn, A and Ekström, M (2017) Towards a Multi-level Approach on Frontline Interactions in the Public Sector: Institutional Transformations and the Dynamics of Real-time

- Interactions. *Social Policy & Administration* 51: 195-215.
- Bruhn, A, Thunman, E, Ekström, M (2017) Swedish social insurance officials struggling with the vagueness of the work ability concept: The care of sickness compensation. Örebro universitet (Working Papers and Reports Social work, 11) <http://oru.diva-portal.org/smash/get/diva2:1168575/FULLTEXT01.pdf>
- Curl, T and Drew, P (2008) Contingency and action: A comparison of two forms of requesting. *Research on Language and Social Interaction* 41: 1-25.
- Drew, P (2018) Epistemics in social interaction. *Discourse Studies* 20: 163-187.
- Glenn, P (2003) *Laughter in Interaction*. Cambridge: Cambridge University Press.
- Heritage, J (1984) A change-of-state token and aspects of its sequential placement. In: Atkinson, J and Heritage, J (eds) *Structures of Social Action: Studies in Conversation Analysis*. Cambridge: Cambridge University Press, pp. 299-345.
- Heritage, J (2009) Questioning in Medicine. In: Freed, A, Ehrlich, S (eds) *Why do you ask? The Function of Questions in Institutional Discourse*. DOI:10.1093/acprof:oso/9780195306897.003.0003
- Heritage, J (2012) Epistemics in action: Action formation and territories of knowledge. *Research on Language and Social Interaction* 45: 1-29.
- Heritage, J and Clayman, S (2010) *Talk in Action*. Malden: Wiley-Blackwell.
- Heritage, J and Raymond, G (2012) Navigating epistemic landscapes: acquiescence, agency and resistance in response to polar questions. In: de Ruiter, J.P. (ed) *Questions: Formal, Functional and Interactional Perspectives*. Cambridge: Cambridge University Press, pp. 172-192.
- Houtkoop-Steenstra, H and Antaki, C (1997) Creating happy people by asking yes-no questions. *Research on Language and Social Interaction* 30: 285-313.
- Iversen, C (2012) Recordability: Resistance and collusion in psychometric interviews with children. *Discourse Studies* 14: 691-709.
- McCabe, R, Sterno, I, Priebe, S, Barnes, R, and Byng, R (2017) How do healthcare professionals interview patients to assess suicide risk? *BMC Psychiatry* 17:122 DOI 10.1186/s12888-017-1212-7.
- Pomerantz, A (1988) Offering a candidate answer: An information seeking strategy. *Communications Monographs* 55: 360-373.
- Potter, J and Hepburn, A (2010) Putting aspiration into words: “laugh particles, managing descriptive trouble and modulating action. *Journal of Pragmatics* 42: 1543-1555.
- Raymond, G (2006) Questions at work: yes/no type interrogatives in institutional context. In: Drew, P, Raymond, G & Weinberg, D (eds) *Talk and Interaction in Social Research Methods*. London: Sage, pp. 115-134.
- Raymond, G (2009) Grammar and Social Relations: Alternative Forms of Yes/No-Type Initiating Actions in Health Visitor Interactions, In: Freed, A, Ehrlich, S (eds) *Why do you ask? The Function of Questions in Institutional Discourse*. DOI:10.1093/acprof:oso/9780195306897.003.0005
- Sacks, H, Schegloff, E and Jefferson, G (1974) A simplest systematics for the organization of turn-taking for conversation. *Language* 50: 696-735.
- Sidnell, J. (2010) *Conversation Analysis: An Introduction*. Malden: Wiley: Blackwell.
- Siemund, P. (2017) Interrogative clauses in English and the social economics of questions. *Journal of Pragmatics* 119: 15-32.
- Spradley, J (1979) *The Ethnographic Interview*. New York: Holt, Reinhart and Winston.
- Stivers, T (2007) *Prescribing under pressure: Parent-physician conversations and antibiotics*. New York: Oxford University Press.
- Stivers, T (2011) Morality and question design: ‘of course’ as contesting a presupposition of

- askability. In: Stivers, T, Mondada, L and Steensig, J (eds) *The Morality of Knowledge in Conversation*. Cambridge: Cambridge University Press, pp. 82-106.
- Stivers, T and Enfield, N (2010) A coding scheme for question-response sequences in conversation. *Journal of Pragmatics* 42: 2620-2626.
- Summerson Carr, E (2010) Qualifying the qualitative social work interview: A linguistic anthropological approach. *Qualitative Social Work* 10: 123-143.
- Suoninen, E and Jokinen, A (2005) Persuasion in social work interviewing. *Qualitative Social Work* 4: 469-487.
- Thompson, L, Howes, C and McCabe, R (2016) Effect of questions used by psychiatrists on therapeutic alliance and adherence. *The British Journal of Psychiatry* 209: 40-47.
- Zacka, B. (2017) *When the State meets the Street: Public Service and Moral Agency*. Cambridge: The Belknap Press of Harvard University Press.