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## Social interaction, social theory and work-related activities

**ABSTRACT** – Workplaces are constituted in socially embedded communicative practices. When interpreting work-related activities, workplace researchers have to trade carefully between micro-level social interaction and macro-level societal (trans)formation. On both fronts, they are positioned as outsiders to the dynamics of activities under study, although over time and with involvement they may become more integrated and accepted within a given community of practice, thus aligning themselves with participants' perspectives. In this paper, I revisit the interrelationship between social structure and social interaction and propose a method of activity analysis as a way for studying workplace communication in practically relevant ways. At the same time, I suggest that the talk and text that are available for observation and analysis do not embody the entirety of the workplace ethos.

**Key words:** knowledge/expertise, professional-client encounters, activity analysis

### Preamble

The title of this presentation, which was suggested to me by the conference organisers, is, I realise, too broad to handle within the scope of a single paper. However, the three key concepts – social interaction, social theory and work-related activities – are very much interwoven and it is this intersection that has formed a central tenet of my recent work (see, in particular, Sarangi and Roberts, 1999; Sarangi, 2001a, 2004a, 2005; Sarangi [in press]).

The interrelationship between social interaction and social theory constitutes the age-old micro-macro dilemma. While a commitment to social interaction requires us to focus our analytic lens on micro-level activities, a social theoretical motivation concerns the uncovering of the overall influence of macro-level social structure on our everyday actions and identities. It is now commonly accepted that the relationship between social structure and social interaction is a dialectic one. This is very well captured in Giddens' (1984) concept of 'structuration' as a way of resolving the structure-action dualism. However, from a linguistic anthropology viewpoint, Ahearn (2001) critiques Giddens' notion of structuration which is not only a recursive loop (actions influenced by social

structures and social structures (re)created by actions), but also pays little attention to the role language plays in maintaining social practices and in bringing about social change. It is worth noting that workplace activities are not reducible to language/interaction and that changes in workplace-related communicative practices are mediated by social theoretical concerns such as power, knowledge, equity, and justice.

### The interactionist turn in social and human sciences

Let us take a cursory look at the debate concerning the primacy of interaction within the social and human sciences (for a recent overview see Atkinson and Housley, 2003). A starting point, for our purposes, is Blumer's (1969) model of symbolic interaction, which was primarily a reaction against a deterministic view of the social world, with a heavy reliance on causal explanations. According to Blumer (1969, p. 11-12):

The position of symbolic interactionism is that the 'worlds' that exist for human beings and for their groups are composed of 'objects' and that these objects are the product

of symbolic interaction... The nature of an object – of any and every object – consists of the meaning that it has for the person for whom it is an object.

Blumer's views about interaction are conceptualised as an alternative to materialism by denying the existence of phenomena in their own right. There is the suggestion that interaction and sense making cannot be reduced to rule-like behaviour. Viewed from this perspective, symbolic interactionism can be regarded as a precursor to social constructionism. Other interactionists such as Mead and Simmel would distance themselves from such extreme symbolism and recognise the existence of social phenomena in their own right. Glassner (1980, p. 22-23), however, considers Blumer's position as being idealistic, and goes on to propose what he calls 'essential interactionism' which consists of events, states, phenomena and processes: 'Interactions may be described as processes made up of phenomena within various events, which at each point make up states amid other states'.

The notion of alignment is crucial here: it is based on a view of interaction as jointly produced with all participants being actively involved in the production of action at all times. In a seminal paper, Stokes and Hewitt (1976) suggest that 'aligning actions' encompass two meanings: (i) how individual conduct accords with that of co-participants in the creation of social acts; and (ii) how problematic situations involve discrepancies 'between what is actually taking place in a given situation and what is thought to be typical, normatively expected, probable, desirable or, in other respects, more in accord with what is culturally normal' (1976, p. 843).

The expression 'culturally normal' can be loosely interpreted to include what is situationally relevant and appropriate, but not in a deterministic way. Wilson (1971, p. 60) characterises this trend of interactionism as a shift from the normative paradigm in which 'interaction is viewed as rule-governed in the sense that an observed pattern of action is rendered intelligible and is explained by referring to rules in the forms of dispositions and expectations to which actors are subject'. For Wilson (1971, p. 67), within the 'interpretive paradigm', unlike the normative one, 'interaction is an essentially interpretative process in which meanings evolve and change over the course of the interaction'<sup>1</sup>.

Against this backdrop we need to consider the perspective on social action as not only at the heart of phenomenology (Schutz, 1964) and ethnomethodology

(Garfinkel, 1967), but also what characterises Goffman's call for the study of social interaction in its own terms. Goffman writes:

My concern over the years has been to promote acceptance of this face-to-face domain as an analytically viable one – a domain which may be titled, for want of any happy name, as the *interaction order* (Goffman, 1983, p. 2).

The *interaction order* for Goffman goes beyond the everyday meaning of face-to-face encounters. He makes a distinction between *interaction order* to mean interactional practices and the traditionally conceptualised 'elements of social organisation' in the sense of social structures and goes on to capture the linkage between these two domains as 'loose coupling' (Goffman, 1983). One may argue that such a 'loose coupling' is what Giddens tries to embody in his notion of structuration.

In making a case for the study of 'the neglected situation' (i.e., social interaction), Goffman issues a challenge to linguistics. In relation to his notion of footing, he writes: 'linguistics provides us with the cues and markers through which such footings become manifest, helping us to find our way to a structural basis for analyzing them' (Goffman, 1981, p. 157). As Tannen (1993) points out, Gumperz's (1982) theory of conversational inference is one such response. In addition to contextualisation cues working as a signalling mechanism for negotiation and shifts in frames and footings, other pragmatic notions such as presupposition, intentionality, implicature, coherence, indexicality are intricately embedded in Goffman's (1974) frame analysis. As far as discourse and communication researchers are concerned, interactional notions such as footing, framing, and inferencing are not so straightforward to identify and interpret in a given workplace setting without the benefit of insiders' insights – this is what I have elsewhere called 'the analyst's paradox' (Sarangi, 2002).

This raises particular questions about the positioning of the analyst in looking for patterns of similarities and differences across interactional trajectories within a given professional/institutional setting. The 'member's method' in ethnomethodology is not without difficulties. For instance, who does qualify as a member of a group? How does the analyst gain access to the tacit knowledge a member might draw upon in managing his/her conduct in a given encounter? However, this call for participants' insights should not be equated with post-hoc accounts provided in research interviews, because

<sup>1</sup> Bakhtin's (1986) project in dialogicism can also be seen as an exercise in interactionism. The basic unit – utterance – is not reducible to an objective meaning outside of their communicative environment. The notion of addressivity is never exhausted, as 'anticipated responsive reactions' are considered part and parcel of one's individual style. In a similar vein, Voloshinov (1987, p. 99) suggests that the context of the utterance must consist of three factors: '(1) the common spatial purview of the interlocutors (the unity of the visible...); (2) the interlocutors' common knowledge and understanding of the situation, and (3) their common evaluation of that situation'.

participants themselves may not have easy access to the tacit knowledge that underlies their communicative performance. Following Schutz (1964), Garfinkel (1967) holds that background expectancies are the 'natural facts of life', although an individual may be 'at a loss to tell us specifically of what the expectancies consist'. Likewise, Polanyi points out that 'the aim of a skilful performance is achieved by the observance of a set of rules which are not known as such to the person following them' (Polanyi, 1958, p. 49).

In any case, members inhabiting an interpretive community of practice are guided by a set of vague norms which are partially open to adaptation in every situation of use. Garfinkel (1967) refers to this vagueness of norms as the 'etcetera' property, which accompanies every norm: 'Use this norm appropriately, even if it means behaving in contradiction to the norm'. (See the example of 'no smoking' in an auditorium, but how this does not apply to the actors on stage who may be required to smoke as part of the character they are portraying on stage; the 'No smoking' sign will then be read as 'No smoking, etc.'). This observation attests that our own interpretation of institutional/professional discourse will, by default, be 'ad hoc' and in need of further negotiation/validation. This is the main reason why the processes of interaction cannot be coded objectively using a sophisticated system such as Bales' (1950) interaction process analysis. A second point follows from this: our understanding of the nuances of interaction will be enhanced by 'thick participation' in the lives of the research participants and by undertaking analysis of entire workplace activities in order to satisfy what Cicourel (1992) calls the conditions of 'ecological validity'.

### Revisiting the tensions within social theory when making sense of social interaction

In this section I briefly recapture the tensions involved in applying social theoretical perspectives in a top-down manner to workplace interaction. These observations are drawn from a recently published paper (Sarangi, 2001a) which makes an attempt to understand the dynamics of a psychotherapeutic interaction from the perspectives of Foucault (1970, 1972), Habermas (1970, 1987) and Bourdieu (1991). The clinical encounter concerns a male patient (in his early thirties) who is a media professional, with a genetic disorder that can result in blurred vision, leading to blindness, and for which there is no cure.

Although social theorists like Foucault, Habermas and Bourdieu draw upon language in their theorisation of social structure and individual agency, they do not actually analyse language data to show the relationship between the micro- and macro-contexts of interaction. For instance, Bourdieu's criti-

que of speech act pragmatics is a convincing one: the meaning of what is said depends crucially upon the status and role of the speaker in a given social milieu. However, Bourdieu himself does not undertake any detailed linguistic or interactional analysis to demonstrate this (see Mehan [1983] on the role of language and the language of role in team meetings, although not directly ensuing from Bourdieu's observation). The psychotherapeutic interaction I analysed in detail seemed to be organised primarily around coping or 'emotional adjustment', with elements of 'explanatory understanding', 'progressive learning' and 'self-reflection'. I conclude as follows:

[T]he micro-macro debate in social theory finds a useful outlet in language as a mediating force. As we have seen, Habermas, Foucault and Bourdieu, in their own ways, have all taken language to fill out the micro-macro divide/link... Despite their different orientations, they share a view of language as social action. This is borne out by the fact that their theoretical insights can be mapped on to the interactional plane, in different but cumulative ways. There should be a word of caution in that the mappings I have attempted do not necessarily count as proof of the individual theoretical positions. In any case a data site such as the psychotherapeutic clinic should not simply be regarded as a testbed for social theory (Sarangi, 2001a, p. 54-55).

Let me now turn to the final component of the triadic puzzle signalled in the title of this paper – work-related activities. I will explore this topic in relation to the notion of 'expertise' in the health care setting. I shall argue that in the ever-changing healthcare domain, the notion of expertise also undergoes transformation – both at the level of substantive, scientific knowledge (the 'what' dimension) and at the level of procedural knowledge (the 'how' dimension). I will suggest that workplace interaction is a form of expertise (Sarangi, [in press]), with inevitable variations across settings and client circumstances.

### Workplace expertise as knowledge-in-interaction

There is a strong tradition of workplace interaction studies, from a variety of analytical perspectives, located in a range of professional and institutional settings (for an overview, see Sarangi and Roberts, 1999). Of particular significance are the ethnomethodological studies of organisations and professions (Lynch and Sharrock, 2003).

Generally speaking, workplace practices are constituted in socially embedded communicative activities, comprising not only text and talk but also other modalities. As Gellner aptly puts it: 'Work, in the main, is no longer the manipulation of things, but of meanings' (Ernst Gellner, cited in Stehr, 1994).

This view suggests the significance of interaction (as a system of intersubjective meaning making). Such

meaning making practices cannot be divorced from wider societal factors. The redistribution of skills and knowledge is central to what Gee *et al.* (1996) refer to as the 'new work order'. The historic shift from the industrial worker to the knowledge worker does coincide with micro- and macro-level discursive shifts. Gee *et al.* (1996) suggest several tendencies which characterise the postmodern workplace. Central to this is the proliferation of low-paying jobs, "the valuing of diversity, the dispersal of centralised authority and hegemony, and the wider distribution of knowledge within and across local 'communities of practice'" (Gee *et al.*, 1996, p. xiii). The new work order creates a set of core values – e.g., equality, trust, collaboration, quality – and the workers, as partners in a flat hierarchical system, are expected to share the vision of the employer they work for. Worker empowerment thus amounts to taking full responsibility and remaining accountable for what they do (not) achieve. Such tensions between institutional and professional modes have a societal basis, but are routinely experienced at the interactional level (Sarangi and Roberts, 1999).

Is this new work order accompanied by novel interactional trajectories? It is possible to argue that patterns of participation/interaction in a given workplace will change in keeping with the societal transformation (Sarangi and Slembrouck, 1996). The barriers of asymmetry may be normalised through the deployment of different linguistic and discourse strategies in work-related tasks and responsibilities. Drew and Heritage (1992, p. 25) have suggested that setting/situation is not a definitional criterion of institutional interaction: 'interaction is institutional insofar as participants' institutional or professional identities are somehow made relevant to the work activities in which they are engaged' (see also, Sarangi, 1998). It would then follow that interactional patterns, rather than the setting itself, can be the defining feature of workplace practices.

Psathas (1995), among others, draws attention to the fact that generic rules of everyday conversation cannot be applied in a straightforward fashion to workplace encounters. As Lynch and Sharrock (2003, p. xxxix) remind us:

Although the sequential procedures that make up what conversation analysts call 'talk in interaction' are evident in, and important for, the organisation of practices in a variety of social institutions, it is not enough to say that, for example, a jury deliberation or a medical diagnosis is an 'organisation of talk'.

Another crucial feature of the ethnomethodological

studies of work is the reliance on ethnographic insights in one's attempt to understand the actual practices of those doing the work from their perspective, including their understandings of 'social structures' (Lynch and Sharrock, 2003; see also Cicourel, 2003).

Let us explore further the different components of what constitutes workplace/professional expertise/competency, and what role interaction might play within such expertise.

Expertise, for many of us, equates with ownership of knowledge. As Stehr (1994) puts it, we live in 'knowledge societies', where experts exert knowledge-based power in all aspects of our social lives. But exactly what counts as expert knowledge and what relationship professionals as experts establish with available knowledge systems is open to debate<sup>2</sup>.

The professional-client encounter as a research site has remained a target of many workplace studies. The client comes to the professional because he has met a problem which he cannot himself handle' (Hughes, 1958, p. 141). This underscores the fact that professionals are privy to knowledge that lay people do not have and that an interactional basis is necessary to sort out the client's problems. According to Rueschemeyer (1986, p. 166), experts

define the situation for the untutored, they suggest priorities, they shape people's outlook on their life and world, and they establish standards of judgement in the different areas of expertise – in matters of health and illness, order and justice, the design and deployment of technology, the organisation of production.

This then allows for a lay-expert distinction, which is a long standing one (Sarangi, 2001b). Schutz (1964) contrasts expert knowledge and lay knowledge as follows:

The expert's knowledge is restricted to a limited field but therein it is clear and distinct. His opinions are based on warranted assertions: his judgements are not mere guesswork or loose suppositions. The man on the street has a working knowledge of many fields which are not necessarily coherent with one another. His knowledge of recipes indicating how to bring forth in typical situations typical results by typical means (Schutz, 1964, p. 122).

Expertise, according to the above stipulation, implies an in-depth mastery of a field of knowledge. Warranted assertions' can only be made within a limited field'. Lay knowledge, by contrast, is not distinctly specific: it is rather typical'.

With regard to the medical profession, Freidson

<sup>2</sup> In many contemporary workplaces, experts' actions are mediated through expert systems. In the healthcare context, expert systems may include technologies such as X-ray procedure, laboratory-based tests, software-assisted risk assessments as well as patients' case records and official forms. While advances in science and technology (as expert systems) have direct consequences for what constitutes knowledge and authority of the so-called experts, the tensions are manifest at the interactional level.



(1970) points out that professional expertise is constituted in a combination of scientific/technical knowledge and clinical/experiential knowledge. As I see it, both these knowledge systems are interactive, cumulative and systematic and do give rise to an array of expert interaction systems. Much of the expert knowledge (scientific and clinical) are discernible in the interactional level in terms of systematic history taking, diagnostic reasoning, offer of explanations, use of evidence etc. In Foucaultian terms (Foucault, 1970), appropriation of discourses is an expert-knowledge activity, constituted in both *the what* of knowledge and *the how* of knowledge, although not always at an explicit level. The situated character of interaction becomes central.

This is parallel to discussions about interactional competencies more generally. The proliferation of communication skills training via the undergraduate medical curricula and in-service courses in the UK – especially in areas like delivery of bad news, shared decision making, evidence-based medicine – is indication that health professionals do possess adequate clinical and scientific expertise. But what they lack is managing such expertise interactionally, and in accordance with various frameworks of governance (Sarangi, 2004b). Some would no doubt resist such generic approaches which can lead to potential de-skilling of specialist professionals.

Here I would argue that interaction is another layer of expert knowledge in addition to the scientific and clinical dimensions and that health professionals have explicit and tacit level of knowledge about interaction in their specific professional settings. However, as Heath (1979) points out, much of the professional knowledge does not appear at the surface of interaction. She writes:

First, the language of the professional set him apart from the client or patient. His language was a mark of the special province of knowledge which was the basis of what it was the patient was told, though the knowledge itself could not be transmitted to the patient. A second feature of the language of the professional was his articulated knowledge of ways to obtain information from patients while restricting the amount and types of information transmitted to the patient. Professionals have, therefore, been socialised to have certain perceptions of their role in communicative tasks, and they have been trained to use language as an instrument to maintain that role and to accomplish ends often known only to them in interchanges (Heath, 1979, p. 108).

These are very general observations made some 25 years ago. The nature of information exchange in doctor-patient consultation has not only changed over time, but that different medical specialties come to embody different interactional trajectories when dealing with patients.

Peräkylä and Vehviläinen (2003) have recently drawn our attention to what they call professional stocks of interactional knowledge (SIK). By SIK, they refer to the normative models and theories found in communication

text books and manuals. Quite rightly they challenge the rather simplistic conceptualisation of interaction and in the Goffmanian spirit, call for the need to pay detailed attention to the interaction process itself. However, we need to keep the text book characterisation of interactional knowledge separate from that of the professional practitioners themselves. When one speaks to professionals or becomes involved in long-term ethnographic fieldwork, one realises the complex nature of interactional knowledge which may be shared among a group of professionals. Following Polyani (1958), my concern here is with the tacit knowledge of interaction which underpins many healthcare professionals' communicative conduct in situated encounters.

In a recent special issue of the journal *Communication & Medicine*, Peräkylä *et al.* (2005) provide a linkage between treatment theories and interaction theories. Their hypothesis is that the more tightly a professional theory of interaction is anchored to the respective treatment theory, the more potent the theory is. However, conversation analytic studies of professional interaction continue to focus on the sequential organisation of small interactional episodes. From the viewpoint of professional practice, Clarke (2005, p. 191) points out the limitations of such a narrow focus:

Studies of talk-in-interaction, whether labelled as CA or DA, would align more readily with the perspective of professionals if they could examine episodes of interaction as long as the whole consultation... Professionals will perhaps be more enthusiastic about collaboration if the lens used to study their activities could be switched to even a slightly lower power, so that the give and take of discussion over a longer period – perhaps even during the whole of a consultation – could be examined.

Clarke extends the metaphor of the microscope and suggests: the analyst must steer between the Scylla of decontextualisation and the Charybdis of over-generalisation. A microscopist would remind us of the need to use a lens of appropriate magnification – neither too high power (removing essential context) nor too low power (revealing insufficient detail)' (Clarke, 2005, p. 189).

This brings me to propose a framework of 'activity analysis' which combines the micro and macro aspects of social events, and also relies on ethnographic insights in search for ecological validity' (Cicourel, 1992).

### **Towards activity analysis in work-related settings**

My proposal of activity analysis (AA) is theoretically premised on Levinson's notion of 'activity type' (Levinson, 1979; Sarangi, 2000). Levinson (1979, p. 368) defines activity type as 'a fuzzy category whose focal members are goal-defined, socially constituted, bounded events with constraints on participants, settings

and so on, but above all on the kind of allowable contributions'. He adds:

[T]ypes of activity, social episodes if one prefers, play a central role in language usage. They do this in two ways especially: on the one hand, they constrain what will count as an allowable contribution to each activity; and on the other hand, they help to determine how what one says will be "taken" – that is, what kinds of inferences will be made from what is said. Both of these issues are of some theoretical and practical interest (Levinson, 1979, p. 393).

Constraints on what can or cannot be said are closely tied up with how inferences are made in a goal-oriented action framework and what may count as a breach of social norms. The tradition of —ethnography of speaking' (Hymes, 1962) is a precursor to the notion of activity-type, although an early attempt worthy of the label of —activity analysis' is Mitchell's (1957) study of the language of buying and selling in Cyrenica. —Ethnography of speaking' as an analytic template works well in most ritual settings. But, as Thomas (1995) observes, it is a rather descriptive framework, which lacks explanatory power and does not allow for assessing which components are more important in a given activity and the role of agency and context in the shaping of activities. In contrast, Levinson's proposal offers an explanatory framework which takes into account speaker intentionality (see Gumperz, 1982, on contextualisation cues and conversational inferencing) as well as participant orientation (see Goffman, 1981, on production and reception roles). The main strengths of the notion of activity-type can be summarised as follows:

The notion of activity type appeals for various reasons: it takes into account cognitive, historical and genealogical dimensions, as it links these to interactional patterns and structural configurations. Unlike behaviourist or cognitive models which focus on the individual performance and mental scripts, activity type analysis removes the burden from the individual... Against the backdrop of prototype theory, Levinson moves away from an either/or categorisation, towards a categorisation of entities based on more/less along a continuum. For instance, not all legal proceedings or medical consultations are conducted in exactly the same way, but there is a prototypical form from which other versions can deviate, but not without activity-specific inferences/implicatures attached to such deviations. A notion of normality is thus presupposed in activity-specific behaviour, but this does not amount to fixedness or rigidity. Deviations from the focal points only make us rethink the potential boundaries and crossings between activity types (Sarangi, 2000, p. 6-7).

Drawing upon this notion of activity type, my proposal for activity analysis can be situated within discourse analysis, centred around the multi-functional, context-specific nature of language use both in written texts and in spoken interaction. The notion of context is of central significance in one's understanding of activity

types – both as participants and as analysts. Levinson (1997, p. 26) points to the apparent paradox that utterances can create their own contexts:

If it takes a context to map an interpretation onto an utterance, how can we extract a context from an utterance before interpreting? The idea that utterances might carry with them their own contexts like a snail carries its home along with it is indeed a peculiar idea if one subscribes to a definition of context that excludes message content.

The following analytic features are constitutive of activity analysis:

- Mapping of entire encounters, both thematic and interactional
- Communicative flexibility at the levels of activity types and discourse types
- Integration of discoursal and rhetorical devices
- Goffman's notions of frame, footing and face-work
- Gumperz's notions of contextualisation cues and conversational inference
- Alignment: sequential and normative
- Social and discourse role-relations
- Thick participation and thick description

Activity analysis therefore has to be grounded in what I would call —thick participation' in the professional/institutional events, and 'thick description' has to include both thematic and interactional mapping of whole encounters (Roberts and Sarangi, 2002; see also Gee, 1997; Green and Wallat, 1981; Labov and Waletzky, 1967; Mehan, 1979).

When dealing with a corpus of data, Schiffrin (1987, p. 19) alerts us to two complementary kinds of analytical accountability:

When an analysis provides a comprehensive understanding of the coherence in a text, we may say that it has sequential accountability. When an analysis provides an explanation of why an element occurs in one discourse environment but not another, we may say that it has distributional accountability.

The sequential dimension has been the cornerstone of conversation analysis and has led to many useful insights (e.g., step-wise advice giving [Heritage and Sefi, 1992], perspective display series [Maynard, 1991]). Dealing with professional and institutional encounters, corpus-based studies have demonstrated distributional variations in interaction types (both patterns of differences and similarities). These two types of analytic accountability have to be supplemented with an attention to thematic staging and critical moments (Roberts and Sarangi, 2002, 2005)

To summarise, within a framework of activity

analysis, interactions are seen as a narrative unfolding of events and characters, organised temporally and spatially. In addition to the sequential order, rhetorical moves are also central to how events and characters are portrayed and managed in interaction (see, for instance, Goodwin's 1994 general proposals about nature of salience, backgrounding and foregrounding of information). Activity analysis remains sensitive to the historical context in which institutional/professional changes and continuity are accomplished in response to a given socio-political climate. More importantly, in mapping particular episodes of healthcare interaction (e.g., delivery of bad news, shared decision making), activity analysis provides a useful bridge between *micro-level understanding* and *macro-level explanations* of workplace communication. Overall, it facilitates a division of interpretive labour in what seems to be primarily an interdisciplinary field of study.

### Illustrative examples

Over the years, the activity analysis approach has been developed with particular reference to the medical setting (Roberts and Sarangi, 2005; Sarangi, 2000, 2004 a, 2005, [in press]). For example, interactional and thematic maps of contrastive cases bring out the differences that can lead to identifying —good' and —bad' interactional trajectories, especially in the oral medical examination context. With regard to styles of involvement, we have found that the candidate with the high score, unlike the one with the low score, not only uses more empathetic styles of asking questions and listening in distributional terms, s/he also displays a strategic orientation to an affiliative stance in the staging/sequential sense (Roberts and Sarangi, 2002).

In an ongoing study in the primary care setting in the UK, we have been exploring the patterns of interaction related to prescription and non-prescription of antibiotics. A systematic mapping of the encounters has led to identifying interactional variables: (i) consultations where antibiotics is prescribed are comparatively shorter in duration, with physical examination routines occurring earlier on in the consultation process; (ii) consultations where antibiotics is not prescribed are longer in duration, with elaborate and complex explanation and assessment of symptoms, with patients sometimes providing their own accounts of aversion to antibiotics.

Let me provide one further example from the genetic counselling setting. Genetic counselling is a hybrid activity type (Sarangi, 2000), covering a range of topics such as: the natural history of a genetic disorder; levels of genetic

awareness of the clients and families, and relationships within family networks; potential advantages/disadvantages of genetic testing; discerning an individual client's carrier status vs. at-risk status vs. affected status; the (un)treatability of specific conditions; decisions surrounding reproduction choices; the ethical and legal consequences of decisions made, privacy issues concerning the circulation of genetic information. In interactional terms, one would expect periodic shifts in topics, covering both medical and lifeworld domains, over an expansive timeframe that includes the past, the present and the future.

Unlike many other counselling/therapeutic settings where clients take centre stage in troubles-telling, we find that in genetic counselling the genetic professionals spend a considerable amount of time explaining the causes and consequences of a genetic condition, the risks associated with knowing one's genetic status, the psychological and socio-moral issues concerning decisions to undergo predictive tests and decisions about disclosing one's test results. Let us consider the interactional maps concerning three clients in three counselling sessions (second appointments) where each client is at risk of having inherited the Huntington's Disease<sup>3</sup>.

We find in Figure 1 that there is a noticeable difference in the interactional patterns between HD01 and HD08 on the one hand, and HD02, on the other. It is striking that, with regard to HD01 and HD08, the genetic counselling professionals (i.e., the counsellor and the nurse) occupy most of the turns as far as frequency is concerned. By comparison, in the case of HD02, the client and her partner dominate the turn taking.

Let us consider the same sessions, this time mapping the encounters in terms of volume of talk.

In Figure 2, we notice more or less the same interactional patterns across the three sessions. In fact it emerges that the genetic professionals, in HD01 and HD08,

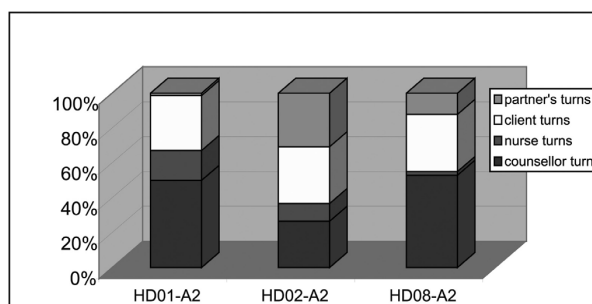


Figure 1. Distribution of turns by frequency.

<sup>3</sup> Huntington's Disease is a degenerative neuropsychiatric disorder which affects both body and mind. There is a 50% chance that the child of an affected parent will have inherited the disease-associated mutation. While predictive tests are available, there are uncertainties about the exact age of onset and the way in which the disease will manifest. Currently no effective treatment or cure is available for HD.

are taking up between 70 and 80 per cent of speaking time. A closer look at the data transcripts reveals, rather unsurprisingly, that the genetic professionals foreground their expertise and responsibility to explain various aspects of a genetic condition and the risks associated with testing and dealing with test results. In other words, a considerable part of the interaction is framed as information giving.

It still remains for us to see why the session involving HD02 is so characteristically different. We notice, both in Figure 1 and Figure 2, that the client and his/her partner maintain a high level of involvement in their interactional participation. Let us map the turns that the client (HD02) takes in this session.

In Figure 3, out of the 186 turns, 51 of these are quasi-turns (to include backchanneling cues, minimal confirmations) and 41 of these are direct answers to the counsellor's questions and directives. What is striking is that 93 turns are taken up by the client to introduce and elaborate topics that are of a major concern. As it happens, the client has had other medical problems to deal with, in addition to genetic testing. It turns out to be a classic troubles-telling activity, which is patiently tolerated by the genetic professionals. It is however interesting that only in one instance the client gets to ask a self-initiated

question.

This particular session also includes substantial contributions from the partner who accompanies the client. A marked feature of the interaction is the occurrence of — side sequences' involving the client (HD02) and the partner (MP) where the genetic counsellor (G3) and the Nurse (N2) take a back seat. Here is an example of a 'side sequence' which concerns a friend to whom they will disclose the test results, in addition to their two daughters<sup>4</sup>:

#### Data Example

- HD2: and and ((name of friend)) my best mate  
 N2: right  
 HD2: that's the one who was going to come today look [(.) 'cause] he might not =  
 N2: [yeah]  
 HD2: = have (.) started a new job didn't last long mind (.) but (.) ((laughs)) he's supposed to be in ((name of city)) working on the roads today [(.) but] he =  
 G3: [oh goodness]  
 HD2: = give it up (.) two thre- well like I said when I was ill?  
 N2: [[\*yeah\*]  
 MP: [[yeah I was] th- that was the most happiest day of my life (.) (^^^)  
 ((G3: laughs))  
 MP: I mean I'm not used to it it's just something I [had to do 'cause it's winter =  
 HD2: [it's like the way he looked at ((name of friend and her partner)) wasn't it]  
 MP: = time and I'm a builder] it's just really hard to get work so I just had to make do and (.) three days (.) well (.) of standing out in the rain all day and (.) (was like ah)  
 HD2: and you had a bit of attitude with ((name of friend and her partner)) over the fact that I banged my knee (.) wasn't their fault but they took me shopping (1.0) and he had a bit of attitude with them then (.) because I'd hurt myself (.) ((laughs))  
 MP: \*(^^^ (.) yeah (.) that's why I'm here somebody got to look after you see\*  
 HD2: ((laughs))  
 MP: WELL why trust somebody else to do something badly that you know you can do yourself properly (.) \*that's what I say\* (.) \*know what I mean (.) so\*  
 HD2: see what I mean he's terrible lately (.)  
 MP: yeah and I get a lot worse  
 HD2: ((slight laugh))  
 MP: well I (.) most women would love to have a man

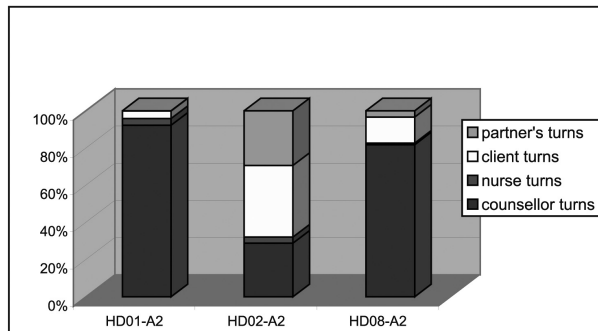


Figure 2. Distribution of turns by volume.

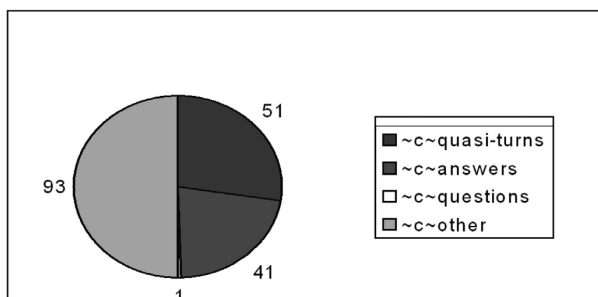


Figure 3. A client's turn types (HD02 – A2). Total 186 turns.

<sup>4</sup> Transcription conventions include: (.) micropause; (number): pauses up to one second or more; CAPITAL LETTERS: increased volume; \*word\*: decreased volume; question mark [?]: rising intonation; [text in square brackets]: overlapping speech; ((text in double round brackets)): description or anonymised information; (text in round brackets) transcriber's guess; (^^) untranscribable; =: latching.



- fuss round them like I do all the time ((quiet laugh))  
 ((G3: laughs))  
 MP: that's what you said when we got married anyway  
 ((laughs))  
 ((G3: laughs))  
 MP: cook clean do all that sort of stuff (.)  
 HD2: so he (.) he's get- he he he said he's got the training  
 in just in case he's got to take over the  
 ((G3: laughs))  
 MP: yeah (.) just have to pay somebody to come and  
 do the ironing (.) ((laughs))  
 G3: (2.0) so were there any things that you wanted to  
 (.) ask or maybe you want to discuss today

As we can see, this side sequence is accomplished in a light-hearted vein, but it simultaneously establishes the grounds for disclosing the test results to a friend, while also displaying their orientation towards coping with a positive test result. It is rather usual in the genetic counselling setting for counsellors to encourage clients to talk/think through the various possible implications of genetic testing, much of which may not have been topicalised outside of the clinic. The clinic then provides an opportunity for clients to display their awareness of the consequences of testing and for the counsellors to gain invaluable insights into the clients' understanding and coping mechanisms before they proceed with the offer of genetic testing.

Based on the overall interactional and thematic maps, it is possible to appreciate how genetic counselling is a uniquely distinct activity type. Systematic thematic maps will reveal even more interactional nuances (see, for instance, Sarangi and Clarke, 2002a, 2002b). Micro-analysis of activities as outlined above can contribute towards identifying different patterns of interactional trajectories, which can then form the basis for evaluation of practice and development of communication protocols as well as a trigger for reflexivity and awareness raising.

### Concluding remarks

Connecting the *micro* to the *macro* in our studies of work-related activities will remain a challenge. Methodologically speaking, any analysis of workplace practices needs to steer a midway between —constructionism' and —radical situationalism' in order to avoid —micro-analytic myopia' (Mehan, 1991). Activity analysis, as I have demonstrated in this paper, equips us to meet this challenge, while striving towards —ecological validity' (Cicourel, 1992). More generally, workplace researchers will be expected to remain committed to a research site rather than to a research tradition, so that they understand work-related activities in their entirety. The challenge for discourse and communication analysts is one of moving from —no expertise' to —discriminatory

expertise', whereby they can not only provide —thick description' but also through —thick participation' contribute towards evaluation of professional and institutional practices and their intersection.

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