

When technological affordances meet interactional norms: The value of pre-screening in online chat counseling

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ABSTRACT

We present a conversation analysis of openings sequences of online text-based chat counseling. Particular about this chat counseling is that the clients made available their help question through pre-screening. The data consisted of 40 chat sessions with pre-screening and 34 sessions without pre-screening from the Dutch alcohol and drugs chat service. In the chat sessions with pre-screening, the participants displayed accountability with regard to the norms relevant to pre-given information, which took up space and time and frequently involved interactional misalignment. In chat sessions without pre-screening of the question, the openings followed a more fluent interactional course. We discuss how affordances of digital communication media may work as constraints when the participants orient to interactional norms known from other, offline environments.

Key words: conversation analysis, online counseling, chat, openings, pre-screening, conversational norms, technological affordances

Paper Received 6/10/2015; received in revised form 21/12/2015; accepted 23/12/2015.

1. Introduction

In this article, we present an analysis of opening sequences of online text-based chat counseling conversations of the Dutch national Alcohol and Drugs Information Service. Characteristic of our chat counseling data was the use of pre-screening prior to the chat interaction with the counselor. This pre-screening provides the counselor with relevant information concerning the client's question and could thus render sessions more focused from the start. This means that pre-screening can be seen as an "affordance" (Hutchby, 2001b) of the technology supporting the interaction. Central to the concept of technological affordances is that they do not impose themselves upon human actors when these actors interact with a particular artifact (in our case the chat

Cite as:

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| Stommel, W., & te Molder, H. (2015). When technological affordances meet interactional norms: The value of pre-screening in online chat counseling. <i>PsychNology Journal</i> , 13(2-3), 235 – 258. Retrieved [month] [day], [year], from www.psychology.org . |
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software), but that they frame what is possibly done with it. Nevertheless, there is a variety of ways of responding to the range of affordances for action and interaction that a technology presents. In this study, we examine how users of a chat counseling service respond to one such technical facility, namely that of the pre-screening in their interaction with the service. We analyze how clients formulate their question or problem in the pre-screening, and focus on how this pre-given information is drawn upon in the chat session to follow. While prescreening may, in theory, organize the interaction more efficiently, we show how this technical affordance can also clash with participant orientations to particular interactional norms adopted from offline environments. In order to shed light on participants' real-life dealings with norms in digital environments such as these, we make use of conversation analysis (Sacks, 1992). This method allows for an analysis of how, in natural conversation, interactants coordinate understanding and joint action, while continuously updating their understanding of each other's background and psychological characteristics (see also Te Molder & Potter, 2005). Before presenting our analysis, we discuss previous research on conversational openings and participant orientations to pre-given information in openings, in particular web-based, computer-mediated openings.

2. Conversational openings

Conversational openings have been studied in a great variety of conversational settings: ordinary calls (Emanuel Schegloff, 1968, 1986), medical consultations (Robinson, 1998), helpline calls (Danby, Butler, & Emmison, 2009; Firth, Emmison, & Baker, 2005), other institutional calls (Cromdal, Landqvist, Persson-Thunqvist, & Osvaldsson, 2012; Leppänen, 2005; Whalen & Zimmerman, 1987) and computer-mediated communication (Markman, 2009; Meredith, 2012; Pappas & Seale, 2009; Rintel, Mulholland, & Pittam, 2001). This research has revealed that the setting in which the conversation occurs impacts the way the conversation starts but also that openings are *the* environment for the participants to establish the setting as relevant in a particular sense (Danby, Baker, & Emmison, 2005). During the opening, participants establish a sense of each other's identity, purposes of the conversation and interpersonal relationships (Schegloff, 1986). This relationship is sensitive to the local, institutionally relevant, identities: "The opening turns of the call and in particular the components of the first turns of answerer and caller regularly establish an identity set

implicative for the nature of the business to follow” (Zimmerman, 1992, pp. 49-50). Put differently, the very first turns of a call, including the greeting ritual (Goffman, 1981) offer both parties a glance at the rest of the conversation in the sense that the first sequences establish a patterned rule for the interaction that follows (Sack, 1972; Schegloff, 1968). Therefore, these first turns constitute an important phase of the conversations.

In help line calls, the relationship of the participants is based on a presumed knowledge differential: the counselor has information the help seeker does not have (Firth, Emmison & Baker, 2005; Schegloff, 1968). However, also the caller has information at his disposal that the counselor has not. After the establishment of identity and/or reciprocal greetings the “reason for the conversation” typically becomes relevant (Leppänen, 2005). It is only after having established this reason that the counselor can give the desired information/advice.

2.1 Inviting the reason for the call

A substantive body of research has engaged with the question how problem presentations are solicited (Heritage & Robinson, 2006b; Robinson, 1998, 2006) and how participants present their problems as the reason for the call/visit (Danby et al., 2005; Heritage & Robinson, 2006a; Leppänen, 2005; Whalen & Zimmerman, 1990). Frequently, these problems are not explicitly invited by the answerer, but immediately presented by the caller (cf. “yes hello, I would like to make an appointment (hh) I have a two year old that has a sore throat you see” [Leppänen, 2005]). Sometimes however, the presentation of the problem is preceded by an invitation from the answerer.

There are various ways in which answerers may invite the help seeker to present a reason for the call/consultation. Most typical are questions like “What can I do for you?”, or “How can I help?”. The use of this type of general inquiry has been analyzed in openings questions for medical consultations (Heritage & Robinson, 2006b). These general questions formulate an agnostic stance about the precise nature of patients’ medical business and allow patients to present their concerns in their own terms.

However, when the answerer already has some knowledge of the caller’s problem, this has implications for how the problem account is invited. Heritage and Robinson (2006) have analyzed opening questions in relation to physicians’ prior knowledge in medical consultations. Physicians must decide how much of that knowledge to display when soliciting the callers’ accounts of the problems. Patients,

who may assume that their physicians have the relevant information about them, must decide how much repetition is appropriate when presenting their problems. These participant norms regarding given and new information “sanction persons who convey information to recipients who already have knowledge of it (Maynard, 2003; Terasaki, 2004 in Heritage & Robinson 2006b) [...] and persons who ask for information when they are known to already have it” (Heritage & Robinson, 2006b: 90). When physicians request patients to confirm a general gloss of the problem, they were found to constrain patients’ problem presentations. So while these requests for confirmation display preliminary knowledge of patients’ problems, they simultaneously introduce a barrier for patients to present their problem arising from the norm that sanctions repetition of known information.

2.2 Chat openings

Chat and other computer-mediated conversation openings have been examined in some contexts: IRC group chat sessions (Rintel et al., 2001), chat-based team meetings (Markman, 2009), Facebook chat (Meredith, 2012) and medical video-mediated consultations (Pappas & Seale, 2009). These studies have shown that the medium of communication may destabilize the relatively prefixed sequences of talk for a specific setting. For instance, in medical consultations participants were engaged in negotiating the novel physical space in the teleconsultation room. Professionals did not act as the *host* of the encounter in the opening phase, as they do in face-to-face consultations. The researchers analyzed this as the professionals’ inability “to maintain a degree of asymmetry of roles between themselves and the patient” (Pappas & Seale, 2009, p.1236). Hence, the medium of interaction may impact the organization of the opening and thus also, more generally, the institutional roles.

Rintel et al. (2001) showed that due to a particular medium setting (chat box) participants may not orient to norms they otherwise would orient to (e.g., in telephone conversations). Their study involved multiparty chat box interactions, where openings occur each time a new visitor virtually enters the chat box. An important aspect of this opening interaction is the “Automated Joining Event” (AJE), which is a notification produced automatically by the chat software when a participant has entered the chat box. This message notifies the availability of the newcomer, i.e. the possibility of interaction. Despite similarities to summons in calling (produced by a conscious action of one participant, tone/ sign produced by the medium), there is a crucial difference between AJEs and telephone rings (Rintel et al., 2001). In calls, the summons set up

an AB-sequencing pattern, where A is the summons and B is the first verbal contribution to the conversation. This sequencing implies that A has a reason to summon B. Thus, the ringing initiates taking turns (greetings, identification) at least until A has presented the reason for calling. In chat, AJEs do not function as the first half of a to-be-finished summons-answer exchange. They do not normatively require a response and therefore are not preambles to further conversational activity (Schegloff, 1968), until the reason for joining the session is presented. This shows that participant orientations to interactional norms may vary across communication media.

In the context of pre-screening, the question is if and how counselors and clients in online chat counseling orient to norms related to pre-given information. On the basis of this analysis we discuss the meaning of pre-screening as an affordance in web-chat services.

3. The Dutch Alcohol and Drugs Information Chat Service

A number of regional organizations in the field of mental health promotion (including addiction) in the Netherlands initiated a chat information service on alcohol and drugs in 2009. This service was meant to reach an audience that is less inclined to use the various information/help telephone lines that exist in this field. The organizations involved in the chat service take turns in manning the service, which is available from 1 p.m. until 5 p.m. (but not in weekends). The protocol of the alcohol and drugs information chat prescribes a five-phase structure for the conversations¹:

- Phase 1: Welcome/ Introduction
- Phase 2: Clarifying the question
- Phase 3: Setting the goal
- Phase 4: Acting out the goal
- Phase 5: Closing

The analysis we present in this article is related to phase 2. The chat protocol instructs counselors to initiate a chat session as follows: “click on the icon of the client to open the chat box as soon as the client appears “on line” and start the session with a greeting.” Then, the counselor is expected to deal with the help question using the techniques of listening, summarizing, questioning, supporting and showing empathy. The chat protocol¹ stated that in phase 2 of the chat conversations, the question and

the situation of the underlying problem need to be explored to get a full picture of the “real” question (because a question for information may actually be a request for advice or help). Therefore, counselors were taught to use questions to explore the clients’ concerns.

The chat service worked with a pre-screening form that clients filled out just prior to the chat session. It included the items: name, age, gender, city and question. The rationale behind the pre-screening was to monitor and archive (demographic) data on the chat service and to enhance efficiency and facilitate tailoring advice to the specific client. For instance, if counselors know where clients live, they are able to immediately mention local services (rehab clinic, drug testing service, etc.). This is efficient, because counselors would not have to ask for the location during the chat session. The procedure for starting a chat session was that clients after having filled out the form clicked on the “Chat now” button at the bottom of the online form. Then, the chat window appeared on the screen. In the client’s chat window was announced “You are chatting with [name of counselor]” and the pre-screening information about the client appeared on the counselor’s screen. At the bottom of the screen of both counselor and client was a typing box, but each would only see what the other person had typed once he/she pressed the send-button. The program also included a so-called typing notification that indicated the other person was typing, but according to the counselors this was unreliable due to software failures. During the chat conversation, the counselor (but not the client) was always able to view the pre-screening information.

4. Data and method

The data are 40 chat sessions including pre-screening of the Dutch Alcohol and Drugs Information Chat Service. A second data set consists of 34 chat sessions *without* the client’s question included in the pre-screening. In response to our preliminary analysis of the chat openings, the Alcohol and Drugs Information Service decided to remove the “question”-item from the pre-screening. We obtained the logs of these new sessions in order to validate the changes. In this article, we present two examples from this second data set.

The Trimbos Institute saves calls and chat logs for supervision and training purposes. We signed a vow of secrecy regarding person-related information in the chat logs. A Trimbos employee replaced all client names by pseudonyms and deleted any

other person-related information through which a client could be identifiable. In addition, counselors' names were replaced with pseudonyms.

The method of analysis is conversation analysis (Ten Have, 1999), more specifically digital CA (Giles, Stommel, Paulus, Lester, & Reed, 2015). A main contribution of CA to the analysis of CMC is its focus on sequential aspects of the interaction (Antaki, Ardévol, Núñez, & Vayreda, 2005). In web-based chat interactions, the participants heavily rely on the sequential relatedness of their posts, which probably explains why CA has already been used regularly for the analysis of chat (Danby et al., 2009; Ekberg, Barnes, Kessler, Malpass, & Shaw, 2013; Garcia & Jacobs, 1999; Markman, 2009; Meredith & Stokoe, 2014; Raclaw, 2008; Rintel et al., 2001; Schönfeldt & Golato, 2003; Stommel & Van der Houwen, 2013). These studies analyze chat as interaction, finding that the participants are orientated to the same basic contingencies of maintaining intersubjectivity as in oral talk (Meredith & Stokoe, 2014). For the current analysis, we analyzed all openings in which one of the participants oriented to the pre-screening post by post, viewing each post as response to the previous and as projecting the relevance of a next post. The possibility of simultaneous post construction disrupting the adjacency of related posts was considered on the basis of the timing of the posts. The Dutch data fragments we show contain original spelling and language mistakes.² English translations were made by the authors.

5. Analysis

The analysis shows how counselors and clients orient to norms related to the pre-screening information. Arguably, it would be efficient if a pre-given question by the client (i.e. a first pair part) would receive an answer (i.e. a second pair part) as soon as the session is "on". However, our data indicate that overwhelmingly the help question is not answered immediately after the opening greetings.

First, with reservation to the quantification of conversational phenomena (Schegloff, 1993), we mapped whether the counselor or the client first sent off a post about the problem or question (phase 2), and if and how this initiation oriented to the pre-screening question (Table 1).

| | First post exploring problem/question (phase 2) (n=40) | |
|-----------|--|-----------|
| Client | Checking receipt of pre-screening Q = | 2 |
| | Help question/ problem presentation (no overt orientation to pre-screening Q) = | 11 |
| | Total | 13 |
| Counselor | General enquiry (no overt orientation to pre-screening Q) = | 14 |
| | Noticing pre-screening Q = | 6 |
| | Follow-up question to pre-screening Q = | 4 |
| | Announcing reading of pre-screening Q = | 2 |
| | Answer to pre-screening Q = | 1 |
| | Total | 27 |

Table 1. Clients and counselors as initiators of exploration of problem/question

Table 1 shows that clients 11 out of 40 times start the session with explaining their problem or question “from scratch”, thereby treating the pre-screening as irrelevant. The counselor either does not relate to the pre-screening question (14 out of 40 times) or uses practices that imply a problematic dealing with the pre-screening (12 out of 40). In only one out of 40 chat sessions, the counselor provides an answer (which is also not working adequately). This warrants a detailed analysis of the interactional dynamics of online counseling using pre-screening. In the following, we analyze what happens when the participants orient to the pre-screening and the norms related to pre-given information in the opening of the chat counseling session.

5.1 General enquiry

Counselors frequently use a general enquiry like “What can I do for you?” to initiate the exploration of the help question or problem (14/27, see Table 1). A general enquiry does not display knowledge of the pre-screening question just typed by the client and thus fails to acknowledge this information (cf. Heritage & Robinson, 2006b). In that sense, general enquiries treat the pre-screening as irrelevant. In one of our examples this also becomes an issue for the participants in the interaction itself. Excerpt 1 shows the interactional risk for the counselor of withholding knowledge of the pre-screening question. In this example, the client orients to the norm that one should not ask for information one just received, thus accusing the counselor of inattentiveness.

Excerpt 1 (Chat 14)

Naam: X. Leeftijd: -. Man. Woonplaats: X. Vraag: wat zijn de openingstijden van de vestiging in Bergen op Zoom. Medewerker: Co.

Name: X. Age: -. Male. City: XX. Question: what are the opening hours of the establishment in Bergen op Zoom. Counselor: Co.

- 1 [13:06:02] Co Waar kan ik je mee helpen?
How can I help you?
- 2 [13:06:28] Cl ik heb de vraag al gesteld, maar wat zijn de openingstijden van vestiging
3 bergen op zoom?
I've already asked this question, but what are the opening hours of the establishment in bergen op zoom?
- 4 [13:06:50] Co ik ken je vraag nog niet; dus stel hem nog een keer als je wilt
I don't know your question yet; so ask it again if you want

The counselor initiates the chat session with the general inquiry “how can I help you?” (line 1). In response, the client explicates that he already posed this question (in the prescreening) (line 2). He thereby orients to the norm that one should not repeat information and simultaneously to the norm that the counselor should not ask for information already available to him. In this way, the client indirectly accuses the counselor of inattentiveness. He mitigates this accusation by repeating his question (lines 2-3). The counselor, in response, denies he already knows the question (line 4), thus claiming an epistemically deficient position and warding off the accusation of inattentiveness. The only plausible explanation for this deficiency would be technical problems (pre-screening form was not available to the counselor) or inexperience (counselor does not know about the prescreening form/ has not seen it). The fact that the counselor does not account for “not knowing the question” may point at the latter explanation. However, the counselor requests the client to repeat his help question (line 4), not orienting to the fact that the client already did in lines 2-3. This excerpt shows that clients may orient to the norms relevant to providing (new) information and that this projects an interactional risk for the counselor. More specifically, pre-screening questions provide a context for accusing the counselor of inattentiveness in the case of “agnostic” opening questions.

In the following, we analyze examples in which the counselors do acknowledge the pre-screening information. These vary from noticings (“I see your question on the screen”), announcements of reading (“let me read”), to follow-up questions and answers.

5.2 Noticing the pre-screening question

Counselors may overtly notice the pre-screening, displaying they have read it and are thus familiar with at least some aspects of the clients' problems. Sometimes, like in Excerpt 2, the noticing includes a gloss of the problem.

Excerpt 2 (Chat 4)

Naam: X Leeftijd: 29. Vrouw. Woonplaats: X. Vraag: Ik heb een week na mijn becruchting cocaine gebruikt. In hoeverre heeft dit consequenties voor mijn ongeboren kind. De 20 weken echo lieten niets afwijkends zien overigens. Bedankt. Medewerker: Co.

Name: X. Age: 29. Female. City: X. Question: I used cocaine a week after my impregnation. To what extent does this have consequences for my unborn child? The 20-weeks ultrasound did not show anything divergent by the way. Thank you. Counsellor: Co.

- 1 [16:47:06] Co Hallo [Cl]
Hello [Cl]
- 2 [16:47:22] Cl Hai [Co]
Hi [Co]
- 3 [16:47:33] Co Ik zie in het scherm je vraag staan over het gebruik van coke tijdens je
4 zwangerschap
On the screen I see your question about the use of coke during your pregnancy
- 5 [16:48:09] Cl Klopt. Moet ik de vraag herhalen?
That's correct. Should I repeat the question?
- 6 [16:48:16] Co Nee hoor, ik zie hem staan
No, I see it on the screen
- 7 [16:48:31] Co Hoe veel en hoe vaak is dit voorgekomen tijdens je zwangerschap?
How much and how often did this happen during your pregnancy?

In lines 3-4, the counselor initiates phase 2 by noticing the pre-screening question: "On the screen I see your question about the use of coke during your pregnancy". The formulation is glossing the topic of the question rather than summarizing the actual question, because it does not specify the issue of potential risks to the fetus. The noticing makes explicit to the client that the counselor has access to the pre-screening. Noticings are known to prompt the recipient to supply an account for what has been noticed (Pomerantz, 1980; Schegloff, 1988). In this context, the noticing makes

relevant an elaboration or specification of the help question. After a relatively long pause (0:38 is long considering the 0:18 and 0:11 pauses earlier in the session), the client first confirms the counselor's noticing of the pre-screening question ("That's correct"). This is similar to how patients confirm physicians' glosses as problem solicitations (Heritage & Robinson, 2006b). As with patients, the client in Excerpt 2 does not continue with a full, narrative account of the problem (Heritage & Robinson, 2006b). Instead, the client asks whether she should repeat the question (line 5), displaying relevance of the norm not to repeat information one has just given. This implies that the sequential implication of the counselor's noticing in lines 3-4 is unclear to the client. By proposing to repeat the question, the client implies there is nothing more to tell than she already did. The counselor denies the relevance of a repetition because she can see the question on the screen (line 6), but does not resolve the question what type of account is made relevant by the noticing. In fact, the post in line 6 re-issues the noticing and thus also the relevance of an account from the client. However, the counselor soon (0:15 sec.) resolves the issue by posting a follow-up question (line 7), which makes explicit what additional information she is looking for.

So, noticing the client's pre-screening question displays familiarity with the earlier provided information, but prompts the client to give an account, challenging the norm of not repeating information one has just given.

5.3 Announcing a reading pause

In some cases, counselors acknowledge the pre-screening by announcing to read it. This is particularly appropriate when clients have typed a lengthy pre-screening question. See Excerpt 3³.

Excerpt 3 (Chat 7)

- | | | | |
|---|------------|----|---|
| 1 | [16:23:56] | Co | Hallo welkom op onze site, wat goed dat je je hiertoe wendt, even lezen <i>Hello welcome to our site, how good of you to turn to this, let me read</i> |
| 2 | [16:26:21] | Co | oke, ik begrijp dat je aan de ene kant afwil van die worsteling met |
| 3 | | | middelengebruik, en aan de andere kant ben je bang dat je bij Novadic |
| 4 | | | Kentron te veel geconfronteerd wordt met een groep waar je zelf |
| 5 | | | helemaal niets mee hebt ... <i>ok, I understand that on the one hand you want to get rid of the struggle with substance abuse, and on the other hand you are afraid that, at Novadic Kentron, you will be confronted with a group you have no affiliation with</i> |
| 6 | [16:26:59] | Co | Heb je al eerder behandeling gehad? |

Have you already had treatment before?

7 [16:27:30] Co Ben je er nog?

Are you still there?

After the opening, the counselor immediately (within the same post) announces that she will read the pre-screening question (line 1). The reading announcement by the counselor thus acknowledges this question as relevant information, and as information she should have knowledge of before the session can start. It also accounts for the pause to come. However, the counselor's account for the projected pause is not overtly accepted by the client. Almost 2,5 minutes later (which is an extremely long pause), the counselor posts a formulation of the client's pre-screening narrative (lines 2-5), conveying her understanding of the client's problem (Stommel, under review). Even this formulation is not responded to by the client. The chat session is now more than three minutes under way and has not yet received any post from the client. The counselor then pursues a response with a follow-up question (line 6). When this is also not responded to by the client, the counselor finally checks the client's presence in line 7. Then, finally, the client acknowledges his presence and apologizes for not responding earlier by explaining he has never used this communication medium before (data not shown).

So, disengagement from the chat session because of reading the pre-screening incorporates the risk that the client "disappears". The announcement of reading, which is an account of a longer silence, may reduce this risk, because it makes relevant a response by the client, but, as Excerpt 3 shows, it does not always receive one. Questions may then arise concerning the client's engagement with the chat session, especially when the client does not respond to next counselor posts either. In other words, the counselor orients to the norm to first read the information which has just been given by the client, but this invokes a brief disengagement from the session, which may enhance the risk that the client also disengages or disappears. The long silence that follows seems an instantiation of what has been called the risk that the client becomes "invisible" (Schalken et al., 2013).

5.4 Providing a straight answer to the pre-screening question

In one chat session (1/40), the counselor provides an answer after her welcome, while the client has not contributed any post to the session yet. Although this seems the efficiency "afforded" by the pre-screening question, Excerpt 4 shows it is not.

Excerpt 4 (chat 7)

Naam: X. Leeftijd: 48. Vrouw. Woonplaats: X. Vraag: hallo, ik ben er sinds gisteren achter dat mijn zoon af en toe in het weekend wiet rookt in het weekend, hij vindt ons erg ouderwets dat we dit niet tolereren, maar hij is 18 dus hebben niet zoveel meer te zeggen, hij zegt: wat maakt het nu uit, sterke drank of af en toe wiet, hij drinkt ook wel minder sterke drank dan eerst, wat is slechter dan sterke. Medewerker: Co.

Name: X. Age: 48. Female. City: X. Question: hello, I found out yesterday that my son smokes weed now and then during the weekend, he thinks we are very oldfashioned that we don't tolerate that, but he is 18 so we don't have that much to say, he says: who cares, liquor or now and then weed, he also drinks but less liquor than he used to, what is worse than liquor. Counselor: Co.

- 1 [15:38:07] Co: Welkom bij de chat
Welcome to the chat
- 2 [15:40:08] Co: allebei zou ik zeggen, sterke drank afhankelijk van hoeveel en hoevaak je
3 drinkt en wiet kan ook bij af en toe gebruik problemen geven weten we
inmiddels
*both I would say, liquor depends on how much and how frequently one drinks
and weed can also cause problems when used occasionally we know by now*
- 4 [15:43:00] Cl: We schrokken er erg van temeer omdat hij tot op heden helemaal niet rookte,
5 hij doet het 1x in de week maar wij weten er te weinig van om een weerwoord
6 te geven. Nu weten we eigenlijk niet zo goed wat we hiermee aan moeten. ik
7 merk uit gesprekken met de jeugd dat ze het al heel normaal vinden, maar
8 voor ons is het niet acceptabel. Verbieden heeft geen zin omdat hij 18 is.
*We were very shocked especially because he never used to smoke, he does it
once a week but we know too little about it to argue with him. Now we don't
really know what to do. I learned from talking to young people they already
think it's very normal, but to us it's unacceptable. Prohibiting is useless
because he is 18.*

The opening welcome from the counselor (line 1) is not responded to by the client for 2:01. The length of the pause before the counselor sends off another post indicates this response is noticeably absent. In fact, a silence this long may raise questions concerning the client's engagement with the session. Nevertheless, the counselor continues with a post that answers the pre-screening question (lines 2-3). The post is a response to the pre-screening question and thus orients to the norm not to ask for an account you have already received, although it apparently does not respond to all

counseling-relevant aspects of the problem narrative (e.g., the fact that the client is in conflict with her son about smoking weed). Almost three minutes later, the client posts a long turn in which she reformulates the problem, highlighting the emotional impact (“very shocked”) and not knowing what to do (“Now we don’t really know what to do”). Thus, the client treats the counselor’s answer as an insufficient answer to her question. So, although the straight answer to the pre-screening seemed efficient, the counselor was actually orienting to the relevance of a client post first. The answer to the help question was therefore rather a solution to an interactional misalignment than a strategy of efficiency.

A risk for counselors who are typing an answer to the prescreening question immediately following the opening greetings, which seems efficient, is that the client may post before they send of their answer. This is illustrated with Excerpt 5.

Excerpt 5 (Chat 6)

Naam: X. Leeftijd: 23. Man. Woonplaats: X. Vraag: Helaas haal ik 16.30 niet in denbosch om te testen. Heb namelijk witte zonder opdruk. (XTC Pillen) en wil ze zaterdag gebruiken. Is er een optie om ze ergens voor die tijd nog te testen? Medewerker: Co.

Name: X. Age: 23. Male. City: X. Question: Unfortunately I won't make 16:30 to test in denbosch. I namely have white stuff without an overprint. (XTC Pills) and want to use them on Saturday. Is there an option to test them somewhere before then? Counselor: Co.

- | | | | |
|---|------------|----|--|
| 1 | [16:06:06] | Cl | 3 |
| 2 | [16:06:20] | Co | Hallo <i>Hello</i> |
| 3 | [16:06:54] | Cl | Hallo <i>Hello</i> |
| 4 | [16:07:06] | Cl | had u mijn vraag ontvangen? <i>did you receive my question?</i> |
| 5 | [16:07:23] | Co | ja ik ben even voor je aan het kijken <i>yes I am quickly checking it out for you</i> |

The pre-screening question in this case is very detailed and concrete, asking for an option to have pills tested before a certain moment. After what appears to be a “false start” (line 1), the counselor and client exchange greetings (lines 2-3). Then, the client

asks whether the counselor has received his question, thus orienting to the pre-screening form as relevant for the chat session and to the norm that one should not repeat information (“did you receive my question?”, line 4). Interactionally, this question constitutes the first move of the second phase of the session, the exploration of the help question. It puts the counselor in the position to respond rather than to invite the client to elaborate on the question like a noticing or a follow-up question would. In response, the counselor confirms and accounts for the fact that she has not posted the answer yet. Thereby, she treats the pre-screening question as one that does not require further exploration and thus as sequentially making relevant an answer.

So, the client draws upon the pre-screening question (enquiring the counselor’s access to it) before the counselor has noticed it in a post. This shows that even if counselors treat pre-screening questions as making relevant straightforward answers, this is not self-evident to clients.

5.5 Posing a follow-up question

When counselors ask for a specification of the client’s question, which presupposes and thus displays knowledge of the pre-screening, this seems to create the least interactional difficulty. Excerpt 6 is an example.

Excerpt 6 (chat 26)

Naam: Cl. Leeftijd: 17. Vrouw. Woonplaats: X. Vraag: Hebben verslaafden pijn? Zo ja, waar en waarom?
Medewerker: Co

Name: Cl. Age: 17. Female. City: X. Question: Do addicts have pain? If yes, where and why? Counsellor: Co.

- 1 [13:06:04] Co: Welkom in de chat
Welcome to the chat
- 2 [13:06:35] Cl: goede middag
good afternoon
- 3 [13:06:41] Co: Kan je je vraag wat specifiek maken, om welke drugs gaat het?
Can you make your question a little more specific, what drug is it about?
- 4 [13:07:52] Cl: Ik maak een project over de doelgroep verslaafden. Een van mijn
I am doing a project on the target group of addicts. One of my
- 5 subhoofdstukken is 'de lichamelijke problemen van verslaafden.'

chapters is 'the physical problems of addicts.'

- 6 [13:09:48] Cl: Ik ben dus op zoek naar hoe verslaafden met hun lichaam omgaan.
So I am looking for how addicts deal with their body.
- 7 Verzorgen zij deze, hebben zij pijn, beschadigen zij zichzelf
Do they take care of it, do they have pain, do they harm themselves

After the reciprocal greetings (lines 1 and 2), the counselor asks the client to specify her question, zooming in on the type of drugs (line 3). This is a seemingly economic way of orienting to the pre-screening because it displays knowledge of the pre-screening and picks out one element for further enquiry. While a single word would have sufficed as an answer (e.g., “heroin”), it takes the client 1:11 to post again. This post is not an answer to the question “what drug is it about?” (line 3). Rather, the client provides an account for her question (lines 4-5). In doing so the client does not align with the counselor’s follow-up question. When the counselor does not respond to the account (1:56), the client rephrases her question (lines 6-7), as an upshot of the account and the pre-screening, again not specifying which drug her question is about. So, a follow-up question, displaying prior knowledge, seems efficient, but clients do not always align with it.

5.6 Openings without pre-screening questions

The analysis of chat session openings has triggered the Alcohol and Drugs Information Service to remove the “question”-item from the pre-screening form. As a result, either the counselor (in 25 out of 34 cases), or the client (in 9 out of 34 cases), now initiates the exploration of the help question, and does so immediately after the greetings, by not orienting to any pre-given information. We show two examples of chat sessions *without* a pre-screening question. In Excerpt 7, the counselor uses a general inquiry to solicit the client’s help question.

Excerpt 7 (Chat 4 post-intervention)

Naam: X. Leeftijd: 25. Man. Woonplaats: X. Medewerker: Co.

Name: X. Age: 25. Male. City: X. Counsellor: Co.

- 1 [15:22:39] Co Welkom bij de chat
Welcome at the chat

- 2 [15:22:42] Co Waar kan ik je mee helpen?
How can I help you?
- 3 [15:23:22] Cl Misschien hele stomme vraag maar waar kan je xtc kopen en hoe weet je
4 zeker dat het geen troep is?
Mayby very stupid question but where can you buy xtc and how do you know for sure it is not junk?
- 5 [15:24:28] Co Waar je het kan kopen weet ik niet. Er zijn natuurlijk geen verkooppunten
6 ofzo. Als je wilt weten wat erin zit dan kun je het laten testen.
I do not know where you can buy it. Of course there are no points of sale or anything like that. If you want to know what is in it you can have it tested.

The counselor welcomes the client (line 1) and apparently without expecting a response greeting (only 0:03 second after the post in line 1) invites the client to present the problem or help question with a general inquiry. Thereby, the counselor displays she has no prior knowledge of the problem. In response, the client presents her question, prefaced by a disclaimer, in her own terms. Next, less than two minutes into the session, the counselor posts a relatively lengthy answer (lines 5-6). This chat opening shows alignment of the participants with the trajectory of the interaction as started by the first posting participant. Having no information about the help question available means that participants do not have to go through the hassle of somehow orienting to it.

A second example (Excerpt 8) shows that also when the counselor has not invited a question, (as in Excerpt 7), there remains interactional alignment of the participants in exploring the help question.

Excerpt 8 (chat 3 post-intervention)

Naam: X. Leeftijd: 51. Man. Woonplaats: X. Medewerker: Co.

Name: X. Age: 51. Male. City: X. Counsellor: Co.

- 1 [13:49:38] Co Welkom
Welcome
- 2 [13:52:04] Cl Goede middag. heb tussen mijn 16e en 44e jaar heel veel gedronken. het
3 werd steeds meer. ben in 2006 gestopt met hulp en medicijnen. Toch blijft
4 het iedere dag een gevecht om niet te drinken. ben wel blij dat ik gestopt
5 ben, maar het kost veel moeite. zal dit gevoel ooit overgaan?

Good afternoon. drunk very much between the age of 16 and 44. It became more and more. quit in 2006 with the help of medication. Still fighting not to drink every day. I am happy I quit, but it's a great effort. will this feeling ever pass?

6 [13:53:05] Co Goh, wat knap dat het je tot nu toe gelukt is om niet te drinken. Dit is al een
7 hele prestratie!

Wow, great you managed not to drink so far. This is already a huge achievement!

8 [13:53:32] Co Wat jij nu benoemd hebben heel veel mensen last van, dit gevoel wordt
9 zeker minder

What you mention is something many people are struggling with, this feeling will definitely decrease

10 [13:53:48] Co Wat kan helpen is afleiding zoeken en er met andere over praten

It could help to find distraction and talk about it with others

After the opening welcome from the counselor (line 1) it takes the client 2:26 to respond. The counselor does not treat this silence as problematic, possibly because the typing notification indicated the client was producing a post. The client sends off a long post including a return greeting, a problem description and a question. After 1:01, the counselor answers to the problem and question in three single posts with a compliment (lines 6-7), an acknowledgement of the problem and an answer to the client's question (lines 8-9) and an advice (line 10). For this session, the pauses between line 7 and 8 and between 9 and 10 are only brief intervals (0:27 and 0:16), which suggests the counselor was not expecting any responding posts from the client. Hence, the session in this phase does not show any problematic interaction.

6. Discussion and conclusion

By filling out a pre-screening form, clients provide information about their name, age, gender, city and their question about alcohol or drugs. This information appears on the counselor's screen at the very moment the online chat box is open for posting. This modality of the software used for the chat service under study may be viewed as an affordance (Hutchby, 2001a, 2001b) of this particular medium of interaction, because it could be a means to provide adequate advice earlier in the session and thus render the counseling more economic and (cost) effective. However, we have shown that this service caused interactional difficulties, because the chat participants oriented to (current offline) norms relevant to information giving and receiving, i.e. were engaged in

accountability work that slowed down rather than speeded up the chat sessions. When counselors withhold their knowledge of the pre-screening information, they confront the client with the norm not to repeat information. When they do acknowledge it, there appears to be a number of ways to deal with it: counselors noticed the pre-screening, announced the reading of it, posed follow-up questions or, the most straightforward option, provided advice. Clients made counselors accountable for not acknowledging the pre-screening question or otherwise oriented to the norm not to repeat information one has just given. Although follow-up questions and straight advice giving seemed to cause the least problematic openings (because they did not involve accounting), in none of the openings the interaction ran smoothly. For instance, when the counselor provided advice straight after a welcome-post, this move was managing the absence of a return greeting from the client and thus a solution to interactional misalignment, rather than oriented to efficiency-enhancement in answering the help question.

We also showed that when clients have not been asked to type their question in the pre-screening, chat session openings are much more aligned. Either the counselor invites the help question (cf. Heritage & Robinson 2006b) or the client produces a problem account after the counselor's welcome (Extract 8), either way building sequences with problem descriptions and counseling relevant responses. Therefore, at least in this case of online chat counseling, no prior information about the client's question provides for a smoother interaction.

This finding could be seen as supportive of a deterministic view on the impact of digital media on human behavior and social interaction (for a full account and criticism of such a view see Hutchby, 2001b). However, we would rather make a different point. Our analysis has shown that so-called affordances of digital communication media *may* also end up hampering the interaction, depending on the interactional norms which participants, consciously or not, declare relevant to that particular affordance. A full understanding of medium possibilities and limitations requires a study of the medium's use 'in the wild' - not so much as a product of participants' individual intentions or motives but as a result of participants' coordinated real-life interactions. Such an analysis reveals how participants actually deal with, respond to, exploit or are restricted by a particular technical and structural affordance, and to what interactional purposes. In this case, the facility elicited unexpected accountability work regarding an offline norm not to repeat information that one has already received or provided, which in turn problematized the interaction. With some technologies participants may not adopt the norms familiar to spoken interaction (cf. Rintel et al., 2001), but in other cases, like

ours, they do.

Possibly, accountability with regard to the pre-screening is a matter of time: once familiarity with the medium has grown, participants may get to business immediately. For instance, greeting sequences would be skipped and clients would simply not post anything until they receive an answer or a follow-up question from the counselor. However, it may take a long time for a convention like this to develop, as counselors can be instructed or trained, but clients (or customers, civilians) generally not. In the meantime, for the chat counseling service under study, it seemed more feasible to act upon the findings and remove the question item from the pre-screening facility. Alternatively, the pre-screening itself could have been optimized, for instance by alerting the client that the counselor has access to the pre-screening, or by designing the interface in such a way that consistency is created between the pre-screening box and the chat box, thus supporting the expectation that the question raised is the first post in the chat.

More generally, this analysis has shown that whether and how interactional norms are translated to an institutional chat environment is a participants' issue. While benefits most likely to do with efficiency are presumably one participant interest (little or no greetings, welcomes and salutations), participants may still treat these aspects as relevant, because they are vehicles for relationship management (see also Stommel, 2012; Stommel & Te Molder, 2015). These findings make micro-analytic examinations of computer-mediated interactions (Giles et al., 2015) all the more relevant.

Notes

1. This protocol is an internal document of the Trimbos Institute, not available online: Van der Gouwe, D. & E. Ehrlich (2011) *Protocol Employees National Chat Service Alcohol and Drugs [Medewerkers Landelijke Chatservice Alcohol en Drugs]* (version 2).
2. The translations were made by the authors. Awkward wording in English reflects awkward wording in the Dutch original.
3. Note that Excerpt 3 does not include the pre-screening form for reasons of space (it is approximately 11 lines, 22 including translation).

Acknowledgements

We are very grateful to Nathalie Dekker and Marjolein Peters (Trimbos Institute) for their collaboration in the research project on which this article is based. The project was supported by the Dutch Organization for Academic Research [Nederlandse Organisatie voor Wetenschappelijk Onderzoek] (NWO) program Comprehensive Language Use (project BGRK-11-06).

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