Crying: Notes on Description, Transcription, and Interaction

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In this article, I am concerned with the description and transcription of crying. I consider the ways crying has been dealt with in general psychological research and in interactional research. In general psychological research, crying has typically been studied by way of self-report questionnaires that treat crying as a unitary and self-evident category. Although interaction work is more focused on the interactional role of crying, it is uncommon for transcription to try and capture its different elements. Taking off from Jefferson's (1985) work on laughing and using a corpus of phone calls to a child protection helpline, I attempt in this article to make explicit some different elements of crying and to show how these elements can be represented in transcript. In particular, I consider the nature and representation of whispering, sniffing, wobbly voice, high pitch, aspiration, sobbing, and silence. I make suggestions as to how each of these can be transcribed. In the article, I make some observations about the similarities and differences between laughing and crying and start to identify some of the interactional features associated with crying.

The goal of this article is show the value of producing a detailed enough transcript to allow exploration of crying as a topic for analysis. I document some of the common characteristics of crying in calls to the UK National Society for the Prevention of Cruelty to Children (NSPCC) Helpline serving as a preliminary to more detailed explorations of the interactional properties of crying in future work.

The following extract shows up some of the practical problems that crying generates for the work of the Child Protection Officers (CPOs) at the NSPCC:

1. AD Two twelve year old girls

```
 1   Caller 2:   Um::
 2               (0.6)
 3               Yeah I'm ok(h)ay.
 4   CPO:        Y'okay ab't- al:right then.
 5               (0.1)
 6               .HHH so::=um:: (0.1) okay.=so ↑Kathryn was
 7               just sayin abou::t
 8               (0.2)
 9               [ye know th-]
10   Caller 2:   [ AHH   HH]Hk ↑↑iuHHhh ↑uhh
11               (.)
12               ↑↑I ↑↑ca(h)n't ↑↑ta(hh)lk.
13               (1.2)
14   Caller 1:   Hello:?
15   CPO:        Hello::?
16   Caller 1:   I'm sorry she's just li:ke >broke out in
17               tears< she can't spea:k.
18   CPO:        Ri:::ght.
```

One of the problems facing CPOs at the NSPCC is the disruption of the fundamental task of eliciting information about possible abuse. Here, Caller 1—Kathryn (a pseudonym)—presents as calling on behalf of her friend (Caller 2) who has confided that her mother's boyfriend is sexually abusing her. During the call, the CPO urges Caller 1 to persuade her friend to come on the line. The extract shows Caller 2 coming online but is unable to speak of her abuse. On line 14, Caller 1 resumes the call but hangs up abruptly after another minute of interaction, probably due to the pleading of Caller 2 who can be heard in the background. This prevented potential significant child protection issues being pursued further. CPOs report that soothing crying callers is one of the trickier parts of their job.

Clearly, work that can help understand how crying can be identified and managed in telephone interaction is of particular interest and practical relevance for the NSPCC. The interactional aspects of crying are also relevant to broader theoretical questions in discursive psychology and conversation analysis concerning the respecification of emotion as an interactional accomplishment.

A useful starting point for this article is Gail Jefferson's (1985) work on the transcription of laughter. Prior to this work, merely reporting that laughter had occurred was often treated as sufficient for research purposes. Jefferson's (1985) chapter showed how a detailed transcription of the sounds that make up laughter could advance an understanding of its interactional properties. Her work highlighted a delicate coordination of elements of laughter with ongoing activities. Further research by Jefferson and others (e.g., Glenn, 1989, 1992, 1995, 2003; Haakana, 2001; Jefferson, 1979, 1984; Jefferson, Sacks, & Schegloff, 1987; Lavin & Maynard, 2002) has followed this through to highlight the involvement of laughter with different interactional tasks. The success of this work suggests that a similar approach to crying might be fruitful. In this article, I start this development by attempting to address the description, transcription, and analysis of crying.

Crying has been the topic of numerous studies done by psychologists. Much of the existing literature has been focused on factors associated with crying in infancy (see Barr, Hopkins, & Green, 2000). In that work, crying was typically dealt with as a dependent variable interesting for its communication of psychological distress. Research has typically used an instrument known as the Crying Patterns Questionnaire developed by St. James-Roberts (1988). This involves mothers offering reports on the amount of crying, where it occurs, whether it was "upsetting" to the mother, and what their response was. No attempt to represent the nature or interactional organization of crying is made in studies of this kind.

There is less research on adult crying. What has been done has conceptualized crying in terms of the various factors that may influence the occurrence of crying. For example, Nelson (2000) coded different "types" of crying—"healthy crying," "crying for no reason," and "prolonged or frequent crying" and tested how strongly these types of crying are associated with depression or different physiological disorders. Nelson made these distinctions prior to the research and had coders use them to categorize crying episodes. Nelson did not provide an analysis of what makes up these different categories beyond what was given in the names offered ("crying for no reason"), nor did the study make any attempt to link these kinds of crying to specific features of the ongoing interaction.

From a similar perspective, Peter, Vingerhoets, and Van Heck (2001) conducted a questionnaire-based study of gender differences in crying in which basic personality traits were associated with self-reported indexes of crying. "Crying frequency" and "crying proneness" were reported more frequently in women, and high scores on these indexes were associated with emotional instability. Rather than conducting analysis of people crying, the research relied on peoples' self-reports. Crying was again taken as the easily described measure there, something arising from a person's internal emotional state to be linked to other "factors" such as gender and emotional stability.

Research on adult crying has typically used the Adult Crying Inventory (ACI; Vingerhoets & Becht, 1996). This includes 54 items concerning situations and feelings that could invoke crying. For example:

I cry when I am in despair.
I cry when I hear a sad song.
I cry when I attend or witness memorial meetings.

Responses are made on a 5-point scale ranging from *never to always*. This has been used, for example, to provide an overall score of the propensity to cry that can be related to cultural, national, or gender variables.

Discursive psychologists have argued that studies of this kind presuppose that "expressions of emotion" are straightforward traces of underlying psychological states. By contrast, they have shown the way emotion avowals and emotion displays can be parts of particular activities, for example, managing issues of blame and responsibility (Buttny, 1993; Edwards, 1997, 1999). Such work has suggested both that psychologists should be cautious about taking emotion avowals and displays as immediate evidence of underlying emotional states and that they may be involved in different activities. Like conversation analysts, they have also expressed caution about how far peoples' abstract judgements and claims about their actions can capture what goes on in practice (e.g., ten Have, 1999, 2002).

In developing this approach to emotion, discursive psychologists have drawn on the work of conversation analysts such as Jefferson. Jefferson (1985) noted that if analysts assume that laughter, like crying, is an uncontrolled bodily function—a "flooding out" that is therefore not part of the ongoing vocal interaction—we will be tempted to merely note that it occurred rather than transcribe it in detail. This is, as indicated previously, precisely what has happened in the majority of psychological research in

the area of crying. Jefferson (1985) took an example in which laughter was originally presented in a transcript as "bubbling through" the talk and showed that with a more detailed transcript, the laughter was only present in that part of the talk that involved "the saying of an obscenity" (p. 30). As a "complex and interactionally delicate" task, at least in this context, the saying of an obscenity is "distorted" by laughter. A more developed transcript is therefore vital to any understanding of the variety of interactional features of laughter in different contexts. In this article, I develop a similar case for the analysis of the interactional properties of crying.

PRIOR INTERACTIONAL RESEARCH ON CRYING AND "HYSTERIA"

Two notable studies have considered crying and "hysteria" from an interactional perspective.[1] Manzo, Heath, and Blonder (1998) conducted interviews with 14 stroke patients, 7 of whom cried at least once during their interview. Manzo et al. concluded that emotions, even among brain-damaged people, are subject to social definition and should be studied as features of social interaction. Although suggestive, it is notable that the crying was generated in a research setting, raising issues about how it might be different in other settings, and the crying itself was treated as a unitary phenomenon much like psychological research. When Manzo et al. (1998) represented crying in their transcript, they simply named its occurrence. For example (I = interviewer, P = patient, and S = spouse)

> **I**:   Tell me a little bit, if you can, about your marital relationship. How has the stroke affected it?
> **P**:   Different.
> **I**:   Different for you?
> **P**:   Uh huh. ((starts to cry))
> **I**:   It's different. Okay.
> **S**:   And that's probably why he don't want to talk about it. (p. 171)

Whalen and Zimmerman (1998) studied the category of hysteria as an "organizational" and "bureaucratic" phenomenon in 911 calls.[2] As a category, "hysteria" represented a range of emotional displays such as "sorrow, distress, or grief" (Whalen & Zimmerman, 1998, p. 157). Whalen and Zimmerman's study is important for highlighting the consequentiality of emotion displays for a telephone-based organization. However, Whalen

and Zimmerman's focus was not on the nature of the "hysterical" outbursts per se. Rather, it was on how call takers' use of the term *hysteria* in electronic records accounts for the absence of information that is required by the form. Nevertheless, Whalen and Zimmerman attempted to represent the nonlexical elements of the talk in transcript rather than just offer a summary characterization. For example

> **CT**: Nine=one=o[ne, what is your emergency?
> **C**:   [HUHHHHH .HHHHHH HHHHHHH .HHHHH
>   HUHHHH .HHH ((loudly gasping/out of breath))
> **CT**: Hello?
> **C**: we(HHH)- .HHHH we've(HHH)- HUHHH .HHHH HEEHHH-
>   the address- HHHHH .HHH we need (ambu-ln-) .HHH
>   HHHHH hee[hhh
> **CT:**   [What?
> **C:** we=need=an=ambula(HH)nce- .HUHHH HHHH HEEHHhh
>   (Whalen & Zimmerman, 1998, p. 148)

Whalen and Zimmerman's (1998) goal, like that of Jefferson (1985) and of Edwards (1997) is to consider "emotion"—in this case "hysteria" in interactional terms:

> Rather than look "inward" at the internal states of the individual vehicle of expression, or "outward" to social institutions or culture, the study of the social construction of emotion is anchored in the interactional matrix in which the expression occurs: its form, its placement, its response and the organizational and interactional origins of its accountability. (Whalen & Zimmerman, 1998, p. 158)

DEVELOPING RESEARCH ON INTERACTION AND CRYING

Whalen and Zimmerman's (1998) study of "hysteria" highlights one of the reasons for developing a more interactional perspective on crying. Whalen and Zimmerman showed the way that "hysteria" disrupts emergency calls, sometimes in a way that may interfere with the swift dispatch of aid. My own interest in crying has come from examining calls to the NSPCC Helpline. As I showed in Extract 1, it is apparent that crying and other displays of emotion can at times impede the gathering of evidence for making a referral of a case to Social Services, who may intervene to help children at risk. Crying may be followed by the caller terminating the call,

and it may require calming or supportive moves from the CPO. These (speculative) observations suggest the value of looking at crying in a more systematic manner.

To move toward a more careful examination of the way crying is embedded in interaction, an important first step is to develop thinking about the representation and transcription of crying. Part of this involves breaking the rather simple category of "crying" down further to consider the constituent parts and how these are embedded in sequences of talk. This is not an easy task. Even for Jefferson (1985), "getting it right" in transcription terms is "utterly obscure and unstable" (p. 25). It depends on the phenomenon analysts want to attend to. In this article, I aim to discuss the description and transcription of different elements of crying, aiming to facilitate attention to their interactional features. Some parts of the sound files will be made available over the Internet to provide backup for the transcription suggestions, to allow for future refinements, and to make this article a resource for others wishing to transcribe crying.

I have shown that crying is both a technical category in the psychology literature and an everyday participants' description. Indeed, in inventories such as the ACI, it is both. In this article, I focus on crying episodes taken from a corpus of calls to the NSPCC child protection helpline.[3] In the longer term, in this program of work, I attempt to identify institutionally specific practices with respect to crying and other "displays of emotion" on the NSPCC Helpline.[4] One of the features of considering crying in this setting is that bodily elements of crying will be less salient or invisible. For example, the CPO does not have visually available tears, expressions, and various body movements such as wiping the eyes and nose, trembling, and covering the face.

WHAT IS LOST IN TRADITIONAL
TRANSCRIPTION OF CRYING

I have already noted some of the ways in which crying has been represented (or more commonly has not been represented) in earlier research. This can be illustrated in this research project by considering the way crying is dealt with by a professional transcription service. Calls for this project are recorded on minidisk, and minidisks are sent off to a transcription service for a "first-pass" transcription. The transcribers are all experienced in court and police work. To illustrate the differences between a transcription service rep-

resentation and one that attempts to capture interactional features of crying, consider the following two versions of the same extract. The first is one that came from the transcription service, the second (2b) I did.

The extract is from a call by a father who reports receiving a phone call from his son claiming his stepfather has attacked him. The caller says he has already called the police and is now phoning the NSPCC to see if there is anything more he can do. The extract begins 15 sec into the caller's crying episode, which overlaps with the caller giving details, as requested by the CPO, about his son's injuries. Hence, the crying occurs in the midst of an important task—to take enough details to make a referral onto the emergency social services team. The CPO has stated earlier that she intends to get through the call as quickly as possible so that the information can be passed on.

2a. JK Distraught dad

```
 1   CPO:      Do you want to have a break for a moment? Its very hard when
 2             they're not there with you isn't it and you're talking about
 3             it?
 4   Caller:   [caller weeping]
 5   CPO:      Well you're doing what you can now to actually offer them
 6             protection and help though aren't you?
 7   Caller:   [caller weeping] I'm sorry.
 8   CPO:      And they also – well Eddie obviously thought you were the
 9             person to contact to get help.
10   Caller:   Yeah.
11   CPO:      To which you know he turned to you to help him didn't he? So
12             he saw you as the person who could help in this situation for
13             him.
14   Caller:   I'm sorry.
15   CPO:      It's okay – okay. Its distressing but its also quite a shock
16             isn't it I guess.
```

This type of transcript is very useful because it provides a preliminary resource for analysis and allows quick searches for certain phenomena. The simple indication that crying occurred allowed an initial search through these types of transcripts looking for examples of crying. Yet what, if anything, does simple description miss? Compare the preceding with an initial attempt to represent some of the sounds involved in crying following.

2b. JK Distraught dad

```
 1   Caller:   >.Hhih .hhihhh<
 2   CPO:      D'you want- d'y'wann'ave [a break for a  ] moment.=
 3   Caller:                           [ Hhuhh >.hihh< ]
```

```
 4                =>hhuhh hhuhh<
 5                (0.6)
 6   Caller:      .shih
 7                (0.3)
 8   Caller:      °°k(hh)ay°°
 9                (1.8)
10   Caller:      .shih >hhuh hhuh[h ]<
11   CPO:                         [S]'↑very har:d when
12                they're not there with you isn't it.=
13                and [you're- ] (.) you're tal:kin about it.
14   Caller:          [>.hhih<]
15                (0.8)
16   Caller:      >.Hhuh .HHuh<
17                (2.1)
18   Caller:      .shih
19                (0.2)
20   Caller:      °.shih ° (.) °°(Need) hhelp(h)°°
21                (2.5)
22   Caller:      .HHhihh°hh°
23                (0.5)
24   Caller:      HHhuhh >.hih .hih<
25                (0.7)
26   CPO:         .Htk.hh Well you're doing what you can now to
27                actually offer them protection and help though
28                are:n't you.
29   Caller:      .Skuh (.) Huhhhh
30                (0.5)
31   Caller:      °°I:'m not the(hehheh)re. Hh °°
32                (3.2)
33   Caller:      .Shih
34                (0.4)
35   Caller:      ~↑I'm ↑sorry.~
36   CPO:         An they als- well E-E-Eddie obviously al- thought
37                you were the person to contact to get he:lp.
38   Caller:      Yeh. hh
39   CPO:         F'which (.) ye know he turned to you: .hh
40                (0.7)
41   Caller:      .Hh [h°hhh°      ]
42   CPO:             [T'help 'im.]=didn't he.
43   Caller:      °°Yhhehhh °°
44   CPO:         So 'e saw you as a person who could help in this
45                situa[tion   ] for him:.
46   Caller:           [.Shih]
47                (0.9)
48   Caller:      .Hdihhhh hhhuhh
49                (0.2)
50   Caller:      H↑oh: s(h)orry.
```

```
51              (0.4)
52  CPO:        .Htk s'↑oka:y. kay.
53              (1.3)
54  Caller:     .SKUH
55              (0.3)
56  CPO:        It's distressing but it's also quite a shock
57              isn't it I guess [ (for you)   ]
58  Caller:                    [ .HHHHhih]hh HHHhuhhhh
59              (1.7)
60  Caller:     ((swallows)) °Hhhoh dhear.°
```

Extract 2b allows the reader to notice many of the detailed sounds that
make up what can be recognized as crying. Throughout the article, I have
given these features various names and symbols such as sobbing (e.g., lines
1 and 4), various types of sniffs (e.g., lines 6 and 29), aspiration within
words (e.g., lines 8 and 31) whispering (e.g., lines 8 and 20), wobbly voice
(e.g., line 35), and high pitch (e.g., lines 35 and 50). The disruption caused
to the flow of interaction as evidenced by the marked increases in pause
length (e.g., lines 9 and 17) is also apparent. There is also more of a sense of
the crying occurring around and in overlap with the CPO's turns.

All of this type of detail ought to give a more comprehensive insight
into any interactional features of crying episodes. At a basic level, note that
the CPO's question remains unanswered in line 1 of Extract 2a, whereas
with more detail, one hears some sobbing and a sniff followed by a whis-
pered "°°k(hh)ay °°" (Extract 2b, line 8). One can also see that the CPO's
turn in lines 5 and 6 of Extract 2a is rather puzzling, as it begins with the
dispreference marker "well" and the "though" in line 6 treats the caller's
prior turn as in some kind of contrast to the CPO's turn. With more atten-
tion to detail, one can see that there is a whispered utterance from the caller
on line 20, probably to the effect that his son needs help.

It could be that the CPOs orient not just to the fact that there is "crying"
but to the different features of crying and their position in the interaction.
However, this type of interactional study cannot be done until the detailed
transcription is in place. The remainder of this article is therefore dedicated
to documenting some of the features of crying. I provide suggestions for
how particular sounds can be transcribed, which readers can compare with
sound samples available over the Internet at http://www.lboro.ac.uk/de-
partments/ss/centres/dargindex.htm

Table 1 provides links to some of the specific crying sounds on this
Web site as well as providing the transcription conventions that accompany
those sounds.

TABLE 1
Transcription Symbols Specific to Crying

Symbol	Sound File	Description
°°help°°	1	Whispering—enclosed by double degree signs
.shih	2	Wet sniff
.skuh	3	Snorty sniff
~grandson~	4	Wobbly voice—enclosed by tildes
↑↑Sorry	5	High pitch—represented by one or more upward arrows

k(hh)ay
  hhhelp
	6	Aspiration in speech—an "h" represents aspiration: In parenthesis
		    indicates a sharper more plosive sound
		    Outside parenthesis indicates a softer more breathy sound

Huhh .hhih
  Hhuyuhh
  >hhuh<
	7	Sobbing—combinations of "hhs," some with full stops before them to
		    indicate inhaled rather than exhaled, many have voiced vowels,
		    some voiced consonants; if sharply inhaled or exhaled—enclosed
		    in the "greater than/less than" symbols (> <)

↑Mm:. hh
  (3.5)
	8	Silence—numbers in parentheses represent silence in tenths of a
		    second

I conclude this article with some more speculative analytic observations about issues that might be followed up in research on crying.

FEATURES OF CRYING

Crying can manifest itself in a number of ways, and the preceding example contains a number of typical features. The following documents some of the generic features of crying on the telephone; features covered here are (a) whispering, (b) sniffs, (c) wobbly voice, (d) high pitch, (e) aspiration, (f) sobbing, and (g) silence. As will become apparent, different aspects of crying do not occur in isolation from one another.

Whispering

The issue of transcribing whispering is not straightforward. The talk is specifically whispered or mouthed rather than merely quiet. That is, it has a breathy "whispered" quality. This is not merely quieter talk than surrounding talk, the conventional referent for the degree symbol (°). For this reason, and rather than introduce a new symbol, I have surrounded the whispered talk with two of these symbols.

In Extract 2b previously, the caller's whispered response on lines 8 and 22 are not picked up by our transcription service but are heard and oriented to by the CPO and so become part of the ongoing interaction. Further whispering in Extract 2b is reproduced here:

2c. JK Distraught dad

```
 1   CPO:      .Htk.hh Well you're doing what you can now to
 2             actually offer them protection and help though
 3             are:n't you.
 4   Caller:   .Skuh (.) Huhhhh
 5             (0.5)
 6   Caller:   °°(I:'m not the(hehheh)re. Hh °°
 7             (3.2)
 8   Caller:   .Shih
 9             (0.4)
10   Caller:   ~↑I'm ↑sorry.~
11   CPO:      An they als- well E-E-Eddie obviously al- thought
12             you were the person to contact to get he:lp.
13   Caller:   Yeh. hh
14   CPO:      F'which (.) ye know he turned to you: .hh
15             (0.7)
16   Caller:   .Hh [h °hhh °     ]
17   CPO:          [T'help 'im.]=didn't he.
18   Caller:   °°Y(hh)ehhh°°
```

Here, whispering occurs on lines 6 and 18 in response to the CPO's (tag) questions (lines 3 and 17), perhaps displaying both a difficulty in talking and a willingness to continue. These questions occur despite the CPO offering the caller "a break for a moment," perhaps serving as an attempt to keep the caller engaged in interaction and related to the CPO's stated intent of dealing with this situation as quickly as possible.

In the following example, the caller got the Helpline number from a daytime talk show program in which the topic was adult survivors of childhood abuse. Here, he has just described how he gets "flashes" of his childhood abuse from the smell of alcohol, and the reader joins the crying episode at its inception on line 2:

3. JX Male survivor

```
 1   CPO:      [    There are-           (0.6)          ]
 2   Caller:   [°Huhh .hhih° >hhuh< >hhuh< >hhuh<]
 3   CPO:      there are things you can do. =and the- there
```

```
 4              is [specialist help ] (0.4) ou[t there:.  ]
 5   Caller:     [.HHHihh hhuhh]          [↑↑Sorry.]
 6              (0.4)
 7   CPO:        ↑That's alri:ght,
 8              (0.8)
 9   Caller:    .Shih >.Hhih<
10              (0.4)
11   Caller:    HHuh
12              (0.3)
13   Caller:    °°G(HH)od-a-l-°° (0.2) ((squeak))
14              (1.3) °↑↑bleedin ↑↑↑k(h)id(h)°
15              (2.0)
16   Caller:    °°↑G(hh)od I'm a °° °↑↑grow:n ↑↑↑man°
17              (0.8)
18   Caller:    °.hh°
19              (0.8)
20   Caller:    .KHHihh HHhu [h   ]
21   CPO:                        [Th]ere's:: a bit of the child in ↑all
22              of us an:- [(0.6)    ] an [that's the hur:t chi:ld ]
23   Caller:              [.Shih    ]  [  .Hhhhh HHuhhhh  ]
24   CPO:       there isn' it with you at the moment.
25   Caller:    .Hhh Hhh Hhh
```

As with the previous extract, whispering occurs on lines 13 and 16 during the attempt to talk through a crying episode and elicits a similar soothing response plus tag question from the CPO on lines 21 through 24. In this extract, the whispering moves into very high-pitched quiet talk, another common feature dealt with following.

To conclude, whispering in helpline interaction seems to occur when callers attempt to talk through their crying episodes. The whispering here may be a display of the difficulties that the caller is having in managing vocal interaction while also displaying willingness to respond and continue with the interaction.

Interesting interactional features that would require further analysis and development relate to the "metaturns," in which both CPO and the caller step outside the business of the call and comment on the crying (e.g., "sorry," "that's alright"). They are a generic feature of the collection of crying sequences. The activities of the CPO prior to and in response to the whispering would also be interesting to follow up in a more interactionally focused study. In both Extracts 2 and 3, the CPOs produce responses designed to display sympathy to the caller's plight while gently offering the possibility of interaction through the use of tag questions. CPOs also pro-

vide callers with explanations for their crying. These observations are (cautiously!) developed in the discussion.

Sniffing

A more pervasive feature of this corpus of crying episodes are sniffs. The colloquial term *sniffle* or *sniffling* is often used for sniffs that occur in crying (e.g., Beach & Dixson, 2001). Indeed, the *Oxford English Dictionary* (1994) cites Thackeray (1840): "The tip of her nose as red as fire with sniffling and weeping." However, the term *sniff* has been chosen here as a cautious transcribing term working with the discrete sound.

In this analysis, I identify two distinct types of sniff:

- Wet sniffs in which the sound of the sniff is supplemented by inhaling watery secretions such as tears, transcribed as ".shih."
- Snorty sniffs in which the sound of the sniff is supplemented by a back of the throat snorting kind of sound, transcribed as ".skuh."

The decision to transcribe rather than simply describe these sniffs arose due to the different types of sound, different lengths, and different amplitude of the sniffs and the possibility that these differences may be contributing to the interaction—the positioning of sniffs often seems interactionally interesting. I am not completely happy with the transcription as a representation of the sound—for example, it doesn't quite capture the closed mouthness of the sound—but it provides a template for others to improve on.

In Extract 2b previously, there are examples of both types of sniffing. Some of these occur before speech such as the first two "wet sniffs" following (and see also Extract 2b, lines 18, 20, and 33):

> **Caller**: .shih
>   (0.3)
> **Caller**: °°k(hh)ay°°
>   (1.8)
> **Caller**: .shih >hhuh hhuh[h]<

Others, such as the final one just shown, occur after a long pause (see also Extract 2b, lines 18, 33, and 54). Some occur after audible sobbing—

Extract 2b, lines 6 and 18. Only one occurs in overlap with the CPO's talk (line 46).

In Extract 3 previously, sniffing occurs on line 9 both after a pause and prior to the caller's next turn. A quieter sniff occurs on line 23 in the midst of another reassuring "metaturn" from the CPO, which coincides with a 0.6 sec disruption in the CPO's turn on line 1. I compare this with some other examples.

The following is from a 15-year-old girl. She is calling about her friend who is self-harming by cutting her arms with a razor blade.

4. JX Self-harming friend

```
 1   CPO:      you sound as though you're
 2             very upset about it.
 3   Caller:   .Shih ~yeh I am.~
 4             (0.6)
 5   CPO:      °Mm.°
 6             (0.3)
 7   Caller:   ~I'm clo(h)se to tear:s.~
 8             (0.6)
 9   CPO:      I can ↑hear that, (0.2) °Yeah:.°
10             (1.1)
11   Caller:   .Shih
12             (0.9)
13   Caller:   .Shih
14             (0.7)
15   Caller:   >↑Hm .shih<
16             (1.2)
```

Here, the sniffs begin prior to speech (line 3) and after long pauses (lines 11, 13, and 15). They also occur just at the point in which the hearability of the caller's upsetness is made relevant in the call. There was no sniffing prior to this, only some brief episodes of wobbly voice and very quiet sobbing sounds (see following). Perhaps one of the features of a sniff is that it amplifies sobbing due to breath coming through the nose, which has begun to fill with tears. Although it may be possible to hide the sound of sobbing, the wet sniff indicates that it may be occurring. The sniff's role in clearing the nose prior to speech may also account for the location of some of the sniffing sounds. The alternative may be the kind of talk through a blocked nose found in Extract 10, line 11, shown later.

The following extract involves a caller who claims that there is a boy trapped in her attic who is being molested by a man. After 12 min of getting

the story, the CPO appears increasingly satisfied that there is no child pro-
tection issue (it emerges that the police and social workers have been called
around repeatedly and found nothing). The crying starts when the CPO
suggests that it is the caller's housing situation that is the problem—she
feels trapped. As with the previous extract, this one starts in the middle of a
crying episode; this is 37 sec into it (for the onset of this crying episode, see
Extract 7 later).

5.⁵ HC boy in attic

```
 1   CPO:      what ah'm hear:ing is that you hat
 2             to move into this bungalow that you
 3             didn't want to [move into:.  ]
 4   Caller:                   [ .Sshhiihh   ]~Oh ah °↑ditn't°~=
 5   CPO:      =[You do]n't [ like it ] there::, .hh yer
 6   Caller:   [°↑ihh° ]     [↑.huhh]
 7   CPO:      [no:t happy,]
 8   Caller:   [I ↑hate it,]
 9             (.)
10   CPO:      [Yeah::      ]     [ Mm]:::[:    ]
11   Caller:   [↑↑Yeah I: do] real[ly,   ]  [↑.h]hehhh
12   Caller:   Hhuyuhh .shih [~it's the ] cruelles' pl:ace
13   CPO:                    [° N n::. °]
14   Caller:   th'ah've ever be-en to,~ ↑.hhuhh
15             (0.2)
16   Caller:   the whole a:rea seems ~so crue-el.~
17             (0.4)
18   Caller:   Ahhuhh
19             (0.3)
20   Caller:     [ .hhihh    ] .shih ((squeak))
21   CPO:      °h [hhmmhh° ]
22             (0.3)
23   Caller:   Nobody'll say hello to you …
```

In this extract, sniffing follows a similar pattern to previous extracts, occur-
ring prior to speech in lines 4 and 12 and also after audible sobbing in lines
12 and 20. There is a longer sniff on line 4.

From this preliminary look at sniffing it seems that it can

- Occur prior to speech.
- Occur after long pauses.
- Occur after audible sobbing.

- Vary in degree of volume.
- Include other nasal or throaty sounds such as snorting.

There are interesting interactional issues arising out of this and requir-ing further development and analysis. For example, it may be that sniffing could be signaling the onset of the caller's next turn and/or accounting for their lack of speech by the display of distress. It may also be that as part of an audible display of emotional distress, sniffing is usefully employed at times when the caller's own distress is invoked or deployed.

Wobbly Voice

In many of the crying episodes, the caller's voice starts to "break" or wobble. This has been represented by enclosing it in tildes (~).[6] In Extract 2b it occurs at line 35, just when the caller is starting to talk rather than whisper.

In the following extract, I join it at the start of the call just after the eth-ics script seeking permission to record the call.

6. AD Grandson Black Eye

```
 1   CPO:      Is that o[↑ka:y.]
 2   Caller:           [ Fine. ] =yes.
 3             [°that's fine.°]
 4   CPO:      [↓Brilliant   ] okay,
 5   Caller:   °.Hh° (0.2) u:m (0.1) >I'm sorry
 6             I'm a little bit< emo:~tional
 7             to↑d [ay~ .hih  ]
 8   CPO:           [Tch Oh:: ] go:sh I'm so:rry,
 9   Caller:   ~I've got a little four year old grandson,~
10             [huh]
11   CPO:      [Yea]h:,
12             (0.3)
13   Caller:   ~My son w(h)as s(h)ixtee:n~ (0.5) er fif↓teen when
14             he was bor:n.
15             (0.3)
16   Caller:   .Hhh [And um (.)] he and his er (0.2)
17   CPO:           [ °↑Mm::.° ]
18   Caller:   girlfriend split up.
19             (0.9)
20   Caller:   ((swallows)) ~and since then um:~ (0.2)
21             she's had (0.4) several boyfriends,
```

Here, the wobbly voice is a fairly constant feature of the caller's talk and seems to involve minimum disruption to the flow of interaction. The caller's voice breaks almost as soon as there is a requirement to state the reason for the call and stays wobbly on and off throughout most of the call.

The following extract marks the onset of the crying episode that the reader already encountered in Extract 5.

7. HC boy in attic

```
 1   CPO:     So what I'm hearing: is that perhaps you
 2             feel ↑trapped
 3             (0.3)
 4   Caller:  Oh: ah- (0.3) a feel very trapped=
 5   CPO:     =↑Mm:[ :. ]
 6   Caller:       [Ah-] if ah gi- ah: mean ah: don't give way
 7             to it but ah- (0.2) .hh ah do someti-:mes.=ah've
 8             got to. ah'm uh- ah c(h)ry a lo(h)t,
 9   CPO:     Mm:↓::,
10   Caller:  ~ah- ah cr(h)y a lot hh~
11   CPO:     Mm::,
12             (0.4)
13   CPO:     [Mm:,]
14   Caller:  [.Hhh] ~AND ah'm~ hhh (0.4)
15   CPO:     Mm:,
16             (0.5)
17   Caller:  ~I'M ON m ahh.hihh (0.2) I(h)'m des°perate*°
18             a really am~ °↑uhh[hh° .hih ]
19   CPO:                        [Mm::   ]
```

As well as the aspiration (see following) on line 8 and perhaps the single voice break shown with a hyphen—"someti-:mes" (line 7)—the caller's voice wobbling on line 10 is one of the first signs of the onset of crying in this call. It is different from the previous extract in that although the caller begins and continues with a wobbly voice, other features of crying such as sobbing (see following) disrupt her talk. It also contains a single voice break—as opposed to a continuous wobble—which may also be a sign of nearness to tears.

A similar example occurs here:

10a. HC Grandmother and friend

```
Caller:   °I'm-m° (0.1) ~t(h)erribly worried about
          the chi:ld,~
```

Again, a single voice break occurs just prior to the caller's voice becoming wobbly.

To sum up, a wobbly voice

- Seems to allow the caller to talk without major disruption while also signaling distress.
- May be easier for the caller to move out of in the early stages.
- Often seems to be the first marker of the onset of a crying episode.
- Occurs when the caller is encouraged to continue interaction by the CPO.
- A more minimal or preliminary version may be a single voice break.

Interactionally, it is interesting to look for any regularities in what occasions wobbly voice and also for patterns in the way callers move in and out of wobbly voice and the different ways that CPOs orient to this in comparison with other features of crying.

High Pitch

Most of the preceding examples have talk that is high-pitched. One or more upward arrows have represented this; the more arrows, the greater the elevation in pitch.

Examples occur in Extract 2d following in which the caller is apologizing for his crying:

2d. JK Distraught dad

```
 1  Caller:   ~↑I'm ↑sorry.~
 2  CPO:      An they als- well E-E-Eddie obviously al- thought
 3            you were the person to contact to get he:lp.
 4  Caller:   Yeh. hh
 5  CPO:      F'which (.) ye know he turned to you: .hh
 6            (0.7)
 7  Caller:   .Hh [h°hhh°    ]
 8  CPO:          [T'help 'im.]=didn't he.
 9  Caller:   °°Y(hh)ehhh°°
10  CPO:      So 'e saw you as a person who could help in this
11            situa [tion  ] for him:.
12  Caller:        [.Shih]
13            (0.9)
14  Caller:   .Hdihhhh hhhuhh
```

```
15              (0.2)
16   Caller:   H↑oh: s(h)orry.
17              (0.4)
18   CPO:      .Htk s'↑oka:y. kay.
```

There are two apologies here, both with high pitch (lines 1 and 16). As
noted earlier, line 1 is when the caller moves from a whisper to a high-
pitched voice. On line 16, the caller's elevation in pitch again comes at the
point when he is apologizing. This is responded to by an elevation in pitch
by the CPO. It could be that the raise in pitch by the CPO is another way of
doing sympathy, for example, in Extract 4a:

4a. JX Self harming friend

```
Caller:   ~I'm clo(h)se to tear:s.~
          (0.6)
CPO:      I can ↑hear that, (0.2) °Yeah:.°
```

Here, the high pitch is not elicited by high pitch from the caller but rather
her description of her emotional state and display of distress through her
wobbly voice and aspiration. This suggests that high pitch may be one fea-
ture of doing sympathy.

Similarly, in Extract 5, the caller's talk is mostly done in a higher pitch
(as well as a wobbly voice) when she is agreeing with the CPO's assess-
ment of her situation (e.g., lines 4, 8, and 11).

I join the following extract about 30 sec on from the start of the call in
Extract 6. The caller is now into her initial description of "the problem."

8. AD Grandson Black Eye

```
 1   Caller:   ~U:m (0.2) she doesn't come from: very
 2              good family,~ hh
 3   CPO:      [ M m : . ]
 4   Caller:   ~Her (0.2) s:tep-dad's (0.2)
 5              abu:sed her~ (0.4) sister.
 6              (0.7)
 7   CPO:      Ri:ght.=
 8   Caller:   =~And er (0.6) I just don't feel my grandson's
 9              being looked ↑ahfter ↑pr(h)oper↑↑ly~
10   CPO:      Tch °oh: [   g o : : s h°   ]
11   Caller:            [.Hih ~an he had a] black eye:
12              la:st ↑week hh~
13   CPO:      Did he:?
14   Caller:   ~An a cigarette bur:n~ hh .hh
15   CPO:      Oh my g[ o : : s h : : ]
```

The caller's voice becomes higher in pitch and also includes aspiration at the point when she provides the upshot (lines 8–9) of her previous narrative, which detailed problems with her son's ex-partner.

This elevation in pitch also occurs in the summing up of the problem in the extract following. The caller is summing up her reason for calling in—the issue is abuse within her family that occurred a long time ago and she has only recently been told about it. Rather than a continuing raise to the end of the utterance like the previous example, the raise in pitch is focused on the verbs "go" and "speak":

9. BN Old abuse

Caller: .hhh ~ahn I(h)m j(hh)'st a- honestlhy
I jsst don't know (0.2) .hhh (0.3)
where to ↑go: or (0.2) what to- whhho to
↑sp(hh)eak t(h)o.~ Hh

High pitch may also be manifest in nonspecific sounds; here are two in which the description "squeak" seemed the most appropriate:

3a. JX Male survivor

Caller: °°G(HH)od-a-l-°° (0.2) ((squeak))
(1.3) °↑↑bleedin ↑↑↑k(h)id(h)°

5a.[7] HC boy in attic

Caller: the whole a:rea seems ~so crue-el.~
(0.4)
Caller: Ahhuhh
(0.3)
Caller: [.hhihh] .shih ((squeak))

The squeaks may be high-pitched false starts or may be simply a feature of the combination of things happening in the throat and nose area during crying.

In conclusion, high-pitched talk can

- Occur when the caller is talking through an episode of crying.
- Be accompanied by other features of crying episodes such as wobbly voice and aspiration within speech.
- Be mirrored by the CPO.
- Occur in the summing up of a problem.
- Include nonspecific sounds such as squeaks.

It may be that a high-pitched voice, in that it serves as an audible display of being upset, has similar interactional functions to both whispering and wobbly voices. It is also interesting that it can elicit a similar raise in pitch from the CPO. Again, these are things that require a more detailed interactional analysis.

Aspiration

Aspiration during words as well as increased *breathiness* is another common feature of callers attempting to talk through a crying episode. In transcription terms, it has been represented by one or more hs; out of parenthesis, it represents a "breathy" sound; in parenthesis (h), it represents a more plosive sound. The difference between aspiration and sobbing and sighing is that aspiration occurs during or directly before and after speech, perhaps representing an attempt to continue the interaction through more low-level sobbing. In Extracts 2b and 3 previously, nearly all the callers' turns include aspiration. Extract 9 also contains a lot:

9. BN Old abuse

Caller: .hhh ~ahn I(h)m j(hh)'st a- <u>honestl</u>(h)y
          I jsst don't know (0.2) .hhh (0.3)
          where to ↑go: or (0.2) what to- whhho to
          ↑sp(hh)eak t(h)o.~ Hh

Like the wobbly voice, aspiration can also be a first sign that a crying episode is on the way. For example, Caller 2 in Extract 1a following:

1a. AD Two twelve year old girls

1   **Caller 2**: Um::
2   (0.6)
3   <u>Yeah</u> I'm ok(h)ay.
4   **CPO**:   Y'okay ab't- <u>al</u>:right then.
5   (0.1)

Here the aspiration in the word "okay" is the last thing Caller 2 says before sobbing (her subsequent talk after sobbing is both very high-pitched and includes aspiration). Similarly, in Extract 10 following, one of the first

signs that the caller may be about to have difficulties continuing come on
line 3 with both a raise in pitch and aspiration:

10. HC Grandmother and friend

1	**CPO**:	How long've you been scare:d of him for.
2	**Caller**:	I've been scare:d of 'im (0.2) (right across::-)
3		(0.8) a ↑long °t(hh)ime.°
4		(0.4)
5	**CPO**:	↑Mm:, hh
6		(3.5)
7	**CPO**:	°Take ye time.°
8		(5.1)
9	**Caller**:	Hhh
10		(0.7)
11	**Caller**:	A log tibe.
12		(1.1)
13	**CPO**:	Tch.hh (0.2) so this has been hurting you:,=
14		and you've been worried about this:.
15		(0.3)
16	**Caller**:	Yes.
17		(0.2)
18	**Caller**:	°I'm-m° (0.1) ~↑t(h)erribly worried about
19		the chi:ld,~
20		(0.2)
21	**CPO**:	Mm::,
22		(0.2)
23	**Caller**:	((swallows))

Although there are no audible sounds of crying, the CPO seems to pick up suffi-
cient clues from the raise in pitch, aspiration, and silence (see following) to indi-
cate that the caller will have difficulties continuing, as she does both an unusu-
ally high-pitched and lengthened continuer "↑Mm:," (line 5) followed by the
characteristic metaturn "take your time" said softly amidst 8.5 sec of silence.

In Extract 5, aspiration occurs prior to any other signs and includes
more general breathiness, for example, at the end of the caller's second and
third turns following, represented by hhs on their own:

5b. HC boy in attic

Caller:	[Ah-] if ah gi- ah: mean ah: don't give way
	to it but ah- (0.2) .hh ah do someti-:mes.=ah've
	got to. ah'm uh- ah c(h)ry a lo(h)t,
CPO:	Mm::::,

Caller: ~ah- ah cr(h)y a lot hh~
CPO: Mm:,
            (0.4)
CPO: [Mm:,]
Caller: [.Hhh] ~AND ah'm~ hhh (0.4)

To conclude, aspiration occurs within and between words and may be "breathy" or more plosive like a sob. It is similar to whispering and wobbly voice in that it may represent an attempt to continue talking through sobs or may be a sign that they are imminent. The general placement of aspiration within speech and the similarities and differences that this has to laughter will be interesting interactional features to follow up in future papers.

Sobbing

As we have seen, crying can comprise of many things, but sobbing is perhaps the most characteristic. Like sniffs, it appears to involve a number of sounds, most hearably, something that sounds like spasms of inhaling and exhaling. Sobbing has been represented as one would with normal in and outbreaths—combinations of "hhs," some with full stops before them to indicate inhaled rather than exhaled. The main differences that set sobs apart from aspiration visually (for the analyst with only a transcript to go by) are that they often contain "voiced vowels," which can be elevated in pitch.

However, the presence of voiced vowels also makes sobbing similar in appearance to laughter. For the participants, as practical analysts of one another's talk, there is no such ambiguity. This throws up some interesting complexity. In an ideal world, transcription should provide a neutral basis for alternative analyses—a "preanalytic" tool—so it should provide some way of marking out the difference despite the similarities in sound. What marks crying out from laughter in these transcripts is the characteristic presence of other crying features—for example, in Extract 5c following the sniff (line 9) and the high pitch (line 3) as well as the general function of the caller's talk as a complaint (or in other extracts, the report of some traumatic event). I return to the issue of distinguishing between laughing and crying in the discussion.

A further feature of sobs is that they appear sharply inhaled or exhaled, which I have represented as speeded up—enclosed in the "greater than/less than" symbols (><) as following:

2e. JK – Distraught dad

Caller: >.Hhih .hhihhh<

```
CPO:     D'you want- d'y'wann'ave [a break for a ] moment.=
Caller:                            [ Hhuhh >.hihh<]
         =>hhuhh hhuhh<
```

Sobs often have voiced or breathy sounding vowels and occasionally, consonants in them (which can be high-pitched) as in Extract 5:

5c. HC boy in attic

```
1  Caller:   Hhuyuhh .shih [~it's the] cruelles' pl:ace
2  CPO:                    [° N n::. °]
3  Caller:   th'ah've ever be-en to,~↑.hhuhh
4            (0.2)
5  Caller:   the whole a:rea seems ~so crue-el.~
6            (0.4)
7  Caller:   Ahhuhh
8            (0.3)
9  Caller:   [ .hhihh] .shih ((squeak))
```

Capital letters are useful for indicating that the volume of in and out breaths is greater than the surrounding talk:

1b. Two twelve year old girls

```
Caller 2:   [   AHH    HH]Hk↑↑iuHHhh↑uhh
            (.)
            ~↑↑I ↑↑ca(h)n't ↑↑ta(hh)lk.~
            (1.2)
```

Disruption caused by sobbing in the form of inability to talk may involve a metaturn from the caller—for example, providing an explanation, as with Extract 1b, or an apology, as with Extract 2e:

2e. JK Distraught dad

```
Caller:   °°I:'m not the(hehheh)re. Hh°°
          (3.2)
Caller:   .Shih
          (0.4)
Caller:   ~↑I'm ↑sorry.~
```

Disruption in the form of overlap with the CPO's turn may also involve a meta-turn from the caller, for example, again an apology:

3b. JX Male survivor

```
CPO:    [    There are-      (0.6)                    ]
Caller: [°Huhh .hhih° >hhuh< >hhuh< >hhuh<]
CPO:    there are things you can do. =and the- there
        is [specialist help ] (0.4) ou[t there:.  ]
Caller:   [.HHHihh hhuhh]          [↑↑Sorry.]
```

CPO's metaturns may also invite disruption as with Extract 2b, line 2—
"d'y'wann'ave [a break for a] moment."

To conclude, sobbing involves inhalations and exhalations, which may
be sharp, with voiced vowels and consonants, which can be very high-
pitched. The disruption to normal turn taking due to either sobbing in over-
lap with the CPO or inability to speak elicits metaturns from both the
caller—apologies and explanations—and the CPO. These metaturns, along
with the general placement of sobs in interaction, would be interesting
interactional features to follow up.

Silence

Silence is represented in the usual way, with timed pauses. One of the
things that make crying sequences so disruptive to the ongoing interaction
is the sudden increase in number and duration of pauses, as Extract 2f
demonstrates:

2f. JK Distraught dad

```
 1  Caller:  >.Hhih .hhihhh<
 2  CPO:     D'you want- d'y'wann'ave [a break for a ] moment.=
 3  Caller:                           [ Hhuhh >.hihh< ]
 4           =>hhuhh hhuhh<
 5           (0.6)
 6  Caller:  .shih
 7           (0.3)
 8  Caller:  °°k(hh)ay°°
 9           (1.8)
10  Caller:  .shih >hhuh hhuh[h]<
11  CPO:                     [S]'very har:d when
12           they're not there with you isn't it.=
13           and [you're- ] (.) you're tal:kin about it.
14  Caller:      [>.hhih<]
15           (0.8)
```

```
16   Caller:   >.Hhuh .HHuh<
17             (2.1)
18   Caller:   .shih
19             (0.2)
20   Caller:   °.shih°
21             (.)
22   Caller:   °°(Need) h(h)elp(h)°°
23             (2.5)
```

Here the pauses between audible sobs and other sounds are large relative to
normal helpline interaction. The whispering and wobbly voice may indi-
cate that this is due to difficulties in vocalizing, perhaps created by the sob-
bing. Hence, the silence may in part be time left by the CPOs to allow the
caller to recover—to "have a break for a moment." This may also imply that
there is more to come—that the caller's actions are thus far incomplete.
This implication is spelled out more in the following extract:

10b. HC Grandmother and friend

```
 1   Caller:   I've been scare:d of 'im (0.2) (right across::)
 2             (0.8) a ↑long °t(hh)ime.°
 3             (0.4)
 4   CPO:      ↑Mm:. hh
 5             (3.5)
 6   CPO:      °Take ye time.°
 7             (5.1)
 8   Caller:   Hhh
 9             (0.7)
10   Caller:   A log tibe.
11             (1.1)
12   CPO:      Tch.hh (0.2) so this has been hurting you:,=
13             and you've been worried about this:.
```

Here the CPO instructs the caller on line 6 to "take her time" in the midst of
over 8 sec of silence. As with the previous extract, this orients to the caller's
need for recovery time. It also produces, more explicitly than the previous
metaturn "d'ye wanna take a break for a moment," the incompleteness of
the caller's actions in that "take a break" may imply joint activity between
caller and CPO, whereas "take ye time" implies that the silence belongs to
the caller. The caller orients to this, even when it turns out that they have
nothing new to add—there is simply a repetition of "a long time," although
this time said through nasal blockage (line 10).

More speculatively, silence may also serve as an acknowledgment that crying is occurring:

3c. JX Male survivor

```
1  CPO:     [      There are-          (0.6)          ]
2  Caller:  [°Huhh .hhih°>hhuh< >hhuh< >hhuh<  ]
3  CPO:     there are things you can do. =and the- there
4           is [specialist help ] (0.4) ou[t there:.]
5  Caller:     [.HHHihh hhuhh]            [↑↑Sorry.]
6           (0.4)
7  CPO:     ↑That's alri:ght,
8           (0.8)
```

The caller has just started (hearably) crying on line 2, and it may be this that elicits the repair and 0.6- and 0.4-sec silences from the CPO in lines 1 and 4. Rather than comment on the crying, however, the CPO continues with her original utterance, a lack of uptake that may imply the inappropriateness of crying to the caller, thus perhaps eliciting his apology.

To summarize, there appear to be at least two important roles for silence in this environment: one is to allow the caller recovery time; the other relates to the CPO's display that the caller is in mid flow. Silence may also serve as an acknowledgment that crying is occurring.

Future research will benefit from focusing on *attributional* issues to do with the ways that silence is understood and responded to. Are CPOs simply waiting for more to come? Are they orienting to distress? Is the silence treated as accountable silence? It may also be interesting to look at a CPO's first turns after a period of silence when the caller doesn't continue.

SOME INTERACTIONAL FEATURES OF CRYING

Having identified some of the features of crying, it is now possible to explore some questions concerning the similarity and differences between crying and laughing. I also sketch out some of the directions that interactional work on crying might go.

Laughing and Crying

One of the issues that arises in considering both sobbing and aspiration is their similarity in appearance to laughter in the transcript. Indeed, this

can generate difficulties in distinguishing the two for analysts. It may be that the sound similarities can generate trouble for participants on occasion as well (here additional lexical reference, e.g., "((sobbing))" may be required when there is no other way to disambiguate). As Jefferson (1979, 1984, 1985) showed, laughter can be used to do specific interactional tasks, and it is possible that features of crying may also have interactional functions. At this stage, it is possible to provide a provisional indication of some of the similarities and differences between the two.

As a gross observation, laughter is more frequent than crying in these materials. Even in institutional interaction involved with potentially grave and painful issues, there are roughly four times as many calls that have at least one instance of laughter in them than have an instance of crying. Both laughter and crying are paralinguistic activities that can be disruptive to the ongoing interaction. However, laughter is more commonly a shared activity than crying is—a speaker's laughter may solicit reciprocal laughter, which indeed may be the preferred response (Glenn, 1989; Jefferson, 1979). If invited to laugh, a recipient who declines that invitation is likely to engage in the serious pursuit of topic (Jefferson, 1979) to divert attention from the laughter and lack of it. Conversely, recipients of crying may delay their turns, seemingly to allow the speaker to compose him or herself, often explicitly marking the delay. For example

2b:	**CPO:**	D'you want- d'y'wann'ave a break for a moment.
9:	**CPO:**	°Take ye time.°

Although laughter can serve as a display of making light of one's troubles by a troubles teller (Jefferson, 1984), crying in these materials seems to be taken to indicate the severity or psychological disturbance of troubles to the speaker. There is frequently an orientation to just this by the CPO who may produce "empathic" receipts. For example

2b:	**CPO:**	It's distressing but it's also quite a shock
		isn't it I guess (for you)
3:	**CPO:**	There's:: a bit of the child in ↑all of us
		of us an:-(0.6) an that's the hur:t chi:ld
6:	**CPO:**	Tch Oh:: go:sh I'm so:rry,

There is also an extensive selection of "sympathetic" Mms (e.g., Extract 7, line 9; Extract 9, line 5).

The severity and potential disruption of sobbing and aspiration and other nonvocal activities associated with crying are commonly apologized for. It may be that the caller is apologizing for either the extremity of the emotional display or the disruption to ongoing interaction (e.g., not responding to questions, smooth speaker transition, inappropriately overlapping) or both. It is hard to clearly disentangle these things, but disruption to the interaction seems to be the most likely item for apology. This can be teased out with some more examples.

In the following extract, the caller's line 6 is responding to the supportive turn from the CPO in lines 1 through 3. However, the delivery is not only very quiet; it is also disrupted by the crying. The delay that follows may thus be the CPO offering an opportunity to recycle more clearly something that was ambiguous or possibly incomplete. The apology in line 10 is therefore likely to be for these specific failures:

2g. JK Distraught dad

```
 1   CPO:    .Htk.hh Well you're doing what you can now to
 2           actually offer them protection and help though
 3           are:n't you.
 4   Caller: .Skuh (.) Huhhhh
 5           (0.5)
 6   Caller: °°I:'m not the(hehheh)re. Hh°°
 7           (3.2)
 8   Caller: .Shih
 9           (0.4)
10   Caller: ~↑I'm ↑sorry.~
```

The next extract (from just previously in the call) is more extreme. In the position in which the caller could be responding to the CPO's sympathetic turns 1 to 2, the caller sobs (it is possible that they are trying to respond, but nothing is clearly hearable). So the caller may be apologizing for his or her failure to respond in the appropriate slot. (Interestingly, the caller's next turn is neither delayed nor whispered; see Extract 2b, line 38).

2h. JK Distraught dad

```
 1   CPO:    So 'e saw you as a person who could help in this
 2           situa[tion ] for him:.
 3   Caller:      [.Shih]
 4           (0.9)
 5   Caller: .Hdihhhh hhhuhh
```

```
6              (0.2)
7   Caller:    H↑oh: s(h)orry.
8              (0.4)
```

In the next example, the caller is sobbing increasingly loudly in over-
lap with the CPO. The apology in line 5 could be understood as an account
for disrupting standard turn organization:

3c. JX Male survivor

```
1   CPO:     [      There are-          (0.6)          ]
2   Caller:  [_Huhh .hhih_ >hhuh< >hhuh< >hhuh<]
3   CPO:     there are things you can do. =and the- there
4            is [specialist help   ] (0.4) ou [t there:.   ]
5   Caller:     [.HHHihh hhuhh ]          [↑↑Sorry.]
```

In this final example, the apology works prospectively. The caller
apologizes for the being emotional, perhaps to indicate possible disruption
to her contributions to the call. This elicits sympathy from the CPO (note
the different sense of "sorry" at work here):

6a. AD Grandson black eye

```
1   Caller:  Fine. =yes. [°that's fine.°]
2   CPO:                 [↓Brilliant   ] okay,
3   Caller:  °.Hh° (0.2) u:m (0.1) >I'm sorry I'm a little bit<
4            emo:~tional to↑d[ay~ .hih ]
5   CPO:                     [Tch Oh::] go:sh I'm so:rry,
```

These examples suggest that the contrast between laughing and crying
with respect to apologies may not have to do with something intrinsic to
what is conveyed (happiness or sadness, say) but more likely has to do with
the disruption of the current interaction caused by the crying. Laughter is
not typically so disruptive, so is in less need of apology. Clearly, this is an
analytic issue that should be followed up through further work on laughter
and in particular, focusing on examples in which speakers apologize for
their laughter. In terms of my specific helpline focus, the practical issue is
of the crying disrupting helpline interaction or, in extreme cases, leading to
its termination. There may be some interesting parallels to the way laughter
can disrupt institutional telephone interaction as noted by Lavin and May-
nard (2002). This is something that would be interesting to follow up.

Jefferson's (1984) account of laughing during troubles telling charac-
terizes it as "troubles-resistive" (p. 367). This might suggest that crying has
the opposite feature of accepting or even exaggerating troubles, which may
itself implicate interactional and identity trouble. Again this is something
for further work.

Toward an Interactional Account of Crying

In the previous discussion of laughing and crying, I have already noted
a number of interactional features of crying. I have noted in particular
caller apologies (A), CPO take-your-times (TYT), and CPO "empathic re-
ceipts" (ER). To this list can be added reassuring descriptions that respond
to the crying by stressing that the caller is doing the right thing (RT) or
something similar. In terms of their interactional organization, these can be
reiterated in the course of continued crying. I return to Extract 2 and mark
on A, TYT, and ER as well as RT descriptions:

2i. JK Distraught dad

```
 1   Caller:   >.Hhih .hhihhh<
 2   CPO:      D'you want- d'y'wann'ave [a break for a  ] moment.=      ←TYT
 3   Caller:                            [Hhuhh >.hihh<]
 4             =>hhuhh hhuhh<
 5             (0.6)
 6   Caller:   .shih
 7             (0.3)
 8   Caller:   °°k(hh)ay°°
 9             (1.8)
10   Caller:   .shih >hhuh hhuh [h]<
11   CPO:                       [S]'very har:d when                     ←ER
12             they're not there with you isn't it.=                    ←ER
13             and [you're- ] (.) you're tal:kin about it.              ←ER
14   Caller:      [>.hhih<]
15             (0.8)
16   Caller:   >.Hhuh .HHuh<
17             (2.1)
18   Caller:   .shih
19             (0.2)
20   Caller:   °.shih° (.) °°(Need) hhelp(h)°°
21             (2.5)
22   Caller:   .HHhihh°hh°
23             (0.5)
24   Caller:   HHhuhh >.hih .hih<
```

```
25              (0.7)
26   CPO:       .Htk.hh Well you're doing what you can now to              ←RT
27              actually offer them protection and help though            ←RT
28              are:n't you.                                              ←RT
29   Caller:    .Skuh (.) Huhhhh
30              (0.5)
31   Caller:    °°I:'m not the(hehheh)re. Hh°°
32              (3.2)
33   Caller:    .Shih
34              (0.4)
35   Caller:    ~↑I'm ↑sorry.~                                           ←A
36   CPO:       An they als- well E-E-Eddie obviously al- thought         ←RT
37              you were the person to contact to get he:lp.             ←RT
38   Caller:    Yeh. hh
39   CPO:       F'which (.) ye know he turned to you: .hh                 ←RT
40              (0.7)
41   Caller:    .Hh[h°hhh°      ]
42   CPO:          [T'help 'im. ]=didn't he.                             ←RT
43   Caller:    °°Yhhehhh°°
44   CPO:       So 'e saw you as a person who could help in this          ←RT
45              situa[tion  ] for him:.                                  ←RT
46   Caller:         [.Shih]
47              (0.9)
48   Caller:    .Hdihhhh hhhuhh
49              (0.2)
50   Caller:    H↑oh: s(h)orry.                                          ←A
51              (0.4)
52   CPO:       .Htk s'↑oka:y. kay.
53              (1.3)
54   Caller:    .SKUH
55              (0.3)
56   CPO:       It's distressing but it's also quite a shock              ←ER
57              isn't it I guess [ (for you)]                            ←ER
58   Caller:                     [.HHHHhih]hh HHHhuhhhh
59              (1.7)
60   Caller:    ((swallows)) °Hhhoh dhear.°
```

Although these categories are rather clumsy, they allow one to note some interesting things about the unfolding of this extract as a preliminary to more developed work. First, note how the TYT turn in line 2 is occasioned by the caller's sobbing. The sobbing continues through the turn and after. Note that despite the disruption of the sobbing, the caller responds to the TYT (a whispered "khhay" on line 8). After further delay and sobbing, the CPO does the first of a series of ER. This offers an account for the

caller's crying ("s' very hard when they're not there") combined with a tag question that projects agreement ("isn't it"). The empathetic nature of the turn seems to be delivered through the CPO's offering of the account from the caller's point of view; the CPO puts herself in the position of the caller. The empathic turn and further sobbing is followed by the first of a series of RT descriptions. These are constructed from information already provided by the caller, redescribed to present him having done the RT. Such descriptions seem designed to reassure the caller and move him out of crying. These descriptions can be accompanied by tag questions. These may work to move the caller out of crying by encouraging agreement with the RT description. This sequence ends with another ER, this combining a psychological description of the effect of things on the caller's mental state ("it's distressing," "a shock") with a tag question ("isn't it") and a marker of caution ("I guess"). This occasions one last occurrence of loud sobbing, but after that, he starts to move out of crying, maybe marking this move with the quietly spoken "Hhoh dhear."

To end this article, I consider one more extract and consider whether the descriptive and analytic work discussed previously can help us account for some of its features. As with Extract 1, this is the kind of call that is a problem for the NSPCC because the caller terminates the call before providing the details that could provide the basis for a referral to social services. With a more developed understanding of some of the different features of crying and its management, I support the speculation that crying was involved in this termination. The caller is being questioned about events he witnessed in which a girl's hands were scalded by her stepfather:

11. BN 212200 Burnt hands

```
 1   CPO:     Could you hear the girl crying. =or
 2            say[ing any]thing,
 3   Caller:      [ No.   ] No.
 4            (0.3)
 5   CPO:     She did[n't- sh]e wasn't making any
 6   Caller:         [ No.  ]
 7   CPO:     noise at a:ll,
 8   Caller:  She wasn' making a:ny noise at all.
 9            (1.3)
10            .Hh 'n she never does when she gets
11            hit.
12   CPO:     S:[tra:nge is]n' it.
13   Caller:    [It's all c- ]
```

```
14              I've never seen her cry:,= and (.)
15              ~e:m~ (0.3) .hh
16              (0.9)
17              ((clicking and swallowing noises for 1.6 sec))
18              ~yeahhh~
19              (2.1)
20              but er hhh
21              (1.4)
22              ANYway.
23              (0.2)
24              [After] that,
25      CPO:    [S:o- ]
26              (0.2)
27      Caller: E:m: 'bout ten minutes later I went (.)
28              to: (.) go into the toilet,
29              (0.2)
30              .Hh right which is in the ba:throom,=an
31              (0.2) e- .hhh (0.5) she was: er HHhh
32              >hang on a minute.<
33              (11.1)
34              ((2 coughs in background))
35              (1.0)
36      Caller: ((swallows))
37              .Hh
38              (0.2)
39              Yeah:.= sorry about ↑that
40              (0.3)
41              Er::m (0.2) tchyeah.
42              (0.4)
43              .hh
44              ((noise))
45              She was standing: er behind the ba:throom
46              door, holding: er two hands >they'd
47              obviously been plunged under (0.2)
48              e-the hot tap.
49      CPO:    W-when you say obviously been plunged
50              ho [w woul]d you know that.
51      Caller:    [Well.  ]
52              (0.4)
53              Tch er they were bri:ght red.
54              (1.3)
55      CPO:    Mm,
56              (1.5)
57              ((click))
58              (1.8)
59              Hello:,
```

60	(2.2)
61	Hello:,
62	(5.7)
63	Hello:,

Although this call does not contain the kind full-scale sobbing that was seen in Extract 2b, it does show a number of features that have been identified as a regular part of crying in the previous analysis. In particular, note the caller's voice wobbles on lines 15 and 18; the increased aspiration on lines 18, 20, and 31; and the swallowing on lines 17 and 36 (a feature of other crying episodes—e.g., Extracts 2b, 6, and 9). There is also the characteristic apologizing metaturn on line 39 accompanied by a raise in pitch, and long silences on lines 16, 19, 21, 33, 35, and 54. This combination of features is nevertheless not oriented to by the CPO. Specifically, they do not offer any of the sympathetic, empathetic, or RT redescriptions that seem to be characteristic of CPO's responses to crying in other calls. Instead of orienting to these signs of crying, the CPO produces turns that could be heard as challenging. Note for example "strange isn't it" (line 12) that ponders the coherence of the offered story and "when you say obviously been plunged how would you know that" (lines 49–50). The latter in particular can easily be heard as skeptical (cf. Pomerantz, 1984). It seems at least plausible that the caller hangs up following this sequence as a consequence of the failure of the CPO to produce any of the range of supportive turns combined with the production of these more challenging turns. Further work should allow claims of this kind to be made with more confidence.

CONCLUSIONS

In this article, I have suggested that the detailed transcription of the sounds that make up crying warrants more than the simple noting of its occurrence in transcripts. In previous research, it has been assumed that mere description will suffice because we know in advance what crying is. The aim here has been to produce a more comprehensive transcription of crying that will allow interactional questions to be addressed more fully than they have been up to now. I have discussed ways of representing a set of characteristic elements (see Table 1).

Of course, in practice, elements of crying often occur together—it could be that the after effects of sobbing create vocal problems that result in

silence–the inability to speak or whispering and wobbly or high-pitched voice quality. Or perhaps by controlling the urge to sob, one's voice contains aspiration and becomes wobbly or high-pitched. These elements may be exploitable by both callers and CPOs for different purposes.

I have identified and commented on the features of these different elements, and I have developed a preliminary analysis of how the characteristic signs of crying are oriented to by CPOs. I also explored contrasts and parallels between laughing and crying, which raised the issue of the disruption to interaction caused by crying and callers' apologies for this. Another avenue for future exploration here relates to how the insertion of both laughter and crying could provide a general frame for understanding the caller and their problem, and so both may relate to the caller's management of identity issues on the Helpline.

It may be well be that further research would show that the unitary category "crying" is misleading in some situations in which not all elements are present. Moreover, research on crying and other emotion displays in face-to-face and noninstitutional settings may show the importance of very different things (such as different phases of crying) and downgrade the importance of some of the features that seem central to crying on the NSPCC helpline.

NOTES

1 A related study by Heath (1989) considered interactional properties of expressions of pain in an institutional (clinical) context. Heath showed how general practitioners withhold their gaze from patients when they are crying out in pain, thereby avoiding responding to and encouraging further expression of pain.

2 Imbens-Bailey and McCabe (2000) also considered "distress" in emergency calls from a communication, although not specifically conversation analytic, perspective. Where "distress" is represented in transcript, it is named rather than transcribed, for example, "gasps of breath."

3 The calls used here come from an initial corpus of 14 generated by searching for crying through a collection of 141 calls. Of these, 9 were from women, 3 from young persons (2 girls who say their age is 12 and one who says her age is 15), and 3 from adult men. The CPOs in this corpus were all women.

4 The National Society for the Protection of Cruelty to Children (NSPCC) is Britain's principal child protection charity and is unique in possessing statutory powers to safeguard children. Much of their direct contact is through a 24-hr National Child Protection Helpline that receives 250,000 calls per year. The NSPCC is legally mandated to pass on

reports of abuse to social services and/or police when the information is sufficient and merits action, whether the caller wishes this or not. The helpline also provides free counseling, information, and advice to anyone concerned about a child at risk of ill treatment or abuse or to children themselves who may be at risk. It is staffed by trained social workers with at least 3 years field experience of working in child protection.

Calls are highly varied. They come from adults, young people, grandparents, parents, and neighbors and from people of different social class and ethnic backgrounds from all over Britain. They can be asking for advice, reporting abuse, or requiring counseling. Some issues may be relatively trivial; some may be literally life or death. All participants to the study consented to their calls being recorded for research and training purposes.

The general aim of this project was to make explicit the skilled ways in which calls are dealt with and to consider the nature and consequence of troubles that arise in the calls. A major practical aim is to produce information and audio and video training materials to help the NSPCC and similar organizations in their training and quality assurance. For further details and examples of analysis, see Hepburn and Potter (2004) and Potter and Hepburn (2003).

5 I am indebted to Gail Jefferson for her help with a section of this call. For the sake of transcription consistency, not all of her suggestions have been followed.

6 Tildes have also been used for "creaky voice" by Maynard, Houtkoop-Streenstra, Schaeffer, and van der Zouwen (2002), more commonly represented by "#."

7 I am indebted to Gail Jefferson for her help with a section of this call.

REFERENCES

Barr, R. G., Hopkins, B., & Green, J. A. (Eds.). (2000). *Crying as a sign, symptom, and a signal: Clinical, emotional and developmental aspects of infant and toddler crying.* London: Mackeith Press.

Beach, W. A., & Dixson, C. N. (2001). Revealing moments: Formulating understandings of adverse experiences in a health appraisal interview. *Social Science and Medicine, 52,* 25–44.

Buttny, R. (1993). *Social accountability in communication.* London: Sage.

Edwards, D. (1997). *Discourse and cognition.* London : Sage.

Edwards, D. (1999). Emotion discourse. *Culture & Psychology, 5,* 271–291.

Glenn, P. (1989). Initiating shared laughter in multi-party conversations. *Western Journal of Speech Communication, 53,* 127–149.

Glenn, P. J. (1992). Current speaker initiation of two-party shared laughter. *Research on Language and Social Interaction, 25,* 139–162.

Glenn, P. (1995). Laughing *at* and laughing *with*: Negotiation of participant alignments through conversational laughter. In P. ten Have & G. Psathas (Eds.), *Situated order: Studies in the social organization of talk and embodied activities* (pp. 43–56). Washington DC: International Institute for Ethnomethodology and Conversation Analysis & University Press of America.

Glenn, P. (2003). *Laughter in interaction.* Cambridge, England: Cambridge University Press.

Haakana, M. (2001). Laughter as a patient's resource: Dealing with delicate aspects of medical interaction. *Text, 21,* 187–219.

Heath, C. (1989). Pain talk: The expression of suffering in the medical consultation. *Social Psychology Quarterly, 52,* 113–125.

Hepburn, A., & Potter, J. (2004). Discourse analytic practice. In C. Seale, D. Silverman, J. Gubrium, & G. Gobo (Eds.), *Qualitative research practice* (pp. 180–196). London: Sage.

Imbens-Bailey, A., & McCabe, A. (2000). The discourse of distress: A narrative analysis of emergency calls to 911. *Language and Communication, 20,* 275–296.

Jefferson, G. (1979). A technique for inviting laughter and its subsequent acceptance declination. In G. Psathas (Ed.), *Everyday language: Studies in ethnomethodology* (pp. 79–96). New York: Irvington.

Jefferson, G. (1984). On the organisation of laughter in talk about troubles. In J. M. Atkinson & J. Heritage (Eds.), *Structures of social action: Studies in conversation analysis* (pp. 346–369). Cambridge, England: Cambridge University Press.

Jefferson, G. (1985). An exercise in the transcription and analysis of laughter. In T. Van Dijk (Ed.), *Handbook of discourse analysis* (Vol. 3, pp. 25–34). London: Academic.

Jefferson, G., Sacks, H., & Schegloff, E. A. (1987). Notes on laughter in pursuit of intimacy. In G. Button & J. R. E. Lee (Eds.), *Talk and social organization* (pp. 152–205). Clevedon, England: Multilingual Matters.

Lavin, D., & Maynard, D. W. (2002). Standardization vs. rapport: How interviewers handle the laughter of respondents during telephone surveys. In D. W. Maynard, H. Houtkoop-Steenstra, N. C. Schaeffer, & J. van der Zouwen (Eds.), *Standardization and tacit knowledge: Interaction and practice in the survey interview* (pp. 335–365). New York: Wiley.

Manzo, J., Heath, R. L., & Blonder, L. X. (1998). The interpersonal management of crying among survivors of stroke. *Sociological Spectrum, 18,* 161–184.

Maynard, D. W., Houtkoop-Streenstra, H., Schaeffer, N. C., & van der Zouwen, J. (2002). *Standardization and tacit knowledge: Interaction and practice in the survey interview.* New York: Wiley.

Nelson, J. K. (2000). Clinical assessment of crying and crying inhibition based on attachment theory. *Bulletin of the Menninger Clinic, 64,* 509–529.

Oxford English dictionary. (1994). On CD-Rom (2nd ed.). Oxford, England: Oxford University Press.

Peter, M., Vingerhoets, J. J. M., & Van Heck, G. L. (2001). Personality, gender and crying. *European Journal of Personality, 15,* 19–28.

Pomerantz, A. M. (1984). Giving a source a basis: The practice in conversation of telling 'how I know.' *Journal of Pragmatics, 8,* 607–625.

Potter, J., & Hepburn, A. (2003). "I'm a bit concerned"—Early actions and psychological constructions in a child protection helpline. *Research on Language and Social Interaction, 36,* 197–240.

St. James-Roberts, I. (1988, October). Persistent crying in the first year of life: A progress report. *Newsletter of the Association for Child Psychology and Psychiatry, 10,* 28–29.

ten Have, P. (1999). *Doing conversation analysis.* London: Sage.

ten Have, P. (2002). Ontology or methodology? Comments on Speer's 'natural' and 'contrived' data: A sustainable distinction? *Discourse Studies, 4,* 527–530.

Vingerhoets, A. J. J. M., & Becht, M. C. (1996). *Adult Crying Inventory (ACI).* Unpublished manuscript, Department of Psychology, Tilburg University, The Netherlands.

Whalen, J., & Zimmerman, D. H. (1998). Observations on the display and management of emotion in naturally occurring activities: The case of "Hysteria" in calls to 9-1-1. *Social Psychological Quarterly, 61,* 141–159.