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## 'Well I Had Nothing Weird Going On': Children's Displays of Social Competence in Psychological Research Interviews

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#### Introduction

Conversation analytic studies of professional-child interactions have shown that children are able to employ their knowledge of a particular institutional environment to manage their interactional space. Children may create and maintain this interactional space in diverse settings and participation frameworks, and by instantiating a range of conversational practices. Practices of resistance have been well-documented, for example,

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in educational and counselling settings (Danby & Baker, 1998; Hutchby, 2005, 2007), as well as practices in which resistance strategies go hand in hand with aligning with the professional or even accommodating to what the interviewer wants to hear. This is shown to be the case in judicial interviews and interviews that discuss sensitive topics such as sexual abuse or domestic violence (Childs & Walsh, 2017; Iversen, 2014; van Nijnatten, 2013).

This chapter starts from the idea that children employ conversational practices like the above to constitute their social competence in interaction with professionals. We propose that children do so as members of the 'indigenous language cultures of childhood, which can be more or less independent of adults' (Hutchby, 2005: 71). We also put a relational and conversational concept of children's competence centre stage, rather than a cognitively or individually based, more static definition (Clark & Richards, 2017).

Children's interactional displays of competence are explored when they are invited to participate in a psychological research interview with a trained psychologist. These research interviews have been undertaken as part of a larger study to find out how children have experienced recuperation from instances of 'single-incident trauma', and with the explicit aim to advance a more child-oriented perspective on trauma recovery (Alisic, Boeije, Jongmans, & Kleber, 2011; Van Wesel, Boeije, Alisic, & Drost, 2012). To acquire the perspective of the child was considered especially important because the field of trauma-informed care is still largely dominated by studies that focus on adults who may experience and process traumatic events differently when compared to children.

For this chapter, we have analysed interviews that concern the sudden loss of a parent or sibling through an accident, experiences of violence in the family (murder), and experiences of personal violence (sexual assault) that satisfied the A1 exposure criterion for Posttraumatic Stress Disorder in

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the Diagnostic and Statistical Manual of Mental Disorders (APA, 2000). At the time of the interviews, the children were no longer receiving mental health care. During the interviews, a semi-structured approach was used in which the children were invited to describe their view of what happened, its aftermath and how they have experienced the process of recovery.

Although the interviews cover a broad set of traumatic occurrences, the aim of this chapter is to determine whether there are routine ways in which children are invited to talk about these experiences in this interview setting. In particular, our analysis focuses on how children manage the interactional implications of this setting in which situationally relevant notions such as 'change' and 'recovery' are introduced by the professional, as they constitute relevant categories for the original interview study (Alisic et al., 2011). Our aim is to investigate how given such institutional goals, children respond to the above notions that are embedded in the question format. The data offer a valuable opportunity to further develop our knowledge of research interviews in what can be considered a sensitive context (see also Lamerichs, Alisic, & Schasfoort, 2018) as well as to detail some of the challenges of qualitative methods such as interviewing as a means to gather insights in children's experiences or perspectives (Blakely & Moles, 2016; Silverman, 2017).

Our analyses are guided by a conversation analytic (hence CA) perspective and by insights from discursive psychology (hence DP), most notably the work on how speakers handle issues of accountability and morality in talk (Bergmann, 1998; Buttny, 2003). In line with these interactional approaches, we consider interviews based on information seeking questions not as 'pathways' to children's thoughts and feelings, but as sites for action, identity work and co-construction in the light of their institutionally relevant goals (Freed & Ehrlich, 2010; Potter & Hepburn, 2005; also Iversen, 2014: 368; see also Lamerichs, Alisic, & Schasfoort, 2015).

#### **Theoretical Section**

Institutional settings in which children and professionals take part, such as child counselling or family therapy, can be characterised by differing interactional agendas and differing moral imperatives. The notion of moral

imperatives can be drawn on in at least two ways. In a first and general sense, it may be related to institutionally specific question formats and how such formats reflect 'institutional moral frameworks' (Freed & Ehrlich, 2010). Such moral frameworks seem to be bound up with an organisation's institutional remit. In divorce counselling with children, for example, the notion of moral frameworks relates to the conversational practices used by the professional to engage in counselling-relevant tasks (Hutchby, 2005). Children may not always comply with such tasks, interactionally. For example, it was shown how the moral framework that was implied by the counsellor's questions (such as inviting the child to engage in 'feelings talk') was resisted by the child.

Questions asked in family therapy sessions, where generally both the parents and the child are present, offer another illustration of how institutional moral frameworks constitute an interactional concern for participants. Questions asked by the therapist in these settings might carry specific moral reflections, such as being a 'bad' child or a 'good' parent. When the therapist seeks a particular account about whether the child feels victimised by his parents, the parents may offer an account of 'good parenthood' in response instead. Producing such an account allows parents to counter the specific negative moral reflections in the question, whereas the space for the child to respond is limited (Hutchby, 2015; Hutchby & O'Reilly, 2010: 55–56; see also Bergmann, 1998, for a full discussion on accounts).

Our analysis of the data from psychological research interviews aims to explore how children attend to questions asked by the interviewer, that are couched in terms of institutionally relevant notions such as 'change' or 'recovery'. We want to explore how children manage the possible moral reflections in these (prefaced) questions (section "Presenting Downgraded Versions of What Happened") and the identity work they engage in while doing so. We also aim to expand our knowledge of what it means when we invite children to speak about traumatic experience from the perspective of change and recovery via psychological interviews (cf. Potter & Hepburn, 2005), while our analysis will also highlight some of the moral categories children themselves draw on in their answers (section "Discounting Ascriptions of a Changed Self"). We first discuss the characteristics of question formats and their institutional specificities.

## The Institutional Specificity of Question Design

The premises of question design in professional-child interaction are well worth exploring in our data (see also Lamerichs et al., 2015, 2018) and have been extensively examined in CA (Freed & Ehrlich, 2010; also Heritage, 2010). Studies have demonstrated how question design is related to the professional roles of the interactants (e.g. as a doctor, counsellor, or in our case, a trained psychologist), and how this shows up in the structure, lexical formatting and presuppositional basis of questions (Boyd & Heritage, 2006). Analyses of doctor-patient interaction provide an apt illustration here, as the questions doctors pose may be formatted in structurally different terms than the patient's responses. Where doctors may ask a question that searches for quantifiable measures of certain behaviour (e.g. alcohol consumption in terms of units per week), patients may answer such a question by offering qualitative biographical detail (i.e. describing alcohol consumption as part of their lifestyle, irrespective of numbers, see Halkowski, 1998). Thus, where doctors (and psychologists) might be trained to use objective measures in the formatting of their questions to arrive at appropriate assessments of relevant lifestyle factors, patients, on the other hand, may describe such factors in a context of sociability. Providing such biographical detail is interactionally relevant, as it wards off a 'technical' description of alcohol use that may suggest an overt monitoring of alcohol intake (see also Halkowski, 2006 on how patients' descriptions strike a balance between paying too much and too little attention to their bodily condition).

We see similar instances of institutionally relevant question design in our data, most notably with respect to the interviewer's questions inquiring about aspects of 'change', as a result of the traumatic occurrence (see also Urman, Funk, & Elliot, 2001 for questions typically asked in interviews to elicit children's stories on traumatic experiences). Previous work has shown how the questions in these interviews have a complex, often prefaced design (Lamerichs et al., 2018). Our data show that these prefaced question formats may be used to introduce a hypothetical scenario (e.g. 'sometimes children experience something bad like that and then afterwards they view the world in a different light how is that for you', see Fragments 2 and 3). These hypothetical scenarios make answer positions available that are

tilted in favour of a confirming response because a possible change in world view is made relevant and recognisable as something that happens to children in a similar situation. Other fragments also make available presuppositions and invite to confirm, for example, when inquiring about 'a changed view of the world' ('don't you view the world differently', in Fragments 4 and 5).

We inspect the interactional consequences of such question formats and how in answering these questions, children manage to talk about their traumatic experiences *in their own words*, and what these words demonstrably counter or resist.

## Managing 'Normality' and 'Difference'

Not much is known about the ways in which children talk about their experiences with traumatic events. However, a content analysis of therapeutic trauma interviews with children shows that children strongly orient to categories of 'normality' and 'difference' as two broad frames of reference to make sense of their experiences during and after a traumatic experience (Urman et al., 2001); a finding that is also consistent with earlier research (Terr, 1990). Conversation analytic studies have also found 'normalising' strategies at work, which have been termed 'doing being ordinary' (Sacks, 1984). These strategies are attended to in different settings and in different ways. When interviewed about alleged sexual abuse by a social worker, children may describe their experiences as quite 'ordinary' or 'temporary', and not in need of particular professional attention (van Nijnatten, 2013). When asked to report on their experiences of alleged sexual abuse by a police officer, victims also produce descriptions that 'normalise' the event, or render it a 'non-problem event' (Kidwell, 2009: 28). A similar concern with 'doing being ordinary' has been demonstrated in settings in which participants find themselves in a situation of 'social evaluation'. When interviewed by a social worker about adoptive parenthood, couples may describe themselves as 'normal' people who have had 'normal' childhoods (Noordegraaf, Van Nijnatten, & Elbers, 2009).

How 'normality', and by implication 'abnormality', work as performative categories has also been addressed in paediatric therapy interactions that involve children with autism (Lester, 2014). In interactions

with caretakers, professionals typically engage in practices that explain the behaviour of the child as meaningful and relevant, thereby redefining which behaviour might fall outside 'the norm' and for whom. Hence, attributions of competence and normality are shaped in interactions, illustrating again how a particular institutional moral framework is talked into being in this setting (2014: 179).

We argue that the interviewer questions that inquire about 'change' or 'recovery' in our interview data are equally not neutral or objective requests for information, but make available particular institutionally relevant answer agendas and are imbued with moral implications (Hutchby, 2005; Hutchby and O'Reilly, 2010). We will demonstrate how children may resist some of these moral implications (e.g. by downplaying the suggestion of fundamental change as a result of what happened), while they may also be shown to do moral work themselves (e.g. by emphasising their success in—having learned—to live a 'normal life' again). Examining these interactional practices enables us to detail children's differential displays of social competence in the setting of the psychological research interview.

## Data, Method and Approach

Our analysis draws on semi-structured psychological research interviews that were conducted for a qualitative study on child trauma. The aim of the original study was to examine how children experience the recovery process after a traumatic event and which factors they themselves identify as helping or hindering. Twenty-five children (15 boys and 10 girls, aged 8–12 years) participated in the study, who experienced different types of trauma, classified elsewhere as falling under the categories of sudden loss, violence and accidents with injury (see Alisic et al., 2011 for a full account of the study). The events had occurred between ten months and seven years previously, with a median of 27 months.

The children and their parents had been recruited via records held by the University Medical Center Utrecht in the Netherlands, with approval of its medical ethics committee for the study protocol. Children who had been confronted with a single-incident trauma were eligible for the study if they were aged between eight and twelve, if they were not currently receiving

mental health care, and if the event had occurred at least six months previously. The research team recruited families by letter and called them to answer any questions. Written informed consent and verbal assent were obtained from the parents and the children, respectively. The study made use of purposive sampling to achieve a maximum range in demographic characteristics, types of trauma, time since trauma, and degree of mental health care. For the current analysis, we examine the interviews of the 13 children whose families approved secondary use of the interviews for research purposes.

The interviews with the children were all conducted by the same interviewer (and co-author of this chapter, EA), who is a trained psychologist, in a quiet room and separate from their parents. Most of the interviews took place in one of the playrooms in the Medical Center, while a few were conducted, at the family's request, in their home. Several measures were taken to make the child feel at ease and in control, such as play at the beginning of the interview and a stop sign (a copy of the traffic sign) that the child could use to terminate the interview. None of the children used the sign or other means to terminate the interview prematurely. The interviews included the following topics: the characteristics of the trauma, the child's immediate reactions, how the child's reactions evolved over time, to what extent the child experienced changes in outlook on the world, the self or others, what self-identified milestones had occurred in the child's recovery, and factors that had assisted or impeded recovery.

The purpose of the interviews was to learn about the child's view and to limit the amount of influence on the child's responses while eliciting as much information as possible. The research team continuously adapted the interview questions based on themes that emerged during the study. The body of the interviews (excluding play, introduction, and ending) lasted 30 minutes on average.

This study employs an interactional approach, building on insights in CA and DP that are used to explore interactional practices in medical settings as well as other institutional environments that involve children (O'Reilly & Lester, 2015; also Hutchby & Woofitt, 2008). Based on fine-grained analyses, these interactional approaches allow for a systematic exploration of how speakers display their understandings of what they are saying and doing, as evidenced in the local particularities of talk. Detailed

transcripts of the talk at hand are used, based on guidelines conventionally adopted in CA (Jefferson, 2004).

For this chapter, we report on the findings from a selection of 6 interviews that are concerned with experiences of violence and loss. Based on this dataset, our collection study was informed by three broad sets of identified practices that children seemed to engage in and which may fall under the larger interactional project of 'doing being ordinary'. In the analysis that follows, we present the original data in Dutch and a gloss in English.<sup>1</sup>

## **Analysis**

Our analysis focuses on how children engage in answering a particular set of questions that highlight institutionally relevant notions of personal change or a changed outlook on life. Section "Presenting Downgraded Versions of What Happened" presents how in response to such questions, children construct what happened to them in a downgraded fashion or resist the implication of personal change.

Section "Discounting Ascriptions of a Changed Self" highlights how children, in response to questions that inquire about 'changes' as a result of what has happened, emphasise their 'regained normality'. In doing so, they actively resist the implication that what happened to them has caused them to change as a person. Lastly, section "Presenting Normatively Preferred Versions of 'Doing Being Recovered'" examines how children themselves also engage in 'moral work', when presenting normatively preferred accounts of 'doing being recovered'. Together these practices show how children engage in identity work, vis-à-vis the questions that are posed to them in this setting, which inquire to recount past experiences in the here and now.

<sup>&</sup>lt;sup>1</sup>We provide a two-line transcript including the Dutch originals and an idiomatic English translation that attempts to capture the local interactional meaning of the original utterance in Dutch. We convey the English translations without production details within lexical items as we cannot 'translate' how these features would be rendered by the speakers in English (Hepburn & Bolden, 2013). Pauses, speed, volume, turn-initial in breath and indicators of turn-final intonation are however included in the translations. With turn-final intonation, we follow the guidelines by Mazeland (2003), who uses the semicolon to identify a pitch rise stronger than a comma but weaker than a question mark (cf. 2013: 61–62).

## **Presenting Downgraded Versions of What Happened**

Fragment 1 occurs in the first minutes of an interview with a girl who was abducted and sexually assaulted by an unknown man. The interviewer has just started off the interview by asking the child to tell 'the story of what happened' (data not shown here). At the start of Fragment 1, the girl told the interviewer how she was eventually taken back to the community centre by someone from her village who saw her sitting in a nearby park while her family was looking for her.

#### Fragment 1

```
k22 - 'well I had nothing weird going on'
80 I: en weet je nog (.)
      and do you still know (.)
81 I: hoe het toen met jou was.
      how it was then with you.
82 I: "toen je terug ging naar de club".=
       °when you went back to the community centre°=
83 K: =NOU (.) i:k (.) h wist niet echt wat er gebeurde;
       =WELL (.) I (.) did not really know what was happening;
84 K: [want ik was zes.
       [because I was six years old.
85 I: [°nee°;
       [((bladeren-ritselen van papier))]
       [((leafing through - rustling of sheets of paper))]
87 I: ja:;
       yes:;
88 K: dan snap je dat ook niet efcht,
      then you don't really understand those things,
89 I: mhnee.
      mhno.
90
      (2.0)
91 I: weet je nog hoe je je toen †voe:lde,
      do you still know how you felt at the time,
92
      (0.5)
93 K: hh↑m.
      hhm.
      (0.5)
95 K: nou ik had niks <u>rAA:↑rs</u>;
      well I had nothing wEIrd going on;
96 K: want [.hh (1.0)
      because [.hh (1.0)
97 I:
               [hh†m
               [hhm
98 K: ik wist niet ee(h)ns w(h)at er- dat er iets aan de hand was.
      I did not even know what was- that something was going on.
99 I: nee;
      no:
```

In lines 80–82, the interviewer formulates a polar question ('do you still know how..'), that inquires how the child 'was' at that moment ('how it was then with you...', line 81) when she was taken back to the community centre. The presuppositional basis of the question is that something about the child's situation at that moment is relevant to report on here. And also, that it is relevant not so much to report on it in neutral terms but as a possible 'problem event' (Kidwell, 2009: 23). The child's answer starts with the discourse marker 'well', which is attended to in a way that is in line with Schegloff and Lerner's observations (2009) on the use of wellprefacing in response to wh-questions: it is not produced as a dispreference marker but as an alert that something is the matter with how the speaker is continuing the turn (cf. Mazeland, 2016). She continues by producing an epistemic disclaimer that wards off being actively aware of the nature of what happened, which she then accounts for (in overlap with a confirmation from the interviewer) in terms of her young age (line 84). This account, which makes use of a stage-of-life categorisation, is followed by an elaboration that upgrades the categorisation into a more generic claim: no one can be expected to understand the act of being sexually assaulted at such an early age (see the use of 'you', in line 88; see Cromdal, Danby, Emmison, Osvaldsson, & Cobb-Moore, 2017).

After a confirming response, the interviewer continues in line 91 by inquiring how the child *felt* at the time (note the polar design, similar to lines 80–81, starting with 'do you still know'). The child responds again with the discourse marker 'well', which highlights that what comes next is not straightforward (Mazeland, 2016): she goes on to reject the possible inference that something was observably 'wrong' with her then ('well I had nothing weird going on', line 52, said in a louder voice and with emphasis). This is then coupled with an account that contains an 'extremised' epistemic disclaimer ('I did not even know', in line 98), produced with laughter particles. Thus, the child counters the suggestion of being aware of what exactly happened when she was abducted, nor of any possible ramifications, which downplays its importance and renders it a *non*-problematic event. The trajectory of the interviewer's questions, presupposing at two instances that the child's mental state at the time is relevant to report on here, is resisted. Note that the girl's accounts in lines 83 and 98, which

all work to counter the presuppositional basis of the question, can also be heard as subtly criticising the basis for the interviewer's question.

Fragment 2 below presents an fragment from an interview with another girl who was raped by a young boy from her hometown. The interviewer poses a lengthy prefaced question, which is not displayed in full here. It outlines a scenario in which other children who have also experienced 'something really bad', still have a feeling that there is something positive about what has happened to them (lines 726–728). Its format presumes the likelihood of a similar experience and seeks confirmation from the girl. After a 2.6 second break, in which the girl has not responded, the interviewer asks the child 'how' that has been for her (line 730, see also Fragment 3 for a similar question design).

#### Fragment 2

```
k20 - 'it could also have happened to someone else'
726 I: .hh en dan hebben ze tjoch nog het gevjoel,
       .hh and then they still have the feeling,
727 I: .h dat er ↑iets posit↓iefs;
       .h that there has been something positive;
728 I: is geweest °aan de gebeurtenis°.
       °about the occurrence°.
729
730 I: "hoe was dat bij jou".
       "how was that with you".
731 K: °hm°
       °hm°
732 (3.0)
733 K: ja;
      yes;
734 (1.0)
735 K: weet ik niet echt.
       I don't really know.
736 K: [ja;]
       [yes;]
737 I: [nee] 't hoeft niet he;
       [no] it doesn't have to be does it;
739 K: nee volgens mij heb ik dat niet echt.
      no I don't think I really have that.
740 I: nee;
741 K: het is wel vervelend=
      it is unpleasant=
742 K: =maar,
      =bnt.
743 I: hmhm;
744 K: het had ook bij iemand anders kunnen gebeuren.
       it could also have happened to someone else.
```

```
745 I: ja;
      yes;
747 I: wat bedoel je daar precies mee?
       what exactly do you mean by that?
748 K: nou;
       well;
749
      (2.0)
750 K: pt a- eh eh die jongen had ook gewoon iemand
      pt a- uh uh that boy could also have just
751 K: ainders kunnen roepen;
      called on someone else;
752 I: [hmhm]
       [hmhm]
753 K: [en had] dan ook gewoon iemand ainders >kunnen verkrachten<.
       [and could] then also just have raped someone else.
754 I: ja.=
       ves.=
755 K: =dus (.) o- misschien was het dan wel met m-m'n vriendin gebeurd.
       =so (.) o- maybe it would have happened to my girlfriend then.
756 I: hmhm;
      hmhm:
       (3.0)
758 K: "dus" (1.0) soms zijn dingen ook gewoon zo;
       °so° (1.0) sometimes things are also just like that;
759 K: zoals het is.
      the way it is.
760 I: ja.
     yes.
761
```

In response to the interviewer's 'how' question in line 730, the child responds with markers of hesitance and an epistemic disclaimer ('don't really know', line 735; see also Lamerichs et al., 2018; also Stafford, Hutchby, Karim, & O'Reilly, 2016). The interviewer produces a confirmation in overlap with the child and an acknowledgement that this does not necessarily have to be the case and seeks confirmation from the child (line 737). The child confirms this acknowledgement by stating more explicitly that she has not taken something positive from what happened. She continues by producing two further statements that describe the nature of the occurrence in a downgraded fashion ('it is unpleasant'; 'it could also have happened to someone else', lines 741–744). These downgraded descriptions may be hearable as a disagreeing with the question that what happened to her falls under the 'special' category of events that, in retrospect, would allow for anything positive to be gained from it. After a confirmation, the interviewer asks a follow-up question for clarification (line 747). In response, the child offers a well-prefaced answer that uses a hypothetical construction with multiple references to the adverb 'just' to highlight the coincidental nature of what happened. The use of the turn-initial 'well' ('nou' in Dutch) in this question-answer sequence is another example (see also Fragment 2) of how some uses of 'well' may not be particularly governed by participant orientations to a preferred or dispreferred response (Mazeland, 2016). It seems to be oriented to how her 'response will be in some respect not straightforward' (Schegloff & Lerner, 2009: 101).

By formulating that 'sometimes things are also just like that' (line 758) she then does closing work to present what happened to her in a matter-of-fact fashion. It is presented as an occurrence she is now able to reflect on and as a fact of life that lies in the past, rather than it being in need of any further contemplation in the here and now. In doing so, the child's answer may subtly resist the trajectory of the question that inquires how this particular experience may be of the life-changing kind from which one is able to distil particular positive lessons.

In this section, we have examined two fragments in which two girls who experienced rape and sexual assault respectively, are invited to tell the story of what happened. Both fragments have shown how the girls subtly resist the trajectory of the question that inquires into whether there was something observably 'strange' (or 'wrong') after what happened; the traumatic event is presented in downgraded and ordinary terms. Fragment 2 also demonstrated that what happened is attended to as something that does not warrant any further contemplation, and so continued topicalisation of this matter in the terms the question poses, is resisted. Next we will examine how the children in our data actively counter the suggestion of a 'changed self', as a result of what happened. We gloss this as another way in which children instantiate 'doing being ordinary'.

## **Discounting Ascriptions of a Changed Self**

The fragments in this section deal with the topical agenda of one of the interviewer's questions that inquires about 'changes' that have occurred since the traumatic event. These questions were sometimes asked on multiple occasions during the interview. Fragment 3 explores how this question gets responded to by the girl who was sexually assaulted (Fragment

1), and we continue by showing how other children may also resist the topical agenda of changes to the self, as a result of what happened.

Fragment 3 below shows a similar question format we saw at the start of Fragment 2. The interviewer starts with a prefaced question design that invites confirmation, as it stresses the likelihood that a changed world view is in order. In line 330, the preface is coupled with a 'how' question, which, based on the assumptions in the preface, may make a confirmation from the child relevant.

#### Fragment 3

```
k22 - 'I am still just the same person'
324 I: .hh hee en soms dan eh maken kinderen zoiets ergs \text{mee,}
        .hh hey and sometimes children experience something bad like that,
325 K: hmhm.
326 I: •pt en dan kijken ze daarna op een andere manier naar de ¡wereld;
       •pt and then afterwards they view the world in a different light;
327 I: en naar mensen om hun heen;
       and the people around them;
328
      (.)
329 I: .h
        .h
330 I: hoe is dat voor jou;
       how is that for you;
       (1.0)
331
332 K: nou:;
       we11:
333 K: ik let nu wel iets meer o:p,
       I do pay a little more attention now,
334 K: maar; .h=
       but; .h=
335 I: =huhhmm,
        =hijhhmm.
336 K: i:k kijk niet anders >naar de wereld ofzo<.
        I don't view the world differently or something.
337 I: nee.
338 I: "noke."
"okay"
339 K: ik ben nog steeds gewoo:n
       I am still just
340
       (0.5)
341 K: hetze(h)lfde perso(h)on.
       the same person.
342 I: †hmhm:m,
        ↑hmhm:m,
```

In lines 332–333 and after a one-second pause, the child responds with what begins with a weak agreement (Pomerantz, 1984) that points to a small change in behaviour. Note how the well-prefaced response might indicate that the answer that is forthcoming is not straightforward (Mazeland, 2016). The turn gets constructed as a contrast, in which the first part is presented as slightly different current behaviour of the child, without explicitly linking it to what happened. After a confirming response by the interviewer, the girl then continues with the but-prefaced second part of her answer that disconfirms that a more fundamental type of change is in order (line 336). After the interviewer's continuer and an 'okay' which might be hearable as another continuer or as doing closing work, the child goes on to emphasise her 'sameness' in stronger ('still') and normalising ('just') terms (in lines 339–341). This is then met with another continuer from the interviewer.

Similar practices to discount the question's topical agenda that inquires after personal change can be found in other interviews too. In Fragments 4 and 5 below, we present further examples from two interviews with two young boys. The boy in Fragment 4 has lost his father to suicide and the boy in Fragment 5 has lost his sister as a result of a train accident.

Prior to the beginning of Fragment 4, the interviewer has asked the boy whether things have changed following his father's death. The boy responds that their home had been redecorated and there is some laughter when he offers some evaluative remarks about this change ('to be honest it is prettier', data not shown here). The fragment starts when the interviewer asks a follow-up question that explicitly inquires whether the redecorating was directly related to his father's death (lines 519–520). After the boy produces a disconfirming response, in overlap and with laughter in line 521, the interviewer continues with what is presented as the second part to the alternative question ('or is that just unrelated', line 522). Formatted as more congruent with the boy's intervening response in line 521, and formatted as a more 'plausible' answer category ('just', line 522), it invites a confirmation from the boy.

#### Fragment 4

```
k8 - 'actually not so much had changed'
519 I: en had dat ook te maj:ken met je vadejr,
         and was that also related to your dad,
520 I: dat dat nu [veranderd is
         that that has now [changed
521 K:
                    [ehh nee (h)h.
                             [ehh no (h)h.
522 I: of is dat gewoo:n: los [van elkaar.]
         or is that just not [connected to it.] (.)
523 K:
                                   [ehm nee ehh] (.)
                                   [ehm nee ehh] (.)
524 K: .h hh >nee er was eigenlijk< niet zovee:1 °veranderd°.
          .h hh >actually< not so much had changed.
525 I: hmhm
          hmhm
526
526 (.)
527 I: °oke°
          °okay°
528 I: .h en: zijn er nog <u>ding</u>e' voor jou ver<u>and</u>erd;
.h and are there things for you that have changed; 529 I: in hoe je (.) over andere dinge' denkt?
         in how you think about other things?
530 (3.0)
531 K: nee: ook nie' °nee°.
         no not either no.
532 I: nee, (.) [kijk je niet anders] naar de we:reld no, (.) [don't you look differently upon the world
533 I: of naar mense:'.
         or people.
534 K: ["niet echt nee".
         [ onot really no o.
535 K: nee.
         no.
536 I:
          °oke°
          °okay°
537
          (2.5)
538 I:
          °da' kan soms°;
         "that is possible sometimes";
```

In lines 521 and 523, the boy replies with an overlapping and disconfirming 'no' and elaborates by downplaying the extent of the redecoration of his home. By adding the adverb 'actually' the boy's response counters the presuppositional basis of the question, that there had been made changes in the home, where a confirmation might be invited (Clift, 2001). After the interviewer's 'okay', which does closing work and paves the way for an and-prefaced follow-up question (Beach, 1993), the interviewer now renders the question more specific. She inquires whether any changes have occurred that have to do with the boy himself and how he thinks about 'other things' (lines 528–529). The boy produces a disconfirming 'no' that orients to these other dimensions of change that are asked about (line

531 'no not either no') which is repeated. The interviewer then rephrases the question in line 532, as a negative interrogative (Heritage, 2002), which invites a confirming response. The boy, again, produces a slightly weaker but still disconfirming response that gets softer produced (line 534) and repeated. In lines 536, the interviewer then offers an 'okay' in third position, which is also softer produced with which she seems to mildly acknowledge the plausibility of the boy's answer ('that is possible sometimes').

In Fragment 5, we present another example of a question that inquires about change as result of what happened. The interview is ten minutes under way, in which the interviewer asks about the changes since the boy's sister passed away as the result of an accident. In lines 582–583, the interviewer starts with a question design that highlights the self as the area where changes are sought ('are there things that have changed with you', line 582, see also Fragment 4, line 526). Similar to the previous fragments we have seen, the question makes available the topical agenda of 'personal change', as a result of the traumatic occurrence.

#### Fragment 5

```
k10 - 'so that has actually remained the same'
582 I: zijn er dingen bij jou veranderd,
        are there things that have changed with you,
583 I: in hoe je (0.8) na:denkt over- (0,8) dingen in de wereld?
        in how you (0.8) think about the things in the world?
584
        (1.3)
585 K: "nee"
         °no°
586 K: [((smakt))] gewoon;
        [((smacks lips))] just;
587 K: >altijd wachten bij het stoplicht,
        >always wait at the traffic lights,
588 K: en bij het spoor<,
        and at the tracks<,
589 K: ((dat)) doe ik ook altijd;
        I always do that too;
590 I: hm mm
591 K: .h en dee ik daarv\uparrowoor ook al.
        .h and I used to do that too.
592 I: okee.
        okay.
593
        (0.4)
594 I: dus dat is <u>eig</u>enlijk ut<u>zel</u>fde gebleven,
        so that has actually remained the same,
        (0.4))
596 K: jha.
        veah.
597
       (1.4)
```

```
598 I: en zijn er dingen ook nog wel veranderd?
        and are there also things that have changed?
599
        (1.6)
600 K: eehm;
        eehm:
        (2.5)
602 K: n:ee.
603
        (2.3)
604 K: nou::,(°<dat we>°) wel verdrietig zijn.
        well::, ("that we">) are sad \overline{after} all.
605 I: jha.
       yeah.
606 (4.6)
607 I: "maar wat is daaraan veranderd;"
        °but what has changed about that;°
608
        (2.7)
609 K: nou ((dat)) wee ik nie.
        well (that) I don't know.
610 I: hm mm
       hm mm
611
        (2.1)
612 I: °.hokee;
        °.hokay;°
```

After a pause and some markers of hesitance, the boy responds in lines 585-588 with a disconfirming answer followed by a 'just'-prefaced elaboration that presents 'ordinary behaviour' (i.e. waiting for the traffic lights and at the tracks). He then goes on to reformulate his answer by presenting this behaviour as something he always does (line 589) and then further retracts it by stating that this is also what he did before the accident (line 591), thus establishing it, in retrospect, as unchanged behaviour, which is confirmed by the interviewer's formulation in line 594. The interviewer initiates a follow-up question that inquires whether there were things that 'have change' (note the emphasis in Dutch, line 598). We see again some markers of hesitation, the start of a disconfirming response ('no') which then after a gap continuous with a stretched turn-initial 'well' which can be heard, not so much as a dispreference marker, but indicating a complicated answer. It is produced in unforeseen terms to indicate change in the sense that the family has been sad (line 604). Without an acknowledgement, but with a softer produced 'but'-prefaced follow-up question, the interviewer seems to treat this answer as not completely sufficient and asks for a respecification of the reported feelings of sadness in terms of the previously introduced topical agenda of change (line 607). After another gap, the turn initial ('well') is coupled with an epistemic disclaimer, which again works to alert that there 'may be a problem with *how* the speaker is going to continue the second pair part turn and the recipient must figure out what the problem is in the course of the turn's unfolding' (Mazeland, 2016: 387). The interviewer produces a continuer and leaves a gap in which the child might add anything to his previous answer. When such a response is not forthcoming, the interviewer continues to produce a closing 'okay' that precedes the transition to the next question.

We have presented 3 fragments in this section that show how the children actively and repeatedly counter the suggestion that they have changed as a result of what happened. They may overtly disagree and emphasise a state of 'being essentially unchanged' (Fragment 3), disconfirm the scope of some changes and their relationship with what happened, and disagree with further questions that seek for personal changes (Fragment 4). Lastly, they may also present behaviour as previously existing, irrespective of what happened (Fragment 5) or by producing a 'mild' retraction, when prompted again to indicate a more precise area of change, by means of a claim to no knowledge.

How children resist the topical agenda that seeks to explore fundamental changes to the self, while also presenting claims of 'doing being recovered', is examined in the next section.

# Presenting Normatively Preferred Versions of 'Doing Being Recovered'

In this section, we present two fragments in which the interviewing psychologist does not so much topicalise change in the question, but asks a more generally worded question. In Fragment 6 below, taken from the girl who was raped by a young boy from her town (see also Fragment 2), the interviewer has just inquired which advice the child would provide to other children who might have experienced a similar traumatic event (data not shown here: see also Lamerichs et al., 2015). After a continuer and a brief pause, the interviewer asks an 'and'-prefaced follow-up question that inquires what the girl would tell about herself to a peer (line 466). We will focus on how the ensuing self-description is constructed and how it attends to aspects of regained 'normality'.

#### Fragment 6

```
k20 - 'and that I also just tried...'
464 I: hmhm;
         hmhm:
        (1.5)
465
466 I: en wat zou je hem vertellen over je z↑elf dan?
        and what would you tell him about yourself then?
467 K: nou, dat ik het ook >zelf m ee had gemaakt; <
         well that I had also >experienced it myself<;
468 K: >dat ik ook gewoon< •h vervelende dingen had meegemaakt.
         >that I had also just< •h experienced unpleasant things.
469 K:
         .h en dat ik ook gewoon heb geprobeerd om het steeds weer
         .h and that I also just tried again and again to
470 K:
         .h >een beetje beter te maken<;
         .h >make it a little better<;
471 K: >dat het steeds weer beter ging.<
         >that it improved bit by bit<.
472 K:
       .h en dat ik uiteindelijk ook gewoon weer (.)
         .h and that eventually I am also just (.)
473 K:
         .h gewjoon kan doen.
         .h able to do normal things again.
474 I: ja.
         ves.
475 K: gewoon weer naar ((naam stad));
         just going to ((name town));
476 K: langs het bos;
        walking along the woods;
477 K: en- zonder lampje op mijn kamer,
        and- without the bedside lamp in my room,
478 I: ja,
         yes,
         (3.0)
479
         °hm°
480 I:
         °hm °
481
         (1.0)
482 I:
         oke;
         okay;
```

In response to this question, the child orients first to the fact that she also experienced 'it', which is then rephrased more matter-of-factly as also 'just' having experienced 'unpleasant things' (line 468). Note how both lexical choices ('it', 'unpleasant things') leave ambiguous whether the child would specifically mention the nature of what happened to her peer, which might suggest its delicate nature (here, and in similar ways in other instances in this interview; cf. Silverman & Peräkylä, 1990). In lines 469–470, the girl stresses her attempts at improvement as a continuous and steady effort on her behalf to strive for the better. After attending to how her efforts turned into actual improvements (line 471), she stresses her current situation: it is presented as the ultimate goal of having reached an unproblematic state of 'regained normality' ('that eventually I am also just able to do normal

things again', lines 472–473); or as being 'just the way she was'. What follows is a listed illustration that works as a set of evidential descriptions of 'resumed' activities that suggest a return to the normal and 'doing being ordinary' (lines 475–477). The interviewer produces an agreement token, and after a gap in which the child produces nothing further engages in closing work (line 482).

In Fragment 7 below, the interviewer has just asked the girl who was sexually assaulted (see also Fragment 1) whether her view of the world has changed, which the girl has disconfirmed (data not shown). The child is then invited to elaborate on a part of her answer. In lines 350–351, she formulates the gist of her answer in a minimal fashion ('pay a little more attention to it') and after a transition marker ('well', line 352) stresses its overall impact as non-consequential ('other than that it doesn't matter').

#### Fragment 7

```
k22 - 'I have to really stay alert'
350 K: dus (.) daardoor ga je toch n- iets meer der op letten.
         so (.) because of that you do s- pay a little more attention to
i +
351
         (.)
352 K: nou (.) en >verder maakt het nie uit<.
        well (.) and >other than that it doesn't matter<.
353 I: hmhm.
        hmhm.
354 I: .hh en hoe let je der op;
        .hh and how do you pay attention to it;
355 K: nou gewoon: (.) m- om te kijken,
        well just (.) m- to watch out,
356 K: ik moet wel heel goed oppassen;
        I have to really stay alert;
357 K: en niet iedereen zomaar gelo:ven,
        and not belief everybody just like that,
358 K: want-=
         because-=
359 I: =hmhm
         =hmhm
360 K: .h (1.0) mensen die je goed kent;
         .h (1.0) people you know well;
361 K: die <u>kun</u> je wel geloven,
you can believe them,
362 K: alleen mensen die je niet goed ke:nt,
        only people you don't know well,
363 K: die moet je <u>echt</u> niet geloven;
you should really not believe them; 364 K: moet je eerst \uparrowvra:gen,
        you should ask first,
365 I: ja;
         yes;
366
        (3)
367 I: °oke.°
         °okay.°
```

After a continuer, the interviewer asks a more generally worded followup question that related to the topic raised by the child ('and how do you pay attention to it', line 354), which demonstrates that she might not be sufficiently satisfied with the answer given. The follow-up question seeks an explicit elaboration of exactly how the child engages in her current behaviour. The child's response is prefaced with 'well' and 'just' (line 355) which marks the answer as not straightforward and possibly also hearable as a slight critique of the self-evident nature of the interviewer's question (Schegloff & Lerner, 2009). She continues by answering the how question with an account (as if it was a 'why' question), offering an explanation couched in verbs of necessity (lines 356-357) as well as constructing it as a generic explanation ('you should really not believe them; you should ask first', lines 360–364). The verbs of necessity ('must') and emphasis ('only', 'really', lines 362-363) construct her response as a set of normatively preferred lessons or directives (cf. Keevallik, 2011). The normativity not only suggests that the child has actively sought ways to prevent what happened from happening again but also attend to her current situation as 'doing being recovered'.

In this final section, it was demonstrated that children, when asked to elaborate on their current situation (Fragment 6), account for their behaviour in terms that are normatively preferred (Fragment 7). When asked how they would describe themselves to a peer, they present converting to the normal ('how things were before it happened') in a way that demonstrates recovery as something they were able to achieve.

## **Concluding Remarks**

This chapter has shown that eliciting children's perspectives on how they have experienced a traumatic occurrence and inviting them to do so *in their own words* may be met with some unforeseen challenges. Although the interviewing psychologist, faced with the difficult task of asking about sensitive issues, may want to provide some necessary leeway or guidance to the child for answering (i.e. introducing the experiences of other children in the question preface as something to 'latch on to' in the response), the children in our data show conversational strategies of resisting the

topical agenda and the presuppositions that underpin the psychologist's questions.

A close examination of our data enabled us to detail three sets of interrelated practices children engage in, when responding to the questions of the interviewing psychologist: they may present downgraded descriptions of what happened to them, they may discount assumptions that they have changed in a fundamental way as a result of the traumatic experience, and they may volunteer normatively preferred accounts of change to demonstrate 'doing being recovered'.

We examined these practices in three sections. In section "Presenting Downgraded Versions of What Happened", we showed how children, while able to provide detailed descriptions of what happened, subtly countered ascriptions of being different or strange. When responding to questions that inquire whether there are positive lessons to be drawn from what happened, children resist this topical agenda and offer a downplayed account that presents what happened as merely coincidental. The traumatic occurrence is thus constructed as belonging to the category of events that do not have the imprint that allow for such lessons to be learned. Secondly, in section "Discounting Ascriptions of a Changed Self" we demonstrated how children clearly recount the suggestion that the traumatic occurrence has caused them to change in any meaningful way. Interestingly, they continue these discounting practices even when the question of change is put to them on multiple occasions and formatted in ways that clearly seek a confirming response. It was shown how children may agree to minor changes in behaviour, retract their initial answers to demonstrate the absence of a more fundamental type of change, as well as emphasise 'sameness' and an essentially unchanged self. Lastly, section "Presenting Normatively Preferred Versions of 'Doing Being Recovered'" examined how children volunteer descriptive accounts of change, and when they do so they attend to offering normatively preferred, agentic scenarios of recovery which equal 'doing being recovered'. These scenarios worked to emphasise 'regained normality' and 'doing being recovered' as the current state of being. Taken together, these strategies show how children perform identity work around the notion of 'a changed self', which seems contingent upon whether account of change is volunteered (Fragment 6) or explicitly asked for.

Overall, this chapter has demonstrated the strategies children employ to subtly criticise and resist the trajectory of particular questions (most notably questions that inquire after personal change) as well as the presuppositional basis of other questions (i.e. constructing the children as 'odd' or different because of what happened, or the traumatic occurrence as an important occasion for learning lessons). The 'layered' structure of many of the questions that were asked in these interviews (i.e. formatted as prefaced questions or alternative questions and coupled by polar questions or how questions) seems to even increase their presuppositional basis. Rather than functioning as a helping, 'neutral' device that facilitates the broadest possible repertoire of answers from the child, these 'layered' questions are also often met with strategies of resistance. Hence, the setting of the psychological research interview, emphasising question formats that put special weight on 'change' and 'recovery', run the risk of 'offering up its own agendas and categories and getting those same agendas and categories back in a refined or filtered or inverted form' (Potter & Hepburn, 2005: 291). More importantly, when attempting to elicit the unique perspective of the child, these psychological interviews seem to offer little room to appreciate more fully the interactional concerns of the child, which we have shown to be clearly oriented to identity work and the moral implications that are embedded in the interviewer's question formats.

## **Professional Reflection**

Eva Alisic

#### **Abstract**

Although child traumatic stress is increasingly recognised as a public health concern, the perspectives of children who have been affected are still underrepresented and underutilised. A common example of impeding adult concerns is the belief that talking about trauma with children is 're-traumatising' them, even though this has been debunked in research.

The current reflection considers two main lessons learned from interviews with children who experienced trauma. First, children demonstrate agency through their nuanced and detailed accounts of experiences, including effective negations of suggestions by the interviewer. Second, while interviews are characterised by a lack of information (e.g. about our conversation partner and their expectations) and substantial cognitive load (e.g. formulating questions while listening and keeping track of interview objectives), there are enticing opportunities for testing and improving question formulation. Ongoing development in this domain can help ensure that children's voices are really understood, heard and acted upon.

Exposure to potentially traumatic events is unfortunately common among children and adolescents. By their 18th birthday, the majority of young people have been confronted with the loss of a loved one, a car crash, an assault or another type of trauma (Copeland, Keeler, Angold, & Costello, 2007). Although child traumatic stress is more and more often recognised as a major public health concern, the perspectives of children who have been affected are still underrepresented and underutilised. In a few areas, concerns about this lack of attention to children's views have been expressed explicitly. For example, Callaghan and colleagues work with children exposed to domestic violence and write that 'the failure to talk to children and young people about their lived experiences of domestic violence underestimates their capacity for agency' (2017: 3371). Moreover, they reiterate that 'adult concerns about young people's vulnerabilities and inability to safely reflect on their experiences can lead to institutionally imposed gatekeeping, resulting in silencing or tokenistic participation'.

A common example of impeding adult concerns is the widely held belief that talking about trauma with children is 're-traumatising' them, even though this has been debunked in research (see, e.g., Kassam-Adams & Newman, 2005). Of course, conversations about trauma need to be respectful (e.g. giving the interviewee time to settle into the interview; asking questions that are needed, not because they provide 'juicy' details that do not serve a purpose), and with referral options in case needs are identified, but in themselves they are not re-traumatising. The risk of not asking children about their perspectives is that prevention and intervention

efforts cannot be optimally adapted to children's needs. In contrast to prevailing adult concerns, children have a capacity for agency, which they showed in the current chapter as well.

## Children's Agency

The chapter contains two main lessons or insights for me. First, as mentioned, that children have and demonstrate agency. They showed that they were able to provide nuanced and detailed accounts of experiences. They also showed that they could effectively disagree or negate suggestions made by the interviewer (me). This is incredibly promising information, since this means that with careful listening and analysing of both the interview content and the interactional context, we will be able to harvest and better understand children's views. It also means that we are getting different responses and novel information compared to just going with what we think of something as adults. Children truly bring their own unique perspective. In other words, their contributions lead to different information compared to if we just 'made it up' as adults. This is important and reinforces the point above that we should support children in having a voice.

However, as Lundy (2007) indicates, having a voice in itself is not enough. In line with a children's rights perspective, children also need a genuine audience, space and influence. For us as researchers and practitioners, this means that there is a responsibility to ensure that children's perspectives reach further than just our own professional publications. In the case of the interviews included in this chapter, we have integrated children's perspectives in a toolkit for primary school teachers and in a book for both parents and professionals on supporting children after trauma. Some of the interviews we have taken further, to education opportunities and to policy makers. There is still ample room to do more in this respect.

## Improvements in Question Formulation

In terms of the second lesson, the chapter emphasises and highlights that there is still substantial scope for improvement in question formulation. It shows, in line with other CA research, that interviews can be analysed in a detailed manner, leading to fascinating insights in interview dynamics. While this work would be incredibly useful in my field of psychotraumatology, it is considered relatively infrequently, even though there are some very practical implications flowing from the analyses. An example in this chapter is the prefaced question with regard to the child experiencing positive aspects (or any potential experience, really). The question raised an expectation for an answer confirming experiencing something positive. It would be relatively easy to expand that question to also include the mention of children who did *not* experience change. Presenting both options before asking how it is for the child might give the child a much more 'neutral' starting position for their answer.

As the actual interviewer, I have some insight into the thoughts that went through my head during the interviews, something that is consciously not part of the analysis presented. My personal memory—as biased as it maybe—is that I did not necessarily mean to emphasise that children can experience positive change. Rather, I came from a slight feeling of awkwardness about asking a child who had clearly gone through a horrible experience, about positive consequences. By mentioning that some children had experienced positive things, I somehow aimed to defend myself from the potential criticism of asking such a naïve question that anything good could have come from that experience.

## **Dancing in the Dark During Interviews**

As interview partners, we are all still 'dancing in the dark' in these conversations. My intentions were not clear from my words, children might have interpreted my words in ways that differ from what I expected, and in the analyses, we interpret children's reactions in ways that may not be in line with their original intentions. While we—the child and I—are conducting the interview, this means that we are working (dancing) with limited information, about our conversation partner and about relevant circumstances outside of the interview. The same applies to limited information about each other's expectations of the interview. For example, children have ideas about what the interviewer wants to hear. I sometimes

suspected that children in our interviews felt they had to 'perform' and show that they had well understood the therapy they had received. Some thoughts that the children expressed (e.g. 'it could have happened to someone else', line 743, indicating that it was not personally targeted, that she was not to blame) might have been informed by therapy and repeated, to consciously or unconsciously live up to the presumed expectations of the interviewer (of note, some of the children had received therapy in the psychotrauma centre where the interviews took place, possibly even reinforcing this tendency).

Also, my impression is that things happen so quickly in an interview that children nor adults are fully aware or in charge of what they are doing. For example, as an interviewer, there is substantial cognitive load to do with thinking ahead, thinking back to what has already been said, formulating a question in the best possible way under the circumstances, listening in the moment, while linking answers to each other, thinking about potential gaps that need to be further explored, and checking whether everything is on track. The effects of this load can be multiple; they might affect the quality of listening, and therefore the response to information that children volunteered. They might also affect the formulation of questions: sometimes, I found myself thinking aloud in order to formulate a question. In itself, thinking aloud is sometimes taught as a technique in clinical psychology (it can have various useful functions in relationship building) and I sometimes employ it for that reason. However, my guess is that a part of it was also still working through the best way to word a question, despite the fact that my co-researchers and I had conducted mock interviews beforehand and held ongoing feedback sessions during the study. It may be of interest to conduct further analyses to assess how the formulation of questions evolves over a series of interviews with the same topic list. My expectation would be that questions become more 'fluent', and hopefully open, over time.

#### 'Good Questions'

Is a question only 'good' if a child agrees with it? Is a question by definition 'wrong' if a child disagrees? The fact that a child feels comfortable enough

to say no is possibly also a positive sign. This may not be the case in all interviews or conversations. Maybe exploring the boundaries of what a child agrees with involves seeking negative answers. In interviews such as in the current chapter, in which one is really interested in children's perspective, I can imagine that one can develop a specific protocol for the start of the interview that reinforces the child's capacity to disagree. For example, one or more questions can be designed to a lead to a disagreement by the child (e.g. asking a question about their clothes, referring to the wrong colour), followed by praise for the courage to disagree and a reinforcement that disagreement in the remainder of the interview is absolutely fine. Such a protocol could be tested and refined in research settings.

More generally, the types of question formulations discussed in the current chapter seem to lend themselves well to a more experimental setup, while not detracting from the value of the interviews in themselves. With more training and careful development, we could pre-formulate, for example, 3 different questions in 3 different ways and test these versions over a range of interviews. With the original set of interviews drawn from for the current chapter, we could have texted each of the formulations in 8 children. It would remain a semi-structured interview, but it would have a small number of set questions within it. This would allow to better understand the differences in interactions following the question formulation within the context of trauma recovery narratives.

Finally, a developmental lens seems of value in the context of (improving) the interviews. Would the same questions work with a 5-year old, and with a 15-year old? In our case, the interviews were with children aged 8–12 years old; in the first few years of primary school. Understanding of questions, and vocabulary to answer them and address complex emotional issues develop over time (see, e.g., Salmon & Bryant, 2002), and are likely to lead to different interview dynamics. Thinking of the prefaced design that was central in the current analyses, an even lengthier version as I proposed above, is likely to be difficult to follow for a younger child. Considering the importance of understanding children's perspectives, it is crucial that we better understand the dynamics, intricacies and boundaries of conversations such as clinical and research interviews, and adapt our practices over time to ensure that children's voices are really understood, heard and acted upon.

#### References

- Alisic, E., Boeije, H. R., Jongmans, M. J., & Kleber, R. J. (2011). Children's perspectives on dealing with traumatic events. *Journal of Loss and Trauma: International Perspectives on Stress & Coping, 16* (6), 477–496.
- American Psychiatric Association. (2000). *Diagnostic and statistical manual of mental disorders IV—Text revision*. Washington, DC: American Psychiatric Association.
- Beach, W. (1993). Transitional regularities for 'casual' "okay" usages. *Journal of Pragmatics*, 19(4), 325–352.
- Bergmann, J. R. (1998). Introduction: Morality in discourse. *Research on Language and Social Interaction*, 31(3–4), 279–294.
- Blakely, H., & Moles, K. (2016). Interviewing in the 'interview society': Making visible the biographical work of producing accounts for interviews. *Qualitative Research*, 17(2), 159–172.
- Boyd, E., & Heritage, J. (2006). Taking the history: Questioning during comprehensive history taking. In J. Heritage & D. Maynard (Eds.), *Communication in medical care: Interactions between primary care physicians and patients* (pp. 151–184). Cambridge, UK: Cambridge University Press.
- Buttny, R. (2003). Social accountability in communication. London, UK: Sage.
- Callaghan, J. E. M., Fellin, L. C., Mavrou, S., Alexander, J., & Sixsmith, J. (2017). The management of disclosure in children's accounts of domestic violence: Practices of telling and not telling. *Journal of Child and Family Studies*, 26 (12), 3370–3387.
- Childs, C., & Walsh, D. (2017). Self-disclosure and self-deprecating self-reference: Conversational practices of personalization in police interviews with children reporting alleged sexual offences. *Journal of Pragmatics*, 121, 188–201.
- Clark, J., & Richards, S. (2017). The cherished conceits of research with children: Does seeking the agentic voice of the child through participatory methods deliver what it promises? *Sociological Studies of Children and Youth, 22*(1), 127–147.
- Clift, R. (2001). Meaning in interaction: the Case of actually. *Language*, 77(2), 245–291. www.jstor.org/stable/3086775.
- Copeland, W. E., Keeler, G., Angold, A., & Costello, E. J. (2007). Traumatic events and posttraumatic stress in childhood. *Archives of General Psychiatry*, 64(5), 577–584.

- Cromdal, J., Danby, S., Emmison, M., Osvaldsson, K., & Cobb-Moore. (2017). "Basically it's the usual whole teen girl thing": Stage-of-life categories on a children and young people's helpline. *Symbolic Interaction*, 41(1), 25–44.
- Danby, S., & Baker, C. (1998). "What's the problem?" Restoring social order in the preschool classroom. In I. Hutchby & J. Moran-Ellis (Eds.), *Children and social competence: Arenas of action* (pp. 157–186). London, UK: Falmer Press.
- Freed, A., & Ehrlich, S. (Eds.). (2010). Why do you ask?: The function of questions in institutional discourse. Oxford, UK: Oxford University Press.
- Halkowski, T. (1998). Patients smoking counts: Implications of quantification practices. *Journal of General Internal Medicine*, 13(1), 107.
- Halkowski, T. (2006). Realizing the illness: Patients' narratives of symptom discovery. In P. Drew, M. Harness-Goodwin, J. Gumperz, & D. Schiffrin (Series Eds.) and J. Heritage & D. Maynard (Vol. Eds.), Communication in medical care: Interactions between primary care physicians and patients. Studies in Interactional Sociolinguistics (Vol. 20, pp. 86–114). Cambridge, UK: Cambridge University Press.
- Hepburn, A., & Bolden, G. (2013). The conversation analytic approach to transcription. In J. Sidnell & T. Stivers (Eds.), *The handbook of conversation analysis* (pp. 57–76). Oxford, UK: Wiley-Blackwell.
- Heritage, J. (2002). The limits of questioning: Negative interrogatives and hostile question content. *Pragmatics*, 34(10–11), 1427–1446.
- Heritage, J. (2010). Questioning in Medicine. In A. Freed & S. Ehrlich (Eds.), Why do you ask?: The function of questions in institutional discourse (pp. 42–68). Oxford, UK: Oxford University Press.
- Hutchby, I. (2005). Children's talk and social competence. *Children and Society,* 19(1), 66–73.
- Hutchby, I. (2007). *The discourse of child counselling: Impact studies in Language and Society*. Amsterdam: John Benjamins Publishing Company.
- Hutchby, I. (2015). Therapeutic vision: Eliciting talk about feelings in child counselling for family separation. In M. O'Reilly & J. N. Lester (Eds.), *The Palgrave Handbook of Child Mental Health: Discourse and Conversation Studies* (pp. 541–558). Basingstoke, UK: Palgrave Macmillan.
- Hutchby, I., & O'Reilly, M. (2010). Children's participation and the familial moral order in family therapy. *Discourse Studies*, 12(1), 49–64.
- Hutchby, I., & Wooffitt, R. (2008). *Conversation analysis* (2nd ed.). Oxford, UK: Blackwell.
- Iversen, C. (2014). 'I don't know if I should believe him': Knowledge and believability in interviews with children. *British Journal of Social Psychology, 53*(2), 367–386.

- Jefferson, G. (2004). "At first I thought": A normalizing device for extraordinary events. In G. Lerner (Eds.), *Conversation analysis: Studies from the first generation* (pp. 131–167). Amsterdam: Benjamins.
- Kassam-Adams, N., & Newman, E. (2005). Child and parent reactions to participation in clinical research. *General Hospital Psychiatry*, 27(1), 29–35.
- Keevallik, L. (2011). The terms of not knowing. In T. Stivers, L. Mondada, & J. Steensig (Eds.), *The morality of knowledge in conversation* (pp. 184–206). Cambridge, UK: Cambridge University Press.
- Kidwell, M. (2009). What happened?: An epistemics of before and after in "atthe-scene" police questioning. *Research on Language and Social Interaction*, 42(1), 20–41.
- Lamerichs, J. Alisic, E., & Schasfoort, M. (2015). 'You just have to be cheerful really': Children's accounts of ordinariness in trauma recovery talk. In M. O'Reilly & J. N. Lester (Eds.), *The Palgrave handbook of child mental health: Discourse and conversation studies* (pp. 618–635). Basingstoke, UK: Palgrave Macmillan.
- Lamerichs, J., Alisic, E., & Schasfoort, M. (2018). Accounts and their epistemic implications: How children's 'I don't know' answers are received in trauma recovery talk. *Research on Children and Social Interaction*, 2(1), 25–48.
- Lester, J. N. (2014). Negotiating abnormality/normality in therapy talk: A discursive psychology approach to the study of therapeutic interactions and children with autism. *Qualitative Psychology*, 1(2), 178–193.
- Lundy, L. (2007). 'Voice'is not enough: Conceptualising Article 12 of the United Nations Convention on the Rights of the Child. British Educational Research Journal, 33(6), 927–942.
- Mazeland, H. (2003). *Inleididng in de conversatie-analyse* [Introduction to conversation analysis]. Bussum, The Netherlands: Coutinho.
- Mazeland, H. (2016). The positionally sensitive workings of the Dutch particle 'nou'. In P. Auer & Y. Maschler (Eds.), *Nu/Nä: A family of discourse markers across the language of Europe and beyond* (pp. 377–408). Berlin and Boston: Walter de Gruyter.
- Noordegraaf, M., Van Nijnatten, C., & Elbers, E. (2009). Assessing candidates for adoptive parenthood: Institutional re-formulations of biographical notes. *Children and Youth Services Review, 31*(1), 89–96.
- O'Reilly, M., & Lester, J. (2015). *The Palgrave handbook of child mental health.* London, UK: Palgrave Macmillan.
- Pomerantz, A. (1984). Agreeing and disagreeing with assessments: Some features of preferred/dispreferred turn shapes. In J. M. Atkinson & J. Heritage (Eds.),

- Structures of social action (pp. 57-101). Cambridge: Cambridge University Press.
- Potter, J., & Hepburn, A. (2005). Qualitative interviews in psychology: Problems and possibilities. *Qualitative Research in Psychology, 2*(4), 281–307.
- Sacks, H. (1984). On doing "being ordinary". In J. M. Atkinson & J. Heritage (Eds.), *Structures of social action: Studies in conversation analysis* (pp. 413–429). Cambridge, UK: Cambridge University Press.
- Salmon, K., & Bryant, R. A. (2002). Posttraumatic stress disorder in children: The influence of developmental factors. *Clinical Psychological Review*, 22(2), 163–188.
- Schegloff, E., & Lerner, G. (2009). Beginning to respond: Well-prefaced responses to wh-questions. *Research on Language and Social Interaction*, 42(2), 91–115.
- Silverman, D. (2017). How was it for you? The Interview Society and the irresistible rise of the (poorly analysed) interview. *Qualitative Research*, 17(2), 144–158.
- Silverman, D., & Peräkylä, A. (1990). AIDS-counselling: The interactional organization of talk about 'delicate' issues. *Sociology of Health and Illness, 12*(3), 293–318.
- Stafford, V., Hutchby, I., Karim, I., & O'Reilly, M. (2016). "Why are you here?" Seeking children's accounts of their presentation to Child and Adolescent Mental Health Service (CAMHS). *Clinical Child Psychology and Psychiatry*, 2(1), 3–18.
- Terr, L. (1990). Too scared to cry. New York: Harper and Row.
- Urman, M. L., Funk, J. B., & Elliot, R. (2001). Children's experiences of traumatic events: The negotiation of normalcy and difference. *Clinical Child Psychology and Psychiatry*, 6(3), 403–424.
- van Nijnatten, C. (2013). Downgrading as a counterstrategy: A case study in child welfare. *Child and Family Social Work, 18*(2), 139–148.
- Van Wesel, F., Boeije, H., Alisic, E., & Drost, S. (2012). I'll be working my way back: A qualitative synthesis on the trauma experience of children. *Psychological Trauma: Research, Practice and Policy, 4*(5), 516–526.