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## Configuring the caller in ambiguous encounters: Volunteer handling of calls to Samaritans emotional support services

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### Abstract

*This paper discusses volunteer strategies for handling and assessing calls to Samaritans emotional support services for the suicidal and despairing. It presents findings from the qualitative components of a two-year mixed methods study based on an online caller survey, branch observations and interviews with volunteers and callers throughout the UK. A thematic analysis of the qualitative data analysis was undertaken using the principle of constant comparison. Many calls fell beyond the primary remit of a crisis service, and called for rapid attribution and assessment. Uncertainty about identifying 'good' calls and recognizing those which were not caused difficulty, frustration and negative attribution towards some callers. This paper presents our analysis of volunteers' accounts of how they configure the caller in intrinsically uncertain and ambiguous encounters, and how such strategies relate to the formal principles of unconditional support and non-judgemental active listening espoused by the organization.*

*Keywords: active listening; helplines; negative attribution; Samaritans; self-protection; suicide; volunteering*

### 1. Introduction

Samaritans is a volunteer-based charity established in the UK in 1953 as a crisis support service for the despairing and suicidal (Varah 1988; Armson 1997). In 2011, 15,516 volunteers in 202 branches throughout the UK responded to 2,868,899 dialogue<sup>1</sup>contacts from callers (Samaritans 2012). The majority (83%) of

dialogue contacts are by phone, but email and SMS text messages are increasing and callers may also make contact by letter or by visiting a branch. Volunteers aim to provide a confidential, anonymous, non-directive, active listening service which offers callers the opportunity to reflectively explore their feelings of emotional distress and so, ideally, gain insight into how they may start to address their difficulties and 'move on' in their lives. Samaritans hope that their emotional support will help callers to identify options other than suicide, and a core aim of the service is to work towards a reduction in deaths by suicide.

However, another key principle is respect for self-determination. Only the caller has the authority and responsibility to make decisions about his own life, including the judgement that his best interests are to end it. Unlike many suicide crisis helplines (de Anda and Smith 1993; Mishara 1997; King *et al.* 2003; Barber *et al.* 2004; Kalafat *et al.* 2007; Ingram *et al.* 2008), Samaritans will not advise or actively intervene to deflect a caller who declares intent to die by suicide. Volunteers aim to offer the caller unconditional, non-judgemental acceptance and support. However, the caller remains in charge of his/her life, both in defining the nature of their problems, and taking responsibility for decisions about how best to deal with these (Nelson and Armson 2004; Samaritans 2009).

In view of the anonymous and confidential nature of the service the information available to Samaritans about individual callers is very limited. National statistics are compiled annually from the call logs made by branch volunteers. These include a record of call duration, the caller's sex, age if known, brief record of the reason given for the call, and the volunteer's subjective assessment of where the caller is located on a seven point scale of emotional distress (Samaritans 2012). It is organizational policy that all contacts should include a question about whether the caller



has suicidal thoughts and feelings. Records suggest that this issue is raised in approximately two thirds of calls (Samaritans 2004). Samaritans summary data indicate both a general stability in trends over time, and also that callers contact Samaritans for a wide range of reasons. In 2012, overall, 21% of callers were reported to express suicidal feelings. Of these, 3.9% were reported as having a suicide plan, and 0.6% as being in the process of suicide when they called (Samaritans 2012). The majority (55.7%) were judged to be 'distressed' (but not suicidal). A further 20.8% were recorded as being in some way inappropriate or abusive.

Leaving aside the difficulty and accuracy of assessing the volunteers' subjective judgements on the basis of calls which are frequently of no more than a few minutes duration (Fairbairn 1995; Fairbairn 1998; Appleby *et al.* 1999; Cooper and Kapur 2004; Samaritans, 2004; Freedenthal 2007; Freedenthal 2008; Lakeman and FitzGerald 2008), it is clear that the majority of contacts to Samaritans fall outside the formal service remit: most callers are not assessed to be in a state of crisis when they contact the organization. Data from previous analysis of calls undertaken within Samaritans correspond with findings in the literature relating to both Samaritans and other suicide crisis helplines in reporting a substantial proportion of calls to be from frequent and repeat (rather than new) callers, especially women, and those with psychiatric illness (Holding 1974; de Anda and Smith 1993; Hall and Schlosar 1995; Mishara 1997; Samaritans 2004; Watson *et al.* 2006; Fakhoury 2007; Ingram *et al.* 2008). Previous studies report that the majority of callers are seeking general social support when they contact suicide crisis lines, including Samaritans, rather than help in dealing with an acute crisis (de Anda and Smith 1993; Hall and Schlosar 1995; Samaritans 2004; Watson *et al.* 2006). Data also indicate that the number of abusive and sexually inappropriate calls may be substantially higher than is indicated in the national annual statistics (Hall and Schlosar 1995; Samaritans 2004). This discrepancy points to the difficulty of establishing an evidence base for calls based on the judgement and subjective assessment of volunteers, especially given the anonymous nature of Samaritans' service and (usually) disembodied contact between caller and volunteer. However, it appears clear that a substantial discrepancy exists between the intended nature of service provided by Samaritans and the patterns of use and associated demands made by callers. The resulting dilemma is how to reconcile the Samaritans' mission of being universally open and available to all with the pragmatic need to protect

the organization and its volunteers from the limitless demands of what are judged to be inappropriate and chronic callers (Hall and Schlosar 1995). This paper presents our analysis of volunteers' accounts of how they configure the caller in intrinsically uncertain and ambiguous encounters and how such strategies relate to the formal principles of unconditional support and non-judgemental active listening espoused by the organization.

## 2. Methods and data

The qualitative findings on which this paper is based are drawn from a substantial mixed methods study of Samaritans emotional support services (Coveney *et al.* 2012; Pollock *et al.* 2010). Data were collected between March 2008 and May 2009. The study included over 200 hours of observation (covering all weekdays and shifts) of Samaritans' activities and branches across the UK and qualitative interviews with 66 volunteers. The nine case study branches were self-selecting in initially responding to the invitation to take part in the study. However, the sample of branches achieved diversity in terms of size (small, large), location (rural, urban) and spread across the UK. Volunteer participants were also self-selecting. Details of the study were available via a range of media, but chiefly through a project website (linked to Samaritans and other organizations) and, for the volunteers, from information about the study circulated within Samaritans. Volunteers were recruited either directly during branch visits or following their response to invitations to take part in materials promoting the study. Volunteer interview respondents were drawn from branches across the UK, as well as those in which the observations took place. Most volunteer interviews were carried out either face to face (during branch visits) or by telephone; two were completed by email.

Extracts from the researchers' branch observation notes and from transcripts of volunteer interviews are presented below. To maintain caller confidentiality the researchers did not listen in to calls. Volunteer extracts are followed by an identifying tag number beginning with V, e.g. V229. Pseudonyms have replaced references to caller or volunteer names occurring throughout the extracts. Excerpts are offered as examples of themes emergent from the data. The qualitative software programme NVivo 8 was used to facilitate management and coding of the qualitative data. A thematic analysis was undertaken using the principle of constant comparison. All data were coded by at

least two members of the research team to promote inter-rater reliability, and refined through collaborative discussion involving all authors. Further details about the study methodology are available (Pollock *et al.* 2010).

### 3. Findings

This paper reports on three central themes from the thematic analysis of the volunteer interviews and branch observations: (1) how volunteers categorized calls and configured the caller in intrinsically ambiguous and anonymous encounters; (2) volunteer strategies of self-protection from abusive and manipulative calls; and (3) how these strategies of categorization and self-protection resulted in the judging of calls and callers. The discussion draws our findings together to comment on some consequences of these strategies for handling and assessing calls which conflict with the unconditional acceptance and principles of active listening formally offered by Samaritans.

#### 3.1. Categorizing calls and configuring callers

Overall, the study data are similar to Samaritans' previous reports and those of other suicide helpline studies in finding that the majority of calls were from regular callers, many of whom reported psychiatric illness. Most calls were not from people reporting extreme distress or suicidal ideation. Observation and interview data indicated that the proportion of inappropriate and abusive calls was considerably higher than in the annual summary statistics compiled from the call logs. Indeed, the frequency of such calls was a recurring topic of discussion and frustration among the branch volunteers.

*Oh well, I mean, sometimes. I would be a liar if I said I hadn't felt really, really, really, really, really, what's the word? – negative, about some of the calls we've had and we get.*  
V229

*Well, I mean, you get TM [telephone masturbation] calls. That's part of life. And you get very, very persistent ones. There's one we have in particular, I've had him three times in one night. ....And there's lots of that about.*  
V214

Local and national mechanisms were in place to restrict or deny access to abusive or overly demanding callers but these were difficult to implement

successfully. With around 80 volunteers working in the average branch it was easy for callers to avoid recognition. Regular or restricted callers may call different branches, may adopt different personae and stories in an effort to escape detection or may simply hang up if they recognize the volunteer who answers the call.

In addition to the blatantly manipulative or abusive calls, many contacts were from people who were lonely, anxious or unhappy rather than acutely despairing or suicidal. Volunteers varied in their perspectives about the appropriateness or legitimacy of such calls.

*Yeah. Tricky, isn't it, because we're not here to provide a service for people that are lonely, and sometimes it can feel that that's the case. Especially if someone's been phoning for ages. It's frustrating. But, at the same time, you feel sorry for these people who are phoning just because they're lonely... It's a very tricky situation, I think, very difficult subject.*  
V209

*To be quite honest, we cannot be on the line, phone with them all day, just because they're scared of being alone.*  
V263

Volunteers operated with a clearly articulated ideal and commitment to 'the good call', even if this was empirically rare. The good call involved a caller in great difficulty or despair, if not actively suicidal, in which the volunteer judged the interaction to have made a significant difference in terms of how the caller was feeling, and to have helped the caller to 'move on' through gaining insight into their current situation and how best to deal with it.

*Yeah. I had a caller on Monday. It was jolly good..... And what is good? Well, the call concentrated on her, she was able to talk through the situation, we were able to talk through her options for the future, and kept it focused on her feelings and I think I built a good rapport with her.*  
V219

*I remember a young man phoning, he was about twenty....he was going to take his life, and he was talking about it and we were on the phone over an hour and he said he was tired. 'Can I get someone to call you back in the morning?', and he said 'Yes.' So, from being suicidal, he said yes to a follow up, and he gave me his number. That meant he intended to be there in the morning. So that was good.*  
V263

The range of calls, and the dubious and ambiguous nature of many of these, necessitated classification and ascription. Notwithstanding the commitment to offer unconditional and non-judgemental acceptance of callers and their problems, the volunteers were called upon to make a rapid assessment of each call and caller: were they 'genuine', abusive, manipulative, lonely, despairing, suicidal, mentally ill, time wasting, new, regular, subject to restricted access or even banned from using the service altogether? The volunteers were tuned always both to doubt and uncertainty as well as receptivity to the needs of the eagerly anticipated 'good' or 'genuine' contact. Respondents described their strategies for configuring each call and the cues they employed to help them do this.

*The caller gives you quite a good indication from the start what it is. If they ask you what branch it is, that implies that they've called before and they know the system. In which case they might have a care plan or they might be someone who's used to using the Samaritans for negative or positive purposes, whatever. But they know the system.* V220

*I've probably got questions now that would enable me to at least suspect that this might not be altogether right. Sometimes, I mean, part of her story... was that you couldn't imagine anything sort of more dreadful. It was one thing piled on another. And I think, now, I would think, 'Really?' then, of course, you've got to be careful, because it might be absolutely true.* V214

This last extract illustrates the volunteer's dilemma: how to negotiate the risk of misjudging the 'genuine' or 'good' call alongside an awareness that many calls may involve manipulation and deception.

*I've developed one or two personal attitudes through experience. One is a 95% rule for the inescapable tendency we all have to try and gauge the call. If it's obviously a 'bad' call – inappropriate, just chatting, etc., try to hold back a 5% 'margin' against the possibility that beneath/behind what comes out is a 'real' call. Or, if the caller's story is totally believable and demanding of sympathy, try to keep the same very narrow credibility margin, in case of the later emergence of a different 'truth'. It's nothing to do with how the caller is treated, it's a bit of self-protection to how you feel.* V228

*Yes, and the dilemma, I suppose, partly because you realize when you put the phone down, after*

*a quarter of an hour (laughs) and it suddenly becomes clear what this was. And you feel annoyed with yourself for having been strung along like that. But, if you don't give the benefit of the doubt and allow yourself to, you know, that to happen to you, then in some instances a genuine caller would have been put off because they don't, I meant they're sometimes, you think this is going to turn out to be a sex call, and it isn't.* V211

Even the 'good' call may be far from what it might, at first, appear. And, sometimes, an apparently 'bad' call may turn out to be genuine. Chattiness might indicate that a caller was lonely or bored and wanted someone to talk to or it could mask underlying distress which the caller needed time and encouragement to disclose. Apparently genuine and even desperate calls might turn out to be abusive and manipulative. Callers could be subtle in their approaches and the nature and purpose of the call may not be uncovered until a considerable way into the call or afterwards – perhaps, even, not at all. Especially in the case of infrequent or one-off contacts, volunteers rarely obtained feedback about the outcome of a call, or knowledge of what happened to the caller subsequently. In some cases, however, the 'real' nature of an apparently desperate or suicidal call would become apparent, perhaps when the caller phoned again with a similar account, or when the volunteer was alerted by colleagues to their known profile and identity.

*I remember one particular bad call which did upset me. I remember talking about it to another Samaritan, a few weeks later, who said, 'Oh, I've had him. He just winds people up.' It's like, 'ourgh!'... You think, 'Well, is it true, or isn't it?' You don't really know, because a call can seem so genuine, but...* V261

*I find sex calls much less of a problem than people who, I had one man who was very, very convincing...and it was extremely scary. And that I found more damaging to me...that was very manipulative. And, after a while, ...there was another very experienced Sam helping me say stuff and then eventually someone recognized, he said something that rang a bell and it was an End on Recognition.<sup>2</sup> And I found that more...you know, that I find more upsetting than the sex calls. Realizing that I'd been played like I'm a puppet. That is more upsetting.* V220

Volunteers were understandably reluctant to think they were being deceived and were also cautious about misjudging a genuine call. Where any element of uncertainty obtained, the caller would normally be taken at face value and awarded the benefit of the doubt *in the call*. In consequence, however, the volunteers were not only at risk of being duped but also of having to *collude* with the caller's act of deception. Volunteers thus occupied a difficult and uncomfortable position, with all the attendant and negative consequences this entails for their moral identity and self-esteem. Abusive calls were violating and often bitterly resented. In each call, the volunteer's judgement and integrity was on the line, and yet they had little recourse to in-line strategies of distancing and self-protection. Some volunteers managed to deal with this more easily than others ('I don't mind being had') in the interests of making themselves always available to support the genuine or 'good' call, even if, empirically, these were rare. Others were less sanguine. Frustration and irritation over the bad/inappropriate calls was a frequent topic in interviews and in discussion with and between branch volunteers. It was regularly attributed as a cause of volunteers leaving the organization – though we have no data to indicate the extent to which this may have been the case. Notwithstanding the formal requirement to abstain from judgement, it is not surprising that volunteers adopted strategies of detection and self-protection against abuse and manipulation.

### 3.2. *Strategies of self protection*

The consequences of misjudging a call could be serious if a caller who was in fact genuine met rebuff. Consequently, volunteers were reluctant to issue a direct challenge in a call unless they were confident they knew the caller or that they were dealing with a blatantly abusive or inappropriate contact. Several more indirect cues or devices were used to ascertain the status and purpose of the caller. If the volunteer recognized the caller, as was quite commonly the case, and particularly if they alluded to this ('I think we've spoken before...') then this served to cue the caller to the fact that their identity was known and their credibility consequently in question. Callers starting the call with an indication such as 'I've got a problem...' were immediately suspect, as were those who asked the volunteer to reveal their name. Volunteers would also attempt to refocus the call on talk about feelings, and refuse to continue the call if the caller was unable or unwilling to comply. Although this was technically justifiable on the grounds that the caller would

otherwise be unable to benefit from the emotional support offered by the volunteer, it also served as a device to flush out those who were disingenuous or manipulative. More direct approaches included asking the caller why they had called today, or how they thought Samaritans could help. Asking directly about suicidal feelings was another strategy thought to be effective in closing down a dubious call, while encouraging the genuine caller to disclose their suicidal thoughts and feelings.

*When Y comes off the phone she describes it as a well-disguised sex call... Y thought it was a genuine call and then felt the caller was trying to get her to talk about underwear, etc. She tried to guide the caller to talk about feelings but ends up ending it as a sex call. She seems fed up/tired of these calls already, and says she hates being tricked.*  
Branch observation notes

*F tells me that she thinks she recognized this caller – not a dodgy caller, necessarily, but an existing caller is always a bit suspect, and the challenge, 'I think we've spoken before' is often an effective way of ending a call. However, when F goes to check the call log she cannot find any earlier record relating to this caller. She reflects that she now regrets being a bit hasty with this caller. Perhaps she made a mistake in rushing to conclusions too early.*  
Branch observation notes

Volunteers were enjoined to maintain a boundary between 'accompanying' the caller, but not joining them in the call. This was a means of maintaining focus on the caller, but also served as a barrier to protect the volunteers, who should never disclose personal details or answer direct questions about themselves. In this way, the caller could not engage directly with the volunteer as a *person*.

*That's very dangerous, to share that with the caller, because they then think you're their friend, and a friend you're not.*  
V263

*I don't feel that either the sex callers or aggressive callers are aiming anything at me because they don't know me.*  
V205

Some volunteers gave their names to callers. Others distanced themselves by using a pseudonym either routinely, or only when they suspected that the call might be abusive or not genuine. Indeed, for the observer, an immediate cue to the suspect status of a call was when the volunteer was heard to use their

pseudonym. Depending also on their comfort with and assessment of the call, volunteers may also switch between the personal 'I' and the corporate 'we'.

*I sometimes find it hard not to disclose personal stories or details if asked directly, so I try to use a different name and develop a different persona when I'm on the phone.* V215

*Mary [volunteer] commented that you only had to sit through a few sex calls, with the caller going 'Oh, Mary! Mary!' to become quite sure that you did not want to share your name in such contexts.* Branch observation notes

Volunteers accepted the principles of active listening espoused by Samaritans and broadly welcomed the rules and boundaries imposed in calls which follow from these. However, some respondents also described the interactional discomfort which could result from the restrictions imposed on 'being oneself'.

*We're not supposed to give anything back about ourselves and I think that's quite hard sometimes when you're trying to build rapport. You've not got to give back.* V261

*Just last night, a call from one of our very regular callers....I try really hard, it's really hard to keep that professional person, but she wants to relate to you as if you're her friend and you're not and so you just don't know how hard to push it half the time.* V402

Callers also reported dissonance and sometimes felt rebuffed on being confronted with the impersonality of volunteer responses when they were anxious to assess their trustworthiness and establish a rapport (Pollock *et al.* 2010). Although the proscription on self-disclosure served to protect and distance the volunteers from suspect calls, it could also have the effect of inhibiting and alienating callers. One of the criticisms voiced, especially by respondents in the online survey and email responses, concerned the impersonal, formulaic, scripted and 'robotic' nature of some volunteer responses (Pollock *et al.* 2010).

### 3.3. Judging calls and callers

Within the organizational precepts of Samaritans, the role of the volunteer involves accepting the caller unconditionally and non-judgementally. 'Active

listening' provides a non-directive space for the caller to present and define his problem in his own terms, and to explore his options in responding to these. In practice, however, the nature of many of the calls received by Samaritans deviates substantially from those the service was set up to deal with. In consequence, it could be difficult for volunteers to adhere to the principles of active listening.

*...try our best, never to take it lightly, even when it's somebody who you know tries it on. And that can be quite tricky. I mean, I think, we're all human and when somebody's cried wolf so many times about being on the brink, it is very difficult to take that phone call from them and go through it all again about do they need help, do you need an ambulance, when you know full well they're going to hang up any minute.* V229

*You can put people into pigeon holes. I know you shouldn't do that but like, it's usually women, young girls or women in their thirties, forties, that feel the world owes them a living but they don't do anything to help themselves... You know, and it's difficult to deal with people like that because you know which way they're going but you can't come out and say, 'Well, pull yourself together!' [laughs] You know, they're not a pair of curtains.* V213

*I like to think I don't. But I think there maybe have been times when I perhaps, you know, not been as non-judgmental as I should have been. But, you know, I just think, well, you know, we're all human and I do my best.* V243

The impulse to protect the self and the organization from abusive and inappropriate demands resulted in a perverse dynamic in which callers were frequently subjected to judgement, appraisal and even disapproval.

*We have some callers who uh, ... thinking of one in particular, ha, but there are quite a few, well not quite a few but there are some uhm, they uh – I'm not being completely non-judgmental here – absolutely obnoxious.* V218

*And whether, sometimes, the caller is genuinely in need of help or is abusing the system or whatever and it's very, ... it's difficult to remain un-judgmental after an entire afternoon or evening of people who you feel are abusing the service and obviously, they need some help, you know, but it's not necessarily one that the Samaritans can give.* V220

*Some of the really cynical ones, they keep you right on the edge and sometimes letting you cross over so they get whatever gratification it is they're trying to exploit and, you know, I might be a cynical bastard at times but I think we're being too nice. B402*

The assignment of negative attribution towards some callers was also apparent in the naturalistic setting of the branch observations, when volunteers would discuss calls and their responses to them after the caller had rung off.

*Return to the room. M [volunteer] is on a call to someone called P who has taken a lot of pills. M said after that she smells a rat! He wanted to talk about spirituality and that he wants to die, but M is not sure how genuine he was.*

*Branch observation notes*

*B [volunteer] is still on the phone to D, but meanwhile N [volunteer] is getting annoyed and tells me D is a nuisance and a time-waster and should be banned.*

*Branch observation notes*

*Immediately she comes off this call, M exclaims 'Stupid man! What a load of rubbish!' – he had been inconsistent and confusing, and she felt he lacked credibility and was willing to challenge him as result.*

*Branch observation notes*

Some volunteers differentiated between the commitment to being open-minded during a call, which they tried hard to maintain, and the natural tendency towards making judgements later, in discussion with other volunteers. Indeed, there was a recognition that being able to 'sound off' after annoying or inappropriate calls was an important mechanism for dealing with frustration and fostering solidarity between volunteers.

*I often tell people it's utterly untrue that we don't make judgement. It's merely that when you're the volunteer on the phone you don't make a judgement. B3 V207*

*The sex calls. I don't know, maybe I laugh it off more, you know. And there is a certain gallows humour amongst the Sams, V220*

Volunteers were called upon to field a great diversity of calls. These included many that clearly fell outside the remit of Samaritans, were inappropriate, abusive and ambiguous. It is not surprising that strategies of assessment and self-protection should be called in to

play. However, these strategies placed considerable tension on the volunteers' capacity to offer unconditional acceptance and support and undermined the status and integrity of the caller as a person in genuine need.

#### 4. Discussion and conclusion

Our aim has been to report on the ways in which Samaritan volunteers configure the callers they support while balancing the tasks of protecting their personal integrity with offering unconditional support and non-judgemental listening. Volunteers reported approaching calls with a degree of caution which could aid in self-protection, while at the same time maintaining an openness to the possibility that even the most troubling and remarkable calls may be genuine in nature. Samaritans' mission to support the despairing and the suicidal presents its volunteers with a challenging task. Nevertheless, the volunteers we spoke to were highly committed to their role, and confident in their capacity to handle even the most exigent calls from people in great despair, including those reporting active engagement in suicidal acts. The majority of callers were positive in their overall assessment of the service, and felt their contact with Samaritans was helpful (Coveney *et al.* 2012; Pollock *et al.* 2010). It was evident, however, from both observations and interviews that most calls were not from people considered to be experiencing crisis and did not fit within the organization's primary remit. A substantial number were inappropriate. These included calls with blatantly abusive, manipulative and sexually inappropriate content. Many calls were harder to classify, depending on where the boundaries of legitimate 'need' were drawn. Volunteers varied widely in their attitudes, and tolerance, to the many calls from people with mental illness, general anxiety, unhappiness, loneliness and social disconnection. They were also well aware that calls sometimes concealed an ulterior motive or agenda, and came from callers who were deceitful, manipulative and disingenuous. These were considered the most difficult and personally challenging to deal with, and could be bitterly resented. The volunteer's task was to configure the caller accurately so that the emotional support service could be delivered effectively and appropriately, while protecting themselves and the organization from inappropriate demands and outright abuse.

Given the anonymous, disembodied nature of contact between volunteers and callers, uncertainty and ambiguity were intrinsic. Volunteers were well



aware that the accounts of callers should not always be taken at face value, but it could be extremely difficult to differentiate 'genuine' from the fake, fantasy or wind up call. The volunteers were always on the alert for the 'genuine' and particularly the suicidal caller and, at the other end of the spectrum, the inappropriate and particularly the abusive, manipulative and 'TM' (Telephone Masturbation) caller. It might take some time for the true nature of the call to become apparent, during which the volunteer had been obliged to take it in good faith, and some calls remained ambiguous. The consequences of misjudging a 'genuine' call were worse than failing to expose one that was not. At the same time, the subsequent realization that one had been duped was extremely unpleasant and directly threatened the volunteer's personal integrity and self-esteem. In these circumstances it is understandable that volunteers should draw on a range of self-protective strategies to distance themselves from the caller and the violation resulting from abusive and manipulative calls.

The principle of volunteer non-disclosure, while justified as a means of keeping a call focused on the caller, serves also as a means of distancing the caller and placing them in a subordinate position in relation to the interactional dynamics of the call. In the moral economy of exchange relations in a culture which strongly valorizes personal competence and autonomy, help-giving is superior to help-taking (Gartner and Reissman 1977; Liang *et al.* 2001). Non-disclosure avoids personal engagement and limits the volunteer's responsibility in the call. It also protects the volunteer from the violation involved with sharing the self with strangers, especially when these might be persons of dubious character and integrity. Emotions are moral issues (Bar-Lev 2008) and a more equal exchange of self would risk a greater awareness of betrayal and loss of face in the event that the call is assessed to be in some way fake and the volunteer exposed as a dupe. However, while the persona of the volunteer remains inscrutable, the caller is encouraged to divulge intimate and sensitive details of their life and emotional state. This is a risky behaviour exposing the caller's vulnerability (Vogel and Wester 2003). This asymmetry underlines the subordinate status of the caller and the nature of their spoiled identity (Goffman 1968). This is characteristic of the conventional professional-patient roles embedded in the bureaucratic format of a professional consultation (Strong 1979). Some volunteers experienced a tension between the principle of non-disclosure and building rapport with callers. Similarly, some callers expressed dissatisfaction with what they experienced

as the impersonality of volunteer responses, variously described as 'robotic', 'scripted' and 'formulaic' (Pollock *et al.* 2010). Non-disclosure could be experienced by the caller as a rebuff, inhibiting the development of the trust and confidence they sought before committing to the disclosure of sensitive and personal details of themselves.

This marks a signal difference between the emotional support offered by Samaritans and the model of peer support which characterizes the rapidly expanding genre of online chat lines and support groups. Bar-Lev observes that 'online sociality' is famous for its 'abundant focus on emotion' (2008:518). Online intimacy, even in anonymous, disembodied and brief encounters, is established through interpersonal equality and trust forged through self-disclosure, with stories and personal details being exchanged as gifts within a mutually obligated moral community (Bar-Lev 2008; Smithson *et al.* 2011). Self-disclosure by the volunteer or helpline counsellor is generally proscribed by helplines, as a means of retaining focus on the caller and maintaining a clear boundary between the caller and the helper. However, Mishara *et al.* found that helpers' sharing of their personal experiences could be helpful to callers and was associated with positive outcomes. Such self-disclosure could be used to demonstrate an understanding of the caller's situation and perhaps to compensate for the anonymous and disembodied nature of helpline contact (Mishara *et al.* 2007). The non-directive, asymmetrical exchange relations of Samaritans' model of emotional support does not draw callers into a relationship of obligation or the commitment to an 'emotional ethic' or moral code (Bar-Lev 2008; Bar-Lev 2010). Callers shoulder the burden of responsibility for their decisions. The call provides space and freedom for these to be considered. But the call is, or should be, always centred on the caller: they have no contract or obligation to the volunteer, and consequently, no relationship either. While this could be the mode of contact preferred by many of those who use the service, it may be that the lack of commitment available to the Samaritans caller enables, if it does not actively encourage, the amoral and abusive nature of some calls.

Barber *et al.* (2004) observe that the effectiveness of any service depends on how closely it targets the needs and demographic profile of its clients. The study findings suggest that much of the tension between volunteers and callers arises from the substantial mismatch between the aims of Samaritans, and the service it wants to provide, and the nature of its clientele, and the needs they wish the service to

address (Norris 1979; Hall and Schlosar 1995). From the outset Samaritans has tried to exclude those who abuse, or who are deemed unable to benefit from, its service. But the criteria for exclusion are variable and often uncertain, as are judgements about individual callers. Many callers in this study claimed to benefit from using the service in ways other than were intended, e.g. as an ongoing resource in coping with chronically difficult and unhappy lives, rather than a source of short-term support for those in crisis (Hall and Schlosar 1995; Mishara 1997; Pollock *et al.* 2010).

There was a world of difference between the rather idealized abstraction of the (empirically rare) 'good call' and the 'suicidal caller' and the more mundane and humdrum reality of the calls which made up the stuff of the volunteers' routine work. Given this discrepancy, and in view of the intrinsic ambiguity of their contact with callers, it was difficult for volunteers to sidestep the tendency to develop expectations of calls in terms of some degree of typification and stereotyping of callers as: lonely, mentally ill, abusive, sexually demanding, manipulative, fantasy, dependent, chatty, and so on. This could be a particular issue in dealing with regular callers in relation to the issue of dependency. Despite the injunction to refrain from making judgements about callers in assessing the nature of the call, and in order to figure out how to respond, volunteers routinely found themselves allocating calls and callers to specific categories, however professional they might endeavour to be within the call itself. In a much earlier study of Samaritans, Norris (1979) reports similar responses. This suggests that making judgemental and negative comments about callers may be an enduring characteristic of Samaritans volunteers. It also reflects a tension between the aims and aspirations of the service and the reality of the routine work undertaken by the volunteers. This gave rise to strategies for handling and assessing calls which came in conflict with the unconditional acceptance and principles of active listening formally offered by the organization.

## Notes

1. A dialogue contact is one where volunteer and caller establish some kind of direct interaction, albeit briefly. Nearly half of all telephone phone contacts (47.4%: 2,151,107) are 'snap' calls, of a few seconds duration, where no communication occurs (Samaritans 2012).
2. 'End on Recognition' tags are applied in extreme cases to calls from callers who have an established history of inappropriate or abusive use of the service.

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