Emotion labor at 911: A case study and theoretical critique

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Emotion Labor at 911: A Case Study and Theoretical Critique

Sarah J. Tracy and Karen Tracy

ABSTRACT  This study of 911 call-takers describes the different ways human feeling is understood, expressed and managed in the emotionally-charged atmosphere of an emergency 911 communications center. After reviewing past work on emotion labor and organizational burnout, we describe the data, qualitative methods, and the role of call-takers at Citywest Emergency Center. The heart of the paper is a description of the emotional landscape at 911, the organization's emotion rules, and the communicative devices call-takers use to manage their emotion. Based upon this 911 case, we critique several assumptions made in past emotion labor and organizational burnout studies. The paper concludes with implications for emergency communications call-taking.

Currently we have surprisingly little insight into real-time feelings and emotions as they unfold, interact, form and reform. We might expect a blend of flow-type experiences, private feelings and emotional performances as organizational life procedes. Such basic, and engaging, descriptive data are missing in the haste to redefine and isolate specific emotions in advance of a study. . . . The foundational role of such research cannot be over-emphasized. We should not atomize and quantify emotions before we know what we have to atomize and quantify (Fineman, 1996, p. 556–557).

In the above excerpt Stephen Fineman emphasizes the need for researchers to develop conceptions of emotions and feelings that arise from observation of specific organizational sites. In this paper we heed Fineman's call by presenting a descriptive case of emotion labor in a 911 emergency communications center, and a critique of current assumptions about the role of emotion at work.

By and large, scholars who study emotion have focused on categorizing emotion into its distinct types and identifying correlating antecedents and behavioral consequences (e.g., Lazarus, 1991; Rafaeli & Sutton, 1989). To the degree that emotion's role in particular sites or relationships has been studied, the focus has been on close relationships. The recent Handbook of Communication and
Emotion (Anderson & Guerrero, 1998), for instance, which includes a wealth of information about emotion in interpersonal relationships, does not include a single article about emotion in organizational life.

At the same time, a scan of the organizational literature—with the exception of several scholars (Fiebig & Kramer, 1998; Fineman 1993, 1996) and strands of study soon to be discussed—reveals little about emotion's role in different kinds of work. Stated simply, in mainstream organizational studies emotion has been ignored—treated as a private issue, too mushy for sustained investigation, or if mentioned, treated as “a problem.” In recent essays, however, Putnam and Mumby (1993; Mumby & Putnam, 1992) argue for the importance of studying emotion in the workplace and advance an ideal they call “bounded emotionality.” Their argument counters the dominant view of bounded rationality (Simon, 1976), which emphasizes a dichotomy between rationality and emotion in which emotion is no more than a disruptive influence on efficiency and effective functioning. Mumby and Putnam argue that emotion is necessary to produce much of what is most valued in corporations. As they would put it, real feelings are central to human interaction and are essential to corporate excellence. In this paper we provide a descriptive account of how feelings are understood, expressed, and regulated in the work of one group of organizational actors: 911 call-takers in a large-city emergency communications center.

The study of emergency communication is not a new enterprise. Conversation analysts, using tape recorded calls to the police and 911, have provided a good sense of the interactional structure of emergency telephone calls (J. Whalen, Zimmerman, & M. Whalen, 1988; M. Whalen, J. Whalen & Zimmerman, 1990; Zimmerman, 1984, 1992a, 1992b). Although providing useful background information about 911 call-taking, these studies do not have much to say about call-takers' emotion management work. More directly relevant to this paper's focus are two earlier studies carried out at the same emergency center. The first study (K. Tracy, 1997) argues that conversational strain during 911 calls can be accounted for by citizens and call-takers bringing different frames or expectations to the interaction. The two frames, “customer service” and “public service,” inferred from field data, differ in highly subtle ways yet account for many routine tensions. A second study (K. Tracy & S. Tracy, in press) provides an in-depth analysis of numerically rare events: 911 calls where call-takers (and also the callers) spoke in ways unambiguously perceivable as angry and rude. The analysis unpacks the blatant and subtle conversational moves that enact rudeness, considers what features of the work environment challenge call-takers’ management of feelings in institutionally required ways, and develops the case's implications for theories of face and face-attack. In the current study, we focus on the flip side. Rather than examining emotion management failures, we consider how emotion management is accomplished, and take a close look at the feelings that need to be managed in the routines of 911 call-taking.

The paper proceeds as follows. The first section reviews research on emotion management in work settings and the phenomenon of organizational burnout, highlighting what beliefs about emotion in the workplace scholars take for granted and what beliefs are contested. Then we describe data collection and analysis procedures, and provide background about Citywest 911, the emergency center where this study was conducted. The heart of the paper involves the presentation of the case and a theoretical critique. The case includes three components: (1) A
description of the emotional landscape of the 911 communications center that makes visible the need for call-takers to channel citizens' emotions while they manage their own; (2) An account of the institution's explicit expression rules and how call-takers use them; and (3) A catalog of the communicative practices call-takers use to cope with feelings experienced during and after calls. In the conclusion, we elaborate implications of the analysis for taken-for-granted conceptions about emotion and consider implications for the conduct of emergency call-taking.

Past Research on Emotion in the Workplace

Arlie Hochschild's study of how flight attendants' feelings are commercialized (1979, 1983) set the agenda for studies of emotion in organizations. Focusing on interviews and observations of Delta flight attendants, as well as reflective questionnaires from college students and a small number of interviews with bill collectors, Hochschild explores the character and cost of emotional labor. According to Hochschild (1983, p. 7), emotional labor is "the management of feelings to create a publicly observable facial and bodily display" to be "sold for a wage." The focus is upon an emotional performance that is bought and sold as a commodity. Emotion labor is distinguished from emotion management: defined as the same type of feeling work except that emotion management is done in private contexts for actors' own purposes. Thus, while a funeral director's expression of sadness is emotional labor, friends of a deceased person who display sadness for a bereaved friend's benefit are engaging in emotion management.

The particulars of emotion labor have been primarily examined in service roles that call for displays of positive emotion. Included are studies of Disney employees (Van Maanen & Kunda, 1989), cruise ship social directors (S. Tracy, 1998), Mary Kay cosmetic agents (Ash, 1984), waiters in fancy restaurants (Mars & Nicod, 1984), secretaries with their bosses (Pringle, 1988), and supermarket and convenience store clerks (Rafaeli, 1989; Rafaeli & Sutton, 1990; Sutton & Rafaeli, 1988). Although displays of positive feelings have been given the most attention, displays of negative feelings have also been examined. For instance, studies have examined the expression of anger by bill collectors toward debtors (Hochschild, 1983; Sutton, 1991) and by police toward suspected criminals (Stenross & Kleinman, 1989).

How do employees accomplish these emotional performances? In the Delta flight attendants' case (Hochschild, 1983), employees were trained to engage in deep acting. Deep acting requires people to change their emotional expression by altering internal feelings. In deep acting, employees may deceive themselves as much as they deceive others and become so identified with their emotional labor that they are unable to distinguish the act from a "true" self. The idea of changing one's inner feeling in order to affect and create emotional display is not an idea foreign to emotion theory. Lazarus (1991) argues that cognitive appraisal, defined as "an evaluation of the significance of knowledge about what is happening for our personal well-being" (p. 354), is the necessary and sufficient condition for emotion experience. In this view, emotion is considered to be a consequence of different cognitive activities (Lazarus, Coyne, & Folkman, 1984). Thus, the way a person thinks about a situation, and whether the encounter is congruent or incongruent with the actor's goal, will determine the emotion experience. Deep
acting and cognitive appraisal contrast with surface acting which is characterized by a change in outward expression, such as “painting on a smile,” in order to affect internal feelings. Hochschild found that some employees who “fake it” feel guilt because they are not being sincere. In such a case—when outward expression is at odds with inner feelings—employees experience emotional dissonance, which Hochschild argues leads to psychological discomfort, burnout and alienation.

Two lines of work pose challenges to Hochschild’s conception of emotional labor. A first challenge, offered by Rafaeli and Sutton (1987), is to question whether faking emotions is categorically harmful. Rafaeli and Sutton propose that emotion faking can be done in “good faith or bad faith.” Emotional dissonance, they argue, primarily results when an employee has not internalized the organization’s display norms.

If employees believe that offering false emotions should not be a part of the job then they are faking in bad faith. But if employees offer false emotions and believe that offering them should be part of their job, then they are faking in good faith. We contend that emotional dissonance will be most strongly related to strain among people who fake in bad faith since their level of psychological discomfort will be much higher than people who fake in good faith (Rafaeli & Sutton, 1989, p. 37, italics in original).

If we add Rafaeli and Sutton’s distinction to Hochschild’s, we have a three-level picture of harm offered by past research. At the highest level of harm, Hochschild implies that organization rules that mandate internal feelings for employees, such as “feel happy even when you’re not,” are more harmful to one’s “true self” than are expression rules, such as “smile at all customers.” Second in harmfulness would be employees following expression rules when they don’t agree with them (in bad faith), and least harmful would be employees agreeing with and following expression rules in good faith. Left unaddressed, however, is how employees come to make organizational feeling rules their own and the process by which they fake in good or bad faith. Do employees, we might ask, distinguish between feeling rules and expression rules? Between feeling rules and faking in good faith? In the theoretical critique, we address possible answers to these questions.

The second challenge, admittedly more diffuse, is seen in studies that emphasize emotion suppression rather than its display. Haas (1978) argues for the importance of steelworkers who construct tall buildings to avoid any displays of fear, and medical students (Smith & Kleinman, 1989) learn a technical vocabulary as one way to avoid displays of disgust about patients’ physical conditions. The kind of emotion work being done in these two cases seems quite different from the emotion-as-commodity conception invoked by Hochschild’s emotion labor. Emotional suppression is a necessary part of each profession’s work but it is a stretch to think of it as a performance or commodity. A close examination of a complex case would allow us to look afresh and consider the ways in which “emotional labor” does or does not capture what employees are doing.

Although investigations of emotional labor are the primary frame, another literature is relevant to this 911 case: organizational stress and burnout. Burnout as defined by Maslach (1982) is characterized by three features: (1) emotional exhaustion (i.e., feeling worn out by a job), (2) becoming increasingly depersonalized and negative in response to others, particularly clients, and (3) a decreased sense of personal accomplishment. “Burnout” is a term that was coined in the
social service and health care arena and its study has continued in health care (Miller, Stiff, & Ellis, 1988) and teaching arenas (Ray, 1991). Factors found to contribute to burnout include work load (Miller, Ellis, Zook, & Lyles, 1990), the presence of organizational surveillance (Nussbaum & duRivage, 1986), and role conflict and ambiguity (Katz & Kahn, 1966). Most relevant to our study, the role of empathy has been correlated with burnout in the human services context. A study of healthcare workers (Miller et al., 1988) found that employees who experienced empathic concern (a concern about the other’s welfare without feeling the other’s emotion) were less likely to experience burnout than those who experienced emotional contagion (feeling the same emotion a patient is feeling) or experience no feeling (e.g., complete depersonalization). It would be valuable to know if avoiding both high and low levels of involvement (or detachment) is also regarded as the ideal stance in emergency call-taking work.

To summarize, then, the purpose of this case study is to chart the emotional landscape at 911. In particular we pose three sets of three questions:

RQ1: What do the emotional experiences of 911 call-takers and citizens look like?
RQ2: What are the institution’s emotion expression/feeling rules? Is there evidence that call-takers distinguish the two kinds? How do call-takers perpetuate or transform expression/feeling rules?
RQ3: What are the communicative practices that 911 call-takers use to cope with feelings during and after the calls?

In light of the case study, we offer theoretical and practical implications.

Methods and Background

Qualitative Procedures

For this study we gathered several kinds of data over a 10-month period. The primary data are fieldnotes from approximately 100 hours of participant observation at Citywest Center. Fieldnotes used recording and elaborating practices commonly suggested in methodological discussions of participant observation (e.g., Lindlof, 1995; Spradley, 1980). We particularly focused on call-takers who worked at night and on weekends, especially heavy times for emergency calls, but our observations spanned all 24 hours of the day. Our participation included sitting with and directly observing about 20 call-takers. In addition, we observed other Citywest employees, including police supervisors, and police, fire and paramedic dispatchers. In the evening hours, 10 to 12 call-takers and about 18 other employees (police, fire and paramedic dispatchers and supervisors) were present at the center. A typical four-hour observation included sitting with a call-taker with our own headsets listening to the calls and then engaging in conversation and informal interviews with call-takers between calls (Lindlof, 1995). We also took breaks with the call-takers and, one night, the first author went out to a pub with a group of call-takers, fire dispatchers, and police officers.

In conjunction with our call-taker observations, we conducted informal interviews with the Citywest police captain and call-taker trainer, observed a day-long stress workshop for Citywest call-takers and dispatchers, went for “ride-alongs” with ambulance and police, and visited four other emergency communications centers in the United States. In addition, this analysis draws upon several of
Citywest’s documents including the Citywest 911 training manual, an Apco Institute training manual (used by Citywest 911), year-end statistical summaries released to the public, and several internal memos.

Besides participant observation, informal interviews, and document analysis, six in-depth interviews were conducted with call-takers. Questions focused on the techniques call-takers use to deal with hysterical or angry callers, how they manage to handle their own emotions, and what parts of the job are stressful. The interview schedule was used as a loose conversational guide rather than as a strict agenda. As Mishler has noted (1986), interviews are conversational events that not only are, but need to be, attentive to the specifics of the ongoing exchange.

Participant observation notes and interview transcripts were analyzed using a version of Glaser and Strauss’s (1967) constant comparative method (see, Charmaz, 1983 for a review). This method is characterized by allowing themes to emerge emically from the data to generate a “grounded” theory. Data-text incidents were classified into categories, and at the same time definitions of categories were refined to fit new incidents. Eventually categories become “theoretically saturated” (Glaser and Strauss, 1967), and new incidents add little to the categories. Categories which emerged include: types of feeling states expressed by call-takers; emotion management techniques; and ways employees spoke about emotion management norms. The categories are not necessarily exhaustive or mutually exclusive. Rather, as examples emerged from data, we created labels which seemed to capture the essence of the examples therein.

Citywest Center

The “Citywest Emergency Communications Center” is located in a Western, United States city with a city population of around 500,000, and a metropolitan one of about two million. There are two different phone numbers that a Citywest citizen can dial to get the police—911 or a non-emergency number; 911 call-takers are responsible for both of these lines. In 1995, Citywest Center handled an average of 3,087 calls per day; 52 percent of the calls were made to 911 and the other 48 percent came into the non-emergency number. On a typical shift, call-takers have primary responsibility for one line or the other but if there is an influx and overflow of calls, then a call-taker will answer the other line. While the non-emergency line draws more administrative cases, many of the same types of calls come over both lines. In 1995, an excess of 1,125,000 calls were handled at the Citywest Center.

The call-takers are civilians, trained by and working for the police department and serve as the initial police contact for the public. In a typical 911 call, a call-taker checks for relevant location information—the automatic number identification (ANI) and automatic location information (ALI) supplies where the call is coming from—elicits a description of the problem, records the information in a partially-coded form in the computer, and then with the help of Computer Aided Dispatch (CAD) transfers the coded information to police, fire, or paramedic dispatchers (who are located in the same room at Citywest Center). Call-taking and dispatching are separate functions.

Each call-taker sits in a cubicle which is set up so that it is easy for call-takers to converse with each other. There are 14 call-taker cubicles, but during our observation they were never all filled. Call-takers’ phone cords are long enough to
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walk a few steps away from their cubic, allowing for talk with someone who is not located in an adjacent cubic. Between calls, call-takers talk to one another, read, or watch television (at night they are allowed to bring in their own portable television sets). Many call-takers are friends with each other, with between-call conversations extending to personal life. It is not unusual for call-takers to go to bars or restaurants together on their nights off.

The Case Study

The Emotional Landscape of 911

In routine fashion, call-taker Nell Jones speaks into her headset, “Citywest Police, this is agent Jones.” A female caller wails, “Get the police . . . he’s got a shotgun . . . Oh my God . . . PLEASE HELP!” The woman, crying and hysterical, explains that her two brothers are fighting. We hear the men yelling obscenities in the background, like, “You asshole, get the FUCK away from me!” In the midst of their screaming, the caller screeches out to her brothers, “I’m calling the police!” Nell asks the caller if it’s safe to stay on the phone and as a result, the caller leaves the one phone and moves to another. Nell verifies the address that’s popped up on the ALI [automatic location indicator] screen and begins asking other questions. The caller does not understand that the police have already been dispatched, and begins yelling in panic to Nell, “Can’t you hear them? Send someone soon!” Nell tells the caller that the police are on the way and keeps asking questions, but suddenly, the caller no longer answers. We hear more screaming, both female and male voices, and then a loud bang. The bang sounds like it is either a door slam or a gun shot, but we can’t be sure. Finally there is a click and we’re disconnected. (fieldnotes)

Channeling Citizens’ Emotion. Call-taking at 911 is an inherently emotional job that requires call-takers to manage others’ feelings as they handle their own. One of the most stressful parts of the call-taker job is dealing with the caller’s hysteria in high priority cases such as robberies, intruders, suicides and domestic violence. In the above call, call-taker Nell Jones’ had to channel the caller’s hysteria in a way that made it possible to get relevant information and keep the caller on the phone as long as possible. Meanwhile, Nell stayed calm during the call, and afterwards, dealt with the fact that she would never see the fruits of her efforts. Call-takers rarely find out what happens to callers beyond what is communicated during the 911 call.

Call-takers also have to deal with callers who are angry and irritated. Call-takers agree that many people do not know what to do or say when they call 911: callers do not have the necessary information nor do they like to answer questions (K. Tracy, 1997). Tiffany described a central part of the call-taker job as “dealing with what comes in your ear . . . you’re always having to deal with hysterical people or rude people.” Indeed, one police dispatcher, who had previously worked as a call-taker said, “I got sick of people being rude to me for eight hours a day.” Another common source of annoyance for call-takers are harassment calls, often coming from pay phones. As pay phone calls to 911 are free, people can and do dial the emergency number to yell a few obscenities or complain to the police. While sitting with Christy one night, a call came in from a pay phone. A male, who was obviously drunk, slurped into the phone, “Pigs . . . fuckin’ pieces of shit.” After Christy hung up, she smiled and said, “Lovely pay phone callers.” When he
called a second time, he only got as far as "fuckin' pigs" when Christy hung up and said in an irritated voice, "I'm going to send (the police) on this now."

Call-takers must also cope with citizens who call 911 for "inappropriate" reasons. Call-taker Dale described a caller who just wanted to complain that her neighbor's sprinkler was spraying all over the sidewalk. Other inappropriate calls that we observed included someone calling to find out why her power was cut off, and a caller who requested that someone at the center call his place of work because he was going to be late. Depending on how busy the center was, call-takers usually dealt with such calls by calmly pointing out their inappropriateness at which time the callers (sometimes ashamed of their misuse of the system) agreeably hung up. Sometimes, however, callers became angry and took out their feelings on the (rather undeserving) call-takers.

For instance, one Monday in February at about midnight Tim got a call from an elderly lady. Before he could start asking questions, she squawked into his ear, "I'm trying to get some sleep and the neighbors are squabbling again. My husband has got to get up early and I'm SICK and TIRED of the noise. The police need to do something about it NOW!" Call-taker Tim is not at fault for the neighbor's noise, yet he is the recipient of the caller's anger. Likewise, even though call-takers have no control over when police are dispatched (and thus cannot be reasonably blamed if the police "take forever" to arrive at the scene), call-takers nonetheless are stuck with the responsibility of talking with second- or third-time callers who are angry about how long they have to wait. An important part of the call-taker job is to channel a caller's anger or hysteria in a way that is productive for finding out necessary information.

**Expressed Emotions of Call-Takers.** In addition to being the recipient and designated "channeler" of caller emotions, call-takers have to manage their own feelings which calls may generate. Analysis of fieldnotes and interviews suggest that call-takers experience a range of emotional situations, including sadness, irritation and anxiety, disgust, amusement, powerlessness and complex mixtures thereof.

As an outsider might expect, call-takers sometimes experience sadness and distress when confronted with the tragedies of others. Although call-takers repeatedly talked about how they tried not to get "too emotionally involved," they occasionally did. In response to a question about the most distressing parts of the job, Shotci said:

> I think domestic violence; when you hear a lady screaming on the other end and you actually hear him hitting her and struggling to get the phone. I think also when there is children involved, saying "daddy is beating my mommy. Please get here. Do not take my mommy, take my daddy."

Call-takers appeared to agree that the saddest calls had to do with "helpless" children and the elderly. Tim said:

> The worst is injuries to old people or small children. On adults, they can kind of knock each other around if they want, but I have a problem with old people or small children when they are victimized. Kids can't defend themselves and old people are traditional victims in this society.

Call-takers also said they felt sadness when cases "hit close to home." Call-taker Christy described a call from a man who was thinking of committing suicide. She
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said the call made her feel “really very badly,” especially because she had a good friend who committed suicide two years earlier. As she noted, it really “touched home” with her. Likewise, Tiffany said, “I try not to get too personally involved, you know suicides, you almost have to, and it’s a little harder when they’re my age. You can’t help but get involved in those because you have to ask personal questions and keep them on the line talking.”

Call-takers experience stress when they have to handle logistically complicated calls, such as a “robbery in progress.” During such an incident, call-takers are under intense pressure, for they must act quickly and precisely in their information-gathering if the police are to arrive at the scene before the robber flees. Call-takers express distress in these calls in large part because they are concerned about their own negative evaluation if they don’t handle the incident correctly. When we asked Tim about his “worst call ever,” he talked about his first robbery in progress. He said he was stressed and disoriented during the call, and later became upset when he found out the police were not able to apprehend the criminal.

Anxiety also emanates from calls that involve life and death. During an informal interview, Tim spoke of an especially unnerving suicide call. Apparently, a female called 911 to report that moments earlier her Dad phoned her to say he was going to shoot himself but would “leave the door open for the paramedics.” When Tim asked for her father’s address, he learned that the caller didn’t know it, so Tim had to make a series of calls in order to find the correct location of the man. Seven minutes later, Tim transferred the incident (with the correct address) to police dispatch. When the police arrived at the scene, the man had already shot himself in the head. After the incident, Tim’s supervisor told him that the man could have lived if Tim had found the address more quickly. Tim got angry and told the supervisor, “I don’t want to hear that shit.” As he explained in the interview, “I don’t usually cuss, but that stuff can become like an anchor, and if it does, you’ll start to second guess yourself. You have to be confident—you do what you can do and then let go.”

Call-takers express irritation when callers do not answer their questions. As a requirement of their job, call-takers are expected to find out the priority level and nature of the incident being reported. If call-takers fail to get pertinent information, they may be reprimanded by a dispatcher or a supervisor, or they may be asked to phone a caller back. One night Erika (who was described as a “screamer” by other call-takers) yelled at a caller because he would not answer her questions. At the end of the call she screamed, “You don’t want to answer my questions, I’m not going to send the police!” and then hung up on him. Afterwards, she said to call-taker Tim, “There’s not enough officers to send on stuff like that, right Tim?”

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(continued)

In addition to stress and anxiety, call-takers also deal with situations most people would consider revolting. Expressing disgust is not an institutionally appropriate way to react to callers’ problems, but this does not stop call-takers from feeling and discussing the emotion. Tiffany’s story about a particularly “gross” suicide is illustrative:

I had one caller, a woman who found her husband hanging, and was sure he was still alive because when she cut him down, she heard him throw up. [But] that was because when the noose was around his neck [it] had blocked the fluids, so when she took it off, his body was emitting the fluids. Well, she assumed that was a sign he was still alive. You could hear her trying to give him mouth-to-mouth and you could hear
him gurgling in the background, and to me, that just completely grossed me out for one, but number two, you know you felt so bad. . . . Some of the things she was saying, you knew he was dead, but she wasn’t, hadn’t accepted it. You know, but you have to stay on the line and listen to it whether you want to or not because they [paramedics] are going to want you [police] to cover.

One particularly “disgusting” call came in during observation with call-taker Christy. The female caller said that her sister’s baby ate some hamburger and now it’s “stuck in her rear and won’t come out.” The caller told us that the baby couldn’t go to the bathroom and was bleeding from her rectum. During the call, Christy showed her feelings to other call-takers (and the first author) by contorting her face into surprised and disgusted expressions.

In addition to these more negative emotions, call-takers often expressed amusement, an emotion which appeared to dovetail with feelings of disgust. Indeed in regard to the aforementioned “hamburger” call, after her initial revulsion, Christy laughed and joked about the incident with those around her. During an observation with Sue, an obviously intoxicated man called in and kept repeating in a Southern drawl, “I wanted to call ’y’all about . . . I wanted to call ’y’all because . . . I wanted to call ’y’all . . .” After Sue ascertained that the man did not need police help, she hung up and played the call back over her recorder so other call-takers could listen and laugh. One call-taker said, “He sounds like a broken record!” (fieldnotes)

We have described some of the positive and negative feelings that call-takers express in doing their job. However, some of the “feelings” found to be central to the call-taking role seem more of a jumble than a single emotion. This jumbling is particularly apparent for the feeling we label powerlessness. Powerlessness seems to be a complex combination of guilt, anger, sadness and stress. Because of the separation between call-taking and dispatching duties, the call-takers have little power over the outcome of the calls. They do not know how long it will take the police to arrive at the scene, and only rarely do they learn the final outcome of a call they handle. This “not knowing” leads to experiences of powerlessness. Fieldnotes about call-taker Joe’s worst call ever exemplify this state:

Last summer a drunk woman called in from the downtown district to say that her boyfriend had just left her, and that she felt like killing herself and had a knife. It was a very busy day, so it took a long time for the police to be dispatched out to her case. Therefore, Joe tried to stay on the phone with her and tell her things like, “put down the knife.” Joe explained that there was some “dead time” on the phone and when the woman got back on the line she said, “ooh, I just cut myself and it feels good.” Joe told her, “Don’t do that, why are you doin that?” Joe said he felt helpless on his end of the phone line because he couldn’t do anything to help her except stand up and frantically wave to dispatch in an effort to get a police officer to the scene sooner. (fieldnotes)

Call-takers also referred to powerlessness in regard to suicide calls. Tiffany said, “you can’t help but blame yourself” when people end up hurting themselves. Other call-takers lament the fact that they rarely know if their advice to callers does any good. Call-taker Sue said that “you pray you say the right thing,” especially during “rape in progress” calls. Others say that it “gnaws” at you to never find out the result of a call. Indeed, we found this personally distressing. During the first author’s observation with Erika, a female called in breathing very
heavily and said that her husband just threw a chair at her. Erika was asking
questions but the caller wasn’t answering back—possibly because she was too
scared to say anything or because her husband was watching her. We just kept
hearing heavy breathing and Erika said that she would stay on the line with her
until the police arrived. Suddenly, the phone disconnected and when Erika called
back, she got the answering machine. We never found out the outcome of the call.
Erika wrote up the information, sent it to dispatch, commented on how she hated
not knowing what happened, and answered the next call. (fieldnotes)

In sum, a routine part of the call-taker job is to channel callers’ feelings of anger
and hysteria while dealing with a jumble of their own feelings including: sadness,
irritation and anxiety, disgust, amusement, and powerlessness. These findings
about jumbled feeling states are consistent with Fineman’s (1996) prediction that
emotion in real-life work settings cannot be cleanly categorized. He notes, “while
the driving feelings (fear, anger, passion, worry, shame) no doubt saturate some
work experiences and performances, more often we pass through a range of
mundane feelings which set the trajectories and character of a working day” (1996,
p. 556). When we view emotions at Citywest 911, they emerge as messy and
overlapping, but nevertheless as integral to understanding the workplace environ-
ment.

Institutional Feeling Rules

As should be clear by now, the job of 911 call-taking is emotionally charged. Yet
many of the feelings call-takers experience are not ones they may legitimately
express to callers. Instead call-takers are expected to manifest a calm and
professional demeanor. Emotion management rules are both explicit, in call-taker
training manuals, and implicit, embedded in interactional norms of call-takers.
Table 1 presents a comprehensive list of rules made explicit in call-takers’
manuals.

A close analysis of this list reveals that, although some of the rules pertain to
internal feeling states (e.g., “don’t get emotionally involved” in #6, or don’t let
callers get you “excited or angry” in #7), the majority of the organizational rules
refer to appropriate ways of outward expression and communicative behavior. The

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<td>Institutional Feeling Rules</td>
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1. Keep in mind, at all times, that you represent the Department of Public Safety and that the entire
department may be judged by your manners and conduct over the telephone.
2. Do not show any personal feelings, either friendly or unfriendly. Watch your tone of voice. Try to
talk in an even, steady pace.
3. Do not let your tone of voice sound bored or uncaring.
4. Do not listen long to opinions or information that is not needed. Firmly steer the caller back to the
information needed . . . If appropriate, thank the caller and terminate the call before the caller pro-
longs the conversation.
5. Display an interest in the caller. One reference you can use is to treat every call as if a member of
your family is the one making it.
6. No matter what the interviewee may tell you over the phone, don’t get so emotionally involved so
that you cannot accurately receive the message or give sound advice.
7. It is imperative that we not engage in arguments with callers over whether their use of the phone
system is proper or not. Do not belittle callers for not having a proper understanding of what, in our
mind, constitutes an “emergency.”
rules prescribe that the call-taker display interest (#5) and care (#3) through tone of voice (#2) to give sound advice (#6) and not to argue or belittle (#8). It is unclear whether this focus on mandating outward expression rather than internal feeling is a conscious decision by those who devised the organizational manual. Nevertheless, rules in the manual would seem to indicate that management is primarily concerned with the behaviors of call-takers toward callers, not whether they feel a certain way.

This focus on behavior begins to change, however, when we explore the emotion rules as reproduced by employee talk. As learned through our participant observation and interviews, call-takers spoke condescendingly about colleagues who failed at controlling their emotional outbursts, calling them “screamers” behind their backs. In contrast to the organization expression rules, most call-taker comments referred to the internal feelings a call-taker must have to do the job. Call-takers continually repeated the idea (and the actual slogan) that “you can’t take it personal” or get “too-wrapped up” in a caller’s personal situation. Tiffany noted that call-takers have to act somewhat sympathetic, but that sympathy can go too far:

There are call-takers here that I think go a little too much into personal aspects of the caller or getting too much information... I think I’ve had one call, this is right when I started, that actually made me cry. And I was way too sympathetic there. You know, I was ready to leave work, go pick her up and take her to my home. That’s how bad it was. But, I mean, I got too much information from her... you just learn to not quite go that far, you can’t get involved.

In a similar vein, Tim said:

Sometimes you can’t help but to get swept up in the emotions over it... [But] you cannot be a part of it. You have to remain back. If you hold onto [a bad] memory, it just really drags you down—it will inhibit you. Just like with cooking, if you only remember the things that you burn.

In other words, the predominance of call-taker talk focused upon how a good call-taker will either deny, or quickly forget, the sadness or distress and then will move on; overwhelmingly, call-takers seemed to believe that those who felt emotions too deeply could not be effective in the 911 job. Although call-takers may not be aware of it, their communicative transformation of organizational expression rules to slogans such as “don’t take it personal” is consistent with avoiding the emotional contagion found to be a precursor to burnout (Miller, et al., 1988).

**Emotion-Labor Strategies**

As we have discussed, 911 call-takers are required to manage and channel callers’ emotions while simultaneously suppressing and controlling their own. How do they manage to do so? Our field data suggest that emotion labor techniques fall into seven categories: (1) nonverbal expression, (2) giving the caller advice, (3) upping a call’s priority rating, (4) self-talk, (5) evaluative talk about a caller, (6) joking, and (7) storytelling. These strategies partially overlap and frequently co-occur. For purposes of clarity, we discuss each separately, beginning with those that occur within the call and moving to those that involve ongoing and backgrounded activities.
Nonverbal Expressions. During a foray to a local pub with Citywest staff, the first author explained our interest in understanding how call-takers manage their emotion. In response, call-taker Christy exclaimed, “I can only do it because it’s over the phone. I could never be so pleasant face to face.” Indeed, one of the ways call-takers cope with vivid feelings and reactions is through nonverbal expressions. During our observation it was not unusual to see call-takers making faces, rolling their eyes, sticking out their tongues, plugging their noses and throwing up their hands (or other objects) to express an emotion that they were not supposed to express in their voice. For instance, during an “intruder call,” call-taker Shotci kept telling the female caller to get as far away as possible from the noise the intruder was making. Shotci was taking notes long-hand, and several minutes into the call, she asked the caller “what’s happening now?” The woman replied gravely, “He’s upstairs, digging his way through, to get to the light!” Shotci explained that this was the point she realized the caller was crazy. She said she was so frustrated with the caller that she literally threw her pen into the air, allowing for an emotional release that was blind to the caller. Therefore, through the strategy of nonverbal expression, Shotci was able to simultaneously control her own frustration while maintaining a calm verbal demeanor toward the caller.

Giving the Caller Advice. As already discussed, call-takers can do little to control the outcome of the call. Call-takers do, however, hold one trump card; they get to talk to callers first, and every so often, they take this occasion to give advice. Giving advice is not a sanctioned organizational activity, especially in the area of medical or legal advice. Nevertheless, call-takers regularly give “everyday” advice. For call-takers, this advice-giving may help them to feel as though they exercise some control over the outcome of a case. Advice-giving is illustrated in a call taken by Felicia:

At about 1 a.m. (early Saturday morning) a young girl calls in crying. She says that she just got a phone call from someone and when she asked who it was, a deep male voice said, “It’s a stranger.” The girl keeps crying as she explains that she lives by herself and is really scared. Felicia tells her how to trace the call, but the girl doesn’t have a touch-tone phone, so the tracing mechanism can’t work. Felicia asks the girl if she has bolts on the door and the girl whimpers, “I have a bolt on one door, but not on the other.” Felicia advises the girl to go spend the night with some friends and tells her that she should buy a touch-tone phone and a bolt for the other door. After Felicia hangs up, she looks at me and says, “poor thing, maybe she was kicked out and can only afford a bad apartment and a rotary phone.” (fieldnotes)

Through giving advice, call-takers can avoid their own feelings of powerlessness while simultaneously channeling and controlling the stress of callers.

Upping a Call’s Priority. In addition to giving callers advice, call-takers have control over how an incident gets written up in the computer. Call write-ups include assigning a priority code and furnishing a description of the incident. Although the priority code is automatically set by the computer when the call-taker writes in the incident type code (e.g., the code DOMV, domestic violence, has a priority code of #1), the call-taker holds the authority to change the preassigned priority. We found that call-takers, albeit some more than others, regularly “up” the priority level of a call. In a similar effort, some call-takers essentially change the priority though the words they use to describe an incident.
For instance, during an observation with call-taker Sue, an elderly man reported that some people were breaking into his church. Sue asked, “how many people,” and the man said he didn’t know. She pressed him for an answer asking, “how many cars?” He said, “I don’t know—a bunch.” In turn, she wrote on the incident description, “many many cars.” By exaggerating slightly, Sue likely helped to achieve a quicker police dispatch. Likewise, one night while sitting with Tim, an angry female called to complain about the homeless people that were “living behind her dumpster.” The woman only said people were “hanging out,” but to increase the urgency of the call, Tim wrote into the incident report that the people were looking into parked cars; this write-up implied possible theft which made the call a higher priority. (fieldnotes)

Self-Talk. The notion that a person can change their emotion experience by thinking about it differently is a fairly well-developed theory (e.g., Lazarus & Lazarus, 1994). A version of this is spontaneously enacted by call-takers. To help become more sympathetic to a caller’s emotional state, caller-takers encourage themselves to imagine how they would feel in they were in the caller’s shoes. In discussing a call from a wife whose husband had been shot in a drive-by shooting, Tiffany said:

So you just kinda have to try to think if you were there, you would probably be even more hysterical. You try to envision the worst case, ’cause I’m sure anybody in their right mind has every right to be hysterical. I mean, but on our end we look at it as, they don’t have the right to be hysterical.

Similarly when callers get angry at them when they are not at fault, call-takers work to imagine themselves in the caller’s role. In talking about the least favorite part of the job, Felicia said:

CT: the part that I really hate is the fact that they take it out on me since they can’t take it out on the person that did something to them.
I: How do you deal with that?
CT: I just sit there and try to understand. I do not get mad at them . . . they feel like nobody is going to be able to solve their crime. I can put myself in their position especially when they don’t know who did it, especially burglaries.

Although call-takers talk themselves into empathizing with callers, they simultaneously remind themselves that it is not personal, and they need to avoid taking it personally. Tom noted that “call-takers who have been here for any length of time know that it is not personal” but as Tiffany said:

It takes a while. ’Cause I know the first time a caller called up and called me a bitch, I was like hysterical. I thought, “I don’t even know this person.” . . . now I just laugh and shrug it off. It takes time though.

Through the strategy of self-talk, call-takers do cognitive reappraisal work to avoid depersonalizing the caller, and thus effectively avoid one of the causes of burnout. At the same time, they avoid emotional contagion by continually reminding themselves not to take it personal or get too wrapped up in a call.

Evaluative Talk. Immediately following a call, call-takers often comment to each other (or visitors like ourselves) about the incident. Comments are almost always evaluative, sometimes sympathetic to a plight a caller is facing, often
blaming and critical, and occasionally a complex mix of both. Consider what sympathetic talk looks like.

Shotci has taped a note on her computer to remind her to set up a “welfare check” (police stop by to check on a person) later in the night. Shotci repeats several times that it’s for a “poor mother who’s scared of her drunk son.” Shotci explains that earlier in the night a woman called in to say that she was afraid of what her son was going to do when he got home. She said that he often came home drunk, locked her in her room and beat the kids. Throughout the night, Shotci talks about the case, saying things like, “This is so sad’ and “can you believe it—that’s her son!” (fieldnotes)

While verbally empathizing with callers occurs, blaming or making fun of callers seems more frequent. Call-takers seem to regard many callers as stupid, careless, and at fault for their own situations. In the following example, Tiffany enacts this belief.

Tiffany hangs up from a call, looks at Christy and me and says, “God, some people are sooo retarded.” Tiffany then mimics the caller, sing-songing in a high-pitched voice, “I’ve been dating this guy for a week and I let him use my car . . . He’s in prison but I don’t know his last name.” Christy and I laugh. Later in the night, we see Tiffany making faces into the phone and after she hangs up we ask who it was. She says, “oh just some stupid, psychologically disturbed woman.” (fieldnotes)

In the following example, Shotci also makes fun of a caller.

Shotci receives a call from a girl who says she sent her brother to “beat up” a group of gang members. The teenage girl says, “They’re here to kill me.” Shotci asks, “what are you doin’ to protect yourself?” and the girl casually replies, “I have a gun and I know how to shoot it.” After Shotci gets off the phone she drawls, “If my daughter ever does something like that, I’ll chain her up and take her to Wyoming!” (fieldnotes)

As illustrated in the above examples, one way call-takers manage their emotions is by verbally evaluating callers and how they are handling their lives. Often this strategy involves blaming callers for their own dilemmas, but it can also include expressions of empathy or sympathy. Such verbal commenting allows call-takers to (re)appraise the appropriate emotion to be felt in certain situations. For instance, through making fun of the woman whose car was stolen, Tiffany helps to create the idea that such a situation should lead call-takers to feel disdain and amusement, not sadness or grief. Further, her words will most likely affect the way her fellow call-taker Christy appraises and emotionally experiences a similar future situation. In addition, because evaluations are enacted in either a nonverbal form or in the conversational spaces between calls, call-takers are able to express their feelings in an institutionally acceptable form.

**Joking.** One of the most common ways call-takers manage and appraise emotion is through joking and laughing with others. Researchers as early as Freud designated laughter as a cathartic strategy, and we found laughing and joking to be a common practice at 911. Jokes about callers immediately after a call were prevalent.

Sue gets a call from an elderly lady who said, “Yes, I need the paramedics—I’ve fallen down and I need help to get up.” After she hangs up, Sue looks at another call-taker and mimics the popular commercial, whining, “I’ve fallen and I can’t get up!” (fieldnotes)
Call-takers can also extend jokes for days (or weeks) after the original incident. A case that triggered prolonged joking was what some of the call-takers referred to as the “case of the fried feline.” Tim and Erika chatted about this call one night during their break.

The night before, a woman called 911 and asked for help in getting her cat down from a tree. The call-taker transferred the information and the fire department was dispatched. Five minutes later, the same woman called back and asked for animal control. She was crying at this point because the cat had tried to get out of the tree itself, but had been electrocuted when it walked across a power line. (fieldnotes)

According to Tim, who told this story with tears of laughter in his eyes, half the call-takers thought this situation of the “fried feline” was hilarious, while the other half found it really sad. Despite their evaluation, call-takers made sense of the situation through commiserating or joking with others who felt the same.

Experience-Sharing/Storytelling. Telling stories and sharing experiences may be done through joking. Yet call-takers do more in talking with each other than joke. Through the reflections they share and stories they tell, call-takers make sense of emotionally disturbing parts of their job. Call-takers continually repeated that “venting is healthy” and “you can’t stuff this stuff.” During an interview, Felicia spoke about the purpose of trading stories:

To relieve the tension that is built up because we have to keep a lot of our feelings in on the call and try to ask the questions that we need to ask and to keep our head straight and not get emotional.

One Thursday night Tiffany received three suicide calls: a drug overdose, a teenage boy who hung himself, and one other (in which the details were not made clear). Between calls Sue and Christy talked to each other (and the first author) about the suicide incidents:

Sue says to me in a dramatic voice, “this is the horror of it all.” She says that suicide is “the downfall of the country” and that she once had a call about a guy who was hanging himself from a tree. Christy believes that it’s the families that go through hell when someone commits suicide. She says, “It’s a very selfish act—I had a friend that did it [committed suicide].” Sue one-ups Christy’s story and explains how she has a brother who has tried to kill himself three times. [Sue provides details of the three failed attempts and then] says, “I told him ‘the message is that you’re supposed to be alive.’ Now he doesn’t seem depressed anymore.” Christy and I listen and actually laugh a little. Christy says that she once read in a newspaper about this woman who tried to kill herself; she jumped out of a building, but the wind blew her into an open window of another building. She says, “Now that’s a sign that you aren’t meant to die.” The story is interrupted when a call comes into Christy’s line. (fieldnotes)

Suicide calls are among the most distressing; they often hit close to home and can understandably lead to feelings of powerlessness. As illustrated, one way call-takers deal with their feelings is through talk with each other. In telling stories, they can hypothesize as to why such horrors occur and can begin to reappraise a tragic incident in a darkly humorous manner. Through such discussions, they are able to empathize with callers, manage their own sadness and confusion, and create the distance needed to avoid getting personally wrapped up in the tragedy.

Call-takers, then, use a variety of within-call strategies and ongoing practices to
cope with emotion in several different ways. First, the strategies aid call-takers in managing and channeling call-taker emotion (such as anger and hysteria) so that pertinent information can be gathered and emergency help dispatched. Secondly, the strategies help call-takers to control their own "inappropriate" feelings (such as disgust or amusement) so they can provide the warm, friendly service mandated by the organization. Last, we see how talk serves as a catalyst for cognitive (re)appraisal which makes it possible for call-takers to balance the burnout tension of emotional contagion and depersonalization.

Conclusions

Theoretical Implications

In this paper we described a range of emotions 911 call-takers experienced as they did their work and the strategies they used to suppress institutionally-prohibited emotions and/or to bring their feelings in line. Based on this analysis we advance three claims about past emotion studies.

First, consider the issue of whether feeling rules or emotion expression rules are more harmful to employees. As noted earlier, a general belief among emotion labor theorists tracing back to Hochschild’s work (1983) is that expression rules are less intrusive than internal feeling rules. In addition, when employees agree with the rules, or have a hand in crafting them, they are understood to infringe less on the “true self.” This assessment, however, does not recognize that peer pressure and employee participation can be more effective (oppressive?) instruments of control than traditional hierarchical forms (Barker, 1993). As this study illustrated, it was when employees began reproducing the emotion rules in their talk that expression rules became hard to disentangle from feeling rules. In other words, it was through employee participation that expression rules became feeling rules. Call-takers agreed with and perpetuated the organization’s rules through their talk, a state Rafaeli and Sutton (1987) would classify as faking in good faith. However, call-takers also internalized these emotion norms. In talking about how a good call-taker should feel, call-takers made the organization’s rules their own. A question this study raises, then, is whether faking in good faith is possible. It appears that when employees agree with the rules, they make efforts to internalize them as their own, and therefore, do not “fake it.”

Second, this study underscores the important role of talk in experiencing emotion. Through the strategies of self-talk, call-takers often came to (re)appraise situations. By making evaluative comments, telling stories, and making jokes, call-takers developed a group sense of the types of emotions they should express/feel in certain situations. In telling stories about suicide, for instance, call-takers were able to see the darkly humorous side of botched suicide attempts, thus making it “Okay” not to be devastated by the tragedy. In other words, through talk, call-takers actively shaped their social and emotional worlds, a process theorists are increasingly seeing as crucial in constructing emotional experience (Harré, 1986; Oatley, 1993). In addition, this case suggests that cognitive appraisal models (e.g., Lazarus, 1991) could be enriched by recognizing the key role talk plays in shaping the particular cognitive appraisal an actor makes. Internal appraisals are shaped through conversation with others.

Finally, consider what this case suggests about the way theorists conceptualize
kinds of emotion work. By and large, any emotion exhibited in the workplace that is directed toward consumers or clients has been treated by scholars as emotion labor. Hochschild's definition of emotion labor, however, was considerably more circumscribed: the management of feeling to create a public display (or commodity) that is sold for a wage. This view of 911 call-taker work is not entirely off-target. Call-takers do take effort to "put a smile in their voice." Nevertheless, this friendly and caring tone is a means to an institutional end: to collect and record information needed to dispatch emergency help. Simply put, the emotion labor is in the service of another goal rather than the primary product itself. Therefore, to frame call-takers' emotion work as "emotion labor" in the Hochschild sense glosses emotion work that was embedded in activities as means to get the job done.

As illustrated, call-takers engaged in types of emotion work beyond that of creating a publicly observable (or audible) caring tone of voice. First, call-takers channeled callers' feelings of hysteria or anger while they managed their own internal feelings of irritation, disgust, amusement, and so on. In other words, call-takers had to manage the emotions of two parties at the same time—those of the self and those of the caller. We term this type of emotion work double-faced emotion management. This dual direction was especially obvious in the strategy of advice-giving. In giving advice, call-takers were able to simultaneously calm down the caller and reduce their own feelings of powerlessness. Double-faced emotion management is not a skill that is exclusive to the emergency 911 domain. Indeed, even cruise directors or supermarket clerks may have to manage their own irritation while calming a cranky customer. Nevertheless, the need for double-faced emotion management is especially likely in high stress emergency jobs where the client (patient, citizen) is experiencing strong emotions. Recognizing that emotion labor often has a double-face would enrich future investigations.

A second type of emotion work as embedded activity concerns how call-takers did work to achieve emotion neutrality. Past emotion management scholars have done little to investigate how a neutral emotional state is an accomplishment. Emotion labor has typically been treated as a process by which employees act out feelings that are more intense than they would normally portray; for instance, acting happier or angrier than usual as in the case of flight attendants or bill collectors, respectively. Acting in a neutral manner, however, is also demanding emotional work and needs to be recognized as such. In contrast to the emotion management tradition, research on burnout has attended to neutrality as an emotional state to be achieved. Similar to past studies in the healthcare arena, this study of 911 shows that call-takers avoid burnout by balancing emotional contagion with complete depersonalization. In addition, this study adds credence to the idea that social support is a key strategy employees use to combat burnout (Albrecht & Adelman, 1987). Our study advances understanding of what social support looks like interactively—call-takers engaged in practices like self-talk, evaluative talk, joking, and story-telling to enact support and avoid burnout.

Therefore, we see in the case of 911 call-takers that emotion work can include several emotion skills. Call-takers did emotion work as "public display" to create their caring calm tone of voice, while they engaged in the embedded emotion activities of double-faced emotion management and the achievement of neutrality. Based upon this analysis, we argue that three issues—beyond Hochschild's (1983) distinction of emotion labor (paid) versus emotion management (unpaid)—impact
EMOTION LABOR AT 911

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the flavor of emotion work: (1) Is emotion work done primarily as a final performance or as an embedded means to another goal? (2) Are actors managing their emotions so as to appear more positive, more negative, or more neutral than they would appear without management? (3) Does a significant piece of emotion work entail channeling the other's feelings while managing one's own? When we consider the answers to these questions, the concept of emotion work becomes relevant to an array of professions within and beyond the service arena. Certainly, future research in light of these issues will improve our understanding of how emotion labor plays out in different organizational settings.

Implications for the Practice of 911 Call-Taking

This case points to three central implications for 911 call-taking work. First, the study highlighted an advantage of telephone exchanges over face-to-face exchanges for situations where emotion management requirements are demanding. Because 911 is telephone communication, a call-taker can be verbally helpful and sympathetic to a caller while displaying irritation, amusement or disgust to fellow call-takers through nonverbal expressions. When facial expression, gestures, and posture can be separated from tone of voice and message content, intriguing combinations of emotional suppression and emotional display are possible. Moreover, this bifurcation of emotional messages may enable a level of "good service" that would be considerably more difficult if, for instance, videotelephones were to become common place.

Second, although the job of call-taking includes significant stresses—as noted in call-takers' interviews, and as indicated in the stress workshop that callers attended—repeatedly call-takers mentioned that they did not find the job "that stressful." We think that one reason call-takers easily managed stress was because their physical work environment was designed in a way that made possible the communicative practices we found to be so pervasive (i.e., evaluative talk, joking, sharing experiences). Citywest's work environment, whether intentionally planned or a matter of happenstance, enabled call-takers to talk easily with each other while waiting for calls. Other emergency centers in which we observed arranged the space of 911 operators' work stations in ways that made these kinds of informal exchanges either difficult or impossible. For instance, one older center arranged call-takers in short rows increasing in height from the front to the back of the room, with people on the same aisle separated by noisy equipment. Or, in one state-of-the-art center in an especially large U.S. city, each call-taker was an island surrounded by five computer screens. In this high-tech center, call-takers were cut off from conversation with fellow call-takers except when on break. Because call-takers are expected to manage difficult emotions regularly, we recommend that organizational supervisors take account of this ongoing need in the design of work spaces. Responsive 911 call-taking requires thinking about the communicative conditions necessary for employees to function well, in addition to the more obvious need to attend to computer and telephone technologies.

A final implication for the conduct of emergency call-taking concerns the way organizational supervisors treat the communicative practices we identified as crucial to call-takers' emotion work. Given their likely role in employees' being able to maintain emotional equilibrium, should emergency organizations explicitly encourage employees to tell stories, "gossip," vent, and so on? We think not.
Although organizations should design work spaces that facilitate employee interaction, we would not recommend that organizations explicitly encourage these forms of talk. These forms, we suggest, derive power from their slightly illicit quality. It is the sense that one should not be joking about and bad-mouthing citizens behind their backs (or clients or patients) that enables these speech actions to render a therapeutic effect. As Bergmann (1993) noted about gossip, “It is only as something bad that gossip can be something good” (p. 153). Put differently, crisis organizations need to figure out how to “wink” at these communicative practices—treating them as reasonable albeit not officially legitimate.

Endnotes

1. In accord with Fineman (1996), we use the word emotion to refer more to outward expression and the word feeling to refer more to an internal state.

2. Observation yielded about 200 pages of single-spaced typed fieldnotes.

3. APCO is a national association for organizations involved in public safety communications.

4. Although not directly used for this study, 700 audio-taped telephone calls were also collected. These calls were made by citizens to 911 and the non-emergency police line from July to December of 1995. Calls came from all twenty-four hours of the day, from weekdays and weekends, and from approximately 20 different 911 operators.

5. Transcribed interviews included the interviewer’s questions as well as the interviewee’s answers and resulted in 71 pages of single-spaced text.

6. These yearly statistics are fairly similar to other years in Citywest. In 1997, the center received slightly more calls than 1995: a total of 1,132,726 (an average of 3,103 per day) with 48 percent 911, and 52 percent non-emergency.

7. People’s names as well as location names have been changed to preserve participant confidentiality. Pseudonyms were selected by participants.

8. Call-takers also have the option of down-playing a call they feel does not need police, fire or paramedic attention. They can simply not write up a report, such as was the case when Erika hung up on the man who would not answer her questions. They can also convince the caller that their call is not appropriate for police help, which call-takers commonly do when people called in to say they have locked their keys in the car. Also, because call-takers manually “up” the priority level of many calls, they can effectively down-play a call by leaving it at its normal priority level.

9. This part of the joking strategy overlaps with the evaluative talk. One way to be evaluative is through a joke but not all evaluative talk is joking, nor is all joking evaluative talk.

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