

Interruptions in medical consultations: issues of power and gender

Abstract:

Interruptions in various areas of spoken interaction have been the focus of research which deals with such issues as power and dominance or gender. More recently this focus seems to have been on the many functions interruptions can hold. One research area in which interruptions may have been given less attention is that of doctor-patient interactions (see for example, Menz, & Al-Roubaie 2008). This paper investigates the issue of interruptions in medical interviews and how they can be related to power and gender. The area of medical consultations has been chosen for this investigation since it is a domain which has been subject to a substantial body of ethnographic or qualitative research from a range of standpoints. It also seems to be a setting which is familiar to many of us and does not require a lengthy introduction or explanation. The discussion of interruptions in institutional talk, in the medical context in this case, draws from ethnomethodology and conversation analysis which have been increasingly concerned with 'institutional interaction' and in particular 'talk at work' (e.g. Boden, & Zimmerman 1991, Drew, & Heritage 1992). Medical practice and the delivery of health care has become a particular focus of such studies and there is a growing body of studies of talk and interaction dealing with interruptions in medical consultations. In this paper I wish to address the issue of interruptions from three perspectives. First, interruptions are here dealt with in relation to the various types of such overlapping sequences described in the literature for example in the work of Murata 1994 or James, & Clarke 1993. Second, they are investigated from the highly controversial perspective of how male and female conversational partners seem to behave differently or not when interrupting each other. Third, interruptions in medical consultations are here regarded as means of control and domination in encounters in which some of the participants seem to hold a power position and others a subordinate one (Fairclough 1989). The data corpus analysed from these three perspectives consists of 21 medical consultations recorded with the consent of two physicians, an ophthalmologist and a paediatric orthopaedist, and that of their patients. In a previous study, a pilot qualitative context-bound analysis of two of these medical consultations was conducted in order to inform the main study discussed here which is based on the whole corpus. The findings of this preliminary analysis demonstrated that it seems possible to use an existing analytical framework (Menz, & Al-Roubaie 2008) for the identification of types of interruptions characteristic of medical interviews in the Romanian context. Starting from these findings, the results of the main study show that some of the types of interruptions discussed in the literature seem to be characteristic of the Romanian medical encounters in this corpus and that, due in no small way to the specific cultural context, the theoretical analytical framework may be amended. The findings related to the issues of gender and power, on the other hand, demonstrate that in this corpus there is no major difference in verbal interruptive behaviour between male and female participants in medical encounters. Finally, the study shows that this type of verbal behaviour is indeed a mark of power relations.

Keywords: *Interruptions; Medical consultations; Power; Gender.*