Reflections on remote interviewing in a pandemic: negotiating participant and researcher emotions

**Keywords:** COVID-19; pandemic; emotion; agency; online disinhibition

Abstract: This article explores the authors' experiences of conducting remote oral history interviews during the COVID-19 pandemic for a project that had started in 2017. We consider differences in interviews conducted before and during the pandemic, the emotional impact of remote interviewing during a global public health emergency, and potential reasons for the heightened feelings of researchers and participants. We attempt to disentangle those effects attributable to the circumstances of lockdown, and those likely to be experienced by oral historians conducting remote interviews in more usual contexts. We end with some reflections on negotiating remote interviews – a challenge that increasing numbers of oral historians are likely to face in a post-pandemic world of changed work and communication practices.

#### Introduction

Remote interviewing has been difficult. I have spent evenings reeling from experiences I've listened to. My brain has felt completely full, heavy with other people's emotions, as well as my own feelings of anger and sadness that trauma frequently sits so readily at the surface of women's lives. I have been struck by the sudden reappearance of recollections of particularly difficult or traumatic events in

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my mind, jarring me away from watching television or trying to sleep. Remote interviewing has drastically undermined my capacity to compartmentalise and contain my work. Why have these interviews spilled out into the non-professional areas of my life, leaving me feeling overwhelmed, anxious, and even angry over evenings and weekends? – Kate

We are three historians researching women's "everyday health" in late twentieth-century Britain. Oral history interviews are essential to this research. Before the COVID-19 pandemic led to national lockdown in March 2020, we had conducted twenty-two of the fifty interviews planned for this project. As the pandemic wore on, initial optimism about returning to face-to-face interviews within our allotted timeframe dwindled. In November 2020, we started conducting remote interviews – a wholly new experience for us all. Over the next six months we conducted sixty-four interviews.

We felt enormously privileged to listen to women's stories in these interviews. But they were also often emotionally and physically exhausting, during the interview itself and the following days, in ways we had not anticipated. Our eventual adaptation to remote interviewing was not an easy transition. This article details the emotional entanglements of remote interviewing during the pandemic, including issues of hierarchy, power, and trust within the research team, explores potential reasons for acute feelings across the interviewer-interviewee divide, and ends with some reflections on negotiating the (interrelated) emotional and practical aspects of remote interviews – a challenge that increasing numbers of oral historians are likely to face in a post-pandemic world of changed work and communication practices.

Our discussion of our experiences in this article intersects with three strands of recent scholarship on oral history practice. Most obviously, it contributes to current discussions on COVID-19 and oral history – but does so from an oblique angle. To date, most published discussions have charted the challenges of documenting the pandemic itself.¹ In looking at how experiences of COVID-19 affected practice within an ongoing oral history project that did not seek to document the pandemic, we hope to shed light on the separate but related effects of remote interviewing and of the pandemic itself on the dynamic relationship of researcher and participant.

In tackling these effects, we necessarily wander into the territory of interviewing on 'difficult topics'. Influential work on managing harm to researchers tends to focus on fieldwork in contexts that are recognisably dangerous, or around topics that are recognisably traumatic.<sup>2</sup> This article instead explores both how researchers and participants remembered and narrated the 'everyday' in the midst of an emergency characterised in some ways by its stifling mundanity, and how the interview format itself (remote rather than face-to-face) might generate or intensify emotional responses, perhaps even pushing them into the realm of the traumatic.

Finally, our article is also a contribution to scholarship on oral history 'off the record', a term perhaps now synonymous with Anna Sheftel and Stacey Zembryzycki's edited collection.<sup>3</sup> Our discussion explores behind-the-scenes aspects of the interview process. We hope these observations will be useful not only to future oral historians considering conducting remote interviews, but also to those working in research teams. We have tried to be honest about the conscious and unconscious

power dynamics within our own team, as well as our ordinary working practices and heightened emotions during a period of crisis. Our ability to be honest in this way reflects the strengths of our working relationship, as well as our shared commitment to openness as part of the endeavour of feminist history.

In this spirit, the article originated as shorter pieces of reflective writing by the individual authors, undertaken as we attempted to understand and digest our separate-yet-shared experiences of a period of intense interviewing. Quotations from these initial first-person reflective accounts introduce some sections to invoke our experiences of interviewing remotely during the pandemic. We set no formal boundaries on what we would write about, though there are definitely experiences discussed in debrief meetings that never made it onto the page, either because they would reveal too much about our participants, or because they are still raw for us. We have edited our accounts together, indicating when experiences were shared or particular to an individual author, and trying to retain some differentiation between our voices while also gesturing to shared aspects of our experience. We collectively agreed on what to share about our experiences, how to present these experiences, and when and where we could honestly say 'we' in these reflections.

Background: oral history on the Body, Self, and Family project before and during the COVID-19 pandemic

Our project 'Body, Self, and Family: Women's Emotional, Psychological, and Bodily Health in Britain, c. 1960-1990', funded by the Wellcome Trust, explores the "everyday health" experiences of women of different social classes, ethnicities, and

sexual orientations. Oral history is at the heart of the project, with initial plans to interview fifty women born between 1940-1970. These interviews will be archived at the British Library. The team, consisting of Tracey (project lead), Daisy (senior postdoctoral researcher), and Kate (junior postdoctoral researcher) has always been highly committed to the creation of this oral history collection as a resource for future researchers, and an enduring record of women's varied health experiences in late twentieth-century Britain.

Before the pandemic, we had conducted twenty-two interviews, mainly with white, heterosexual women. When the pandemic started, we were strongly opposed to conducting interviews remotely. As other oral historians strove to record experiences of the pandemic and balance their 'desire to document' with the practical and ethical considerations of crisis oral history, we paused.<sup>4</sup> To fulfil our central aims of creating an intersectional and bottom-up history of women's "everyday health", it seemed essential to complete the planned number of interviews. On the other hand, remote interviewing seemed at odds with our conceptualisation of the interviewer-interviewee relationship, and even the project's overall ethos. Moreover, our semi-structured interview schedule included questions on emotionally charged topics, and in line with most guidance on oral history technique, we felt that face-to-face contact was necessary to build trust and negotiate responses to such questions.<sup>5</sup>

We finally decided to move forward with remote interviews in October 2020, when it became clear that even if possible, face-to-face interviews would take place masked and socially distanced. Under these circumstances, phone or Zoom interviews seemed more conducive to building rapport. At this stage in the pandemic, we were

reasonably confident that participants would have some experience of web-based platforms. With funding for the project due to end in September 2021, we had to give up on further interview collection, or move quickly. A sustained recruitment campaign, incorporating press releases, targeted Facebook ads, and social media activity, was unexpectedly successful.<sup>6</sup> 128 women contacted us between November 2020-May 2021, resulting in sixty-four new interviews. It is likely that the pandemic encouraged many women to participate in the project.<sup>7</sup>

The deluge overwhelmed us. We faced multiple practical challenges: lack of experience conducting remote interviews, trying to learn quickly how to record interviews of sufficiently high quality for archiving, and lack of time for conducting interviews, and dealing with the administrative tasks they generated. We initially failed to remember how draining interviews can be. Taking advantage of remote interviewing's speed of connection, we often scheduled two interviews for the same day, or on consecutive days of the week. We (re)learnt the hard way that more than three interviews per week causes too much strain, and that oral history is a necessarily 'slow practice'.<sup>8</sup> Above all, we were not prepared for the emotional toll of conducting remote interviews, and especially for doing so in a pandemic.

# Participant responses in pandemic interviews

When interviewees chose not to have their cameras on, I ended up staring at the lines of the Zencastr soundboard – I found them almost hypnotic. The two lines on the soundboard represent the interviewer's and the interviewee's audio input. I became transfixed by oscillations in the line representing the interviewee's voice as

she told her story, while mine remained flat for minutes at a time, interrupted only by the slight bump of a question every now and then. – Tracey

The pandemic context changed rapidly across the autumn and winter of 2020-21. Rising rates of reported coronavirus cases resulted first in November's four-week lockdown in England, then after a brief pause, reimposition of harsher COVID restrictions across most of the UK from late December. Our most intense phase of interviewing took place in the depths of winter, against the backdrop of a deeply distressing news cycle, while we and our interviewees were largely confined to our houses, and separated from our wider families and loved ones.

Our interviewees, cut off from the usual activities and networks that sustained their daily lives, sometimes had more time on their hands. Conducting the interviews remotely made participation easier for some, especially given new confidence with web-based platforms. A powerful sense of living through an unprecedented public health crisis probably reinforced the value of a project on "everyday health". Above all, it is likely that the pandemic prompted many people to reflect on their lives, while removing opportunities to talk to a wider range of people. For some interviewees, increased caring responsibilities left little time or space to share their personal reflections with others. Several interviewees emphasised their enjoyment of this opportunity to talk about their lives.

For all these reasons, women talked at greater length and in more detail. Our lockdown interviews were very long. Before the pandemic, we conducted interviews in one sitting. We now offered participants the choice to meet over more sessions,

and practice varied across the team. Tracey conducted more two-part interviews, perhaps because she was not full-time on the project and often had to fit interviews into a clearly defined window. Nearly all Daisy's interviewees preferred to start with a one-part interview, and were happy to keep talking even if the interviews stretched well beyond the expected two-and-a-half hours. Daisy did not want to rush or interrupt interviewees, or make them feel they were talking too much – but she also preferred to meet once, as when interviewing multiple women per week, it was difficult to hold the interview in her head. Certainly Tracey found it very difficult to keep the details of interviewees' lives clear in her mind between sessions, often jotting down key points while the interviewee was talking, and sometimes 'skim-listening' to interviews before the second session.

The interviews were long partly because horizon-setting questions that previously produced short, innocuous responses now instigated fuller, deeper, and more complex answers. Women were also more likely to share experiences that did not correspond to specific questions. This may have been a consequence of interviewing during an 'active crisis', when our interviewees had not had the chance to 'reflect upon and integrate' recent disruptions to their lives. Women also now often divulged more personal information, ranging from painful experiences to sexual practices including masturbation and fetish parties. Several women recounted traumatic experiences from their childhoods and/or adult lives, including domestic and sexual harassment, violence, and abuse. It took us, and the wider oral history community, some time to realise that remote interviews could amplify the online disinhibition effect (the lack of restraint individuals feel when communicating online

rather than in person).<sup>10</sup> In the pandemic, this disinhibition extended to telephone conversations.

# Researcher responses in pandemic interviews

As people, we were also affected by the pandemic; as oral historians, we were further affected by the transition to an unfamiliar mode of interviewing, and unexpected participant responses to our standard interview schedule. As researchers, we faced the same challenges – but our (perceived) capacity to freely respond to these challenges also highlighted hierarchies within the team. This added a further layer of complexity to our ability to negotiate the uncertain intersubjective relationships of pandemic interviews.

As the emotional register of the interviews shifted in the ways outlined above, we all felt less secure in our established interview techniques. We began to use the interview schedule differently. Our semi-structured interview schedule included sections on childhood, adolescence, adult life, and ageing, with direct questions about health experiences located within the wider context of interviewees' life stories. Semi-structured interviews allow the interviewer to respond to the specific circumstances of individual lives, while retaining a core of questions that enable comparison to draw out wider patterns. Because we were interviewing as part of a team, even before the pandemic we had sometimes felt constrained to stick more rigidly to the schedule than we might on individual projects. Daisy and Kate felt this responsibility acutely as postdoctoral researchers working on a project that Tracey ultimately leads. Over time, we had relaxed more into flexibility with the schedule,

partly through conducting more interviews for the project, partly through greater familiarity with each other's interviewing styles, and partly as our trust in each other deepened through working together closely.

Before the pandemic, we built this sense of familiarity, adaptability, and trust partly through in-depth transcript review meetings. These meetings enabled us to better understand each others' oral history practice, as well as the broad patterns of interviewee responses to particular questions. We were therefore able to establish shared ways of negotiating potentially troubling situations. We tried to phrase, order, and tweak questions so that interviewees felt comfortable and to avoid pre-empting particular responses. Inevitably, interviews dealing with major life experiences prompted deep reflection, and participants sometimes expressed sadness or regret. Face-to-face, we tried to mitigate these emotions by ending interviews on a positive note, or leading interviewees onto happier experiences in post-interview conversations.

In the pandemic, our interviewees' responses, our own abilities to negotiate the schedule comfortably, and our emotional reactions to interviewees' narratives, changed considerably. Our interviewees' longer responses, fuller disclosures, and sometimes traumatic narratives meant it was more difficult to stick to the schedule order. Pre-pandemic interviews usually zig-zagged between more-or-less fixed narrative points determined by the schedule; in our pandemic interviews, participants' memories sometimes unspooled in apparent chaos, connecting life events in unanticipated ways that made it more difficult to keep track of the schedule, or to frame questions picking up narrative threads naturalistically. The altered

interview-interviewee dynamic, and our own pandemic-heightened emotions, meant that our sense of our relation to participants shifted, sometimes for the better, but sometimes leaving us unmoored. Tracey, missing parkrun and swimming, asked participants new follow-up questions on exercise regimes, perhaps sometimes putting them off with her enthusiasm. Daisy realised that her previous squeamishness at asking interviewees about intimate topics had dissipated. In this way, a barrier came down from both directions.

## **Negotiating difficult questions during pandemic interviews**

As some barriers tumbled, however, we became more protective of participants (and perhaps ourselves) in other ways. Under lockdown, we edited the schedule both for manageability, and because of unease about the emotional effects of certain questions. The main changes were to the final part of the schedule, which asked interviewees to reflect on their lives now, and on changes in women's lives over the last century. Our responses to making these edits highlighted the inherent power differential across the team. As project lead, Tracey quickly and without consultation dropped questions she felt might negatively affect interviewees or dent her own sometimes-fragile mental state. She was relaxed about Kate and Daisy adapting the schedule as they saw fit but did not clearly convey this. Initially, Daisy and Kate therefore persisted with questions Tracey had already dropped, despite sometimes feeling uncomfortable.

Before the pandemic, we had enjoyed interviewees' responses when asked to describe a typical day in their lives at decade-long intervals. These accounts

provided insight into things they considered too inconsequential to mention elsewhere. One woman recalled cycling to work in her twenties, and how she still misses it today; another giggled remembering her homespun romantic fiction about the Boomtown Rats. Responses to the question often revealed patterns in work, friendship, relationships, and motherhood over the decades. This question, close to the end of the schedule, had always prompted long responses. When it approached in lockdown interviews that had already lasted three or more hours, Daisy began to dread it, weighing up whether she could focus for another 45 minutes.

The last time Daisy asked this question, she realised its potential toll on interviewees. This interviewee audibly struggled, giving very detailed answers for each age; it seemed like a chore, rather than the typical off-the-cuff pre-pandemic responses. It is likely that the pandemic had caused this particular woman to take stock of her life and left her feeling something was missing. She reflected that her life did not seem to have changed much since she was very young. Daisy reassured her that the question encourages skating over shifts within each decade, and that many interviewees had similarly remarked on repetition at different ages, but this woman seemed very disturbed by the apparent lack of change in her life. In turn, Daisy felt perturbed that the question had prompted negative reflections for this woman during a period of constraint in day-to-day life and uncertainty about the future.

That question ends with, 'Describe a day in your life now'. Before dropping the question entirely, Tracey sometimes asked only this part, specifying that interviewees should describe a typical day *before* the pandemic, as she attempted to better understand interviewees' lives in the (near) present. However, she did not

consciously reflect on this shift until the team later shared experiences of lockdown interviewing. Daisy allowed interviewees to decide whether they wanted to talk about their lives now or before the pandemic, and they often chose to highlight differences between 'then' and 'now'. In effect, this question reintroduced COVID back into the interview space. This could be useful in situating pandemic experiences within the broader life history, but it could also be jarring and sad. Coupled with the schedule's standard final question, about expectations of the future, it could pitch the interview into difficult emotional terrain.

Even before the pandemic, it was not always easy to ask interviewees nearing eighty years old this question. Tracey, wrestling with her own fears about relatives' health, did not ask this question in any lockdown interviews. Daisy also gradually stopped asking interviewees to reflect on the future. When writing this article, and reading literature on the responsibility of oral historians not to avoid difficult topics that interviewees might *want* to reflect on, we wondered whether this had been the right decision. At the time, the best we could do was make on-the-spot judgements about what felt right for us and our interviewees.<sup>13</sup>

## **Emotional responses after pandemic interviews**

We also found that our *post*-interview emotional orientations to interviewees changed. Before the pandemic, we might think quite a lot about particular stories, but did not usually dwell on them. Beyond post-interview 'thank you' emails, provision of content summaries, and so on, we did not seek further contact. During lockdown, Daisy and Kate were often anxious about participants' wellbeing for some time

afterwards, even when interviewees affirmed that they were fine. They feared that recalling traumatic experiences could provoke difficult emotions that might be especially hard to contend with in the lockdown environment. Kate questioned whether we should signpost interviewees to relevant support services, while Daisy wondered whether we should change our standard consent procedures.

These procedures included provision of an information sheet, completion of a participation agreement before the interview, and signing a recording agreement assigning copyright, and stating any restrictions on uses, after the interview.

Participants received an interview content summary, flagging potentially sensitive issues or questions, and were offered a full transcript and audio recording. Before the pandemic, most interviewees signed the recording agreement without waiting for the content summary, and few requested transcripts or recordings. We felt quite relaxed about these procedures.

Our pandemic interviews were different. In face-to-face interviews, participants signed print copies of forms in the presence of the interviewer. Now, some women posted both forms back to us before the interview had actually taken place. After the interview, these same women often dismissed the idea of seeing the transcript. This unnerved Daisy. Another group of women reacted differently again, insisting on seeing the transcript before signing the recording agreement – a firmness rarely encountered before the pandemic. Daisy now questioned whether automatically providing a transcript, rather than just the summary, might be best practice after all.

Tracey did not experience the same anxieties as Daisy and Kate, but often wondered whether interviewees had meant to disclose so much, and if they might later decide against making this information publicly available. Like Daisy and Kate, she also found the interviews more emotionally draining than she realised at the time. After an intense period of interviewing in January and February, the team briefly paused and resumed interviews in April. Tracey felt absolutely drained by the end of February, and considerable trepidation at the thought of further interviews in April. Similarly, towards the end of March Daisy felt real dread. It took her a full day to contact a dozen participants, set up video call links, and update project spreadsheets; only professional responsibility forced her to complete the tasks as scheduled. These anxieties were alien to us as feminist oral historians, strongly committed to recording women's voices, who usually felt excited about the prospect of interviews.

## What makes emotional responses in remote interviews different?

Why were our remote interviews so different to our face-to-face interviews? Why did interviewees talk more, make intimate disclosures, and create non-linear narrative structures bearing little relation to the life stories we recorded before the pandemic? Why did we find these interviews so draining, causing us to emotionally recoil from certain tried-and-tested questions? And why did they leave some of us feeling so anxious for our interviewees' wellbeing? The wider context of a public health emergency unprecedented in our lifetimes undoubtedly affected these interviews in all kinds of ways, but it also worth trying to untangle the effects of the pandemic from

features specific to remote interviewing in order to reflect in ways that will be useful to the wider oral history community in the longer term too.

The pandemic certainly shaped much of our experience. As individuals, we found the winter lockdown very difficult, especially after nine months of an upside-down world. Our interviewees almost certainly also struggled to some extent. The circumstances of winter lockdown – darkness, isolation, more time to reflect – intensified the interviews' emotional aspects. These were the conditions in which interviewees shared their stories, and in which we listened to them. Online disinhibition and/or increased opportunities for reflection perhaps led to women sharing traumatic experiences that we would find difficult to hear under any circumstances. But we also brought our own feelings about the pandemic to interviews, although we tried not to vocalise them.

Under these conditions, quite ordinary recollections triggered our own emotions. Snow suggests that 'listening with empathy and imagination is the cornerstone of oral history but having direct experience or particular connection renders us "vulnerable listeners". 14 One of Daisy's interviewees spoke at length about her much-loved grandmother, bringing to the surface Daisy's own intense feelings about not seeing her own grandmother for months. Only a strong sense of professional duty stopped Daisy from crying and enabled her to continue the interview. At other moments, we all found ourselves wanting greater connection with the interviewees than usual – often about everyday matters, like clubbing or exercise, but our desires to bring ourselves into the conversation could feel very intense, and sometimes jarred with interviewees' unspoken but evident sense that the interview was *their* 

time to talk. To deal with this urge, we implemented weekly team debriefs to discuss the interviews.

That said, while the pandemic heightened certain emotional reactions, to a certain extent such responses are simply part of how oral history works; some stories will always touch raw nerves. Nevertheless, we feel that remote interviews as a form disrupt 'usual' patterns in ways that potentially intensify emotions - often through quite mundane procedures. The interrelation of emotional responses and practical matters can be illustrated through the physical effects of interviewing via telephone and web-based platforms.

Some oral historians have found that telephone interviews allow experimentation with 'different modes of bodily engagement while listening' (walking around, doodling, and so on), and that they can be less demanding. This was not our experience. Our recording set-up did not allow for walking around, and the ability to write or doodle did not compensate for the physically arduous nature of telephone interviews. Meanwhile, long video calls often ended with aching backs, strained shoulders, and tension headaches from sitting positions aimed at maintaining 'eye contact' with the camera. This physical unease made us more aware of interviewees' potential discomfort, but while we reminded interviewees that they could take breaks for any reason, we all felt unable to interrupt interviewees' narrative flow to attend to our own physical needs. We felt we should match their stamina. In retrospect, it is impossible to separate the physical and emotional exhaustion of the interviews; both types of exhaustion fed one another.

## **Entering and leaving remote interviews**

Remote interviews upset standard ways 'into' and 'out of' the interview. This affects what happens in the interview encounter, and how both parties feel about it afterwards. The circumstances around face-to-face interviews aid decompression and distancing, helping to compartmentalise the interview and generate closure.

Travelling to the interview location can be stressful, but it also compels interviewers to mentally engage with the interview and what might happen in it. It is much more difficult to undertake mental preparation when conducting interviews remotely.

Without the need to travel, we usually fit interviews around other daily tasks. This does not provide sufficient time and space to mentally prepare for the interview.

Tracey, habitually over-committed, found it especially difficult to clear time for preparation. She often had less time than anticipated before interviews, on one occasion starting the interview before even opening the interview schedule on her computer. As a result, she often started interviews slightly flustered, aware that interviewees deserved better, and at a disadvantage in putting interviewees at ease.

It is almost always more difficult, however, to establish rapport at the outset of remote interviews. Interviews at the participant's home, or a place of her choosing, hand some power, and perhaps much interpersonal responsibility, to the participant: she opens her front door or explains her choice of venue; there is chit-chat as coats are taken off and hung up; drinks are offered or bought. Gestures help establish the semi-artificial context of the interview. Pulling consent forms and schedule out of folders, putting the recorder on the table, and checking mics helps to build rapport; the pantomime of testing sound levels elicits social laughter, and establishes friendly

intentions and willingness to work together. While Daisy found this willingness to work together replicated when cameras and microphones failed, and she had to improvise in guiding interviewees through technical problems, those situations also brought heightened stress.

In face-to-face interviews, providing the interviewee with physical copies of consent forms to read and sign, often while setting up the recorder, provides opportunities for questions, and for easing into the interview process. In remote interviews, Tracey found that participants often simply said they had read the information, received/signed the forms, and had no further questions. Contact time with interviewees before recording started was therefore short, and often formal. When there was chat, different problems arose; if interviewees started talking about life experiences as though the interview had begun, and she had to interrupt chat to start recording, it felt like a heavy-handed reminder that this was a research project, not a friendly conversation. In a face-to-face interview, the physical presence of the recorder between interviewer and interviewee establishes the nature of the encounter in a neutral fashion, and in this way eases interpersonal communication. <sup>16</sup>

Remote interviews also disturb conventional ways of ending interviews that help to evoke compartmentalisation and closure. Interviewees sign the recording agreement; there is some conversation while packing up equipment; there may be questions about the archiving process, and small talk – an opportunity for some reciprocal sharing of the interviewer's own life. When the interview is in the interviewee's home, she usually leads the interviewer out and closes the door. This emphasises the interviewee's agency, providing symbolic and literal closure on the

encounter. The interviewer's commute home provides space to reflect on the interview, process feelings, and to a certain extent leave it behind.

There were occasional deviations from this model before the pandemic. In 2018, Kate interviewed a woman recovering from back surgery. Despite her pain, the participant insisted that she wanted the interview to continue. During the interview, Kate was unsure how much support the interviewee could access, but did not enquire further, as she was wary of overstepping the mark. This interviewee could not see Kate to the door when the interview ended, instead remaining in her armchair. On leaving, Kate noticed that the front door did not seem to close properly. The participant intimated that this was fine, but Kate's concern about her security meant she remained unsure whether she should have checked that the interviewee had appropriate support. This was an unusual encounter, but on ending remote interviews Daisy and Kate have similarly felt concerned about whether they had done enough to ensure participants' post-interview wellbeing.

### Responsibility, agency, and the safety of interview spaces

These feelings were stronger after interviews involving disclosures of sexual, physical, and domestic abuse, but also arose if interviewees were currently experiencing less severe problems – especially in the context of lockdown, which distorted and compounded the effects of such difficulties. There is a difference between listening to a terrible experience that the narrator appears to have internally resolved, and can organise into a cohesive narrative, and hearing someone recount ongoing problems.<sup>17</sup> Daisy felt lasting worry for some interviewees, including two

women trying to leave their relationships: COVID-19 had interrupted one's exit plan, and another had no plan but had wanted to leave for a long time. The uncertainty of these women's situations, combined with the remote interviewing experience, has stuck with her. The sudden ending of remote interviews heightened these feelings. Closing the Zoom call and walking into her own living room, she became extremely conscious that these women were doing the same, and that unlike her, they were walking out into a space they wanted to leave.

Oral history handbooks emphasise the importance of interview spaces, but this theme is less considered in the still-limited literature on remote interviewing. During the pandemic, location selection was largely taken out of either party's hands. We offered interviewees their choice of interview platform, and where applicable, the option to turn cameras on or off. We guided interviewees towards choosing comfortable, quiet, and private locations, but everyone involved had very limited options. In all but one of our remote interviews, interviewees were at home. Daisy and Kate were in their home working spaces, while Tracey moved between her home and work offices. As researchers, we had to shut doors against cohabitants also working from home and contend with background noise from neighbours. Our interviewees were sometimes interrupted by children, spouses and elderly parents (not unknown, but less frequent in face-to-face interviews). Conducting remote interviews from home has repercussions for all participants in terms of time, energy, and negotiating the emotional dynamics of the interview and its after-effects.

Almost none of our face-to-face interviews took place in spaces familiar to us. It is good practice to allow interviewees to select interview locations where they feel

comfortable, most often their own homes. In this way, interviewees enact agency. Interviewing women in their own homes, from our own homes, shifted the dynamic. In some ways, conducting interviews in our respective homes lent familiarity and neutrality to the interview "space". In interviewees' homes, there is often a strong sense that interviewers are near-strangers within the interviewee's personal space. This might help explain why interviewees shared more difficult experiences during remote interviews; virtual contact removed this sense of the interviewer as an unfamiliar presence, while the familiarity of the interviewee's surroundings perhaps encouraged feelings of safety. But conducting interviews in our homes also made it more difficult for us to "switch off" afterwards – leaving working life behind meant (at best) walking into a different room, but this problem was compounded when that work involved hearing distressing stories, and/or feeling responsibility for another person.

Our inability to physically interact with interviewees in their chosen spaces affected our ability to gauge their personalities, and our anxieties about their post-interview wellbeing. In remote interviews, we *heard* more about our interviewees' lives, but could not see much of their surroundings. In face-to-face interviews, we unconsciously look for environmental cues that tell us about interviewees and confirm they will be okay afterwards. <sup>19</sup> Being in interviewees' homes also enhances their presence as people. It provides insight into their wider networks, perhaps in the form of family members present in the house who can offer any necessary post-interview support. In remote interviews, lack of insight into interviewees' environments makes it harder to gauge whether their wider surroundings will provide the security and comfort required after discussing difficult experiences. When we

cannot see interviewees' lives with our own eyes, we lose an important form of reassurance. In the cases of the women who wanted to leave their relationships, firm knowledge that their homes were not places of sanctuary replaced this uncertainty, and explicitly overturned our assumptions about home-as-refuge.

#### Sound and vision

With interviewees 'pinned' in Zoom, these women filled my screen, their heads and shoulders matching my own – almost as if we were sitting across from one another. Sometimes this felt quite intimate, especially on dark winter afternoons, lit by lamp light. With both of us hunched over our screens in the range of laptop microphones it almost felt like we were sitting closer together than we would have been in real life. On other occasions, women I spoke to sat on their beds or sprawled across sofas – which felt intimate in a different way, like I was seeing them truly at ease. I'm not sure how they saw themselves. – Daisy

Remote interviews generate multiple other issues around visuality and recognition. Even when interviewees are visible on the screen, it is difficult to pick up on subtle visual cues potentially indicating discomfort. Depending on the interview platform, we might be confronted with an image of ourselves and the interviewee on the screen, or have no visual cues about the interviewee and be forced to communicate entirely through sound. Both situations affect relationships with interviewees, and the interviewer's own state of mind and body.

Inability to see the interviewee alters our interview technique. In face-to-face interviews, we usually respond to the participant's ongoing narrative primarily through non-verbal means: nodding, smiling, leaning forward, and so on. This avoids peppering the recording with small noises of conversational assent, but also conveys to participants the interviewer's status as listener and helps manage the silences that are integral to oral history interviews. In remote interviews dependent on technology, silences become 'disruptive' instead, as participants worry about connection or whether the other is listening. Non-verbal mannerisms also form part of the performance of the oral historian's role. Such performance helps to maintain professional boundaries, necessary for participants as well as the historian, in a relationship that unavoidably tugs at the personal. When we cannot see the interviewee, a different type of performance is required, but for oral historians used to conducting face-to-face interviews, the partial loss of an existing professional persona can be destabilising.

Furthermore, different web-based platforms raise different challenges. Via webcam, interviewers can see themselves conducting the interview, and also allow interviewees glimpses of their homes. All Daisy's interviewees wanted to keep their cameras on. For retired women, unused to workplace Zoom calls where camera use depends on situation, and blurred or virtual backgrounds are common, Zoom may be synonymous with "video on". For these women, Zoom is often linked to catching up with family or friends; one woman described Zoom as 'almost a treat' for this reason. We never used virtual backgrounds, implicitly viewing them as a barrier to rapport, but instead extended our professional "performance" to tidying our home-working spaces, and carefully curating what interviewees could see.

Daisy preferred to keep video on, finding it easier to listen when able to see interviewees' faces, lip-read, and interpret the limited visible body language. Video allows for the "performance" of listening, and interviewees often responded to her facial expressions. At the same time, it is disorienting to see yourself at all times in video calls. For Daisy, watching herself form appropriate facial expressions as participants shared devastating experiences was a step too far. She began to 'pin' interviewees to avoid looking at herself. Interviewees seemed to cope better with cameras on; one woman emailed Daisy to apologise that she had not realised how pink her face had gone until she looked in a mirror afterwards – this interviewee had not noticed the colour of her face while talking but felt self-conscious enough to email later.

Recording via web-based platforms also raises the question of whether to make visual as well as audio recordings. As Ritchie writes, filming interviews can provide 'extra dimension' – capturing 'expressions and gestures that are too complex or subtle to reduce to words' in the transcript.<sup>22</sup> However, webcam recordings cannot emulate the careful attention to lighting and framing of filmed interviews, while video recordings also prove expensive to archive. Filming interviews can also make interviewees (and interviewers!) self-conscious, affecting the tone of the interview.<sup>23</sup> Some interviewees did comment on unflattering webcam angles. In this particular project, which incorporates attention to women's changing perceptions of their bodies and appearance, such self-consciousness could be especially acute, while visual imagery might actually distract subsequent researchers from interviewees' articulations of their self-image.

This point is reinforced by Kate's later discovery of a potential benefit to not being able to see interviewees. Without visual clues to focus on, Kate found herself more readily immersed in interviewees' stories, an experience also reported by researchers re-using interviews, where a process of deep listening can result in tuning in to variations of voice and feeling connected to the narrator.<sup>24</sup> When recalling these interviews now, Kate remembers the visualisations she mentally conjured as interviewees recounted their life experiences, rather than sitting at home conducting the interview. This advantage may not outweigh other problems, but Kate has nevertheless found that some telephone interviews have stayed with her more than those conducted via web-based platforms, particularly moments when interviewees remembered especially difficult events.

#### Reflections and lessons learned

Many oral historians look forward to resuming face-to-face interviewing when it is safe to do so, but remote interviewing is probably also here to stay. Many people's working environments changed dramatically with the shift to remote working during the pandemic, with the jury still out on whether ultimately this transition was for good or ill..<sup>25</sup> Certainly, disability rights campaigners' assertions that increased accessibility must continue in a post-pandemic society are inarguable.<sup>26</sup> The force of such calls for flexible and accessible working practices suggest the possibility of a shift within oral history practice towards combined face-to-face and remote interviews within projects. On balance, we probably found it easier and more fulfilling to conduct interviews face-to-face. But remote interviews are cheaper to conduct, do

not involve travel, and may seem preferable to some interviewees in the post-Zoom world. Our reflections on the emotional implications of remote interviewing may help other oral historians to avoid some of the potential bumps in the road.

Above all, it is vital to recognise the emotional impact of remote interviewing on researchers, both when planning projects and conducting interviews. When researching difficult or distressing topics, researchers may be exposed to emotional stress, vicarious trauma, and secondary traumatic stress.<sup>27</sup> Empathetic engagement with participants' traumatic experiences can provoke diverse emotional responses, from anger, rage, and sadness, to numbness, hopelessness, pessimism, and cynicism, as well as fatigue and feeling overwhelmed. These emotions can lead researchers to avoid engaging with participants' accounts of traumatic experiences, or even to adopt self-destructive coping strategies.<sup>28</sup> Jessica Hammett recently led a project, to which Kate contributed, that developed guidelines to promote historians' wellbeing. These guidelines emphasise that researchers need to understand how their research might expose them to second-hand trauma in order to effectively manage their wellbeing.<sup>29</sup> They coalesce with Liz Strong's recent exploration of how interviewers can protect themselves from harm through actively seeking support (professional, personal, community, and mentoring) and enacting self-care at all stages from project design, through to the interview, and afterwards.<sup>30</sup>

Hammett's guidelines specifically recommend pre-interview risk assessments for researchers that provide opportunities to itemise difficult or traumatic experiences interviewees may discuss, for researchers to communicate their own perceived vulnerabilities, and to locate resources to support researchers' wellbeing (such as

training on how to respond to disclosures of sexual abuse, additional psychological or emotional support, and timetabling weekly debriefs with colleagues). Ultimately, it is not possible to predict what participants will disclose, while researchers may not fully understand the emotional impact of interviews until they are over. It is therefore important to routinely revisit risk assessments, qualifying any changes to researchers' vulnerability factors, and the additional support they might require as a result. Likewise, it is essential to establish post-interview aftercare procedures. When interviewing as part of a team, such procedures should be discussed and agreed before interviewing commences.<sup>31</sup>

It is also important to recognise the physical drain of remote interviews, and to minimise exhaustion. It is not sensible to schedule remote interviews back-to-back or to conduct several interviews within one week. When we resumed remote interviewing in April 2021 we spaced interviews more. With lockdown lifted and lighter evenings, these interviews were much less taxing. The interviews were mostly less intense in their subject matter, and often shorter. (This also suggests that the length of the January interviews was a product of lockdown, not just online disinhibition.) One technique to help maintain emotional and physical health is to recreate interview 'buffer zones' usually provided by travel. This might mean setting aside time for quiet reflection, or it could involve mimicking the motion of travelling — moving towards and away from a task — by walking, going to the shops, or exercising in the time immediately before and after an interview. These actions should help facilitate the necessary mental acceptance for conducting interviews and establish boundaries around the research encounter to compartmentalise it.

Some of the knottiest issues we tackled related to the potential effects of online disinhibition. Listening to disclosures of physical, domestic, and sexual abuse made us acutely aware that oral history training had not adequately prepared us to respond in these situations. We had to remind ourselves that it is not our role as researchers to take on our interviewees' emotions. Our interviewees seemed to appreciate the opportunity to reflect on their lives, finding the interview helpful or possibly even cathartic. We simply had to listen and record their experiences. This act alone was empathetic. Interviewees appreciated our thanks when they had shared difficult experiences, but did not expect us to offer advice, or to soak up their emotions.

One aspect of our practice that did help to set up good relationships was allowing interviewees to select their preferred means of communication, insofar as possible.<sup>32</sup> We offered participants a choice of telephone, Zoom, or Zencastr.<sup>33</sup> This is good practice for accessibility reasons. Online spaces are not equally available to everyone, with factors such as disability and age affecting access to the internet, while ability to access digital spaces does not necessarily translate to comfortable use.<sup>34</sup> Moreover, leaving the final choice of communication method up to the interviewee also reinstates some of the agency lost through semi-imposed interview locations.

### Conclusion

Online interviewing can feel both intimate and distancing. COVID-19 prompted many people to reflect on their past and present lives, relationships, and values. For many, this occurred when their everyday opportunities to talk to others about themselves

were severely diminished. For others, pandemic conditions spurred them to talk more. In March 2021, one of Kate's interviewees was in a state of extended recovery from COVID-19. In counselling to contend with PTSD resulting from a COVID-induced coma, she also discussed her childhood experiences of domestic violence. This woman linked the oral history interview to her other new opportunities to talk through past experiences.

Some people had fewer opportunities to speak in the pandemic, and some more, but women from both camps ended up sharing their stories with us. This comforts us after an extended period of interviewing that often left us exhausted, and troubled about both the emotional wellbeing of our interviewees and the ethical implications of eliciting painful memories when usual sources of support were disrupted. It reminds us of how much is out of our hands as interviewers. There are ways to make remote interviewing easier for all parties, and we hope our experiences are useful to others, but these reflections also bring us up against a perennial truth: oral historians are never in total control.

Remote interviewing compelled us to take a step back and remind ourselves that our interviewees had agency; they chose to share their stories with us and felt it important to do so. Many women had lived with particular experiences for some time and developed their own means of dealing with them. Our schedule required women to reflect on past experiences, but some came with stories to tell beyond these prompts. Increased disclosure did not mean that we took advantage of interviewees. It could mean that we provided opportunities to tell stories that are important to them, and that they believe will be important to others. Ultimately, we may feel protective of

our interviewees and their stories – but we are also very proud of what we and our participants achieved together.

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### **Notes**

<sup>&</sup>lt;sup>1</sup> This was the main focus every article in the recent special issue of *Oral History Review*, vol 47, no 2, 2020, with the exception of Anna F. Kaplan's contribution.

<sup>&</sup>lt;sup>2</sup> Erin Jessee, 'Managing danger in oral historical fieldwork', *Oral History Review*, vol 44, no 2 2017, pp. 322-47.

<sup>&</sup>lt;sup>3</sup> Anna Sheftel and Stacey Zembryzycki (eds), *Oral History Off the Record*, Palgrave Macmillan: New York, 2013.

<sup>&</sup>lt;sup>4</sup> David Caruso, Abigail Perkiss & Janneken Smucker, 'Editors' introduction', *Oral History Review*, vol 47, no 2, 2020, pp 189-92, p 189.

<sup>&</sup>lt;sup>5</sup> Barbara W. Sommer and Mary Kay Quinlan, *The Oral History Manual*, second edition, Lanham, Maryland: AltaMira Press, 2009, p. 62.

<sup>&</sup>lt;sup>6</sup> Our thanks to Kate Clayton (Senior Communications Officer, University of Essex) for her support.

- <sup>9</sup> Jennifer A. Cramer, "First, do no harm": tread carefully where oral history, trauma, and current crises intersect', *Oral History Review*, vol 47, no 2, 2020, pp 203-13, p 205.
- <sup>10</sup> Oral history organisations' guidelines say relatively little about the emotional challenges generated by pandemic interviewing: Oral History Society, 'Remote oral history interviewing', Version 7, 8 February 2021 [web page]. Accessed online at <a href="www.ohs.org.uk/covid-19-remote-recording/">www.ohs.org.uk/covid-19-remote-recording/</a>>, 25 July 2021; Oral History Association, 'Remote interviewing resources', 27 August 2020 [web page]. Accessed online at <a href="www.oralhistory.org/remote-interviewing-resources/">www.oralhistory.org/remote-interviewing-resources/</a>>, 25 July 2021.
- <sup>11</sup> Stephanie J Snow, "I don't know what I'd have done without this project": oral history as a social and therapeutic intervention during COVID-19', in Su-ming Khoo and Helen Kara (eds), *Researching in the Age of COVID-19. Vol 2: Volume II: Care and Resilience*, Bristol: Policy Press, 2020, p 36.
- <sup>12</sup> Stephen M Sloan, 'Behind the "curve": COVID-19, infodemic, and oral history', *Oral History Review*, vol 47, no 2, 2020, pp 193-202, p 196.
- <sup>13</sup> Denise Phillips, "To dream my family tonight": listening to stories of grief and hope among Hazara refugees in Australia', in Mark Cave and Stephen M. Sloan (eds), *Listening on the Edge: Oral History in the Aftermath of Crisis*, New York: Oxford University Press, 2014, pp 48–9.

<sup>&</sup>lt;sup>7</sup> Similar patterns were evident in other projects: between March and May 2020, the Mass Observation Project Panel increased from 483 to 755 writers.

<sup>&</sup>lt;sup>8</sup> Anna Sheftel & Stacey Zembrzycki, 'Slowing down to listen in the digital age: how new technology is changing oral history practice', *Oral History Review*, vol 44, no 1, 2017, pp 94-112, p 96.

<sup>&</sup>lt;sup>14</sup> Snow, 2020, pp 35-38.

<sup>15</sup> Kaplan, 2020, p 220; Sloan, 2020, p 199.

- <sup>18</sup> Anna F Kaplan, 'Cultivating supports while venturing into interviewing during COVID-19', *Oral History Review*, vol 47, no 2, 2020, pp 214-226, p 220. Many of our interviewees were part of the 'sandwich generation' caring for children and elderly relatives, who have faced increased domestic responsibilities during the pandemic.

  <sup>19</sup> Cramer, 2020, 208.
- <sup>20</sup> Sloan, 2020, 198.
- <sup>21</sup> Libby Sander and Oliver Baumann, '5 reasons why Zoom meetings are so exhausting', *The Conversation*, 5 May 2020. Accessed online at <a href="https://theconversation.com/5-reasons-why-zoom-meetings-are-so-exhausting-137404">https://theconversation.com/5-reasons-why-zoom-meetings-are-so-exhausting-137404</a>, 14 July 2021].
- <sup>22</sup> Donald A. Ritchie, *Doing Oral History*, third edition, Oxford: Oxford University Press, 2015, pp 137-160, p 137.
- <sup>23</sup> McLaughlin, 2018, pp 304-320; Ritchie, 2015, pp 138-139.
- <sup>24</sup> April Gallwey, 'The rewards of using archived oral histories in research: the case of the Millennium Memory Bank', *Oral History*, vol 41, no 1, 2013, pp. 37-50, p.40.
- <sup>25</sup> Jodi Oakman et al., 'A rapid review of mental and physical health effects of working at home: how do we optimise health?', *BMC Public Health*, vol 20, no 1825, 2020. Accessed online at

<a href="https://bmcpublichealth.biomedcentral.com/articles/10.1186/s12889-020-09875-z">https://bmcpublichealth.biomedcentral.com/articles/10.1186/s12889-020-09875-z</a>,

14 July 2021; Royal Society for Public Health, 'Survey reveals the mental and

<sup>&</sup>lt;sup>16</sup> Cahal McLaughlin, 'What happens when an interview is filmed? Recording memories from conflict,' *Oral History Review*, vol 45, no 2, 2018, pp 304-320, pp 305, 309.

<sup>&</sup>lt;sup>17</sup> Cramer, 2020, 206.

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- <sup>26</sup> Frances Ryan, 'Covid lockdown opening up world for people with disabilities', *Guardian*, 20 April 2020. Accessed online at
- <a href="https://www.theguardian.com/world/2020/apr/20/covid-lockdown-opening-up-world-for-people-with-disabilities?CMP=Share\_iOSApp\_Other"> , 15 July 2021.</a>
- <sup>27</sup> Jessica Hammett et al., 'Researcher wellbeing: guidelines for history researchers', June 2021. Accessed online at <a href="https://researcherwellbeing.blogs.bristol.ac.uk">https://researcherwellbeing.blogs.bristol.ac.uk</a>, 15 July 2021.
- <sup>28</sup> Erin Jesse, 'The limits of oral history: ethics and methodology amid highly politicized research settings', *Oral History Review*, vol 38, no 2, pp. 287-307, p. 292; British Medical Association, 'Vicarious trauma: signs and strategies for coping', 7 September 2020. Accessed online at <a href="https://www.bma.org.uk/advice-and-support/your-wellbeing/vicarious-trauma/vicarious-trauma-signs-and-strategies-for-coping">https://www.bma.org.uk/advice-and-support/your-wellbeing/vicarious-trauma/vicarious-trauma-signs-and-strategies-for-coping</a>, 12 August 2021; Treatment and Services Adaptation Center, 'Secondary traumatic stress'. Accessed online at

<a href="https://traumaawareschools.org/secondaryStress">https://traumaawareschools.org/secondaryStress</a>>, 12 August 2021.

- <sup>30</sup> Liz H. Strong, 'Shifting focus: interviewers share advice on protecting themselves from harm', *Oral History Review*, vol 48, no 2, pp. 196-215.
- <sup>31</sup> See Snow, 2020, pp 38-40 for an account of her interviewer support sessions.
- <sup>32</sup> Kaplan, 2020, p 219.
- <sup>33</sup> British Library Oral History Team, 'Remote oral history interviewing at the British Library during the Covid-19 pandemic', *Sound and Vision Blog*, 18 February 2021.

<sup>&</sup>lt;sup>29</sup> Hammett et al., 'Researcher Wellbeing', p 4.

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<sup>34</sup> Emma Partlow, 'Prioritizing inclusion, ethical practice and accessibility during a global pandemic: the role of the researcher in mindful decision making', in Su-ming Khoo and Helen Kara (eds), *Researching in the Age of COVID-19. Vol 2: Volume II: Care and Resilience*, Bristol: Policy Press, 2020, pp 123-6.