ANALYSIS OF A FIRST THERAPY INTERVIEW: OBJECTIVES AND METHODS¹

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1. Introduction

Situated at the interface between psychology and linguistics, the work presented here² aims to open new perspectives concerning the study of interactional processes at work during “these very particular conversations” which therapy interviews indeed are. Peculiar to my project is the fact that I approach it not as a linguist but as a clinician, that is to say that priority is given to clinical reflection upon the processes observed, with the tools of linguistics and pragmatics being used only to clarify and focus upon the conversational and language mechanisms which give concrete expression to these processes. (I will return to this question at length when I discuss my methodological choices).

I wish thus to underline the interest of this type of study in the revival of clinical psychology often criticized as much for its conceptual as for its methodological vagueness.

2. Issues under discussion

The fundamental question seems to be that of the objective of the verbal exchange, regardless of the professional practice explored. If we all use the same medium (conversation) to buy bread, explain to the judge why we ignored a red light, have a drink with a friend or speak to our psychoanalyst, it is unlikely that these diverse exchanges will resemble one another. Trognon theorizes upon this point in the following way:

"[although] conversation is [indeed] the medium of the interview, [although] the interlocutory events which take place in interviews do not find their origin in natural conversations but are equally found in them, this does not imply that interviews are conversations: For each type of interview different schools extract and privilege one or another type of interlocutory event and censor others" (1988: 67 — our translation).

In a previous text he specifies that:

"the exchange structures which are preferentially put into action in one interview practice or another

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² The extracts analysed in this piece of work have also been used for another publication in a journal of clinical psychology (Proia in press).

are of course the "ethnomethods" of ordinary interlocutors. However, because of their professional use, they are somehow decontextualized, abstract and thus impossible to manage in a collaborative manner by two interlocutors engaged in a plan of mutual action, hence management falls back onto the interviewer alone" (1991: 202 — our translation).

It appears to me necessary to complete the observations of the author cited above by adding to them that the interviewees accept, for their part, that the overall management of the plan of action be delegated to the interviewer. The fact that they — normally — accept this delegation is linked, on the one hand, to their situation as individuals who address a request (or are obliged to address it) and on the other, to the expertise that they confer upon the professional (or the authority) in front of them.

The interview, in this case, is a first therapy interview. More precisely, it is the first meeting between a team of therapists³ on the one hand and a mother and her young child on the other and it takes place within the framework of a court order made by a judge as a result of a caution for ill-treatment.

The latter points regarding the interactional and institutional context in which this meeting takes place are important, in so far as they specify different interactions which in turn imply, *a priori*, the definition of different objectives and thus a different approach to the interview. Thus if "a first therapy interview" does not constitute the same interaction as an actual therapy interview (Gilliéron 1994; Tanguay 1994⁴), nevertheless, it is just as fundamental to distinguish a "first therapy interview" which has been personally and autonomously requested from a first interview which has been undertaken as a result of advice or an injunction. Each of these situations also constitutes a supplementary level of difficulty in realizing the objective assigned to the encounter and thus to the way in which the interview is handled.

In fact this case, where the therapeutic process is embarked upon in the context of an order, creates a "conflict of objectives" at the interaction level and puts the interviewer in a paradoxical situation⁵. In effect therapists cannot place themselves in a framework other than one in which interviewees initiate the request for therapy, that is to say, are ready to delegate conversational prerogatives, whereas, in this situation nothing leads us to suppose that the interviewee is in fact willing to accept delegation of this sort. In a case such as this, interviewees are, for their part, under constraint to appear and therefore expect to be required to relinquish their prerogatives. Interviewees can also, as we shall see in the corpus being studied (and particularly in the first and fourth sequences), make the most of the paradox in which therapists find themselves in order to escape "conversationally" from the constraint to which they, the interviewees, have been subjected.

³ A therapist in interaction with the family and a co-therapist placed in another room behind a two-way mirror.

⁴ See Proia 1996 and 1998 for methodological incidences of an observation of this sort in the analysis of verbal interactions of one or another of the situation.

⁵ Almost a double-bind situation (Bateson et al. 1981).

The carrying out of the request and the building-up of a therapeutic contract⁶, which form part of the foundations of all therapeutic work, thus take on a particular aspect here. Therefore, it is of course this duality, essential to any patient-therapist initial encounter, that I have decided to observe in the corpus presented here.

It is necessary before continuing, to underline some methodological choices. My approach to the corpus has been determined by a few assumptions which will determine my entry into the corpus. It is in fact as a function of these assumptions that I established the sub-corpus and selected the extracts for more detailed analysis.

What is it that provides the justification for proceeding in this manner? Simply that my aim is, as I have already pointed out, to study a professional practice and not to study "conversation"; hence, I consider that in this case, it is the approach proper to this practice and not the linguistic matter in itself that should determine the methodological orientation of the analysis. The interest inherent in the analysis of language phenomena, when approached from a perspective such as my own, is not to advance the understanding of these phenomena per se, but to objectivize the interactional phenomena inherent in certain practices, phenomena of which professionals do indeed have implicit but not necessarily explicit awareness.

My basic clinical assumption is that it is more important to focus upon auto-referential (centered on the relation between participants) rather than hetero-referential sequences (such as those including descriptions of an external object or narratives of past events). According to a number of professionals (see in particular Dusfrene 1994: 99), auto-referential aspects can be considered the gist of this type of interview, since they constitute the major indicators of the quality of the intersubjective relationship. This does not mean that hetero-referential aspects do not have any importance; however, they are secondary and moreover they depend upon the auto-referential register⁷. It is therefore the auto-referential register which, for reasons of economy, is favored in my analysis (if it is the case that if in doing so, I lose information, I consider this loss to be acceptable with regard to the "cost" which would be incurred in carrying out a detailed analysis of the interview in its entirety).

It is therefore from this perspective that I undertake my first approach to the corpus. In order to do this I use the Geneva hierarchical and functional model (see Roulet et al. 1985; Moeschler 1985) which allows us to organize the material by way of freeing up the general structure of the interview⁸. Once the structure is freed up (cf. appendix 1), one can spot more easily where and in what proportions the objective of the interaction is treated (for example, the objective of an interaction with a baker is probably the purchase of a loaf of bread, however the conversation might easily turn into a brief or indeed lengthy discussion of, let's say, the underground). This macro-analysis also allows us to pick out

⁶ In a first therapy interview, there exists, in effect, the necessity to meet a requirement and to build a therapeutic contract. Although the two aims are strictly dependent, they nevertheless constitute two different "levels of logic" in the interaction (see Proia in press).

⁷ I mean by this to underline the fact that the abundance, nature and quality of the informations about the interviewee's life provided are largely conditioned by what takes place (either positive or negative) at an interactional level.

⁸ My analysis in accordance with the hierarchical and functional model remains rough and general in so far as it serves only to sieze the corpus in its globality. I then use other models of analysis (cf. below).

an eventual deviation from the objective (if, for example, my baker begins to chat me up, this might become the principal element of the conversation and, especially if I am interested, the principal objective of the conversation might be lost: Overwhelmed, I could leave without the bread).

As we have seen, the objective is conflictual and paradoxical. As a first therapy interview, it is necessary to meet a request and to form a therapeutic contract. As a first meeting within the framework of a therapeutic order, for the therapist it is a question of providing the interactional conditions necessary for the realization of this double objective (in fact, to free the interaction from its coercive base).

The hierarchical and functional analysis carried out in a global way shows that these two aspects (negotiation of the therapeutic task and acting upon a request) effectively organize this interview since the first is treated in the principal maxi-exchange which organizes the interview as a whole, and the second in an exchange which is directly subordinate to it. Principal exchanges are dotted with numerous subordinate exchanges centered upon requests for information regarding the family history. I have thus determined a sub-corpus made up of these two exchanges which I have broken down into four phases and on which, with the help of tools made available by pragmatics, I have carried out a detailed analysis — be it first, second or third degree (Levinson 1983; Moeschler & Reboul 1994; Moeschler 1996) or in keeping with the pragmatics of dialogue (Ghiglione and Trognon 1993).

3. Detailed analysis of the four sequences⁹

(1) Sequence number 1 (M1 à I3a) ; (beginning of the interview)

- M1: *Viens à côté de maman*
come and sit next to mum
- E1: *NON*
NO
- M2: *Vous savez, il voulait pas venir...*
You know, he didn't want to come...
- I1: *Pourquoi il voulait pas venir?*
Why didn't he want to come?
- M3a: *Je sais pas. Faut demander à lui hein!*
I don't know. You'll have to ask him that won't you!
- M3b: *Je suis venue pour lui pas pour moi!*
I came for him not for me!
(...) 6 turns
- I5: *Parce que moi si je vous ai demandé à vous de venir tous les deux c'est parce que je voulais vous voir tous les deux.*
Because me, if I asked you yourselves to come the two of you it's because I wanted to see the two of you
- M7: *Ben oui, ben, j'allais pas, il allait venir tout seul (ELLE RIT)*
well yes, well, I wasn't going to, he wasn't going to come on his own (SHE LAUGHS).
- I6a: *Non mais même... euh... je pense que... enfin bon*
no but still... emm...I think that..., well okay

⁹ See appendix 2 for the transcript conventions.

In this sequence the interviewee immediately grants herself the upperhand which, quite obviously, is linked to the therapeutic order. Thus she opens the interview even though the distribution of roles¹⁰ institutionally gives this primacy to the interviewer. In so doing the mother not only operates a role reversal but also, at a second level, annuls the institutional role of the therapist.

Parallel to this, she interprets her child's behavior as being directly addressed to the interviewer and the situation when, in fact, it arises as a direct result of her own injunction. She insists upon this interpretation by using an enunciative particle (Fernandez 1994): *Vous savez* 'you know' which, for the benefit of the addressee, enables the utterance which follows to be underlined, rendering it more difficult to contest. In this way, the mother includes her child in her objection to the interaction and to the framework imposed upon her.

In the end she shows explicitly that she has no intention whatsoever of occupying the role of enunciatee¹¹ in the interaction: *Je suis venue pour lui pas pour moi!* 'I came for him not for me' (M3b) / *Ben oui, ben, j'allais pas, il allait pas venir tout seul* 'Well yes, well, I wasn't going to, he wasn't going to come on his own' (M7) and this is the case even after the interviewer has begun to deploy her strategy of "enunciative involvement" (cf. below).

At first the therapist will not succeed in taking the situation in hand and retrieving her (legitimate) role in the interaction. Her *pourquoi* 'why' will, on the contrary, inadvertently facilitate things for the interviewee, as it allows her assertion to become a true assertion and thus renders the refusal of the child to come to the consultation a realized state of affairs. In effect, the act of making a request does in itself constitute a ratification of the assertion because, in asking for a justification of the state of affairs, she acknowledges this state of affairs to be real (Ghiglione and Trognon 1993) when she could (easily) have contested it by reestablishing the link between this refusal and the mother's injunction which immediately preceded it. Once this ratification is put into effect, the assertion A (p) becomes a presupposition (Levinson 1983; Eco 1991) which is necessarily admissible by the two speakers and which is thus definitively established as true. It is then easy for the mother to refer the interviewer to her son when asked the reason behind his refusal: *Je sais pas. Faut demander à lui hein !* 'I don't know. You'll have to ask him that, won't you?' (M3a). For all this the interviewer does not remain passive towards the interviewee. In particular, she attempts to foil the escape of the interviewee as "enunciatee" by marking the enunciative places in a redundant fashion (a strategy which I have named "enunciative involvement"): *Parce que moi si je vous ai demandé à vous de venir tous les*

¹⁰ See Flahault 1978: 66-67 concerning the coherence which the locutor shows between the role taken on and the rapport imposed by the situation under consideration.

¹¹ In this article, I will often use the notions of enunciator and enunciatee (enunciatee being a personal neologism constructed along locutor/hearer lines). This notion of enunciator is linked to the notion of dialogism (Bakhtine 1984) and mainly to that of polyphony (Durcot 1984). The general idea defended by these authors is that a same locutor can carry several voices which can dialogue between themselves or express themselves (possibly in a contradictory fashion) in turn in a dialogue with an interlocutor. It appears to me that in the same way, a hearer may have many ways of receiving the words of a locutor and of making the latter aware of this (as can be observed several times here). In agreement with the translator I have opted for a translation as near to the French as possible with the terms enunciator/enunciatee.

deux *c'est parce que je voulais vous voir* tous les deux 'Because *me*, if I asked you yourselves to come *the two of you* it's because I wanted to see *the two of you*' (I5).

Two things are apparent in this use of deictics: 1/ The parallel *moi-vous* 'me - you' which underlines the relationship between the interviewer and the interviewee. We can interpret the enunciative underlining as an attempt to build an exclusive and privileged relationship. In effect the indexical redundancy (the massive use of deictics) creates here an insistence upon the current interactional relationship (you and I) as opposed to other interactions in progress (social worker, teacher, pediatric nurse, etc.). 2/ Moreover, the specification *tous les deux* 'the two of you' repeated twice explicitly indicates (to whomsoever might wish to hear) that the consultation is not only addressed to the child.

The mother reacts to the interviewer's initial intervention by refuting the three levels that it contains in a single utterance: *Ben oui, ben, j'allais pas, il allait pas venir tout seul (elle rit)* 'Well yes, well, I wasn't going to, he wasn't going to come on his own (she laughs)' (M7). 1/ She links her presence to the necessity to accompany the child and only to that. 2/ As a result of this, she denies the therapist any possibility of occupying an institutional position which would allow the therapist to make her attend. She thus renders defective the carrying out of the summons (Searle and Vanderveken 1985; Vanderveken 1988), according it the power to summon her son only. 3/ She finally rejects the attempt made by the therapist to set up an authentic interactional relationship between the two of them by pointing at herself as absent at the enunciative level even though she is by necessity present at a locutive level. Furthermore this phrase constitutes a superb head-on attack (Kerbrat-Orecchioni 1989). The laughter could be interpreted as a reinforcement of this attack (mockery) or, on the contrary, as an appeasement.

A head-on attack which apparently causes the interviewer some difficulty. She prepares a counterargument: *Non mais m'ême... euh... je pense que... enfin bon* 'No but still... ehm... I think that...' (I6a) before letting go and moving on to something else. In itself, the fact that the therapist did entertain a counter-argument shows that she ratifies the interviewee's refusal to admit that she might possess the authority necessary to summon her (cf. below).

From an interactional point of view, the use of the two enunciative particles *enfin bon* 'well okay' signals a concession and from a discursive point of view, a thematic progression which allows the therapist to suspend the interaction in progress without having to draw it to a close ('let's leave that for a moment'¹²) and move on to something else ('let's get to know one another'). She has thus indicated verbally that she is suspending the main exchange in order to embark upon a second (lateral) one, returning to the former herself at the beginning of the fourth sequence in an unsuccessful attempt to close it in her favor (more precisely in favor of the therapeutic task).

In fact this first exchange, with its undercurrent of conflict, immediately brings to the surface the paradox in which the therapist finds herself: If she is the therapist, she is not in a position to force the interviewee to attend (therapists wait for patients to present themselves) and if she is in a position to summon the interviewee (delegation of judicial power) then... she is no longer a therapist. Therein lies the ambiguity created by the therapeutic order: We have a mother who is complying with a "therapeutic summons" under the threat of having the custody of her child taken away from her and who, at the

¹² Passages in quotes are paraphrases aimed at explaining the analysis.

same time, takes maximum advantage of the paradoxical situation in which the therapists find themselves, in order to be there as little as possible, that is to say, by refuting her “enunciative presence”. Given this, the therapist attempts to rectify the situation and underline, against the mother's wishes, the role of the latter as enunciatee, probably hoping thus to implicate her in the interaction independently of the order.

(2) Sequence number 2 (I3b-M6c):

- I6b: *moi je...je vous connais pas, on va faire connaissance...*
 ‘me I.I don't know you, we'll get to know each other...’
- I6c: *je voudrais déjà essayer de comprendre un peu déjà où est le problème*
 ‘for now I would like to understand a little for now where the problem is (...)’
- I6d: *je voudrais entendre de vous, et de Raphaël si possible,*
 ‘I would like to hear from you, and from Raphael it possible,’
- I6e: *à votre avis quels sont les problèmes actuels? Qu'est-ce qui vous inquiète*
 ‘in your opinion what are the problems at the moment? what is worrying you’
- M9a: *en ce moment, tout va bien,*
 ‘at the moment, everything is fine.’
- M9b: *c'est pour ça que ça m'embêtait de venir parce que vu qu'il va mieux,*
 ‘that's why it bothered me coming because seeing that he's better, (...)’
- I8: *Depuis quand il va mieux?*
 ‘since when is he better?’
- M10a: *Ca fait euh, ça fait, déjà quand ils sont venus ça allait déjà mieux avant, je leur ai dit, depuis que je suis toute seule avec ça va,*
 ‘It's been ehm, it's been, already when they came he was already better before, I told them, since I've been on my own with him he's all right.’
- M10b: *mais mais euh... c'est pour ça que je veux pas le perturber à nouveau.*
 ‘but but ehm...that's why I don't want to disrupt him again.’
- () 4 turns
- I11a: *Et quand il allait mal,*
 and when he wasn't all right’
- I11b: *expliquez-moi comment.. comment ça allait mal avant?*
 ‘explain to me how...how things weren't all right before?’
- M13a: *C'est pas qu'il allait mal, c'est que..*
 ‘It isn't that he wasn't all right, it's that..’
- M13b: *il est extrêmement jaloux pire qu'un homme, c'est ça le problème*
 ‘He's extremely jealous worse than a man, that's the problem’
- M13c: *enfin c'est ce qu'on a discuté avec l'AS.*
 ‘well that's what we talked about with the social worker’
- () 26 turns

This interaction constitutes a new interaction in so far as the therapist, having (momentarily) put aside the mother's remarks (and the underlying conflict regarding the injunction), attempts to open the interview in an “orthodox” manner. Orthodox on two levels in fact: Firstly because she recovers the initiative within the exchange: *Moi je...je vous connais pas, on va faire connaissance...* ‘me I...I don't know you, we'll get to know each other...’ (I6b) and secondly by carrying out an opening in accordance with the orthodoxy of family strategic therapy interviews (Miermont 1994): *Je voudrais déjà essayer de comprendre un peu déjà où est le problème (...)* ‘for now I would like to understand a little for now where the problem is (...)’ (I6c).

Once the preliminaries have been carried out, thus getting the interview back on track, the interviewer states the leading act of the intervention in the form of a directive that

she immediately paraphrases: *à votre avis quels sont les problèmes actuels? Qu'est-ce qui vous inquiète* 'in your opinion what are the problems at the moment? What is worrying you' (I6e).

Two points should be noted here: On the one hand this leading act is prepared for by an intermediary act which, once again, aims at involving the interviewee in the consultation situation from an enunciative point of view: *Je voudrais entendre de vous, et de Raphaël si possible* 'I would like to hear from you, and from Raphael if possible' (I6d) and on the other hand, we find this strategy being repeated in the formulation itself of the leading act given the interpolated clause *à votre avis* 'in your opinion' and equally, given the introduction of a formula directly addressed to the interviewee coupled with the use of a experienter-verb (to worry) in the paraphrase which immediately follows.

The mother's reply contains two acts: 1/ a reactive act: *En ce moment, tout va bien* 'at the moment, everything is fine' (M9a) which meets the requirements of the initiative act of the interviewee but constitutes a total closure of the subject approached by the latter (that of current problems) ; 2/ an initiative act: *C'est pour ça que ça m'embêtait de venir parce que vu qu'il va mieux, (...)* 'that's why it bothered me coming because seeing that he's better' (M9b) which initiates a new subject of conversation (the desire not to come) which is moreover but the verbalization of what until then, had been conversationally put into action by the interviewee. It should be noted that she expresses a desire with regard to the psychotherapy, in this case that it should not take place.

The verbalization (not realization) of this desire is an important moment in the interview from an interactional (and clinical) point of view because, for the first time, having expressed her desire regarding the therapy, the mother accepts to take on her role as enunciator (thus to be "present" at the interview). Therefore, as paradoxical as it may seem, it can be considered that for the first time, through the expression of this desire, she is asserting "a demand"... for non-therapy. In any case, the mother has passed from an awareness of the situation, to an expression of her desire regarding that situation. She thus finds herself inside and no longer outside the proposed framework.

With regard to this initiative act the therapist makes a skipping connection (Trognon 1984) by linking up to M9a and not to M9b, rendering the latter null and void. Although this skipping connection enables her to keep control of the exchange and to exclude the topic initiated by the mother, it remains that through her question, once again she has converted the mother's remarks into truths. Just as before, her question: *Depuis quand il va mieux?* 'since when is he better?' (I8) enables the status of the assertion *il va mieux* 'he's better' to slide from posed to presupposed and in so doing, makes this remark a successful and satisfied assertive act.

The same power struggle takes place in the following exchange: The mother denies any difficulty: *Depuis que je suis toute seule avec ça va*, 'since I have been on my own with him he's all right' (M10a) in order implicitly to state once gain her desire not to embark upon any therapy: *Mais mais euh... c'est pour ça que je veux pas le perturber à nouveau (en venant vous voir)* 'but but ehm..., that's why I don't want to disrupt him again (by coming to see you)' (M10b).

It is interesting to note that on the one hand, she sees the consultation as disruptive and on the other, the "again" places on the same level previous disruptions (it should not be forgotten that this is a case of mistreatment) and possible disruption as a result of the consultation. Here once again the therapist replies with a skipping connection, refusing to

hear the interviewee's wishes. She engages in "the time when he wasn't all right" which, a priori, cannot possibly be disputed for two reasons. The first is contextual. It would, in effect, be difficult to contest this state of affairs with regard to its results (notification of the judge, intervention by the educational team, etc.); the second is interlocutory in so far as the therapist has, in the organization of her statement, explicitly given to this information the status of a presupposition since, without ambiguity, the leading act: *Expliquez-moi comment.. comment ça allait mal avant?* 'explain to me how...how things weren't all right before' (I11b) focuses upon on the nature of the child's ill-being. The existence of this ill-being is, for its part, only brought up by way of contextual information (thus presupposed to be true) in a preparatory act of an assertive nature: *Et quand il allait mal*, 'and when he wasn't all right' (I11a)¹³

A double contextual and interlocutory locking mechanism which does not stop the mother from blithely contesting this presupposition: *C'est pas qu'il allait mal, c'est que..* 'it isn't that he wasn't all right, ..' (M13a)¹⁴. It is essential to notice here that the interviewee is very gifted in the manipulation of interlocutory logic and thus in its subversion (...in its perversion even?).

Nevertheless, she will momentarily concede a problem to the therapist (is it a question of "keeping her happy"?) in bringing up her son's jealousy. Referring enunciatively to others who have interceded in her case and particularly to the social worker is a strategy often used by this woman who backs up her words: *Enfin c'est ce qu'on a discuté avec l'AS* '...well it's what we talked about with the social worker' (M13c) by enunciatively passing the responsibility for them on to the shoulders of others who are "on the same side" as the interviewer (social services) thus making them difficult to contest. By backing herself up with the social worker, not only is the topic she embarks upon difficult for the therapist to contest (as it comes from the same team). This topic does not "cost" her very much as it only involves her son and not her...thus confirming that she has come for him and not for both of them.

Before drawing the analysis of this sequence to a close, it should be confirmed that the assertion contained in M13b: *Il est extrêmement jaloux pire qu'un homme, c'est ça le problème* 'He is extremely jealous, worse than a man, that's the problem' can also be interpreted as a directive addressed to the therapist. In effect, one can attach to the expression "that's the problem" the implication "that and nothing else". If one accepts this idea, M13b becomes an implicit directive of the type: "if you want to talk about something, that's what we can talk about and nothing else". An injunction that the therapist accepts, thus permitting the opening of the informative sequence.

(3) Sequence number 3 (I29a-I33):

I29a: *qu'est-ce que vous en pensez vous,*
'what do you think about it yourself'

¹³ We know that information which has the status of a presupposition can not, logically, be called into question and as a consequence, to contest this type of information would constitute a head on attack for the addressee (Kerbrat-Orecchioni 1986).

¹⁴ It should be said here that much is at stake as it is in fact a question of recognizing the ill-treatment suffered by the child.

- I29b: " en fait.euh... vous dites: "je veux pas que ça recommence" en fait...
'em... you say: "I don't want it to start again" in fact...'
- I29c: *votre problème c'est pas tellement maintenant, c'est plutôt que vous avez peur que ça recommence (...) par rapport à votre ami, que ça recommence par rapport au bébé... euh?*
'your problem is not so much now, it's more that you are frightened that it will start again (...) regarding your friend, that it will start again regarding the baby .huh?'
- M32a: Ben... c'est-à-dire moi je veux pas... pfff qu'il pique sans arrêt des crises de jalousie...
'well ..I mean me I don't want to...pfft pfft him to constantly throw jealous tantrums'
- M32b: *il faut me comprendre aussi quand même...*
you have to see it from my point of view too all the same...'
- M32c: *comme Mme O m'a dit euh je vais pas rester toute ma vie...je vais pas rester toute seule, je vais pas attendre qu'il ait 18 ans pour me mettre avec quelqu'un.*
'like Mrs O told me huh I'm not going to spend my whole life... I'm not going to stay on my own, I'm not going to wait until he's 18 to get together with someone'.
- M32d: *Mais il le prend très bien pour le moment [la présence du nouvel ami],*
'but he's taking it very well for now [the presence of a new boyfriend]'
- M32e: *mais il faut...ah mon fils il est comme ça, il faut rien qu'on lui dise*
'but he does... ah my son he's like that, he doesn't do anything you tell him'
- M32f: *c'est-à-dire quand on lui dit quelque chose, il dit c'est moi qui commande... c'est son truc qu'il a ... dès que...*
'that's to say when you say something to him, he says it's me who decides... it's his thing... as soon as'
- I30: *avec vous ou avec tout le monde?*
'with you or with everyone?'
- M33: *non, avec moi (...)*
'no, with me (...)'
- I31: *vous avez toujours cédé ou euh il y a eu à un moment où vous avez commencé à céder comme ça? Comment c'était quand ... il était petit*
'you have always given in or em was there a time when you started to give in like that? How was it when...he was little'
- M34: *c'était pareil*
'it was the same'
- I 32: *toujours pareil?*
'always the same?'
- M 35: *oui*
'yes'
- I33: *parce que ... quel âge il avait Raphaël quand vous et son papa vous vous êtes séparés?*
'because.. how old was Raphael when you and his father were separated?'
- (...) 276 turns

At the beginning of this sequence, the interviewer redefined, with the help of a certain number of preparatory dots, what the interviewee's problem could be: That it might "start again". The relative indetermination of this thematic focusing constitutes a real opening for the mother, moreover she picks up on herself immediately to state her desire : *Ben... c'est-à-dire moi je veux pas... pfff qu'il pique sans arrêt des crises de jalousies* 'I don't want him to constantly throw jealous tantrums' (M32a).

In her following two remarks she makes explicit the motive behind her demand ("to have a boyfriend"). Here, each remark contains an aspect which is important to our proposal. On the one hand, she refers to the social worker (Mrs O) as an enunciative back up to what she says: *Comme Mme O m'a dit euh je vais pas rester toute ma vie...je vais pas rester toute seule, je vais pas attendre qu'il ait 18 ans pour me mettre avec quelqu'un.* 'like Mrs O told me huh I'm not going to spend my whole life... I'm not going to stay on my own'

(M32c). On the other hand, she seeks the support of the interlocutor in the expression of this demand: *Il faut me comprendre aussi quand même...* 'you have to see it from my point of view too all the same...' (M32b). The *tout de même* 'all the same' signals an implicit demand for a concession addressed directly to the interlocutor who is asked to see things from the other's point of view.

Thus we notice that although until now the interviewee has not taken on her role of enunciator except to express her desire not to come (thus a non-demand for therapeutic help), for the first time she expresses a positive desire with regard to the interaction and what is more, she asks for help. In this instance, she wants her interlocutor to support her in making her son accept that she needs to have a boyfriend but she also wants support to make the social services accept this same need.

It should be underlined that the mother encloses her demand for help by enwrapping it, from an interlocutory point of view, in her intervention as a whole. In effect, by introducing a counterargument, *Il le prend très bien pour le moment* 'he's taking it very well for now' (M32d), the contradicting conjunction *mais* 'but', implicitly induces the reasoned conclusion that "therefore, there is no need to talk about it". In other words, the counter-direction of the second argument renders the first null and void and imposes, from an interlocutory point of view, the pursuit of the second.

Although the second *mais* 'but' also infers a counterargument, it does not have quite the same value as the first. In effect, it does not refute the preceding argument (therefore it does not render the latter null and void) but gives to it the conditional determiner for its value as the truth: "he takes it very well *if* you don't say anything to him". From this two possible worlds emerge (Eco 1979) ; either being unable to make the child obey her is of no importance to the mother and in this case, her positive demand remains enclosed as in effect everything is going well: "my son doesn't listen but I don't care, what is important is that I get to keep my new boyfriend"; or, being unable to make the child obey her is difficult for the mother and thus her positive demand is conversationally put back into circulation: "of course I have a new boyfriend but the problem of my son's disobedience remains".

We are at the crucial point in the interview because finally a positive desire (a demand for help which concerns both her and her son and no longer her son only) has been expressed by the interviewee and this demand is "conversationally available"; i.e. the interlocutor has, on the interlocutory linking level, every opportunity to grasp this demand. This is what the therapist does in the following turns by beginning to explore this question of obedience (cf. I30-M35). However, a blockage occurs in the therapist's following intervention: *Parce que ... quel âge il avait Raphaël quand vous et son papa vous vous êtes séparés?* 'because.. how old was Raphael when you and his father were separated?' (I33) where we perceive, in the silence which follows the *parce que* 'because', that the therapist has lost her train of thought. It is impossible to speculate upon what caused this interruption but it is important to notice that the question which follows it, by allowing the opening of a long informative sequence of 276 turns, provokes the smoothing over of the interview, without the topic of "making the child obey" being elaborated upon. (The co-therapist makes no mistake in attempting to restart the interview on this precise point after the interruption.)

(4) Sequence number 4 (I154-I185):

- I154: *Donc vous disiez que vous vous étiez surprise qu'on veuille vous voir maintenant ensemble?*
 'so you were saying that you were surprised that we wanted to see you together now?'
- M14: *Ben.. ça c'est pas tellement le moment en ce moment, hein*
 'Well..it's not really the right time at the moment, is it'
- I155: *oui !*
 'yes!'
- M149: *Comme je suis déjà pas bien en plus de ça la sage-femme elle est venue hier, elle m'a dit euh.. il faut éviter que je marche de trop (...)*
 'Because I'm not too well yet as it is and not only that the midwife she came' yesterday, she told me em..I have to avoid walking too much (...)
- (...) 3 turns
- I158: *A votre avis euh.. qu'est-ce qui inquiète euh.. Mme O. Mme Z. euh.. en ce qui concerne Raphaël?*
 'In your opinion em. what is worrying emm..Mrs O. Mrs Z. em. regarding Raphael?'
- M152: *enfin, c'est euh.. pour quand l'enfant va être là*
 'well, its em..about when the baby is here'
- I159: *Un peu comme vous disiez vous un peu prévenir... plutôt que guérir*
 'a bit just as you said a bit to prevent...rather than cure'
- M153: *Ben c'était marqué ça sur la décision du Juge hein, c'est pour euh prévenir C'est jusqu'aux 4 mois du bébé toutes manières hein c'est pour pendant 9 mois.*
 'well that's what was written on the court order wasn't it, it's to emm prevent' emm.euh It's until the baby is 4 months anyway isn't it it's for during 9 months.
- (...) 47 turns
- I184: *alors euh. Qu'est-ce qui pourrait vous inquiéter euh...*
 'well then. What could be worrying you then emm...'
- M178: *moi rien. Parce que pour l'instant ça va bien c'est pour ça que je euh. je voulais pas.. parce que depuis hier je lui ai dit qu'on venait pour euh..*
 'me nothing. Because for now everything's fine that's why I emm....because since yesterday I told him we were coming for emm..'
- I185a: *oui, mais on est là déjà pour faire le point, pour voir comment on va euh..*
 'yes, but were are here to take stock of the situation, to see how we are emm..'
- I185b: *Parce que de toutes façons vous avez une mesure d'AEMO¹⁵ jusqu'aux 4 mois du bébé*
 'Because in any case you are under a Supervision Order until the baby is four months old'
- I185c: *donc euh cette mesure d'AEMO il va falloir en profiter pour euh.. pour faire un travail,*
 'so emm this Supervision Order¹⁶ you will have to get the most out of it that you can...to work on things'
- I185d: *donc euh.. on va essayer de comprendre un peu ce qui se passe euh.. voir comment on peut travailler.*
 'so em.,we will try and make sense a bit of what is going on emm...see how we can work'
- I185e: *Bon écoutez, on va s'arrêter là deux minutes, je vais voir mon collègue, pour discuter avec lui pis je reviens.*
 'Good listen...we'll stop here for ten minutes, I am going to see my colleague, to talk with him and then I'll come back.'
- Cut (...) 76 turns.

By using *donc* 'so' to introduce her last intervention, the therapist closes the lateral

¹⁵ Action Educative en Milieu Ouvert

¹⁶ When under a Supervision order parents are closely monitored by Social Services but maintain the custody of their children.

exchange which stretched over approximately 400 turns to return to the principal exchange which was suspended at the end of the first sequence. Utterance I154 from this sequence *Donc vous disiez que vous vous étiez surprise qu'on veuille vous voir maintenant ensemble?* 'so you were saying that you were surprised that we wanted to see you together now?' (I154) also links up to utterance M7 from the first sequence *Ben oui, ben, j'allais pas, il allait pas venir tout seul* 'Well yes, well I wasn't going to, he wasn't going to come on his own' (M7 -first sequence).

Furthermore, we could say that this *donc* 'so' implicitly has another function which corresponds to the one which it usually has within an argumentation: That of a deduction (therefore). It can be paraphrased here in the form of a question: "After all that has just been said, might it therefore be possible that you are surprised that we wish to see you together?". This hypothesis gives coherence to the exchange in its totality in so far as it underlines why it was necessary to have passed through the lateral exchange (to explore all the reasons for coming to the consultation) in order to resolve the question opened in the principal exchange (not wanting to attend).

Although we can thus legitimately envisage what the interviewer is implying, it is important to note that the interviewee does not pick up on this and very probably, everything that has been said is for her null and void. Once again, she explores in depth the possibilities offered at the interlocutory level to block the situation. In this instance, she exploits the fact that *maintenant* 'now' and *ensemble* 'together' have the same status in the interviewer's utterance. They are, in effect, put on the same level by the therapist although the surprise is linked only to *ensemble* 'together'. Therefore, once one and the other are linked to the surprise, the interlocutor has the right to continue from whichever she chooses. The interviewee thus takes advantage of this to continue with *en ce moment* 'at the moment' putting forward the advanced stage of her pregnancy to justify her rejection of the consultation. With the same blow she nullifies the underlying question of *ensemble* 'together' and about one hour of the interview!

In order to attempt to free the interview from deadlock, the therapist will try to use to her advantage a tactic she has often used before. She will in effect ask the interviewee to echo the words of the social worker and the pediatric nurse *A votre avis euh.. qu'est-ce qui inquiète euh.. Mme O. Mme Z. euh.. en ce qui concerne Raphaël* 'In your opinion emm what is worrying emm..Mrs O. Mrs.Z. emm..regarding Raphael?' (I158) when we have seen that several times, the interviewee has used the same people as enunciative allies. The therapist can thus hope that the association of the enunciatees (social worker + mother) will be reversed. However, nothing of the sort takes place and although the mother responds to her request: *Enfin, c'est euh.. pour quand l'enfant va être là* 'well, it's emm about when the baby arrives' (M152), she is not easily taken in when the therapist attempts to make her shoulder this enunciation: *Un peu comme vous disiez vous un peu prévenir... plutôt que guérir* 'a bit just as you said a bit to prevent...rather than cure' (I159). The indexical redundancy used once again by the interviewer, does not alter the fact that the mother, far from shouldering this enunciation, refers back to the person from whom it originated: *The judge Ben c'était marqué ça sur la décision du Juge hein* 'well that's what was written on the judge's decision wasn't it (...)' (M153).

Here we see clearly how the interviewee explicitly signals the framework within which she finds herself. She is in no way involved in a therapeutic process (although she entered into it in the third sequence, she quickly extracted herself), she simply had to obey

a judge's decision...this she has done (sic).

Having gained nothing in the end, the therapist reembarks upon an information sequence only to find herself once again at a dead end 45 turns later. We then see the therapist reattempt the slopes of "therapeutic interaction" by asking the interviewee what could be worrying her. Nothing of course (cf I184/M178). This sequence, the first part of which is unnecessary to study in detail as it resembles those already analyzed, is very interesting from its collapse in I185. Moreover, despite resuming after the break, this intervention represents the real downfall of the interview as a whole. The intervention after the break, which is not analyzed here, brings nothing new because even though the co-therapist attempts to relaunch the interview with the problem of the relationship between the mother and the son, this relaunch is ineffective (it is, by this time, probably too late).

Let us look at intervention I185 in detail. After about 500 turns, the therapist can no longer ignore the expression of the mother's wishes in the way she has done before i.e. by making skipping connections (cf. above). She thus justifies the unacceptability of the position taken by the interviewee by raising a certain number of arguments.

I185 reveals itself to be a good illustration of the problems discussed by Moeschler (1996: 220-231) of *parce que* 'because' as a conjunction and *parce que* 'because' as a discourse marker. Here, we are more inclined to see it as a conjunction given the distance between the two propositional contents¹⁷. The consequence of this analysis is that the two segments then become units of discourse (ibid.222) and we wonder which of these segments contains the leading act, it could be either I185a or I185b (ibid: 222). This is not too important from a strictly conversational point of view as in fact the leading act is carried in I185e which momentarily closes the interview. On the other hand, everything retains its importance from an interactional point of view in so far as the leading act, considering the interaction as a whole (the second half of the interview all that follows it), is either I185a or I185b. Thus, at a therapeutic level, it is not insignificant that the interviewer produces a directive linked to the encounter ("we are here to take stock of the situation") with the therapeutic order as an argument (to which, in a way, they are both subject), or that she shoulders the therapeutic order by reproducing it as the leading act ("because anyway you are under a Supervision Order"); in the latter case, she is on the side of those who have imposed the therapeutic process, i.e. judicial power. Although it is impossible for us to clarify this ambiguity (it would have been interesting to see which segment the therapist would have linked up to), it should nevertheless be pointed out that the therapist resituates herself within the framework that the mother reintroduced in M153 (the therapeutic order) and establishes the type of interactional rapport which is linked to it, one of constraint, even though she has attempted, until then, to distance herself from it by involving the mother in the demand process regarding the psychotherapy.

It is not surprising therefore, to see the therapist leaving the room to consult her colleague. As I have already stated, the latter attempts unsuccessfully to relaunch the interview by raising the question of the mother-child relationship.

¹⁷ "(...) the smaller the distance between propositional contents, the more semantic the reading, inversely, the greater the distance between propositional contents, the more pragmatic the reading" (ibid: 220).

5. Conclusion

With this study, I wanted to show how a researcher in clinical and pathological psychology was able to use the tools offered by pragmatics in order to develop a research methodology for a professional practice as particular as the psychological and therapy interview. Research which has, for lack of other alternatives, been limited to the accounts given by practitioners or to the pursuit of questionable hypothetical criteria in order to evaluate the efficacy of psychotherapies (Moro and Lachal 1996). With the help of pragmatics, it becomes a question of identifying and analyzing the active processes of psychological and therapeutic practice (or on the contrary, those processes which can hinder it).

In this corpus it can be clearly seen how the conflict between the therapeutic objective (to make possible the elaboration of a demand) and the objective of the injunction are deployed and how, as a result of this, the therapeutic order puts the therapists in a paradoxical situation. Furthermore, not only have we been able to follow step by step those moments (and hence the discursive processes) which permitted the therapist to approach the realization of the therapeutic objective, but also those moments which distanced it as in I33 and II85.

It is probable that the use of certain concepts in this study could appear to linguists to be precarious or approximate (there is still a lot of work to do). However, here my aim is towards a more global evaluation of the processes involved, given that linguists, who have worked extensively on corpora as specific as the one presented here, are little used to seeing linguistic analyses infiltrated by presuppositions which are exterior to linguistics itself.

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Appendix 1: General structure of the interview

Sequence 1
leading act M3b: "I came for him not for me!!"
×
Sequence 2
leading act I6e: in your opinion what are the problems at the moment?
×
Sequence 3
leading act I29c: your problem is not so much now, it's more that you are frightened that it will start again
—
Sequence 4
leading act I154: so you were saying that you were surprised that we wanted to see you together now?

Appendix 2: Transcript conventions

M: mother

I: therapist (woman)

E: child

...: pauses (the number of dots indicates the duration)

In capital letters: words spoken with a loud voice

(...): cut in one or several interventions or speech acts which occurred during the interview

The parts marked a,b,c correspond to the different speech acts of an intervention. The frequent cutting has been carried out not as a matter of easy presentation but in order to concentrate on the most important interventions which have been subjected to a more detailed analysis.