1 Communication & Medicine e**∮**UINOX 1 2 2 Volume 16(2) (2019), 1–15 3 3 Copyright © 2020 Equinox Publishing Ltd 4 4 5 5 http://equinoxpub.com 6 6 https://doi.org/10.1558/cam.00000 7 7 8 Change in family therapy: Accomplishing authoritative and 9 moral positions through interaction 10 10 11 11 PETER MUNTIGL^{1, 2} AND ADAM O. HORVATH² 12 (1) Simon Fraser University, Canada; (2) Ghent University, Belgium 13 14 14 15 15 16 16 17 17 18 18 19 19 20 Abstract Introduction 20 21 21 22 A fundamental theoretical premise in structural

23 family therapy (SFT) is that changes in individual 24 members and improvements in intra-familial rela-25 tions are realized by repairing the family structure. Problems in family relations are conceptualized in terms of individuals taking on inappropriate roles (e.g., children acting as if they were parents) and the boundaries between parental executive levels and the children/sibling level being unclear, too rigid or highly permeable. The therapist's role is to temporarily engage (join) with the family members in a way that generates in-session interactions that may exemplify a more desirable family structure. While the theory supporting these interventions is well developed, there has been little work done on explicating how such tasks may be interactively accomplished in clinical practice. We show how a master therapist in SFT accomplishes some of these transformations during a single therapy session with a mother and daughter. Drawing from the methods of conversation analysis (CA), we focus on the discursive resources through which the therapist is able to readjust the role relationships between the mother and her daughter (i.e., in such a way that the mother can adopt a more agentive position vis-a-vis her children) and how the therapist's actions index core SFT principles of restructuring the family.

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Keywords: affiliation; alliance; authority; conversation analysis; epistemics; structural family therapy

The overarching goal of our research program is to 22 examine how family therapy practices designed to 23 effect changes in family structures are realized dis- 24

cursively through interactions in clinical settings. 25 In this study we focus specifically on interventions 26 aimed at altering the relational structure of a family 27 unit and to create a new, more functional, 'moral 28 order'.1

The goal of restructuring relationships in the 30 intimate nexus of the client as a means of promot- 31 ing change is most explicitly articulated in systemic 32 therapies which are predicated on the premise that 33 an individual's therapeutic progress is contingent 34 on shifts in their relational context (Watzlawick 35 and Jackson 2010 [1964]). One of the most direct 36 implementations of this concept is in structural 37 family therapy (SFT), an evidence-based supported 38 treatment frequently recommended for a variety of 39 difficult-to-treat psychological problems, such as 40 substance abuse and juvenile behavioral problems 41 (Navarre 1998; Vetere 2001; Fishman and Fishman 42 2003).

Salvador Minuchin, the founding theoretician 44 of SFT, argued that healthy individual function is 45 facilitated by clear hierarchical familial relation- 46 ships and well-defined but flexible boundaries 47 between generations (Minuchin and Nichols 48 1998). He postulated that the ideal structure or 49



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moral order in such families operates in terms of parents functioning as agents at the executive level, establishing reasonable and clear boundaries that provide both limits and an appropriate degree of independence for the children. A lack of clear roles and responsibilities among family members (structure), poor, unclear communication or 'boundary violations' - that is, children assuming executive roles or parents vacating the executive 10 role – are considered root problems that produce dysfunction and psychological distress for the individuals in the family system (Aponte 1992; Fishman and Fishman 2003). These structural relational problems are seen as primary targets 15 for therapeutic intervention. The SFT therapist's task, therefore, is to restructure the disorganized/ dysfunctional family system and to promote clear communication and re-alignments, especially across the generations, that more closely conform 20 to the moral order described above.

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The family structure in SFT is seen as constructed and maintained by the everyday interactions between family members (Minuchin 24 1974). For this reason, family therapists pay close attention to and try to set in motion so-called dysfunctional family interactions that exemplify misalignments and problematic role expectations displays that are termed enactments in SFT (Fishman and Fishman 2003). By witnessing these unproductive interactive scenarios in situ, the therapist is in a strong position to respond through interventions fostering relational re-alignments that work to destabilize or block the family's usual relational patterns. While the theory supporting these interventions is well developed, and the goals of these interventions are clearly articulated, there has been little work done on explicating how such tasks may be interactively accomplished in clinical practice.

Drawing from the methods of conversation 41 analysis (CA) (Sacks 1992; Schegloff 2007), our aim for this paper is to show how a master therapist in SFT interactively works in a therapy session at readjusting the role relationships between a mother and her daughter, in such a way that the mother 45 can adopt a more agentive position vis-a-vis her children. In particular, we focus on how the therapist's social actions may index particular stances with regard to who has primary entitlements to knowledge (i.e., epistemics), who has authority

to direct the conversation (i.e., deontics) and the 1 degree to which a family member's talk is endorsed 2 (i.e., affiliation). Our interest is in exploring how 3 these stance-taking practices may open up possi- 4 bilities for restructuring the family.

Following a brief literature review and a descrip- 6 tion of the data and methodology, we turn to our 7 analysis by showing the interactional practices in 8 which the therapist (a) directs the conversation 9 between the family members, helping them to take 10 up and negotiate different family role positions, and 11 (b) endorses the mother's entitlement to knowledge 12 and parental authority.

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Literature review: structural family therapy and conversation analysis

A number of techniques have been identified in 19 SFT to bring about changes in family structure. 20 One of the central tasks for SFT therapists – but 21 also for family therapists in general – is to build 22 alliances with family members (Sutherland and 23 Couture 2007; Muntigl and Horvath 2016). For 24 instance, therapists regularly adopt practices of 25 joining by entering the family system to create a 26 new therapeutic system that includes the therapist 27 and is often achieved through affiliative practices 28 of confirming clients' distress. The SFT therapist 29 also pays close attention to how families display 30 dysfunctional interactional styles, problematic role 31 expectations and inappropriate boundaries within 32 family subsystems (e.g., parental, sibling, individ- 33 ual). These displays, as noted above termed enact- 34 ments (Minuchin 1974; Aponte 1992; Fishman and 35 Fishman 2003), are considered valuable because 36 they provide therapists with opportunities, in the 37 here-and-now of the therapy session, to unbalance 38 or block the family's usual relational pattern and 39 to 'search for competence' in order that the family 40 discover more desirable functional structures 41 (Aponte 1992).

More recently, CA has been used to explicate 43 how therapists and family members organize 44 their social conduct to perform various kinds of 45 therapeutic work. Buttny (2004), for example, has 46 argued that problem-tellings, which form a central 47 part of family therapy talk, implicate moral frame- 48 works that involve social sanction (e.g., blame/ 49 disapproval or praise/approval). Recent work by 50



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1 O'Reilly (2014) and O'Reilly and Lester (2016) 2 has shown how blame and accountability arise in talk when parents work to display themselves as 'good parents'. These researchers have found that parents would attribute blame to their children or would make a show of their appropriate parenting strategies. Family therapists, in response to such interactions, would work to reframe the issues of 9 blame by focusing instead on empathy, feelings and praising the family members. When talk involves blame, the allegiances among family members and the alliance between family members and a therapist may be placed under stress (Sutherland 14 and Couture 2007; Muntigl and Horvath 2016).

15 Applying CA analysis to SFT, it has been shown 16 how a therapist may work to restore affiliation and a strengthened alliance by orienting to the blamed family member in various ways: identifying with the person's distress, praising the person's actions and disagreeing with self-deprecating talk (Muntigl and Horvath 2016; Horvath and Muntigl 2018). Problem-tellings involving conflict and blame may also lead to conversational impasses, but studies have illustrated how these impasses may also lead to 'forward moving' or change episodes in which family members may bridge their differences (Couture 2006, 2007). For example, in order to move the conversation forward during stuck events, family therapists can make use of interactional resources to collectively solicit family members' points of view or to respond in ways that indirectly lure a family member to provide more information or consider an alternate perspective 34 (Couture 2007).

35 In order to examine issues of alliance stress, 36 blame and accountability and change from an interactional and discursive perspective, certain concepts within CA have proven to be especially useful. These are affiliation, epistemic authority and deontic authority. Affiliative actions are prosocial and work to uphold social relations (Stivers et al. 2011; Lindström and Sorjonen 2013). Generally, responsive actions such as agreement, confirmation and compliance function in an affiliative manner. Studies in psychotherapy and family therapy have been examining how ascriptions of blame or certain client actions such as disagreement can work to disaffiliate and how therapists can respond in ways that re-establish affiliation 50 between them and their clients (Muntigl et al.

2013; Muntigl and Horvath 2014; Muntigl and 1 Horvath 2016).

Epistemic authority concerns how speakers may 3 display entitlements to knowledge and experience 4 (Sacks 1992; Heritage 2012). For example, parents 5 may or may not position themselves as having 6 specialized access and primary rights in relation 7 to their personal experience, with the added impli-8 cation that they are responsible for the difficulties 9 that beset the family. Further, empathic responses 10 from therapists may work to endorse parents' 11 epistemic authority, especially in cases where they 12 have demonstrated uncertainty about the appro- 13 priateness of their actions (Muntigl and Horvath 14 2016). It has also been shown that children may use 15 epistemic resources such as 'I dunno' as an avoid- 16 ance strategy in which they resist attempts from 17 counsellors to probe their feelings (Hutchby 2007). 18

Deontic authority is often realized in directive 19 actions that propose what can or cannot be done, 20 such as requests, offers, proposals and suggestions 21 (Stevanovic and Svennevig 2015). Therapist pro- 22 posals for behavioral change can be a delicate activ- 23 ity, and it is not uncommon for clients to resist such 24 proposals (Ekberg and LeCouteur 2015; Muntigl 25 et al. 2017). Within SFT, therapists regularly exert 26 control on the conversation by rearranging the 27 setting (e.g., determining who sits where) and by 28 having family members enact transactional pat- 29 terns (Minuchin 1974).

Data and method

34 For this study we have analyzed a 50-minute 35 videotaped session conducted by Dr Minuchin. 36 This session was recorded with volunteer clinical 37 clients, currently in treatment, and subsequently 38 used by Minuchin in a teaching seminar for pro- 39 fessional family therapists. As well as Minuchin, 40 the participants in the interview included Suzanne 41 (35), a single parent and recovering alcoholic; her 42 daughter Marcy (12); and Jenny, the family's regular 43 therapist.² The vocal and non-vocal features of the 44 complete session were transcribed according to the 45 CA conventions from Hepburn and Bolden (2013) 46 see Appendix for transcription conventions used 47 in this paper. One of the core issues of the session 48 concerns family role relations: whereas Suzanne 49 has difficulty in recognizing and carrying out her 50



parental entitlements and responsibilities, her daughter Marcy seems ambivalent in endorsing her mother as having authority over her.

4 In contrast to other studies in systemic therapy that illustrate how parents position themselves as 'good parents' and how blame is ascribed to the child (for example, see O'Reilly 2014; O'Reilly and Lester 2016), we were interested instead in exploring how a parent displays difficulty in taking 10 an authoritative stance and how this difficulty may lead to implications of blame and accountability (i.e., it is the mother's fault) and to conversational impasses. We used the methods and concepts 14 borrowed from CA to explore how family restruc-15 turing is accomplished in SFT interactions. Our primary focus was on the interactional practices that draw attention to the mother's parental authority for agentive action and on the therapist's actions designed to realize an affiliative and secure context through which the clients (i.e., mother and daughter) may 'try out' these alternate roles by interacting with each other.

In order to explore these questions, we analyzed 24 the transcript in several ways. First, we identified sequences in which the therapist worked to direct the family members' interactional behaviour, especially in contexts in which the family members' talk seemed to be getting 'stuck' in ongoing disagreement surrounding roles and responsibilities. Second, we examined sequences that oriented strongly to epistemic entitlements and particularly when the mother conveyed low entitlements and when the child contested the mother's authority. Third, sequences were examined in which the therapist responded to the clients' opposing views and to the mother's low agentive stances through affiliative practices and interventions that highlighted the 'systemic' nature of the conflict (i.e., the problem is not located in the person but rather is interpersonal in quality). In this way, we wanted 40 to build on prior work by Couture (2006, 2007) in showing how therapists may turn conversational impasses into opportunities for more productive 44 action.

Analysis

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Our analysis is divided into two parts. The first part shows Minuchin's use of directive practices

that work to shape the family members' interac- 1 tional behavior. The second part illustrates his use 2 of epistemic practices that reinforce the mother's 3 epistemic authority.

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4.1. Directing the family members' interactional conduct

Our analysis of this session revealed that the 9 therapist made use of a set of practices that were 10 directive, reflecting his deontic authority to help 11 shape different aspects of the social interaction. 12 The therapist (Minuchin) acted as a facilitator to 13 initiate discussions between the mother and the 14 daughter around conflictual topics involving the 15 mother's authority or a lack of authority, creating 16 opportunities for them to respond to each other 17 and to provide their views of the situation. The SFT 18 therapist was found to guide the family members' 19 interactional conduct in the following ways: (1) 20 modifying seating arrangements to facilitate dia- 21 logue between the mother and the daughter; (2) 22 getting the family members to address each other 23 in their talk; and (3) creating interactional space 24 for responding to parental role descriptions. Taken 25 together, these interactional practices worked 26 to lead the family members into taking up and 27 negotiating family role positions. In this context, 28 the family members are obligated to engage with 29 each other, creating enactments in which they 30 display for the family therapist the ways in which 31 the mother and the daughter tend to interact and 32 how these interactions may be reflective of prob- 33 lems concerning role assignments, authority and 34 competence.

4.1.1. Modifying seating arrangements to facilitate dialogue between the mother and the daughter

Just as spatial arrangements in a given setting 40 have affordances that shape the ways in which we 41manipulate the material world (Kirsch 1995), so do 42 bodily formations (e.g., positioning of and distance 43 between people) foster certain kinds of interactions 44 while hindering others (Kendon 1990). Recently, 45 the term recruitment has been used to explain how 46 embodied interaction can provide a context for 47 bringing about or enlisting certain kinds of next 48 actions from others (Drew and Couper-Kuhlen 49 2014). For example, placing your empty cup next 50



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1 to a teapot may solicit someone's assistance to fill 2 your cup. In Extract 1, the expert therapist in our study utilized the affordances of different spatial 4 arrangements by directing the daughter, Marcy, to sit on a section of the couch in which she more directly faces her mother, thus allowing the mother and the daughter to engage in a more focused social encounter (Kendon 1990), in which both participants must also attend to the visual aspects 10 of their interaction, e.g., whether the mother or the 11 daughter smiles or frowns as a response to what 12 the other has said. Minuchin (1974:142) refers to this practice as manipulating space or geographical 14 rearrangement. For him, one of the main goals of 15 this discursive maneuver is to create enactments by facilitating or blocking contact between family 17

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19 Extract 1: 7:16 (J = Jenny; Mar = Marcy;
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Min = Minuchin; S = Suzanne)
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21
    01 S:
              that didn't (right-) (0.3) 1tha:t
22
    02
              S & Mar are sitting adjacently,
              (0.3) 1we have never 1really been in
23
    03
              side by side
24
              a meeting together.
25
    06
              (0.6)
26
    07 S:
              [ ( o:r w- ) ta:lks, ]
27
    08 J:
              [do- do you feel you] can't talk
28
    09
              to your mom together. (.)
              when you're all by your selves. (.)
    10
29
    11
              >°do you think that< works?°
30
    12
              (0.4)
31
    13 Mar: u-no. (0.4) I can't talk to her
32
    14 mar: shakes head
33
              when we're alo:ne like just me an
34
    16
              her.=I can't talk to her alone.(0.9)
    17
              [if] there's someone else there I=
35
    18 Min: [<u>m</u>-]
36
    19
              =can feel better. oright,
37
    20 Min: M:Arcy. (0.3) maybe you can sit
38
    21
              here because the mic (.) is here.
39
    22
              (0.4) then- is- that way, (0.3)
              Minuchin & Marcy switch places
40
              you also- >you an your mom < can
41
              (0.4) talk >face to face<
42
              this this kind of thing it's not,
43
    27
              (0.3) it's not good.
44
    28
                      3.3
    29 min: gestures with left hand to continue
45
    30 Mar: we:ll when me and my mom are
46
    31
              together just sittin alone in the
47
    32
              house we either start (.) screaming
48
    33
              and yelling at- 1 yelling at each other,
49
    34
              (0.7) or we jus-(0.7) I just walk
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away or something.=but when we're

36	<u>wit</u> h someone else I can't ↑ <u>do</u> that
37	right, (0.4) so I jus sit here
38	an ↑ <u>ta:l</u> k.

The room's seating arrangements consist of two couches that form an 'L' shape and a chair opposite Suzanne and Marcy that is occupied by Jenny. Suzanne and Marcy sit side by side occupying one of the couches and Minuchin sits on the other, closest to and partially facing Suzanne. When Marcy discloses her inability to talk to her mother alone, Minuchin in line 20 begins a turn in which he directs Marcy to change places with him. At first his account for issuing the directive is related to structural reasons (Marcy is then closer to the microphone), but then he elaborates by claiming that the new seating arrangement places Marcy and her mother face to face and is better than the old side by side arrangement. We can thus infer that this new spatial arrangement will create new affordances in which more mother-daughter dialogue will be facilitated.

Minuchin's directive may also be seen as uniquely responsive to Marcy's prior claim that the degree of communication between Marcy and her mother is limited. Thus, the therapist's directive may be seen as restorative, as the new spatial arrangement is more conducive for getting communication between them underway. This arrangement also has implications for future alignments between the participants; that is, by now sitting next to the mother, Minuchin may be in a stronger position to align with her, especially in contexts where her authority becomes challenged by the daughter (see Section 5).

4.1.2. Getting the family members to address each other in their talk

Interactions involving more than two people may 39 consist of multi-faceted alignments between the 40 participants. Drawing from Goffman's (1981) 41 concept of participation frameworks and roles, 42 Levinson (1988) has shown that a speaker's utter-43 ance may address one interlocutor and yet target 44 another. For instance, speaker B may respond 45 to speaker A's prior action (e.g., answering a 46 question) by also complaining about or blaming 47 speaker C who happens to be present. Thus, 48 although speaker B's answer addresses the prior 49 action/speaker A, it also targets speaker C, making 50



1 it relevant for speaker C to respond to the com-2 plaint or blame.

3 These contexts are typical of family therapy interaction. Minuchin (1974) discusses how family members often use therapists as listeners to talk about the behavior of other family members. To counteract this tendency, he suggests that therapists 'recreate communication channels' by directing these family members to directly address the 10 one who was talked about. For example, a family member may address the therapist, while at the same time complaining about another family member. Although this practice may serve a pro-14 social function by allowing a family member to 15 say something face threatening to another without having to address them directly, it may also realize a form of avoidance; that is, by addressing the therapist, the family member passes up an opportunity 19 to engage with a significant other on an important 20 topic.

Just prior to Extract 2, Suzanne had mentioned 22 that Marcy's father, who lives in a different city, had invited Marcy to his wedding. Suzanne had already expressed her reluctance to allow Marcy 25 to go. In this extract, we see that Marcy is upset with Suzanne's decision. Thus, a dialogue about this issue could allow Suzanne to display her entitlements to make decisions for Marcy and, if 29 Mary accepts the mother's rationale, would help to restructure the family by endorsing the mother's 30 authoritative role.

Extract 2: 27:31 33

20 Mar: ~ri:ght?~

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34
    01 Min: so you had. (0.3) a very hard
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    02
              1<u>li</u>:fe. (0.8) <u>bo</u>th of you. (2.7)
              and it continues being ha:rd now
36
    03
    04
              Marcy.
37
    05
              (1.2)
38
    06 Mar: yeah.
39
    07
              (0.7)
40
    08 Min: why.
    09
              (1.4)
41
    10 Mar: well um, (1.0)
    11 mar: gazes at Minuchin
43
     12 s:
              gazes downwards
44
     13
              I really do wanna see my da:d.
45
    14
              =I mean, (0.7) my mom may not wa-(.)
46
    15
              want me te see e:m. (0.6)
              but 1 haven't seen him in about a
47
    16
              \uparrow<u>ye:ar</u>.=>so I< thin-k, (0.3) ye know
    17
48
               ~>I have a right te see my father.<~
     18
              (0.4)
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21	Min:	ye- you're talking to <u>me</u> or	1
22		you're talking to your mom,=Suzanne.	2
23		(0.8)	3
24	Mar:	I guess I'm talking to	4
25		my <u>mo</u> m a:nd you.=jus:-=	
		multiple nods	5
	Min:	=ye <u>a</u> h. (0.8) but ye- y <u>ou</u> , (0.6)	6
28		you are saying to your mom that you	7
29		want °to see your dad.°	8
30		((lines omitted)	9
	Mar:	she may not $\frac{1}{\underline{\mathbf{l}}}$: ke it, (.) bu:t,	10
32		(1.0) I do <u>lo</u> ve him.= \sim I <u>do</u> , (.)	11
33		wanna stay î ar <u>ou</u> :nd him	
34 35		once in a while, <u>ri</u> :ght?~ (3.0)	12
	144 (214)	,	13
		sniffs and wipes eyes with tissue °ye:-,° (0.5) e- I think Suzanne	14
38	171111.	that, (1.1) she's <u>asking you</u>	15
39		something.=>°I don't know< what.°	16
40		(1.9)	17
41	S:	she does love em.=I want her	18
42	s:	gazes downwards	19
43		te see that love that she <u>has</u> for	20
44		him.=an- an work it out,	
45		(0.5)	21
46	S:	I wanna s <u>e</u> e (0.4) <u>ju</u> st (0.6)	22
47		how <u>rea</u> l it <u>is</u> .	23
48		(0.6)	24
		but t- t <u>al</u> k,	25
	min:	hand gesture,	26
51		points towards B then M, repeated.	27
52	s:	turns her gaze towards Marcy	28
53		and begins to speak	
			29

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In responding to Minuchin's 'why' question is line 08, Marcy formulates a complaint that she wants to go and visit her father, but her mother will not allow it. Thus, although Marcy is responding to Minuchin, the complaint aspect of her turn, and especially the distress conveyed through her tremulous voice (Hepburn and Potter 2007) in line 18, is more directly targeting her mother as an addressee. But when Marcy in line 20 explicitly seeks confirmation from Minuchin that she has a right to see her father, Minuchin refrains from giving confirmation and instead topicalizes the actual target of Marcy's complaint. Through this move, Minuchin provides Marcy with the option of redirecting her talk at her mother. However, Marcy's response in line 24 weakly claims that she is addressing both of them, which leads Minuchin then to assert unequivocally that her wanting to see her dad is directed at the mother.

49 As a response, in lines 22-25 Marcy continues in the same vein by uttering a distress-laden



1 complaint. But Minuchin again refrains from 2 taking up the role of respondent and instead offers 3 the turn to Suzanne by stating in an epistemically 4 downgraded form ('I think'; '> °I don't know< what.°') that she is the target of Marcy's talk. In claiming not to understand Marcy's remark, he not only blocks the possibility of indirect communication, but also rejects epistemic authority on Marcy's entitlements, which affords an opportunity 10 for Suzanne to assume an expert moral position of 'what is right'. Suzanne then takes the turn but does 12 not direct her gaze at Marcy, which may also make 13 it ambiguous as to whether she is addressing the 14 therapist or her daughter. Minuchin, however, is 15 quick to intervene by verbalizing that they should engage in a dialogue ('but t- talk') while gesturing for them to direct their focus at each other. This 18 then leads to subsequent talk in which Suzanne explains her reasons for not wanting Marcy to go 20 and visit her father. Thus, Minuchin helps to create an interaction in which parental roles and authority are discussed and negotiated.

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4.1.3. Creating interactional space for responding to parental role descriptions

There are also situations in which family members do not respond to prior actions, although it may be relevant for them to do so. Certain initiating actions of sequences such as questions, blaming and assessments strongly mobilize a next response from addressees (Stivers and Rossano 2010). Other actions, however, are more implicit and thus do not directly recruit another's response. In these situations, family therapists may be called upon to enlist a response from the family member who is being implicitly addressed – especially if certain moral positions or familial moral orders are being conveyed through talk. Getting family members to respond can be very important in these circumstances, because it reveals how they position themselves with respect to the moral positions put forward – whether they agree, oppose or espouse alternative positions. Consider Extract 3, in which Suzanne provides a detailed account to her daughter of what it means to be a parent.

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Extract 3: 31:10

01 S: >I grew up with my grandmother

50 02 s: gazes downwards

03 an her second husband,< my

04		†grand [father-]	1
05	Min:	[you are] talking	2
06	min:	points arm towards Marcy	3
07	Min:	(.) with [(Mar-)]	
08	S:	[†yeah.]	4
09	s:	returns gaze to Mar, nods	5
10		my grandfather k <u>ne</u> :w1 my <u>fa</u> ther. (.)	6
11		my \uparrow <u>real</u> father.=the one, .hh (.)	7
12		that- (0.3) that <u>go</u> t my mother	8
13		p <u>reg</u> nant. (0.9) an he s <u>a</u> id to me.	9
14		(0.9) would you↑ like to see your	10
15		real da:d. (0.8) >ye< know what I	
16		s <u>ai</u> d, (1.3) I said <u>no</u> :. (0.6) he is	11
17		not my †da:d. (.) I don't know him	12
18		as a d <u>a</u> d. (1.2) a:nd, (1.9) <u>I</u> : I was	13
19		<u>for</u> tunate.=my grandmother rem <u>a</u> rried	14
20		an- an a- (.) an a man <u>di</u> d ad <u>o</u> pt me	15
21		and he was my father as far as I'm	16
2223		concerned. (0.8) an <u>one</u> thing that	17
23 24		(.) gives me a lotta †pa:in, (0.4)	
25		is to know that you an Travis	18
26		does $n\underline{o}t^{\uparrow}$ have a <u>father</u> . (0.5) but th <u>a</u> t is the <u>reality</u> of it. (0.8)	19
27		the reality $1i$:s. (0.4) that yous	20
28		do you not have a fa:ther \downarrow =	21
29		an I want you to see that reality.	22
30		because it's important te †you:.	23
31		(1.6) it is < <u>very important to †yo</u> u.	24
32		(0.5) that you do see that reality.	25
33		(2.0)	
34	S:	because a FAther as far as	26
35		I'm concerned an a mother, (0.5)	27
36		is somebody, (0.4) tha:t. (1.8)	28
37		parents you.	29
38		(1.7)	30
39	S:	an brings you <u>up</u> .=.	31
40		and teaches you <u>rig</u> ht from w <u>rong</u>	32
41		(4.4)	
42	S:	and <u>ca</u> res about y <u>o</u> u. (0.6)	33
43		and r <u>eal</u> ly c <u>a</u> res about you.	34
44		(0.8)	35
	Min:	°let Marcy answer.°	36
46		((several lines omitted))	37
	Mar:	~if you †cared about me	38
48		you'd† show- you'd <u>kno</u> w	39
49		how I feel↑ about my ↑ <u>fat</u> her.~.shih.	
50		(1.4)	40
	mar:	wipes eyes with tissue, sniffs,	41
5253	c.	sides of mouth turned down I <u>do</u> know how you feel	42
54	3:	about your <u>fat</u> her.= <u>Ma</u> rcy,	43
55		(1.4)	44
56	ç.	a:nd,	45
57	٥.	(2.5)	46
58	S:	and I'm <u>wo</u> rking >that <u>o</u> ut.=I never	47
59		s:- $< (2.5) \uparrow \underline{you}$ have te work it out.	
		. , —	48
At	the	beginning of her turn, Suzanne is gazing	49
do	wnw	ards yet addressing Marcy. Minuchin in	50



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line 05 then intervenes with overlapping talk by pointing out that she is speaking to Marcy, which leads Suzanne to redirect her gaze at her daughter. Suzanne then begins her narrative about not having grown up with her biological father and continues by drawing a moral implication from her early life: that the man who raises you has entitlements to being recognized as a 'father'. Thus, because the children's biological father is not involved in their 10 upbringing, they (Marcy and her brother Travis) do not have a father.

In effect, Suzanne makes an attempt to assert 13 her epistemic authority – she has first-hand knowledge about who qualifies as a parent (lines 10-32) – and this relates to her deontic authority of being able to make decisions on Marcy's behalf (lines 58-59). This is certainly a difficult viewpoint to convey to a child of twelve and it is probably even harder to solicit a child's agreement in this matter, as evidenced by the two-second pause in line 33 in which Marcy still has not reacted to Suzanne's reasoning.

This is most likely why Suzanne proceeds to do further accounting work. Her account, in lines 34–44, appears in a three-part list format (Jefferson 1991) and provides a catalog of some of the most salient parental attributes such as parenting, teaching and caring. Suzanne withholds from speaking after each list item, but Marcy does not take up a turn at any of these points that would mark potential transition relevance places (Sacks et al. 1974). Marcy's withholding may be construed as disagreement implicative (Schegloff 2007), and thus that she does not affiliate with the mother's views.

34 35 Further, Marcy's withholding plays an implicit 36 yet central part in completing the three-part list, for had she answered already in lines 38 or 41, Suzanne would most likely not have continued with her accounts. As a result, Suzanne ends up constructing a strong argument for what constitutes 40 a father and, by implication, who would not pass the 'fatherhood' test (i.e., Marcy's biological father). Jefferson (1991) has argued that the completion of three-part lists often makes speaker transition relevant, and so it would seem that Minuchin orients to 45 this practice by explicitly giving the floor to Marcy (line 45), allowing her to take up a position on what Suzanne had just said. As might be expected, rather than endorse Suzanne's position, Marcy disagrees that her mother is caring towards her and, further,

resists the implication that her biological father is 1 not her real father through the possessive pronoun 2 construction 'my 1 father'.

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4.2. Epistemic positioning to support the mother's authoritative role and to contest contrasting viewpoints

The enactments brought about by Minuchin's 9 directive actions provided a context for another 10 set of practices. This involved Minuchin's use of 11 differential epistemic positions to either affiliate 12 with talk that supports the mother's epistemic 13 authority or oppose talk that undermines the 14 mother's authority. These interactional practices 15 helped Minuchin to construct a certain familial 16 moral order (Hutchby and O'Reilly 2010) and, thus, 17 to provide opportunities for changing the existing 18 family structure: from the mother as bearer of the 19 stigma of her alcohol addiction and thus lacking 20 agency, to the mother as authoritative and agentive; 21 from the daughter as displaying a lack of confidence 22 in the mother's abilities, to the daughter's recognition that changes have taken place and that the 24 mother has entitlements to authority.

Three epistemic practices were identified: (1) 26 endorsing the mother's epistemic authority; (2) 27 displaying lesser epistemic entitlements to promote 28 reflection and affiliation; and (3) contesting viewpoints that undermine the mother's authority. Each 30 of these practices will be considered in turn.

4.2.1. Endorsing the mother's epistemic authority

34 Throughout the session, the mother reported on 35 parental decisions that she had recently made, 36 such as whether her six-year-old son should have 37 attended family therapy with them or whether 38 Marcy should visit her father alone. Although 39 Suzanne did at times use language to express cer- 40 tainty when formulating opinions and decisions, 41 there were instances where her language became 42 less certain and indexed low epistemic authority. 43 Just previous to Extract 4, Minuchin wondered 44 whether the family situation sometimes led Marcy 45 to conduct herself in ways more typical of an 18 46 year old (i.e., a grown up) and, moreover, whether 47 Marcy's resistance to parental authority may be 48 related to that. This was then followed by Suzanne 49 reflecting on the difficult life she had growing up 50



40

```
1 and if this bore any relation to Marcy's life and her
 2
   being 12 years old.
 3
    Extract 4: 14:12
 4
 5
   01 S:
              well. † I don't know I was on my
 6
    02
              o:wn, (0.5) in a big city,
    03
              (0.8) workin (0.9) at fifteen years
    04
              fold. (1.0) and makin my own way
 8
    05
              in life. (0.8) and I don't see where
 9
    06
              I- I: ↑I was, (1.0) fifteen years
10
    07
              o:ld. (2.1) I- I can't- I can't say
11
   08
              that you can sa:y that this is the
12 09
              times,=an this is the way it i:s:.=
    10
              I- I don't s:ee that point.=at a:ll.
13
    11
              (0.7) I jus- I just believe that
14
    12
              we're human beings an- (0.5) a:nd
15
    13
              (.) a twelve year o:ld, (3.8)
16
    14
              does †not- (1.1) we:ll, twelve year
17
   15
              ol- 1: don't know.=a twelve year
18 16
              old's a twelve year old, an whatever
              you 1a:re an whatever you grew up
    17
19
              an Îlearnt.=that's what you, (0.7)
    18
20
    19
              you 1do.
21
    20
              (2.0)
22
   21 S:
              I don't know.=1I'm not making any
23 22 s:
              gaze moves up, hands to head,
    23
              adjusts herself in the seat
24
              sense. [ I- I'm ] (.) I don't=
    24
25
                    [you make,]
    25 Min:
26
    26 min: reaches out and touches B's arm
27
    27 S:
              =[know.=I-]
28
    28 Min: [(you rilly)] make, you make a
29
   29
              lot of sense [to me:.
                          [°I don't know.°
    30 S:
30
    31
              (0.8)
31
    32 Min: you make a lot of sense to me.
32
    33
33
    34 Min: >uh.< (0.5) does she make 1
34
              sense to you.
    35
   36
35
              (1.1)
    37 Mar: yeah.
36
    38
              (1.3)
37
    39 Min: but 1mo:m doesn't feel frequently
38
    40
              that she has, (0.5) the <u>ri:ght</u> (1.4)
39
    41
              to, (1.2) to make ru:les for you.=
40 42
              is that true?
   43
              (0.5)
41
    44 Mar: we:ll:
42
    45
              (0.9)
43
    46 Mar: I think she has the right to
             make rules for me,= >but I jus<
45
              don't like the rules she makes.
46
47 After Suzanne finishes her comparison between
   her life at 15 and what a 12-year-old may be expe-
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49 riencing at the present time, there is a two-second

pause (line 20). This creates an opportunity for

Marcy to take up a turn and engage with the mother's implicit claim that she, in comparison, may 2 have had a more difficult time growing up than 3 Marcy and, as a result, has acquired much experi- 4 ence and knowledge in the process. In responding, 5 Marcy could have confirmed or challenged the 6 mother's claim, but instead remains silent, thus 7 passively resisting Suzanne's authority as someone 8 who has 'made her own way in life'. Subsequently, 9 Suzanne continues by making numerous displays 10 of uncertainty ('I don't know.'; 'TI'm not making 11 any sense.') and nonverbal displays such as shift- 12 ing around in her seat and placing her hands to 13 her head, which may be conveying discomfort or 14 distress.³ From the daughter's perspective, this can 15 be interpreted as a confirmation of 'weakness', in 16 which the mother appears uncertain – as someone 17 who is unable to confidently appropriate a position 18 of epistemic authority.

It is interesting to note that the therapist imme- 20 diately aligns with the mother by showing strong 21 endorsement of the mother's epistemic status and 22 her ability to make perfect sense to others ('you 23 make a lot of sense to me: line 32). Minuchin also 24 strongly affiliates with Suzanne by using intensi- 25 fiers such as 'rilly' and 'a lot of' that upgrade his 26 endorsement of her sense-making abilities and by 27 touching her arm during her brief displays of dis- 28 tress and uncertainty. He then repeats his endorse- 29 ment of Suzanne's ability to make sense and next 30 asks Marcy whether she is of the same opinion. 31 Through this move, Minuchin works to gain 32 Marcy's endorsement of her mother as someone 33 with epistemic entitlements and as someone whose 34 talk is transparent and logical. When Marcy voices 35 agreement in line 37, Minuchin then leverages her 36 response in order to draw Marcy's attention to the 37 implied paradox of having parental authority, while 38 at the same time not having rights to make rules 39 for one's children.

From an SFT perspective, the sequence between 41 Marcy and her mother in which Marcy refrains 42 from responding and supporting the mother as 43 an authority on salient experiences (i.e., overcom-44 ing/surviving hardships) may be demonstrating a 45 breakdown of the appropriate structural hierar- 46 chy between parent and child. Suzanne (mother) 47 depends on Marcy's (daughter) endorsement of 48 her status as a mother/executive. From an SFT 49 theoretical perspective, this reversal of roles or 50



1 'parentification' can be understood in the context
2 of the family's history; when the mother was drunk,
3 Marcy had to step in and assume a more adult,
4 executive role. Thus, Suzanne's uncertainty and
5 Marcy's subsequent silence could be viewed as
6 an enactment in the sense that it illustrates that
7 Susanne and Marcy are still confused about their
8 'appropriate' respective roles. What the SFT ther9 apist attempts to do in these contexts is to reverse
10 the old pattern by forming a strong alignment with
11 the mother to support her role as someone who
12 has legitimate parental authority.

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4.2.2. Displaying lesser epistemic entitlements to promote reflection and affiliation

Drawing attention to role relations and how they construct a certain familial moral structure can be a very delicate business. For example, in Extract 4, when Minuchin pointed out Suzanne's feelings of not having rights to make rules for Marcy, there is an implication that Marcy is in some way contributing to her mother's downgraded authority. In order to offset any allocation of blame, Minuchin often formulates a stance that downgrades his epistemic rights and access. Extract 5 continues on from this.

272829

Extract 5: 15:18

```
46 Mar: I think she has the right to
30
              make rules for me,= >but I ius<
31
              don't like the rules she makes.
32
              (0.9)
33
    50 Min: but you know (.)
              what I:1 (0.5) hea:r, (0.5)
34
   51
    52
              is that mo:m feels very frequently,
35
    53
              (0.6) that she needs (.) to, (0.8)
36
              †apologize to you for being your
37
              1mom.
38
    56
              (0.8)
39
    57 Min: is that true.
              (0.8)
40
   58
    59 Min: does she do that?
41
    60
              (0.5)
42
    61 Mar: mm hm.
43
    62 mar: multiple shallow nods
             (1.7)
45
    64 Min: an what do you think.
46
```

47 In line 51, Minuchin prefaces his turn with an 48 evidential expression ('what I:1 (0.5) hea:r') that 49 displays his lesser access and knowledge about 50 what Marcy's mother is actually feeling. Thus, the

ensuing claim that the mother needs to apologize 1 to Marcy when acting like a parental authority 2 is put on record as based on hearsay and is thus 3 presented as a possibility that seeks confirmation 4 from Marcy. This epistemically downgraded turn 5 design allows Marcy not only to take up a position 6 of epistemic authority by confirming the veracity 7 of this claim, but also to reflect and elaborate on 8 the reasons why this may be so. Although Marcy 9 does not immediately respond, she does, after a 10 couple of confirmation seeking prompts, provide 11 verbal and nonverbal affiliation.

After having gained Marcy's confirmation, 13 Minuchin proceeds to probe into the reasons why 14 the mother may have trouble taking up authority, 15 by asking for Marcy's opinion ('an what do you 16 think.'). With this question, Minuchin is able to 17 upgrade Marcy's epistemic status, i.e., that she is 18 knowledgeable and her knowledge matters. These 19 sequences also reveal the SFT technique of *unbal-ancing* at work: first Minuchin affiliates (joins) with 21 the mother, then shifts the balance of epistemic 22 status towards Suzanne as mother, and Marcy as 23 child with lesser privileges. He then he upgrades 24 Marcy's status as someone who is able to display 25 knowledge about the appropriate familial moral 26 order pertaining to mother—child relationships. 27

The conversation continues in Extract 6. Here 28 we see that Marcy provides Minuchin with an 29 in-depth report on the mother's actions, but also 30 how she is unable to apologize to her mom when 31 it is clear that the mother is not at fault. 32

33

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34 Extract 6: 15:38 35 Min: an what do you think. 36 65 (1.3)37 Mar: we:ll I: told the counselor 66 38 that I'm seeing, (0.5) that u:m, 67 68 $(0.8) \downarrow u:h (.) \underline{me} \text{ and my mom, } (0.5)$ 39 69 like if 1me > an my mom < get into a 40 70 fight ri:ght? 41 71 (0.6)42 Mar: it's almost all the time.= 43 73 or it used to be at 1le:ast. (0.4) 74 >that she'd come< u:p- I'd go 44 75 up into my room or something, (.) 45 76 and she'd kept on- (.) come up 46 77 an 1apo:logize. 47 78 (0.7)48 79 Mar: a:n most of the time I

don't think it was even her 1 fa:ult.



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Min: °yeah.°
    82
    83
         Mar: I: (0.3) \uparrow \underline{I} used to think it was
 2
    84
               (0.3) we:ll, I still do think
 3
    85
               >some of the times it's< ↑my fault.
 4
    86
               =[but I jus] can't bring myself
 5
    87
         Min: [ yea:h. ]
 6
    88
         mar: shakes head
    89
               to say I'm †sorry=ri:ght?=
 7
    90
         Min: =yea:h. (0.6) so you have- (.)
 8
    91
               both of you have a problem. (1.3)
 9
    92
               °both of you have a problem because°
10
    93
               (1.3) you need, (1.0) a mom that can
11 94
               give you, (0.8) that can be a mom,
12
    95
               (.) who is not apologizing.
    96
13
         Min: an (0.5) <you don't fee:l>
14
               you have the <ri:ght sometimes,>
15
    99
               (1.7) to be 1 it. (1.2) car- (.)
16
    100
               uh u:h, (0.4) Marcy's mom? (.)
17
    101
               it's-it's an interesting thing.
    102
18
    103 Min: w- why don't you feel that
19
    104
               you have the right, .hh to demand.
20
    105
               (3.5)
21
    106 Min: >you know after all
22
    107
               you are the < mom.=you're,
23
    108
               (0.7)
24 109 S:
               well that's †CO:ming. (.)
    110
               it's 1coming.
25
               (0.3)
    111
26
    112 S:
               °i:- it's° I didn't have it
27
    113
               when I was °drinkin:, an it-°.hh
28
    114
               it's [taken more ti:me to c]ome
29 115 Min:
                  [that's that's right.
30
```

31 After having heard both sides, Minuchin begins in 32 line 90 to summarize the family's dilemma: Marcy needs a parental figure who does not apologize 34 for exercising her entitled authority but Suzanne 35 does not feel entitled to take up this authoritative 36 position. Then, in line 101, Minuchin frames the dilemma as a puzzle ('it's-it's an interesting thing'), which does a range of epistemic work: it implies 39 that Minuchin does not have special insight into why this problem occurs; it suggests that further 41 reflection and exploration may allow the family to 42 'solve the puzzle'; and it operates as a *fishing device* 43 (Pomerantz 1980), because it targets the family 44 members' personal epistemic domains to which 45 they have greater rights and access.

46 But after a silence in line 102, Minuchin directly pursues a response from Suzanne by asking a why question. When Suzanne again refrains from 49 responding, Minuchin resumes by pointing out 50 the legitimacy of Suzanne's rights ('after all you

are the < mom'). Thereafter, Suzanne responds by 1 indicating that she is beginning to take up these 2 rights, thus implying that she is willing to adopt 3 the moral family structure that Minuchin endorses.

4.2.3. Contesting viewpoints that undermine the mother's authority

When family members produce utterances that undermine the mother's parental authority, Minuchin tends to respond with disaffiliation through overt disagreement. This is shown in Extract 7.

Extract 7: 49:51

```
01 Min: yeah but you're (.) you're †very
02
          lovely people. .hh a- both of you.
          (0.6) °you know, a:nd uh, ° (0.4)
03
04
          uh- uh.
05
          (0.3)
06 S:
          Twell I-
07
          (0.3)
08 Min: maybe, [ maybe th-
09 S:
                  [for that reason,]
10 S:
          I see, (.) she's very beautiful.
          (0.3) wh- what I see in myself
11
12
          and I be lieve she will, (0.3)
13
          get o:n with life and be Toka:y
14
          but, (0.4) I really 1 love her.
15
          (1.2)
16 S:
          >an I want her te< go:.= and
17
          get the right help that she înee:ds.
18
          [(in time)
19 Min: [no: no, no no] ono. (0.6)
20 min: adjusts in his seat to face
21
          no †you're wrong there.
22 min: Suzanne and Marcy more directly
23
          (1.1)
24 Min: the- (0.3) ri:ght 1 (0.3)
25
          help that she needs is you.
26
          (1.7)
27 S:
          >well I'm There.<
```

In line 09, Suzanne responds to Minuchin's pos- 40 itive assessment of the family with an upgraded 41 appraisal of her daughter ('she's very beautiful') 42 and then goes on to avow her deep affection for 43 Marcy. She then, in line 16, however, reveals her 44 wish that Marcy receive 'the right help that she 45 finee:ds, which suggests that Marcy should get 46 support from someone else and not her mother. 47 The implication is that Suzanne does not have the 48 appropriate competence and authority to execute 49 her role as parent adequately.



In line 13, Minuchin directly contradicts

2 Suzanne, adding that she is the most suitable

3 person to help Marcy. Thus, in this brief moment
4 in which Suzanne seems to let her entitlements
5 to take on the role of having parental authority
6 and responsibilities slip away from her, Minuchin
7 immediately blocks further slippage by strongly
8 endorsing Suzanne's ability to care for her family.
9 Suzanne's response in line 27 both re-affirms
10 her readiness to assume parental responsibilities
11 and also functions as an offer for Marcy to allow
12 Suzanne to parent her.

4.3. Summary

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The first part of the analysis revealed the different strategies in which an SFT therapist demonstrates deontic authority by directing the family members' interactional conduct. These practices index SFT principles of enactment, in this case used to bring a mother and her daughter into dialogue with each other. By observing these family interactions, Minuchin was able to witness how familial roles are constructed and how the mother may find it difficult to take up a position of (and account for her) parental authority or how the child is unable to recognize that the mother should have these entitlements. The second part of the analysis showed that it is during these kinds of moments of disaffiliation between the mother and the daughter that Minuchin was able respond by affiliating with viewpoints supporting the mother's authority and disaffiliating with ones that do not offer such support.

5. Discussion and conclusion

39 Family therapy involves talk about family-related 40 problems, and this focus brings in moral frameworks that implicate blame and accountability 41 42 (Buttny 2004). Further, being referred to family therapy may generate a view that parents are at 43 fault, making them accountable for the difficulties occurring in the family (O'Reilly and Lester 2016). Although it has been shown that parents often do accounting work that positions themselves as good parents and that places blame 49 on children (O'Reilly 2014), our focus has been on a parent who tends to blame herself and has

difficulties in taking up positions of parental 1 authority.

We have taken a discursive view in which family 3 members come to therapy by co-constructing their 4 relationships in the presence of a therapist. The 5 therapist, as witness, is thus able to formulate generative hypotheses about what is problematic about 7 the relationship through the family members' 8 created enactments, and hence actively intervene 9 by affiliating with views that endorse role relations and hierarchies grounded in SFT principles. 11 Through the lens of CA, we have shown how an 12 SFT therapist, working interactively with a mother 13 and a daughter, effects changes in role relations. 14

Early on in the session, Minuchin acted to 15 direct and shape the family members' interactional 16 conduct. In doing so, he modified the affordances 17 of participation in such a way that the mother and 18 the daughter would be more inclined to interact 19 with each other to negotiate delicate and distress- 20 ing topics, rather than simply talking about the 21 other's behavior to the therapist. By facilitating 22 these enactments, Minuchin was in a strong 23 position to respond to, and thus shape, the family 24 members' conduct. He would draw from epistemic 25 resources to adopt a position of not knowing to 26 foster further discussion and exploration of the 27 mother's rights and responsibilities. But he would 28 also contest claims that positioned the mother as 29 having low parental authority. Throughout the 30 session, Minuchin would flexibly affiliate (i.e., join) 31 with each of the family members, not only to build 32 up an empathic relationship with them, but also 33 to endorse family member talk that indexed, from 34 an SFT perspective, productive mother-daughter 35 role relations.

role relations.

We used a CA perspective to provide a systematic examination of family therapy as an unfolding 38 praxis in an institutional context. CA is able to 39 address the gap in knowledge of how theoretically informed interventions dynamically unfold 41 in clinical practice, and how these interventions 42 work towards inducing changes in the relational 43 matrix of the family. With CA, we can show how 44 important therapeutic constructs such as alliance, role relations and authority are realized and 46 managed from one interactional moment to the 47 next. In exploring change, we drew from Couture's 48 (2006, 2007) CA-informed work that explored how 49 forward movement may be achieved discursively to 50



1	unblock conversational impasses. In our study, the
2	mother seemed unable to take up her entitlement
3	to exercise parental authority and the child did
4	not endorse her mother in this role of authority
5	The therapist's discursive practices functioned to
6	balance the epistemic rights and privileges of both
7	the mother and the daughter, by getting them to
8	focus on these relational issues and address each
9	other directly in their talk, and also by inviting
10	them to consider the other's viewpoint and to gain
11	a systemic and mutual perspective on what is beset-
12	ting the family. In conclusion, we argue that the CA
13	perspective provides clinically useful insights for
14	understanding how change may be accomplished
15	in family therapy interactions.

17 18 **Acknowledgement**

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20 This research is supported by the Social Sciences 21 and Humanities Research Council of Canada 22 (435-2012-0302). Salvador Minuchin kindly agreed 23 to the use of his name in reporting the results of 24 this analysis, and the SFU Research Ethics Board 25 (REB) gave us ethical approval.

28 Notes

- By 'moral order' we refer to parents taking an agentic role through which they are accountable in guiding and protecting their children, and to children having age-appropriate privileges and responsibilities.
- 35 2. All names (except that of Dr Minuchin) and
 36 information that might identify the participants
 37 have been altered to protect the anonymity of
 38 the individuals involved.
- 39 3. These nonverbal features have been shown
 40 to often co-occur with client distress displays
 41 (Muntigl 2020).

Appendix: Transcription notation

10	
46 [starting point of overlapping speech
47]	endpoint of overlapping speech
48 (1.5)	silence measured in seconds
49 (.)	silences less than 0.2 secs
50:	prolongation of sound

()	transcriber's guess	1
-	speech cut off in the middle of the word	2
0 0	spoken quietly	3
	emphasis	4
.hhh	audible inhalation	5
hhh	audible exhalation	6
(h)	laugh particle (or outbreath) inserted	7
	within a word	8
heh	laugh particle	9
1	falling intonation at end of utterance	10
†	rising intonation at end of utterance	11
•	continuing intonation at end of utterance	12
?	rising intonation at end of utterance	13
,	continuing intonation at end of utterance	14
((cough))	audible non-speech sounds	15
Italics	nonverbal behavior (actor indicated in	16
left hand	column)	17
		18
		19
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