

# Interpersonal Pragmatics and the Therapeutic Alliance

The Collaborative Work in Email  
Counseling

Franziska Thurnherr

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Dissertation zur Erlangung der Würde eines Doktors der Philosophie  
vorgelegt der Philosophisch-Historischen Fakultät  
der Universität Basel

von

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Aus Sursee, LU

Freiburg 2021

Albert-Ludwigs-Universität Freiburg / Universitätsbibliothek



Erstgutachten: Prof. Dr. Miriam A. Locher

Zweitgutachten: Prof. Dr. Lorenza Mondada

Verteidigt in Basel am 13. Dezember 2019



<b>Acknowledgements</b>	<b>XIV</b>
<b>List of Tables</b>	<b>VII</b>
<b>List of Figures</b>	<b>XII</b>
<b>Chapter 1 Introduction</b>	<b>1</b>
<b>PART I</b>	<b>14</b>
<b>Chapter 2 From Theory and the Literature Review to the Research Niche</b>	<b>15</b>
2.1 Interpersonal Pragmatics	18
2.1.1 Relational Work	22
2.1.2 Identity Construction	29
2.1.3 The Link between Relational Work and Identity Construction	39
2.2 Computer-Mediated Communication	46
2.2.1 From Recurrent Themes of CMC Research to Waves and Classification Schemes	48
2.2.2 Interpersonal Pragmatics in CMC and Email Communication	60
2.3 (Mental) Health Discourse	79
2.3.1 Face-to-Face Health Discourse	79
2.3.2 Online Health Discourse	87
2.3.3 Face-to-Face Mental Health Discourse	106
2.3.4 Online Mental Health Discourse	127
2.4 The Research Niche	144
2.4.1 Interpersonal Pragmatics and the Therapeutic Alliance in Online Counseling	144
2.4.2 The Research Questions	147
<b>Chapter 3 The Characteristics of the Email Counseling Data</b>	<b>148</b>
3.1 Data Collection	149
3.1.1 Ethics in the Research Interface: A Brief Literature Review	150



## II

3.1.2 The Process of Finding, Collecting, Storing and Publishing the Data	153
3.2 The Data and its Embeddedness in its Institu- tional Context	157
3.2.1 The Counseling Service at BEI	158
3.2.2 The Counselor's Therapeutic Approaches	161
3.3 Email	164
3.3.1 Medium Factors	166
3.3.2 The Two Types of Exchanges	173
3.4 Participants	183
3.4.1 The Counselor	188
3.4.2 The Clients and their Individual Threads	189
3.5 Summary	204
<b>Chapter 4 Methodology: An Overview</b>	<b>210</b>
4.1 Discourse Analysis	211
4.2 The Four Methodological Steps: An Overview and Rationale	213
4.3 Summary	228
<b>PART II</b>	<b>232</b>
<b>Chapter 5 Themes and Discursive Moves Em- ployed by the Clients and the Counselor</b>	<b>233</b>
5.1 Introduction and Methodology	233
5.2 Themes	244
5.2.1 Client-Introduced Themes	247
5.2.2 Counselor-Introduced Themes	254
5.2.3 Themes That are Introduced by the Clients and the Counselor	256
5.3 Discursive Moves	261
5.3.1 Client-Specific Discursive Moves	262
5.3.2 Counselor-Specific Discursive Moves	265

5.3.3 Discursive Moves Employed by Both the Clients and the Counselor	273
5.3.4 Discursive Moves Occurring in the Body of the Email or in the Word Document	280
5.4 Comparison with Previous Literature on Discursive Moves	283
5.5 Summary	288
<b>Chapter 6 Distribution and Sequence of Themes and Discursive Moves</b>	<b>290</b>
6.1 Introduction and Methodology	290
6.2 Distribution of Themes	296
6.2.1 Distribution of Themes Overall	296
6.2.2 Distribution of Themes According to Individual Threads	299
6.2.3 Distribution of Themes According to Individual Entries	304
6.3 Distribution of Discursive Moves	309
6.3.1 Distribution of Discursive Moves Overall	309
6.3.2 Distribution of Discursive Moves According to Individual Threads	320
6.3.3 Distribution of Discursive Moves over Individual Entries	334
6.4 Sequence of Discursive Moves	342
6.4.1 Problem Statements by the Clients	350
6.4.2 Assessments by the Clients	359
6.4.3 Assessments by the Counselor	366
6.4.4 Advice-Giving by the Counselor	375
6.4.5 Requests for Information by the Counselor	384
6.5 Summary	389
<b>Chapter 7 The Linguistic Realization of the Four Most Frequent Discursive Moves</b>	<b>394</b>
7.1 Introduction and Methodology	394

## IV

7.2 Linguistic Realization of Discursive Moves Used by the Client	399
7.2.1 Problem Statement	399
7.2.2 Assessment	410
7.3 Linguistic Realization of Discursive Moves Used by the Counselor	422
7.3.1 Assessment	422
7.3.2 Advice-Giving	437
7.3.3 Request for Information	455
<b>PART III</b>	<b>480</b>
<b>Chapter 8 Narratives and Transforming Identities</b>	<b>481</b>
8.1 Introduction: From a Working Definition to Theory and the Research Questions	481
8.2 Narratives in Themes, Discursive Moves and Entries	490
8.3 The Functions of Narratives	494
8.3.1 The Function of Seeking Advice	495
8.3.2 The Function of Supporting a Previous Claim	511
8.3.3 The Function of Showing Compliance with Advice	525
8.3.4 The Function of Reporting on Progress	537
8.4 Summary	547
<b>Chapter 9 Establishing the Therapeutic Alliance: The Garden Metaphor</b>	<b>553</b>
9.1 Introduction: From MIND IS SPACE to the Research Questions	553
9.2 The Garden Metaphor	561
9.2.1 The Preceding Context of the Garden Metaphor	561
9.2.2 The Internal Garden	563
9.2.3 Sorting out the Garden	569

9.2.4 Refocusing	586
9.3 The Jungle Path Metaphor	600
9.4 The Interactive Idiosyncrasies of the Three Threads	603
9.5 Summary	608
<b>Chapter 10 The Closure Process in Email Counseling</b>	<b>615</b>
10.1 Introduction: From Previous Literature to the Research Questions	615
10.2 Metacomment Announcing a Last Session	624
10.2.1 The Preceding Context of <i>Announcing a       Last Session</i>	625
10.2.2 The Metacomment <i>Announcing a Last       Session</i> in Action	630
10.2.3 The Response to the Metacomment <i>Announcing a Last Session</i>	632
10.3 Metacomment Type Inquiring about a Last Session	638
10.3.1 The Preceding Context of <i>Inquiring about       a Last Session</i>	638
10.3.2 The Metacomment <i>Inquiring about a Last       Session</i> in Action	643
10.3.3 The Responses to the Metacomment <i>Inquiring about a Last Session</i>	646
10.4 Metacomment Type Inquiring to Take Stock	651
10.4.1 The Preceding Context of <i>Inquiring to       Take Stock</i>	652
10.4.2 The Metacomment <i>Inquiring to Take       Stock</i> in Action	655
10.4.3 The Response to the Metacomment <i>Inquiring to Take Stock</i>	657

10.5 The Asynchronous Nature of the Closure Process in Email Counseling	663
10.6 Summary	665
<b>PART IV</b>	<b>669</b>
<b>Chapter 11 Concluding Remarks</b>	<b>670</b>
11.1 Email Counseling as an Online Health Practice	676
11.2 Contributing to Research on Interpersonal Pragmatics	683
11.3 The Applied Element in a Study of the Therapeutic Alliance	692
11.4 Limitations of the Present Study	696
<b>References</b>	<b>699</b>
<b>Appendices</b>	<b>723</b>
Appendix A. Outline of Research and Letter of Intent Sent to Participants	723
Appendix B. Codebook Discursive Moves	728
Appendix C. Checklists for Analysis of Sequence of Discursive Moves	738

## List of Tables

Table 3.1 Ethical guidelines of the APA and the BACP	152
Table 3.2 Medium factors (amended from Herring 2007) in email counseling	166
Table 3.3 Situation factors (amended from Herring 2007) in email counseling	184
Table 4.1 Methodological steps 1 to 3	224
Table 5.1 Methodological steps 1 to 3 revisited: Types of themes and discursive moves	235
Table 5.2 Themes (ordered alphabetically)	246
Table 5.3 Discursive moves (ordered alphabetically) with explanations	262
Table 5.4 Comparison of discursive moves found in previous studies and the present one	284
Table 6.1 Methodological steps 1 to 3 revisited: Distribution of themes and distribution and sequence of discursive moves	294
Table 6.2 Number and percentages of words in themes in the entire corpus (ordered alphabetically)	298
Table 6.3 Percentages of words used in themes according to individual threads	300
Table 6.4 Percentages of number of words within themes according to entries in Ellie's	305
Table 6.5 Percentages of number of words within themes according to entries in Chris' thread	307
Table 6.6 Number of discursive moves according to themes	311

## VIII

Table 6.7 Percentages of the four most frequent discursive moves in the five most frequent themes	316
Table 6.8 Number of discursive moves in themes within Anna's thread	321
Table 6.9 Number of discursive moves in themes within Ellie's thread	323
Table 6.10 Number of discursive moves in themes within Chris' thread	326
Table 6.11 Number of discursive moves in themes within Mel's thread	328
Table 6.12 Number of discursive moves in themes within Taylor's thread	331
Table 6.13 Number of four most frequent discursive moves in individual entries in Ellie's thread	336
Table 6.14 Number of four most frequent discursive moves in individual entries in Chris' thread	339
Table 6.15 Number of the four most frequent discursive moves before clients' problem statements in the three most frequent themes	351
Table 6.16 Number of the four most frequent discursive moves after clients' problem statements in the three most frequent themes	357
Table 6.17 Number of the four most frequent discursive moves before clients' assessments in the three most frequent themes	360
Table 6.18 Number of the four most frequent discursive moves after clients' assessments in the three most frequent themes	363

Table 6.19 Number of the four most frequent discursive moves before the counselor's assessments in the three most frequent themes	367
Table 6.20 Number of the four most frequent discursive moves after the counselor's assessments in the three most frequent themes	371
Table 6.21 Number of the four most frequent discursive moves before the counselor's advice-giving in the three most frequent themes	376
Table 6.22 Number of the four most frequent discursive moves after the counselor's advice-giving in the three most frequent themes	381
Table 6.23 Number of the four most frequent discursive moves before the counselor's requests for information in the three most frequent themes	384
Table 6.24 Number of the four most frequent discursive moves after the counselor's requests for information in the three most frequent themes	386
Table 7.1 Methodological steps 1 to 3 revisited: Linguistic realization of discursive moves	397
Table 7.2 Percentages of syntactic realizations in clients' problem statements	400
Table 7.3 Word frequency in clients' problem statements (ordered by frequency; tokens: 7,721; types: 1,200)	401
Table 7.4 Percentages of syntactic realizations in clients' assessments	411
Table 7.5 Word frequency in clients' assessments (ordered by frequency; tokens: 4,988; types: 970)	412



Table 7.6 Percentages of syntactic realizations in the counselor's assessments	422
Table 7.7 Word frequency in the counselor's assessments (ordered by frequency; tokens: 7,236; types: 1,044)	424
Table 7.8 Percentages of syntactic realizations in the counselor's advice-giving moves	437
Table 7.9 Word frequency in the counselor's advice-giving moves (ordered by frequency; tokens: 6,830; types: 972)	441
Table 7.10 Frequent collocations for the lemmata USE and TAKE in the counselor's advice-giving moves	443
Table 7.11 Percentages of syntactic realizations in the counselor's requests for information	456
Table 7.12 Word frequency in the counselor's requests for information (ordered by frequency; tokens: 2,623; types: 527)	458
Table 8.1 Methodological steps 1 to 3 revisited: Form and function analysis	489
Table 8.2 Narratives distributed across threads and themes	491
Table 8.3 Narratives according to thread and discursive move	491
Table 8.4 Location of narratives in threads and discursive moves	493
Table 8.5 Number of advice-seeking narratives according to discursive moves	496
Table 8.6 Number of advice-seeking narratives according to themes	496

Table 8.7 Number of support-a-claim narratives according to discursive moves	512
Table 8.8 Number of support-a-claim narratives according to themes	512
Table 8.9 Number of showing-compliance-with-advice narratives according to discursive moves	527
Table 8.10 Number of showing-compliance-with-advice narratives according to themes	527
Table 8.11 Number of report-on-progress narratives according to discursive moves	538
Table 8.12 Number of report-on-progress narratives according to themes	538
Table 8.13 Narrative functions and the clients' prototypical discursive moves, positionings and relational work	548
Table 9.1 Self-esteem and the garden metaphor in the three threads	562
Table 10.1 Location of metacomment according to the total number of entries (Mel and Ellie's threads)	624
Table 10.2 Number of discursive moves in the three most frequent themes in Ellie's thread	626
Table 10.3 Number of discursive moves in the three most frequent themes in Mel's thread	626
Table 10.4 Location of metacomment according to the total number of entries (Chris' and Anna's threads)	638
Table 10.5 Number of discursive moves in the three most frequent themes in Chris' thread	640
Table 10.6 Number of discursive moves in the three most frequent themes in Anna's thread	640

Table 10.7 Location of metacomment according to the total number of entries (Taylor's thread)	652
Table 10.8 Number of discursive moves in the three most frequent themes in Taylor's thread	653
Table 10.9 Location of metacomment according to the total number of entries and sessions (all threads)	664

### List of Figures

Figure 2.1 The interface of the three research fields	15
Figure 2.2 Interpersonal pragmatics in the research interface	18
Figure 2.3 Computer-mediated communication in the research interface	47
Figure 2.4 Health discourse in the research interface	79
Figure 2.5 The interface of the three research fields revisited	145
Figure 3.1 Entry 2 in a body-of-the-email thread	174
Figure 3.2 Entries 1 and 2 in a word-document thread	178
Figure 3.3 Entry 3 in a word-document thread	179
Figure 3.4 Entry 4 in a word-document thread	180
Figure 3.5 Entry 5 in a word-document thread	181
Figure 3.6 Entry 6 in a word-document thread	182
Figure 3.7 Number of words used in individual sessions in Anna's thread	191
Figure 3.8 Number of words used in individual sessions in Ellie's thread	193

Figure 3.9 Number of words used in individual sessions in Chris' thread	196
Figure 3.10 Number of words used in individual sessions in Mel's thread	199
Figure 3.11 The opening sequence of Mel's thread	200
Figure 3.12 Number of words used in individual sessions in Taylor's thread	203
Figure 11.1 The interface of the three research fields revisited	670

## **Acknowledgements**

My sincere gratitude and respect go to the five clients who bravely and generously allowed me to analyze their counseling exchanges. My study would simply not have been possible without their participation. A huge thank you as well to the counselor who provided the data for my study and enthusiastically agreed to be interviewed so that I could gain a better understanding of what transpires in the five exchanges and in online counseling in general.

My genuine gratitude goes to Prof. Dr. Miriam Locher. As first supervisor of my doctoral thesis, she continuously provided me with support, suggestions and constructive feedback that sparked ideas and fruitful discussions about linguistics in general and my PhD project in particular. I especially appreciated her enthusiasm for my topic and for my wish to make my results accessible and beneficial for practitioners. I also want to thank Prof. Dr. Lorenza Mondada, who provided further insight as my second supervisor. Her interest in and feedback on my work incited my curiosity about research from a conversation-analytic perspective and in this way broadened my understanding of my own research.

I would like to thank the Swiss National Science Foundation for funding the research project Language and Health Online (SNF 100016-143286). Being part of this project allowed me to work on my dissertation as well as co-organize a research conference, co-write several articles (with Miriam Locher and Marie-Thérèse Rudolf von Rohr), and edit a special issue on language and health online (with

Miriam Locher). Further, I have profited from the Hermann Paul School of Linguistics (HPSL) Basel through a starting and transitional scholarship as well as a fully-funded PhD scholarship (due to the financing of the SNF-project, I returned this scholarship so that another student could profit from funding). The HPSL also provided a research environment in which a vibrant exchange between doctoral students was fostered and internationally acclaimed researchers participated in data workshops and colloquia.

I had the privilege to work with many different people at the University of Basel during my doctoral studies. Many thanks go to Andrew Shields who proofread my thesis and provided positive and motivating feedback in the last stages of my PhD. Many thanks also to Marie-Thérèse Rudolf von Rohr, who worked with me in the SNF-project *Language and Health Online* and with whom I shared an office and numerous conference trips. Thank you to the three interns in the SNF-project, who helped with coding and literature searches: Anja Grüter, Mirjam Willhelm and Mirjam Krebs. A special thank you goes to Brook Bolander, whose honesty, enthusiasm and encouragement as my mentor in the *womentoring* program at the University of Berne, and as a co-worker at the University of Basel was always much appreciated. Andrea Wüest and Catherine Diederich also deserve a special thank you for their continued support and encouragement over the years. Finally, the team of post-docs and doctoral students at the HPSL were always encouraging in trial presentations, data sessions, and workshops. Thank

you to Aline Bieri, Philipp Dankel, Dasha Dayter, Helen Gilroy, Regula König, Stefanie Meier, Thomas Messerli, and Florent Perek.

Thank you to my co-workers at the Gesundheits- und Sozialdirektion Nidwalden, especially the team at the Direktionssekretariat: Michèle Blöchli, Karen Dörr, Daniela Feierabend and Andreas Scheuber. My heartfelt thanks to all of them for their warm welcome into the team, their support, their encouragement, and their patience during the last few months of my PhD.

Thank you also to my friends for their support, their encouragement and their interest in my work during this entire PhD process. Their kind words and actions were always a great pillar of support and motivation. A wholehearted thank you to Caroline, for simply listening, for encouraging me, for sometimes being pushy and for making useful suggestions, but most of all for helping me realize I can do this.

Last but certainly not least, my sincere gratitude goes to my family. They have all supported me in their own ways throughout the past few years and their support has meant the world to me. Warmest thanks to my sister Gabriela and my brother Lukas, for coming along to vacation spots that were also conference locations and for bringing along Leo and Kiwi to play with and distract me from my work. A very heartfelt thank you to my parents, Margrit and Bruno. Euer Engagement und eure Unterstützung in den letzten Jahren bedeuten mir mehr als ich ausdrücken kann. Ich danke euch von ganzem Herzen. This study is dedicated to my family.

## **Chapter 1 Introduction\***

The following example<sup>1</sup> is a brief extract from an email counseling exchange between a counselor and her client, Anna, who collaboratively work to improve Anna's emotional well-being. The counselor first comments briefly on Anna's progress before inquiring as to whether a specific date for a longer response would suit Anna. Anna responds by agreeing with the suggested date and reporting on her progress with a narrative. The counselor finally responds by praising Anna's reaction.

- (1.1) Counselor / Anna (Thread: Anna; Entry 8 to 10)  
Hi Anna,  
It sounds like you are making positive progress,  
and challenging your anxiety, even though it's

---

\* This study was part of the Swiss National Science Foundation project (SNF 100016-143286) entitled Language and Health Online. The SNF-project focused on interpersonal aspects of the language used in four online health practices. Within the project, we had overarching research questions that were answered collaboratively. Results of these research questions were published in Thurnherr et al. 2016, Locher and Thurnherr 2017 and Rudolf von Rohr et al. 2019. In addition, two PhD projects with separate research questions that were individually answered have been produced: Rudolf von Rohr (2018) and the present study.

<sup>1</sup> All examples are presented in their original form. I have not corrected orthography, grammar or punctuation. Nor have I changed any aspect of the font. The description at the beginning of each example provides the following information: the specific speaker (in case there are two, they are separated with a slash) and in brackets the specific thread (i.e., entire email exchange) as indicated by the client's name as well as the specific entry (i.e., number of email or turn within the thread). All clients are referred to by pseudonyms, the counselor is referred to by her profession to reduce possible confusion by name (for more information, see Chapter 3). Other identification markers within the examples are replaced by place holders in square brackets.



## 2 1 Introduction

really tough. How about [date] to send me an update for a full reply?  
Take care, and I wish you well with your essay,  
[Counselor]

Hi [counselor],  
[Date] should be fine!  
You're right, I am making progress - I had a panic attack on wednesday (I missed my flight to [place]!), but managed to calm myself down relatively quickly by thinking logically. I made it back eventually!  
I'll send you my full email in a few weeks.  
Thank you,  
Anna

Hi Anna,  
Well done, it sounds like you handled that situation really well, and it's definitely human and normal to get panicky when missing a flight!  
Take care and I look forward to hearing from you by the 31st,  
[Counselor]

This brief extract is filled with language that aims to create specific interpersonal effects. In the counselor's first message, she praises Anna's *positive progress* while she acknowledges that dealing with *anxiety* is *really tough*. Anna responds by agreeing with the counselor (*You're right*) and by reiterating that she is *making progress*. She accounts for this progress by reporting on how she successfully dealt with a difficult situation (*managed to calm myself down*); that is, she praises herself. The counselor responds with further praise (*well done*) and an

explanation that Anna's initial *panicky* reaction was *human and normal*.

Without a doubt, research on mental healthcare is sorely needed:

One in four adults experiences at least one diagnosable mental health problem in any given year. (Mental Health Task Force 2016: 4)

Three quarters of people with mental health problems receive no support at all. (Mental Health Task Force 2016: 8)

All too often people living with mental health problems still experience stigma and discrimination, many people struggle to get the right help at the right time and evidence-based care is significantly underfunded. (Mental Health Task Force 2016: 11)

These statements highlight the prevalence of mental health issues in the UK. Students at universities are no exception: according to the Guardian (2019), “[m]ental health issues have become a growing problem among students and academics.” The website of the Guardian contains an entire sub-site dedicated to “Mental health: a university crisis.” Clearly, there is a need to understand how mental health care is provided.

The present study investigates how interpersonal effects, such as the ones I have highlighted for example (1.1), are created in a specific type of mental healthcare: email counseling. I examine naturally occurring, written email counseling exchanges obtained from a counseling service located at a British higher education institution (BEI). My specific focus is the negotiation of the therapeutic alliance, i.e., “the

#### 4 *I Introduction*

collaborative bond between [the counselor] and [the client]” (Krupnick et al. 1996<sup>2</sup>: 532). There is a consensus among researchers on psychotherapy and counseling that the therapeutic alliance is “an important variable for psychotherapy process/change in various schools of psychotherapy” (Ackerman and Hilsenroth 2003: 1; see also e.g. Hillard et al. 2000; Horvath et al. 2011; Martin et al. 2000; Orlinsky et al. 1994). In other words, previous research has shown that the quality of the therapeutic alliance is a contributing outcome factor in counseling or psychotherapy.

Research on Internet-based psychotherapy and counseling has also shown that the therapeutic alliance in such treatments positively contributes to the outcome of therapy or counseling (see e.g. Berger 2017; Simpson and Reid 2014; Sucala et al. 2012). However, Berger (2017: 518) mentions that “research on individualized e-mail ... therapy is still very limited.” In his review of previous studies, Berger (2017: 519) notes that “[o]ne larger and several smaller studies suggest that a strong alliance can be established in this therapy format but more research is needed.” While I cannot provide an analysis of the effectiveness of the therapeutic alliance, a linguistic analysis of how the therapeutic alliance is established in email counseling can provide an “in-depth understanding of specific mechanisms of change and of qualitative [aspects of such] relationships” (Berger 2017: 521).

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<sup>2</sup> Krupnick et al. (1996: 532) talk about “patients” and “therapists”. In the psychotherapeutic approach that is practiced in the exchanges that I study, the interactants are referred to as “clients” and “counselors”. I therefore use these terms rather than patients and therapists (see also Chapter 3 for more details).

A close qualitative analysis of how the therapeutic alliance is established and negotiated is not just beneficial to online counseling, but to counseling in general. Despite its recognized importance for psychotherapy and counseling, how the therapeutic alliance is exactly negotiated has not been extensively researched by psychologists who use qualitative research methods. Many studies such as the ones cited above focused on researching the effectiveness of the therapeutic alliance. The few studies that have investigated how the therapeutic alliance is negotiated concentrated on finding “therapist factors that are associated with high quality alliances” (Nienhuis et al. 2018).

In a seminal paper, Ackerman and Hilsenroth (2003: 2) performed a comprehensive review of previous studies that examined “the therapist’s personal attributes and in-session activities that positively influence the therapeutic alliance from a broad range of psychotherapy perspectives.” Their list of personal attributes of therapists that enhance the therapeutic alliance include “trustworthiness”, “experience”, “confidence”, “warmth/friendliness”, or “understanding” (ibid.: 28). Further, Ackerman and Hilsenroth (2003: 28) explain that such therapist activities as “exploration”, “accurate interpretation”, “affirming”, or “involvement” make a further positive contribution to the negotiation of the therapeutic alliance. Nevertheless, how such attributes and activities manifest themselves in linguistic realizations is not explored. Ackerman and Hilsenroth ultimately suggest that

the most promising strategy for future research [on the therapeutic alliance] may be to examine the interpersonal exchanges

## 6 *1 Introduction*

between the [client] and [counselor] that impact alliance development. Investigating these in-session interactions may deepen our understanding of the nature of alliance development and the specific variables impacting it. (Ackerman and Hilsenroth 2003: 29)

Counseling and psychotherapy have been labeled as the “talking cure” (Launer 2005: 465). In other words, the care that is provided in mental healthcare consists of linguistic interaction, or in Ackerman and Hilsenroth’s (2003: 29) terms, “the interpersonal exchanges” or “in-session interactions.” Naturally, linguistics is predestined to examine such interpersonal exchanges or interactions. However, linguistic research on how counselors and clients collaboratively work on negotiating the therapeutic alliance over the entire course of the counseling process is relatively scarce compared to the plethora of research on healthcare.

I aim to fill this research niche by adopting an interpersonal-pragmatic perspective to analyze five naturally occurring email counseling exchanges that were conducted by one counselor and five separate clients. Interpersonal pragmatics is concerned with the “relational aspect of interactions between people” since “people adjust their language to their addressees and the situation in order to achieve interpersonal effects” (Locher and Graham 2010: 2). In other words, I aim to describe from a “relational/interpersonal perspective” how the therapeutic alliance is collaboratively established and negotiated (Locher 2015: 6).

To do this, I investigate two specific concepts that belong to interpersonal pragmatics: relational work and the construction of

identities. Relational work refers to “the work people invest in negotiating their relationships in interaction” (Locher and Watts 2008: 78). Previous research has shed light on such relational strategies as apologizing, criticism, praise, mitigation, or appealing for and displaying empathy, as well as the impact that such strategies have on ongoing interactions and the construction of identities. I approach identity from a social-constructivist perspective in which identity is seen as “the social positioning of self and other” (Bucholtz and Hall 2005: 586, emphasis removed). In other words, identity is “intersubjectively rather than individually produced and interactionally emergent rather than assigned in an a priori fashion” (Bucholtz and Hall 2005: 587).

It has previously been shown that such relational and identity work can best be studied in context (Bolander 2013; Lindholm 2017; Locher 2006; Morrow 2006, 2012; Placencia 2012; Rudolf von Rohr 2018). The context can, for example, be taken into account by including an analysis of the thematic content of a social practice as well as the discursive moves that are used in it. A discursive move refers to “the kind of contribution that the entry made to the ongoing interchange” (Miller and Gergen 1998: 192). Previous studies have found discursive moves such as assessments, advice-giving, metacomments, or problem statements, as well as greetings and farewells. The set of discursive moves used within a specific social practice can help distinguish it from other practices. In addition, it can serve as a backdrop for further analyses that focus on such issues as relational work or the construction of identities. Previous research has also shown that an analysis of specific

## 8 *1 Introduction*

social practices benefits from including the practitioner's perspective in the research to arrive at a more accurate and deeper understanding of the social practice (Pick 2011). Based on insights from these previous studies, I apply a mixed methodology that includes qualitative and quantitative steps and careful consideration of content, discursive moves and the form and function of linguistic expressions, as well as a triangulation of the data with a practitioner interview. With these methodological steps, I aim to answer the following research questions:

- What are the medium and situation characteristics of email counseling?
- What types of themes are discussed?
- What types and patterns of discursive moves can be found?
- What types of relational work come up and how are they employed?
- What types of identities are constructed, and how?
- Are there links between discursive moves, relational work and identities?

Answers to these research questions will provide a holistic description of the collaborative work in the email counseling exchanges in my corpus. The results will advance our understanding of interpersonal pragmatics in general and relational work and identity construction in particular. In addition, they will facilitate our understanding of the therapeutic alliance as well as the under-researched online social practice of email counseling.

This study consists of eleven chapters: the introduction and ten chapters that are organized into four parts. Part I includes an outline of how my study is situated in previous research (Chapter 2), a description of the data (Chapter 3) and an overview of my methodology (Chapter 4). My study incorporates three research fields: interpersonal pragmatics, computer-mediated communication and (mental) health discourse. Chapter 2 gives an overview of each research field and foreshadows how my study contributes to previous research. The chapter ends with a description of the research niche and a repetition of my research questions presented above.

In Chapter 3, I describe the five email counseling exchanges I analyze in my study. My data consist of email exchanges that focus on improving the clients' well-being through counseling. I provide descriptions of the data from a computer-mediated communication perspective and from a counseling perspective. The description of the latter perspective is facilitated by my training in psychology, which makes it possible for me to provide a comprehensive description of the counseling approaches that are utilized and offer insight into how these can influence counseling interactions.

How I analyze the data will be outlined in Chapter 4. I utilize a mixed methodology that consists of four methodological steps: a content analysis, a discursive moves analysis, a form and function analysis of linguistic expressions, and the inclusion of a practitioner interview and techniques from corpus linguistics. Each step builds on and takes results from the previous steps into account. The content and discursive



moves analyses are quantified in specific ways. Finally, the practitioner interview serves to triangulate my data and to gain insight into the data from the practitioner's perspective.

Part II focuses on the results of the content and the discursive moves analyses. These results are presented in three chapters that describe the themes and discursive moves that occur in the corpus (Chapter 5), the distribution and sequence of themes and discursive moves (Chapter 6) as well as the linguistic realization of the four most frequently used discursive moves (Chapter 7). The results in Chapter 5 will facilitate a description of the social practice of email counseling, for I will show which themes are discussed and which discursive moves are employed by the interactants. In addition, this description facilitates a comparison of email counseling with other social practices.

Chapter 6 deals with the distribution of themes and the distribution and sequence of discursive moves. I analyze the distribution of themes and discursive moves in terms of the entire corpus, individual interactants, and different stages of the counseling process. The analysis of the sequence of discursive moves focuses on the four most frequent moves in my corpus. Previous research has identified a stepwise entry to advice (see e.g. Heritage and Sefi 1992; Lindholm 2010; Locher 2006; Rudolf von Rohr 2018; Silverman 1997). Analyzing the sequential patterns of the discursive moves in email counseling reveals whether such a stepwise entry is also practiced by the counselor in my corpus. In addition, the collaboration between the clients and the counselor can only be analyzed by closely tracking how the interactants

structure their responses to each other. The analysis of the sequence of moves facilitates the description of the collaborative work between the interactants.

In Chapter 7, I will show how the four most frequent discursive moves are linguistically realized by the interactants on a syntactic and a lexical level. I will also provide an analysis of the sub-functions that the four most frequent discursive moves fulfill. This thorough analysis of themes and discursive moves within the email counseling exchanges will serve as a foundation for the analysis of forms and functions of specific linguistic expressions in Part III.

As my succinct description of the example given at the beginning of this introduction has shown, even brief extracts of the interaction between the counselor and a client involve many distinct ways in which interpersonal effects are created. The richness of such interpersonal effects in my data did not allow for an exhaustive analysis of relational work and identity construction in the entire corpus. Instead, I focused on “crucial moments” in which “subtle negotiations of positioning” and relational work occurred (Locher 2015: 8). Part III includes three chapters that each deal with interpersonal-pragmatic aspects within such crucial moments: narratives (Chapter 8), a specific text block that occurs in several of the exchanges and focuses on building up the clients’ self-esteem (Chapter 9), and the closure process of the email counseling exchanges (Chapter 10).

In Chapter 8, I analyze the relational work and positionings that occur within and around personal narratives. I have chosen to analyze

## 12 *1 Introduction*

narratives as they are a vital aspect in counseling (Bercelli et al. 2008b; Boothe 2015; Capps and Ochs 1995; Ferrara 1994; Labov and Fanshel 1977). In addition, personal narratives are employed from the beginning until the last stages in the email counseling exchanges in my corpus. In other words, analyzing the relational work employed and the positionings that are created in and around such narratives allows me to track the transformation of the constructed identities throughout the entire exchanges.

Chapter 9 then zooms in even further as it presents results from the analysis of a specific text block that the counselor uses to help clients' increase their self-esteem. Within this text block, the counselor uses a metaphor to explain the abstract notion of self-esteem and makes various suggestions as to how clients can improve their self-esteem. The exact same text block is used in the exchanges of three different clients, which facilitates a comparison of how the ensuing interaction after the text block differs with each client. As this text block and its subsequent discussion occur at the beginning stages of the counseling, its analysis provides an opportunity to describe how the therapeutic alliance is collaboratively established at such an early stage of the counseling process.

Chapter 10 focuses on the opposite end of the counseling exchanges as it deals with the closure process of the email exchanges. The counseling service from which the data of this study originate provides short-term therapy. In other words, the counselor is under pressure to finish the email counseling after a certain number of exchanges. I report

on how the counselor introduces the closure process. In addition, I specifically pay attention to how closure is accomplished through the collaborative work between the clients and the counselor.

Finally, Part IV consists of Chapter 11, which provides the reader with concluding remarks. In this chapter, I pull the strands of my argumentation in previous chapters together and present a concise description of the online health practice of email counseling. I show how my research adds to previous research on interpersonal pragmatics. In addition, I also provide a summary of how I tried to include the practitioner's perspective and how insights from my study will flow back to practitioners – and actually already have been doing so. Finally, I acknowledge the limitations of my study and point out how these could be addressed with future research.

# **PART I**

## Chapter 2 From Theory and the Literature Review to the Research Niche

I aim to shed light on the interpersonal aspect of the language used to negotiate the therapeutic alliance in email counseling. As I have mentioned in the introduction, the therapeutic alliance is “the collaborative bond between [counselor] and [client]” (Krupnick et al. 1996: 532). From a research perspective, this translates into an interface of three research fields (Figure 2.1). First, interpersonal pragmatics addresses the interpersonal aspect of language use. Second, computer-mediated communication (CMC) tackles online interactions, such as email exchanges. Third, health discourse calls attention to any communicative action that revolves around health, including mental health.

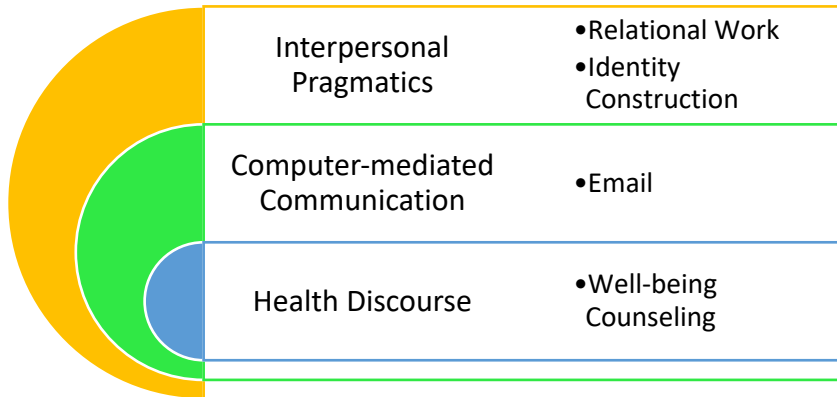


Figure 2.1 The interface of the three research fields

Within each research field, I focus on specific issues. In interpersonal pragmatics, I investigate two fundamental notions: relational work and identity construction. Relational work is “the work people invest in negotiating their relationships in interaction” (Locher and Watts 2008:

78). In the context of email counseling, relational work is the work that the clients and the counselor invest in negotiating the therapeutic alliance. My aim is to explore the relational strategies that are used to negotiate this alliance. Previous research has examined strategies such as displaying empathy, praise, bonding, humor and so on in various social practices and contexts. The second notion of interpersonal pragmatics that I focus on is the construction of identities. I adopt a social constructivist perspective on identities, meaning that I understand identity as socially constructed through various means, one of them being language. Social constructivism sees identity as emerging in interaction and as fluid. In the case of the email counseling exchanges, the construction of the therapeutic alliance as well as the identities of the clients and the counselor is, in fact, achieved entirely through the use of written language, as other means such as physical comportment, gazes, gestures and so on are not readily available. I will demonstrate that the clients and the counselor use various kinds of relational strategies to negotiate the therapeutic alliance and to construct a diverse set of nuanced identities. I will also provide empirical evidence to explain the link between relational work and the construction of identities. Section 2.1 gives an overview of interpersonal pragmatics in more detail.

The second research field, computer-mediated communication (CMC), addresses the medium in which the interactions that I examine take place. Email can be characterized as written, asynchronous, private, one-on-one communication. I investigate how the clients and the counselor utilize the medium to achieve their goals in the therapeutic

alliance. My analyses will show that, on the one hand, the interlocutors face specific challenges when conversing via email. On the other hand, they frequently succeed in finding creative solutions to such challenges. Additionally, the interlocutors also take advantage of specific affordances that the medium of email makes available, such as the persistence of the transcript. As a result of this affordance, emails are not of an ephemeral nature, but rather persist until the interlocutors delete them. This persistence makes it possible for the interlocutors to consult the entire content of the interaction long after it has taken place. I will provide an overview of previous research on CMC in Section 2.2.

The third research field deals with the investigation of health discourse. My focus lies on mental health, which has so far received less attention than other health areas in linguistics. The treatment of mental health issues relies heavily on language. While there is a growing acceptance of the bio-medical origins of mental health issues, psychotherapy and counseling are still fundamentally language-based activities in which clients talk about their mental health. The importance of language to psychotherapy and counseling is clear from how the work between counselors and clients is often called the “talking cure” (Launer 2005: 465). The particular counseling exchanges that I examine aim to improve the clients’ well-being. In other words, this is not counseling focused on providing information to the clients. Rather, the mental health of the clients is foregrounded – and especially how it can be improved. I will demonstrate how the therapeutic alliance is negotiated in email counseling and how this negotiation helps the clients and the



counselor to improve the clients’ well-being. In Section 2.3, I will review previous research on (mental) health discourse before delineating the research niche I aim to fill (Section 2.4).

### 2.1 Interpersonal Pragmatics

My overall focus is on interpersonal pragmatics. As I have highlighted above, I focus on two specific notions: relational work and identity construction. I am further interested in how these two notions are linked.

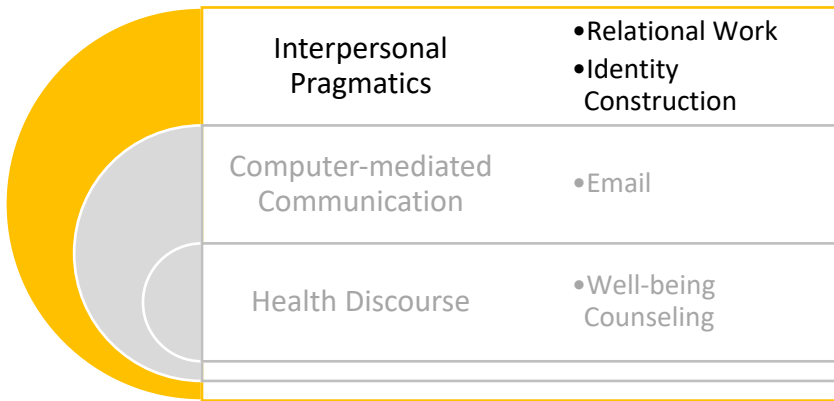


Figure 2.2 Interpersonal pragmatics in the research interface

Interpersonal pragmatics is a sub-field of pragmatics, which comprises the study of language in use. This very broad definition of pragmatics calls for a refinement. However, as various linguists have pointed out (Crystal 1997; Locher and Graham 2010; Taavitsainen and Jucker 2010; Verschueren 2009), researchers within pragmatics do not all agree on one specific definition. Within interpersonal pragmatics, researchers often cite Verschueren’s (2009) definition of pragmatics,

which advocates for a broad approach to the analysis of language in use. Verschueren (2009) defines pragmatics as

a general functional perspective on (any aspect of) language, i.e. as an approach to language which takes into account the full complexity of its cognitive, social, and cultural (i.e. meaningful) functioning in the lives of human beings. (Verschueren 2009: 19, italics removed)

Locher and Graham (2010: 1) describe the advantage of this broad definition: It “includes the study of language in use from a social and cultural point of view” and “allows us to examine the complexity of language use from a rich array of perspectives.” Central to my study is the functional perspective, as I am interested in the functions or effects that interlocutors realize with their linguistic choices.

Verschueren (2009: 19) notes that pragmatic research investigates “any aspect of ... language.” I focus on the interpersonal aspect. Locher (2012: 37, emphasis in original) describes this as a “focus ... not so much on *what* (informational aspect) is being said, than on *how* (relational aspect) it is being said and what effects the choices of the interlocutors create.” In my study, attention is given to how the clients and counselor converse. The “how” (in Locher’s words) creates the interpersonal effects that are highly relevant to the negotiation of the therapeutic alliance. I thus adopt a “relational/interpersonal perspective” (Locher 2015: 6) to investigate the counseling exchanges.

In their introduction in *Interpersonal Pragmatics*, Locher and Graham (2010) define interpersonal pragmatics as

examinations of the relational aspect of interactions between people that both affect and are affected by their understandings of culture, society, and their own and others' interpretations. (Locher and Graham 2010: 2)

They further assert that the aim of interpersonal-pragmatic research is to

explore facets of interaction between social actors that rely upon (and in turn influence) the dynamics of relationships between people and how those relationships are reflected in the language choices that they make. (Locher and Graham 2010: 2)

Locher and Graham (2010: 2) utilize Janet Holmes' (1992) often-cited example of how address terms can be used to create interpersonal effects. Holmes (1992: 3) has shown that a woman leaving her office adjusts the use of address terms and farewell formulas depending on who she says goodbye to. These different types of address terms create specific interpersonal effects, such as indexing the type of relationships that interactants have with each other. Address terms are an excellent example of how language can be used to create such effects. For example, a mother saying *Hi Jamie* to her son when he comes home from school conveys a different interpersonal effect than when she says *James* to the same son in a loud and stern voice when he comes into the house after he broke a window with a soccer ball while playing outside (see Holmes (1992) for more details on her example and Locher and Graham (2010: 2) for a discussion of how Holmes' example can be reflected on from an interpersonal-pragmatic perspective). As Locher and

Graham (2010: 2) concisely put it, “people adjust their language to their addressees and the situation in order to achieve interpersonal effects.”

Locher explicitly asserts elsewhere (Locher 2014) that Locher and Graham (2010) did not aim to propose a new theory of the interpersonal aspect of language. Rather, they wanted to “bring together researchers from different theoretical strands and fields in order to discuss topics and themes that are relevant to the study of the interpersonal side of language in use” (Locher 2014: 312). The collection of articles in the handbook *Interpersonal Pragmatics* (Locher and Graham 2010) exhibits the diverse approaches through which interpersonal aspects of language can be studied. Locher and Graham divided the handbook into three parts, the first focusing on theoretical approaches, the second on linguistic strategies that create interpersonal effects, and the third on practices and contexts in which interpersonal issues are examined.

In the second part, four researchers discuss specific linguistic strategies that can be used to “fulfill different social and interpersonal functions” (Locher and Graham 2010: 7). Schneider (2010) focuses on the linguistic strategy of mitigation, Haugh (2010) discusses respect and deference, Stapleton (2010) demonstrates the multifunctionality of the linguistic strategy of swearing, and Schnurr (2010) shows that humor can be utilized to create such distinct effects as solidarity, mitigation, and demarcating in- and out-groups. This focus on linguistic strategies resembles my emphasis on the use of specific relational strategies in the counseling exchanges. Stapleton’s and Schnurr’s conclusions that individual strategies are multifunctional especially

influenced my analysis of relational strategies used by the clients and the counselor.

The work that Locher and Graham (2010) collected shows the diverse ways in which researchers can approach the relational/interpersonal side of language. Locher and Graham (2010: 10) note, though, that “the issues covered in this collection are far from exhaustive.” They argue that “ultimately, every set of linguistic data can be looked at from the perspective of interpersonal pragmatics” (ibid.: 10). In the following pages, I will focus my overview on the two notions that are central to my analysis: relational work (Section 2.1.1) and identity (Section 2.1.2.). I will also consider how they are linked (Section 2.1.3).

### **2.1.1 Relational Work**

Krupnick et al. (1996: 532) defined the therapeutic alliance as “the collaborative bond between [counselor] and [client]<sup>3</sup>.” I aim to uncover how the clients and the counselor negotiate the therapeutic alliance in the counseling exchanges. The framework I use to analyze this negotiation is relational work as proposed by Locher and Watts (see e.g. Locher 2004, 2006, 2008, 2012; Locher and Watts 2005, 2008; Watts 2003). I have given Locher and Watts’ (2008: 78) brief definition of relational work in the introduction: “the work people invest in

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<sup>3</sup> Krupnick et al. (1996: 532) use the terms “therapist” and “patient”, whereas I use the terms counselor and client. These are the technical terms that are used in the type of counseling that is practiced in the data that I study.

negotiating their relationships in interaction.” They refined their definition three years later:

Relational work refers to all aspects of the work invested by individuals in the construction, maintenance, reproduction and transformation of interpersonal relationships among those engaged in social practice. (Locher and Watts 2008: 96)

Relational work originally derived from politeness research. Locher and Watts (2005, 2008) called for researchers to look beyond politeness and examine “the entire spectrum of the interpersonal side of social practice” (Locher and Watts 2008: 78). Locher (2004: 51) describes this entire spectrum as consisting of “verbal behavior [ranging] from direct, impolite, rude or aggressive interaction through to polite interaction” and that it “encompass[es] both appropriate and inappropriate forms of social behavior.” It is this entire spectrum of interpersonal work that is of interest in my analysis of the therapeutic alliance. I concur with Locher (2012) when she outlines the main goal of research on relational work:

to better understand how people create relational effects by means of language, comprehend how this process is embedded in its cultural and situated context, and recognize how this is interrelated with social and cognitive processes. (Locher 2012: 45)

I investigate such processes and show how they are embedded in the social practice of email counseling. Moreover, I demonstrate how the clients and the counselor “create relational effects” (ibid.: 45) that help

negotiate the therapeutic alliance and, as a consequence, help the clients to improve their well-being.

Relational work is based on several underlying key concepts (see e.g. Locher 2004, 2012, 2014), such as face, frames, norms, and judgments of behaviors. I will briefly explain these notions and their relevance for relational work as an overview of the framework. More detailed descriptions are available in Watts (2003), Locher and Watts (2005, 2008), or Locher (2004, 2006, 2008, 2012) among others.

Central to Locher and Watts' framework of relational work is the notion of face. Locher and Watts adopt Goffman's (1967) definition of face:

The term face may be defined as the positive social value a person effectively claims for himself [*sic*] by the line others assume he [*sic*] has taken during a particular contact. Face is an image of self delineated in terms of approved social attributes – albeit an image that others may share, as when a person makes a good showing for his [*sic*] profession or religion by making a good showing for himself [*sic*]. (Goffman 1967: 5)

Locher (2012: 46) emphasizes the dynamic nature of face when she argues that “face relies on the other interactants and their uptake of the ‘line’ that the interlocutors wish to project.” Locher (2004: 52) further “equate[s face] with a mask [or] image”. She elaborates on this point elsewhere (Locher 2008: 514) when she explains that face is “an image a person gives him- or herself during a particular interaction, and that this face is not fixed but negotiated.” This understanding of face justifies Scollon and Scollon's (2001) argument that there is no

communication in which face does not play a role: interlocutors always give themselves an image during any conversation. Locher (2008: 514) references Goffman (1967: 13) when she argues that “considerations of face will influence interactions between people.” This also correlates with Locher and Graham’s (2010) argument that any linguistic dataset can be studied from an interpersonal-pragmatic perspective, as any interaction always contains considerations of face.

In the therapeutic alliance, though, face concerns are especially salient. For the clients, the struggle with sensitive and very personal aspects of their lives leads them to seek counseling in the first place but talking about personal struggles can be highly threatening to someone’s face. For the counselors, in turn, it is necessary to understand clients as best as they can, which includes trying to understand the image that clients project in the interaction and their perspective on themselves as well as on their struggles. Face is therefore a central aspect of the interaction in the therapeutic alliance.

The second important notion in connection with relational work is that of frames. Tannen (1993: 53) defines frames as “structures of expectation based on past experience.” As Locher (2012) explains in more detail:

the frame functions as a cognitive skeleton that structures expectations with respect to action sequences (e.g., rules of turn-taking), but also understandings of roles and the respective rights and obligations (e.g., boss and employee; chair persona and committee members; husband and wife; parent and child). (Locher 2012: 47)



Locher (2012) further argues that frames have a cognitive dimension and are learnt through socialization. They are then drawn on during interaction. Even in new interactions, people can draw on already existing frames of interactions that are similar to the new ones. In other words, interactants have structures of expectations they can rely on even for new situations. They are also culturally embedded, since they are constituted by previous interactions and learnt through socialization. Locher (2012: 47) emphasizes that frames and the roles that are inscribed in them are enacted in interaction and are therefore “dynamic and emergent.” In the context of email counseling, the interlocutors in the counseling exchanges bring (a set of) frames to the interaction – even if they have never participated in email counseling. And then a (new) frame, that of email counseling, is negotiated throughout the counseling exchanges through the enactment of the previously existing frames. During this process, the frames likely also change, for they are not static, but are always influenced by each new interaction that takes place.

Finally, through socialization people learn about norms – that is, the rights and obligations of specific social practices. As Locher (2012: 47) argues: “People have an understanding of the roles that are tied to the practices they are engaging in and a tacit knowledge of what rights and obligations come with these roles.” Norms are thus linked to particular frames. Locher (2012: 47) highlights that these norms, too, are not static, but are “dynamic and based on negotiations.” It is within interactions that norms are negotiated. They are therefore discursively

constructed. Consequently, they are highly embedded and emergent at the same time (Locher 2014).

This can be observed especially well in practices that are partly new to interlocutors, who bring along frames and norms that are familiar to them from similar social practices. As interlocutors interact in this newly encountered social practice, they establish, enact and negotiate new frames and norms, so that the previous frames and norms change and take on new forms. It might seem that this implies that there are two distinct roles in email counseling: the client who seeks support and the counselor who provides support. According to Comer (2010), however, the aim of the therapeutic alliance can be an egalitarian relationship in which the counselor is a collaborator rather than an expert in specific counseling approaches. In such cases, the roles in the therapeutic alliance need to be established and negotiated (I explain the notion of the relationship between a counselor and a client further in Chapter 3).

As I have pointed out, none of these notions on which relational work is based are static. As a result, the links between them are also neither static nor linear. Instead, they comprise a dynamic process which can both constitute interaction and be influenced by interactions at the same time. Interactants do not project a face out of a vacuum. Rather, they bring along frames, i.e., “expectations with respect to action sequences [and] understandings of roles and the respective rights and obligations ...” (Locher 2012: 47). It is through the help of these frames that interactants then project a face in the emergent interaction.

This projected face depends on the uptake of the interactants and can be accepted, challenged, saved, or even enhanced. This uptake depends on the frames and norms that the other interactants bring along to the interaction. They judge behavior in the interaction according to those norms. The interactants then respond to the face that the first interactant projected, or which they assumed the interactant projected. In the process, face is influenced by the frames and norms and the interaction itself, and in turn, projections of face can influence interactants' frames and norms.

Research on relational work is concerned with the negotiation of face, frames, norms and judgements of behavior and how they are discursively constructed by interlocutors in a given interaction. Researchers investigate how and why face can be challenged, enhanced or saved. For Locher (2014), such considerations of face result in pragmatic variation in interaction. More precisely, she calls such linguistic choices "pragmatic intra-speaker variation" (ibid.: 317) and argues that interactants choose linguistic styles in order to "maintain, challenge, or enhance their standing towards other interactants" (ibid.: 317). Such linguistic behavior that either challenges, maintains, saves or enhances the face of an interlocutor is one of the principal aspects of my study.

Relational work has been applied and investigated by various researchers. Watts, for example, has analyzed relational work in family discourse (1991, 2003). Zayts and Schnurr (2011, 2014) and Schnurr and Zayts (2017) have studied relational work in genetic counseling contexts. In an online context, Bolander (2013) has researched

relational work on blogs, while Placencia (2012) focused on Yahoo!Respuestas, a peer-to-peer question and answer site on which interactants talk about beauty and styling tips. Locher (2004) uses the framework of relational work to explain how power is enacted in unfolding disagreements in various contexts, while her analysis of an advice column on the Internet (Locher 2006) highlighted relational strategies used by a team of advice-givers to tailor their responses to the individual advice-seekers and the broader audience of the advice column more generally. These are only a few of the studies that investigate relational work. Instead of reviewing more literature on relational work in general, I will review research that applies relational work in CMC research in Section 2.2 and health discourse research in Section 2.3.

### **2.1.2 Identity Construction**

The second interpersonal aspect that I focus on is the construction of identities. As we have noted elsewhere, the transformation of the self is one of the aims in email counseling (Thurnherr et al. 2016). Mendoza-Denton (2002) gives the following definition of identity:

the active negotiation of an individual's relationship with larger social constructs, in so far as this negotiation is signaled through language and other semiotic means. Identity, then, is neither attribute nor possession, but an individual and collective-level process of semiosis. (Mendoza-Denton 2002: 475).

Mendoza-Denton describes how identity is seen in a postmodernist or social-constructivist view. I subscribe to such a social-constructivist approach, meaning that I understand identity as “a social, discursive, emergent and relational phenomenon” (Thurnherr et al. 2016: 451; see also Thurnherr 2017).

This approach is based on work by Bucholtz and Hall (e.g. 2005) and Davies and Harré (1990). For Bucholtz and Hall (2005: 587), identity is “intersubjectively rather than individually produced and interactionally emergent rather than assigned in an a priori fashion.” They draw on the work of Davies and Harré (1990) and see identity as “the social positioning of self and other” (Bucholtz and Hall 2005: 586, emphasis removed). Davies and Harré (1990) approached identity from a discursive-psychological perspective and proposed the notion of positioning. In my analysis, I apply the concept of positioning and show how it can be used to explain the construction of identities in email counseling. I will first elaborate on Davies and Harré’s (1990) positioning theory, before highlighting some relevant aspects of Bucholtz and Hall’s (2005) approach that are salient to my interpretation of identity as a discursive phenomenon.

*Davies and Harré’s “Positioning: The Discursive Production of Selves”*

Davies and Harré (1990) sought to provide an understanding of how personhood or the self is constructed in discourse. They criticized essentialist, or in their terms transcendentalist, views of the self. Instead, they promoted a discursive approach to identity in which “an individual

emerges through the processes of social interaction” and “is constituted and reconstituted through the various discursive practices in which they participate” (1990: 46). They explain the emergence of individuals by using the concept of “positioning”, which is “the discursive process whereby selves are located in conversations as observably and subjectively coherent participants in jointly produced story lines” (ibid.: 48). This is clearly in line with the way Locher and Watts (2005, 2008) approached the notion of face as a discursive construct.

Davies and Harré (1990: 48) further distinguish between “interactive” and “reflexive” positioning, the former occurring when “what one person says positions another” and the latter when “one positions oneself.” In other words, interlocutors position themselves or position others in conversations. Additionally, when one interlocutor positions her-/himself, this might position other interlocutors at the same time, and perhaps even in distinct ways. While the terminology used by Davies and Harré – interactive and reflexive positioning – has not been widely used by researchers, it is generally accepted that interlocutors can position themselves or others, or even do both at the same time.

Davies and Harré also raise our awareness with regards to the consequences of positioning in interaction:

Once having taken up a particular position as one’s own, a person inevitably sees the world from the vantage point of that position and in terms of the particular images, metaphors, story lines and concepts which are made relevant within the particular discursive practice in which they are positioned. (Davies and Harré 1990: 46)

In other words, interlocutors act in and interpret a conversation from the position that they have taken up. In a mental health context, this can be easily illustrated: clients who position themselves as advice-seekers will likely see what a counselor says as advice. This is so because clients interpret the ongoing conversation from a position as an advice-seeker. Even for an observer, the counselor's suggestions will likely come across as advice, as the observer probably assumes that the counselor made the suggestions from a position as an advice-giver. Of course, this is a rudimentary and not a very nuanced illustration, but it shows how interlocutors can view aspects of conversations from the position they have taken up or the position they assume the speaker has taken up when producing the specific utterance. Davies and Harré (1990: 45) concisely summarize that "the social meaning of what has been said will be shown to depend upon the positioning of interlocutors ... ." This is highly salient for an analysis of the interpersonal aspect of (mental) health discourse.

For Davies and Harré (1990: 53-54), frames are static and independent of ongoing conversation, and that makes them a rather essentialist tool that is unusable in a discursive approach to the construction of identities or selves. However, I argue against their static, essentialist interpretation of frames. In the framework of relational work developed by Locher and Watts (2005, 2008), frames are dynamic and emergent and are (re-)negotiated in interaction. I believe that this view of frames as dynamic and emergent fits well with the notion of positioning from Davies and Harré (1990). Interlocutors not only draw on frames to

understand their own positioning, but can also draw on frames in the sense of how such positionings can be performed. In fact, Davies and Harré (ibid.: 51) themselves have argued that interlocutors draw on past experience to interpret and understand positionings in the present.

It is important to note that Locher and Watts' (2005, 2008) interpretation of frames does not preclude interlocutors from linguistic choice in interactions. Simply because an interaction is interpreted from one specific frame does not mean that the interlocutors have to interact in pre-determined ways. On the contrary, interlocutors can draw on the structured knowledge contained in frames to position themselves in several ways, including the contradiction of what is expected. Further, an ongoing interaction also influences and renegotiates interlocutors' frames and thus might even facilitate new possible positionings in a frame. I argue that frames can thus be readily incorporated into a theory of positioning.

Davies and Harré (1990: 62) summarize their approach as follows:

The focus is on the way in which the discursive practices constitute the speakers and hearers in certain ways and yet at the same time is a resource through which speakers and hearers can negotiate new positions. ... [P]osition is what is created in and through talk as the speakers and hearers take themselves up as persons.

These statements clearly indicate the discursive nature of positioning. In addition, Davies and Harré share a specific understanding with Locher and Watts: that interpersonal work is created through discursive



practices, which means that language is always salient. This salience is also notable in Bucholtz and Hall's (2005) approach to identity.

*Bucholtz and Hall's "Identity in Interaction: A Sociocultural Linguistic Approach"*

Bucholtz and Hall (2005: 586, italics removed) define identity as "the social positioning of self and other" and thereby draw on the work of Davies and Harré (1990). In comparison to Davies and Harré's discursive-psychological approach, Bucholtz and Hall (2005: 586) utilize a "socio-cultural linguistic perspective" which means that they focus "on both the details of language and the workings of culture and society." Both publications thereby give center stage to how language is used for the construction of identity. Like Davies and Harré (1990), Bucholtz and Hall disapprove of a view of identity as essentialist and static. Instead, they see it as "a discursive construct that emerges in interaction" and as an "intersubjective accomplishment" (Bucholtz and Hall: 587).

Bucholtz and Hall (2005: 586) postulate "five principles that [they] see as fundamental to the study of identity." These principles are "the emergence principle" (ibid.: 587), "the positionality principle" (ibid.: 591), "the indexicality principle" (ibid.: 593), "the relationality principle" (ibid.: 598), and "the partialness principle" (ibid.: 605). As I do not apply Bucholtz and Hall's framework in its entirety to my data, I will not explain these principles in detail (the interested reader can consult Bucholtz and Hall's (2005) seminal paper, which includes an explanation and empirical illustrations for each principle). Instead, I

draw on Bucholtz and Hall's work to further explain my understanding of identity as a discursive and emergent product of interaction.

The first principle addresses the emergence of identity in interaction and is reminiscent of Davies and Harré's argument against essentialist perspectives on identity. Bucholtz and Hall (2005: 588) align themselves with this argument when they state that identity is "fundamentally a social and cultural phenomenon" and should be viewed as "the emergent product rather than the pre-existing source of linguistic and other semiotic practices." Bucholtz and Hall (2005: 588) explicitly mention that they see identity "not simply as a psychological mechanism of self-classification" but instead as "something that is constituted through social action, and especially through language." Both Davies and Harré (1990) and Bucholtz and Hall (2005) thus clearly advocate for a social-constructivist view of identity in the sense that it emerges in and through discursive practices.

Bucholtz and Hall (2005: 592) further postulate that identity must be viewed not just from "macro-level demographic categories," but also from more "local, ethnographically specific cultural positionings" as well as "temporary and interactionally specific stances and participant roles" (positionality principle). This echoes Davies and Harré (1990) and their interest in subtle and situated acts of positioning. Importantly, Bucholtz and Hall (2005) do not dismiss all influence of such macro-level demographic categories as gender, class, or race on the construction of identity. On the contrary, they see these categories as important but insufficient on their own to explain linguistic behaviors

and identities. In other words, they encourage researchers to look at macro-level and micro-level categories to understand the construction of identities. Moreover, Bucholtz and Hall (2005: 593) argue that “different kinds of positions typically occur simultaneously in a single interaction” and that researchers need to “conside[r] multiple facets in order to achieve a more complete understanding of how identity works.”

With their indexicality principle, Bucholtz and Hall (2005: 593) refer to mechanisms that index positionings or identities, with the specification that “an index is a linguistic form that depends on the interactional context for its meaning.” Bucholtz and Hall (2005: 594) list four types of related indexical processes through which identity can emerge. First, interactants can overtly mention an identity category or a label. Second, they can use implicatures and presuppositions to index a position or identity. Third, they can display an “evaluative and epistemic orientatio[n] to ongoing talk, as well as interactional footings and participant roles” (ibid.: 594). Fourth, they can utilize “linguistic structures and systems that are ideologically associated with specific personas and groups” (ibid.: 594) and thus position themselves or others as either belonging or not belonging to such personas or groups. With this principle, Bucholtz and Hall (2005: 598) heighten our awareness of “the wealth of linguistic resources that contribute to the production of identity positions.”

Further, Bucholtz and Hall (2005: 598) see identity as an inherently “relational phenomenon” (relationality principle). They explain

that “identities are never autonomous or independent but always acquire social meaning in relation to other available identity positions and other social actors” (ibid.: 598). Naturally, this aspect of identity is highly salient to my analysis of the therapeutic alliance and the identities that are projected within the alliance. Identities are always dependent on the other identity present in the therapeutic alliance: Clients and counselors create their identities together and in relation to each other. Additionally, clients also position themselves in specific ways when talking about their lifeworld experiences. For example, interpersonal issues are a prominent topic in psychotherapy or counseling, and talking about such interpersonal issues involves the clients positioning themselves and others in specific and related ways (e.g. a client talking about their loved one). For Bucholtz and Hall (2005: 598), identity relations cannot simply be viewed from a perspective of “sameness and difference” as had been done in previous literature. Instead, they list three different types of identity relations: in addition to sameness and difference, they identify “genuineness” and “artifice”, as well as “authority” and “delegitimacy” (ibid.: 598), but they explicitly add that this list “is not intended to be exhaustive but rather suggestive of the different dimensions of relationality created through identity construction” (ibid.: 599).

Finally, Bucholtz and Hall (2005: 605) acknowledge that the construction of identity is only partial: “Because identity is inherently relational, it will always be partial, produced through contextually

situated and ideologically informed configurations of self and other.”

Bucholtz and Hall argue that identity construction

may be in part deliberate and intentional, in part habitual and hence often less than fully conscious, in part an outcome of interactional negotiation and contestation, in part an outcome of others’ perceptions and representations, and in part an effect of larger ideological processes and material structures that may become relevant to interaction. (Bucholtz and Hall 2005: 606)

Locher (2008: 513) describes the partialness principle in terms of how “identity construction should not be understood as a fully rational and always conscious process since there are undoubtedly aspects that are habitual.” The partialness of the construction of identity should not just simply be kept in mind during analysis, for it can also be used as a tool to understand why specific aspects of identity are foregrounded in a given situated encounter. In their discussion of the partialness principle, Bucholtz and Hall (2005: 607) conclude that researchers should “conside[r] how some [aspects of identity] or all of them may potentially work with and against one another in discourse.”

Both Davies and Harré (1990) and Bucholtz and Hall (2005) clearly advocate for a discursive approach to identity. Further, both publications heavily foreground the idea that identity is “the social positioning of self and other” (Bucholtz and Hall 2005: 586, italics removed) and that such positioning takes place in situated interactions and not in a vacuum. Moreover, these authors also focus on the emergent nature of identity and thus disagree with an essentialist view in

favor of a discursive or constructivist perspective in which identity is the product of interactants' semiotic choices. It is precisely at this point where relational work and the construction of identity can be linked together.

### **2.1.3 The Link between Relational Work and Identity Construction**

The study of relational work and a social-constructivist approach to identity can be fruitfully combined to analyze the relational aspect of language use in general and the therapeutic alliance in particular. While I did not explicitly refer to all of them so far, there are clear connections between those two approaches to the interpersonal aspect of interaction. I want to briefly foreground some of these connections before I explain the link between relational work and identity construction. When Locher (2008) discussed how discursive approaches to (im)politeness, such as the framework of relational work, can be combined with a constructivist approach to identity, she specifically referred to Bucholtz and Hall's sociocultural linguistic approach as ideal because it shows "how intricate and dynamic such processes of identity construction are" (Locher 2008: 513). Relational work and identity construction can, for one, be linked through their common discursive nature. For example, the discursive approach to (im)politeness advocated by Locher and Watts (2005, 2008) in the framework of relational work foregrounds the emergent nature of face, frames and norms. These notions are all discursively negotiated in social practices; that is, they emerge via

social practices and are changed in those practices. Similarly, the first of the principles outlined by Bucholtz and Hall (2005: 587) is the emergence principle which postulates that identities are “interactionally emergent rather than assigned in an a priori fashion.” Both these approaches thus highlight the emergent nature of the interpersonal, be it relational work or the construction of identities.

Moreover, Locher (2008: 521) explains that there is no inherent link between “linguistic form” and “linguistic function.” In other words, an utterance cannot be inherently polite or impolite. She argues that

we have to be very careful in taking into account the context of the linguistic utterance and any evidence from the interactants themselves that they may have wanted to use relational work in a particular way. (Locher 2008: 521)

As she goes on to point out, this is in line with the positionality principle that Bucholtz and Hall (2005) identified; it suggests that we cannot simply take macro-level demographic categories as explanations for linguistic choices. Instead, we need to look at the contexts of a social practice. Thus, all these researchers call for an examination of linguistic choices in particular situated contexts.

Finally, both research on relational work and identity construction draws heavily on the notion of positioning. Bucholtz and Hall (2005: 586) define identity as “the social positioning of self and other,” a concept which is further developed in the positionality principle. Positioning theory is also applied in studies on relational work (see among

others Bolander and Locher 2015; Locher 2006; Rudolf von Rohr et al. 2019; Thurnherr et al. 2016).

Several researchers (such as Garcés-Conejos Blitvich et al. 2013; Hall and Bucholtz 2013; Locher 2008; Locher and Schnurr 2017) have called for research on (im)politeness and identity construction to be combined. Of special interest in such a combination is how the link can be made between (im)politeness, or in my case relational work, and the construction of identities. It is not a novel approach to find synergies between these two research areas. One of the first researchers to explore this connection is Tracy (1990), who links her interpretations of facework and face. Her definitions of these two concepts explain the connection. Tracy (1990: 210) defines face as a “social phenomenon; it comes into being when one person comes into the presence of another; it is created through the communicative moves of interactants.” In turn, facework “references the communicative strategies that are the enactment, support, or challenge of those situated identities” (Tracy 1990: 210). In contrast to other early researchers of the relational aspect of language, Tracy was not first and foremost interested in politeness, but rather in “the ways in which interactants negotiate meaning and construct social identity in emergent social practice,” as Watts (2010: 54) puts it.

There are similarities between Tracy’s work and Locher’s. Like Tracy, Locher (2015) is also interested in more than (im)politeness and has turned her attention towards a more holistic examination of the relational aspect of language in use. Further, Tracy’s explanation of the



link between what she calls facework and face is similar to what Locher has suggested for relational work and identity.

Locher's interpretation of the link between relational work and identity construction is, for example, based on three important points I have discussed above. First of all, Locher subscribes to "a constructivist theory of human behavior" (Watts 2010: 55). This means that she calls for a discursive approach to (im)politeness phenomena. She clearly agrees with Bucholtz and Hall's notion of identity as socially constructed and emergent in interaction. Locher, like Bucholtz and Hall (2005: 586, emphasis removed), sees identity as "the social positioning of self and other." Second, Locher interprets identity as inherently relational, just as Bucholtz and Hall do through the relationality principle. Third, Locher argues (along with Scollon and Scollon 2001) that there is no face-less communication. These points are the foundation for Locher to summarize the link between relational work and identity:

Relational work refers to the ways in which the construction of identity is achieved in interaction, while identity refers to the "product" of these linguistic and non-linguistic processes. (Locher 2012: 511)

That is, relational work is the actual work, whether it is linguistic or non-linguistic, that interactants use to create specific identities. In a later publication, Locher (2013) develops this connection further:

The work [interactants] invest, i.e. the choices they make in interaction in situ, is what we term relational work, and the result of their choices is identity construction. (Locher 2013: 146)

In this clarification, Locher adds the aspect of agency: Interactants can choose particular relational work in order to create a specific identity. Importantly, relational work and the resulting identities are always produced in specific social interactions and not in a vacuum.

The key notions on which relational work is based can explain this situatedness of identities in a straightforward way. As I have discussed in the section above on relational work, interactants do not come to an interaction with a *tabula rasa*. Rather, they bring along their past experiences. These experiences have shaped interactants' frames in general and the features of those frames in particular, including the typical action sequences for each specific social practice, the norms of appropriate and inappropriate behavior, the roles of the participants, as well as their rights and obligations. These frames give interactants an idea of what kind of identities could be performed in a social practice, while they do not determine that interactants have to position themselves in specific ways. Within the actual interaction, interactants project a face, an image of themselves, both through semiotic means and through specific relational work that aims to bring out that specific face. Other interactants can judge this behavior (or, according to Goffman, the line the initial interactant appears to have taken). They do so according to the norms that are contained in the frames that they bring along to the interaction. These do not necessarily need to be the same frames as the initial interactant's. The second interactant can now either confirm, enhance, save, or challenge the initial interactant's face or identity. In the process, they also project an image of themselves as they

do their own relational work. In other words, interactants position themselves and their interlocutors through specific relational work that always takes face (both their own face and the face of the other interactants) into consideration, either consciously or unconsciously. In turn, what ensues in the interaction can influence interactants' frames and thus also change expectations about the participant roles available in social practices.

Despite all these connections and apparent synergies between the framework of relational work propagated by Locher and Watts and the sociocultural linguistic approach to identity by Bucholtz and Hall, Locher (2015) raises some problems in how the two approaches have been connected by researchers so far. Locher has adopted Bucholtz and Hall's approach into her own research and has shown in several publications how one can do so. In turn, Hall and Bucholtz (2013) have also acknowledged the importance of the concept of face and call for researchers interested in identity construction to take note of it. Locher, however, points out that Hall and Bucholtz (2013) fail to acknowledge that insight from (im)politeness research should be incorporated into examinations of the construction of identities. I can only speculate why Hall and Bucholtz (2013) seem hesitant to acknowledge the usefulness of (im)politeness research. One reason might be that they feel the same restriction of the label (im)politeness as Locher has felt in recent years:

I have tried to free myself from what I have come to perceive as a somewhat restrictive theoretical label (i.e. 'politeness' as a theoretical concept without its emic connotations), that is no longer

adequate for what I want to explore (practices and their relational component more holistically). (Locher 2015: 8)

Clearly, researchers interested in relational work aim to explore “practices and their relational component” from a “more holisti[c]” perspective. Consequently, their insights should be easily combinable with research on identity.

The link between relational work and identity construction also explains why these two notions lend themselves perfectly to the study of the therapeutic alliance. As I have previously mentioned, the therapeutic alliance is “the collaborative bond between [counselor] and [client]” (Krupnick et al. 1996: 532). From an interpersonal-pragmatic perspective, the therapeutic alliance (along with the identities of the interactants) is the product of the relational work that the counselor and the client invest. To really understand the therapeutic alliance, it is therefore vital to understand the work that the interactants invest to create this specific relationship. This can be done through an examination of the relational work that the counselor and the client carry out in the counseling exchanges. Additionally, counseling is often concerned with the transformation of the self (Thurnherr et al. 2016). The transformation of the clients’ identities (e.g. from an advice-seeker towards an active self-helper) is facilitated in counseling. Green (2010: 2) explains that “the therapeutic relationship ... is undoubtedly at the heart of successful counselling interaction” and adds that prominent psychologists such as “[Carl] Rogers maintained that this relationship does not merely facilitate the process of therapy, it *is* the therapy” (Green

2010: 2, emphasis in original). Clearly, investigating the therapeutic alliance and how it is negotiated through relational work can shed light on the therapeutic process itself.

To illustrate how relational work and its product can be examined, I want to briefly introduce Locher's (2006) analysis of an American advice column on the Internet and how it showcases the link between the relational work that the team of advisors invest in creating a fictional advice-giver identity that they call *Lucy*. The advice-seekers and the team of advisors position themselves as well as each other and the audience in specific ways through the use of such relational strategies as mitigation, bonding, praising, or displaying empathy. For example, the relational strategy of humor is immensely important in giving *Lucy* an authentic voice. Further, when they display empathy towards the advice-seekers, the team constructs *Lucy's* identity as a caring agony aunt who takes the presented problems and the advice-seekers seriously. Overall, Locher demonstrates that it is in fact through the specific and intricate interplay of relational strategies that the team of advisors constructs the (fictional) identity of *Lucy*. I will review this study in more detail in Section 2.3.2 on online health discourse. First, I will introduce my second research field and review studies that have examined interpersonal-pragmatic aspects in an online environment.

## **2.2 Computer-Mediated Communication**

The second field in the research interface (see Figure 2.3) is computer-mediated communication (henceforth CMC). This is a broad field that

has gained momentum ever since the 1980s. Naturally, the research field has extensively evolved and expanded, just as the technologies, web services and applications available to consumers have also evolved at lightning speed. This rapid change is evident in Herring's description of CMC in her article "Computer-mediated discourse" in which she stated in 2001 that "most CMC currently in use is *text-based*, that is, messages are typed on a computer keyboard and read as text on a computer screen ..." (2001: 612, emphasis in original). Needless to say, the rapid technological evolution has influenced the analysis of CMC in turn.

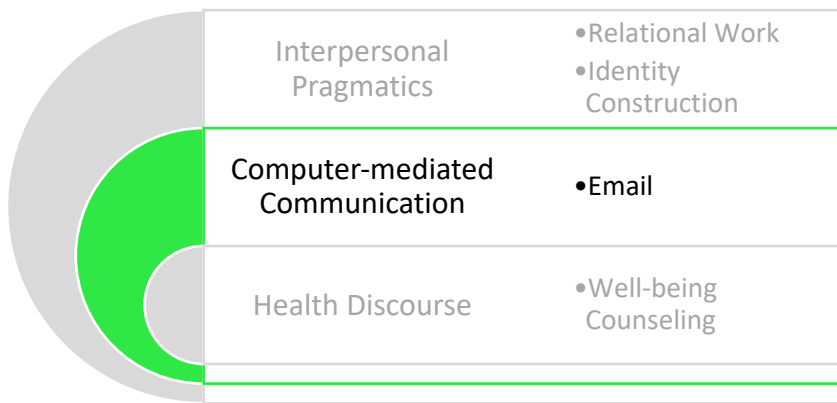


Figure 2.3 Computer-mediated communication in the research interface

I want to briefly review this evolution of CMC and email research, as it sheds light on research issues and helps to situate my study (Section 2.2.1), before I focus more on interpersonal-pragmatic research in CMC and email communication (Section 2.2.2).

### 2.2.1 From Recurrent Themes of CMC Research to Waves and Classification Schemes

Research on CMC can be traced back to its origin in the early 1980s (Herring 2001; Herring et al. 2013; Locher 2014). While this research field can be viewed as relatively young compared to others, it has been thriving over the past four decades and has brought forth compelling research on many different subjects. As Locher (2014) and Georgakopoulou and Spilioti (2016) point out, this plethora of research is not least visible in an ever-growing number of publications: dedicated research journals (e.g. *Journal of Computer-mediated Communication, language@internet, Discourse, Context & Media*), special issues dedicated to CMC in other journals (e.g. in the *Journal of Sociolinguistics* or the *Journal of Politeness Research*), edited collections (e.g. Garcés-Conejos Blitvich and Bou-Franch 2019; Thurlow and Mroczek 2011), monographs (e.g. Bolander 2013; Crystal 2006; Locher 2006; Page 2012; Rudolf von Rohr 2018; Stommel 2009) and handbooks (e.g. Georgakopoulou and Spilioti 2016; Herring et al. 2013; Hoffmann and Bublitz 2017). Instead of reviewing all these individual publications here, I want to highlight some of the changes that have taken place in research on CMC since the 1980s. I will do this with the help of six publications released between 2001 and 2019 that aimed to showcase the state-of-the-art research on CMC at the time of their publication.

In 2001, Herring contributed a chapter called “Computer-mediated discourse” to *The Handbook of Discourse Analysis* (Schiffrin et al. 2001). Herring (2001: 613) discusses four research areas that were

prominent at the time: the “classification of CMD”, the “structural properties of CMD”, the “interaction management imposed by CMC systems”, and “social practice”. Herring argues that these research areas show that

text-based CMC takes a variety of forms ... whose linguistic properties vary depending on the kind of messaging system used and the social and cultural context embedding particular instances of use. (Herring 2001: 612)

By pointing out the “variety of forms” that occur in CMC, Herring clearly foregrounds that the early aim to find a universal language of the Internet (see e.g. Crystal 2006) has to be abandoned and that social and cultural factors need to be given prominence alongside technical factors. For example, Herring notes that

language use is highly variable in computer-mediated environments, even within a single mode. This variation reflects the influence on the linguistic choices of CMD users of social factors such as participant demographics and situational context. (Herring 2001: 621)

Herring (2001: 624) comes to the conclusion that the “discursive negotiation and expression of social relations in cyberspace, including asymmetrical relations, constitutes one of the most promising areas of future investigation” and adds that “further specialization in CMD research is desirable and inevitable, given that the field covers a vast array of phenomena.” Clearly, a move towards an approach of CMC as consisting of situated practices has been spreading since the early 2000s.



Androutsopoulos (2006: 419) advanced Herring's argumentation in favor of a "move from the 'language of CMC' to socially situated computer-mediated discourse." He specifically called for the use of sociolinguistic methodology to "demythologiz[e] the alleged homogeneity and highligh[t] the social diversity of language use in CMC" (ibid.: 421). Androutsopoulos suggested that an entry point to research on CMC is the notion of community and identity and argued that these two notions had not been researched extensively with regards to language use on the Internet. He went on to propose several sociolinguistic issues that should be researched: "online ethnography" (ibid.: 423), "language variation" (ibid.: 424), "social interaction" (ibid.: 426), "language and social identity in CMC" (ibid.: 427), and "multilingualism on the Internet" (ibid.: 428). These issues also exemplified Androutsopoulos' vision of moving from a "mode-centered" approach to CMC towards a "user-centered" one (ibid.: 430). This is also visible in the 'waves' approach that Androutsopoulos presented in the paper, which I will discuss further below. All in all, Androutsopoulos (2006: 430) called for research to "demonstrate the contribution of sociolinguistics to the study of the new forms of communication and community."

A few years later, Herring et al. (2013) edited a handbook entitled *Pragmatics of Computer-Mediated Communication*. This collection contains 29 chapters that cover a broad range of pragmatic topics occurring in CMC. In the introduction, Herring et al. suggest that there are three broad "recurrent theoretical issues" that persist in CMC: "technological determinism" (ibid.: 7), "Internet genres" (ibid.: 9), and

“pragmatic norms, variability and language change” (ibid.: 11). They further introduced Web 2.0 as an “environmen[t that] raises many issues for pragmatic analysis” (ibid.: 13). Herring et al. succinctly summarize the collection in the following way:

Part 1 shows important variation across CMC modes, Part 2 forcefully demonstrates how analyses of classic pragmatic phenomena in CMC data suggest developments to pragmatic theory, and Part 3 identifies a small number of unevenly distributed pragmatic phenomena that may be labeled CMC-specific . . . . Part 4 raises the issue of the applicability to CMC data of models devised for the analysis of spontaneous face-to-face communication, and Part 5 addresses the broader metapragmatic issues of code alternation and genre in CMC. (Herring et al. 2013: 23)

Thus, not only did a large variety of research exist at that, but the editors and contributors were also able to show how theories and approaches developed in or for communication that is not mediated by computers can be applied to CMC. More importantly, the collection showed that pragmatic research on CMC not only advances our understanding of CMC, but also allows us to engage with established concepts in pragmatics in novel ways that broaden our understanding of pragmatics as a whole.

As with the contribution by Herring (2001) to the *Handbook of Discourse Analysis*, Locher (2014) contributed a chapter on CMC to the edited collection *Pragmatics of Discourse* (Schneider and Barron 2014). Locher (2014: 559) summarizes four “large research strands” that were especially fervent in the early 2010s: the development of a

“*theoretical framework* by providing tools which allow us to describe and understand the developing patterns of CMC language use more generally” (ibid.: 559, emphasis in original); research on “particular *modes of computer-mediated communication*” (ibid.: 560, emphasis in original); research that “focus[es] on how well-established linguistic topics like *interactional organization* and different *activities* are managed in online contexts” (ibid.: 561, emphasis in original); and research on “particular online practices to understand the complex *emergence of situated relational and interpersonal language use*” (ibid.: 562, emphasis in original). This fourth aspect includes research on, for example, relationships, community, identity, and solidarity, but also on conflict and (im)politeness. Locher’s overview shows how research on CMC has become more nuanced and has clearly moved from medium-centered to user-centered approaches.

Georgakopoulou and Spilioti (2016) edited *The Routledge Handbook of Language and Digital Communication*. 28 papers are presented in seven different sections on such diverse issues as key methods and perspectives (part 1), language resources, genres, and discourses (part 2), digital literacies (part 3), digital communication in public (part 4), digital selves and offline-online lives (part 5), communities, networks, and relationships (part 6) and new debates and further directions (part 7). Georgakopoulou and Spilioti highlight some further important work by including a section that highlights debates on the public aspect of the Internet and how it influences or is influenced by language use. The collection includes several studies that deal with interpersonal-

pragmatic issues. Importantly, Georgakopoulou and Spilioti (2016: 5) propose that the field of CMC research “is mature enough to adopt a self-reflexive and critical stance towards the digital discourses and ideologies.” They further argue that while the “centrality of ethics in current and future research is prevalent in [publications]” (ibid.: 5), it is now time to not only “poin[t] out challenges” but rather to “offer solutions” (ibid.: 6) in order to be able to conduct ethically minded research.

Finally, and most recently, Garcés-Conejos Blitvich and Bou-Franch (2019) edited *Analyzing Digital Discourse: New Insights and Future Directions*. Besides a chapter providing an “Overview of past, present and future research” on CMC (Herring 2019), the collection covers the topics of multimodality and multisemioticity, identity, and ideologies in digital texts. The first topical cluster on multimodality and multisemioticity showcases how far the research field has come from its early concern with the ‘language of the Internet’ and the notion of CMC being mainly text-based (Herring 2001). Researchers now not only distinguish several modes, but also take into account that they can intersect in specific social practices. The second topic – identity – has been (and I argue will continue to be) an issue that has been extensively researched in CMC. After all, it is humans who communicate via electronic devices and thus always project an identity and negotiate relationships in such communicative efforts. And finally, the focus on ideologies in digital texts resonates with Georgakopoulou and Spilioti’s (2016) call for a critical examination of the field itself.

Clearly, research on CMC has undergone a transformation since the 1980s and will likely continue to be transformed in the coming years. This is due to the speed at which new technologies and, with them, new social practices have been introduced. But research approaches and research questions have also been undergoing changes due to new insights. This transformation of research on CMC has been documented by Androutsopoulos' (2006) description of research waves (see also Garcés-Conejos Blitvich and Bou-Franch 2019; Georgakopoulou and Spilioti 2016; Locher 2014). Herring (2007: N/A) argues that research in the first wave of CMC went about "as if CMD<sup>4</sup> were a single, homogeneous *genre* or communication type." Georgakopoulou and Spilioti (2016: 3) suggest that a main focus of first wave CMC was "technological determinism." Technological determinism is defined as "the role of the technological medium in shaping the behavior of users of that medium" (Herring et al. 2013: 7). While we should be critical of much first-wave research from today's point of view, Georgakopoulou and Spilioti (2016: 5) compellingly point out that "the first wave of research understandably gave priority to justifying and legitimating the object of inquiry."

The second wave of CMC research foregrounds social and cultural issues and a general tendency to focus more on users. At the forefront of research are now

the interplay of technological, social, and contextual factors in the shaping of computer-mediated language practices, and the

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<sup>4</sup> CMD is an abbreviation for computer-mediated discourse.

role of linguistic variability in the formation of social interaction and social identities on the Internet. (Androutsopoulos 2006: 421)

This clearly indicates a “shift of focus from medium-related to user-related patterns of language use”, according to Androutsopoulos (2006: 421). Instead of researching the language of the Internet and technological determinism, “the question is how these communications technologies are locally appropriated to enact a variety of discourse genres” (ibid.: 421). Garcés-Conejos Blitvich and Bou-Franch (2019: 4) describe second wave research as a focus on “linguistic variability, social diversity, issues of identity, and community formation and maintenance” and add that second-wave research is “a collection of studies more specifically concerned with the study of digital social practices.” Again, Georgakopoulou and Spilioti (2016: 5) contextualize second wave research within the overall research development of CMC: “there has been a tendency towards more celebratory and empowering accounts of digital communication, while attesting to its linguistic and cultural diversity... .”

Finally, Georgakopoulou and Spilioti (2016: 5) and Garcés-Conejos Blitvich and Bou-Franch (2019: 4) argue that the third wave of CMC research seems to be upon us. Georgakopoulou and Spilioti (2016: 5) interpret the arrival of two new research agendas as an indication of the third wave: “the critical and the ethical agendas”, along with a “self-reflexive and critical stance towards the digital discourses and ideologies.” Garcés-Conejos Blitvich and Bou-Franch (2019: 4)

add that “the third wave should further take into consideration issues of ‘translocality’ [and] ‘transmediality’.” They distinguish how translocality accounts for the locality of practices that occur in global spaces, while transmediality describes “how users transcend different media” (ibid.: 4); hence, research should foreground multimodal analyses. Both Georgakopoulou and Spilioti (2016) and Garcés-Conejos Blitvich and Bou-Franch (2019) attest that this third research wave is slowly taking form and that present research can often still be regarded as second-wave in nature, but that researchers “have taken [steps] to help establish the so-called third wave of research” (Garcés-Conejos Blitvich and Bou-Franch 2019: 18).

Within CMC research, I specifically focus on the medium of email. Etymologically, the word email is an abbreviation of the term “electronic mail”, according to The Oxford English Dictionary (OED). The OED provides the following definition: “A system for sending textual messages (with or without attached files) to one or more recipients via a computer network (esp. the internet)” and “a message or messages sent using this system.” Linguists studying email have provided definitions as well: “electronic mail (‘email’) ... conveys messages written at a computer keyboard ... in near-real time” (Baron 1998: 134); “electronic mail” or “the use of computer systems to transfer messages between users – now chiefly used to refer to messages sent between private mailboxes (as opposed to those posted to a chatgroup)” (Crystal 2006: 3); or “electronically transmitted mail via computer” (Frehner 2008: 37). Needless to say, these definitions reflect not only what email

is, but also hardware that is employed to access or use it (computer keyboard, computer systems, computer). Nowadays, emails can also be sent via smartphones, tablets, and so on. What has persisted is the fact that email can still be seen as an electronic form of old-fashioned mail.

Email was initially developed by the US Military Defense System (Baron 2000; Frehner 2008). During the Cold War, the US military wanted to develop a network of computers with which they could send information across the United States in case of a nuclear attack (Baron 2000: 223-225). This system was called the Advanced Research Project Agency network (ARPANET) and was established in 1968. With ARPANET, the US military could send data on a local network from one computer to another (Frehner 2008). Those computers needed to be connected on the local network, however, making the original ARPANET system quite different from today's email systems. According to Frehner (2008), it was Ray Tomlinson who first managed to send messages between computers that were not linked to a local network in 1971. Tomlinson used the symbol @ to distinguish messages that were sent to non-local networks from locally-sent ones. Frehner (2008) reports that once ARPANET was decommissioned by the United States Department of Defense in 1990, email became publicly available. Since then, it has become one of the most wide-spread modes of communication (Frehner 2008), especially in business communication (Dürscheid and Frehner 2013; Schnurr 2013: 41).

Like research on CMC in general, research on email communication has also undergone changes that can be explained in terms of the



research waves identified by Androutsopoulos (2006). Early research focused on finding the language of email (see e.g. Baron 1998; Crystal 2006; Sherblom 1988). Crystal (2006: 99), for example, aimed to “develop a sense of the range of linguistic features which any characterization of e-mail would have to include.” Clearly, such research belongs to the first wave of CMC research. Since then, research on email communication has seen a shift from medium-based research to user-based research just as other CMC research has. As Dürscheid and Frehner (2013: 43) note, this shift has come with a noteworthy interest in pragmatic features of email communication.

One type of research on email communication that can serve as a paradigm of this shift is research on openings and closings used in emails. Early research tried to establish whether openings and closings are paralinguistic features of ‘the language of email’ (e.g. Baron 1998; Sherblom 1988). Later studies, in contrast, focus on social and cultural contexts that seem to have an effect on whether an opening or closing sequence is employed (e.g. McKeown and Zhang 2015; Waldvogel 2007). Finally, more recent studies on openings and closings in email have examined patterns in communities of practice and extended their definitions of openings and closings to account for idiosyncrasies of such communities of practice (e.g. Bou-Franch 2011). These later studies, which highlight the diversity and complexity of structural elements in emails rather than finding universals, take the varied nature of communicative activities in email communication into account. Additionally, they focus on the relational aspect of language use; after all,

salutations and greetings “perform [an] important ... social role in email”, as Waldvogel pointed out (2007: 456). All in all, then, research on email communication has moved from a focus on the medium to its users and to the idiosyncratic practices of specific communities.

One aspect I want to briefly highlight is the classification of CMC modes. The move away from first-wave research towards the second wave resulted in a need to find better classification schemes than simply the labeling of the mode in which communication takes place. Herring (2007), for example, provides a classification scheme that contains social and technical factors and allows researchers to describe the practices they study in more precise ways:

This scheme classifies discourse samples in terms of clusters of variable dimensions, thereby preserving their complexity ... and allowing for focused comparisons within and across samples.

(Herring 2007: N/A)

Social factors include, for example, participation structure, purpose, tone, activity, or norms. Technical factors are synchronicity, the persistence of the transcript, anonymous and private messaging, quoting, and so on. This classification scheme can also serve as a reminder to researchers to not overlook any factors and to steer clear of technological determinism. In other words, schemes such as Herring’s can help researchers accurately describe the online social practice that they study without giving priority to any particular aspect of the practice. I apply Herring’s framework in Chapter 3 when I describe the email counseling exchanges in more detail. In the following section, the

relational/interpersonal aspect is brought to the fore in my review of previous research on interpersonal pragmatics in online communication.

### **2.2.2 Interpersonal Pragmatics in CMC and Email Communication**

It goes beyond the scope of my study to provide an exhaustive overview of all the interpersonal-pragmatic research that deals with CMC. Instead, I will provide the reader with an overview of literature that deals with specific themes that are relevant to my work. Several of the above-mentioned overview articles on CMC (e.g. Garcés-Conejos Blitvich and Bou-Franch 2019; Georgakopoulou and Spilioti 2016; Locher 2014) address such interpersonal-pragmatic themes as identity, communities of practice, or relationship building. Locher et al. (2015a: 6) identify the following salient themes in CMC research from an interpersonal-pragmatic perspective: “the importance of social relationships online; the notion of community and community building; the negotiation of norms online; and work that has either a pronounced politeness or identity construction focus.” They conclude that there are still many challenges remaining at the intersection between language, interpersonal pragmatics and CMC. For example, they argue that “follow[ing social practices] over longer periods of time to document the dynamics, negotiations and developments of interpersonal practices” (Locher et al. 2015a: 13) is an important aspect that needs attention. In addition,

Locher and Bolander (2017) identified the following themes as salient in research specifically on identity in CMC:

the importance of (im)politeness; the impact and negotiation of gender; the construction of expertise, authenticity and trust; the surfacing of emotions; the creation of in- and out-groups and community building; and the intertwining of offline and online acts of positioning. (Locher and Bolander 2017: 407)

In their overview, Locher and Bolander demonstrated that previous research has advanced our understanding of theoretical concepts and notions in interpersonal pragmatics, but also that further research is needed. Some of the themes that all of these researchers mentioned are highly salient for my study: the construction of identities, the use of relational work and particular relational strategies to manage online relationships, speech activities (see below for an explanation of this term) such as advice-giving, apologizing, or requesting, or the use of narratives in an online context. I will review some of the studies that foreground these themes. My review is by no means exhaustive, and readers are referred to the overview articles presented above for more exhaustive lists of references for each theme.

### *Identity*

Identity has been researched in CMC from the beginning (see e.g. Garcés-Conejos Blitvich and Bou-Franch 2019; Georgakopoulou and Spilioti 2016; Locher 2014). An initial focus in online identity research was gender (see e.g. Androutsopoulos 2006). Herring's (1996) study of

the style of online interaction included an analysis in terms of gender as a variable. While she later qualified her findings regarding gendered styles, gender has nevertheless continued to be researched in a variety of online contexts. A recent example is Vásquez and Sayers China's (2019) analysis of the utilization of gender ideologies online. They compared 50 real and 50 parody reviews (in English) of products available on *Amazon*. Vásquez and Sayers China (2019: 212) demonstrate that the writers of both types of reviews "make use of stereotypical ideologies and normativities" of gender, but with different goals. For example, serious reviewers praise how the color (brown) of an advertised diaper bag is also suitable for fathers because it is not a 'feminine' color. On the other hand, a pen that is advertised as especially for women is mockingly reviewed as particularly suitable for writing down recipes and outfit ideas, i.e., activities that are traditionally associated with women. Vásquez and Sayers China expose how the use of such stereotypes "help[s] to habituate gender and gender roles as normal" (ibid.: 213) in the bona fide reviews, while "the exaggeration and implausibility in parody reviews disrupt such performances" (ibid.: 213). They argue that the parody reviews "destabili[ze] fixed and essentialist notions of gender" (ibid.: 213) and thus contribute to a constructivist understanding of gender and identity performance.

The constructivist approach to identity has, in fact, been prevalent in many studies examining identities in online contexts. Graham (2007) studied a conflict in which the construction of individual and group identities is highly salient from an interpersonal-pragmatic

perspective: the performance of identities in the online practice “ChurchList, an unmoderated, tightly-knit e-mail discussion list which provides a forum for the discussion of issues affecting the Anglican Church” (ibid.: 745). Her close analysis of a conflict that came up because the actions of one user were deemed impolite shows how it resulted in a discussion of the norms applicable to the ChurchList. Graham compellingly identifies how users who are positioned as not being competent users of the list can be accused of breaching netiquette rules; that is, users position not only themselves, but also other interlocutors. In addition, the ensuing negotiation of norms among the interactants also becomes a negotiation of the group’s identity in general.

Self and other positioning has been researched in various contexts, including social media. Maíz-Arévalo (2019), for example, researched face-repairing strategies used in a Facebook group about a common interest. She analyzed “412 conversational turns in Spanish” (ibid.: 289) that occurred on the group’s page. She posed the question whether self-repair or other-repair was more frequent and identified eight face-repairing strategies: expressing ignorance, remediation, humor, accounts, apologies, aggression, expressing support and appealing to the group’s unity. Maíz-Arévalo links all of these strategies not only to the construction of individual identities but also to an established group identity on the Facebook page. For example, she shows that the strategy of expressing support can be used to conduct other-repair and is frequently employed by the users in the Facebook group. According to Maíz-Arévalo (2019: 305), the users resort to this strategy to “...

[repair] the group's harmony, which indicates they highly value the group's unity." What makes this even more striking is that the group does not consist of users with strong offline connections with each other, but are mainly fans of a singer to whom the Facebook group is dedicated.

A further study that analyzes how relational strategies are used to construct specific identities is Gordon and Luke's (2012) analysis of emails in the course of school counseling supervision. In their discourse-analytic study of how professional identities were constructed through politeness strategies, they examined 112 emails written in English by a supervisor and eight counseling students on their progress in internships in school counseling. The study shows that the interactants constructed their professional identities via four relational strategies: the use of constructed dialogue, first person plural pronouns, the discourse marker *that being said*, and repetition. Further, not all four strategies are used by both the supervisor and the supervisees. For example, only the supervisor uses first person plural pronouns. According to Gordon and Luke, she does so to create involvement and alignment between herself and the supervisees. In addition, Gordon and Luke convincingly argue that it is the interplay of all four strategies that constructs the supervisee's professional identities. All in all, their study demonstrates that interactants use relational strategies to interactively and collaboratively construct specific identities that stand in relation to others.

Finally, Locher and Bolander have studied a number of aspects with regards to identity construction in a research project that was focused on Facebook. They analyzed two networks of friends, one based in the UK and one based in Switzerland. Bolander and Locher (2015: 110) analyzed acts of positioning and identified five broad categories of such acts of positioning: “[h]umor, pastime, personality, relationship and work.” Their results confirmed their hypotheses that “the more an individual performs similar acts of positioning over time, the more central [those acts] will become to the identity s/he constructs” (ibid.: 115). Bolander and Locher’s study shows how identities are performed interactionally and that their “gradual construction” (ibid.: 118) can be traced over time. In another study, Locher and Bolander (2014) investigated the multifunctionality of code-switching. They found that the Swiss users specifically positioned themselves as multilinguals to construct in- and out-groups, “index a particular addressee”, express their “alignment towards [the addressee]” or “mark that [status updates] or [reactions to status updates were] humorous” (ibid.: 185). Locher and Bolander (2014: 184-185) argue that code-switching is a “joint action, which is co-constructed” and that this is “compatible with [their] understanding of identity construction as intersubjectively emergent.” In a third study, Locher and Bolander (2015) examined the relational strategy of humor and found that each user employed an idiosyncratic mix of humor strategies. They demonstrated that the repeated use of an interplay of humor strategies can “result in a more solid understanding of a person’s identity construction, both with respect to humour, as well



as in regard to other identity claims” (ibid.: 150). Importantly, Locher and Bolander (2015: 15) argue that “we can only understand the role of humour when also looking at the other acts of positioning”, which reiterates Bucholtz and Hall’s (2005) relationality principle. Locher and Bolander’s work demonstrates how identity and acts of positioning can be studied by looking closely at the relational work that is performed.

As my eclectic review of research on online identities shows, many researchers have utilized a social-constructivist perspective. Further, the study of identity in such online contexts has shown that both medium and social factors contribute to how identities are performed. These findings suggest that each online social practice with its unique interplay of medium and situation factors should be studied in its own right with regards to identity. Moreover, identity research in CMC has also confirmed that identities should always be viewed in relation with other identities or with regards to the relationships in which they are performed. Several studies have also suggested that relational strategies are used to create identities. This issue has received further attention in CMC research.

### *Relationships and Relational Strategies*

Research that examines the use of relational strategies and the negotiation of relationships is particularly relevant to my study of the therapeutic alliance. While the therapeutic alliance in online counseling has, to my knowledge, not been researched from an interpersonal-pragmatic perspective as of yet, other online relationships and ways to negotiate

them have. Some studies have looked at specific strategies and others have investigated more general types of strategies (such as impoliteness strategies). Yet others have analyzed the strategies that occur in a specific online social practice. I will review some of these studies to consider how they examined relational work or strategies and what findings they produced.

Planchenault (2010) describes how interactants use specific linguistic devices to create solidarity online. She analyzed a website that serves as a “virtual community [for] transvestites in a French-speaking [context]” (ibid.: 91). She argues that solidarity is shown through linguistic devices, such as feminine identity markers (e.g. the use of female forms of address: *amie*, *copine*, etc.) and the use of the first person plural pronoun (e.g. *nous*, *notre*, etc.), which indexes similarity and serves as an in-group marker. Moreover, she found that the transvestites expressed their solidarity and empathy by “display[ing] a willingness to help” (ibid.: 97). Specific linguistic devices that introduce such displays include “I give encouragement”, “give some advice” or “share my experience with others” (ibid.: 97). Planchenault concludes that such relational strategies help create solidarity by building a sense of community and constructing the users’ identities as fellow transvestites.

Angouri and Tseliga (2010) show how relational strategies can be used for non-supportive relational work. They specifically look at “impoliteness strategies” (ibid.: 57) and how these are dependent on the situational context in which they occur. Angouri and Tseliga compare impoliteness strategies in two different Greek online fora, a student

forum and a professional academics forum. Having analyzed 200 posts from the two fora, Angouri and Tesliga found that the negatively marked strategies were more common and accepted as normal behavior in the students' forum. If the negatively marked strategies occurred within the professional academics' forum, there was an immediate reaction by the forum members to the breach of the norms of the forum. Angouri and Tesliga explain that the context in which these breaches of norms occur, including who committed them, influences the reaction to the breaches. For example, one participant in the professional academics forum is positioned as young and possibly inexperienced. This positions the other participants as being not only older but also more knowledgeable and experienced. The relational strategies are therefore used to position participants in specific ways.

Finally, Bolander (2013) explored a whole range of relational strategies employed by bloggers and their audiences on eight English-language blogs and the corresponding comments sections. Bolander conducted a content and discourse analysis to not only reveal the relational strategies used, but also in which context they were employed. She identified a range of relational strategies that the bloggers and the commenters used in the blogs. Bolander (2013: 163-164) identified, for example, strategies such as "boosting", "mitigation", "admittance of error", "creat[ion of] community feeling" or "expression of annoyance/frustration." Bolander makes an important distinction in some of these relational strategies with regards to the person or persons that the interpersonal effect is aimed at. For example, the relational strategy of

expressing annoyance/frustration can either be concerned with frustration over other interactants' behavior ("expression of annoyance/frustration other" (ibid.: 163)) or over the speaker's own behavior ("expression of annoyance/frustration self" (ibid.: 163)). I adopt this distinction between relational work that is aimed at one's own actions or at other interactants' actions. Overall, Bolander found that face-maintaining and face-enhancing interpersonal work was preferred on the blogs, but that face-threatening work also occurred. Bolander was able to show that "the same relational work form can have different functions", which confirms that relational work should always be studied within its context.

These publications have demonstrated that relational work is used to create relationships and identities. My review has shown that a diverse range of strategies has been researched, from humor (Locher and Bolander 2014, 2015) and solidarity (Planchenault 2010) to impoliteness strategies (Angouri and Tseliga 2010), as well as an interplay of a range of strategies (Bolander 2013). The publications I have so far reviewed either focused on the construction of identity or on relational work. I have not provided an exhaustive review of research on identity and relational work here, however. For example, I have only given a brief introduction to studies that analyze specific relational strategies used in CMC contexts. As some relational strategies, such as empathy, are specifically analyzed in online practices that focus on health, Section 2.3 on (mental) health discourse contains further references to

research that focuses on relational work and identity construction in an (online) health context.

### *Speech Activities*

A further recurrent theme in CMC research is the analysis of speech activities. By speech activity I mean an activity that centers around a specific type of interaction, such as requesting, apologizing or advising. I use the term activity rather than speech act so as to highlight interactivity and its negotiation within the activities, including aspects of turn-taking, speaker-change and the build-up within a speaker's turn. The concept of the speech act is often associated with a single sentence and thus does not automatically include the collaborative aspect of the interaction that is my focus. The studies that I review here (and in further sub-sections of Section 2.3 on (mental) health discourse) look at various facets of such speech activities, for example the interactive sequence, the interactive use of relational strategies occurring within the speech activities, or linguistic realizations of specific aspects of the investigated speech activity.

Morrow (2012) and Placencia (2012) have, for instance, analyzed the speech activity of advising in a CMC context. Morrow (2012) investigated advice on a Japanese discussion forum that centers on the topic of divorce. He examined 26 threads that consisted of a problem message and subsequent advice messages, all written in Japanese. Morrow (2012: 255) was especially interested in “the relational aspects of advice-giving” with regards to stance and the establishment of a

relationship between advisor and advisee. He found that the participants in the forum frequently used assessments in combination with advice to show that they understood the advisee's problematic situation. According to Morrow (2012: 275), these assessments contained displays of empathy and bonding instances, while advice was often indirect and formulated "as requests or as suggestions" and never in "imperative forms." Morrow argues that the reason for these relational strategies might be that the advice was given among peers, who wanted to perform solidarity rather than authority.

In a similar type of analysis, Placencia (2012) examined peer-to-peer advice in a Spanish context. She studied Yahoo!Respuestas, a service offered on *Yahoo.com* where "subscribers can ask questions on a wide range of topics and receive replies to their questions from other subscribers" (ibid.: 281). Placencia specifically focused on the Argentinian version of Yahoo!Respuestas. She analyzed 60 responses to questions in the beauty and style domain of the website. Placencia identified affiliative and disaffiliative strategies that the subscribers used. The five affiliative strategies are seeking closeness, conveying warm feelings, offering reassurance and encouragement, conveying empathy, and the use of humor. The disaffiliative strategies were less prominently used and were bald-on-record face attacks, off-record face attacks, and "two [users] simply displayed uncooperativeness without any mitigation" (ibid.: 300). Placencia reports that the interactants used relational work that was mainly used to build a friendly space. She adds that the peers often used direct ways to give advice. This is in contrast to

Morrow's (2012) findings discussed above. Placencia argues that there could be various reasons for this direct style of giving advice, such as the peer-to-peer nature of the advice setting, the online context, the content (beauty and style) or cultural influences. Placencia's study not only reveals that several relational strategies can be used for interpersonal effects in one specific social practice, but also that technical and social factors can influence the choice of relational strategies.

Apologies are a further speech activity that has received attention especially in email communication. Harrison and Allton (2013) examined how participants apologized in emails, what types of offending actions they apologized for and whether there were any differences between male and female participants. They analyzed 260 apologies from eight different academic or professional email discussion lists written in English. Harrison and Allton found four broad categories of apologies:

apologies accompanying trivial offences deliberately committed ...; retrospective apologies for minor offences ...; retrospective apologies for more serious offences ...; and instances in which the form of the apology is subverted and used for challenges, sarcasm, or joking. (Harrison and Allton 2013: 322-323)

Harrison and Allton analyzed the broader context in which these offenses and apologies occurred and uncovered, for example, that apologies for trivial offences were not acknowledged by other participants. This absence of acknowledgements can be explained through the notion of appropriateness. The apologies were appropriately used for the

trivial offenses that made them necessary, so they did not need any acknowledgement. Furthermore, Harrison and Allton revealed that the person apologizing often explicitly referred to the offence to ensure that readers knew what the apology was meant for. Harrison and Allton explained that such contextualizations are a distinct feature of apologies in emails and occur because of their asynchronous nature. Overall, Harrison and Allton identified the local practices that were established within the different email lists, as well as the fact that those practices clearly influenced how apologies were performed.

Examining 100 emails sent between students and their lecturers, Davies et al. (2007: 39) analyzed “situated apologies”, meaning that they examined the “linguistic function”, the “social role” and the “structural properties of the phenomenon” along with an analysis of other speech activities, such as requests or providing information. They explored how the speech activity of apologizing was influenced by and in turn influenced other activities. Only 29 percent of the emails in their corpus contained *only* an apology; that is, apologies were usually accompanied by other speech acts. Davies et al. (2007: 53) thus conclude that apologies can be used to “... improve the odds of the main function of the e-mail...” As almost 80 percent of the emails that included other speech acts along with an apology contained requests, they also argue that apologies are used to create an equilibrium or equity between the interactants. By apologizing, students positioned themselves as good students and therefore as knowledgeable about and accommodating of their institutional role as students. Apologies, then, are “a mode of self-



enhancement as well as mitigation for an offence” (ibid.: 60) and “can therefore be an important resource for identity construction” (ibid.: 61).

Requesting is a further speech activity that has been researched in email communication (see e.g. Duthler 2006; Economidou-Kogetsidis 2011; Ho 2010, 2011; Merrison et al. 2012). Ho (2010) examined email requests he analyzed with regards to the type of identities that are constructed in them. The 115 email requests were sent from leaders to subordinate teachers at a Hong Kong language school. The requests were written in English. Ho (2010: 2255) found that the leaders of the school constructed five types of identities in their email requests: “an accountable leader, a rational leader, an authoritative leader, an understanding, considerate and polite leader, and a capable leader.” Ho shows that the leaders, despite having institutional power, used specific relational work to get the teachers to fulfill requests. Ho’s study shows that a sender does not perform just one kind of identity to accomplish one specific type of speech activity. Rather, a sender can construct various kinds of identities to get others to comply with requests, depending on what type of identity might best persuade others to fulfil the task they are asked to perform.

Merrison et al. (2012) shed further light on how requests are constructed in emails. They investigated 190 emails sent from Australian and British students to their lecturers. These emails contained 264 requests. Merrison et al. identified internal and external modifications through which these requests were constructed. Internal modifications were, for example, the degree of directness or the “marking [of]

syntactic contingency with ‘*wondering if*’ [-structures]” (ibid.: 1086, emphasis in original). External modifications are speech activities that accompanied and thereby modified the requests, such as apologies, the use of accounts (e.g. stories) or self-enhancing strategies such as justifications. Merrison et al. (2012: 1093, emphasis in original) demonstrated that British students performed requests by “display[ing] an orientation towards deferential *dependence*” whereas Australian students aimed “towards interdependent *egalitarianism*”. This study convincingly showed that by orienting themselves towards particular relational facets, the students constructed culturally distinct identities for their lecturers as well as for themselves: “British students construct themselves as dependents who are not always able to manage their institutional role as student effectively”, while “Australian students build for themselves a professional identity both within and [outside of] the institutional context” (ibid.: 1095). Merrison et al. demonstrate in an exemplary way that the students carefully construct their email requests and thereby their identities; that is, it is clear that culturally influenced audience design was at play in their data.

These studies of speech activities have shown that within each activity, specific patterns of relational work are carried out. Additionally, each of these studies also takes into account how those patterns affect the interactants, and more precisely their identities. Morrow (2012), Placencia (2012), and Bolander (2013) have further demonstrated how effective it is to investigate relational work while keeping the speech activities in which relational work occurs in mind.

Consequently, it will be important to take the context in which relational work and identities are performed into account and not just the specific social practice in which they occur.

### *Narratives*

CMC research has also substantially contributed to the analysis of narratives. Narratives are a specific social practice (Georgakopoulou 2013) that occurs in various contexts, mediated or not. Much research has been conducted on narratives that occur in face-to-face encounters, but recent years have also seen an influx of research on online narratives. This research has had an impact on the definition of narratives. In face-to-face contexts, Labov and Waletzky (1967) and Labov (1997, 2013), for example, researched narratives that include abstract, orientation, complicating action, evaluation, resolution and evaluation. Other researchers, especially but not exclusively ones that work in CMC contexts, have shown that not all narratives consist of all of these components. This research has broadened our understanding of what counts as a narrative. This is especially visible in small story research (Bamberg and Georgakopoulou 2008; Georgakopoulou 2007, 2013) and tiny story research (Bolander and Locher 2015; Dayter 2015), both of which were also conducted in a CMC context. For example, Dayter (2015) explored narratives on Twitter. She found that some fully-fledged narratives occur. However, she also identified fragmented stories that could not be explained through traditional narrative research. Dayter used the small story framework to explain how narratives

emerge over several tweets and while the reportable event is still ongoing. Further, she reported that the resolution of a story might not be known to the teller at the start of the telling. Rather, the story can be influenced by further events that occur and by the participation of other tellers, who were traditionally called the audience. In this way, research on online narratives has contributed to a more refined understanding of narratives in general.

A second aspect that has recently been given attention in research on online narratives is the fact that narratives are multifunctional (see e.g. Georgakopoulou 2013: 701). Researchers have examined various functions of stories in CMC contexts (see e.g. Page 2012; Thurnherr et al. 2016). Page (2012) showed that stories do not appear independent of context. Rather, some stories occur predominantly in particular places within an interaction and are used for specific purposes, such as suggestions for a previously reported problem. This is also salient for narratives in a health context. I elaborate on this in Section 2.3 in more detail.

Several researchers have also explored how tellers use narratives to position themselves within an ongoing interaction (and not just within the story world). For example, Mühleisen (2016: 437) demonstrates how users of online dating advertisements use stories “to construct their persona to attract and initiate responses from the desired other.” Mühleisen (2016: 444) analyzed 150 Caribbean dating ads from the website “Connecting Singles.” In the rather unique relational context of dating ads, she observes that “the augmentation of one’s own

image through largely positive self-descriptive attributes is part of the convention” (ibid.: 438). In contrast to counseling where the focus of the discussion could superficially be interpreted as being the problems of the clients, self-promotion is not only present, but actually aimed at in such dating ads. However, narratives in dating ads and in a counseling context are similar in that narrators in both contexts tell parts of their life stories through fragmented narratives. Mühleisen (2016: 448) argues that the online context of the dating ads allows users to employ the narratives “together with visual cues” to create a profile that aims to “entice the viewer to read more.” Like Page (2012), Mühleisen (2016) thus shows that a social-constructivist perspective of identity is particularly suited to analyzing and contextualizing narratives.

Within Section 2.2, I have discussed how research within CMC and email communication has evolved since the early 1980s. I have then reviewed several themes within CMC research that are salient to my study. These themes are part of an interpersonal-pragmatic perspective on CMC. This is especially clear for the analysis of identity and relational strategies. My review has further shed light on the themes of speech activities and narratives. Previous research on these two themes within CMC contexts has revealed that they provide fertile grounds to study relational strategies and identities. In the next section, I will provide the reader with a similar overview focused on health discourse.

### 2.3 (Mental) Health Discourse

The last field of research that completes the research interface is that of health communication or health discourse. Health discourse is a broad field of study that includes mental health discourse. I will introduce the research field of health discourse first in broad terms (Section 2.3.1), before zooming in on previous literature that focuses on online health discourse (Section 2.3.2). Within mental health discourse, my focus specifically lies on well-being counseling. In other words, I examine counseling exchanges that focus on improving the clients' well-being. I will first review research on face-to-face mental health interaction (Section 2.3.3) and finally provide insight into research on online mental health (Section 2.3.4).

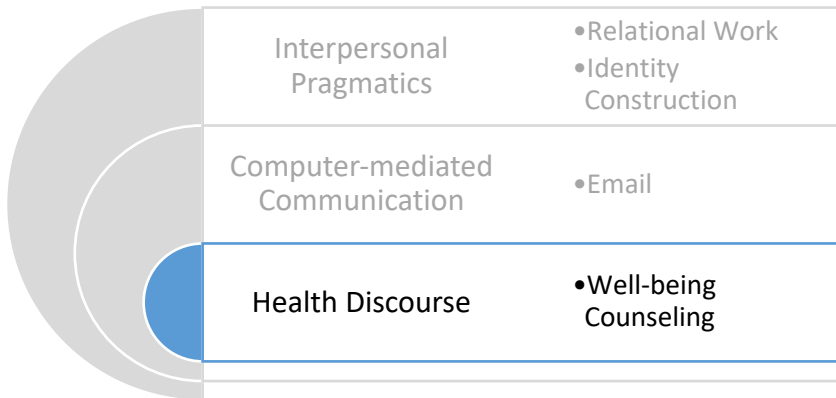


Figure 2.4 Health discourse in the research interface

#### 2.3.1 Face-to-Face Health Discourse

Health discourse has been researched since the 1950s (see e.g. Collins et al. 2011) and has been an ever-growing field of research in

linguistics. This is not least reflected by the inception of journals such as *Communication and Medicine*, which was first published in 2004. In the course of four years, between 2011 and 2014, three overviews were published in linguistics on the subject of health communication: Collins et al. (2011), Harvey and Koteyko (2013) and Hamilton and Chou (2014).

Collins et al. (2011: 96) state that “the main arena for medical communication can be most comprehensively viewed in terms of the doctor-patient relationship.” One of the main current issues that they identify is the language used in “the general practice consultation” (ibid.: 97), but there are also issues that aim to “exten[d] the view beyond the general practice consultation” (ibid.: 99), such as “cultural and linguistic diversity” (ibid.: 100), “linguistic analysis as a diagnostic resource” (ibid.: 101), “the patient’s illness experience” (ibid.: 101), and “influences of new technology” as well as “cultural models, broader discourses and media representations” (ibid.: 102). These further issues suggest that research has spread to social practices and sites other than the GP consultation. Nevertheless, Collins et al. still see the medical consultation as the clear prototype of medical communication. In the last pages of their study, Collins et al. consider how linguistic research can influence health intervention and should be integrated into medical education. All in all, they provide an overview of a wide range of research on medical and consultation practices and how linguistics could be of use to practitioners. An earlier book with a similar focus on the practitioner-patient interaction is Heritage and Maynard’s (2006)

excellent *Communication in Medical Care*, whose 13 articles on the interaction in primary care visits use conversation analysis to present comprehensive analyses of the medical consultation in primary care.

In contrast to those publications, Harvey and Koteyko's (2013) *Exploring Health Communication: Language in Action* approaches health communication from a different perspective. Their book's three sections on spoken health communication, written health communication, and computer-mediated health communication foreground the diversity of research sites in the field of health discourse. While they acknowledge the importance of the practitioner-patient relationship, Harvey and Koteyko include other sites of health communication as well. One chapter, for example, focuses on patients' narratives of health and illness. They further discuss the language used in the collaborative practice of the writing of patient records and highlight the challenges and dangers of linguistic choices in patient information leaflets on medications. Next, the section on computer-mediated health communication offers insight into the thriving field of online peer-to-peer interaction in forums that aim to provide support to their members. Finally, they also turn to research that focuses on how professionals provide health advice online. Overall, Harvey and Koteyko draw special attention to all the research methods that have been used to analyze health communication, from conversation analysis, discourse analysis, and Critical Discourse Analysis to corpus-linguistic approaches and discursive psychology.



Hamilton and Chou (2014) edited the interdisciplinary *Routledge Handbook on Language and Health Communication*. In the introduction to the handbook, Hamilton and Chou (2014: 1) identify five foci in research on language and health: (1) patient-provider interaction; (2) mental health and counseling; (3) narratives; (4) discourse of public health; and (5) health and risk communication. They point out that most research has focused on one of these issues, rather than providing an analysis of some or all of them at once. The handbook is organized around the three issues of “individual’s everyday health communication”, “health professionals’ communicative practices” and “patient-provider communication in interaction” (ibid.: 3). This structure stems from how “communicative problems can arise due to mismatches between speakers’ intentions and listeners’ inferences” (ibid.: 3) and “the distinction between the ‘voice of the lifeworld’ and the ‘voice of medicine’” (ibid.: 3). The voice of the lifeworld is usually ascribed to the patients’ voice, whereas the voice of medicine is usually the practitioners’. Hamilton and Chou, therefore, begin with contributions that deal with the voice of the lifeworld and then continue with contributions that focus on the voice of medicine, before addressing how these voices do, or in some cases do not, fruitfully collaborate in interactions between patient and provider. Overall, Hamilton and Chou focus on the interpersonal aspect of health discourse and contextualize it as a social activity between social actors that are in a relationship with each other. It is further important to note that Hamilton and Chou (2014: 8-9) identify three key themes that “are likely to continue to gain in importance” and

that are “explored by multiple contributors” to the handbook: the “impact and implications of changes in technology-mediated communication”, “the narrative turn in health communication”, and the “observation of health communication within authentic contexts” (ibid.: 9) All three of these key themes were also (implicitly) present in Harvey and Koteyko’s (2013) discussion of health communication.

All four of the above-mentioned overviews provide vital insight into specific aspects of health communication and the research field of health discourse overall. Taken together, their collective insights combine to provide a comprehensive overview of the richness of health discourse research. All four publications convincingly show how important language is in health and healthcare, and how linguistic choices can be systematically analyzed through a range of research methodologies and for a variety of distinct purposes.

There is one important point that needs to be mentioned, however, about all four publications: the relative shortage of linguistic research on mental health in comparison to health overall. Collins et al. (2011) only briefly tap into the area of mental health communication when they mention one study that focuses on psychiatric interaction. In their chapter on the practitioner-patient relationship, Harvey and Koteyko (2013: 26) mention that the psychiatric consultation has not been extensively researched. Still, they do make it a point to include psychiatry as a mental health practice throughout their book. However, their focus on psychiatric interaction as the prototypical site of mental healthcare is reminiscent of the focus in Collins et al. on the GP-patient

interaction in medical communication. Harvey and Koteyko do briefly touch upon further mental health contexts by including Locher's (2006) research on the online advice column *Lucy Answers* and Harvey's (2013) work on the health advice website *Teenage Health Freak* that both include mental health aspects. Nevertheless, mental health discourse remains less prominent in Harvey and Koteyko (2013) than health discourse. Finally, Hamilton and Chou (2014) may refer to counseling and mental health as one of the foci of research they reviewed. However, only a small number of contributions to their handbook actually discuss mental health. Clearly, mental health discourse is underrepresented in such overview works. It would be misleading to suggest, however, that mental health has not received any attention from linguists, as I will show in Sections 2.3.3 and 2.3.4 for face-to-face and online contexts, respectively.

Researchers interested in interpersonal pragmatics have also turned to health discourse in recent years. Two overviews deserve particular mention: the special issue on health and (im)politeness in the *Journal of Politeness Research* edited by Mullany in 2009, and Locher and Schnurr's chapter on "(Im)politeness in health settings" in *The Palgrave Handbook of Linguistic (Im)Politeness* from 2017. Both of these publications address the research that (im)politeness researchers conduct in health settings.

Mullany (2009) implores researchers to consider five vital points when studying health discourse. First, she explicitly points out that "politeness currently remains an under-researched area of investigation" in

healthcare communication, even though “there is a real necessity for empirical investigation to be produced” (ibid.: 1). Second, she calls for a diversification of the healthcare settings studied from a politeness perspective, among them specifically computer-mediated healthcare communication. Third, Mullany argues that the newer theoretical approaches to politeness are especially suited to the study of healthcare communication. Fourth, she pushes for more politeness research on authentic and naturally-occurring data in health contexts. And finally, she promotes the contributors’ applied approaches in the special issue. All of them attempted to

find knowledge which can be of practical relevance and applied value to those parties who have allowed their communicative practices to be researched. (Mullany 2009: 3)

All in all, the special issue edited by Mullany exemplifies the fruitful cross-collaboration of research on politeness and health discourse based on her five points.

Eight years later, Locher and Schnurr (2017: 689) still agree with Mullany’s viewpoint that there needs to be much more empirical research into (im)politeness phenomena in a wide range of health care settings. In their comprehensive review of such research, Locher and Schnurr discuss how researchers are increasingly widening the scope of research to go beyond “traditional institutionalized contexts” (ibid.: 692), including culturally diverse settings and what they call “e-health” practices (ibid.: 693). In such studies, researchers have applied an “immense diversity [of] methodological and theoretical approaches” (ibid.:

696). Locher and Schnurr further identify four themes in health discourse that are especially interesting from an interpersonal-pragmatic perspective:

- the face-threatening potential of many interactions in a health context;
- the negotiation of roles pertaining to health interaction in dynamic encounters;
- the creation and maintenance of trust and expertise;
- the importance of counselling, providing advice, providing information, etc.

(Locher and Schnurr 2017: 698)

Locher and Schnurr particularly foreground the usefulness of an interpersonal-pragmatic approach to “practices in computer-mediated contexts” (2017: 705). They also highlight that “the potential of CMC for emotional and psychological counselling is clearly booming” (2017: 705) and that examinations of such interactions need to be conducted. Locher and Schnurr (2017: 705) strongly advocate combining “the study of identity construction and role negotiation together with face concerns” – a position with which I wholeheartedly agree.

Instead of providing an exhaustive review of health discourse research from an interpersonal-pragmatic perspective, I refer the reader to the overviews discussed in this section. In the next section, I will focus my literature review on studies that deal with research on online health practices, which are more relevant to my study.

### **2.3.2 Online Health Discourse**

As we have mentioned elsewhere (Locher and Thurnherr 2017: 3), it is nowadays a “fact that computer-mediated communication (CMC) is used to disseminate, find and negotiate health-related content” (see also Office for National Statistics 2016). In the introduction to a special issue on “the study of linguistic online health practices” (ibid.: 3), we identified recurrent themes that have been addressed by researchers who are interested in the intersection of language, health, and CMC.

First, there are recurrent themes that are concerned with the online aspect of the language used in online health practices (Locher and Thurnherr 2017: 13). One such theme is the participation structure of online health practices and its influence on interactions. Participation structure refers, for example, to the number of participants, the type of participants (e.g. peers vs. professionals), or whether the interaction occurs in public or in private. A further recurrent CMC theme is anonymity. For sufferers of some health issues, anonymity can be an advantage, as it allows for more open disclosure about topics that might be taboo. A third recurrent theme in CMC health analysis is the synchronicity or asynchronicity of the interaction and how it influences, for example, turn-taking and turn design. Researchers have analyzed these recurrent themes and have revealed that interactants usually find creative ways to deal with such affordances (Locher and Thurnherr 2017: 13).

Second, we identified recurrent themes from a health perspective (Locher and Thurnherr 2017: 13). For example, studies that look at lay people’s use of language in health contexts can shed light on an “emic

perspective of health issues” (ibid.: 11). Other researchers have uncovered health ideologies that explain cultural differences in how healthcare is provided (see e.g. Al Zidjaly 2017). Finally, we also identified the recurrent theme of patient empowerment, which is defined as the “active participation in health decisions by patients and clients” (Locher and Thurnherr 2017: 14). Such findings on health themes can enable researchers to inform health professionals about specific conclusions that might improve health practices overall.

Finally, we also highlighted some of the recurrent linguistic themes in online health research (Locher and Thurnherr 2017: 14). Researchers of online health practices have considered the construction of identities in a wide range of settings and for practices with all kinds of purposes. Such issues as trust, credibility, expertise or authority have been foregrounded. Many studies have employed a social-constructivist approach, and several have utilized the notion of positioning. Further, we identified the construction of shared experiences as a further linguistic theme in such practices (ibid.: 15). This theme is especially prominent in research on peer-to-peer interaction. Additionally, the Internet is an ideal place for clients, patients and health consumers to connect with people who are concerned about or suffer from the same health issues, even when the health issue is rare and interactants are not close to each other geographically. Finally, we turned to the theme of narratives in online health practices (ibid.: 16). In the rest of this section, I will discuss some of these themes in more detail while also introducing some further themes that are relevant to the present study.

*Comprehensive Interpersonal-Pragmatic Research*

Two studies that explicitly look at the intersection of health, CMC and interpersonal pragmatics with a focus on relational work and identity construction are Locher (2006) and Rudolf von Rohr (2018), both of which are part of the SNF-project this study is also part of. Locher's (2006) work *Advice Online: Advice-Giving in an American Internet Health Column* served as a starting point for my own project in several ways: in terms of data with its focus on online health practices; methodologically with its combination of content and discourse analysis of such online health practices; and thematically because of an interest in the interpersonal-pragmatic issues of relational work and identity construction. I will therefore review Locher's (2006) study in more detail here.

Locher (2006) analyzed an online advice column that centers around health issues. Overall, she aimed to "identify the strategies of advice-giving used in the particular social practice established in 'Lucy Answers' by analyzing its question-answer units in depth" (ibid.: 56). Conducting a content and a discourse analysis, Locher shed light on interpersonal-pragmatic aspects of the advice column from a holistic perspective. She was particularly interested in the content structure of the advice column, the relational work employed within it, how the public and private dimensions of an advice column are realized, and finally how the advisory team managed to portray an identity for the fictional advice giver persona *Lucy*. With a corpus of 2,286 question-answer sequences, she conducted a quantitative content analysis and a discourse-



analytic examination of 12 percent of the entire corpus: 40 records from each of the seven different topics that are discussed on *Lucy Answers*. These topics were produced by the team of advisors that managed the advice column, and each question-answer sequence was assigned to one of the topic categories. This type of analysis allowed Locher to give an overview of the content structure of the advice column, while also being able to present detailed analyses of the more subtle linguistic choices made by the interactants. Locher showed that specific interpersonal-pragmatic patterns occurred and that these patterns varied according to the content. As a result, Locher raised our awareness of how to analyze and interpret interpersonal-pragmatic issues while keeping the content structures of specific practices in mind.

To characterize the content structure, Locher (2006) identified the discursive moves that the interactants employed. Miller and Gergen (1998: 192) defined discursive moves as “the kind of contribution that the entry made to the ongoing interchange.” Noting that discursive moves were utilized in specific patterns, Locher (2006: 224) found, for example, that problem letters frequently contained the following discursive moves: “questions (38%), background information (21%) and problem statements (21%).” Further, the answer letters were mostly made up of “advice and referral moves” (47%), “general information (19%)”, and “assessments (15%)” (ibid.: 85). Another important finding from Locher’s study (2006: 86) is that, in answers by the advisory team, assessments were often followed by advice or general information. This corroborates previous findings of a stepwise entry to

advice (see e.g. Heritage and Sefi 1992: 379). Importantly, Locher identified how the content structure can differ for the individual topics to which the question-answer sequences were assigned. All in all, she presented a holistic overview of the content structure of the question-answer units through analyses of the discursive moves, their sequence and their linguistic realization. Locher's results will be compared to the results of my own content analysis in Chapters 5 to 7.

Locher's subsequent analyses of interpersonal-pragmatic aspects such as relational work were based on the results of her content analysis. She identified the relational strategies that occurred within the problem and answer letters. While some strategies, such as bonding, boosting, or hedging, occurred in both problem and answer letters, Locher also found that certain strategies, such as praising or appealing for empathy, occurred only in one or the other type. Locher chose to study two strategies further: appealing for empathy, which only occurred in problem letters, and displaying empathy, which was only used in answer letters. This led her to identify a connection between these two relational work strategies (*ibid.*: 245): when there is no appeal for empathy in the problem letter, there is a tendency for there to be no display of empathy in the response letter. This correlation was especially strong in question-answer units that were concerned with advice-seekers' emotional health and their sexuality. This is of significance to my study, since those are topics that are also discussed in the counseling exchanges. Locher also considered whether particular relational strategies occurred more frequently in particular discursive moves. In the

answer letters, for example, empathizing, praising and bonding occurred more frequently in one particular discursive move, namely assessment, while hedging and boosting were frequently employed in advice-giving moves (ibid.: 148). In this way, Locher provided an in-depth analysis of relational strategies that identified distinct patterns according to the content in which relational work occurred.

Locher went on to analyze the construction of the fictional advisor persona *Lucy*. *Lucy* is not an actual person who gives advice in the advice column. Rather, a team of health professionals answers the problem letters. However, they portray themselves as one specific advisor who goes by the name *Lucy*. Locher (2006: 183) shows that *Lucy* is constructed through the language used by the professionals and “emerges interactively.” Locher (2006: 184, italics in original) identifies the following seven strategies that are used to construct *Lucy*’s voice: (1) “*Lucy*’s name, self reference and address terms”, (2) “*Lucy* presents herself as a competent and knowledgeable source of accurate information”, (3) “*Lucy* makes readers think and gives options when she presents her advice”, (4) “*Lucy* chooses an easily accessible, informal and inoffensive range of vocabulary”, (5) “*Lucy* has an opinion (positive and negative evaluations)”, (6) “*Lucy* shows awareness of difficult situations (empathy)”, and (7) “*Lucy* has a sense of humor.” Locher (2006: 204-205, italics in original) shows that “it is the sum of these strategies within the discursive practice ‘*Lucy* Answers’ which form *Lucy*’s identity as a puzzle or a mosaic.” She adds that

*Lucy's* identity only emerges in the readers' minds when they use the site repeatedly by reading the latest exchanges of questions and replies, browsing the archives or even by engaging in reader responses. (Locher 2006: 205, italics in original)

It is thus the repeated acts of positioning (see also Bolander and Locher 2015) that create a coherent, competent and trustworthy advisor identity.

Overall, Locher's study established how a content analysis can be fruitfully combined with a discourse analysis that centers on interpersonal pragmatics and that this mix can shed light on online health discourse. Locher's combination of these types of analyses is well suited to gain a holistic picture of a social practice under scrutiny. Additionally, Locher demonstrated that it is paramount to consider the context in which relational strategies are used and identities are constructed. Her assessment of which relational strategies occur within which discursive moves and topic categories made it possible to uncover tendencies and to illustrate patterns between relational work, identity construction, discursive moves and topic categories.

Due to the fact that *Lucy Answers* is an online advice column that mainly consists of question-answer sequences, Locher (2006) could not address how such patterns would manifest themselves in interactions with higher and longer interactivity between participants. Further, *Lucy Answers* deals with a broad range of health concerns, including emotional health, relationships and sexuality. However, the setup of the advice column, with its focus on health and as a public column, clearly

limits its potential for a discussion of personal mental health issues. These two issues will be addressed by my study of private online counseling exchanges.

Like my work, Rudolf von Rohr's (2018: 1) is also inspired by Locher's; it investigates the "communicative or persuasive strategies [that] are employed in smoking cessation online in a UK setting, adopting an interpersonal pragmatic approach." Based on Locher's approach, Rudolf von Rohr conducted a combination of content and discourse analyses to reveal interpersonal aspects of the language used on websites and peer-to-peer forums that focus on smoking cessation. Rudolf von Rohr found a similar set of discursive moves to those found by Locher, such as advice-giving or general information moves (for a detailed comparison, see Chapter 5). She further found that some topics contained some discursive moves more frequently. For example, Rudolf von Rohr (2018: 368, emphasis in original) found that the topic of "requesting help was characterized by its use of discursive moves related to advising; e.g. *advice* and *own experience*." She linked these discursive moves to the construction of expertise that is highly prevalent in requesting help threads. Interpreting her findings with regards to persuasion, Rudolf von Rohr (2018: 368) concluded that emotional involvement was especially present in topics that dealt with personally difficult experiences, such as the topic of relapsing on the forums. On the other hand, displaying expertise was preferred in the topic of requesting help on the forums and in sections that address common questions on the website. These contexts contain less personally sensitive

discussions, which means that displaying expertise does not come across as face-threatening.

Rudolf von Rohr (2018: 368) demonstrates that comparisons could be drawn between the peer-to-peer forums and the professional websites she examined; for example, participants used different types of relational strategies in the different datasets, even as these strategies resulted in comparable identity positions. Rudolf von Rohr's study therefore corroborates Locher's (2006) finding that a combination of content and discourse analyses can reveal a holistic picture of a social practice. She further demonstrates that while interactants in different social practices may have the same goal – to persuade people from quitting smoking – they might not pursue this goal in the exact same way from an interpersonal-pragmatic perspective. While certain similarities can be found, it is the subtle differences that are especially noteworthy when looking at interpersonal-pragmatic aspects of situated practices.

Both Locher (2006) and Rudolf von Rohr (2018) are situated in the same three research fields as my study. However, their work focuses more on health rather than on mental health (Locher touches on the subject of mental health, but it is not her main focus). In addition, Locher (2006) zoomed in on the aspect of advice-giving, while Rudolf von Rohr (2018) addressed issues of persuasion. In contrast, my study focuses on the collaboration in the therapeutic alliance. Other studies that deal with online health discourse have not identified themselves as interpersonal-pragmatic studies. However, they still deal with the interpersonal aspect of the language used in online health practices. I will

discuss some of these studies that are relevant to my work in the following pages.

### *Identity*

In Locher and Thurnherr (2017), we identified identity construction as a recurrent theme in online health research. In addition to the two studies reviewed above, Armstrong et al. (2011), Cochrane (2017), Richardson (2003) and Sillence (2017) also analyzed identity construction in online health contexts. Richardson (2003) and Sillence (2017) considered how trust, credibility and expertise are created. Richardson (2003) examined how lay people construct an expert identity online. In a study of Usenet newsgroups about health risks when using mobile phone handsets, Richardson analyzed 1,000 messages written in English from 93 threads in 45 different newsgroups. Richardson found that lay people use warranting strategies to give their claims more legitimacy. She identified the following warranting strategies: “warranting by source” (ibid.: 176), “warranting by reference to personal experience” (ibid.: 178), “warranting by reference to status” (ibid.: 179), and “warranting by use of technical register” (ibid.: 180). Even using a disclaimer can be seen as at least showing one’s awareness that a warranting device would be necessary. Richardson reports, however, that such warranting strategies can be challenged by either suggesting that the claim lacks a source or by challenging the credibility of the source given. She found, though, that defending a source after such a challenge did not occur frequently. Overall, Richardson showed that the

participants in the Usenet groups displayed expertise in many different ways, even though there were no contextual or institutional characteristics available that would signal expertise in an a priori fashion. Richardson saw this as evidence of the performativity of an expert identity.

Sillence (2017) analyzes the construction and recognition of expertise by interviewing 18 English-speaking members of peer-to-peer forums on health and by investigating two YouTube videos (in English) and the comments below them from a discursive-psychological perspective. In her analysis of the interviews from the forum members, Sillence identifies homophily as an important factor in whether a source is judged as credible and trustworthy. In other words, peers manage to establish credibility and trust when their input resonates with others in a meaningful way. This can be based, for example, on demography (e.g. age, gender) or on similarities in the stories that are told. In the YouTube analysis, Sillence identifies motivation as a highly relevant factor to create trust. YouTubers can establish trust when they project an authentic and personal stance and distance themselves from gaining financially through their videos. Sillence's further analysis of the comments on the videos demonstrates how trust and expertise are interactionally achieved rather than simply characteristics of individual posts. She also shows that depending on the medium, the interactants choose different strategies to create trust and expertise.

Armstrong et al. (2011) and Cochrane (2017) explore group identities rather than individual ones. This is relevant to my study as I investigate not just the individual identities of the interactants, but the



therapeutic alliance as well. Armstrong et al. (2011) examined an online forum that centers around diabetes. They reveal how the identity of the forum was interactionally established and how peers negotiate authority. Using a discursive-psychological approach to analyze 219 postings written in English by 17 patients who suffer from diabetes, Armstrong et al. (2011: 6) found that the interactants talked about three specific topics: self-management of their disease, new possibilities for treatments, and how to cope psychologically. Armstrong et al. demonstrated that the group clearly established the identity of the forum as a place where information was more prominent than socializing. Armstrong et al. identified a range of strategies used to create expertise and authority, such as the use of “brief stories to make indirect suggestions” (ibid.: 14); such stories “demonstrate[d] shared concerns and experiences as well as authority” (ibid.: 14). All in all, Armstrong et al. corroborated that online interaction can be efficiently used to promote better self-management and self-efficacy.

Cochrane (2017) performed a discourse analysis of three English-language blogs written by wheelchair users. She convincingly argues that the bloggers created an “imagined community of practice” (ibid.: 151) through their blogging activity. Cochrane demonstrates that by constructing their identities as belonging to a community, the bloggers at the same time construct the identity of the community overall. She reports how the bloggers constructed their identities by referencing their disability practices. However, they also positioned themselves beyond such disability practices and thus constructed “constellations of

identities” (ibid.: 160) rather than just one type of identity. Cochrane (2017: 160) also highlights how the bloggers used “in-group collective terms” and engaged in shared sense-making with other disabled bloggers to construct an imagined community. Cochrane’s study raises our awareness that identities are not just constructed in relation to others. Rather, as she convincingly illustrates, interactants also construct and negotiate their relationships when engaging each other. Both Armstrong et al. (2011) and Cochrane (2017) reveal the link between identities and relationships. They thus empirically show that identities are not just an interactional achievement; rather, interactants negotiate relationships between each other through the positionings they perform. They do so by employing relational strategies.

#### *Relational Work and Relational Strategies*

As I have mentioned above, Locher (2006) and Rudolf von Rohr (2018) have specifically analyzed relational work in an online health context. Harrison and Barlow (2009) and Eichhorn (2008) are further studies that look at interpersonal strategies in online health practices. Harrison and Barlow (2009) studied politeness strategies that are used in an online arthritis workshop in which peers support each other. They examined 455 messages written in English. Those messages were feedback messages written by peers in response to participants’ action plans. Harrison and Barlow (2009: 94) examined “how ... participants handle the potentially conflicting demands of showing empathy and giving advice” at the same time. They found that peers prefer to give

indirect advice, for example in the form of personal narratives. They argue that the narratives allow participants to show empathy and give advice by recounting what they did in a similar situation. Narratives allow posters to construct an expert identity which legitimizes their advice, while simultaneously avoiding giving direct advice. Additionally, since the posters portray themselves as going through similar troubles, they also create solidarity and a positive bond. Harrison and Barlow conclude that giving advice indirectly serves multiple functions, such as displaying empathy, creating solidarity and constructing the poster as an expert. In addition, the context of the communicative event, here a supportive peer group, actively shapes this interaction.

Eichhorn (2008) explores how social support is solicited and provided. She analyzed 490 postings from 5 discussion boards that focused on eating disorders. Her data is written in English. Eichhorn (2008: 77) coded the 490 postings according to the type of support provided (e.g. informational, emotional, esteem, and so on) and the type of solicitation for support (e.g. requests for information, sharing experiences, self-deprecating comments and so on). She found that overall 55.7 percent of the messages contained the provision of “some type of social support” (ibid.: 77) and 53.8 percent of messages contained solicitations of such support. Further, Eichhorn (2008: 73) reports that the type of support that occurred most frequently, namely 29.7 percent, was informational support; that is, “providing ... advice or guidance concerning possible solutions to a problem” (ibid.: 69). The strategy that occurred almost as frequently was emotional support (27.8 percent): “the ability

to receive comfort and security during times of stress from others, leading a person to feel that he or she is cared for” (ibid.: 68). For the solicitation aspect of social support, sharing experiences was the most frequent strategy, which included “statements of self-disclosure” (ibid.: 75). In her thematic analysis, Eichhorn (2008: 75) found that messages were most frequently about positive affect, which involves “providing feedback and encouragement to another member.” Eichhorn’s study shows that social and emotional support are important interpersonal features of interactions on discussion boards that deal with eating disorders. Harrison and Barlow (2009) and Eichhorn (2008), but also other studies, along with Locher (2006) and Rudolf von Rohr (2018), provide some empirical evidence that relational strategies are frequently used to create certain effects and to construct specific identities in online health settings.

### *Speech Activities*

In Section 2.2.2 on research about online social practices, I have discussed how different kinds of online speech activities, such as advising, apologizing or requesting, have been researched from an interpersonal-pragmatic perspective with regards to the linguistic realization of relational strategies, the construction of identity, or the interactive sequence over several turns. Such speech activities have also been investigated in an online health context. Locher (2006) demonstrated that relational strategies always need to be analyzed in context. Locher accounted for

the context by cross-referencing relational work with discursive moves, which can be compared to speech activities researched in other studies.

In a health context, advice-giving has received attention in face-to-face encounters (see e.g. Heritage and Sefi 1992; Limberg and Locher 2012; Silverman 1997) as well as in online contexts (Kouper 2010; Lindholm 2010; Locher 2006; Rudolf von Rohr 2018). Kouper (2010), for example, investigated how peers solicit and give advice in an English-language online LiveJournal community centered on motherhood. Analyzing 136 initial posts and 215 comments, Kouper found that 32 percent of initial posts contained a solicitation for advice and 51 percent of comments employed advice in some form. In the initial posts, advice (n=102) was mostly solicited through three strategies (ibid.: 9): request for opinion or information (n=44), problem disclosure (n=38), and request for advice (n=18). According to Kouper (2010: 9), “messages that sought advice often resembled narrations or stories, rather than requests or other short speech acts.” Also, “additional information generated emotional reactions and expressions of understanding and support, in addition to advice” (ibid.: 9). For advice-giving, “the most popular forms of advice were direct advice and descriptions of personal experience” (ibid.: 12). Kouper (2010: 16) further reports, for example, that “direct advice was common in situations that were straightforward and could have relatively simple solutions.” In contrast, “in situations that were more sensitive or complex, [the users] employed the strategy of sharing personal experience more often than the strategies of hedged or indirect advice” (ibid.: 16). Kouper (2010: 17) concludes that an

analysis of advice “should be grounded in the broader context of relational and sense-making activities.” I would argue that this can be accomplished through an interpersonal-pragmatic analysis.

### *Narratives*

The final recurring theme in research on online health I want to mention is narratives. Several studies I previously reviewed (see e.g. Armstrong et al. 2011; Harrison and Barlow 2009; Kouper 2010; Sillence 2017) have hinted at the importance of narratives in online health discourse. Narratives have been analyzed in online health practices for various reasons, most prominent among them as indirect ways to give advice. Researchers who have explicitly focused on narratives are, for example, Hamilton (1998), Lindholm (2010, 2017) and Thurnherr et al. (2016).

Hamilton (1998) examined how narratives are used to construct identities in an online discussion list about bone marrow transplantation. Specifically, Hamilton (1998: 54) addresses “how individuals with life-threatening illnesses, whose recommended treatment is also life threatening, come to present themselves as survivors, rather than as victims.” Hamilton (1998: 56) argues that the “linguistic choices that a narrator makes work to construct not only the storyworld but some aspect of the narrator’s identity as well.” She analyzed narratives that reported a conflict between a medical professional and patients or their relatives. As Hamilton’s focus within narratives was reported speech, she studied 61 English narratives that contained 151 instances of reported speech. Hamilton found that the function of the stories was often

to share experiences or information. The tellers used the narratives to construct an identity as survivors. They utilized reported speech to show that they were assertive when dealing with doctors who were depicted as adversaries. Moreover, Hamilton discovered that tellers produced doctor's utterances predominantly through direct reported speech and thus shared exactly "*how* a particular doctor-figure allegedly said something to the patient-figure" (ibid.: 64, emphasis in original). Doctor's negative utterances thereby gained more force. The patients were portrayed as having overcome the doctor's negative impact. Hamilton concluded that users employed narratives to construct strong survivor identities and that they tried to socialize newcomers to the lists in the same way.

More recently, Lindholm (2010, 2017) analyzed narratives by lay advice-givers on an American discussion forum that centers around parenting. In her 2010 article, Lindholm examined 27 forum threads that contained 200 messages. She aimed to reveal the functions of narratives offered by advice-givers in a peer-to-peer context. Using a discourse analysis, Lindholm identified the discursive moves that occur within these messages, one of them being narratives. She proceeded to analyze the sequence of narratives and their function within the interaction. Narratives were used for argumentative and relational purposes. Participants of the forum used stories to support either advice or assessments that they delivered to initial posters. Further, Lindholm (2010: 235) showed that the narratives "can also do relational work through the sharing of similar experiences and establishing common ground."

While the 2010 contribution focused on parenting in general, her later article (Lindholm 2017) turned to health-related issues on the same forum. She examined 28 narratives that occur in 17 discussion threads. On the basis of a content and thematic narrative analysis, Lindholm categorized narratives as either “unresolved problem stories” or “success stories” (ibid.: 2) that fulfill four functions: “1) give implicit advice in the form of success stories, 2) legitimize preceding or upcoming advice, 3) show and support dis/agreement with other contributors’ assessments or advice, and 4) give a diagnostic opinion” (ibid.: 29). Lindholm (2017: 38) concluded that the participants construct (among others) “shared situated identities” and expert identities on specific health issues through the narratives. Lindholm (2017: 38) also considered the relational work conveyed by the narratives: “empathy and support [which] orien[t] to relationship building.” The work by Hamilton (1998) and Lindholm (2010, 2017) clearly connects personal online narratives with interpersonal-pragmatic issues by highlighting how narratives are situated activities that facilitate the construction of identities.

My review has illustrated that several facets of online health practices have been analyzed from an interpersonal-pragmatic perspective – the construction of identities, the use of relational strategies, speech activities such as advising, and illness narratives. Importantly, all of these studies have taken the online context of the interaction into account and have tried to address how challenges and affordances of the medium have influenced the ensuing interaction. However, my review has also made it clear that online social practices have rarely been



researched from a holistic perspective. In many cases, the focus of studies was one particular aspect of a practice, such as those mentioned above. Locher (2006) and, to some extent, Rudolf von Rohr (2018) are exceptions as they tried to approach practices in their entirety. As I mentioned, however, they did so with a focus on advice-giving and persuasion, respectively, while my focus lies on collaboration and the therapeutic alliance. Nevertheless, it is positive to see the advances in our understanding of online health practices and the amount of research that is being conducted into such practices. As my review of (online) mental health discourse will show, more research still needs to be conducted on this particular component of health discourse.

### **2.3.3 Face-to-Face Mental Health Discourse**

Health discourse that focuses on mental health includes a broad range of interactions. As my focus lies on the institutionalized interaction between a counselor and a client, my literature review on mental health discourse will mainly focus on such interactions as well, namely counseling and psychotherapy. The latter is linked to mental health in a straightforward way. But counseling is an umbrella term and is not always clearly focused on mental health. The Oxford English Dictionary (OED) defines counseling as “the giving of advice on personal, social, psychological, etc., problems as an occupation.” They add that in psychology, counseling is “a form of psychotherapy in which the counselor adopts a permissive and supportive role in enabling a client to solve his or her own problems.” While I clearly focus on this latter type of

counseling, insights from research on other types of counseling have nonetheless influenced my study. For example, linguists have looked at HIV/AIDS counseling (see e.g. Peräkylä 1995; Silverman 1997) or genetic counseling (see e.g. Arribas-Ayllon et al. 2011; Sarangi 2014). Among such research from other types of counseling, Zayts and colleagues (see e.g. Pilnick and Zayts 2012; Zayts and Kang 2009; Zayts and Schnurr 2011, 2014, 2017) have done work on genetic counseling that is especially relevant for my study.

For example, Pilnick and Zayts (2012) have researched the principle of non-directiveness which is also relevant in well-being counseling. They examined 14 English-language consultations in a prenatal genetic counseling context at the University of Hong Kong. In these consultations, two doctors from Hong Kong interacted with participants that originated from Asia, North and South America, Europe, as well as New Zealand and Australia. Through a conversation analysis, Pilnick and Zayts aimed to establish whether patients could freely choose which prenatal tests they would like to take. Results from previous sociological studies had reported that women felt restricted in their choice due to their socioeconomic status. Pilnick and Zayts (2012: 279) argue that “differences in what are seen to be acceptable reasons for accepting or refusing testing do seem strongly linked to the different socioeconomic circumstances” of the patients. Pilnick and Zayts thus show that contextual cues can influence adherence to non-directiveness in genetic counseling. In another study with a similar dataset, Zayts and Kang (2009) report that understanding is prioritized over non-directiveness in

genetic counseling with non-native speakers of the English language. In other words, making an informed decision is prioritized over non-directiveness. These studies unearth whether and how non-directiveness is enacted in actual counseling interactions.

Moreover, the work of Zayts and colleagues is also especially relevant for my study as they apply the framework of relational work to genetic counseling and examine interpersonal-pragmatic concerns. For example, Zayts and Schnurr (2011) analyze the use of laughter in 34 prenatal genetic screening consultations between Chinese doctors and nurses and Filipina patients (the interactants spoke in English in the consultations). They discovered, for example, that doctors and nurses employ laughter to reframe the patients' attempts to seek direct advice on which test to take. The use of laughter helps the medical providers to position themselves not as advice-givers, but rather as information-providers. Through their analysis Zayts and Schnurr not only demonstrate that laughter is a multifunctional relational strategy, but also empirically show how the use of relational work can result in the construction of specific identities.

Linguistic research on mental health has focused on several recurrent themes. The first recurrent theme I will discuss is speech activities. Researchers have analyzed such activities as therapist's formulations of clients' talk, self-disclosure by clients, or specific practices of a particular psychotherapeutic approach. Some of these speech activities deal with the organization of talk and turn design. Naturally, conversation analysts were especially successful in advancing our

understanding of such activities in a mental health context (for excellent overviews on conversation-analytic research on psychotherapy see e.g. Peräkylä 2013, 2019; Peräkylä et al. 2008).<sup>5</sup> In fact, conversation analysts have foregrounded the “interactional accomplishment” of such activities as the “formulating, reformulating and negotiating [of the client’s] ‘problem’” in psychotherapy and counseling (Mondada 1998: 157). Other researchers have focused on activities that are specific to a particular psychotherapeutic approach, such as the analysis of homework (see definition below) in cognitive behavioral therapy. Another current theme of research is the analysis of empathy. Empathy is understood to be an essential component of effective counseling. It comes as no surprise, then, that it has been researched from various perspectives, including linguistics. A last recurrent theme that is relevant to my study is that of narratives. Narratives and storytelling are an integral part of counseling and therapy. As I have shown previously, they are in fact essential in any health discourse and are prominent in online health practices as well. Studies that focus on counseling or psychotherapy from a more holistic perspective are rather rare. I will review a particular exception, however.

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<sup>5</sup> I am aware that conversation analysts do not usually call formulations or therapist responses speech activities. However, the research referenced here can best be subsumed within this theme in my review.

*Speech Activities*

A classic study of what transpires in psychotherapy was conducted by Labov and Fanshel (1977). They performed a discourse analysis of “five episodes from a single therapeutic session” between a patient suffering from anorexia nervosa and a “highly experienced social worker” who “had been exposed to the psychoanalytic tradition through many formal and informal educational channels” (ibid.: 329). Labov and Fanshel (1977: 349) aimed to “discover what takes place in the conversation between a therapist and her patient” and more generally to “extend the scope of linguistic analysis to conversation as a whole.” Mondada (1998: 155) summarizes their overall aim: “developing a general model for discourse analysis.” Labov and Fanshel focused their attention on the turn by turn interaction that the therapist and the patient produced. They analyzed such discourse phenomena as requests, challenges, coherence or narratives. They further analyzed prosodic cues, such as intonation. Labov and Fanshel’s detailed examination of fifteen minutes of therapeutic interaction demonstrates the diversity of speech activities that are present within therapeutic discourse overall. While Labov and Fanshel described the psychoanalytic practice of interviewing, more recent work has expanded research to other types of therapeutic interaction that are more relevant to my own study. Nevertheless, Labov and Fanshel is an impressive analysis of what transpired in part of a session between a therapist and a patient.

In *Conversation Analysis and Psychotherapy*, Peräkylä et al. (2008) gathered contributions from CA researchers on a variety of

discourse phenomena in several types of psychotherapy. Researched discourse phenomena included formulations (Antaki 2008), responses to reinterpetative statements by the therapist (Bercelli et al. 2008a), or the sequential interaction that occurs when clients resist the therapists' proposed actions (Halonen 2008; Peräkylä 2008; Vehviläinen 2008). For Vehviläinen et al. (2008: 196-197), the volume is "an effort towards systematization of the conversation analytical explication of psychotherapy", and the studies have "identified and explicated a number of key actions" that occur within psychotherapy. I review some of the contributions in Peräkylä et al. (2008) here, along with other studies that focused on speech activities in counseling or psychotherapy.

One speech activity that has been extensively examined is the formulation of clients' talk by therapists. Following Heritage and Watson (1979, 1980), Antaki (2008: 26) defines formulations as "a reference to the practice of proposing a version of events which (apparently) follows directly from the other person's own account, but introduces a transformation." According to Antaki, there are several ways to propose an alternative to what someone else has said, including not only formulations but also extensions, reinterpetative statements, corrections, and challenges. Antaki argues that they range from collaborative to combative respectively. Antaki (2008) reviewed research on formulations. He summarizes that formulations have three different functions: they can serve therapeutic interpretation, manage the progress of the session, or facilitate the taking of the patient's history. Antaki (2008: 42) concludes that formulations are "a powerful rhetorical move" because of

their “ostensibly cooperative link between the formulator’s version and that of the previous speaker.”

In Bercelli et al. (2008a), the focus is on another type of therapist response: reinterpetative statements. In contrast to formulations, reinterpetative statements not only provide “a candidate reading of the perspective expressed by the client” (ibid.: 46), but also “something that, though grounded in what the client has said, is caught and expressed from the therapist’s own perspective – therefore something possibly different, and ostensibly so, from what the client meant” (ibid.: 47). Bercelli et al. examined such reinterpetations and clients’ reactions in cognitive and relational-systemic psychotherapy sessions. Clients can respond to reinterpetative statements by agreeing, disagreeing or not responding at all. Clients account for their agreement or disagreement through acknowledgement tokens, mere agreements, and extended agreements, with the latter being especially important: “[Clients] can display their understanding of and agreement with therapists’ reinterpetations, provide evidence supporting them ... and thus develop, enrich and partly modify therapists’ interpretations” (ibid.: 61). This leads to an interactive pattern between clients and therapists:

Therapists, for their part, firstly allow for and even pursue such extended responses, and then, when they are provided by clients, welcome and deal with them as important contributions to the therapeutic work. (Bercelli et al. 2008a: 61)

Both Antaki (2008) and Bercelli et al. (2008a) highlight the collaborative work in the therapeutic alliance and illustrate the therapists' efforts to involve the clients as active participants within the alliance.

Ekberg and LeCouteur (2012, 2014, 2015) examined the context of another type of speech activity that therapists perform: proposals for behavior change. They examined 20 one-on-one sessions of cognitive behavioral therapy (CBT) in which 19 clients and 9 therapists participated. In Ekberg and LeCouteur (2012), they analyzed the linguistic realization of therapists' proposals and how the epistemic rights of both the therapists and the clients were displayed in these proposals. This led them to identify the following formats: "hedged recommendations", "interrogatives", and "information-giving" sequences (*ibid.*: 231). In the first two, the therapists emphasized that the clients could accept or reject the proposals and in this way acknowledged the epistemic rights of the clients. In information-giving sequences, the therapists "proposed behavioural change as a generalized solution that would be given to anyone in that circumstance" (*ibid.*: 236). In such cases, clients can display their epistemic authority by rejecting the solution as inapplicable to their personal situation. Ultimately, for Ekberg and LeCouteur (2012: 237), all three types of proposals "can lead to localised client resistance."

In a later article, Ekberg and LeCouteur (2015) then identified three prototypical responses to the therapist proposals researched in the above-mentioned study. The three types of responses were "appeals to restrictive situational factors", "appeals to a fixed physical state", and



“assertions of previous effort to do what the therapist was proposing” (ibid.: 15). In the first case, clients demonstrated with expert knowledge of their own experiences that the action that the counselor suggested is “out of their personal control” because of “a specific, restrictive contingency in their life” (ibid.: 15). The second strategy consisted of “descriptions of experiences that are internal to [the clients]”; that is, they were the only ones to know those experiences. The clients then proceeded to suggest that the experiences were “caused by external factors and are, thus, out of the client’s control” (ibid.: 15). The last strategy involved assertions that the proposed action has already been tried by the clients, but that it did not help. The clients regularly utilized three specific linguistic devices to emphasize their epistemic right: “high modality terms and primary tense”, “non-conforming responses to interrogatives”, and “direct reported speech” (ibid.: 22). Ekberg and LeCouteur concluded that therapists should not use such therapist proposals to facilitate behavioral change as they were regularly met with resistance.

In another study, Ekberg and LeCouteur (2014) analyzed information-soliciting questions that therapists use to induce behavioral change. They demonstrated how such questions are more successful in facilitating change. Ekberg and LeCouteur (2014: 64) identified “conversational resources that are recurrently drawn on by therapists to co-implicate clients in the accomplishment of [behavioural change] ... .” Such co-implications usually consist of three turns: the therapist solicits a suggestion for the behavioral change from the client, the client

provides a suggestion, and the therapist accepts this suggestion. The suggestion is jointly produced and is consequently more readily accepted by the client. Overall, Ekberg and LeCouteur explicate the intricate work that the therapist invests in facilitating behavioral change and, in effect, how the solutions for the clients' troubles are jointly negotiated by the client and the therapist. Ekberg and LeCouteur's work compellingly shows how linguistic analyses can aid practitioners to identify linguistic choices that advance the therapeutic process.

The research presented so far on speech activities utilized conversation-analytic methods. The collaborative work in counseling and psychotherapy has also been researched through other approaches, such as discourse analysis. Pawelczyk and Erskine (2008), for example, demonstrated that self-disclosure in psychotherapy sessions is an interactional achievement. They examined 65 hours of psychotherapy sessions in which an experienced therapist and 25 clients participated (ibid.: 37-38). In the sessions, the therapist talked with one client, but several other clients were present as well. Pawelczyk and Erskine explored strategies the therapist used to facilitate the clients' self-disclosure in moments in which clients had abruptly stopped. They analyzed "the discourse marker *you know*, the expression *I don't know*, and repetitions ..." (ibid.: 38) and were able to show, for example, that the functions of *you know* and *I don't know* differ according to their context. They further demonstrated that reactions to these discourse markers are essential in facilitating further self-disclosure from the clients. For example, when clients terminate their self-disclosure with *you*

*know*, the therapists' *I don't know* can facilitate the continuation of the clients' self-disclosure. Pawelczyk and Erskine's analysis of the interactional complexity of such instances shows empirically that "the same language form can perform different interactional work" (ibid.: 46). They concluded that "the verbalization of the client's experience is the effect of joint interactional effort of both parties" (ibid.: 45). Pawelczyk and Erskine's study foregrounds the importance of the collaborative work in the therapeutic alliance.

A crucial development in research on counseling and psychotherapy has been the inclusion of the psychotherapeutic approach utilized when examining such interactions. Three studies look at speech activities in cognitive behavioral therapy and solution-focused therapy (Beckwith and Crichton 2014; Fitzgerald and Leudar 2012; MacMartin 2008). These psychotherapeutic approaches are utilized by the counselor in my data as well. All three studies explicitly draw on these psychotherapeutic approaches to explain linguistic choices and patterns.

Beckwith and Crichton (2014) analyzed one specific practice of cognitive behavioral therapy (CBT): homework. Homework refers to activities that clients are supposed to perform between individual sessions. Homework in CBT includes such activities as "recording one's thoughts and challenging them", performing "an exposure task to reduce anxiety" or "psychoeducation in which the client reads about the condition and its treatment to better understand [it]" (ibid.: 92). Beckwith and Crichton (2014: 91) investigated "the expertise of the therapist in using discursive strategies to put into practice the therapeutic model

of CBT.” Homework is an essential aspect of CBT, and therapists need to convince clients to commit to it. Beckwith and Crichton used discourse analysis to examine one entire therapeutic treatment (a total of 10 CBT sessions) of a man suffering from generalized anxiety disorder. They focused on three “critical moments” in which “homework is introduced” for the first time, “the first homework task is set” and “the first homework task is reviewed” (ibid.: 95). Beckwith and Crichton demonstrate how the therapist strategically invokes the institutional or professional frame of CBT to mitigate the imposition of giving the client homework. In addition, the therapist uses constructed dialogue to invoke the clients’ perspective on the homework and to be able to further mitigate possible resistance. Beckwith and Crichton equate the use of these discursive strategies with expertise, for they allow the therapist to convince the client to commit to the homework. While they acknowledge that their analysis of only one therapist-client dyad limits possibilities for generalizations, their study still gives insight into how a specific task in a specific type of therapy is interactionally enacted and can be linguistically analyzed (ibid.: 99-100).

Fitzgerald and Leudar (2012) analyzed formulations in person-centered, solution-focused short-term psychotherapy. This type of therapy is also similar to the one the counselor in the data of my study practices. Fitzgerald and Leudar were interested in whether formulations were used according to the principles of person-centered therapy (with its focus on non-directiveness) and solution-focused short-term therapy (which aims to promote clients’ strengths and positive qualities). They

studied 50 sessions of one therapist. They found that despite many successful formulations the therapist at times produced some that were not only interactionally misplaced but also contradictory to the principles of the psychotherapeutic approach utilized. For example, the therapist clearly directed the content of the therapy when highlighting specific positive feelings and ignoring the clients' negative feelings. This leads Fitzgerald and Leudar (2012: 17) to argue that "from a person-centred perspective there may be a loss of empathy and unconditional positive regard . . . ." Conversely, when the therapist reflects back on "the negative expressions [from the client]" (ibid.: 16), the therapist "deals more with the problem than the solution" (ibid.: 17) and does not adhere to the principles of solution-focused therapy. Fitzgerald and Leudar convincingly demonstrate that formulations and other psychotherapeutic tools need to be considered within the specific psychotherapeutic practice as "formulations can have different meanings depending on the therapeutic approach" (ibid.: 21).

Finally, MacMartin (2008: 80) analyzes optimistic questions, which are "questions [that] asked clients about their strengths, abilities, and successes in addressing the issues that brought them to therapy." These are typical for solution-focused therapies. MacMartin employed a conversation analysis to study one session of such therapeutic treatment. MacMartin (2008: 91) has found that clients mostly misaligned with optimistic questions by using "answer-like responses" and "non-answer responses". Answer-like responses downgraded the optimism of the questions with jokes or sarcastic remarks; they also refocused the

optimistic resource as “factors or persons other than [the clients themselves]” (ibid.: 91), such as external circumstances or family members. Non-answer responses contained complaints about the optimistic questions or a direct refusal to cooperate with the optimistic elements of the questions. MacMartin argues that a reason for the misalignment might be the fact that in solution-focused therapy clients are encouraged to focus on their resources rather than their troubles. If clients are not ready to focus away from their troubles, they might reject optimistic questions that focus on their positive qualities and resources. According to MacMartin (2008: 97), reiterating their difficulties serves to legitimize their need for help and is “a call for ongoing therapeutic support.” While the resistance to optimistic questions might be interpreted as non-collaborative at first glance, MacMartin illustrates that even resistance can ensure further collaborative work between client and therapist.

All in all, my review has shown that various speech activities have been analyzed in counseling and psychotherapy. And while the collective endeavor provides us with vital knowledge about individual speech activities, there is to my knowledge little research that looks at all the speech activities interacting within a clients’ entire treatment from start to finish. Further research is needed to demonstrate this interplay of speech activities and to uncover whether patterns occur.

*Relational Strategies: Empathy*

Several conversation-analytic studies have further looked into one particular relational strategy in a counseling or psychotherapeutic context: empathy. Pudlinski (2005) looked at empathy in telephone-mediated communication on peer support lines. He studied 44 calls to three different telephone helplines. Pudlinski identified eight methods of doing empathy and/or sympathy and describes not only their interactional characteristics, but also their sequential occurrence within troubles tellings. Two points of Pudlinski's study are especially noteworthy. Pudlinski argues that we should not simply look at concepts such as empathy and sympathy from a theoretical perspective and find instances of their occurrences. Instead, we should examine how these interactional effects are performed within actual interaction. Further, he argues that empathy and sympathy are a "mutual achievement" (ibid.: 286) between participants. Empathy is not simply done by the one who expresses it. Rather, it is created by both interactants when they set up empathic opportunities. Once a participant expresses what could be empathy, the respondent still has the opportunity to not ratify the expression as empathy. Pudlinski calls for further analysis of this mutual interactional achievement.

Wynn and Wynn (2006) analyzed 20 video recordings of psychotherapeutic consultations between therapists (n=4) and their patients (n=15). After identifying sequences in which empathy played a role, Wynn and Wynn categorized these instances into three ways of displaying empathy: cognitive empathy, defined as "utterances whereby the

therapist directly expresses understanding of the thoughts, feelings, or behaviour of the patient” (ibid.: 1389); affective empathy, which occurs when “the therapist demonstrates that he/she partakes in the patients’ feelings” (ibid.: 1390); and sharing empathy, which “is characterized by the patient perceiving his/her therapist as expressing that they have something in common” (ibid.: 1392). Wynn and Wynn add that empathy is an interactional achievement in which the therapist displays empathy and the patients react to it. When this reaction is positive, Wynn and Wynn argue that empathy has occurred. When the patients do not react to the therapists’ display of empathy or react negatively to it, Wynn and Wynn argue that interactional trouble has occurred and that empathy has not been achieved. This perspective echoes Pudlinski’s idea (2005) that empathy is collaborative work. While Wynn and Wynn show that such empathic sequences can occur within psychotherapeutic sessions, they conclude that they cannot tell whether such sequences are a requirement for psychotherapeutic interaction.

Muntigl et al. (2014) also call for an understanding of empathy as an interactional achievement. Drawing on examples from previous literature, they identify three kinds of discursive issues that are especially important in accomplishing empathy collaboratively: the empathic opportunity, the empathic response, and turn design. The first is created through the client’s troubles tellings. These client-created empathic opportunities then invite professionals to produce an empathic response. The turn design comes into play because the empathic response needs to be appropriately designed to accurately respond to the



empathic opportunity. A critical point is the affiliation between the stance expressed by the client in the troubles telling and the stance expressed by the therapist in the response. Further, based on the work of Pudlinski (2005), Muntigl et al. identified the following empathic practices in their study: emotive reactions, assessments, naming another's feelings, formulating the gist of the trouble, formulating the upshot of the trouble, and co-completing the client's utterance. Muntigl et al. (2014: 54) offer an excellent summary of the collaborative nature of empathy: Achieving empathy, therefore, is a co-ordinated activity in which client displays of affectual stance and therapist empathic responses occur in synchrony." In addition, this activity "require[s] ongoing collaborative work from both participants" (ibid.: 54).

Empathy is the most researched relational strategy in a counseling and psychotherapy context. All three studies have highlighted the collaborative work necessary to achieve empathy and thereby foreground the salience of the therapeutic alliance. It remains to be seen whether other relational strategies work in similar ways in an email counseling context. I will also examine empathy and complement previous research with analyses of further relational strategies such as criticism, praise or encouragement.

### *Narrative*

Finally, a last recurrent theme in counseling and psychotherapy research that is highly salient for my study is that of narratives. As I have mentioned, storytelling is an integral part of any counseling or

psychotherapeutic interaction. Labov and Fanshel (1977) and Capps and Ochs (1995) are prominent examples of research on narratives in a mental health context. Boothe (2015) and Bercelli et al. (2008b) have further analyzed narratives and their specific function within therapy sessions.

Capps and Ochs (1995), for example, analyzed narratives told by an agoraphobic mother (Meg) and her daughter. Agoraphobia is a mental disorder that centers around a fear of encountering situations in (open) spaces in which help is not easily procured. Capps and Ochs did not analyze counseling or psychotherapy, but interviewed Meg to find linguistic patterns in the way she talks about herself. Capps and Ochs investigated linguistic patterns that came up in Meg's narratives in the interviews and that seemed to reinforce and continually recreate her agoraphobia. From the combined perspectives of a clinical psychologist and an applied linguist, Capps and Ochs (1995: 182) argued that Meg's narratives routinely contained a setting, a problematic event, an attempt to resolve the problematic event, consequences, and a psychological response. They found that, depending on how these story parts are combined, causal links between particular aspects of a story could be emphasized or hidden. Moreover, Capps and Ochs (1995: 187) illustrated how Meg positioned herself in specific narratives to emphasize herself as the object of the story who could not help but feel agoraphobic. Finally, they demonstrated how semantic choices could maintain an agoraphobic perspective. Meg repeatedly chose words that portrayed her as an "experiencer" or "patient", rather than as an "agent" (ibid.:

187). Such semantic choices can maintain and continually construct a life story, in Meg's case that of an agoraphobic patient. Capps and Ochs (1995: 187) concluded that attention to linguistic choices within psychotherapy can be helpful for the therapeutic process and that we should see "therapy as a reconstructive process."

Bercelli et al. (2008b) analyzed narratives in 100 psychotherapeutic sessions from cognitive and systemic therapy. They aimed to identify what stages the narratives occur in, whether they were elicited by the therapist or volunteered by clients, and finally what the narratives aimed to accomplish in the ensuing interaction from a therapeutic perspective. They found that narratives occur, first of all, in the inquiry phase of the therapeutic process, in which the therapist aims to gather information from the clients. In this phase, the therapist elicits narratives with a specific goal in mind: "[The narratives] are provided by clients on therapists' requests and are in the service of therapists' inquiring strategies or agendas" (ibid.: 294). The second type of narratives that Bercelli et al. (2008b: 295) identified were what the authors called "co-elaborative [personal narratives.]" These narratives, which were typically told in the elaboration phase of therapy, occurred after therapists' reinterpretations of the clients' talk and often aimed to agree or disagree with the reinterpretation:

When clients' narratives occur in the phase of elaboration, they are regularly self-initiated and volunteered by clients, and are usually produced to negotiate agreement and show clients' understandings of the therapists' previous reinterpretations. (Bercelli et al. 2008b: 301)

Bercelli et al. not only demonstrated the “interactional complexity of personal narratives” (ibid.: 300) but also showed that the utilization of narratives goes beyond “telling and hearing stories”, for interactants “are also, actually, doing therapy” (ibid.: 301) through storytelling. For Bercelli et al. (2008b), like Capps and Ochs (1995), narratives are not just used to report an event or depict characters within a storyworld. The interactants do much more when they tell a story. And especially in counseling and psychotherapy, narratives are an essential tool that helps mutual understanding and the expression of emotions and experiences, as well as the construction of identities within the stories and within the counseling or psychotherapy context. Narratives are in this way used to perform important relational work and thereby facilitate the therapeutic process.

#### *Holistic Approach to Studying Counseling and Psychotherapy*

A rarity in the linguistic analysis of counseling and psychotherapy is the holistic study that looks at a range of discursive phenomenon within the same dataset. I want to conclude my review of research on face-to-face counseling and psychotherapy by mentioning a study that aimed to provide such a holistic examination of psychotherapy. Ferrara’s (1994) book on *Therapeutic Ways with Words* is one of the few studies that approached the analysis of psychotherapy in this way. She performed a discourse analysis of 48 hours of face-to-face psychotherapy sessions. Ferrara’s aim was precisely to shed light on discourse phenomena in those psychotherapy sessions. She examined narratives, two types of

repetitions (i.e., echoing and mirroring) and the collaborative construction of metaphors as well as joint productions (i.e., instances in which interlocutors complete sentences for each other). Methodologically, Ferrara incorporated a triangulation of the data: she audio-recorded the sessions and produced transcripts for each of them; she interviewed some of the therapists she worked with; and she attended training sessions for trainee psychotherapists to arrive at a better understanding of what transpires in psychotherapy. Ferrara's results advanced our understanding of psychotherapy in several ways. Her analysis of narratives, for example, revealed that retellings of the same event or the same theme can be indicative of clients' changing emotions and attitudes to such events or themes. Ferrara corroborated that the use of repetitions does important interactional and relational work. By repeating the clients' words, for example, therapists can demonstrate their understanding of clients' points of view and thus express empathy. More specifically, Ferrara demonstrated, among other things, that when they extend clients' metaphors, therapists not only showed their understanding of clients' reported circumstances but also built rapport. Ferrara's main message is that psychotherapy is therapeutic because of the collaborative work between therapists and clients and that meaning is created interactively by the interlocutors. All in all, Ferrara's book is an excellent contribution to research on psychotherapy and expertly highlights the importance of collaboration in psychotherapeutic interaction.

I could only review a selection of studies that have looked into counseling and psychotherapy here due to space. This review has

nevertheless clearly illustrated the importance of the collaborative and interactive work between the clients/patients and the counselors/therapists in counseling and psychotherapy. In other words, the therapeutic alliance is always highly salient in counseling and psychotherapeutic interaction. My review also makes clear that previous researchers have often looked at very specific aspects of psychotherapy (Ferrara (1994) is a notable exception). Despite the fact that we have knowledge about many different aspects of counseling and psychotherapy, a holistic analysis of entire counseling experiences, i.e., an analysis of all the sessions occurring between one counselor and one client from the beginning until the end, has not yet been conducted to my knowledge. This is where my study can complement the very valuable results of previous research.

### **2.3.4 Online Mental Health Discourse**

Research on online mental health discourse has been scarce. I could not agree more with Locher and Schnurr (2017: 705) that “the potential of CMC for emotional and psychological counseling is clearly booming.” This potential has been recognized by practitioners as well as the public (see e.g. Berger 2017; Guardian 2019; Knaevelsrud and Maercker 2007). Norcross et al. (2013: 368-369) state that “the top five predicted changes in therapy interventions are online therapies, smart phone applications, self-help resources beyond books, virtual realities, and social networking interventions.” Clearly, research needs to tackle this field as well to show how online mental health practices work. And we

have seen a modest influx of studies concerned with the language of such practices since the 2010s. Early work on online mental health focused in many cases on peer-to-peer and public interaction. I will review some of these early studies here before outlining research on online counseling and psychotherapeutic exchanges in more detail.

### *Peer-to-Peer Interactions*

Miller and Gergen (1998), Morrow (2006), and Giles and Newbold (2013) discuss forum interactions that center around mental health issues. Miller and Gergen (1998) were some of the first authors to look at mental health communication in an online context by researching the therapeutic potential of a message board where peers talk about suicide. They analyzed the “conversational moves” (ibid.: 192) that occur on the message board. Classifying the interactions as help-seeking, informative, supportive, growth-promoting, and punitive interchanges, Miller and Gergen (1998: 198) state that help-seeking and support-giving take the forms of “self-revelation ... on the one hand, and empathic and encouraging responses on the other.” However, they interpret these aspects as belonging to the realm of conversations characteristic of “intimate friendship [or as] neighborly” (ibid.: 198) rather than to therapeutic work. The “communication more typically identified with extant schools of therapy [occurs] far less” (ibid.: 198). Miller and Gergen (1998: 198) concluded that “participants were more content to help each other through the dark times than propel each other to change the conditions or courses of their lives”; they see the exchanges on the

message board, then, as “more sustaining than transforming” (ibid.: 198). This early work by Miller and Gergen shows that we need to be careful of the comparisons we draw. While the message board might be interpreted as the online equivalent of a self-help group, we cannot straightforwardly compare such interactions with counseling or psychotherapy. However, Miller and Gergen’s work is still valuable as it shows a way of looking at mental health conversation from a holistic perspective.

Morrow (2006) analyzed messages posted on a forum about depression. He conducted a discourse-analytic examination of 85 messages written in English and found that they can be categorized into three types of messages: problem messages (n=20), advice messages (n=50) and thanks messages (n=15). Morrow identified typical linguistic patterns in each type of message. Problem messages contained descriptions of problems that were interlaced with elaborate accounts of the posters’ feelings. Strikingly, these problem messages rarely contained overt requests for advice. Morrow argues that requesting advice in general, but especially in the context of the depression forum, carries face-threatening potential. Posters tried to position themselves as having at least some competence in dealing with their troubles. Responses to such problem messages often contained advice. The given advice was framed and constructed carefully to account for the potential face-threat to the advice recipients. Advice-givers used “numerous expressions of empathy, encouragement and reassurance” (ibid.: 547) to facilitate the uptake of the advice. The thanks messages were brief messages



that expressed appreciation for the advice that had been provided. According to Morrow (2006: 547), “in none of them did a writer indicate that they acted upon the advice they had received.” Morrow argues that the peer-to-peer nature of the forum led users to invest considerable work into creating equal status in supportive relationships.

Two threads from forums on depression and anxiety, respectively, were examined with regards to identity construction by Giles and Newbold (2013). They analyzed a thread from each forum, one consisting of eight messages, the other of ten messages and all were written in English. They applied discursive psychology, conversation analysis and membership categorization analysis to examine the two threads. Giles and Newbold demonstrated how new users to the threads employed specific terms that belong to particular categories (for example, terms such as *rage*, *depression* or *bipolar*) to legitimize their identity as new users on the forum. At the same time, they also positioned themselves as sufferers from the mental health condition that the forum was dedicated to. By repeating such categories in subsequent posts, other forum users not only confirmed the original poster’s identity, but also reinforced aspects of the specific mental health condition itself. For example, the repetition of *rage* and *bipolar disorder* links *rage* to the mental health condition of bipolar disorder. Through such “categorical work” (ibid.: 482), users construct not only their own identities and the identities of other users, but also the identity of the forum. Giles and Newbold showed that such work, often conducted through the use of

second stories, helped to create a supportive environment for the users, in which they recognized that they were not alone.

As these studies show, mental health has received some attention in a CMC context in recent years. However, this attention has mainly focused on online mental health in a Western context. In other parts of the world, it has not as of yet received much attention. Al Zidjaly (2017) is a notable exception with her study of how mental health is constructed in online psychological consultations on *Islamweb.net*. She analyzed 200 examples of psychological consultations from the website, where users can send in questions that are then answered by professionals and posted on a public website. Her discourse analysis demonstrates how the answers are formulated to construct mental health as something that should be dealt with through religion rather than psychological treatment or therapy. Al Zidjaly (2017: 183) shows that “consultants construct themselves as religious experts” rather than as psychological or medical experts. She concludes that the interaction positions the advice-seekers as sinners who should adhere better to Islamic traditions and practices. Al Zidjaly (2017: 184) further argues that this results in “a top-down relationship where the high status of medical and religious authorities in Islamic contexts is never to be questioned . . . .” This is in stark contrast to how Western cultures see the therapeutic relationship between professionals and clients. Al Zidjaly raises our awareness of avoiding generalizing the Western idea of what constitutes mental health, its treatment and especially the therapeutic alliance. Yet her work is still an exception as an examination of mental health in non-

Western contexts. Clearly, it suggests that further attention should be given to this research area. It is, however, not part of my study.

### *Online Counseling and Psychotherapy*

There are to my knowledge three groups of researchers who have studied professional online counseling and psychotherapy in more detail. A group of Australian researchers (see e.g. Danby et al. 2009; Harris et al. 2012) analyzed online counseling as part of their examination of *KidsHelpline*, an Australian service that provides telephone and online counseling to kids and teenagers. Further, a group of Dutch researchers (see e.g. Jager and Stommel 2017; Stommel 2012; Stommel and van der Houwen 2014) have studied two types of online counseling in the Netherlands. One service provided counseling for clients suffering from mild depression and anxiety, whereas the second offered information-based counseling about drugs and alcohol. Finally, a third group of researchers has studied Cognitive Behavioral Therapy (CBT) administered online (see e.g. Ekberg et al. 2013; Ekberg et al. 2016). All of these researchers utilized conversation-analytic techniques.

*KidsHelpline* offers telephone and online counseling, which naturally makes it an ideal place to compare the two types of counseling. Danby et al. (2009), for example, examined how ‘active listening’ is achieved in 50 telephone and 50 chat counseling sessions on *KidsHelpline*. They found that in telephone counseling, the counselors habitually used minimal responses to demonstrate listening and understanding. They argued that such minimal responses “encourage the clients to keep

talking” (ibid.: 109) and therefore have direct consequences for the turn-by-turn interaction. In chat counseling, the clients regularly posted one “extended turn” (ibid.: 98) to describe their problem. The counselor does not have the opportunity to insert minimal responses in such cases. This was particularly salient when clients posted lengthy turns, as it took them several minutes to compose a post before the counselor could see it. While in some cases such long pauses between posts were not a problem, in other cases the counselors posted a message that referred to this long pause. Clearly, the use of minimal responses differs between telephone and online counseling. Nevertheless, Danby et al. (2009: 109) found that “formulations are often the first thing done by the counsellors after the callers’ presentations of their reasons for contacting the service.” They argue that formulations are a way to demonstrate ‘active listening’ and that they are used in both types of counseling. Through their comparative analysis of telephone and chat counseling, Danby et al. corroborate findings from other studies that the affordances of the medium in which the counseling takes place need to be taken into account.

Harris et al. (2012) found that the affordances of the medium were sometimes explicitly mentioned by the counselors on *KidsHelpline*. Harris et al. examined how counselors in email counseling tried to persuade clients to shift to telephone counseling. Their analysis of three email counseling threads – “a series of chained e-mail exchanges between a counselor and a client over an extended timeframe” (ibid.: 25) – shows that counselors at times tried to convince clients to switch from

email to telephone counseling. Counselors used three approaches to request such a shift: “a preface to ‘build a case’ for the proposed modality shift”, “an indirect design” of the request, and in some instances a “contingency focused” request made by the counselor (ibid.: 26). Harris et al. argue that all three approaches aim to safeguard the therapeutic alliance. First, the preface, which might refer to the usefulness of telephone counseling or display the limits of email counseling, is used to frame the request in a positive light and as offering an additional option. Second, the indirect design of requests mitigates the imposition of the request itself. It further emphasizes the clients’ agency, for they are invited to decide whether they would like to change to telephone counseling. Finally, the third approach of focusing on a contingency allows clients to respond to the request by saying that they do not have the ability to use telephone counseling. Denying a request because one is not able to realize it is less face-threatening than denying it because one does not want to comply with it. Harris et al.’s study shows how counselors invest extensive work in creating a positive environment in which the clients feel comfortable and empowered rather than being asked to simply do something the counselor wants them to. In this way, Harris et al. demonstrate how counselors are oriented to the therapeutic alliance and work to negotiate it in a positive way.

Stommel and colleagues have looked at Dutch online counseling. They first examined online counseling provided to patients with mild depression and anxiety, with a focus on such aspects as recipient design (Stommel 2012), formulations (Stommel and van der Houwen 2013),

complaining (Stommel and van der Houwen 2014), problem presentations (Stommel and van der Houwen 2015), or how counselors promote self-directedness in clients (Lamerichs and Stommel 2016). I review a selection of these studies here.

Stommel (2012) examined recipient design in email counseling. She focused on three specific aspects in which recipient design occurs: salutations, closings, and forms of address. Her analysis of 34 threads of emails written in Dutch revealed that clients only explicitly request a more informal style of forms of address in two cases. However, clients show their preference for more informal forms of address by simply starting to use them. In the Dutch data, this is most obvious in the use of first names in greetings and closings and in the use of T instead of V pronouns. In Stommel's data, some counselors responded to these changes positively and used more informal styles of address in response. However, Stommel (2012: 156) also points out that "counselors sometimes fail to attend to recipient design ... when clients initiate a more informal recipient design." Stommel attributes this failure partly to the complexity of the online environment in which the interaction takes place, as some email messages are sent from a message board and others from an email system. This might result in counselors not remembering that the specific client prefers a more informal style. While Stommel (2012: 156) argues that clients seem to "accept" this failure in recipient design, "this does not mean that clients are indifferent about counsellors' recipient design." Stommel (2012: 156) does not further elaborate on the clients' perspectives, but admits that "the way

counsellors salute and address their clients plays a part in the clients' general perception of a too-distant counselling relationship.”

Stommel and van der Houwen (2014: 183) analyzed 20 Dutch email threads with regards to “complaining and the management of face in online counseling.” They examine three occurrences of complaints in their data and show that both interactants orient to face concerns. Due to the asynchronicity of email, clients could not manage the counselor’s face turn by turn in complaints, but rather had to anticipate and thus preemptively manage the counselor’s possible reactions. In addition, complaints about the perceived impersonal nature of the counseling were often formulated in a way that assigned culpability to the medium, rather than the counselor. Stommel and van der Houwen argue that the impersonal aspect might also be emphasized through the way the counselors summarize the clients’ input. They suggest that the practice of summarizing therefore needs further examination. Finally, Stommel and van der Houwen (2014: 191) point out how the counselors “did not take responsibility for the complaints” and thereby possibly weakened the counseling relationship. Stommel and van der Houwen (2014: 192) suggest that counselors should “not deflect” complaints and instead should improve how they “mirro[r] the client’s own words” in order to strengthen the therapeutic alliance and decrease dropout rates.

Finally, Lamerichs and Stommel (2016: 287) aimed to “show how [counselors] orient to the dilemma of promoting self-directedness in their clients while also giving ear to clients’ concerns.” Having analyzed 200 emails, Lamerichs and Stommel (2016: 287) identified five

strategies that the counselors regularly use: “demonstrating reading”, “optimistic formulations and questions”, “agency ascribing compliments”, “‘depersonalising’ problem descriptions”, and “contrastive questions.” Lamerichs and Stommel are particularly critical of the use of contrastive questions. In such questions, counselors aim to reduce the problem or the impact of the problem the clients have described. This is perceived by the clients as disalignment. As a result, clients further legitimize and justify their troubles in replies to such strategies. This in turn further emphasizes and realizes the problems of the clients. Lamerichs and Stommel demonstrate how a linguistic analysis of actual counseling data can shed light on interactional difficulties that might not be overtly clear to practitioners.

In more recent work, Stommel and colleagues (e.g. Jager and Stommel 2017; Stommel and te Molder 2015; Stommel 2016) have focused on chat counseling that provides users “with accurate information about alcohol and drugs” (Stommel and te Molder 2015: 281). In other words, this type of online counseling is concerned with providing information rather than with well-being counseling per se. Nevertheless, the use and especially abuse of alcohol and drugs belong to mental health discourse. It is necessary to mention that these counseling sessions are single sessions. In other words, the counselor and the client interact only in one session.

Stommel and te Molder (2015) analyzed preclosing devices in such chat counseling. The analysis focused on 40 chat logs of the counseling service. Stommel and te Molder (2015: 287) found that “chat



closings ... regularly lack an advice acknowledgment that is sufficient to work as a preclosing.” They identified three typical preclosings that counselors use: “questions projecting the client’s future action”, “elicitations of direct advice acknowledgement”, and “offers of a new advice sequence” (ibid.: 287). Stommel and te Molder showed that through these preclosing sequences, the closing could be accomplished as an interactive co-construction. However, in some of their examples, preclosing questions failed. In such cases, counselors had to unilaterally close the chat sessions without having received an advice acknowledgement. Failed co-constructed closings are an obvious issue in chat counseling sessions, as counselors cannot be sure whether their advice was helpful or not. A failed closing sequence might also indicate a weak therapeutic alliance. Unsurprisingly, counselors regularly invest extensive work in eliciting advice acknowledgements as they attempt to find a way to co-construct a closing sequence with the clients.

Jager and Stommel (2017) investigated metacommunicative acts that aimed to deal with interactional trouble in the chat sessions. They analyzed 46 sessions in which such metacommunicative acts were used when interactional trouble occurred. Jager and Stommel observed that it is difficult for counselors to spot interactional trouble before clients log out of the chat prematurely. First, the text-based nature of chat does not provide counselors with additional information, such as non-verbal cues. Further, clients’ pauses are difficult to interpret, as they could either be resistant behavior to advice or simply be due to a possible lagging of the chat itself. Jager and Stommel put the metacommunication

they found into three categories. The first type of metacommunication is self-criticizing; it occurs when “the counselor is regretting (s)he was not being able to help” (ibid.: 208). The second type is an accusation, which occurs when “the counselor is questioning the client’s advice reciprocity” (ibid.: 208). The third metacommunicative act is explaining: “The counselor explains the institutional tasks and responsibilities, thereby implicitly accusing the client of having unrealistic expectations” (ibid.: 208). Jager and Stommel argue that self-criticism can save the therapeutic relationship as it functions as an apologetic metacommunication. The other two types of metacommunication, however, can threaten the client’s face as counselors accuse clients of either not being cooperative or of having unrealistic expectations of what the counseling service provides. In both cases, the metacommunication can damage the therapeutic relationship. Jager and Stommel therefore advise counselors to avoid metacommunication in single session counseling.

Ekberg and colleagues (Ekberg et al. 2013; Ekberg et al. 2014; Ekberg et al. 2016) explored online Cognitive Behavioral Therapy (CBT). They analyzed 183 (only 22 in the 2013 study) therapist-client dyads that were conducting CBT via instant messaging. These dyads consisted of 183 clients and 15 therapists. The clients suffered from depression and were directed towards this type of counseling by their primary carer.

Ekberg et al. (2013) focused on early sessions in which the therapists aimed to elicit clients’ mental health history and examined

therapists' responses to client input in question-answer sequences. Analyzing 22 client-therapist dyads, they discovered that therapists could expand on question-answer sequences with a "third position object" (ibid.: 6). In other words, instead of producing a new question after a clients' answer to a previous question, the therapist produces a response to the clients' answer. Ekberg et al. (2013: 6) found two different types of such third position objects: "thanking and commiseration." Thanking the clients for their input treats the clients' contribution simply as information. In contrast, commiserating is oriented to the affective stance that the input from the clients conveyed. In both cases the therapists immediately moved "in a task-focused direction" (ibid.: 12) by including a second component in their turn, i.e., asking further questions. Ekberg et al. argue that this contrasts with face-to-face psychotherapy where this second component of moving the interaction towards further tasks would not occur within the same turn. Instead, clients would at least minimally respond to the thanks or the commiseration. Only after this turn by the clients would the therapist then move the interaction towards the next therapeutic task. Ekberg et al. thus showed how the quasi-synchronous nature of instant messaging influences the turn-by-turn interaction.

In Ekberg et al. (2014), the analysis was centered on the management of clients' expectations of the therapeutic process. They analyzed the opening moments of 176 therapeutic dyads (seven dyads out of the total of 183 were excluded, as their opening sequences were missing in the datalogs). Ekberg et al. (2014: 560) identified three different ways

that therapists approached client expectations: by outlining the process of the first and following sessions (20%), by outlining only the process of the first session (61%), or not at all (18%). When therapists did not manage clients' expectations, they simply did not elaborate on how the therapeutic process develops. Rather, they immediately asked clients to start talking about their problems. Ekberg et al. report that in such cases, interactional trouble could occur when clients were not familiar with the psychotherapeutic process, as in cases of "clients displaying uncertainty about how to respond to their therapist's first assessment questions" (ibid.: 566). In contrast, such interactional trouble rarely occurred when therapists managed the clients' expectations, whether they outlined only the first or also subsequent sessions. Ekberg et al. (2014: 566) conclude that this type of management "is a clear way for therapists to enhance the likelihood that clients will engage in the therapeutic process from its outset." They argue that it "may help to make both therapists and clients accountable to the process they have agreed to follow" (ibid.: 566). Ekberg et al. thus made clear what the benefits of managing clients' expectations in online CBT are.

Finally, Ekberg et al. (2016: 310) delved deeper into the interaction by focusing on "how therapists design references to clients' emotional experiences." They uncovered two specific ways in which therapists orient to clients' emotional experiences. First, they do so by commiserating with clients. This was already established in the 2013 article discussed above: therapists explicitly referenced the negative emotional impact of the information that the clients had delivered, and

then they immediately elicited further information. Second, therapists oriented to clients' emotional experiences with affective inferences. In such cases, the clients deliver their troubles tellings without mentioning the emotional impact the troubles have. Through affective inferences, which according to Ekberg et al. (2016: 316) often start with "That/it sounds..." phrases, therapists make the emotional impact of the clients' troubles explicit. Such affective inferences include "a mental state formulation ... that is marked as an inference through the inclusion of an evidential verb" (ibid.: 316). In this way, therapists can display their understanding of the clients' emotional experiences without taking away the clients' epistemic rights to those emotions. Just as with commiserations, affective inferences are often followed by further questions that are task-oriented. Ekberg et al.'s work provides empirical evidence that CBT therapists working online can readily deal with the emotional side of therapy. Further, Ekberg et al. also show how counselors include multiple activities in one turn or post as a way to take advantage of the affordances of the medium of instant messaging to efficiently conduct CBT.

My review of these publications reveals the overall development of research on online counseling and psychotherapy. Early research into this particular social practice resembles first-wave research on CMC. Researchers focused on the 'new' practice of online counseling and psychotherapy by comparing it to its traditional counterparts. While the focus was not on the language of online counseling or psychotherapy per se, many studies still aimed to find differences between counseling

and psychotherapy delivered face-to-face or online. A second step in the evolution of online counseling research came when researchers started to compare different types of online counseling, such as email and chat counseling. The focus was still on the medial aspects of online counseling, but no longer on a comparison with face-to-face practices. In the past few years, however, a further step has been taken by researchers with respect to two specific issues: on the one hand, researchers have increasingly taken the psychological approach that the counselors and therapists utilize into account. This is itself a clear shift towards a more user-centered rather than medium-centered type of research. On the other hand, there is a clearer emphasis on studying online counseling and psychotherapy as social practices. Within such social practices, attention is being given to specific speech activities, such as formulations and elicitations. It seems, then, that research on online counseling and psychotherapy is catching up with not just the second or even third wave of CMC research identified by Androutsopoulos (2006), but also with previous research on face-to-face counseling and psychotherapy that has provided us with a rich picture of what transpires in face-to-face counseling and psychotherapy. Nevertheless, in research on online counseling and psychotherapy, this picture is still very fragmented, and more research clearly needs to be conducted. To address these issues, I provide a holistic approach to online counseling that analyzes entire email counseling exchanges.

## **2.4 The Research Niche**

### **2.4.1 Interpersonal Pragmatics and the Therapeutic Alliance in Online Counseling**

I have provided an overview of my theoretical framework (Section 2.1 on interpersonal pragmatics) as well as previous research that focuses on interpersonal-pragmatic aspects in CMC (Section 2.2) and (mental) health discourse (Section 2.3). I want to briefly draw together some strands from these sections to clearly outline the research niche I aim to fill with my study.

To begin with, I introduced interpersonal pragmatics overall and provided a detailed description of relational work and identity construction in particular. I have outlined how relational work and identity construction can be linked to explain linguistic patterns that occur in interactions. I further provided an overview of how the individual notions of relational work and identity construction, and in some cases other aspects of interpersonal pragmatics overall, have been researched so far in a CMC and health context. I have demonstrated that some studies have also aimed to explain the link between relational work and identity construction (see e.g. Bolander 2013; Locher 2006; Rudolf von Rohr 2018). I still concur with Locher (2008: 533); further empirical evidence needs to be provided to explicitly demonstrate this link between relational work and identity construction. I aim to add to previous research in order to contribute to the theoretical underpinnings of interpersonal pragmatics in general.

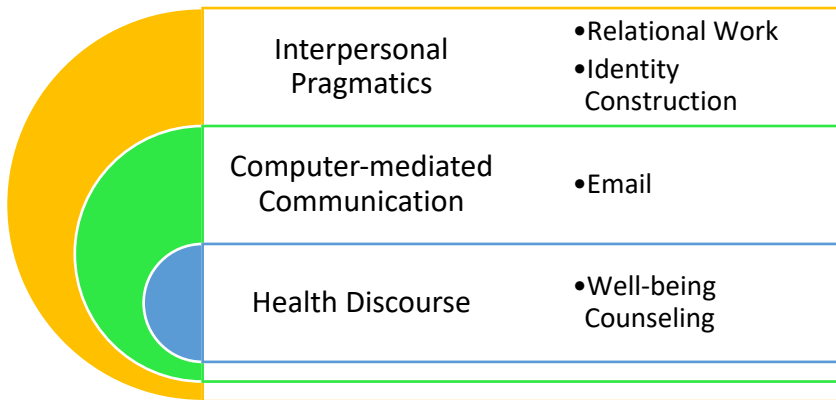


Figure 2.5 The interface of the three research fields revisited

In addition, my review of research on CMC (and email communication) has shown that excellent work has been done to understand various aspects of this research field since its inception in the early 1980s. My overview has made clear that the analysis of online social practices is a fruitful endeavor. My analysis of email counseling exchanges adds to this research with an examination of a previously under-researched social practice in a mental health context taking place online, i.e., email counseling.

I also aim to answer recent calls for a third wave of CMC research. Georgakopoulou and Spilioti (2016) advocated for self-reflexive and ethically-minded research that provides solutions rather than simply presenting current ethical problems. I have carefully devised ethical guidelines for my study with respect to several issues: how I contacted counseling interactants to ask whether they would agree to take part in my study; how the anonymization of the data was conducted; how I have stored the data and presented it in workshops, data



sessions or presentations at conferences; and finally how I could provide the participants who have unselfishly let me study their very personal exchanges with my results so that they benefit from the study. I outline all of these aspects in detail in Chapters 3 and 4 in order not only to be transparent about my research, but also to provide future researchers with possible ideas on how to conduct ethically-minded research on sensitive online data.

Finally, I aim to contribute to previous research on online counseling and psycho-therapy. My goal is twofold. First, my overview has highlighted that much research on online counseling practices still needs to be conducted. I want to complement the valuable research that has been undertaken so far with an examination of online counseling from a holistic perspective. Such a study has to my knowledge not been produced yet. My interpersonal-pragmatic analysis, which combines a content and a discourse analysis, suits this goal well. Additionally, my analysis of relational strategies can also complement previous research that has mainly focused on empathy in a counseling or psychotherapeutic context. My focus on a range of strategies will provide further insight into the strategies used to create the therapeutic alliance. Second, I aim to make my results available to practitioners. I clearly see this as my responsibility when conducting research on counseling and psychotherapy. I believe that my findings are useful for practitioners as I describe the work they invest in counseling. I have already started to work with counselors in workshops and presentations that have led to productive discussions about the examined exchanges and how linguistics

could help counselors to better understand how they negotiate the therapeutic alliance.

### **2.4.2 The Research Questions**

I have proposed the following overarching research questions in the introduction to my study. I reiterate them here. To fulfill the goals I have presented above, I aim to answer them through a combination of a systematic content and discourse analysis (see Chapter 4 on methodology):

- What are the medium and situation characteristics of email counseling?
- What types of themes are discussed?
- What types and patterns of discursive moves can be found?
- What types of relational work come up and how are they employed?
- What types of identities are constructed, and how?
- Are there links between discursive moves, relational work and identities?

In order to answer these overarching questions, I have devised sub-questions that are answered in individual chapters of my study. These can be found in the introductions of each chapter. In my conclusion in Chapter 11, I will draw the strands from the individual chapters together and show how they answer these overarching questions.

## **Chapter 3 The Characteristics of the Email Counseling Data**

The data consist of five email counseling exchanges written in English and were obtained from a counseling service of a British higher education institution (henceforth BEI). Participants in the exchanges are one counselor, who works in the counseling service at BEI, and five students, who are enrolled at BEI. Each of the five exchanges is conducted between the counselor and one of the five clients and consists of ten to twelve messages. In these messages, the clients and the counselor talk about the clients' troubles and work collaboratively to improve the clients' well-being. Topics range from relationship troubles to depression, anxiety, self-esteem and sexuality. In this chapter, I provide a detailed description of the email counseling conducted in the exchanges. In addition to facilitating the later discussion of results, this chapter will answer the first research question outlined in Chapter 2:

- What are the medium and situation characteristics of email counseling?

Answering this research question will allow me to characterize the social practice of email counseling in detail. This is essential in order to contrast the practice with other practices and to highlight salient features that might influence interpersonal aspects of the language used. Section 3.1 sheds light on my data collection process. In Section 3.2, I discuss the data from a counseling perspective in order to shed light on its embeddedness in the counseling service of BEI and provide some information on the therapeutic approaches the counselor utilizes. Sec-

tion 3.3 is written from a computer-mediated communication perspective: I elaborate on the medium of email and I explain the differences between the two types of exchanges that are present in my corpus. I focus on the participants in Section 3.4 to familiarize the reader with each interactant. Section 3.5 contains a summary of the findings I present in this chapter.

### **3.1 Data Collection**

Collecting data to study email counseling involves several hurdles. To begin with, counseling exchanges are usually private and one-on-one interactions. People other than the two interactants that participate in the counseling do not normally have access to such interactions. Second, counseling exchanges are of a sensitive nature, as they deal with clients' personal troubles. Third, online counseling deals with specific problems concerning ethical and legal issues as it is a relatively new practice (e.g. what software is best used to safeguard the confidentiality of the exchanges; where, in what form, and for how long do online counseling exchanges need to be safely stored, etc.). Conducting research on online counseling naturally provokes further ethical and legal considerations (such as the anonymization process of the exchanges, how researchers store the data safely, etc.). In the next section (Section 3.1.1), I review how the three research fields (linguistics, CMC, and mental health) approach ethics and the ethical practice of research. In the following section (Section 3.1.2), I explain how I applied the insights from Section 3.1.1. to the development of specific measures to

collect, analyze, and store the data, as well as to publish results from my study in an ethical way. I present these measures to answer the call for transparency in Bolander and Locher (2014: 18): “Crucially, the reader of scholarly output should be made aware of the decisions that the researcher took with respect to ethical decisions.” In addition, I hope to provide other researchers with ideas how email counseling exchanges can be studied in an ethically mindful way.

### **3.1.1 Ethics in the Research Interface: A Brief Literature Review**

Researchers from all three research fields I touch upon in my study have discussed ethical considerations in research. Focusing on sociolinguistic research, Johnstone (2000: 41-51) introduces five ethical considerations: (1) informed consent; (2) anonymization of data; (3) “debriefing”, i.e., researchers should “[tell] research participants ... what [their] results were” (ibid.: 48); (4) the observer’s paradox, i.e., “people sometimes talk differently if they know their talk is being recorded” (ibid.: 40); and (5) the inclusion of participants in the research, i.e., whether research should simply be “on the researched”, “not only on but also for subjects”, or be “on, for, and with the researched” (ibid.: 49-50). She concludes that:

The best we can do in planning sociolinguistic research (as in any other endeavor) is to think conscientiously about issues such as the ones raised [above] and decide in advance how we will deal with them. (Johnstone 2000: 55)

The Association of Internet Researchers (AOIR) provide guidelines (Markham et al. 2012) for ethically-minded research on online data. AOIR is a body of researchers from a wide variety of theoretical and methodological backgrounds working on or with online data. With a clear focus on online research, Markham et al. (2012) aim to facilitate researchers' decision-making with regards to ethics. They list six aspects to consider: (1) the vulnerability of the subjects, i.e., the more vulnerable the subjects, the more careful researchers need to be; (2) minimization of harm; (3) remembering that the research is dealing with human subjects; (4) the balance of possible benefits for the researched versus the rights of subjects; (5) the need to deal with ethical issues in all stages of the research; and (6) ethical decision-making as a "deliberative process" (ibid.: 5). These guidelines add two important points to the considerations that Johnstone (2000) proposed. First, the nature of locally displaced interaction on the Internet can lead researchers to forget that they are dealing with real people. Second, Markham et al. (2012) highlight how important it is for ethical considerations to guide research and be deliberated throughout the entire research process and not simply during data collection. Mondada (2014: 181) goes into more detail when she argues that "ethical concerns do not stop with recordings, as they also involve the way in which recorded data are transcribed, described by meta-data, and anonymized, the way in which they are archived, made accessible, circulated and disseminated... ." Sveningsson (2004, 2008) and McKee and Porter (2009) have further advocated that it is a necessity to ask for informed consent when the

online data is private, the content is sensitive and the interactants might be vulnerable.

The American Psychological Association (APA 2010) and the British Association of Counseling and Psychotherapy (BACP 2018) have proposed the guidelines listed in Table 3.1 to support practicing counselors, psychologists, and psychotherapists. In my opinion, these guidelines can also be consulted when doing research, regardless of the discipline of the researcher.

*Table 3.1 Ethical guidelines of the APA and the BACP*

<b>American Psychological Association*</b>	<b>British Association for Counseling and Psychotherapy<sup>+</sup></b>
Beneficence and non-maleficence (Principle A)	Beneficence Non-maleficence
Fidelity and responsibility (Principle B)	Being trustworthy
Integrity (Principle C)	
Justice (Principle D)	Justice
Respect for people’s rights and dignity (Principle E)	Autonomy
	Self-respect

\* Ordered as listed in the APA ethical guidelines

<sup>+</sup> Ordered to most accurately correspond with the APA ethical guidelines on the left

Both the APA and the BACP list points that the previously cited authors have mentioned as well, such as beneficence and non-maleficence and a respect for people’s rights and dignity. Additionally, both the APA and the BACP foreground the counselor’s identity and actions. For example, the counselor should behave in a trustworthy, principled, and just way. I argue that researchers should also adhere to these principles,

and to do so myself, I have taken the measures that I present in the following section.

### **3.1.2 The Process of Finding, Collecting, Storing and Publishing the Data**

During an exploratory search for online counseling in a UK context, I developed specific criteria that the counselors and counseling services needed to fulfill to be contacted. These were guided through specific ethical considerations from my point of view, but also through finding certain qualifications that online counselors regularly listed on their websites. The Association for Counselling and Therapy Online (ACTO) provide a search engine on their website to find counselors working online (<https://acto-org.uk/seeking-a-therapist/>). Each counselor has an individual subpage on which specific points are listed: credentials, qualifications, areas of expertise, and types of online counseling they offer. Hence, I selected individual counselors listed on the ACTO website who fulfilled the following criteria: (1) accreditation at a professional association, such as the British Association for Counselling and Psychotherapy (BACP) or the UK Council for Psychotherapy (UKCP 2019); (2) documented training in online counseling; and (3) work experience in online counseling.

After my exploratory search for online counselors and counseling services, I contacted around 30 counselors practicing independently and 20 counseling services of higher education institutions in the UK. In an initial message, I outlined my research and my ethical



considerations, and indicated how the exchanges would be analyzed and published. I invited the contacted individuals and services to ask any further questions they might have (the outline of the research project that was sent to counselors and counseling services can be found in Appendix A). While most counselors and services were highly interested in the study and particularly the findings, only two counseling services agreed to participate. Reasons given for declining participation were ethical and legal uncertainty about sharing counseling content and a lack of time (e.g. to anonymize the exchanges before sending them to me, which I will further elaborate on below). Two services responded positively to my inquiry whether they would like to participate. Due to staff changes and budget cuts, one of the counseling services withdrew their participation before being able to share any exchanges. The institution that finally agreed to participate is a counseling service of a British higher education institution (BEI). One senior counselor agreed to provide examples of email counseling. Before sending any data, she contacted the institution's record management office to gain consent from the institution to share exchanges.

The next step consisted in contacting some of the counselor's clients to inquire whether they would be willing to share their exchanges. The counselor contacted several clients to ask for informed consent. I did not contact any clients myself to protect the clients' confidentiality and anonymity. Additionally, after careful deliberation with the counselor, we believed that the clients' autonomy to freely choose whether they would like to participate would be greater if they were contacted

by the counselor, a person they have come to trust during the counseling. The counselor explicitly stated in her inquiry that declining participation would not affect any future counselling they might have at BEI. Since the counselor did not have any face-to-face contact with the clients either, she gained informed consent via email. The counselor sent along a letter I had written. In this letter, I identified myself as a researcher at the University of Basel and explained my research. I explained that I would publish linguistic examples from the data, but that all information would be anonymized (the letter of intent can be found in Appendix A). The counselor only contacted clients who had completed their counseling sessions. In other words, we gained retrospective informed consent, meaning that the counseling was genuine and took place without any involvement on my part. In addition to the benefit of my being able to do research on naturally occurring counseling, this also prevented the observer's paradox (see e.g. Johnstone 2000). Apart from limiting the clients to students (BEI staff can also attend counseling at the service), I did not stipulate any specific requirements about the type of clients the counselor should contact.

Once clients consented to share their exchanges, the counselor anonymized all the texts. Any type of identification marker, such as names (for ease of reading, I have given the clients pseudonyms), places, years of study, course names, and sometimes dates or names of illnesses clients or their relatives suffered from, were deleted. Clients were presented with these anonymized exchanges and could further delete passages that they did not want to share (although none of the

clients opted to delete further passages). In this way, I aimed to include the participants in the anonymization process of the data collection (see Mondada 2014 for an explanation on emic perspective of data anonymization). Finally, the counselor copied the email exchanges into a word document in order to not share any of the information that was contained in the email software (such as email-addresses). After these steps, the counselor sent the exchanges to me in individual word documents, attached to an email. Three of the exchanges were each in a word document that was password-protected. The counselor sent the password in an additional email.

A check before the analysis confirmed that there was no revealing information left in the exchanges. All five exchanges have been stored on a password-protected computer throughout the research process. As I presented some results at research conferences, research colloquia, as well as workshops, some linguistic examples were shown on presentation slides at these events. However, no data, for example in the form of handouts, was handed out to participants of public events. In workshops, where participants needed a handout with text passages to work with, these handouts were collected immediately after the workshops and were safely disposed of.

Finally, I have been publishing results of my research in several publications (Rudolf von Rohr et al. 2019; Thurnherr 2017; Thurnherr et al. 2016). These publications contain linguistic examples from the exchanges. Further, I have given a workshop at BEI and at other institutions for counselors who work online to be able to benefit from my

research. I aim to continue publishing results and conducting workshops to maximize the benefits to practitioners (and indirectly to clients). While these benefits do not specifically help the five clients who so generously shared the data, my hope is that the research presented here as well as elsewhere will help practitioners overall. In any of the past and possible future publications, the linguistic examples are and will be anonymized and will contain pseudonyms only.

### **3.2 The Data and its Embeddedness in its Institutional Context**

The email counseling exchanges I study were conducted at the counseling service of BEI. In other words, they are embedded in an institutional context at BEI. Further, the counselor practices counseling from a specific therapeutic background. I elaborate on these institutional aspects of the counseling exchanges because they explain certain linguistic choices. For example, the counseling service offers short-term therapy, which limits the number of exchanges a counselor can have with a client. This necessarily influences the language (see Chapter 10, for example, on the closure process). In addition, certain therapeutic approaches promote specific practices, such as a focus on the clients' positive qualities in solution-focused therapy. As a result, the counselor's linguistic choices reflect this focus on the positive aspects of the clients' experiences. Section 3.2.1 describes the counseling service and Section 3.2.2 explains the therapeutic approaches the counselor employs.

### **3.2.1 The Counseling Service at BEI**

The counseling service is an official facility of the BEI. Both off- and online, this is recognizable for potential clients in several ways. In an offline context, for example, the service is located within buildings of the university campus and its services are advertised on noticeboards in BEI university buildings. In an online context, the service has its own web presence on the university website, a Twitter account, and a Facebook page. On all three platforms, the service is clearly embedded as an official service of the university through explicit mention of this fact, but also through more implicit signals. For example, the website is clearly aligned with the university through its URL, as it contains the university's web address. Further, all three platforms contain official logos of the university and have the same style (such as font, color and other style features) as the university website. This embeddedness within the realm of the university is important as it signals the official capacity of the service. Sillence and Briggs (2015: 472) highlight how important "the branding of the site" is to establish trust and signal expertise online. The branding of the counseling service clearly aims to establish its affiliation and therefore credibility as a legitimate service of BEI.

Each individual counselor of the service is presented off- and online. Offline, a board in the lobby of the counseling service depicts all team members by name and photograph. The location of the board within the counseling service building serves as an important factor in establishing the credibility of individual counselors. Face-to-face

counseling takes place in offices that are located in the same building. Online, the service's intranet lists the individual counselors, their credentials (such as professional qualifications and accreditation) and their areas of expertise. This establishes the credibility of the individual counselors. While I will not analyze the counseling service's website due to ensuring the confidentiality of the service and the participants, it is essential to point out that the relationship between client and counselor starts before any emails are exchanged. Students are likely to encounter the service off- and online. The relationship between the counselor and the clients begins as soon as the clients visit the website or the counseling service. The embeddedness of a counselor's work in a credible and trustworthy counseling and health service at a university can help to establish a trusting tone for the following interaction (for more see Rudolf von Rohr et al. 2019).

The service offers counseling for a range of topics that focus on general well-being, such as relationship troubles, bereavement and depression, but also for troubles that are focused more on finances, exam anxiety, peer pressure and so on. Counseling is offered in a variety of ways: workshops for a range of topics, group meetings that offer guided peer-to-peer exchanges for specific troubles such as self-management, or an in-house library that contains a variety of information and self-help sources. Finally, the service provides individual counseling for students who would like to have one-on-one sessions with a professional counselor. These one-on-one sessions are provided in diverse formats: face-to-face or online via email, instant messaging or Skype. Clients

can freely choose the format. However, counselors reserve their right to suggest another format if they believe it would be more beneficial to a client's well-being. Before counseling begins, clients need to fill out a questionnaire on the website so that the service has some information and can decide whether they can help the clients with their specific problems. All of these services are free of charge for students that are officially enrolled at BEI.

One-on-one counseling is offered as short-term therapy<sup>6</sup>. In other words, counseling usually consists of three to six sessions. In an email counseling context, this practice is adhered to as well. One session consists of two emails, one by the client and one by the counselor (for more details see Section 3.3). The short-term therapy in email counseling consists of a maximum of twelve emails. There is no minimum. If clients feel they have received enough support in one session, it is their prerogative to not schedule additional sessions. On the other hand, counselors are under a certain amount of pressure to wrap up counseling within twelve emails. Within short-term therapy, various types of therapeutic approaches can be utilized. I elaborate on the effect of the counselor's approaches on my data in the next section.

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<sup>6</sup> Despite the fact that the data are counseling exchanges, I use the technical term short-term therapy. Both the service as well as the individual counselor participating in the exchanges refer to their approach in this way.

### **3.2.2 The Counselor's Therapeutic Approaches**

According to her profile on the counseling service website, the counselor in my data utilizes a humanistic-existential approach and practices solution-focused brief therapy (SFBT) and cognitive behavioral therapy (CBT). According to Comer (2010: 69), the humanistic-existential approach entails that people are “more than the sum of [their] psychological conflicts, learned behaviors, or cognitions.” It promotes a holistic view of human nature and advocates that people “pursue philosophical goals such as self-awareness, strong values, a sense of meaning in life, and freedom of choice” (ibid: 69). Comer (2010: 69, emphasis removed) stresses that humanists believe in the constructiveness and goodness of humans, and that they “are driven to self-actualize – that is, to fulfill this potential for goodness and growth.” According to Comer (2010: 69), the existential approach postulates that through “accurate awareness of themselves” and through living “authentic [and] meaningful” lives, people are well adjusted and can master internal and external conflicts. Overall, proponents of the humanistic-existential model of psychotherapy pay special attention to “the question of life’s meaning” (ibid.: 69).

The humanistic-existential approach influences specific aspects of the counselor’s work. For example, a clear focus in this model is finding a client’s strengths and weaknesses. In other words, the clients and their attributes are more important than their symptoms. This means that the focus within a counseling session is not on the problem, but rather on finding solutions or highlighting the clients’ strengths.



Further, in humanistic-existential counseling, the lay person and the counselor are both assigned specific roles. Comer (2010: 84) mentions that the lay person of the interaction is labelled “client” rather than “patient”, which avoids the traditional ‘sick-person’ aspect of being a patient and balances out the power aspect between the two interactants. According to Comer (2010: 84), the counselor is an “observer” who reflects on the clients’ input or a “collaborator” working with the client. This further strengthens the client’s position as an equally important member of the therapeutic alliance. These roles influence the interaction that takes place in counseling. For example, the counselor uses relational strategies that encourage clients to actively participate in the interaction. This is explored throughout the chapters in Part III.

The counselor practices solution-focused brief therapy (SFBT), which subscribes to many of the humanistic-existential views on human nature. As Kim (2008: 107) explains: “[It] is a strengths-based intervention that is founded in the belief that clients have the knowledge and solutions to solve their problems.” He adds the following on the interactive pattern between client and counselor:

Collaboration and co-construction of answers are important components of the change process used by the practitioner. Solutions are changes in perceptions and interactions, which are not to be solved by the practitioner but rather co-constructed with the client. ... The active role of the practitioner is to ask questions to help the client look at the situation from a different perspective and to use solution-focused techniques to look for clues where

the solution is already occurring in the client's life. (Kim 2008: 107-108)

Gingerich and Wabeke (2001: 34) refer to this solution-focused aspect of SFBT as a "dominance of solution talk" and the relative absence of "problem talk." Gingerich and Wabeke (2001: 34-35) stress that this focus on solutions enhances clients' self-efficacy, which refers to "the belief that one can master and perform needed behaviors whenever necessary" (Comer 2010: 67). The foregrounding of solutions rather than problems is reminiscent of the humanistic-existentialist model.

According to DeShazer and Berg (1997: 123), some characteristics of SFBT are the use of scaling questions and the provision of compliments. Scaling questions are used to ask about such issues as general well-being or current improvements concerning a specific issue (Iveson 2002: 151). Clients are asked to rate their well-being or their improvement. Scaling questions occur in several of the exchanges in my corpus. They are discussed in more detail in Chapter 10 in terms of the closure process of the counseling exchanges. Gingerich and Wabeke (2001: 36) explain that SFBT counselors use compliments to "provide an opportunity for the [counselor] to support and 'cooperate' with the client's change efforts." The counselor thereby takes on the role of encourager of progress and compliments the client's active role in their improvement to better mental health (this aspect is discussed in more detail in Chapters 7 to 10).

The second therapeutic approach the counselor employs is cognitive behavioral therapy (CBT). The main goal of this therapy is to

challenge dysfunctional or unhelpful thoughts that can result in negative emotions or harmful behavior (Comer 2010). Calkins et al. (2016: 5) explain that “[CBT] is designed to build a set of skills that increase awareness of thoughts and behaviors and help [clients] understand how thoughts and behaviors influence emotion.” Calkins et al. (2016: 5) add that “CBT uses a collaborative process in which the [counselor] and [client] work together to problem-solve” and that “the [counselor] teaches the appropriate skills to address the clinical problem and then the [client] works to apply these skills more generally outside of [the] session.” Calkins et al. thus emphasize the importance of collaborative work in CBT.

As I mentioned at the beginning of this section, the counselor claims to use these approaches within her counseling work. My analysis revealed that some linguistic choices can, in fact, be explained through the humanistic-existential approach as well as SFBT and CBT. In the analysis chapters of Part II and Part III, I will show how the counselor’s therapeutic background is manifested in her linguistic choices. After this counseling perspective on the data, I provide a detailed description of the exchanges from a CMC perspective in the next section.

### **3.3 Email**

In a nutshell, the data consist of five naturally occurring email counseling threads – a thread being defined here as “a series of chained e-mail exchanges between a counselor and a client over an extended timeframe” (Harris et al. 2012: 25). Email counseling consists of a

client and a counselor exchanging therapeutic content via email. In the case of the email counseling studied here, the client and the counselor never meet face-to-face. Each thread is written by a dyad of one client and the counselor. Each of the 5 threads in my corpus consists of ten to twelve emails, resulting in a total of 57 emails (approximately 52,000 words). Since there are two different types of email counseling in my corpus (some threads contain the content of the counseling in the body of the email, whereas in others a word document is utilized for the content), I will refrain from calling individual contributions of interactants ‘emails’. Rather, I call them ‘entries’. Hence, my corpus consists of five threads, each thread consists of ten to twelve entries, resulting in 57 entries in total.

I mentioned in Chapter 2 that researchers have aimed to provide classification schemes that help researchers describe the online social practices they study. Herring’s (2007) classification scheme facilitates a description of email counseling very well, because it allows me to describe the practice in detail and to differentiate it from other practices. Additionally, some characteristics, such as the asynchronous nature of the medium, influence the interaction between a client and the counselor in specific ways. The classification can therefore serve to find explanations for specific patterns of linguistic occurrences within the data. Herring establishes medium and situation factors. In Section 3.3.1, I will highlight salient medium factors of email counseling, but I will not discuss all of the medium factors Herring lists in detail. Section 3.3.2 explains the differences between the two types of exchanges, i.e., the

differences between the exchanges in which the counseling content is conducted in the body of the email and the ones in which the content of the counseling is written in a separate word file. The situation factors are discussed in Section 3.4 when I introduce the reader to the participants in my study.

### **3.3.1 Medium Factors**

Herring (2007) established the ten medium factors shown in the second column in Table 3.2. In the third column of Table 3.2, the corresponding medium characteristics of email counseling are listed. In the table, medium factors are listed in the order that was presented in Herring (2007). I will highlight which medium factor I discuss through naming it specifically and by providing the medium factor numbers that are listed in the left column in Table 3.2.

To begin with, the email counseling practiced at the service of BEI is private (M7) but not anonymous (M6). While other practices that are conducted via email, such as list-serves or discussion-boards, can be more public, the interaction in the email exchanges analyzed here are conducted between one client and one counselor. Since clients need to verify that they are enrolled students at BEI and are, therefore, eligible for the counseling, clients are required to provide their official email address of the BEI. This results in the interaction not being anonymous. While both of these medium factors are relevant in describing the practice, they are also salient in establishing trust and credibility between

both participants. They actively contribute to the establishment of the therapeutic alliance.

*Table 3.2 Medium factors (amended from Herring 2007) in email counseling*

<b>Me- dium fac- tor #</b>	<b>Herring's (2007) factors</b>	<b>Email counseling</b>
M1	Synchronicity	Asynchronous
M2	Message transmiss- ion	One-way (message by message)
M3	Persistence of tran- script	Endless (until interactant deletes thread)
M4	Size of message buffer	Limitless
M5	Channels of com- munication	Text-based, possibility to attach/include visuals, audio, etc.
M6	Anonymous mes- saging	Not anonymous
M7	Private messaging	Private
M8	Filtering	Possible, but not practiced
M9	Quoting	Possible in email, superfluous in word document
M10	Message format	Reverse chronological order in email, in- termittent chronological order in word document

Further, the email counseling exchanges are asynchronous (M1). Interactants are “not require[d] [to] be logged on at the same time to send and receive messages” (Herring 2007: N/A). However, the interactants do schedule a deadline for when the client needs to send a new entry. The counselor then responds within 48 hours of having received the new entry. This is specifically agreed upon by the clients and the counselor. The asynchronous nature of email counseling poses several inter-  
actional challenges that the participants need to manage. This is the

case, for example, in how the counseling process is brought to an end over several entries (see Chapter 10). However, there are also beneficial aspects of the asynchronous nature of email counseling. Email counseling allows interactants to review their entries before sending them. In addition, writers can read up on older entries. In this way, all the previous information is available to them when they compose their current response (see below for my discussion of the persistence of the transcript as well). This means that interactants can draft a response more carefully. The counselor indicates within one client's thread that she does revise if she feels the necessity. She adds in the interview, though, that she tries to answer the clients' entries spontaneously, as she is under a certain amount of time pressure to finish her entry. The revision of entries could be analyzed through complementary offline ethnographic observation of the interactants (see e.g. Androutsopoulos 2008). However, from an ethical (and even practical) point of view, this is rather difficult to achieve when analyzing email counseling, especially in the case of clients.

Further, interactants do not see when the other interactant is "composing a message until it is sent and received" (Herring 2007: N/A) as the transmission is message-by-message, i.e., one way (M2). This contrasts with other mediums such as chat in which interactants are able to see at least turn by turn transmission. In addition, email is text-based (M5) in the sense that the majority of the content is usually in textual form. Email also allows participants to add attachments (such as pictures, videos, audio, etc.) in other channels. This is not routinely

done in the exchanges studied here. However, I cannot say why participants do not make use of such possibilities. The counselor adds a number of hyperlinks to other material, which creates intertextuality. Often, these hyperlinks refer clients to further sources of information, such as self-help websites, YouTube videos, or book recommendations on Amazon.co.uk. For example, the counselor provides a client, Mel, with a hyperlink where she can find examples of affirmations. As the counselor asked Mel to write down some personal affirmations, the link to the website is meant as a source for inspiration. Example (3.1) shows the counselor's use of the hyperlink:

(3.1) Counselor (Thread: Mel; Entry 6)

*If you were to write a mantra or affirmation Mel, what would it be? These might help you to find one that fits your life:*  
<http://www.getselfhelp.co.uk/affirmations.htm>

The website mentioned in the example is a source that Mel can use to actively participate in the therapeutic alliance. It allows her to present her personal affirmations in the exchanges. The counselor also makes use of email attachments. She attaches handouts on specific topics, such as exam anxiety, which the clients are urged to use as material to work with outside of the sessions. Such instances of intertextuality in email communication (Schnurr 2013: 46) serve not only to provide clients with further information and additional sources, but also to encourage their active reflection and confrontation with their problems and their involvement in the therapeutic alliance.



The three factors I have just mentioned – the medium is asynchronous, one-way, and text-based – clearly distinguishes email counseling from previously studied online counseling, such as chat counseling (see e.g. Jager and Stommel 2017; Stommel 2012; Stommel and te Molder 2015) or video counseling (see e.g. Simpson and Morrow 2010).

The persistence of the transcript (M3) is not limited in email counseling. Looking at the medium of email, Herring (2007: N/A) observes that “email is persistent by default, remaining in users’ mail queues or files until deleted by the users”. While some email programs (I do not know the type of email program the interactants employ) delete messages after a certain amount of time, many programs do not delete messages automatically. In the threads that use the word document, interactants need to save the document to make changes in it. This means that interactants need to manually delete the document if they want to erase it from their hard drive. This is in stark contrast to traditional face-to-face counseling or possibly also chat counseling, which are both more ephemeral in comparison to email counseling. The persistence of the transcript allows clients to consult the exact words that they and the counselor produced. This makes progress much more visible since clients have a written record of it.

Moreover, while filtering (M8) is technically possible, none of the interactants seem to have filtered out an entire entry. As clients specifically solicit counseling, filtering out answers is not expected. Further, the counselor is obligated by best practice guidelines to respond to

the client (Green 2010). Still, it needs to be said that any interactant has the option to not respond to specific text passages within an entry. This rarely happens on the counselor's side, as the counselor usually provides feedback on all text passages the clients write. Clients, in contrast, do not respond to all of the counselor's text passages on a regular basis. But this is not an automatic technical process.

In addition, three medium factors (M4: size of message buffer; M9: quoting; M10: message format) differ to some degree depending on whether the counseling is conducted in the body of the email or in an attached word document. The size of the message buffer (M4), which refers to the number of characters the system allows in a single message, is most likely limitless in both types of email counseling, i.e., there is no word count limit in the body of the email or the word document. However, there is a tendency of word-document entries to be longer than the entries written in the body of the email. The clients write an average of 563 words in the entries in which the content of the counseling is written in the body of the email. In comparison, the clients write an average of 836 words in the word-document entries. The counselor writes an average of 1,077 words in the entries that contain the counseling content in the body of the email compared to an average of 1,281 words in the word documents. There are individual differences between interactants, which I take into account in more detail when discussing the individual participants in Section 3.4. While the size of the message buffer might be limitless in both types, interactants might feel

that there is a specific length that they should adhere to in a specific type of medium (i.e., body of the email vs. word document).

Finally, quoting (M9) and message format (M10) are two medium factors that vastly differ according to whether the counseling content is in the body of the email or in a word document. For example, many email programs facilitate quoting of previous messages by providing the text of the message being replied to in the new message as a default. Copy-pasting text passages is also rather easily done. In a word document, quoting becomes superfluous, since the text remains in the word document unless one party specifically deletes it.

The message format (M10), i.e., “the order in which messages appear, what information is appended automatically to each and how it is visually presented” (Herring 2007: N/A), is different for clients who write in the body of the email versus the ones who use the word document. The newest message usually appears on top in emails, i.e., new input is added in reverse chronological order (this might differ in some email programs, but most email software adds new text in a reverse chronological order). This is not the case in the word document. Rather, text is interwoven into previous text as well as added at the bottom of the word document. I call this type of order intermittent chronological order as some text passages occur in chronological order, while others do not. This influences the interaction, because clients who write the counseling content in the body of the email might only read the newest message from the counselor. The clients who write in the word document need to manually search for the newest input from the counselor,

making it more likely that they read through text from several previous entries. I will consider this further in the next section.

To sum up, the email counseling in my corpus can be characterized as written, asynchronous, one-way, private and non-anonymous communication between a client and a counselor that aims to improve clients' overall well-being. However, I have pointed out above that some of the computer-mediated aspects I investigated differ depending on whether the counseling was conducted within the body of the email or in a word document.

### **3.3.2 The Two Types of Exchanges**

This section focuses on the different interactive patterns in the exchanges in which the content of the counseling is in the body of the email versus the exchanges in which the content is written in a password-protected word document that is attached to the email. It is relevant to discuss the differences between these two types of exchanges because they affect the unfolding interaction both on an interactional and an interpersonal level.

#### *Type One: Body of the Email*

Two of the five threads contain the content of the counseling directly in the body of the email. Figure 3.1 shows an example of how an entry sent from the counselor to a client could look like in a generic email program. For reasons of anonymity and confidentiality, I cannot show a screenshot of an email in its original form. I do not know what type

of email software the interactants use. Figure 3.1 depicts a mock example of the second entry, i.e., the first response by the counselor, in Anna's thread. Figure 3.1 shows the entire window in which this new entry could be composed.

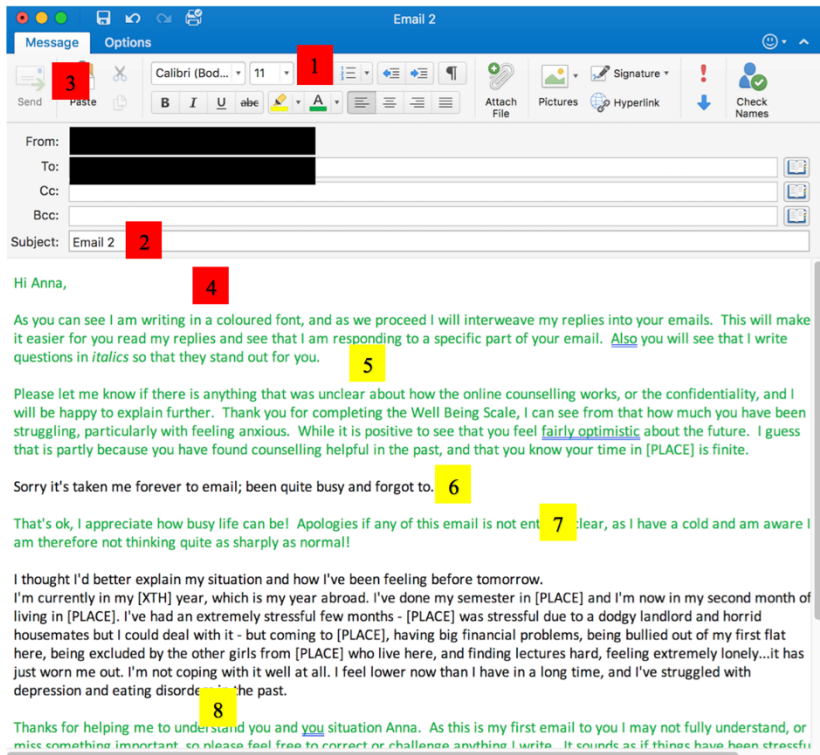


Figure 3.1 Entry 2 in a body-of-the-email thread

For ease of referencing, I have added boxes with numbers for the reader to find the specific aspect I highlight. The red boxes highlight technical aspects of the medium email and the yellow boxes indicate specific facets of the unfolding interaction. At the top of the figure, some font options are visible in the ribbon. For example, the style, the size, or the

color of the font can be chosen manually (box 1). Further, typical elements of an email message are visible, such as the email address of the sender (*From*) or receiver (*To*). These are blacked out in Figure 3.1 to highlight that this information has not been passed on to me. Additionally, the *Subject* is also visible, which serves as a header for the email (box 2). A further element of an email program is, for example, the send button (box 3). In most email programs, the majority of the window is taken up by the body of the email into which interactants write their messages, i.e., a blank space into which interactants can write text (box 4). In Figure 3.1 the run-on text in green and black color is the message that the counselor intends to send to the client.

I briefly explain some of the salient medium characteristics that are specific to this type of email counseling with the help of Figure 3.1. While the persistence of the transcript (Herring 2007: N/A) is not limited, the message format influences the way in which these messages are stored, and possibly read as a result. Email can have a reverse chronological message format, meaning that the newest message usually appears at the top of the body of the email (email programs do not consistently use a reverse chronological message format, but in many well-known programs, such as Microsoft Outlook, this is the standard message format). Interactants can simply read the message that appears on top to view the newest input from the other interactant. It is likely that the interactants do not always read through the entire thread again to reply to a new entry. The counselor even went so far in the interview to say that she “simply does not have the time to read through the entire

[thread] again” in the time she is allotted for a given session. Nevertheless, the persistence of the transcript ensures that the interactants have a written record of their entire interaction, allowing them to read through the interaction again as long as they have not deleted it from their inbox.

Further, quoting is often facilitated in email programs as the previous message or messages are automatically appearing in the body of the email when replying. This means that the text from the previous entries is in the blank space in which the interactants write. However, the counselor copy-pastes the content (but not the greetings or farewells) of the client’s previous entry into the top space in the message in order to interweave her answer within the client’s text. This is visible in Figure 3.1 as follows: the counselor starts with a greeting and makes some initial points, such as what color she uses in the specific entry (box 5). The next text block is in black and stems from the client’s first entry (box 6). The counselor has copy-pasted one of the client’s text passages into this space in order to respond to the specific topic addressed by the client in the passage. The following green text is a direct answer to the black text (box 7). This pattern is repeated throughout the counselor’s entry (box 8). It is important to note that the counselor regularly copy-pastes previous text into her messages. Clients mostly write a traditional ‘email’ in the sense of only their text appearing in the top part of the message.

While some medium factors, such as the reverse chronological order, facilitate the ease of reading of the newest entry, they impact

other aspects in a less constructive way. For example, clients do not copy-paste specific questions the counselor posed in the previous entry into their new entry. As a result, it can be difficult for the counselor to know which questions clients intend to answer. The counselor needs to carefully consider the context in such cases. Further, the counselor presents the clients with step-by-step guides to specific coping techniques. These guides contain direct questions that the counselor wants the clients to answer. However, these are often not answered in this type of email counseling.

*Type Two: Word Document*

The exchanges in which the content of the counseling is written in an attached and password-protected word document differ in very specific ways from the interaction discussed above. It is important to note that one and the same word document is sent back and forth between the clients and the counselor, i.e., interactants do not use a new word document every time they answer a previous entry. Instead, they add new text within the same document from the beginning until the end of the counseling process. This automatically means that copy-pasting text becomes superfluous, as all text will be persistently present within the word document unless an interactant intentionally deletes something (it is not clear whether any interactants deleted any text passages in the exchanges of my corpus, but the counselor reported that she does not usually notice any deletions in the word documents). In contrast to the previously discussed type, text does not occur in reverse chronological



order. Interactants usually do not add new text at the top of the document. However, responses to previous entries are also not simply added at the bottom of the page. Rather, interactants interweave their responses into the text where it is relevant. To highlight new text, though, most interactants use different colors for each new entry. While this is not explicitly requested by the counselor, she says that she will do so in her first entry to the clients. Most clients then follow her lead and use different colors as well.

To illustrate the interactive process more clearly, Figures 3.2 to 3.6 depict an evolution of one email counseling exchange over six entries within the word document. Figure 3.2 shows the word document for the first and the second entry. On the left side in Figure 3.2, the client's first entry is presented, in which she has described her initial problem in a brown font. On the right side in Figure 3.2, the counselor's response is shown. Notably, the brown text from the client is still present. The counselor added her response in green in chronological order, i.e., after the brown text.

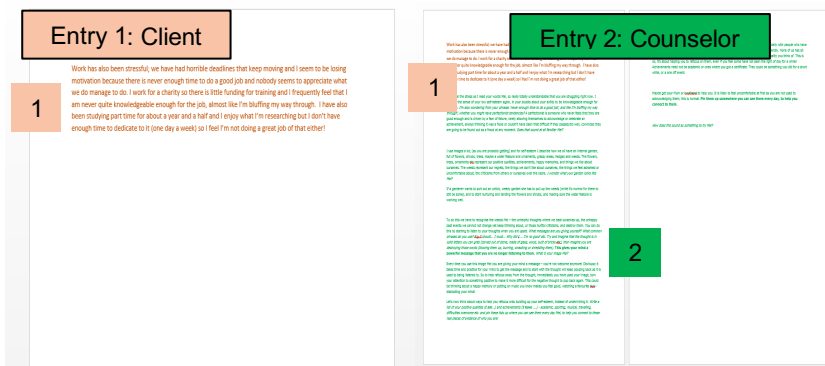


Figure 3.2 Entries 1 and 2 in a word-document thread

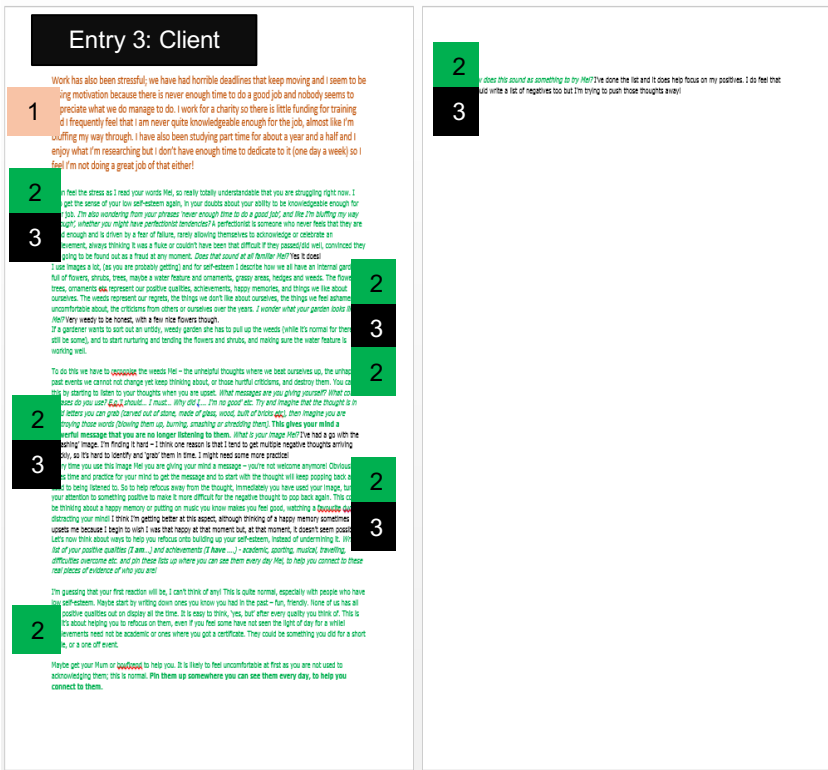


Figure 3.3 Entry 3 in a word-document thread

Figure 3.3 shows the client’s next response, i.e., entry 3. The brown and green text passages are still present. The client adds her new input in a black font. Instead of adding all her new text after the counselor’s input, i.e., the green text, the client interweaves her answers directly where it is relevant. This results in black text occurring in between green text. I have called this intermittent chronological order, because text passages of entry 3 (black text) occur after text passages of entry 2 (green text).

However, some green text (from entry 2) appears to follow black text (from entry 3).

**Entry 4: Counselor**

Work has also been stressful, we have had horrible deadlines that keep moving and I seem to be  
**1** motivation because there is never enough time to do a good job and nobody seems to  
 appreciate what we do manage to do. I work for a charity so there is little funding for training  
 frequently feel that I am never quite knowledgeable enough for the job, almost like I'm  
 walking my way through. I have also been studying part time for about a year and a half and I  
 enjoy what I'm researching but I don't have enough time to dedicate to it (one day a week) so I  
 feel I'm not doing a great job of that either!

I can feel the stress as I read your words too, so really totally understandable that you are struggling right now  
 also get the sense of your low self-esteem again. In your doubts about your ability to be knowledgeable enough  
 your job. It's also wondering from your phrases being enough time to do a good job and like "the studying you  
 through", whether you might have perfectionist tendencies? A perfectionist is someone who never feels that the  
 good enough and is driven by a fear of failure, never allowing themselves to acknowledge or celebrate an  
 achievement, always thinking it was a fluke or couldn't have been that difficult if they passed/well, convince  
 are going to be found out as a fraud at any moment. Once that point of an familiar tho! Yes it does. So I'm  
 being the pressure of the perfectionist thought and resistance then to more realistic expectations  
**2** start to praise yourself for things achieved, however small you give them to be!

Images list, (so you are probably getting) and self-esteem I describe how we all have an internal set  
 flowers, shrubs, trees, make a water feature and ornaments, grasses, hedges and weeds. The flowers,  
 ornaments etc represent our positive qualities, achievements, happy memories, and things we like about  
**3** us. The weeds represent our negative, the things we don't like about ourselves, the things we feel ashamed or  
 embarrassed about, the criticisms from others or ourselves over the years. I wonder what your garden looks like  
**4** very needs to be worked, with a few nice flowers though. It's great to hear you are able to see some nice  
 things amongst the weeds! Keep on focusing on nurturing, [opportunities](#), and acknowledging your  
 strengths, and pulling up your weeds.

the counselor wants to sort out an entity, weeds garden she has to pull up the weeds (which is normal for them to  
 some), and to start nurturing and tending the flowers and shrubs, and making sure the water feature is  
 working well.

To do this we have to [opposite](#) the weeds! -ie - the unhelpful thoughts where we beat ourselves up, the unhelpful  
 past events we cannot not change we keep thinking about, or those hurtful criticisms, and destroy them. You do  
 this by starting to listen to your thoughts when you are upset, what message are you giving yourself? What  
 phrases do you use? [I must, I must, I must... why did I... I'm no good etc.](#) Try and imagine that the thought is  
 a solid object you can grab, (come out of skin, made of glass, wood, built of bricks etc), then imagine you are  
 destroying those events (chewing them up, burning, smashing or shredding them). This gives you either a  
 powerful message that you are no longer listening to them. What is your image? The had to go with  
 'smashing' image. The thing is here is that one reason is that I need to get multiple negative thoughts into  
 a picture, so it's hard to identify and 'grab' them in time. I might need some more practices. Yes, or another way  
 might help, is that when you feel low, to use an image that represents feeling strong, calm, happy, happy or  
 confident to focus on. What might this be? Look after: What is she wearing, what is she doing, what  
 expression does she have etc?

Every time you use this image that you are giving your mind a message - you're not welcome anymore. Obvious  
 the end and practice for your mind to get the message and to start with the thoughts will keep coming back at it  
**2** being listened to. So to help refocus away from the thought, immediately you have used your image, turn  
 attention to something positive to make it more difficult for the negative thought to pop back again. This could  
 bring about a happy memory or picture or music you know makes you feel good, watching a favorite audiobook  
 your mind! I think I'm getting better at this aspect, although thinking of a happy memory sometimes  
**3** because I begin to wish I was back there at that moment but, at that moment, it doesn't seem possible.  
 remembered me that the one thing we can affect is the past! The past, it done and can't be changed  
 so we can change our perception of it, and the future is an unknown, while the present is ours to  
 do as we wish! We can choose what to do with the present, whether to dwell on the past and connect  
 to our unhappy feelings, or focus on what will help our future be better.  
**4** easier to say than do! While I can hear how you are getting better at stilling your focus and  
 being where to direct your thoughts!

Let's now think about ways to help you refocus onto building up your self-esteem, instead of undermining it. Write a  
 list of your positive qualities (I am... and achievements (I have...), a hobby, cooking, music, traveling,  
 difficult situations etc, and in these lists or where you can see them every day. Help to help you connect to these  
 real pieces of evidence of who you are!

I'm guessing that your first reaction will be, I can't think of any! This is quite normal, especially with people who have  
 low self-esteem. Maybe start by writing down ones you know you had in the past - fun, friendly, kind of us has all  
 our positive qualities out on display at the time. It's easy to think, 'well, after all even quality you think of.' This is  
 ok, it's about helping you to refocus on them, even if you feel some have not seen the light of day for a while!  
 Achievements need not be academic or ones where you got a certificate. They could be something you did for a short  
 while, or a one-off event.

Maybe get your Mum or somebody to help you. It is likely to feel uncomfortable at first as you are not used to  
 acknowledging them, this is normal. Pin them then somewhere you can see them every day, to help you  
 connect to them.

Now does this sound as something to try? Well I've done the list and it does help focus on my positives. I do feel  
 I could write a list of negatives too but I'm trying to push those thoughts away! You might also find it helps  
 Me, at the end of the day to write a list of three things you have achieved or when well that day. It's  
 just a minute or so and can include reading someone for coffee, or writing part of an assignment, or  
 finishing one! Get a pretty notebook just for this and see the lists growing. It will help you to focus on  
 end of the day on what you have done, enjoyed, and not on what you think you haven't done!

Figure 3.4 Entry 4 in a word-document thread

The counselor's response is shown in Figure 3.4 and is in a blue font. Strikingly, the counselor responds to all text passages that were written by the client in a black font (entry 3). This is visible because any text that was written in a black font (entry 3) is answered with a text passage in a blue font (entry 4). This is important to note as posting an answer to all input from the previous entry ensures to clients that the counselor has seen and read all of the clients' input.

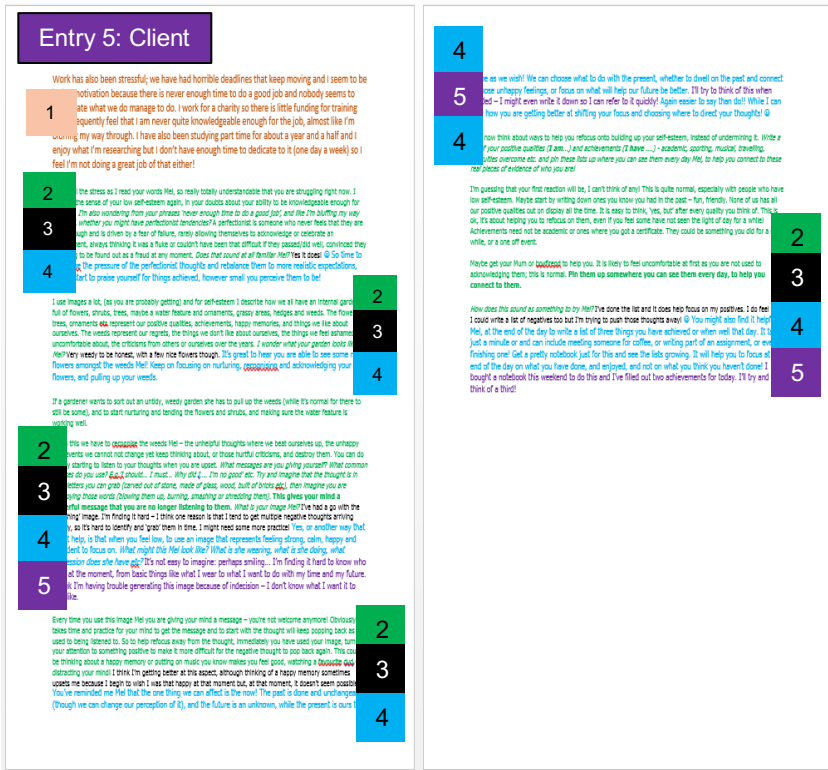


Figure 3.5 Entry 5 in a word-document thread

Figure 3.5 shows the client's response in entry 5. It further highlights the asymmetrical aspect with regards to interactional obligations and rights. The client does not answer all of the counselor's input from the immediately preceding entry 4. Rather, the client only responds to the last three of the five text passages written by the counselor. This is visible in Figure 3.5 as the first two text blocks do not contain a violet-colored response after the blue text. This shows that clients have the interactional right not to respond to every input from the counselor.



document. Figures 3.2 to 3.6 show that the document can become rather 'busy' in the sense of having a complicated organizational structure.

The interwoven structure of the document complicates the reading process for the interactants in comparison with the email counseling in which the content is written in the body of the email. In a sense, text is added neither in a chronological nor in a reverse chronological order. Instead, I have called this interactive pattern *intermittent chronological*. Interactants have to actively search for the newest text passages according to the newest color. Due to the persistence of the transcript, this also means that interactants might be much more likely to read through text passages of previous entries and therefore see their potential progress in a much more concrete way. In other words, they might be continuously confronted with their progress due to the fact that they have to read through previous text to find the newest input. The characterizations of both types of email counseling have thus highlighted a few differences and their effects. In the next section, I will look more closely at the situation factors of email counseling and will introduce the reader to the counselor and the clients.

### **3.4 Participants**

Herring's (2007) second type of factors in her classification scheme are situation factors. Table 3.3 lists these situation factors in the second column. In the right-hand column, their specific idiosyncrasies for email counseling are highlighted. I will review and discuss salient factors. Some are specific to individual interactants, and I will elaborate

on them in Section 3.4.1 when talking about the counselor and Section 3.4.2 that introduces the five clients. I will refer to the situation factors listed in Table 3.3 in these sections as well. It is, nonetheless, important to first establish certain situational characteristics of email counseling in general. In my discussion, I will refer to the specific factor by mentioning its name and by providing the factor number listed in the left-hand column in Table 3.3.

*Table 3.3 Situation factors (amended from Herring 2007) in email counseling*

<b>Situation factor</b>	<b>Herring's factors (2007)</b>	<b>Email counseling</b>
S1	Participation structure	<ul style="list-style-type: none"> <li>- one-to-one</li> <li>- private</li> <li>- not anonymous</li> <li>- variance between amount, rate, and balance of participation</li> </ul>
S2	Participant characteristics	<ul style="list-style-type: none"> <li>- demographics: counselor and students at BEI</li> <li>- proficiency: possibly high</li> <li>- experience: varies between participants</li> <li>- role/status: client and counselor</li> </ul>
S3	Purpose	<ul style="list-style-type: none"> <li>- counseling: improvement of clients' well-being</li> </ul>
S4	Topic	<ul style="list-style-type: none"> <li>- well-being</li> </ul>
S5	Tone	<ul style="list-style-type: none"> <li>- varies, but more serious</li> <li>- varies, but more formal</li> <li>- friendly</li> <li>- cooperative (mostly)</li> </ul>
S6	Activity	<ul style="list-style-type: none"> <li>- therapeutic exchange: problem-solving and solution-focused</li> </ul>
S7	Norms	<ul style="list-style-type: none"> <li>- partly established through frame of counseling, CMC norms need to be established at times</li> </ul>
S8	Code	<ul style="list-style-type: none"> <li>- English</li> <li>- font: varies (variation is on purpose)</li> </ul>

To begin with, part of the participation structure (S1) is given through the format of email counseling: it is one-on-one and private

communication. It is also not anonymous, because clients need to verify that they study at BEI. Moreover, the fact that the counseling service is located at BEI establishes that the clients are students, possibly very proficient with email interactions and well-educated, giving us some indications of participant characteristics (S2) of the clients. The professional set-up of the counseling service further provides us with some of the counselor's characteristics, such as being a professionally trained counselor. The roles are – in general terms – established as client and counselor, and therefore at the beginning of the interaction as advice-seeker and advice-giver. However, the interactants position themselves in various ways, and a range of identities are constructed. I discuss these identities in detail in Part II and especially in Part III.

Several of the situation factors are clearly linked to the counseling activity (S6) of the interaction. I have provided a brief introduction to the therapeutic approaches the counselor utilizes above. I have also discussed how these approaches might influence linguistic choices. Furthermore, the purpose (S3) of the interaction is the improvement of the clients' mental well-being by talking about problems and solutions, while the topic (S4) depends on whatever troubles the clients struggle with. Because the interactants are dealing with serious issues, the tone (S5) is mostly serious, but also friendly. However, there is variation in the formality of the clients' language. For example, one client – Taylor – uses less formal language in her thread.

There are some situation factors that need to be established during the interaction, since participants are likely not familiar with email



counseling. This can be seen in how interactants establish norms (S7). For example, it can be observed in the exchanges that interactants negotiate the way in which they greet each other in the word-document exchanges. The counselor greets the clients in the word documents, and clients take up this practice with time. The dialogic and conversational nature of the content might facilitate the use of such greetings. Nevertheless, from an interactional perspective it is unusual because the email to which the word document is attached most likely already contains a greeting and a farewell from the interactants. The greeting within the word document is therefore a duplication. However, this duplication might also reflect the interactant's awareness that the other interactant possibly reads the content of the word document without paying much attention to the message within the body of the email. The content of the word document might also be read at a different time than the message in the body of the email. Overall, some norms are established during the interaction, while others might be given due to the format of counseling (such as being able to ask questions, and receiving feedback from a counselor).

Finally, since the counseling takes place at BEI (albeit in BEI's virtual space), certain characteristics of "code" (S8) are given. For example, the interaction is carried out in English. Additionally, other aspects of this factor, such as font, become tools that are used to facilitate the interaction. I have briefly touched upon this above when highlighting the counselor's use of different colors of font for specific effects. She uses colored font to distinguish her input in each new entry from

the previous text. In the body-of-the-email exchanges, it is often the color green. In the word-document exchanges, she chooses a new color in each new entry. She further uses italics to highlight questions that she would like clients to answer, signaling clearly where the client is expected to respond. And finally, albeit rather infrequently, she uses bold font when she wants to highlight a specific text passage. The counselor references the choice of color and the italicized questions in her first entry in each thread. Here is an example of this reference taken from Anna's thread:

(3.2) Counselor (Thread: Anna; Entry 2)

As you can see I am writing in a coloured font, and as we proceed I will interweave my replies into your emails. This will make it easier for you read my replies and see that I am responding to a specific part of your email. Also you will see that I write questions in italics so that they stand out for you.

This introductory paragraph explains the use of these font affordances. As a result, they do not need to be recognized or negotiated over time. The fact that they are of an organizational nature, i.e., they facilitate the interaction from an organizational point of view, might explain their explicit explanation. In none of the word documents, for example, does the counselor inform clients that she will greet them each time within the document. Such explicit mentioning of interpersonal aspects of the interaction seems less appropriate than mentioning technical or organizational aspects. It is notable, however, that the counselor does not prescribe clients to follow suit with the same practice. She does not tell

clients that they have to use a different color of font as well, for example. She leaves it up to the clients whether they want to take up this practice.

The counselor further utilizes emoticons. As Dresner and Herring (2010) have shown in their study of emoticons, these can be used for a variety of interpersonal effects. In the counselor's entries, they can signal positive emotions or mitigate a face-threatening question (some instances of this are explored in Chapters 7 to 9).

Not all of the participants utilize such affordances to the same degree. It is thus important to look at each individual participant in more detail. In the next section, I will first look at the counselor before highlighting several features of the interaction for each individual thread.

### **3.4.1 The Counselor**

My discussion of the counselor focuses on her characteristics as a participant in terms of her professional identity. Counselors are encouraged to avoid revealing personal information as a matter of professional conduct (Green 2010: 8). The counselor in my corpus holds a Master's degree in counseling. She has been working as a counselor for fifteen years, and she completed her training as an online counselor three years prior to the time of data collection. Since completing her online counseling training, she has regularly worked as an online counselor and as an online supervisor for other counselors working online. Further, she is a senior accredited member of the British Association of Counselling and Psychotherapy (BACP) and is a member of the Association for

Counseling and Therapy Online (ACTO). While it might be obvious that the counselor is a qualified professional and is proficient in the activity of counseling, it is important to highlight that her training and experience in online counseling makes her an experienced and proficient **online** counselor. This is especially relevant in comparison to her clients, who are most likely relatively new to online counseling. This becomes apparent, for example, in the counselor's persistent use of greetings within both types of exchanges, whereas clients in the word-document exchanges gradually take up this practice. The counselor's persistent use of greetings, even within the word documents, reflects her experience and knowledge of how to create a positive "emotional space" for her clients (Green 2010: 8). The counselor does not reveal any personal information, and the content of the threads focuses on the clients' experiences, behaviors and emotions.

### **3.4.2 The Clients and their Individual Threads**

In this section, I will present an overview of each individual client and their thread. To begin with, I will give a brief summary of the topics that are raised in the individual threads. These topical summaries are kept brief on purpose, as I highlight the content of the exchanges in Part II. In a second step, I will briefly discuss the structure of the individual threads, i.e., who contributes how much in each entry. In a third step, I discuss how the interactants use technical affordances within their threads. These overviews of individual threads serve to complement the overall picture of email counseling I presented above. I will not provide

any demographical summaries of the interactants in order to safeguard the clients' anonymity<sup>7</sup>.

### *Anna*

Anna's thread is one of two threads in which the content of the counseling was written in the body of the emails. Anna, a student at BEI, is momentarily on placement elsewhere (meaning that she is studying or fulfilling an internship at a different institution for at least one term and is therefore away from her usual surroundings). She struggles with her new surroundings and the absence of her friends or people in general to talk to. As the content of her thread further reveals, she also suffers from stress and anxiety, especially in connection to her life as a student (e.g. anxiety about upcoming exams).

Figure 3.7 shows the number of sessions Anna and the counselor conduct, and how many words each interactant contributed in each session. While Anna and the counselor hold three sessions overall (equaling six entries), they exchange twelve entries in total. This is because Anna and the counselor exchange six more entries in which they negotiate the date for next sessions (these are labeled 'organizational' in Figure 3.7). While the content of these entries focuses on this specific task, the interactants at times include brief inputs of the client's current well-being.

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<sup>7</sup> I do not have extensive demographical information of the clients as this is not apparent from the interaction, and, for ethical reasons, I did not ask for any such information in the interview or in any other communication with the counselor.

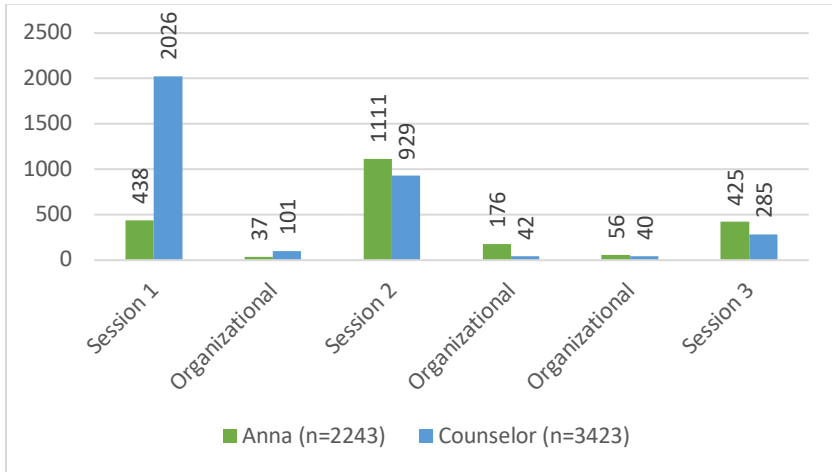


Figure 3.7 Number of words used in individual sessions in Anna's thread

Anna and the counselor conduct the lowest number of sessions out of all five clients. Anna uses 2,243 words overall; however, 269 are written in the organizational entries. The counselor uses 3,423 words overall (183 are used in the organizational entries). In both cases, the copy-pasted text passages were not counted. Anna contributes extensively in the second session ( $n=1,111$ ). The counselor adds the most in the first session, but also contributes extensively in the second one. Both interactants post less text in the last session, which mainly functions as a final report on progress as Anna has overcome many of her troubles by that time.

Both Anna and the counselor greet each other and use a goodbye formula at the beginning and end of each entry respectively. Anna uses the copy-paste function in the second session, i.e., she copy-pastes certain questions the counselor formulated into her own entry and replies

to these questions directly. In contrast to the counselor, she does not necessarily copy-paste entire paragraphs or sentences. Example (3.3) shows the copy-pasted text passage in purple and Anna's answer in black.

- (3.3) Anna (Thread: Anna; Entry 6)  
taking a minute or two at the end of each day to write down three things that were good about the day  
Thanks for reminding me of this! I used to do this all the time when I was doing CBT. It made me feel calmer before going to sleep. Also what you said about associations makes a lot of sense to me.

Only the concrete suggestion the counselor made in the previous entry is copy-pasted. In her other entries, Anna does not use the copy-paste function, nor does she insert any hyperlinks or other media. Anna also does not choose to respond in any colored font, though I do not know whether this option might not be available to her depending on the specific email software she employs. She uses one emoticon (“☺”) in the entire thread, but does not utilize any other technical affordances that might be available to her. Overall, the interaction between Anna and the counselor can be summarized as brief in terms of number of sessions, but as progressing rapidly with regards to Anna's improved well-being.

### *Ellie*

Like Anna's thread, Ellie's contains the content of the counseling in the body of the emails. Ellie is momentarily away from university (in a

geographical sense), as she visits her family during term break. The text reveals that her mother is ill and needs to be cared for by her family, so that the family members struggle with responsibilities and their emotional reaction to their mother's (or wife's) illness. As Ellie is the only family member who is at times away due to her studies at university (which is in a different location than the family home), being at home during term break means that Ellie has to get used to this environment again.

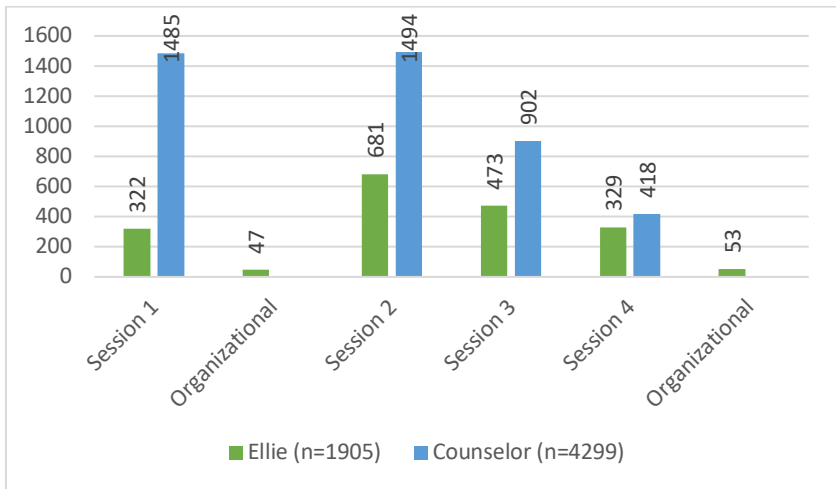


Figure 3.8 Number of words used in individual sessions in Ellie's thread

The number of sessions and how many words are used by Ellie and the counselor within these sessions are visible in Figure 3.8. Ellie and the counselor conduct four sessions (eight entries). This thread contains ten entries overall, though, as Ellie sends two entries that do not contain any counseling content, and are therefore labeled as organizational in Figure 3.8. In the first organizational entry, Ellie informs the counselor



when she can send back her next reply. The final entry from Ellie (the organizational entry on the very right in Figure 3.8) contains Ellie's consent that her exchanges can be used in the present study. The counselor did not respond to these two organizational entries.

Ellie uses 1,805 words in all four sessions (as well as 100 words in her organizational entries). The counselor further contributes 4,299 words in her responses. Anna's entry in the second session is the longest with 681 words. This is similar to the pattern in Anna's thread, as Anna also contributed the largest number of words in the second session. Ellie's other three entries in sessions 1, 3 and 4 are similar in length and run between 320 and 470 words. The counselor uses roughly 1,500 words each in session 1 and 2, thereby providing extensive input in both sessions. The input decreases continuously in session 3 and 4. Overall, it is noteworthy that the counselor uses more words than Ellie in all sessions.

Ellie and the counselor greet each other and say goodbye through formulaic phrases in the entries. Ellie does not use the copy-paste function, colored font, emoticons, or any other technical affordances, but we do not know whether such affordances would have been available to her. One striking point is that Ellie sends her first entry via her iPhone, as indicated at the bottom of her message (*sent via my iPhone*). It highlights the fact that in the type of email counseling in which the content of the counseling is in the body of the email, clients can easily send (and read) counseling messages from other devices than a computer. This is of course salient for several reasons. On the one hand, it raises

confidentiality questions with regards to whether email programs on phones or other devices have enough security measures. On the other hand, it means that clients can potentially access counseling content from any place, e.g. while on a bus or while in a restaurant. This poses the question whether it is possibly harmful for clients to receive counseling messages in such places. Altogether, Ellie's thread resembles Anna's in some ways related to the fact that they both conducted the content of the counseling in the body of the email.

### *Chris*

Chris and the counselor use a word document to send the content of the counseling back and forth. The thread reveals that Chris is struggling with three things when he first contacts the counseling service: depression, anxiety, and sexuality. Early in the thread, it becomes clear that Chris' main interest lies in finding coping techniques for his depression and anxiety. While Chris partly attributes his anxiety to his sexuality, he does not seem to be focused on discussing it at the time of writing. Rather, he and the counselor work on finding ways to cope with the anxiety in order to lead a less stressful and more balanced life. As Chris' anxiety is linked to low self-esteem, the counselor provides him with coping techniques to combat this issue in particular.

Chris' thread contains five sessions, as shown in Figure 3.9. The organizational aspect of when to send a new entry is handled in the emails to which the word document is attached. Overall, Chris contributes 4,078 words to the sessions, while the counselor posts 5,492 words.

While the interactants in the previously described exchanges contributed roughly 2,000 (clients) and 4,000 (counselor) words, both Chris and the counselor use more words in Chris' thread. This is true for both Mel's and Taylor's threads as well, who also worked with the word document rather than writing the content of the counseling within the body of the email (see below). Chris contributed 636 words in his first entry, before posting more input in session 2 (n=1,249) and session 3 (n=1,341). Session 4 and session 5 are briefer. The counselor contributes the most in session 1 (n=2,620), with her input decreasing towards the end of the thread.

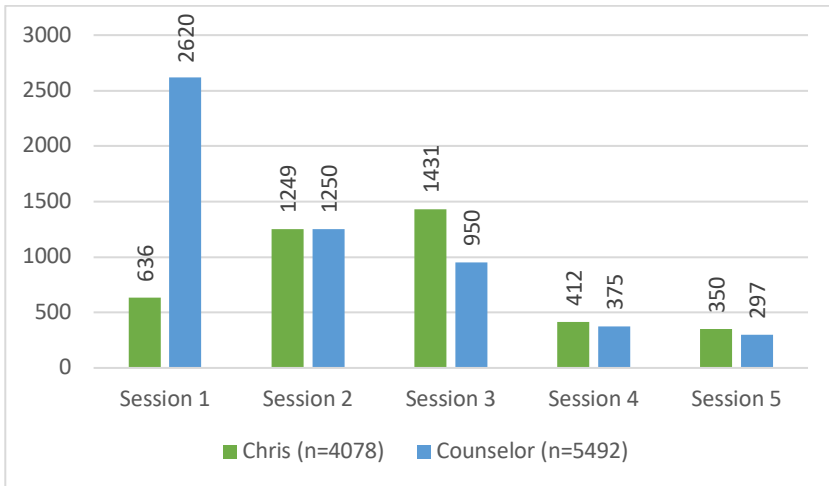


Figure 3.9 Number of words used in individual sessions in Chris' thread

I have highlighted above how certain aspects of the dialogic interaction need to be established within the word document, such as greetings and farewells. This is clearly visible in Chris' thread, in which the counselor posts a greeting and a farewell in the word document for each new

entry, but Chris does so only sporadically. In one entry, Chris greets the counselor before explaining that he uses bullet points to link previous text passages with new ones added at the bottom of the document. He further uses a date stamp to indicate where he started to add new text in sessions 4 and 5. He posts a farewell in the last session only (*Many thanks, Chris*). Chris' use of greetings and farewells seems to focus more on signaling interactional or organizational aspects than interpersonal ones. Chris further utilizes other technical affordances to structure his entries. For example, in his first entry, Chris uses headers for the three types of troubles he wants to talk about, as shown in example (3.4) for anxiety.

(3.4) Chris (Thread: Chris; Entry 1)

Anxiety

I currently suffer from anxiety, which seems to be getting worse. I constantly over analyse my close friendships and wonder whether my friends actually like me, or whether they are just putting on a front (I know with certainty that my friends genuinely like me and I highly value my friendships, but this mindset seems impossible to shake).

Chris also posts such headers when he introduces new content at the bottom of the word document (e.g. *Update:*). He employs bullet points, as mentioned above, and indicates with short organizational phrases to which previous text the current one is linked (*Point 3*). Also, Chris distinguishes his newest entry from previous text by choosing a different color of font, despite not being instructed by the counselor to do so. All in all, Chris' thread contains an average number of sessions and he and

the counselor often contribute in similar length per session (an exception is session 1). They also use medium affordances in similar ways.

### *Mel*

As becomes clear from the text in Mel's thread, Mel contacts the counseling service because of her struggles with depression, her anxiety over confrontations with others, including her boyfriend, and the emotional repercussions of her own health problems and her mother's newly diagnosed illness. She further describes her struggles at work and past problems in her relationship with her stepfather. The counselor tries to bundle some of the problems that Mel presents and suggests some common causes, such as low self-esteem. She supports Mel by providing her with coping techniques that aim to decrease Mel's anxiety and increase her self-esteem. From entry 7 (occurring in session 4) onwards, Mel and the counselor mostly discuss Mel's relationship with her boyfriend. Mel reports in the thread that she and her boyfriend had a heated argument immediately before Mel writes entry 7. Dealing with the ramifications of the argument becomes the central focus of the later interaction. The counselor suggests various ways to deal with the situation and Mel reports back in each entry.

Looking at the number of words overall and in each entry reveals specific patterns in Mel's thread (see Figure 3.10). Overall, Mel writes 5,919 words in total. The counselor contributes 7,916 words. As they use the word document, no copy-pasting of previous text is necessary. Mel's first entry is roughly 1,500 words and her second entry 1,400

words. While she writes a longer entry in session 4 again ( $n=1,118$ ), the other three entries are briefer. Overall, Mel contributes the most compared with the other clients. The counselor contributes almost 3,000 words in her first entry. She continuously contributes less the longer the interaction goes on, and her final entry contains only 236 words. While the counselor contributes considerably more in sessions 1 to 3, it is Mel who writes more in the last three sessions. Especially in the very last session (session 6), Mel takes up a large part of the interaction, summarizing her progress, which the counselor praises in the last entry of the interaction.

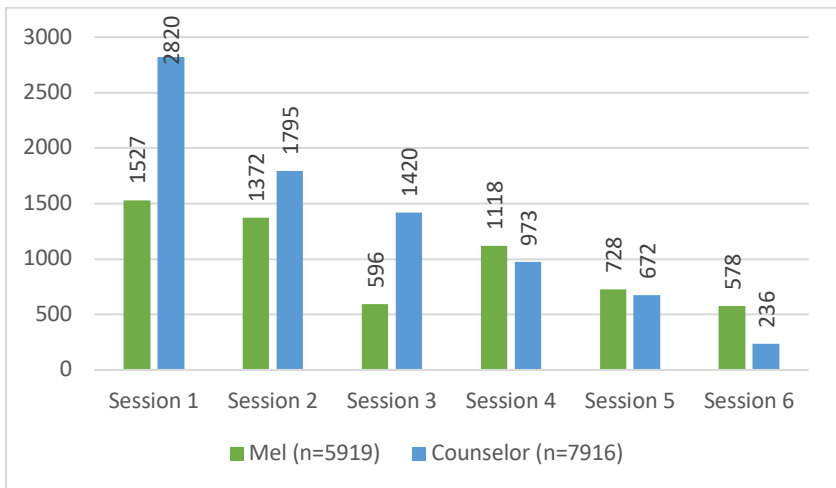


Figure 3.10 Number of words used in individual sessions in Mel's thread

With regards to technical affordances, several specific things stand out in Mel's thread. She uses different colors to mark her newest entries. She employs headers in the beginning in a similar fashion to Chris. She breaks up her initial entry into *Long-Term*, *Current Problems*, and

**Past Problems**, which are written in bold font. Mel further posts two emoticons (☺). Additionally, Mel (except for entry 1) and the counselor greet each other in every entry. In fact, posting a greeting and mentioning what color is used becomes a ritual in Mel's thread. Figure 3.11 shows how this is negotiated in the document.

28 Feb 2014 Light grey Hmm, how about blue!

21 Feb 2014 Garish pink! I'll go for purple then! ☺

14 Feb 2014

Hi Counselor, I've written in red this time (the shade seems to vary – not sure why!)

Best wishes,

Mel

Hi Mel,

Red is a very apt colour for today!

13 January 2014

Hi Counselor, I've written in purple this time. Best wishes,

Mel

Hi Mel,

This is getting very colourful!

6<sup>th</sup> January 2014

Hi Counselor,

Thank you for your help last time. I've written in black – I've answered your questions and added some text to some of the paragraphs I wrote last time. Thank you for reading.

Mel

Hi Mel,

I hope you had a good Christmas break. As you can see I'm writing in blue this time to help my response stand out for you.

*Figure 3.11 The opening sequence of Mel's thread*

In the excerpt shown in Figure 3.11, the interaction needs to be read in reverse chronological order, i.e., the newest entries are on top (as can also be seen in the timestamps that were added by the client to each session, e.g. *6<sup>th</sup> January 2014*). The negotiation of this first step in the interaction moves from saying hello in a more formal way to simply

adding the timestamp and introducing the color used in the specific entry. That is, this introduction is negotiated over time, and it reflects the growing positive therapeutic alliance between Mel and the counselor. Finally, Mel's input in Figure 3.11 also highlights the asynchronous nature of email counseling. For example, her entry for *13 January 2014* reads *Hi Counselor, I've written in purple this time. Best wishes, Mel.* In an email or a letter, one would expect the order of 'greeting' followed by 'content' and finalized by a 'farewell'. In other words, the content is book-ended by a greeting and a farewell. In Mel's case, the order becomes 'greeting', 'farewell', and 'content', i.e., the content is further down the document and appears in several places as well as after the farewell. Altogether, Mel's thread is the longest overall, and both Mel and the counselor contribute extensively and use various affordances available in the word document.

### *Taylor*

Taylor writes in her first entry that she is contacting the counselor because she feels lonely. Her first entry is rather brief, but we learn in the counselor's response that Taylor attended face-to-face counseling with a different counselor at BEI before. This other counselor referred Taylor to the present counselor because she conducts online counseling. The present counselor specifically mentions in the thread that she received a referral form from Taylor's previous counselor. From this form, the counselor knows about some problems that Taylor struggles with. In her first reply, the counselor raises several topics and asks



Taylor whether she has trouble with them. Taylor addresses further issues in entries 7 and 9. Taylor and the counselor talk about several of these issues. The counselor provides Taylor with extensive input throughout the first session (see below), but Taylor leaves many stretches of suggestions about coping techniques unanswered. The counselor does not respond in any negative way to this lack of response.

Looking at the contribution rate, one point that stands out is that Taylor only uses 62 words in her initial entry. In session 2, 4 and 5, on the other hand, she writes around a thousand words each. Entry 5 (session 3) and entry 11 (session 6) are briefer. The brief initial entry does not deter the counselor from providing an elaborate response. On the contrary, this is the counselor's longest first response ( $n=2,860$ ) in the entire corpus. As the counselor is under a certain amount of time pressure due to the short-term format of counseling offered at BEI, she might not want to waste this first session and wait until Taylor brings up further troubles. So, she raises several themes that might be problematic for Taylor. After the first response, the counselor contributes less in the following entries. As Taylor adds considerably in session 4, the counselor's response in that session is longer as well. The counselor's longer entry in session 6 (compared to Taylor's input) might stem from the fact that Taylor's troubles are not resolved by that time, but they have reached the maximum number of sessions allowed. Hence, the counselor provides Taylor with input about how to continue from this point on without her support (see Chapter 10 for more details).

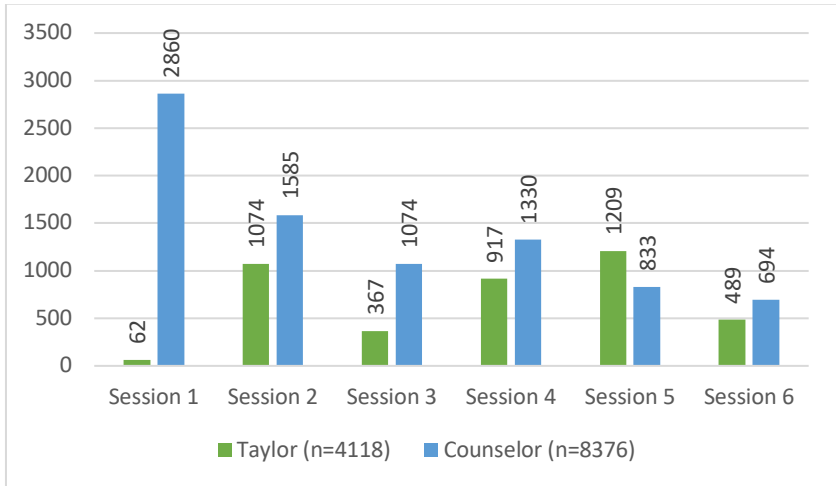


Figure 3.12 Number of words used in individual sessions in Taylor's thread

Taylor and the counselor also utilize several technical affordances. Taylor, for example, uses different colors for her answers and posts six emoticons. Twice, she adds text passages that deal with new topics at the end of the document, as Chris does, but without any overt links to previous text passages. The counselor's responses are similar to her responses to the other four clients (bold, italic, colored font, 17 emoticons, etc.). She adds hyperlinks to self-help websites and at one point provides Taylor with a list of websites on several different topics. She also attaches a power-point presentation she used in an anxiety workshop in entry 4. Additionally, Taylor and the counselor also negotiate the greeting aspect in the word document much as Mel and the counselor did. Taylor says goodbye only in entry 7 and 9 through a thank you. The counselor says goodbye in every entry. Last but not least, it is important to point out that Taylor stands out with her less formal tone

compared to the other clients, such as less formal punctuation or even a complete lack of punctuation. It is not clear why Taylor uses less formal punctuation, but it is notable in comparison to the other interactants. The counselor does not comment on the less formal use of language, but she does not accommodate with less formal language in return.

Overall, Taylor and the counselor write extensively in this thread with regards to number of words. Taylor's thread has certain particularities that distinguish it from the other threads, however. For example, the rather brief initial entry is in stark contrast to her later extensive contributions. Her use of more informal language stands out not just in comparison to the other clients, but also due to the fact that the counselor does not accommodate. In addition, Taylor does not answer long stretches of the counselor's input, which also includes questions in italics. This is noteworthy as the counselor specifically asked the clients to respond to questions written in italics.

### **3.5 Summary**

In this chapter, I have given a comprehensive description of the email counseling threads in my corpus and provided an answer to my first research question with regards to the medium and social factors of the online social practice of email counseling. First, however, I outlined the data collection process. Due to the private and sensitive nature of email counseling, gaining access to data was challenging. I discussed in detail the ethical considerations I have taken into account to collect, store and

publish on such sensitive data. In this way, I answered Bolander and Locher's (2014: 18) call for transparency with regards to decision-making in research on online social practices and hope to have provided ideas for future researchers on online counseling about how to tackle research on such sensitive data.

I proceeded to describe the data from two perspectives: a counseling and a CMC perspective. The description from a counseling perspective revealed that the exchanges can be characterized as well-being counseling that is delivered in short-term format. The analysis further revealed how email counseling is embedded within the counseling service at BEI. I have explained how the service signals its affiliation with the university offline as well as online, such as through the "branding of the site" (Sillence and Briggs 2015: 472) by using logos or the same style of font that the university website uses. This facilitates the negotiation of a trusting relationship between the clients and the counselor. I have also put the therapeutic work of the counselor in context and established that she adheres to a humanistic-existentialist approach on human nature and applies two types of therapeutic practices: solution-focused brief therapy and cognitive behavioral therapy. I have suggested ways that these types of approaches and therapies could influence the linguistic choices of the counselor. I will further discuss their influence when I present results about a variety of linguistic choices in Part II and Part III.

The description of email counseling from a CMC perspective was facilitated through Herring's (2007) classification scheme of online

sources according to medium factors. Email counseling can be described as private and non-anonymous interactions. The asynchronous interaction poses challenges but also offers benefits. The interaction is mainly text-based. Some degree of intertextuality occurs in all five threads with the use of hyperlinks. One of the most salient medium factors in email counseling is the persistence of the transcript (Herring 2007: N/A). As a result, the interactants have a record of their entire interaction. This is in stark contrast to other formats of counseling, such as face-to-face or chat counseling. From a technical point of view, the persistence of the transcript is highly salient. However, the counselor points out in the interview that due to time constraints, she does not have the opportunity to read through whole exchanges before responding to a new entry. Nevertheless, the clients could utilize the persistence of the transcript by looking through their threads a long time after the interaction took place. The revelation from the counselor with regards to the persistence of the transcript raises our awareness that simply because a medium factor might seem beneficial for a particular activity, it does not necessarily mean that this benefit is or even can be taken advantage of.

Further, I have highlighted the two types of exchanges in my corpus. Two of the five threads contain the content of the counseling in the body of the email, while three threads contain the counseling content in an attached and password-protected word document. The types can also be differentiated according to medium factors. For example, the counselor copy-pastes most text passages of the client's previous entry into

her own message and answers directly after them in the two threads that contain the content of the counseling in the body of the email. In this way, her entries are interwoven structures of the client's and her own text. Within the word document, copy-pasting becomes superfluous as new text is continuously interwoven into the entire text in the document. Further, the message format in the body-of-the-email exchanges are in reverse chronological order, whereas the word documents consist of what I have called intermittent chronological order. This results in word documents being more difficult to read, as newest entries need to be manually found. On the other hand, having to read through text from previous entries to find the text passages from the newest entry might facilitate the therapeutic process, as clients can continuously see their progress.

The second type of Herring's (2007) factors is situational. Some of these factors facilitate the characterization of email counseling overall. Some others need to be looked at in individual threads or for individual interactants. Overall, email counseling can be characterized as professional-lay interaction that is institutionalized. The roles of the clients and the counselor are clearly assigned. Nevertheless, several identities are performed, and the types of identities constructed can change drastically over time (see also later chapters in Part III). The activity of counseling can explain several of Herring's situation factors. The purpose of the interaction is to support clients in improving their well-being. The topics discussed are the clients' troubles and how they could be overcome. Finally, due to the institutionalized nature of the activity

of counseling, the tone is rather serious. Because the counseling is located at a BEI, the interaction takes place in English. While the counselor has experience with email counseling, the clients are new to it. As a result, some norms need to be established. These can be explicitly established, as when the counselor explains some features of email counseling at the beginning of each thread. Others are implicitly negotiated over time, such as whether and for what purposes greetings can be used within the word-document exchanges.

Other social factors, especially participant characteristics, were looked at in individual threads or for individual interactants. The main characteristic of the counselor's professional identity, for example, is that she is a qualified and experienced online counselor. I further explained that the counselor makes use of specific affordances, such as changes in font and the use of hyperlinks, to create intertextuality and refer clients to further sources of information and support. For the clients, it was established that they are all students at BEI and that all seek help for troubles that affect their well-being. I have deliberately abstained from going into detail about their demographic characteristics to maintain their anonymity.

With respect to their use of affordances, we can categorize the interactants according to the type of email counseling they were exposed to. Anna and Ellie, the two interactants that write the content of the counseling within the body of the email, do not make use of many medium affordances. They do not change any aspects of font and do not copy-paste previous entries within their own entries (one exception

is Anna's second entry). Chris, Mel and Taylor are the three interactants who work with the attached word document. All three make more use of medium affordances than the other two clients. They change the color of the font in each new entry, they interweave their answers directly where they are relevant, and they even use bullet points and headers within the document. One aspect that needs to be negotiated within the word document is the use of greetings and farewells. Chris only uses greetings in an organizational way to indicate where he started to add new text, whereas in Mel and Taylor's threads, the greeting (which includes mentioning which color the interactants are presently using) becomes a ritual at the beginning of every entry. This ritual can be interpreted as a bonding activity at the beginning of each entry.

Throughout this chapter and in this summary, I have highlighted how the five threads in my corpus can be characterized from a counseling perspective and a CMC perspective. While there are general characteristics of email counseling that can be highlighted, there are also various idiosyncrasies within individual threads. This needs to be kept in mind, especially in the later chapters, as individual differences between threads need to be taken into account. Nevertheless, the present chapter has presented a clear description of the medium and situation factors of the five email counseling threads in my corpus.



## **Chapter 4 Methodology: An Overview**

The literature review in Chapter 2 has revealed that language in an online health context has been addressed through a range of methodological approaches that resulted in many distinct aspects being studied for several different purposes. Many of these studies have informed the present study with respect not only to choices of topics to consider but also to the choice of the methodology that I employ. In particular, Locher's (2006) study served as a starting point for my choice to employ a combination of a linguistic and a content-based analysis of an online health practice. Bolander and Locher's (2014) article on "Doing sociolinguistic research on computer-mediated data: A review of four methodological issues" influenced several steps in my consideration of methodology as well as my execution of the steps of the analyses. In addition, Pick's (2011) call to include the practitioners' standpoint strengthened my aspiration to include the counselor's perspective. While I do not want to advocate my choice of methodology as the best to study language and health online per se (see Bolander and Locher (2014) and Jucker (2009) for discussions of finding the right methodology for specific research questions), I want to highlight throughout this chapter why I think a combination of a content- and discourse-analytic approach is especially suited to answer the research questions I have outlined at the end of Chapter 2.

In the following pages, I will highlight my overall approach before going into more detail about the individual steps, such as the content analysis or the form and function analysis of specific linguistic

expressions. Section 4.1 introduces the reader to discourse analysis and some of its salient features. In Section 4.2, I will present the four analytical steps of my methodology. This section serves as an overview and provides a rationale for the methodological steps I have chosen. The more technical aspects of the application of my methodology within each step will be further explained in the methodological sections in later chapters. As these more technical aspects of my methodology require knowledge of the preceding steps (including some results), I will not discuss these here. I will present a brief summary of my methodology in Section 4.3.

#### **4.1 Discourse Analysis**

My overall approach to examining the email counseling threads is of a discourse-analytic nature. Schiffrin et al. (2001) discuss the many different meanings discourse analysis can have. In their attempt to include as many meanings as possible, they suggest that discourse-analytic studies are “empirically grounded studies of language” (ibid.: 5) before specifying further that the “pervasive understanding of discourse analysis [is] the examination of actual (not hypothetical) text and/or talk” (ibid.: 7). The empirical examination of actual text is foregrounded in Schiffrin et al.’s discussion. Johnstone (2000: 126) gives a similarly open definition when she states that “discourse analysis is the close, systematic analysis of written texts or records of speech or signing.” She refers to the systematicity of analysis when she says that “[it] involves systematic reading and listening” (ibid.: 104), meaning that

discourse analysts should “[think] systematically ... about a variety of ... reasons ... why texts have the forms and functions they do, and not other forms and functions” (ibid.: 124). Combining Schifffrin et al.’s (2001) and Johnstone’s (2000) definitions of discourse analysis, we can say that discourse analysis is the empirical, systematic search for reasons why certain stretches of texts take a specific form and function.

I have already pointed out that Schifffrin et al. (2001) address the diversity of discourse analysis. Johnstone (2000: 123) reiterates this when she says that “there are, of course, many ways to analyze discourse.” Finally, Bolander (2013: 87) mentions that “since the analysis of what individuals do through language use is multi-faceted, researchers can focus on different dimensions of language use.” My focus lies on the interpersonal aspect of the language used in the email counseling exchanges. The discourse analysis employed in my study is, therefore, the empirical, systematic search for reasons why stretches of texts in the exchanges take a specific form and interpersonal function as the participants negotiate the therapeutic alliance. As Locher (2006) established, interpersonal aspects should always be examined in context. It is therefore necessary to determine what the exchanges are about and what the interactants try to achieve. Interpersonal-pragmatic aspects such as relational work and identity construction can then be examined in context. My analysis therefore includes the following four methodological steps (adapted from Locher and Thurnherr 2017: 18), which I will explain in more detail in the next section:

- (1) Content analysis
- (2) Discursive moves analysis

- (3) Form and function analysis of linguistic expressions in context
- (4) Widening of the scope by including a participant interview and techniques from corpus linguistics

## **4.2 The Four Methodological Steps: An Overview and Rationale**

I will briefly explain and then compare these four steps to previous research to highlight similarities and differences.

### *Content Analysis*

In a first step, I have established what interactants talk about in their exchanges. In other words, I was interested in the content of the counseling exchanges. For this reason, I have conducted a qualitative content analysis (Saldaña 2013) that consisted of coding stretches of text with labels that were developed bottom-up. This type of analysis allows me to describe the content that the interactants focus on. Not only is this relevant for my later analysis, which deals with more fine-grained aspects of the language used in these topics, but it can also be utilized from an applied perspective. As we have put it elsewhere: “Health practitioners often benefit from knowing what range of topics a collection of texts covers” (Locher and Thurnherr 2017: 19). It is, for example, salient for counselors to know that the clients in my corpus bring up and especially focus on similar issues. In addition, Locher (2006) has shown that the results of a content analysis can facilitate the search for and serve as an explanation for the occurrence of patterns of discursive

moves (see below) and linguistic expressions in context (see also below). It is feasible to assume that counselors employ relational strategies very carefully to establish a positive therapeutic alliance. The topic of discussion might partly influence the counselors' choice of relational strategies. For example, the counselor might use more mitigation when talking about a taboo topic compared to a topic that might carry less face-threatening potential. Keeping track of the overall content of an investigated text passage is therefore essential from an interpersonal-pragmatic perspective.

While I will outline my coding process for the content analysis in more detail in Chapter 5, I want to briefly foreshadow some broad steps. I have used a combination of “*elemental methods* of coding” (Miles et al. 2014: 74, emphasis in original). For the labels of the codes, I used linguistic expressions that the clients and the counselor used in the exchanges. In some cases, there was no linguistic expression within the text that easily lent itself for a label. At such times, I generated a label that seemed more appropriate and to the point than any linguistic expression in the exchanges. To generate such labels, I relied upon my knowledge of specific psychological concepts that I acquired as part of my degree in psychology. Section 5.1 in Chapter 5 includes a discussion of my coding process in more detail. Once the codes were established, I exhaustively coded the entire corpus for content. This allowed me to establish a clear descriptive framework of the content of the exchanges. It further allowed me to analyze the distribution of content within and across individual threads (I go further into this in Section 6.1).

Before moving on to the next step in my analysis, I want to briefly put this first step into context with regards to previous research. As I have mentioned, Locher's (2006) study informed the methodology of the present study. Locher also included the content as a specific level of analysis in her examination of the interpersonal dimension of an online health advice column. In Locher's case, however, the topics were system-given in the sense of being headers under which individual contributions were listed in the archive of the health advice column. It was not Locher herself who assigned the topics to individual entries, but the team of counselors behind the agony aunt Lucy who categorized problem letters that were sent in and filed them under a specific topic. To acknowledge this difference, I have chosen to refer to the different types of content that the interactants in my corpus talk about as 'themes' rather than 'topics.' Bolander (2013), who used a similar stepwise analysis of personal/diary blogs, also coded for content. While Bolander (2013: 138) used the topic tags the bloggers employed as guidance, she "devised [further] descriptive labels for the topics" in order to facilitate comparability between blogs. Locher (2006), Bolander (2013) and Rudolf von Rohr (2018) used a content analysis to describe their data in more detail and "as an explanation for differences found through later analytical steps ... such as the composition and linguistic rendition of texts" (Locher and Thurnherr 2017: 18). I aim for a similar description of my data.

*Discursive Moves Analysis*

In a second step, I have analyzed the types of discursive moves the interactants use in the email counseling exchanges. This type of analysis aims to establish the composition of a text or text type. As previously mentioned, Miller and Gergen (1998: 192) define a discursive move as “the kind of contribution that the entry made to the ongoing interchange.” Whereas the first step in my analysis was concerned with what the interactants talk about, this second step looks at the discursive moves they use to deliver the content. In other words, at this stage I am interested in finding out how the interactants talk about the themes I have found through the previous analytical step. Discursive moves include advice-giving, requests for advice, metacomments, or greetings and farewells and so on. This type of analysis is more fine-grained than the analysis of themes. Most often, several discursive moves, sometimes of distinct types, are used to discuss one theme. As with my analysis of themes, my discursive moves analysis serves more than one purpose. For one, the set of discursive moves that are found can be used to characterize the specific practice being examined. Further, the quantification of discursive moves gives us an opportunity to examine the distribution of such discursive moves within a practice. In addition, as I also look at the sequence of discursive moves, i.e., which discursive moves follow one another, I can examine the composition of the email counseling exchanges. This allows me to provide a more comprehensive picture of the specific social practice I examine, but also facilitates

a comparison to other text types that have been studied with a discursive moves analysis.

A discursive moves analysis is a time-consuming procedure that consists of several steps and revision cycles, along with reliability testing and a quantification of results. I will give an overview of the steps here, but I discuss each step in more detail in the introductory sections of Chapters 5 to 7. First, I devised a catalogue of discursive moves that occur in my corpus. This catalogue was developed bottom-up, but I consulted previous studies on discursive moves for ideas with respect to naming the discursive moves (e.g. Bolander 2013; Locher 2006; Morrow 2012; Placencia 2012; Rudolf von Rohr 2018). Second, I tested the reliability of the discursive moves through coder-agreement. Both of these points are explained in detail in Section 5.1. Once coder-agreement was achieved, I coded the corpus exhaustively. After the completion of the coding process, I analyzed the corpus for distribution and sequence patterns of discursive moves (i.e., which discursive moves regularly follow each other). Section 6.1 explains step by step how I arrived at the results of distribution and how I manually analyzed the sequence patterns. Finally, I looked at the syntactic and lexical realization of the most frequently occurring discursive moves in more detail, as well as possible sub-functions of these moves. A detailed description of the methodology can be found in Section 7.1. Each step of the discursive moves analysis always included a consideration of which theme the discursive moves occur in and whether the theme might influence the discursive move's distribution, sequence, or linguistic realization.



Comparing my methodological approach of the discursive moves analysis with others, it is necessary to highlight that each social practice consists of its own specific set of discursive moves. For example, Locher (2006) analyzed an online advice column. Naturally, discursive moves that are somehow linked to advice, such as requests for advice, advice-giving, and general information, occur in this practice. Lindholm (2010, 2017) was interested in storytelling. Naturally, one of the discursive moves in her study was labeled narrative. Bolander (2013) analyzed dis/agreements on blogs. She generated labels for such discursive moves as criticism or frustration, but also explicit agreement or disagreement. Nonetheless, I believe it is possible to compare the categories of discursive moves across social practices, as the focus still lies on how the interaction is achieved. Further, all researchers focus on specific features inherent to the particular interactions they examine. In other words, their research questions are always linked to the practice and therefore reflect how the interactants perform specific activities that are inherent to the practice itself. In my case, this focus lies on the linguistic realization of the construction of identities and the creation and negotiation of the therapeutic alliance. This focus becomes especially relevant in the consideration of those linguistic expressions that are used to perform relational work and identity construction in email counseling.

*Form and Function Analysis of Linguistic Expressions in Context*

The third step in my analysis centers around the link between the form and function of linguistic expressions. I look at these expressions through the lens of interpersonal pragmatics, or more precisely with a focus on the performance of relational work and the construction of identities. While, for example, the analysis of discursive moves already reveals some aspects of the interpersonal dimension of the exchanges (such as the fact that advice-giving moves are often preceded by assessment moves to lessen the face-threatening potential of advice), relational work and identity construction can be carried out with minute linguistic choices. Bolander (2013: 162) is very precise about the relational aspect of language use: “Interpersonal information about the ideational content can be conveyed through a single word, the altering of a font, the addition of an exclamation mark, or emoticon.” Locher also highlights the diversity through which relational work can be accomplished when she notes that there are “various forms that are used” to realize specific “relational work” (Locher 2006: 52).

Both Bolander and Locher also foreground that one form does not always correspond to the same function. In other words, one form can have one function in one context, and another function in another context. Bolander (2013: 162) mentions that “these forms can have various functions and effects depending, for example, on the linguistic context they are embedded in, the relationship entertained between the interlocutors and the interlocutors’ aims.” Locher (2006: 117) highlights an additional difficulty when she says that “the same linguistic

expression may at times have more than one relational function.” That is to say that one situated or contextualized form or linguistic expression can have several relational functions all at once. Bolander concludes that the complexity of relational work thus demands “a close analysis” which she sees as consisting of a “bottom-up qualitative ... analysis.” These issues demand, in Locher’s (2006: 115) words, “qualitative close readings.”

The bottom-up qualitative analysis through close readings in my study was conducted in specific ways. First, an initial broader reading of the entire corpus served to find instances of relational work and identity construction. This resulted in a catalogue of different types of relational work that the interactants carry out in the exchanges and a list of possible identities the interactants perform. These were also inspired by previous literature, such as the studies reviewed in Chapter 2. The initial broader readings revealed that the exchanges are so rich in relational work and acts of positioning that it would not be possible to examine the entire corpus in detail. As my focus lies especially on the collaborative work within the interaction and my aim was to find interactive patterns of relational work and identity positionings, I had to zoom in on what Locher (2015: 8) calls “crucial moments” in which “subtle negotiations of positionings” are taking place. In particular, I look at three such crucial moments in more detail in my study: (1) narratives (see Chapter 8), (2) a text block that the counselor uses in three different threads to help clients tackle low self-esteem (see Chapter 9), and (3) the closure of the counseling process (see Chapter 10). While all three

of these crucial moments were chosen for their relevance to both a health perspective and a linguistic perspective, all three are also salient from a methodological perspective.

First, narratives are pervasive within all five threads and at every stage of the counseling process. In other words, looking at narratives allowed me to look at patterns of relational work and positionings from the beginning to the end of the interaction. This is relevant as there is noticeable change in both relational work and positionings over time. While narratives can be seen as a micro-cosmos within the exchanges, they are still reflective of what occurs at a specific moment within the interaction. Narratives turned out to be an ideal location to examine how language is used not only to appeal for empathy or to construct a legitimate identity as an advice-seeker, but also to perform face-enhancing relational work, such as self-praise, when clients position themselves as active, and successful, self-helpers. This broad spectrum allowed me to track positionings and patterns of relational work at several stages within the exchanges. This contrasts with the other two foci, in which I zoom in on specific times within the exchanges.

The interaction that centers around low self-esteem is generated through text blocks that the counselor uses. To be more precise, the counselor uses the exact same (pre-written) text block in three threads. Examining the collaborative work of the counselor with each of the three clients allows for a very specific comparison of how the interaction unfolds after the same input from the counselor. For example, since the counselor uses the same text block in the three threads in a very

similar context, the relational work carried out by the counselor in those text blocks can be assumed to be very similar in all three threads. The analysis of the responses from the clients can then reveal whether they are also similar with regards to the relational work that is carried out by the clients. This type of analysis allows me to shed light on whether specific relational work in the counselor's text block elicits the same kind of relational work from three different clients in their responses.

Third, closures of the counseling process occur in each thread, i.e., each thread comes to an end at some point. This end is collaboratively negotiated. The data shows that this collaborative work includes various kinds of relational work. For example, the counselor uses specific pivots, such as inquiring whether an additional session is necessary, to introduce the closure of the counseling process. These pivots come in several different forms, and they carry out distinct functions that are all connected to the closure process within the exchanges. I have used the pivots that I found in the five threads as cornerstones to look at the interpersonal context in which they occur and to identify patterns with regards to why a specific form or function was chosen by the counselor. The fact that the collaborative work of the client and the counselor guides the choice for a specific pivot foregrounds the relevance of the therapeutic alliance.

While these three aspects are "crucial moments" (Locher 2015: 8) within the exchanges, they are certainly not the only ones. However, due to the abundance of relational work within the exchanges, I could not look at additional ones in more detail. While broadly speaking the

analysis of relational work and positionings were conducted through discourse-analytic close readings in all three chapters, I briefly discuss how I have performed the close readings in the introductions in each chapter (see Chapters 8 to 10).

In other literature focusing on interpersonal pragmatics and utilizing a similar step by step analysis of specific practices, researchers have aimed at finding all the types of relational work used and, therefore, analyzed a representative sample of the entire corpus of the specific practice (see e.g. Bolander 2013; Locher 2006). While it is, of course, of interest to find all the types of relational work used in a practice, especially in Locher's (2006) case as it served as the first comprehensive analysis of an online health practice with regards to content structure and interpersonal pragmatics, I have chosen a different approach. Based on the importance of the collaborative work within the therapeutic alliance in email (or any type of) counseling, my focus lies squarely on the interactive work. Thus, I was most interested in finding interactive patterns of relational work, or in other words, how and in what ways the interactants influence each others' relational work.

Furthermore, identity can be studied in several ways. Benwell and Stokoe (2006) give an overview of analytical methods of identity research. Studies that have been conducted from other methodological perspectives, such as conversation analysis or discursive psychology (see Benwell and Stokoe 2006: 35-39; Harvey and Koteyko 2013), have informed my study. In order to answer the research questions I have outlined in the previous chapter, I believe that a discourse-analytic

examination of identity, viewed from a social-constructionist perspective, allows me to look at the construction of identities in email counseling from a holistic perspective. In this way, my study can hopefully complement the vital work that has already been carried out by other researchers with different methodologies.

Before I go on to the fourth step (i.e., widening the scope), I want to briefly recapitulate the three methodological steps I have described so far: (1) a content analysis; (2) a discursive moves analysis; and (3) a form and function analysis. Table 4.1 gives an overview of the steps in a hierarchical order.

*Table 4.1 Methodological steps 1 to 3*

<b>Type of analysis</b>	<b>Focus of analysis</b>
Content analysis of <b>themes</b>	Types Distribution
<b>Discursive moves</b> analysis	Types Distribution Sequence Linguistic realization
<b>Form and function</b> analysis of linguistic expressions	Relational work and positionings

These three steps represent a hierarchical analysis of thematic, compositional, and interpersonal issues that are expressed in various forms and functions. The analysis is hierarchical in the sense that each new step takes the results of the previous one(s) into account. The results are therefore always used in two ways: as descriptions of the practice of email counseling, but also as a foundation for the next steps of the analysis.

*Widening the Scope: Interview and Corpus Linguistic Tools*

While the previous three steps focused on a hierarchical analysis of thematic, content, and interpersonal-pragmatic aspects which become more fine-grained with each step, the widening of the scope complements the findings with additional perspectives or tools. On the one hand, I have included the practitioner's perspective through an interview that I conducted with the counselor who provided the data. On the other hand, I have also employed techniques from corpus linguistics to gain a better understanding of the linguistic particularities of the exchanges, namely word frequency analysis and collocation and cluster analyses.

I conducted an interview with the counselor who provided the data for the present study. This follows Pick's (2011) explicit call to include the practitioner's perspective when looking at such practices as counseling or coaching from a linguistic perspective:

During the analysis, findings should be continuously discussed with ... practitioners to ensure an intersubjectively valid interpretation and to critically reflect the analyst's assumptions and experiences. ... In my opinion, the knowledge of the practitioner is a resource which has so far not been given enough attention in research on discourse. Linguists should finally acknowledge and efficiently use the resources and expertise of those who are routinely exercising linguistic activities within the researched field. (Pick 2011: 79, my translation)

I want to foreground two aspects that Pick highlights. First, she rightly states that discussions with practitioners can help analysts to see further



into the data than their own discipline might allow them and can thereby ensure a more valid interpretation. I believe this to be especially true when the practitioner is one of the interactants within the data studied. Second, Pick also recognizes that practitioners have resources and expertise that researchers, as outside observers, simply do not have. To not access these resources, i.e., the knowledge and expertise of the practitioners, seems contradictory to linguists' desire to comprehend complex and intricately nuanced practices. I therefore wholeheartedly agree with Pick's call to include the practitioner perspective in research.

I interviewed the counselor who provided the data for my study for around an hour and fifteen minutes via Skype. The interview was held after a large part of the analysis was completed. In other words, I conducted an informed interview in which I asked the counselor specifically about the topics that I had examined through all steps of my analysis. I carried out the interview in an open format, but I asked questions on the following five broad issues: (1) online counseling in general; (2) the content structure of email counseling; (3) the use of narratives; (4) the text blocks on self-esteem; and (5) the closure process in the counseling exchanges. The counselor was asked to talk about these aspects freely and to answer specific questions about certain findings. In addition, I asked her to comment on specific data extracts without first informing her about the linguistic findings. Throughout the following chapters, I draw on the interview data to provide the practitioner perspective. I will always mention the context in which the

counselor made the comment, i.e., whether it was a comment on a piece of data or on my findings.

Finally, at very specific points throughout my research, I have supplemented individual steps of my analysis with corpus-linguistic analyses to gain a better understanding of the linguistic patterns that occur. I have done this in two specific ways. First, I have conducted word frequency analyses for the discursive moves which were under closer scrutiny. The word frequency analyses allowed me to reveal which lemmata occur in high frequency. Second, I have conducted collocation and cluster analyses of the most frequently used lemmata in order to identify patterns of linguistic expressions. Both types of corpus-linguistic analyses have allowed me to uncover specific linguistic patterns within the discursive moves. Their description is relevant since I am interested in very small differences in the form and function of linguistic expressions that can carry out vital relational work and subtle negotiations of positionings.

Last but not least, I want to briefly make the reader aware of the types of software that were used to facilitate individual steps of the analysis. The coding of the content and discursive moves analysis was carried out with the help of “Computer Assisted Qualitative Data Analysis Software” (CAQDAS) (Bolander and Locher 2014: 19; Saldaña 2013). The CAQDAS used for the present study is NVivo, which is “software that supports qualitative and mixed methods research. It’s designed to help ... organize, analyze and find insights in unstructured, or qualitative data” (QSR Website 2014). While I am aware of the

existence of other CAQDAS, I chose NVivo for two primary reasons. First, it allows for multiple coding of the same source, i.e., the same text can be coded multiple times. These multiple codes can then also be cross-referenced, i.e., matrix coding queries can be conducted. This allowed me, for example, to search for the distribution of discursive moves across themes. Second, with NVivo, it is possible to check coder agreement. In other words, a stretch of text can be independently coded by two individuals. Their codings can then be checked for agreement. As I aimed for coder agreement in the discursive moves analysis, this aspect of NVivo was a key element in my choice. As for the corpus-linguistic analyses, they were conducted with AntConc (Anthony 2016), “a freeware corpus analysis toolkit for concordancing and text analysis.” NVivo does allow for word frequency analysis. Instead, one can only search for stemmed words. To arrive at a more precise corpus-linguistic analysis, I chose AntConc instead.

### **4.3 Summary**

To research the data I presented in Chapter 3 and to answer the research questions I outlined at the end of Chapter 2, I employ a discourse-analytic approach. A discourse analysis centers around the empirical and systematic study of why text passages take a specific form and function. I specifically look at text passages from an interpersonal-pragmatic perspective to uncover linguistic patterns in which interactants negotiate the therapeutic alliance and construct identities. As I am further interested in the relational work that is carried out in the entire practice of

email counseling rather than only in specific moments, I chose a methodology that allows me to move from broader perspectives that focus on the content overall towards more fine-grained attention to minute linguistic expressions that can have interpersonal effects. To be able to cover such a broad spectrum in my analysis, I have combined aspects of several methodological approaches. The resulting analytical steps are built on a hierarchical combination, i.e., each new analytical step takes the results of the preceding step(s) into account.

The four methodological steps I have presented are the following:

- (1) Content analysis
- (2) Discursive moves analysis
- (3) Form and function analysis of linguistic expressions in context
- (4) Widening of the scope by including a participant interview and techniques from corpus linguistics

The content analysis uncovered which themes the interactants talk about in the exchanges. The discursive moves analysis then examined which speech activities are used to talk about the themes found in the content analysis. Both the content and the discursive moves analysis required qualitative coding of the entire corpus. The resulting catalogues of codes allowed me to identify the set of themes and discursive moves that are specifically used in the exchanges. For both themes and discursive moves, I further calculated numerical distributions to find the most frequent themes and discursive moves. Finally, I also looked at the sequence of the four most frequent discursive moves and how they are linguistically realized. The combination of the content and the

discursive moves analyses resulted in a holistic description of the content and the composition of the exchanges.

The third hierarchical step in my methodology is the analysis of the form and function of linguistic expressions in context. A broad initial reading to identify types of relational work and positionings revealed the richness of interpersonal effects in the exchanges. This methodological step was, therefore, carried out through qualitative close readings of “crucial moments” (Locher 2015: 8) in which such interpersonal effects were prevalent. These three crucial moments are narratives, a text block that tackles low self-esteem, and the closure of the counseling process. In all of them, patterns of relational work and positionings were identified and looked at in connection with the results of the content and the discursive moves analysis. This step of the analysis thus focused on minute details and differences in linguistic choices from an interpersonal-pragmatic perspective.

Finally, to widen the scope of my analysis and my understanding of the practice of email counseling, I conducted a practitioner interview with the counselor who contributed the data for my study. I thereby addressed Pick’s (2011) argument for calling on the practitioner’s knowledge and expertise. As I conducted the interview after already establishing most of the results, I was able to ask the counselor specific questions regarding not just the data, but also my findings. As Pick explains, this allows for a more valid and intersubjective interpretation of the findings. And finally, I included some corpus-linguistic analyses to

gain a clearer understanding of linguistic patterns within the four most frequent discursive moves.

While I do not want to claim that my methodology is the best to analyze language employed in an online health context *per se*, I believe that the methodological steps presented in this chapter have provided me with a sound methodology to answer the research questions I outlined in Chapter 2. Further, with the description above (and further input on individual methodological steps in the introductory sections of later chapters) I hope to have responded to Bolander and Locher's (2014) and Jucker's (2009) call to outline the methodological steps of a study in a transparent way.

## **PART II**

## **Chapter 5 Themes and Discursive Moves Employed by the Clients and the Counselor**

### **5.1 Introduction and Methodology**

In this chapter, I present a description of the themes and the discursive moves that are employed by the interactants in the email counseling exchanges. Such a description is beneficial from an applied, a comparative, and a methodological point of view. From an applied point of view, the clear description allows me to characterize the practice of email counseling from a broad perspective. This is relevant as it enables me to show practitioners what they talk about with their clients and what types of discursive moves they use. As I have mentioned in the previous chapter, as well as elsewhere (Locher and Thurnherr 2017), practitioners benefit from seeing, for example, what clients would like to talk about in email counseling exchanges.

A clear definition of the themes discussed within a practice such as counseling is also helpful to distinguish between different types of counseling. I have discussed in Chapters 2 and 3 that counseling is an umbrella term. By establishing what themes occur in the exchanges, I can distinguish the type of counseling I examine – well-being counseling – from other types of counseling, such as the drug and alcohol information counseling studied by Jager and Stommel (2017). Further, I pointed out in Chapter 4 that some previous studies utilized a similar hierarchical analysis (content, discursive moves, form and function of linguistic expressions in context) of other online social practices. A clear description of the practice allows me to compare email counseling



with other practices that have been researched, such as an Internet health advice column (Locher 2006), online sources on smoking cessation (Rudolf von Rohr (2018), a peer-to-peer forum concerned with parenting tips (Lindholm 2010), or a Yahoo Request website concerned with style and beauty (Placencia 2012). Often these practices not only differ in topic(s) and the CMC medium utilized, but they also slightly differ from one another with regards to the sets of discursive moves that are employed. While the differences might be less pronounced than intuitively expected, they nevertheless serve to distinguish practices in specific ways. Comparisons between related practices, such as the advice column in Locher's study (2006) and email counseling, can be especially fruitful in order to uncover subtle differences.

Finally, I develop the hierarchical analysis I described in Chapter 4. The results of the current chapter are used in later steps of the analysis as a foundation for investigating further aspects of the interaction. Within the analysis of themes and discursive moves, this means that distribution and sequence patterns can be analyzed (Chapter 6). Further, the linguistic realization of specific discursive moves can be examined (Chapter 7). And finally and most importantly, the descriptive framework of themes and discursive moves allows me to look at relational work and positionings in context (Chapter 8 to 10).

With regards to my analysis of themes and discursive moves, I aim to answer the following two research questions in this chapter:

- What themes are discussed in the exchanges?
- What discursive moves are utilized in the exchanges?

The first research question concerns itself with what the interactants talk about, i.e., with the content. I also make a distinction whether themes are introduced by the clients or by the counselor. The second research question deals with the specific set of discursive moves that are used in the practice of email counseling. I have made a further distinction here as well and incorporate whether a discursive move is used only by the clients **or** the counselor, or whether both interactants utilize the discursive move.

To answer these research questions, I have employed a content analysis to uncover themes and a discursive moves analysis to reveal the set of discursive moves the interactants use. Table 5.1 revisits the three methodological steps of the hierarchical analysis previously presented in Chapter 4. I have highlighted in green which steps were taken to arrive at the results of the present chapter.

*Table 5.1 Methodological steps 1 to 3 revisited: Types of themes and discursive moves*

Type of Analysis	Focus of Analysis	
<b>Content analysis of themes</b>	Types	overall role-specific introduction
	Distribution	
<b>Discursive moves analysis</b>	Types	overall role-specific utilization
	Distribution	
	Sequence Linguistic realization	
<b>Form and function analysis of linguistic expressions</b>	Relational work and positionings	

Overall, both the content and the discursive moves analysis are qualitative analyses that were conducted through coding of the corpus. Before I go on to describe how I have conducted these types of analysis, I want to briefly explain what such a qualitative coding analysis is. While there are various types of qualitative analysis, Miles et al. (2014: 9) summarize that some common features are that the aim is “to gain a holistic ... overview of the context under study” and that “little standardized instrumentation is used” so that the “researcher himself or herself is essentially the main instrument in the study.” Miles et al. (2014: 9) conclude that the “main task [of qualitative analysis] is to describe the ways people in particular settings come to ... manage their ... situations.” Despite pointing out the diversity of qualitative analysis, Miles et al. (2014: 10) still mention that there are “some analytic practices [that] may be used across different qualitative research types” and list “a fairly classic set of analytic moves.” I want to briefly refer to four of the moves they list that I follow in my analysis.

Miles et al.’s (2014: 10) first analytic move is “assigning codes ... to a set of [data].” They define codes as “labels that assign symbolic meaning to the descriptive or inferential information compiled during a study” (ibid.: 71); these labels “[are] usually ... attached to data ‘chunks’” (ibid.: 71). Saldaña (2013: 3-4) provides a similar definition in that “a code represent[s] and capture[s] a datum’s primary content and essence.” He further argues that a label for a code is usually “a word or short phrase that symbolically assigns a summative, salient, essence-capturing, and/or evocative attribute for a portion of language-based ...

data.” Once these codes have been assigned to a specific set of data, the second analytic move, according to Miles et al. (2014: 10), is “sorting ... through these coded materials to identify similar phrases ..., patterns, themes, ... and common sequences.” This sorting should then, in a third analytic move, lead to the gradual identification of “a small set of assertions, propositions, and generalizations that cover the consistencies discerned in the database” (ibid.: 10). Miles et al. (2014: 10) conclude that the qualitative analyst’s fourth analytic move is to “compar[e] those generalizations with a formalized body of knowledge in the form of constructs or theories.”

In both the content and the discursive moves analysis I followed these steps of coding the data, sorting through the coded corpus, identifying propositions and generalizations, which I then compared with findings from previous research. However, there are certain differences in the methodology employed for the content and the discursive moves analysis. To be as transparent as possible, I will now proceed to explain each step individually and in further detail.

### *Content Analysis*

The content analysis aims to reveal the themes present in the corpus. The labels for the codes were generated, on the one hand, by reading the data carefully and paying attention to the linguistic expressions interactants used when talking about the clients’ troubles. Some of these linguistic expressions were then used as the labels of the codes. On the other hand, in certain instances, none of the linguistic expressions used

by the interactants seemed to concisely describe the content they were talking about. In such instances, I generated a label for codes myself in order to describe the content as best and as concisely as possible. To do this, I relied upon my expert knowledge in psychology. This combination of linguistic expressions from the interactants and the labels that I additionally generated allowed me to exhaustively code the entire corpus for themes.

Two important aspects that need to be considered while coding are whether there are specific units for coding, i.e., rules of how long a coding can be with regards to text length, and whether double coding is allowed. In the content analysis, I did not assign any a priori boundary units for a theme, i.e., there was no artificial cut-off point for when a coding should end. I examined each paragraph and assigned it to a theme. Then I analyzed the next paragraph and checked whether the same theme or a new theme was discussed. I paid close attention to the content and the lexis used in order to decide whether a text passage was still concerned with a specific theme.

Secondly, I did not allow for double coding of text passages, i.e., all text passages were assigned to one specific theme. However, I used an open category into which text passages that did not fit any thematic code could be put (for example, text passages which focused on setting a date for a next session). I have decided against double coding because it would result in counting certain text passages twice in a matrix coding query with discursive moves. A matrix coding query can, for example, establish which discursive moves occur in which themes. If a text

passage was coded as belonging to two themes, the matrix coding would list the discursive moves that were coded within the two themes under both themes, resulting in counting the discursive moves twice. As I am specifically interested in finding out distribution patterns of discursive moves within themes, the double coding of themes would have resulted in skewed numbers. Furthermore, I did not encounter many instances in which a text passage was difficult to assign to a specific theme. In other words, conflict between two themes rarely occurred. I argue, then, that I have done justice to the text even without allowing for double coding.

The content analysis – in contrast to the discursive moves analysis (see below) – was not checked for coder agreement. While there would have been benefits resulting from coder agreement, the costs outweighed those benefits. Since not all threads<sup>8</sup> contain all of the themes that occur in the entire corpus and some themes only occur in one thread, both coders would have therefore needed to code the entire corpus to check for coder agreement. This was simply not possible from a practical standpoint.

#### *Discursive Moves Analysis*

I aimed to establish the set of discursive moves that is used in the email counseling exchanges in my corpus. I developed a coding scheme of all

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<sup>8</sup> I follow Harris et al.'s (2012: 25) definition of a thread being “a series of chained e-mail exchanges between a counselor and a client over an extended timeframe.”

the discursive moves that occurred in the exchanges. The codes were generated bottom-up and with the help of the literature review, i.e., codes for discursive moves that were found in previous research (see e.g. Bolander 2013; Locher 2006; Morrow 2012) This dual approach allowed me to be flexible enough to combine labels for discursive moves that were found in other social practices (which facilitates a comparison) and newly generated ones that specifically fit what the interactants do in my data.

The coding process for discursive moves turned out to be more challenging than the content analysis. As I could not rely on the discursive moves being utilized by specific performative verbs only (as Locher (2006: 51-52) explains for the discursive move *advice-giving*: “it manifests itself in many different linguistic forms and is by no means limited to the performative verb ‘advise’”), generating the labels for discursive moves turned out to be highly interpretative. MacQueen et al. (2008: 124) accurately point out that “[coding] adds information to the text ... through a process of interpretation.” Additionally, and as I mentioned above, I tested the coding of discursive moves through coder agreement. Coding data via more than one coder is beneficial in two ways, as Miles et al. (2014: 84) observe: “[It] not only aids definitional clarity but also is a good reliability check.” If more than one person codes data, it is essential to develop “an explicit and systematic ... codebook” (MacQueen et al. 2008: 119). MacQueen et al. (2008: 123) add that “the codebook functions as a frame or boundary that the analyst constructs in order to systematically map the informational terrain of

the text.” They further mention that the terrain “always reflects the implicit or explicit research questions and theoretical constructs” (ibid.: 123).

To generate codes that are as reliable and transparent as possible, I created a codebook that, as suggested by MacQueen et al. (2008: 121), contained specific parameters for the codes: (1) the name of the code; (2) a clear definition; (3) examples; and (4) inclusive and (where necessary) exclusive criteria. After these parameters were established for each code in a first draft, a student intern was trained to code samples of the exchanges with the help of the codebook. In other words, I tested for inter-coder agreement rather than intra-coder agreement. After training, the student intern and I independently coded a specified sample of the exchanges for discursive moves. Several revision cycles that always included careful revision of the codebook and further training were needed to arrive at coder agreement of at least 85% per individual code as suggested by MacQueen et al. (2008: 131). The final version of the codebook can be found in Appendix B.

I have highlighted in my description of the content analysis above that two aspects concerning the coding need to be considered: whether there is a specific cut-off point in terms of length and whether double coding is allowed. First, while I did not specify a cut-off point for themes, I specified a minimum length for a discursive move, namely a full sentence. Coding for smaller units was not feasible given the goal of coder agreement. The maximum cut-off point for a discursive move was a paragraph length, i.e., one discursive move could not go beyond



the length of a paragraph. A careful analysis revealed that only a very few select cases occurred in which a discursive move continued over more than one paragraph. Additionally, it is safe to assume that writers purposefully decided when to end a paragraph, as starting a new paragraph needs a keyboard action. In other words, paragraphs can also be interpreted as a writer intending to finish one point and to start a new point with a new paragraph. The limitation of a paragraph as a maximum unit for a discursive move therefore seems reasonable.

Secondly, I did not allow for double coding of discursive moves, which reflects my practice in the content analysis of themes. In contrast to the coding of themes, however, there were more instances when a text passage could have been assigned to two possible codes. Some related discursive moves proved especially difficult to code, for example, in cases when an interactant aimed to convey two different things in one sentence. A client thanks (discursive move: *thanks*) the counselor for suggesting a strategy before proceeding to assess the strategy (discursive move: *assessment*). I have included specific guidelines within the description of these codes in the codebook in order to stay consistent in such cases. Other text passages that were clearly assignable to two different discursive moves were categorized in the open category.

In addition to the coding of content (i.e., themes) and discursive moves, I coded the entire corpus for various variables, such as interactant (counselor, Anna, Ellie, Chris, Mel, Taylor), a number for each entry (first entry, second entry, third entry, etc.), or role (counselor vs. clients). These attribute codings are what Miles et al. (2014: 79) call

“notation[s] of basic descriptive information”; they go on to add that such codings are especially appropriate for sources with “multiple participants” and “cross-case studies” as they “provide essential participant information for ... reference, and contexts for analysis and interpretation” (ibid.: 79). I have conducted these attribute codings to check distribution for specific parameters, such as discursive moves within all of the counselor’s text passages only, and to be able to extract text passages according to given parameters (e.g. extracting all *problem statement* moves that occur within the theme ‘depression’<sup>9</sup> and that were written by one specific interactant). This allowed me to create various sub-corpora which could then be further analyzed, for example through the use of corpus-linguistic tools, while also serving the fine-grained analysis of relational strategies and positionings.

The results from this type of analysis aim to provide an overview of the content and composition of the social practice of email counseling and serve as the foundation for the next chapters. The present chapter is organized into the following sections: in Section 5.2, I will show what kind of themes the clients and the counselor focus on. A distinction is made in terms of who introduces the themes in the corpus: counselor, client, or both interactants. Section 5.3 focuses on the discursive moves used in the email threads. I will first discuss which discursive moves are solely used by the clients or the counselor (Section 5.3.1 and

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<sup>9</sup> I am aware that in the APA style key terms are usually written in italics. However, since I frequently discuss discursive moves occurring within specific themes, I highlight labels of discursive moves in italics and labels of themes in single quotation marks for ease of reading.

Section 5.3.2 respectively). Next, I will turn to the discursive moves that are used by both interactants (Section 5.3.3). Section 5.3.4 briefly addresses whether the type of email counseling used influences the utilization of discursive moves, i.e., whether there are differences in the discursive moves occurring in the threads that contain the counseling in the body of the email compared to the threads that utilize a word document. Finally, Section 5.4 shows the results of a comparison to the advisory contexts that were the focus of previous studies. I provide a summary of the results of this chapter in Section 5.5.

## **5.2 Themes**

Themes are recurring topics that the client and the counselor discuss during their ongoing exchanges. While Locher's (2006) study adhered to the system-given topics<sup>10</sup> in which the problem letters were categorized, the practice of email counseling does not have such system-given topics<sup>11</sup>. On the contrary, it is of particular significance to the counselor's work to recognize specific themes that cause the clients distress.

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<sup>10</sup> Locher (2006: 10-11) says that the advice column was "organized into seven different topic categories" that were given as hyperlinks on the website.

<sup>11</sup> I focus here on Locher (2006) for two reasons: first, many of the studies specifically mentioned as comparisons for the content analysis focus on only one theme (such as Morrow's study on a divorce discussion forum). Second, Locher's (2006) study, despite its broader approach, is most easily comparable to my study in terms of their topics due to its setup as a student health service. However, I am aware that Bolander (2013), for example, has used first- and second-order labels for the topics occurring in her data. Nevertheless, her broad, albeit very deliberate, inclusion of multiple topics does not easily facilitate a thematic comparison to my corpus.

Only the themes that are recognized can subsequently be therapeutically discussed and managed. While the client may mention certain themes, others may only become explicit once the counselor recognizes and highlights them explicitly. In order to highlight the differences between Locher's (2006) system-given topics and the counterparts that were established bottom-up in the corpus of my study, I use the label 'themes' rather than topics. Themes are hence issues that either the clients or the counselor introduce in the threads. Text passages that did not deal with a specific theme in particular were coded into the 'open' category. Examples for such text passages are copy-pasted text chunks, or organizational or generic text passages, such as statements elaborating how online counseling works.

Table 5.2 shows the eleven themes that occur in the corpus, including some examples of phrases that were indicative of the thematic content of the utterances. The themes are individually discussed in the following sections in more detail. Themes typically occur over multiple entries; that is, interactants do not discuss one theme in one session and another theme in another session. Interactants also habitually discuss several themes at once, i.e., in the same entry, and no client only focuses on one theme alone. Rather, a specific interplay of themes occurs in each thread, which is further explained in Chapter 6.

The clients as well as the counselor can introduce a theme. However, certain patterns do emerge. Most clients primarily introduce themes in their first entry. One client introduces themes later on as well. The counselor usually suggests specific themes in her first response, in

other words in the second entry. As with the client, there is of course no restriction on introducing themes later on. The themes that occur in my corpus are briefly introduced in the following three sections (in alphabetical order unless otherwise clearly stated); Section 5.2.1 centers around the themes that were solely introduced by clients, Section 5.2.2 deals with a theme introduced by the counselor, whereas Section 5.2.3 highlights the themes that were introduced by a client or the counselor.

Table 5.2 Themes (ordered alphabetically)

Theme	Example phrases in data
Abuse	<i>I woke up in the night and found him in my room, watching me.</i>
Anxiety	<i>I currently suffer from anxiety It's very normal that you would be a little [...] anxious.</i>
Depression	<i>I've been feeling very depressed I've been feeling quite down recently.</i>
Health issues	<i>In February I had a small operation</i>
Loneliness	<i>I guess its loneliness</i>
Other's health issues	<i>my mum has been diagnosed with [illness] He always drank a lot but he developed a drink problem</i>
Panic attacks	<i>I've had what some would describe as panic attacks</i>
Relationships	<i>I feel that the dynamics between myself and my family are very strained In the past month we've broken up so many times</i>
Self-esteem	<i>I probably don't have the best self esteem, and I'm certainly lacking in confidence</i>
Sexuality	<i>A recent revelation in my mental health has been my confusion over my sexuality.</i>
Stress	<i>I've had an extremely stressful few months I'd like to focus on how to deal with stress being at home over the summer.</i>

### 5.2.1 Client-Introduced Themes

#### *Abuse*

The theme ‘abuse’ only occurs in one thread and is discussed very briefly. Example (5.1) shows the moment in which Mel first talks about this theme, while the counselor’s immediate response is given in (5.2):

- (5.1) Mel (Thread: Mel; Entry 3)  
 One thing which bothered me in particular was that a few times I woke up in the night and found him in my room, watching me. Once he had his arm under the duvet but I don’t remember him actually touching me. It made me very nervous each night – I didn’t block the door because I didn’t want my mum to ask why but I remember putting things like a pencil by the door so that, if it had moved in the morning, I’d know if someone had been in and wearing lots of clothes so that he couldn’t touch my skin.
- (5.2) Counselor (Thread: Mel; Entry 4)  
 That sounds like a frightening time for you Mel, and even though you are unsure exactly what happened, what he did was completely wrong. [...] You were very resourceful and did what you could to protect yourself. Naturally this experience would have also affected your self-esteem and sense of safety in the world.

Neither Mel nor the counselor use the lexeme *abuse*, but Mel’s description makes it rather clear. The counselor steers the conversation towards the effects the abuse had on Mel rather than focusing on the actual abuse itself. In addition, she foregrounds Mel’s *resourceful[ness]* in dealing with the situation rather than the abuse itself. This is indicative of

solution-focused therapy, which focuses on “solution talk” rather than “problem talk” (Gingerich and Wabeke 2001: 34). As a result (and possibly also due to the difficulty of talking about such a difficult subject), the theme is not discussed at length by Mel and the counselor. Rather, the discussion ends with the counselor’s acknowledgement that writing about it might help.

### *Health Issues*

While ‘health issues’ would be expected to appear in medical encounters, it might seem less obvious in a counseling exchange. However, Mel nicely illustrates how health issues can have a psychological effect on a person as well (5.3):

(5.3) Mel (Thread: Mel; Entry 1)

I have also had some of my own health problems this year. In February I had a small operation to see if I had [MEDICAL CONDITION]. They discovered that I do have the condition, but not too badly, but also told me that they had found [MEDICAL TERM]. [...] The hospital has sent me for three scans since to confirm and it all still seems fine but, although it’s not a great deal in itself now, it was very stressful at the time and has added to the weight of problems.

(5.4) Counselor (Thread: Mel; Entry 2)

That sounded like an incredibly stressful time Mel, and has just added to the depression you were already feeling. While everything is ok now, all the waiting and the build-up of stress naturally would have had an impact on you.

The counselor responds to Mel's text in example (5.4). She acknowledges the *impact* of health issues on mental health by assessing and empathizing with Mel's situation. She agrees with Mel that her health situation has led to an increase in stress and continues to focus on the resulting stressful feelings Mel is dealing with. Clearly, the counselor's attention shifts to the psychological ramifications rather than the actual health issues. This is not surprising, as she is not an expert on medical health, but rather on mental health.

### *Loneliness*

Taylor describes her emotional state in her first entry as feeling down and attributes it to loneliness. In fact, example (5.5) is the entire first entry that Taylor sends to the counselor. Example (5.6) shows part of the counselor's response.

- (5.5) Taylor (Thread: Taylor; Entry 1)  
 Ive been feeling quite down recently. I guess its lonleyness, but Ive had problems with feeling down before in the past even when I had friends, so its probably not all being by myself. I find myself feeling jealous of people back in [PLACE], and I feel somewhat resentful that all but few of my friends seem to have forgotten about me.
- (5.6) Counselor (Thread: Taylor; Entry 2)  
 Having read your referral form, as well as this email Taylor, I am struck by how often you used the words lonely and loneliness. I get the impression this is a very strong and really difficult feeling for you to be experiencing. It also sounds as if it is a very familiar feeling.



As the counselor mentions in her response to Taylor's initial message, the focus in Taylor's entry lies on feeling *lonely and loneliness* in general. This has obviously also become clear to the counselor from reading the *referral form*. Taylor argues that she is *feeling quite down* because of her loneliness, indicating that her general well-being is not too robust either. In the ensuing discussion between Taylor and the counselor, it becomes clear that depression and relationship problems might be closely related to Taylor's feeling of loneliness, so they are discussed more than loneliness itself.

#### *Other's Health Issues*

Apart from their own health issues, some clients also deal with health issues of others, such as family members or friends. Instances in which a family member's health deteriorates continuously can cause considerable stress for relatives. This is especially true for severe health issues, such as debilitating medical conditions. Mel talks about her mother's recent diagnosis with such a severe medical condition in example (5.7). The counselor's response is given in example (5.8):

(5.7) Mel (Thread: Mel; Entry 1)

There has been quite a lot going on lately. One of the biggest shake-ups has been the news that my mum has been diagnosed with [MEDICAL CONDITION]. She was told this a couple of weeks ago and it hasn't been confirmed yet (she'll get scan results soon) but it is almost certain. I can tell that she is very upset by it and I'm finding it difficult to come to terms with the fact that I'll have to watch her get progressively worse symptoms which

might eventually cause her to become really quite disabled.

(5.8) Counselor (Thread Mel; Entry 2)

I can hear what a shock your Mum's diagnosis has been for you Mel, and I'm conscious that there are a lot of unknowns at the moment, while you wait for the results of the scan, and more information about how the [MEDICAL CONDITION]'s may develop for her. *I'm wondering what support you have at this time, to talk about how you are feeling?*

The counselor first acknowledges and displays empathy for the difficult situation that Mel is in. Similar to her take on Mel's own health issues in examples (5.3) and (5.4), the counselor immediately moves towards the client's mental well-being and how it could be safe-guarded. While showing understanding for the medical situation at hand, the counselor therefore refrains from focusing on, and even less giving advice on, the medical situation itself. However, with her knowledge about how medical issues (of one's own or family members and friends) can affect the well-being of clients, she focuses on helping Mel establish a support network.

### *Panic Attacks*

Anna specifically introduces the theme 'panic attacks' in her first entry to the counselor shown in example (5.9):

- (5.9) Anna (Thread: Anna; Entry 1)  
I've had what some would describe as panic attacks while I've been here and they've been more frequent in the past month. My heart races, my palms sweat, I can't think at all, and I start to cry, or I find myself unable to talk. This has happened in public and when I'm on my own.

While Anna introduces a theme that at first seems relatively specific to expert knowledge of a counselor (Anna self-diagnoses the panic attacks), we can see that she introduces the theme in a mitigated way. She remarks that *some* would describe her experiences as panic attacks and backs up her introduction of the theme with a detailed description of her symptoms. The counselor confirms Anna's self-diagnosis:

- (5.10) Counselor (Thread: Anna; Entry 2)  
That certainly sounds like panic attacks Anna, and I'm aware of how frightening they can be, especially when you are away from home and the comfort and support of your family, boyfriend and friends. *Help me to understand what you have done in these situations to help get through the panic?*

Given the counselor's confirmation, Anna's self-diagnosis is validated and the theme is recognized as something that they need to deal with during the counseling.

*Sexuality*

Example (5.11) shows how Chris introduces his struggle with his sexuality and hints towards his wish to know how he *fit[s] into [the] categories* that he mentions:

- (5.11) Chris (Thread: Chris; Entry 1)  
 A recent revelation in my mental health has been my confusion over my sexuality. I would be very happy to say that I am either straight, gay, bi, or asexual but I don't feel like I fit into any of those categories.
- (5.12) Counselor (Thread: Chris; Entry 2)  
 I can hear how confusing this is for you Chris, and that you have given your sexuality a lot of thought, trying to work out how you feel sexually towards men and women and what that means for your future.

Chris and the counselor talk about how his confusion over his sexuality influences his everyday life and well-being. In the continuation of the counseling, it becomes clear that Chris is not necessarily interested in resolving his confusion. Instead, the interactants discuss situations in which he feels uncomfortable and they subsequently come up with coping techniques for these situations.

*Stress*

'Stress' is a theme that is verbalized in three threads, and is introduced by the clients rather than the counselor. Ellie's example illustrates how she introduces this theme by specifically mentioning 'stress' and illustrating the severity of it with an example (5.13):

- (5.13) Ellie (Thread: Ellie; Entry 1)  
I'd like to focus on how to deal with stress being at home over the summer. I finished my exams last week and moved back home on Friday. [...] My mum is at the point that she cannot be left alone at all, so for me to maybe walk my dog I have to take my mum with me when in fact I would appreciate half an hour to myself as being with her is very intense and tiring.

The counselor takes Ellie's wish to find coping techniques into account and proceeds to suggest specific techniques for her to try out. One of these techniques is mentioned in example (5.14):

- (5.14) Counselor (Thread: Ellie; Entry 2)  
I'm very aware as well that you are also wanting to find some ways to manage the stress Ellie, when even going for a walk with the dog does not give you any space. One strategy is to look at how you can change your environment to help you connect to feeling calm, hence you are focusing on what you can control, rather than on others actions which we cannot control. A way to do this to use the associations we all have with our senses and feeling calm.

The counselor and Ellie subsequently discuss how Ellie deals with the stressful situation of living at home during the term break.

### 5.2.2 Counselor-Introduced Themes

The themes discussed in the previous section can be acutely perceived by the clients, some of them even physically, such as 'stress' and 'panic

attacks'. Nevertheless, these themes might have causes or associated symptoms that are less apparent to the clients. To deal with these, it might be necessary to bring them to light. In such cases, the counselor can explicitly mention the theme and see whether the clients would like to work on it.

### *Self-esteem*

A theme that might be less apparent to the clients is 'self-esteem'. To illustrate how the counselor recognizes and introduces a theme, a close look at the correlating themes 'depression' (which I will discuss in Section 5.2.3) and 'self-esteem' is revealing. While several clients mention that they are feeling depressed, they rarely point towards specific causes. Throughout a thread, the counselor may identify and subsequently highlight specific underlying or contributing factors that exacerbate or cause the clients' depression. In Chris' case, an underlying factor of his depression is low self-esteem, which is not introduced explicitly by Chris himself, but rather identified and brought to the fore by the counselor. The counselor explains what self-esteem is and suggests different ways how Chris can increase his self-esteem (for a detailed discussion of the theme 'self-esteem' see Chapter 9):

(5.15) Counselor (Thread: Chris; Entry 2)

Here's the analogy I use to describe self-esteem; We all have an internal garden, full of flowers, shrubs, trees, maybe a water feature and ornaments, grassy areas, hedges and weeds. The flowers, trees, ornaments etc represent our positive qualities, achievements,

happy memories, and things we like about ourselves. The weeds represent our regrets, the things we don't like about ourselves, the things we feel ashamed or uncomfortable about, the criticisms from others or ourselves over the years.

The introduction of the theme 'self-esteem' is specifically relevant as 'depression' is difficult to work with therapeutically. (Low) self-esteem, though, is known to be "a risk factor for depression" (Sowislo et al. 2014: 737) and can be therapeutically worked on. The introduction of such specific themes by the counselor is fully intended and aims to support the clients towards better mental health. It further provides the counselor with an opportunity to equip the clients with coping techniques that can help them deal with the causes of their depression.

### **5.2.3 Themes That are Introduced by the Clients and the Counselor**

Three themes are not introduced by only the clients or only the counselor. These themes are 'anxiety', 'depression' and 'relationships'. These three themes are introduced by clients in some threads and by the counselor in others. I will provide an example of how the clients and the counselor introduce each of these three themes.

#### *Anxiety*

The counselor introduces the theme 'anxiety' in the second entry in Anna's thread. This is shown in example (5.16). The counselor does not

specifically talk about anxiety as a problem, but rather delves right into an explanation of how anxiety works:

- (5.16) Counselor (Thread: Anna; Entry 2)  
 OK, let's focus on helping you find a different way forward. The way I describe anxiety is that when we don't feel in control of a situation (whether other people's actions or events going on around us), we naturally experience anxiety, and then as we notice the anxious emotional and physical feelings, and thoughts, we don't feel as in control of our bodies and mind (panic attacks are a good example of this), increasing our anxiety further. *Does this make sense Anna?*

The counselor specifically makes a link to ‘panic attacks’, a theme that Anna introduced in her first entry. Anna confirms that she struggles with anxiety when she reports on how she applied some of the suggested coping techniques. She positively evaluates such a coping technique in the extract shown in example (5.17):

- (5.17) Anna (Thread: Anna; Entry 3)  
 This definitely helps! I've been catching up on british tv when I feel like I want to go home, I find that this helps me feel better. Even watching BBC news makes me feel a bit calmer. Maybe it's because I associate it with being at home and feeling safe.

Chris introduces the theme ‘anxiety’ himself in his thread. He clearly states that he suffers from anxiety and that it is *getting worse*:

- (5.18) Chris (Thread: Chris; Entry 1)  
 I currently suffer from anxiety, which seems to be getting worse. I constantly over analyse my



close friendships and wonder whether my friends actually like me, or whether they are just putting on a front (I know with certainty that my friends genuinely like me and I highly value my friendships, but this mindset seems impossible to shake).

Chris foregrounds throughout his thread that he has a basic knowledge and understanding of such psychological concepts as anxiety. This might be a reason why he introduces this theme himself rather than mentioning certain symptoms or associated mental health issues instead.

### *Depression*

The theme ‘depression’ occurs in three threads; it is introduced by two clients and once by the counselor. I first look at how Chris introduces this theme:

(5.19) Chris (Thread: Chris; Entry 1)

I have suffered from depression for a few years now. [...] However, the nature of my depression has recently changed and become less predictable. It no longer follows daily patterns, so I do not experience it every night (just most nights). But there are times where I go to bed feeling very down, and then wake up still feeling very down. The lows have also become more severe.

Depression is a term that floats around in media and everyday usage (I’m feeling depressed, etc.) and has become part and parcel of our everyday vocabulary. It is no surprise that the clients touch upon this theme

as well. Feeling depressed is also something that clients acutely perceive and can bring along for discussion.

The counselor introduces the theme ‘depression’ in Taylor’s thread. Taylor then confirms it with a rating of her well-being.

- (5.20) Counselor (Thread: Taylor; Entry 2)  
*I notice that you have not been to see your GP, so help me to get a clearer sense of how low you are feeling Taylor. On a scale of 0 (feeling the worst you have ever felt, and suicidal) to 10 (everything is fantastic) where would you put yourself, and what are the reasons for that number?*
- (5.21) Taylor (Thread: Taylor; Entry 3)  
*This is one of the the thing I forgot to include before, I would say generally Im at a 4/5 (so just feeling normal / abit low) sometimes maybe a 6 (slighty more cheery) but its like sometimes I just get these crashes, when I hit like 2 (not suicidal) and I’ll be sat in my room not being able to sleep and crying and stuff.*

Taylor illustrates her general well-being with comparisons between mental states that she is experiencing. While the counselor’s request for a rating specifically triggers Taylor’s explanation, Taylor uses specific stance lexemes to describe her emotions and their severity in more detail.

*Relationships*

Finally, ‘relationships’ is a theme that is introduced by Ellie and Mel in their first entries. Ellie, for example, touches upon her difficult family *dynamics* and elaborates on how these play out in everyday life:

- (5.22) Ellie (Thread: Ellie; Entry 1)  
 Since being back at home I have found things increasingly stressful and feel that the dynamics between myself and my family are very strained, especially with my older sister. I feel that with the situation with my mum, she is taking advantage of me and seems to think I should care of my mum all the time to almost make up for the time I spent away from home when at Uni.

In Taylor’s thread, the counselor introduces this theme:

- (5.23) Counselor (Thread: Taylor; Entry 2)  
*Help me to understand a bit more about what support you have Taylor, who you feel able to talk to when you are struggling? You mention talking to your boyfriend, and sometimes friends, while I get the impression that you do not feel able to talk much (though I could be wrong).*
- (5.24) Taylor (Thread: Taylor; Entry 3)  
**Well.. that's probably kinda tricky. I sometimes talk to my friends, though not often. At the start of [MONTH] I spoke to them more and told them quite how down I was and I used to ring them up more when I was upset, but Ive come to realise that actually if I don't contact them I don't really hear from them (and these are the friends that I feel as if Ive reached out to) I do hear from other friends, not that much though.**

While Taylor mentioned being lonely in entry one, the counselor points more directly towards the people around Taylor. Taylor confirms that she struggles with her relationships with her friends.

### **5.3 Discursive Moves**

The focus of this section is on the discursive moves that occur in the five email counseling threads. Discursive moves are characterized according to the contribution they make to the overall text (Bolander 2013; Locher 2006; Miller and Gergen 1998). Fifteen different discursive moves were found in the email counseling corpus. They are listed alphabetically in Table 5.3 with a short explanation for each move.

I discuss each discursive move in detail with examples of how the interactants utilize it. Some discursive moves are used only by the clients, some only by the counselor, and some by both the clients and the counselor. I therefore specifically elaborate first on the moves that are only used by the clients (Section 5.3.1), before going on to discuss the discursive moves that are only employed by the counselor (Section 5.3.2). In a third step, I will focus on the discursive moves that are used by both interactants (Section 5.3.3). Finally, I will touch upon how the differing setup of the two datasets (the content of the counseling is written either in the body of the email or in the word document) influences the occurrence of some discursive moves.

Table 5.3 Discursive moves (ordered alphabetically) with explanations

Discursive move	Explanation
Advice-giving	Recommendation of introspection or action
Apology	Apology (content must be apology, lexeme ‘sorry’ is not enough)
Assessment	Evaluation of a particular situation / feeling / coping technique, etc.
Farewell	Farewell and signature
General information	Information that is general, i.e., no personal link to the client’s situation
Greeting	Greeting formula
Introductory message	‘Standard’ message explaining online counseling, including confidentiality issues
Metacomment	Remarks concerning structure of text / counseling
Problem statement	Explicit mention of a personal problem that requires counseling
Quoting	Copy-pasted text of (a) previous entry / entries
Referral	Referral to other (professional) help, including specific addresses, websites, etc.
Request for advice	Asking explicitly for advice on a specific issue
Request for information	Asking for (more) information about a specific topic
Scheduling	Setting up / agreeing on / confirming a date for a new entry
Thanks	Thanking

### 5.3.1 Client-Specific Discursive Moves

The two discursive moves that are only used by the clients are *problem statements* and *requests for advice*. These two discursive moves are closely connected to an advice-seeker role and are not used by the counselor.

*Problem Statement*

The discursive move *problem statement* is one of the first moves to occur in the threads. It is an explicit mention of a problem that troubles the client and therefore requires counseling. Specifically, a problem, such as situations, mental states, or feelings that cause the client stress, anxiety, or trigger other negative reactions, are presented in *problem statements*. They can be clearly distinguished from *assessments* insofar as a *problem statement* identifies something as being seen or felt as missing, wrong, or troubling. *Problem statements* can occur not only in early but also in later entries, as clients might come across further problems or feel a marked deterioration of their well-being. The following examples illustrate *problem statements* from the corpus:

- (5.25) Anna (Thread Anna; Entry 1)  
I've had what some would describe as panic attacks while I've been here and they've been more frequent in the past month. My heart races, my palms sweat, I can't think at all, and I start to cry, or I find myself unable to talk. This has happened in public and when I'm on my own.
- (5.26) Chris (Thread: Chris; Entry 3)  
I do feel almost completely helpless, and recently I have completely stopped confiding in my close friends, in case they are judging me for what I am going through.
- (5.27) Mel (Thread: Mel; Entry 5)  
I think I get too influenced by other people's opinions of me and their opinions of what I think, sometimes to the point where I don't know what I should think or don't trust my

own thoughts and opinions. I find it difficult to believe that my contribution to anything is worthwhile. In some ways it's like the 'children should be seen and not heard' philosophy has stayed with me into adulthood. I also worry that people don't like me or think I'm boring because I'm quiet.

Anna illustrates in detail how she experiences a panic attack after introducing it as a problem in example (5.25). Chris describes his reaction towards feeling *helpless* and how it influences his relationships in example (5.26). In example (5.27), Mel talks about her low self-esteem. All three examples highlight the problematic situations that the clients experience.

#### *Request for Advice*

While there is a wide range of ways for clients to implicitly ask for help (for example, with *problem statements*), they can also use the discursive move *request for advice*, in which the client explicitly asks for advice about a situation or problem. A request for advice is usually written in interrogative form. This discursive move must be distinguished from a *request for information* (see Section 5.3.2), in which the counselor asks for information about a problem or situation, rather than for advice. *Requests for advice* are rarely used by the clients in my data; these are all three examples that occur in the corpus:

- (5.28) Ellie (Thread: Ellie; Entry 3)  
Should I speak to my sister?

- (5.29) Ellie (Thread: Ellie; Entry 5)  
Have you got any ideas how I can approach the subject and make sure that my dad is supportive of my choice?
- (5.30) Taylor (Thread: Taylor; Entry 11)  
**I know this is our last session so I was wondering if you could give me some tips for coping?**

These three requests for advice clearly confirm the role of the clients as advice-seekers.

### 5.3.2 Counselor-Specific Discursive Moves

The counselor uses five discursive moves that the clients do not use. These five discursive moves can be split into three categories themselves. First, the *introductory message*, which contains explanations as to how the online counseling unfolds. Second, moves that can be classified as different types of advice: *advice-giving*, *general information*, and *referral*. *General information* and *referral* can be seen as specialized *advice-giving* moves (see also Locher 2006). Third, the interactive nature of email counseling allows the counselor to request further information from the client. While *requests for information* do not necessarily highlight the advice-giver role of the counselor, the other four moves clearly do.

#### *Introductory Message*

The *introductory message* is a text passage that occurs in the second entry of all five threads. These are the first entries written by the



counselor in each thread. The *introductory message* is a pre-written text block in which the counselor explains how email counseling works and asks clients whether they understood the confidentiality agreement.

(5.31) Counselor (Thread: Chris: Entry 2)

As you can see I am writing in coloured font. This is so when you write back, my words will stand out, making it easy to spot what I have written. When I respond to your reply, I will interweave my words into yours, so you can easily see what I am responding to. I will also write questions in italics so they are simple to spot. Hopefully this makes sense!

When you write back, please feel free to express yourself in any way you think helpful. Some people are creative and like to include art work, lyrics, poems (their own or other's), and links to music to help me understand them better. Others prefer to stick to writing in a letter or journal style. Please just be yourself when you write to me Chris.

My aim today is going to be to try to really 'get' where you are coming from. I'm likely to make mistakes, to get it a bit wrong sometimes. Please do clarify or correct me Chris, and guide me to focus on what you will find most helpful, because this will help me to understand you better as we go along. Today I will focus on helping you identify the thoughts and feelings you are experiencing, and perhaps suggest some ways you could experiment with, in order to move forward in a more positive direction. I hope that's OK.

Before I start to respond to you, I want to check that everything was clear with the confidentiality and how this process works. I'm aware that you've had counselling with us

before, while I don't like to assume that you will have remembered that information! Please do ask me to clarify if any of it wasn't clear.

### *Advice-giving*

Text passages in which the counselor recommends introspection or action are *advice-giving* moves. It is important to note here that this is not meant as directive advice on what the client should do, but rather suggestions or coping techniques that clients can choose to take up if they wish to do so. The counselor can give advice in various ways:

- (5.32) Counselor (Thread: Ellie; Entry 4)  
 Something I'm always aware of Ellie, when discussing difficult things with people, is to think about what will help them hear what I have to say. If we hear someone empathising and telling us the benefits of something they propose, we are more open to hearing it, than if they just tell us the problem and what they want us to do differently. Then they can feel a bit got at.
- (5.33) Counselor (Thread: Mel; Entry 8)  
 I'm thinking Mel about situations where it might not matter too much to have a different opinion, while it gives you an opportunity to practice, and get used to hearing yourself express your own view.
- (5.34) Counselor (Thread: Chris; Entry 2)  
 Remember 'what we focus on gets bigger'! The more we listen to the anxious thoughts, the bigger the anxiety gets, the more we focus

on thoughts and actions that are calming, the calmer we feel!

- (5.35) Counselor (Thread: Ellie; Entry 4)  
See my suggestions as things to experiment with, and see how you get on.
- (5.36) Counselor (Thread: Anna; Entry 10)  
Keep on doing what you doing, and you will continue to progress :-)

Examples (5.32) and (5.33) illustrate how the counselor suggests coping techniques for the clients to try out. In example (5.34), the counselor reminds the client of a specific coping technique that they have talked about previously. Further, example (5.35) illustrates the counselor's non-directive approach to advice in the sense of making it explicit that it is the clients' choice which suggestions they would like to focus on. Finally, example (5.36) shows how the counselor praises Anna's progress and urges her to continue with everything that has helped so far.

### *General Information*

The discursive move *general information*<sup>12</sup> designates that a text passage delivers information that is general; that is, it has no personal link

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<sup>12</sup> The discursive move *general information* had coder agreement just below 85%. A manual analysis showed, however, that the disagreement for *general information* stemmed from an overlap between the discursive moves *general information* and *advice-giving*. Collapsing these two codes into one for the coder agreement calculation resulted in agreement over 85%. Since providing general information can be interpreted as a specific type of giving advice, I

to the client's specific situation. While of course all text passages refer to the client's problems overall, the counselor at times illustrates specific mental health issues with *general information*, for example, on what can cause anxiety. While *general information* is not advice per se, in the specific practice of email counseling, it often functions as advice. However, the distinction centers around the fact that the nature of these *general information* moves differs with regards to interpersonal aspects (a marked difference is for example the pronounced use of plural first person pronouns, rather than second person pronouns as used in *advice-giving* moves). The following examples illustrate these points:

(5.37) Counselor (Thread: Anna; Entry 2)

When we are feeling low and anxious it is normal to find at the end of the day we focus on what we haven't finished or got done, or on what is still on our to do lists. Naturally this focus makes us feel even more anxious, stressed and low!

(5.38) Counselor (Thread: Ellie; Entry 2)

Basically, if we repeat the same clear, simple message (as if the record were broken and repeating the same line of music over and over), the other person cannot draw us into a conversation, as the repeated phrase (polite and simple) acts as a brick wall.

Whereas the examples for the *advice-giving* move advised the clients, for example, to experiment with certain techniques, *general*

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deemed the just below 85% agreement for the discursive move *general information* negligible.

*information* moves are employed to explain concepts, feelings, or inter-personal issues and so on.

### *Referral*

*Referral* is the second discursive move that can be classified as a special case of *advice-giving*. When the counselor uses a *referral* move, she gives advice, but in a very specific form: she encourages the client to (additionally) seek personal or professional help elsewhere, and gives addresses, phone numbers, or hyperlinks in order for the clients to find more information on the topic at hand. Alternatively, she refers to specific documents that she attaches as further information (e.g. presentation slides of an exam anxiety workshop she held). Due to the electronic format of the interaction, *referrals* allow the counselor to include other genres, such as videoclips, music, or book recommendations:

- (5.39) Counselor (Thread: Mel; Entry 6)  
 Here's another link to useful ideas of building self-esteem:  
<http://www.getselfhelp.co.uk/esteem.htm>
- (5.40) Counselor (Thread: Mel; Entry 6)  
 'Live in the moment!' That's a great mantra, and reminds me of a really good book called 'The Power of Now'. [http://www.amazon.co.uk/Power-Now-Eckhart-Tolle/dp/B0079UA8QU/ref=sr\\_1\\_2?s=books&ie=UTF8&qid=1392368004&sr=1-2&keywords=the+power+of+now](http://www.amazon.co.uk/Power-Now-Eckhart-Tolle/dp/B0079UA8QU/ref=sr_1_2?s=books&ie=UTF8&qid=1392368004&sr=1-2&keywords=the+power+of+now)

- (5.41) Counselor (Thread: Taylor; Entry 2)  
 This video clip also describes this process really well:  
[http://www.youtube.com/watch?feature=player\\_embedded&v=VYht-guymF4](http://www.youtube.com/watch?feature=player_embedded&v=VYht-guymF4)

All three discursive moves that were just introduced (*advice-giving*, *general information*, and *referral*) strongly confirm the counselor's role as advice-giver. They are, therefore, the discursive moves that can be seen as opposite to the ones previously discussed that are only employed by the client (*problem statements* and *requests for advice*). They are, in fact, complementary to each other, as mentioning a problem and requesting advice can be responded to with such discursive moves that aim to give advice.

#### *Request for Information*

The final move that is only used by the counselor is a *request for information*; it occurs when the client is asked to share more information about a specific theme. The counselor can, for example, ask for further information about a problem, situation, or a person, but also about certain hunches that she wants to corroborate with the client's confirmation. Comments in interrogative form in which the counselor asks the clients whether something was understood are also coded as *requests for information* as the counselor wants a reassurance that the clients really comprehended what she meant to convey.

- (5.42) Counselor (Thread: Chris; Entry 2)  
 Help me to understand what you think has changed Chris, as your anxiety with meeting

people you don't know well seems to be a more recent issue for you.

- (5.43) Counselor (Thread: Chris; Entry 4)  
*I wonder how you think your friends would react if they knew you were concerned about them judging you? What might they say to you?*
- (5.44) Counselor (Thread: Mel; Entry 8)  
*How could you present this idea to your boyfriend in a way that would help him to see it as a positive, rather than you not wanting to spend time with him?*
- (5.45) Counselor (Thread: Anna; Entry 2)  
*How does this sound as something to try Anna?*
- (5.46) Counselor (Thread: Taylor; Entry 4)  
*Does that make sense Taylor?*

Example (5.42) illustrates how the counselor asks for clarification on a specific issue. In example (5.43), the counselor tries to encourage Chris to reflect on his friend's reactions. In example (5.44), Mel is explicitly asked to think of a solution with the help of outlining the goal of how to present the idea. Examples (5.45) and (5.46) are *requests for information* regarding the clients' cooperation and comprehension.

Some of the text passages that I coded as *requests for information* would possibly be interpreted as *advice-giving* moves in interrogative form in other studies. However, the counselor clearly says in the *introductory statement* that all the text passages written in italics should be interpreted by clients as questions. These questions are aimed to receive a response from the clients. I have therefore decided to code such

instances as *requests for information*, even if their content suggests that they could also have been coded as *advice-giving* moves. I believe that coding these text passages as *requests for information* gives credit to the counselor's intended purpose in such text passages; it also keeps me from simply imposing my interpretation or that of other researchers on the data. Finally, this practice also accounts for the collaborative and interactive nature of counseling as *requests for information* are clearly used to trigger further interaction between the clients and the counselor.

### **5.3.3 Discursive Moves Employed by Both the Clients and the Counselor**

There are, of course, discursive moves that are used by both the clients and the counselor. Many of these moves are not specific to a counseling context. In other words, they are not closely connected to the content of the counseling; rather, they are used to facilitate the communication and at times the relationship between the clients and the counselor. There is one notable exception, namely the discursive move *assessment*, which I will discuss first.

#### *Assessment*

The discursive move *assessment* refers to a text passage in which something is evaluated. The text passage contains a clear evaluative component, but that does not mean that the content of the evaluation necessarily needs to be judged as good or bad. For example, the counselor evaluates a problem, a narrative, or a client's general progress:



- (5.47) Counselor (Thread: Anna; Entry 2)  
That certainly sounds like panic attacks Anna, and I'm aware of how frightening they can be, especially when you are away from home and the comfort and support of your family, boyfriend and friends.
- (5.48) Counselor (Thread: Chris; Entry 2)  
I can hear how tough this is for you Chris, and I get the sense that you feel less in control now the depression is not so predictable. It sounds as if the predictability of it helped you to cope and focus on knowing you would feel better in the morning, shifting the focus a little. Now it sounds as if you feel more helpless to deal with the depression.
- (5.49) Counselor (Thread: Chris; Entry 8)  
Your determination and openness to challenge yourself and make changes is a real credit to you, and shows how much courage you have, as it's not easy seeking help and acknowledging our struggles to others. 😊
- (5.50) Counselor (Thread: Mel; Entry 8)  
I can hear how this is helping you to shift your focus Mel, and gain a more balanced view of your day 😊 It's ok not to be able to think of three things, while don't forget you can include things that may seem insignificant, like enjoying a tv programme, or a piece of music, or being smiled at by the shop assistant!

In examples (5.47) and (5.48), the counselor evaluates *problem statements* made by the clients. She reiterates and evaluates the problematic situation. While this highlights her advice-giver role, her evaluative component also positions the clients as legitimate advice-seekers. In

contrast, examples (5.49) and (5.50) highlight how the counselor can assess the clients' progress. While the previous two examples focused on the positions of advice-giver and advice-seeker, the latter two examples position the clients as active self-helpers (see Chapter 8 for an illustration of how this move from advice-seeker towards active self-helper takes place in the threads).

In turn, the clients can assess a suggested coping technique (including how its application went), an intention of wanting to use a specific coping technique that was suggested, or a situation that has improved, and so on. Typically, clients not only talk about troubles, but also report on progress or success. The following examples illustrate these points:

- (5.51) Taylor (Thread: Taylor; Entry 9)  
I think this is a good idea! As weird as it sounds I try to watch programs now with a strong character in them, and think, what would they do? They wouldn't mope, and it has been helping a little bit :]
- (5.52) Anna (Thread: Anna; Entry 7)  
You're right, I am making progress - I had a panic attack on Wednesday (I missed my flight to [PLACE] !), but managed to calm myself down relatively quickly by thinking logically. I made it back eventually!
- (5.53) Chris (Thread: Chris; Entry 9)  
Thank you, it has been a fairly long and arduous journey, so I'm lucky with my courage and determination in that it helps me keep trying and not giving up!

These examples exemplify a range of *assessments* that clients produce: evaluating advice that the counselor previously gave (example 5.51); reporting on progress that is being made (example 5.52); or providing a summary of the client's success (example 5.53). These *assessments* clearly indicate the clients' progress and move them away from their initial role as advice-seekers. As will be illustrated in later chapters, the use of *assessments* is a key factor in the clients' improvement of their well-being.

The following discursive moves are less focused on the counseling content and are therefore introduced more briefly than the discursive moves illustrated so far. Bolander (2013: 104) has called discursive moves that are detached from the focus of her research as "supplementary discourse moves." I apply the term here as including discursive moves that are not directly related to the content of the counseling, but I also argue that they nevertheless have important interpersonal functions.

### *Metacomment*

*Metacomments* are text passages that structure either the text itself or the counseling content; they may also refer to comprehension. *Metacomments* regarding the text itself can be passages that ensure the cohesion of the text to highlight the starting point of a new exchange (5.54), or remarks that guide the reader as to how the current text passage is connected to earlier ones. The clients and the counselor use *metacomments* to let the other interactant know what comes next (5.55) or

what they are thinking about (5.56). Specifically, the counselor also uses *metacomments* to ensure the client's comprehension of previous text passages. These comprehension comments (5.57) are in declarative form. Comprehension questions that are in interrogative form were coded as *requests for information* since the counselor aims to trigger a response.

- (5.54) Counselor (Thread: Taylor; Entry 7)  
I guess red goes with blue! 😊
- (5.55) Ellie (Thread: Ellie; Entry 5)  
I will concentrate on answering the issues and ideas you raised in your e-mail to me.
- (5.56) Taylor (Thread: Taylor; Entry 8)  
I feel like this is such a small paragraph to describe so much.
- (5.57) Counselor (Thread: Mel; Entry 6)  
Please do let me know if I have misunderstood anything or missed responding to something important.

### *Apology*

A few times, interactants apologize for some aspects in the counseling exchanges, for example for the length of an entry.

- (5.58) Anna (Thread: Anna; Entry 1)  
Sorry if it's quite long. I just wanted to explain a bit!

*Thanks*

In the discursive move *thanks*, interactants thank their readers for the help that was either provided earlier or will be provided if a question or issue is discussed or answered.

- (5.59) Chris (Thread: Chris; Entry 6)  
 Thank you very much for suggesting these links to support groups.
- (5.60) Counselor (Thread: Taylor; Entry 4)  
 Thanks for helping me to understand you better Taylor.

*Greeting*

The discursive move *greeting* includes the typical address forms in emails. Strikingly, some of the interactants also greet each other in the word document that is sent back and forth:

- (5.61) Counselor (Thread: Chris; Entry 6)  
 Hello Chris,
- (5.62) Counselor (Thread: Taylor; Entry 8)  
 Hi Taylor

*Farewell*

*Farewell* moves are usually the very last move in the entries and refer to conventionalized farewell structures, including the interactants' signature (name). These are also used in both types of online counseling:

- (5.63) Chris (Thread: Chris; Entry 10)  
 Many thanks,

- (5.64) Mel (Thread: Mel; Entry 7)  
Best wishes,

### *Scheduling*

Text passages that solely deal with setting up, agreeing on, or confirming as to when a next entry will be written are discursive moves that I labeled *scheduling*. This move occurs more often within the dataset in which the content of the counseling is written in the body of the email. The reason for this being that the organizational questions were answered in the emails rather than in the word documents in the other threads. Nevertheless, the interactants that use the word document at times insert a date as a way of letting the other interactant know where they started to respond (see more on this in the following section):

- (5.65) Counselor (Thread: Anna; Entry 2)  
I have booked you in another slot for [DATE]. I have made it a few weeks time to give you a chance to try out the strategies and see how they are working.
- (5.66) Counselor (Thread: Chris; Entry 8)  
10.03.14

This move is a specific type of *metacomment*. For the chapters in Part II, I have kept these two discursive moves separate. This is necessary in order to highlight the fact that such scheduling moves occur in email counseling but not in other investigated practices, such as the online advice column in Locher's (2006) study. In the later discussions in Part III, I only talk about the discursive move *metacomment* under which I

subsume both *metacomments* and *scheduling* moves for ease of comprehension.

### *Quoting*

The discursive move *quoting* refers to a copy-pasted text passage that was written before the current entry and is manually copy-pasted into a new place. The copy-pasted text can be from the other interactant or from the same interactant. However, the text must have appeared in the exact same wording in a previous entry. One *quoting* move can include text passages from several entries, as long as they are from the same thread.

### **5.3.4 Discursive Moves Occurring in the Body of the Email or in the Word Document**

One would possibly not expect differences in the use of discursive moves with regards to whether the content of the counseling is written in the body of the email or in the word document. However, there are discursive moves that are favored in the threads that contain the counseling content in the body of the email and some discursive moves that occur predominantly in the threads that use the word documents. To begin with, the discursive move *quoting* occurs mostly in the body-of-the-email threads. As mentioned in Chapter 3, the counselor copy-pastes the client's previously produced text into her response entry. She can then clearly answer the client's *problem statements*, *assessments*, and *requests for advice* right where the client has written them. The

simple fact that the counselor and the client send one and only one word document back and forth means that neither interactant needs to copy-paste text from a previous entry as the text is still in the word document and copy-pasting would become superfluous. While this means that the discursive move *quoting* does not occur in the word documents, it does not mean that there can be no reported speech in these threads. However, they are simply not coded as *quoting* since they are part of a larger discursive move that encapsulates the reported speech.

Second, the discursive move *scheduling* occurs mostly in the threads that contain the counseling content in the body of the email. The counselor, the one responsible for booking an appointment, utilizes a *scheduling* move at the end of the entry to set up a date by which the client should reply next. That such *scheduling* moves occur in these emails is rather obvious. In the threads that utilize the word document, the clients and the counselor negotiate such bookings in the emails in which they send the word document. In other words, the word document seems to be safe-guarded for the counseling itself. An exception is the initiation of the closure process of the counseling, which is signaled in all five themes by referring to a last session or the short-term therapy format that the counseling service offers (see Chapter 10). Additionally, with all three clients there seems to be negotiation going on as how to best signal that the new content of the specific entry is starting (see Chapter 3). Hence, while *scheduling* moves occur in both types of the email counseling exchanges, they occur in distinct ways and with distinct interactional goals.



Third, the clients and the counselor utilize the discursive move *metacomment* for a very specific activity in the word document. As example (5.32) illustrated, some of the interactants that employ the word document use *metacomments* to establish that new text is written in a specific color. Within the *metacomment*, they name the color so that the other interactant can more easily identify new text passages. The counselor introduces this strategy in all three word documents; however, not all three clients engage with it. Chris, for example, only uses the *scheduling* move to indicate where his present entry starts (i.e., he gives a date rather than specifically commenting on what color he has chosen for the present entry). As the clients in the body-of-the-email threads rarely copy-paste any text from a previous entry or interlace their answers within a previous entry, their newest input appears at the top of the text in the body of the email and is easily recognized by the counselor. Thus, they do not need specific metacommunication to reveal which text passages are the newest ones. Nonetheless, the counselor still mentions that she writes her answers in a different color, but this comment is only encapsulated in the *introductory statement* in these two threads.

Finally, *greetings* and *farewells* are carried out quite differently in the two different types of threads. In the body-of-the-email threads, the counselor and the clients use *greetings* and *farewells* in an established way. They are all clearly avid users of email and know from previous experience that *greetings* and *farewells* are a common practice in email communication. However, with the use of a word document, it is

not easy to decide how, or whether, to greet and sign off in the document. This is made even more complicated by the assumption that the interactants in all likelihood use a greeting and farewell formula in the email with which they send the word document back and forth. Therefore, this is an interactional practice that needs to be established between the counselor and the clients in their interaction.

#### **5.4 Comparison with Previous Literature on Discursive Moves**

In Section 5.3, I have described all the discursive moves that I found in my corpus. These descriptions allow me to compare my results to previous studies that have identified the discursive moves of other social practices. Table 5.4 provides an overview of this comparison.

There are slight differences in the ways that individual researchers characterize the discursive moves that they found. Hence, the comparison presented in Table 5.4 should be taken cautiously. There are cases in which I did not use a label that others used, because it was not feasible in the context of my study. However, those discursive moves still occur in my data. Two discursive moves that clearly do are *own experience* and *narratives*. All the clients in my data naturally share their own experience and report on past events with the help of narratives. As a matter of fact, I discuss the clients' use of narratives in Chapter 8 in detail. For my study, however, those labels did not lend themselves well as discursive moves. In Table 5.4, I have nonetheless

indicated that such text passages occur in my data by administering an (x) in the table.

Table 5.4 Comparison of discursive moves found in previous studies and the present one (continued on next page)

Individual study									
	→								
Discursive move ↓	Locher (2006)	Lindholm (2010)	Morrow (2012)	Placencia (2012)	Bolander (2013)	DeCapua et al. (2015)	Hampel (2015)	Rudolf von Rohr (2018)	Present Study
Advice-giving	x	x	x	x	x	x	x	x	x
Assessment	x	x	x	x		x	x	x	x
Apology	x	x	x		x		x	x	x
General information	x	x	x	x	x			x	x
Explanation	x		x	x		x	x	x	
Farewell	x	x	x	x				x	x
Greeting	(x)	x	x	x				x	x
Metacomment	x	x	x		x				x
Own experience	x		x	x				x	(x)
Disclaimer	x		x	x				x	
Request for advice	x				x			x	x
Thanks	x				x			x	x
Referral	x		x						x
Request for information		x			x				x
Prediction				x			x	x	
Question	x		x						
Narrative		x							(x)
Problem statement	x								x
Support / empathy		x				x			



Nevertheless, a comparison of these labels is legitimate as they indicate that some discursive moves seem to occur in several practices and others seem to be specific to only a few practices or even just one. The discursive move that was found in all nine studies is *advice-giving*. Since all of the studies deal in some way with giving advice, this is rather unsurprising. Furthermore, *assessments* are employed in eight of the studies, including the present one. The only study that did not include this label is Bolander (2013). However, Bolander (2013: 99) uses an intricate categorization for evaluations and judgements that the bloggers and the commenters carry out in her data. Hence, discursive moves such as *agreement*, *disagreement* or *criticism* could be summarized under an *assessment* super-category in Bolander's study. That is, the act of assessing a previous statement, a situation, and so on actually does occur in all nine practices as well.

Furthermore, seven additional discursive moves occur in at least five practices: *apology*, *explanation*, *farewell*, *general information*, *greeting*, *metacomment*, and *own experience*. All of these except *general information* and *own experience* can be seen as discursive moves that are not necessarily connected to the focus of the research within those nine studies. In other words, they are what Bolander (2013: 104) called "supplementary discourse moves." It is easy to imagine that these discursive moves occur in various other practices as well that are not focused on giving advice. There are some further moves that occur in only two or three practices as well or in fact some that only occur in one practice.

There are also several discursive moves that occur in several of the previous studies but were not part of my categorization. I will discuss a few of these discursive moves here. For example, I did not code for the discursive move *explanation*. While the counselor and the clients, of course, explain problems, advice, or evaluations, for example, I included such explanations in the discursive moves they aimed to explain. Moreover, I did not code for a *disclaimer* move. Due to the fact that *disclaimers* occurred only rarely in my corpus, I decided not to create a separate category for these moves. Finally, there are some discursive moves that were coded in one or two practices previously studied, but not in my data. For example, predictions in the sense of outlined steps of applications of coping techniques do occur in my corpus; however, they were treated as overall *advice-giving* moves rather than as a separate type of discursive moves.

Further, there are specific discursive moves that occur in my corpus, but have not occurred in previous studies or in only a few specific previous studies. For example, Locher's (2006) analysis of the problem letters revealed two specific moves that are closely associated with the advice-seeker role, namely *problem statements* and *requests for advice*. These two discursive moves appear in my study as well. However, in studies that do not analyze the initial input of an advice-seeker, these moves obviously do not occur (such as in Lindholm's (2010) study, which is focused on the advice-giver). There are two discursive moves that only occur in my data, but not in any of the other studies. The *introductory message* occurs due to fact that most clients have not

participated in email counseling. Additionally, it is a common practice in some types of counseling to make the clients aware of how the counseling process will work (see e.g. Ekberg et al. 2014). Finally, the discursive move *scheduling* occurs in my corpus when the clients and the counselor need to book an appointment for their next session. In none of the other researched practices of the previous studies is there a need to organize such a new appointment.

### 5.5 Summary

The present chapter outlined the specific themes discussed by the clients and the counselor. The clients and the counselor introduce themes, but they sometimes have different goals in mind. While clients talk about their troubles in general or experiential terms, the counselor introduces themes that can be identified as underlying or correlating factors of troubles that the client mentioned previously. These themes are usually centered around concepts or notions that are easier to work with in a therapeutic context. Additionally, the counselor introduces these themes due to her expertise, as she knows, for example, that some mental health issues are related, such as ‘anxiety’ and ‘depression’.

I further showed that the interactants use a specific set of discursive moves in their interaction. Some discursive moves are used by the clients as well as the counselor. These moves frequently do not include text passages that deal with the actual content of the counseling, but rather with organizational or interpersonal aspects of the exchanges (the notable exception being *assessments*, see below). Moreover, there are

discursive moves that are centered around an advice-seeker or an advice-giver role. Discursive moves that invoke an advice-seeker role include *problem statements* or *requests for advice*. These are only used by the clients. Then there are also discursive moves that are closely connected with an advice-giver role, such as the discursive moves *advice-giving*, *general information* and *referrals*. These are only employed by the counselor. Still, there is one discursive move used by both the clients and the counselor that often contains text passages that clearly deal with counseling content: the discursive move *assessment*.

Finally, a comparison of the discursive moves found in the present study and those of previous studies revealed extensive overlaps of some discursive moves, but also revealed that almost each study coded for some discursive moves that other studies did not code for. As my comparison of, for example, the discursive moves *assessments*, *own experience* and *narratives* revealed, this does not mean that these kinds of contributions to the text did not occur. It simply means that they were either not the focus of the investigation or they might be subsumed under other discursive moves. As a result, the findings of the comparison should be viewed very cautiously. In order to provide a more detailed holistic description of the data in my corpus, I have also analyzed the distribution of the themes and the discursive moves in each thread (Chapter 6), the sequence of discursive moves (also Chapter 6) and the linguistic realization of the four most frequent discursive moves (Chapter 7).



## **Chapter 6 Distribution and Sequence of Themes and Discursive Moves**

### **6.1 Introduction and Methodology**

In the previous chapter, I highlighted which kind of themes and discursive moves are used. In the present chapter, I focus on whether specific patterns of themes and discursive moves occur. First, I describe the distribution of themes and discursive moves from three perspectives: the overall corpus, individual threads, and individual entries in a thread. Second, I want to establish whether there are patterns of sequence in which discursive moves are employed. I investigate, for example, whether a client's *problem statement*<sup>13</sup> is regularly followed by an *advice-giving* move from the counselor. The sequence of discursive moves illustrates how the collaboration between the clients and the counselor takes place on a discursive moves level.

These results allow me to present a holistic description of the social practice of email counseling. The results of the content analysis presented in Chapter 5 demonstrated that the interactants discuss the clients' well-being, i.e., the counseling aims to improve clients' mental health rather than to inform them about a specific topic (see e.g. Silverman 1997 on HIV/AIDS counseling or Jager and Stommel 2017 on drugs and alcohol counseling). By illustrating how these themes are distributed, I can illustrate how well-being counseling takes place in the threads. Further, Chapter 5 included a description of each discursive

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<sup>13</sup> I continue my practice from Chapter 5 in that I write labels of themes in single quotation marks and labels of discursive moves in italics.

move that occurs in the corpus. Some of these have been found in other practices as well. Looking closely at the distribution and sequence of discursive moves will help to characterize email counseling in more detail and will facilitate a comparison of email counseling with other social practices. Locher (2006: 111), for example, has found that *advice-giving* moves are regularly preceded by an *assessment* move, with this type of pattern constituting a “stepwise entry into advice.” I aim to establish whether such patterns occur within my corpus as well.

Moreover, a detailed description of the content and the composition of the counseling can benefit practitioners. I have regularly been asked by practitioners how they can convey empathy in emails and how they can negotiate the therapeutic alliance so that both interactants feel they are part of an egalitarian relationship. In addition, the counselor discussed the importance of expertise about the content of counseling in the interview:

I know what to look out for because of my experience of talking to a range of clients over the years. I know that clients struggle with an aspect of their lives because they describe a specific experience or a specific emotion. I often talk to clients about themes. From their descriptions of experiences and emotions I might get a sense that there’s a lot of anger, there’s a lot of loss. So I actively look out for such themes and how they might be linked together. (Interview)

My analysis describes how the interactants talk about specific themes and what types of discursive moves they use to do so. For example, I can demonstrate whether the counselor mitigates a potential face-threat

through a specific pattern of discursive moves, i.e., a stepwise entry to advice. Additionally, specific patterns might also be used to encourage clients to actively participate in the therapeutic alliance, such as using the discursive move *request for information* as a signal to clients that they can provide further information in a specific part of the thread. Such descriptions can help practitioners to see overtly how they accomplish interpersonal effects that benefit the therapeutic alliance.

In addition, I have explained in Chapter 4 that the analysis of the form and function of linguistic expressions is based on the results of the content and discursive moves analyses. Locher (2006) found that the interactants in her study used different patterns of discursive moves in different topics. She reported, for example, that the utilization of discursive moves in the topics ‘relationships’, ‘emotional health’, and ‘sexuality’ differ – at least to a certain degree – from patterns found in other topics, such as ‘sexual health’, ‘drugs’, ‘fitness/nutrition’ or ‘general health’ (Locher 2006). This could occur in my data as well. Further, results of the distribution of themes can lead to an examination of linguistic expressions within a theme that is frequently discussed. It is thus essential for later analytical steps to have a clear description of patterns of themes and discursive moves.

I will first discuss the results of the content analysis, i.e., the distribution of themes. I answer the following research questions with regards to themes:

- How are themes distributed overall?
- How are themes distributed across threads?

- How are themes distributed across entries?

The analysis of the distribution and sequence of discursive moves takes the findings from these three research questions into account. In other words, discursive moves will be looked at in connection with the specific themes in which they occur, if possible. The following research questions about discursive moves are answered:

- How are discursive moves distributed overall?
- How are discursive moves distributed across themes?
- How are discursive moves distributed across threads?
- How are discursive moves distributed across entries?
- How are individual discursive moves sequentially framed?

The first four of these research questions are concerned with the distribution of discursive moves. The results from these investigations will show, for example, whether the distribution of discursive moves differs from one theme, such as ‘self-esteem’, to another theme, such as ‘depression’. Moreover, I will show whether individual differences between threads arise. Further, I will demonstrate whether specific discursive moves, such as *problem statements*, are preferred in early entries whereas other types of discursive moves, such as *assessments*, are employed in later entries. Such results could indicate whether patterns of discursive moves across entries might reflect a change in the clients’ identities from advice-seekers to active self-helpers. Finally, the last research question deals with the sequence in which the

discursive moves appear. Due to reasons of space, this analysis is limited to the four most frequent discursive moves occurring in the three most frequent themes. As I pointed out above, the analysis of the sequence will show, for example, whether a stepwise entry to advice is practiced in email counseling.

*Table 6.1 Methodological steps 1 to 3 revisited: Distribution of themes and distribution and sequence of discursive moves*

Type of Analysis	Focus of Analysis		
Content analysis of <b>themes</b>	Types		
	Distribution	overall individually temporally	
<b>Discursive moves</b> analysis	Types		
	Distribution	overall individually temporally	
	Sequence	overall	preceding following
	Linguistic realization		
<b>Form and function</b> analysis of linguistic expressions	Relational work and positionings		

Table 6.1 shows that, from a methodological point of view, the focus still lies on the content analysis and the discursive moves analysis. I have highlighted in blue the specific foci that are answered in this chapter.

Numeric results for the distribution of themes and discursive moves were generated automatically in NVivo<sup>14</sup> and were then interpreted. I conducted coding queries within NVivo for the content and the discursive moves analyses. The queries with regards to the distribution of themes and discursive moves in the entire corpus were simple coding queries. The queries with regards to the distribution of the other research questions were generated through matrix coding queries. Matrix coding queries are used to “cross-tabulate coding” (QSR International 2014). Comparisons between two types of parameters or codings can be made. For example, a matrix coding query can reveal how many *advice-giving* moves (i.e., one type of discursive move) occur within the theme ‘self-esteem’ (one type of theme). Both simple coding queries as well as matrix coding queries can be conducted automatically within NVivo. Last but not least, I analyzed the sequence of discursive moves. This was not possible in NVivo. Instead, I extracted every instance of the four most frequent discursive moves within the three most frequent themes. I then analyzed each of these discursive moves manually and identified which discursive move preceded and which discursive move followed the examined discursive move. This proved to be rather challenging and time-consuming as it was not always readily clear which discursive move preceded or followed the one under investigation. I elaborate on how I tackled this challenge at the beginning of Section 6.4 before I present the results of this type of analysis.

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<sup>14</sup> NVivo is a software program that facilitates qualitative analysis of data (see QSR International 2014).

The present chapter is structured as follows: I present the distribution of themes in section 6.2. This is followed by Section 6.3, in which I discuss the distribution of the discursive moves. Section 6.4 describes the sequence of the four most frequent discursive moves in the three most frequent themes. I present a summary of the findings in Section 6.5.

## **6.2 Distribution of Themes**

The distribution of themes is examined with regards to three aspects: first, I examine the distribution of themes in the entire corpus (Section 6.2.1). Second, I analyze whether there are individual differences across the five threads (Section 6.2.2). Third, to understand the development of the exchanges, I highlight whether different themes are discussed in different entries of a thread (Section 6.2.3). The counselor and a client could possibly talk about one theme in the first three entries and another theme in the next three entries. It is more likely, though, that they talk about one theme from entry 1 to 4, another theme from entry 2 to 6, and yet another from entry 3 to 8, for example.

### **6.2.1 Distribution of Themes Overall**

In Chapter 5, I described and gave examples for all the themes that the interactants discuss in the corpus. As mentioned, the themes were established bottom-up through a close analysis of the actual content of the interaction. I coded for themes exhaustively and did not allow for double coding. Table 6.2 shows the number of words that are used in each

theme in the first column, resulting in a total number of 51,752 words. Additionally, the second column presents the percentages of number of words in the corpus overall, with the total number of words corresponding to 100 percent. The open category contains mostly text passages that were quoted from previous entries (in the two threads in which the content of the counseling was displayed in the body of the emails) and structural text passages (such as *greetings*, *farewells*, and the *introductory statement* of the counselor).

Table 6.2 demonstrates that some themes are discussed in more detail than others. The themes ‘anxiety’ and ‘relationships’ reach over 20 percent each. Additionally, the theme ‘self-esteem’ is focused on in 16 percent of the corpus. These three themes (highlighted in yellow in the table) constitute roughly 60 percent of the overall corpus. Two additional themes (highlighted in blue) are discussed to a lesser degree than the three previously mentioned ones, but still noticeably more than others: ‘depression’ (11%) and ‘stress’ (6%). Overall, these five themes constitute 78 percent of the overall corpus. The low percentages of the other themes (‘abuse’, ‘health issues’, ‘others’ health issues’, ‘panic attacks’, and ‘sexuality’) might suggest that their coding is irrelevant or superfluous. However, I argue that their coding and description is salient since these themes are discussed in the threads. To provide a detailed description of the specific online health practice, they need to be accounted for.



Table 6.2 Number and percentages of words in themes in the entire corpus (ordered alphabetically)

Themes ↓	Number of words	Percentages
Abuse	841	2
Anxiety	11,809	23
Depression	5,446	11
Health issues	248	0*
Loneliness	534	1
Others' health issues	521	1
Panic attacks	751	1
Relationships	11,503	22
Self-esteem	8,334	16
Sexuality	868	2
Stress	2,892	6
Open	8,005	15
<b>Total</b>	<b>51,752</b>	<b>100</b>

\*Zero percent does not indicate that the discursive move was not used at all, but rather that the percentage is lower than 0.5 percent and, due to rounding, results in 0 percent.

Furthermore, some of the themes that are focused on less evolve into other themes for specific reasons. I have highlighted some reasons in Chapter 5 already. I briefly illustrate here why the themes that center around health, for example, are not extensively discussed. Health issues, whether the clients' own health issues or the health issues of their relatives, are medical problems that go beyond the counselor's expertise. Thus, the counselor can only refer the client to a medical specialist,

such as a GP or a district nurse, for the specific health issue. The counselor's attention then moves towards the psychological ramifications of these health issues. For example, a client suffering from a physical illness might experience anxiety or depression as a result of the health issues. Clients who have relatives that suffer from a physical illness might be anxious about the progression of the relative's illness or feel stressed because they need to take care of the relative. The counselor can help clients deal with such anxiety and stress. The thematic focus shifts from the themes 'health issues' and 'others' health issues' to the themes 'anxiety' or 'stress'.

While Table 6.2 presents an overview of the themes in the entire corpus, there is still a possibility that the overall distribution of themes might not accurately describe how they are distributed in individual threads.

### **6.2.2 Distribution of Themes According to Individual Threads**

While eleven themes occur in the corpus overall, none of the threads contain all of them. Rather, individual dyads focus on specific themes during their interaction. Even in cases where several clients discuss the same theme, the number of words dedicated to that specific theme differs from thread to thread. Table 6.3 gives an overview of how many words are used for each theme according to each individual thread. I have given the total number of words for each thread (below the clients' names), but only percentages of number of words within the table for

ease of reading. The three most frequent themes within each thread are highlighted in yellow.

Table 6.3 Percentages of words used in themes according to individual threads

Threads →	Anna (n=7,949)	El- lie (n=7,947)	Chris (n=9,570)	Mel (n=13,835)	Tay- lor (n=12,451)
Themes ↓					
Abuse				6	
Anxiety	39	1	45	7	26
Depres- sion			16	18	12
Health issues				2	
Loneli- ness					4
Others' health issues				4	
Panic attacks	9				
Rela- tion- ships		52		29	27
Self-es- teem			18	25	25
Sexual- ity			9		
Stress	13	18		4	
Open	39	30	12	5	6
<b>Total</b>	100	101*	100	100	100

\*Due to rounding, percentages may not add up to 100 percent in this and other tables.

Anna and the counselor focus on ‘anxiety’ and ‘stress’. While Anna introduces the themes ‘stress’ (13%) and ‘panic attacks’ (9%) in her first entry, the counselor identifies anxiety as a cause of Anna’s stress in entry two. As panic attacks and stress are things that a person acutely perceives, it becomes clear why Anna introduces these themes rather than her anxiety (which might have been covert to Anna). She and the counselor subsequently focus mainly on Anna’s anxiety (39%). Anna’s level of stress and her panic attacks only come up sporadically in later entries to either illustrate that she needs further support or to highlight progress when Anna copes well with stressful situations. The 39 percent of the open category is due to the copy-pasted text passages in the counselor’s entries.

Ellie talks about ‘stress’ and ‘relationships’ in entry 1. These two themes make up 70 percent of the entire thread. A closer look reveals that 52 percent of the thread centers on relationship issues. Ellie experiences various problems with her family members, which results in her feeling stressed (18%). The counselor brings up the theme ‘anxiety’, but Ellie does not respond to it. Ellie and the counselor therefore primarily discuss Ellie’s problematic relationships. The 30 percent of the open category results from the counselor’s copy-pasting of previous text passages.

Chris outlines three themes in his first entry: ‘anxiety’, ‘depression’, and ‘sexuality’. ‘Sexuality’ (9%) is not discussed at the same length as the other themes, as Chris does not portray his sexuality as something he wants to focus on. He and the counselor discuss Chris’

anxiety (45%) and his depression (16%) to a much larger extent. The counselor also introduces the theme 'self-esteem' (25%) in entry 2. This theme receives considerable attention as it is a cause of Chris' anxiety and depression. The open category (12%) can be explained with Chris' extensive structuring work (such as using bullet points in the form of *Point 1, Point 2*, etc.) and his elaborate explanations of this work. All in all, three themes that are intricately interlinked are discussed in Chris' thread. This clearly deviates from Anna's and Ellie's cases, where the focus lies on one specific theme.

Mel and the counselor talk about eight different themes. Mel introduces six themes in her first entry: 'depression', 'relationships', 'others' health issues', her own 'health issues', 'stress', and 'abuse'. In addition, the counselor introduces the themes 'anxiety' and 'self-esteem' in entry 2. Nevertheless, only three themes are discussed at length: 'depression' (18%), 'relationships' (29%), and 'self-esteem' (25%). I can only speculate why these three themes receive more attention than others. Some themes might be difficult to talk about as they are taboo topics (such as 'abuse'). Others are out of the counselor's expertise ('health issues'), while they still influence aspects of Mel's well-being, such as her self-esteem. As in Chris' thread, the interactants in this thread also focus on more than one theme.

Finally, Taylor only talks about her feeling of loneliness in her initial entry. This theme is subsequently not focused on in detail (4%). Rather, Taylor and the counselor discuss four themes almost to the same extent: 'anxiety' (26%), 'depression' (12%), 'relationships'

(27%), and 'self-esteem' (25%). These four themes are all introduced by the counselor in entry two. Despite Taylor's scarce input in her first entry (which consists of only 62 words), the counselor manages to introduce four themes in entry 2 that Taylor readily confirms as being problematic for her. These four themes comprise 90 percent of the entire thread. Taylor's thread is, therefore, similar to Chris' and Mel's: at least three themes are focused on extensively.

In the previous section, I have highlighted the five themes that occur most frequently in the entire corpus: 'anxiety', 'depression', 'relationships', 'self-esteem', and 'stress'. All in all, most threads focus on one or several of these frequently discussed themes as well. Nevertheless, there are differences according to whether the content of the counseling is written in the body of the email or the word document; these differences can possibly be explained by the different technical factors (Herring 2007) of email and the word document. On the one hand, Anna and Ellie seem to focus on one specific theme much more radically than the other three clients. Writing the content of the counseling in the body of the email may influence the number of themes that interactants feel comfortable discussing. Whereas students are used to writing lengthy texts in a word document, they might be less inclined to write lengthy emails. I have shown in Chapter 3 that the clients and the counselor use less words in the body-of-the-email threads than in the word-document threads. On the other hand, the open category of the thematic analysis is more prominent in Anna and Ellie's cases (39% and 30% respectively). As mentioned, this stems from the fact that the

counselor copy-pastes text from previous entries into the body of the newest entry. This is obviously superfluous in the case of the word document. Chris' unusually high percentage of the open category in the content analysis (12%) can be explained by his extensive structuring of the text with headers, linking sentences to previous text, and so on.

### **6.2.3 Distribution of Themes According to Individual Entries**

To understand the practice and overall structure of email counseling, it is vital to examine at which stage during the counseling process themes come up. For example, it might be that one theme is discussed in early entries and the interactants move to another theme in later entries. In contrast, the interactants might also discuss several themes in all of the entries.

In Chapter 3, I showed that not all threads consist of the same number of entries. For example, Anna's thread consists of 12 entries while Chris' thread consists of 10 entries. In addition, some of the entries in Anna's and Ellie's threads are organizational, i.e., arrange a date for a new entry, and do not contain any counseling content. It is thus not possible to simply compare all individual entries over all threads to show how themes are distributed from the first entry to the last. Instead, I will show how themes are distributed in one thread that contains the counseling in the body of the email (Ellie's thread) and one thread in which the word document was used (Chris' thread).

*Ellie's Thread*

Ellie and the counselor focus on two themes: 'relationships' and 'stress'. While the counselor briefly introduces a third theme ('anxiety'), Ellie does not respond to it. It is only mentioned in one entry. The thread contains a total number of 7,947 words; 2,352 words were coded in the open category (not shown in the table). Table 6.4 shows the percentages of number of words according to theme and entry.

*Table 6.4 Percentages of number of words within themes according to entries in Ellie's*

Themes →			
Entry ↓	Anxiety (n=91)	Relationships (n=4,104)	Stress (n=1,400)
Entry 01 Ellie		3	0*
Entry 02 Counselor		13	5
Entry 03 Ellie			
Entry 04 Counselor			
Entry 05 Ellie		7	1
Entry 06 Counselor		13	5
Entry 07 Ellie		5	1
Entry 08 Counselor	1	5	4
Entry 09 Ellie		3	1
Entry 10 Counselor		2	1
Entry 11 Ellie			0
Total <sup>+</sup>	1	52	18

\*Zero percent does not indicate that the discursive move was not used at all, but rather that the percentage is lower than 0.5 percent and, due to rounding, results in 0 percent.

<sup>+</sup>The total percentages do not result in 100 percent as I only present percentages of the text passages that were coded for themes. The percentages for number of words in the open category is not given.



Ellie's thread contains eleven entries in total. The counselor did not respond to Ellie's entry eleven, as it only contained Ellie's consent to be part of the present study and a brief report that she feels less stressed.

Ellie and the counselor mainly focus on Ellie's troubling relationships. While they continuously talk about Ellie's perceived stress, the percentages of these two themes reveal that discussions about Ellie's relationships are more prominent – not just overall, but in almost every individual entry as well. In her last entry, Ellie only mentions briefly how she feels less stressed and does not talk about her relationship issues anymore.

### *Chris' Thread*

Chris and the counselor use the word document for the content of the counseling. Chris introduces three themes in his first entry: 'anxiety', 'depression', and 'sexuality'. In entry two, the counselor further introduces the theme 'self-esteem', which is then taken up by Chris. Table 6.5 shows the percentages of number of words dedicated to the themes Chris and the counselor focus on. In total, the thread consists of 9,570 words; 1,139 words were coded into the open category.

Chris and the counselor discuss all four themes in entries 2 to 6. There are differences in how extensively they are discussed. Chris spends the most time in his first entry talking about his depression. While the counselor focuses more on other themes in entries 2 and 4, Chris reestablishes his depression as an important theme in entry 5. The counselor talks at length about Chris' anxiety (12%) and self-esteem

(7%) in entry two. This is remarkable since Chris talked about his anxiety the least in entry one.

Table 6.5 Percentages of number of words within themes according to entries in Chris' thread

Themes →				
Entry ↓	Anxiety (n=4,345)	Depression (n=1,525)	Self-esteem (n=1,693)	Sexuality (n=868)
Entry 01 Chris	1	3		2
Entry 02 Counselor	12	1	7	4
Entry 03 Chris	7	2	2	1
Entry 04 Counselor	4	2	5	1
Entry 05 Chris	6	4	1	1
Entry 06 Counselor	6	2	1	1
Entry 07 Chris	2	1	1	
Entry 08 Counselor	3			
Entry 09 Chris	2	0*		
Entry 10 Counselor	1	1		
Total <sup>+</sup>	44	16	17	10

\*Zero percent does not indicate that the discursive move was not used at all, but rather that the percentage is lower than 0.5 percent and, due to rounding, results in 0 percent.

<sup>+</sup>The total percentages do not result in 100 percent as I only present percentages of the text passages that were coded for themes. The percentages for number of words in the open category is not given.

In addition, the counselor brings up the theme 'self-esteem' in entry two. One reason for the high percentages of the themes 'anxiety' and 'self-esteem' in entry two is that the counselor introduces a range of coping techniques to deal with anxious thoughts and low self-esteem. These techniques are discussed thoroughly over several entries as Chris invests considerable work in applying them. Chris' anxiety and

depression are continuously discussed until the end (at least to some degree), while the counselor and Chris stop discussing his self-esteem and his sexuality after entry 7.

To summarize, the analysis of the distribution of themes has shown that both the clients and the counselor introduce themes in the threads. Both interactants in a thread participate in foregrounding some themes more than others. Some themes are clearly linked with others, such as 'anxiety', 'self-esteem', and 'depression'. It is likely that these themes are then discussed in connection with each other. Furthermore, three themes are discussed, sometimes at length, in several threads: 'anxiety', 'relationships', and 'self-esteem'. These are also the three themes with the highest percentages regarding the number of words in the overall corpus: 23 percent ('anxiety'), 22 percent ('relationships'), and 16 percent ('self-esteem'). 'Anxiety' is the only theme that occurs in all of the threads, while 'relationships' and 'self-esteem' are extensively discussed in three threads. In Locher's study (2006: 79-83), the advisory team established three topics that are similar to some of the themes in my corpus: 'relationships', 'emotional health', and 'sexuality'. Locher found that specific patterns of discursive moves occurred within these three topics. I will foreground the three themes 'anxiety', 'relationships' and 'self-esteem' in my discussion in the rest of Chapter 6 and in Chapter 7. They were the ones discussed the most in my corpus.

### **6.3 Distribution of Discursive Moves**

As with my discussion of themes, I will focus on three specific issues with regards to the distribution of discursive moves: the distribution in the entire corpus, the distribution in individual threads, and the distribution according to individual entries in two threads to show how patterns develop over time.

#### **6.3.1 Distribution of Discursive Moves Overall**

To begin with, the interactants used 1,446 discursive moves in the entire corpus. Only a small number could not be clearly attributed to the discursive moves outlined in Chapter 5. 75 discursive moves (5%) were, therefore, coded into the open category. Table 6.6 illustrates the total number of discursive moves according to themes. Moves that occurred over 75 times are highlighted in red, moves that occurred over 45 times are highlighted in orange, and moves that occurred over 15 times are highlighted in yellow. Additionally, the five most frequent discursive moves overall and the five most frequent themes are in bold font.

Discursive moves that occur less than 5 percent can be grouped into two categories. First, some discursive moves are not connected to the counseling activity per se. Bolander (2013) analyzed disagreements and agreements on blogs. She found discursive moves that were not connected to the activity of dis/agreements, such as offers, promises, or requests. Bolander (2013: 104) called these “supplementary discourse moves.” In my corpus, the discursive moves *farewell*, *greeting*, *scheduling*, *quoting*, or *thanks* can be classified as such supplementary

discursive moves. They occur mostly in the ‘open’ category of the theme coding. Secondly, there are two discursive moves (*general information* and *referral*) that belong to the activity of giving advice, but are not exactly *advice-giving* discursive moves (see Chapter 5 and Locher 2006 for a discussion). *General information* and *referrals* occur mostly in the themes ‘anxiety’, ‘relationships’ and ‘self-esteem’.

The total numbers and percentages on the right side of Table 6.6 reveal that five discursive moves are used extensively in the entire corpus: *advice-giving*, *assessment*, *metacomment*, *problem statement*, and *request for information*. *Assessment* is the most frequent discursive move, with 423 occurrences (29% of the entire corpus). *Assessments* are used by both the clients and the counselor. The second most frequent discursive move is *advice-giving* (n=208, 14%), which is closely followed by *requests for information* (n=192, 13%). Both moves are solely utilized by the counselor. Finally, *metacomments* (n=128, 9%) and *problem statements* (n=122, 8%) are used almost equally often. Both the clients and the counselor employ *metacomments*, but *problem statements* are only used by clients. 81 out of 128 *metacomments* appear in text passages that I coded in the ‘open’ category. In other words, 63 percent of all *metacomments* utilized in the entire corpus do not appear in text passages that were coded as belonging to a specific theme. Due to reasons of space, I focus my subsequent discussion on the text passages that are linked to the content of the counseling, so I will not pay special attention to the text passages in the open category. The discursive move *metacomment* will thus be excluded from the discussion of

the most recurrent discursive moves overall in the rest of this chapter. Excluding *metacomments*, the four most frequent discursive moves (*assessment*, *advice-giving*, *problem statement*, and *request for information*) comprise 65 percent of the entire corpus.

Table 6.6 Number of discursive moves according to themes

Themes→ Discursive moves ↓											Total	Percentages		
	Abuse	Anxiety	Depression	Health issues	Loneliness	Open	Others' health	Panic attacks	Relationships	Self-esteem			Sexuality	Stress
<b>Advice-giving</b>		76	8			13	1	1	33	59	1	16	208	14
Advice-requesting									3			1	4	0*
Apology						5						1	6	0
<b>Assessment</b>	5	110	53	1	7	19	5	5	93	85	12	28	423	29
Farewell						46							46	3
General information	1	24	4		1			1	7	12		2	52	4
Greeting						42							42	3
Introductory statement						14							14	1
Metacomment		19	6		2	81		2	9	6	2	1	128	9
Open category		20	3			31		2	12	4		3	75	5
<b>Problem statement</b>	5	19	19	1	4		4	5	35	19	3	8	122	8
Quoting		1	1			49							51	4
Referral		13	6			2			3	9	1	1	35	2
<b>Request for information</b>	2	46	18		6	6	3	1	46	49	5	10	192	13
Scheduling		1				22							23	2
Thanks		1	3			18		1	1			1	25	2
Total	13	330	121	2	20	348	13	18	242	243	24	72	1446	99 <sup>∞</sup>
Percentages	1	23	8	0	1	24	1	1	17	17	2	5	100	

\*Zero percent does not indicate that the discursive move was not used at all, but rather that the percentage is lower than 0.5 percent and, due to rounding, results in 0 percent.

<sup>∞</sup>Due to rounding, percentages may not add up to 100 percent in this and other tables.

Some of these results resemble findings of previous studies (e.g. Locher 2006; Morrow 2012; Rudolf von Rohr 2018). For example, Locher (2006) found that the discursive moves *advice-giving* and *assessment* were repeatedly used on the online health advice column she studied. Rudolf von Rohr (2018) reported that on the forums on smoking cessation, *assessment* and *advice-giving* were used frequently as well. Rudolf von Rohr (2018: 280) further mentioned that posters on the forum frequently used the discursive move “own experience” which resembles the discursive move *problem statement* in my data. Locher (2006) identified *problem statements* as a discursive move that occurs frequently in problem letters written by advice-seekers.

However, there are also specific differences between the examined practices. In contrast to Morrow (2006), *questions* about specific problems are not used in my corpus. In a study on a forum that centers around depression, Morrow (2006) reported that users posted various *questions* in their problem messages to seek advice. The forum is a non-institutional setting. According to Morrow (2006: 535), the providers of the forum explicitly state on their opening page that users “are posting to a non-medical audience.” Users might indicate their role as advice-seekers by posing questions in an explicit manner. Locher (2006: 211) highlighted that the discursive moves *question* and *request for advice* were used by advice-seekers who posted the problem letters to the online advice column. The aim of an advice column (online or offline) is to answer questions that readers have sent in. The question and answer format thereby legitimizes the use of *questions* and *requests for*

*advice*. Nevertheless, Locher (2006: 218) found that problem letters in the topic categories ‘emotional health’ and ‘relationships’ contained less questions, but more problem statements. According to Locher (2006: 218), “the content of the problem thus influences the composition of the text.” Email counseling can clearly be identified as institutional discourse with assigned roles of advice-seeker and -giver (at least initially). The fact that the interaction is one-on-one and private might contribute to the lack of explicit *requests for advice* as the roles do not need to be negotiated with regards to a broader audience. Finally, the counselor confirmed in the interview that there is an expectation of counseling being a place people feel they can *go [to] and talk* rather than to ask questions:

The general public see counseling as somewhere they go and talk. Quite often when I ask a client at the beginning of a session what are your best hopes, they will say: “I just want to be heard, to be able to off load, to talk.” (Interview)

She also mentioned in the interview that she does not usually notice that clients do not request specific advice, which clearly indicates that the absence of such *questions* and *requests for advice* is not unusual in the counseling exchanges. Rather, such an absence of explicit *requests for advice* might be a particular characteristic of the social practice of (email) counseling that focuses on the improvement of the clients’ well-being.

Moreover, Locher (2006) reports that the discursive move *general information* is frequently used by the team of advisors on *Lucy*



*Answers.* This discursive move is not very prevalent in my data. This might stem from the fact that my data are private and one-on-one exchanges whereas Locher's were public, meaning that the team of advisors used *general information* moves to involve the broader audience. Moreover, *requests for information* feature frequently in the counseling exchanges, whereas they are not frequently used in Rudolf von Rohr (2018). The frequent use of *requests for information* in the counseling exchanges might be indicative of the ongoing interaction between two specific interactants. Clearly, the counselor aims to trigger further responses from the clients when she requests additional information from them. A comparison with Locher (2006) is difficult in this case as we did not code in exactly the same manner. For example, some of the *requests for information* in my study could be interpreted as having an advisory character. Locher coded interrogatives with advisory character as *advice-giving* moves. Such differences in coding reflect how the examined social practice can influence the coding process. In other words, these differences are a result of the bottom-up analysis of discursive moves.

Table 6.6 further reveals that similar patterns of discursive moves occur across various themes. The less frequent themes – i.e., 'abuse', 'health issues', 'loneliness', 'others' health issues', 'panic attacks', and 'sexuality' – contain between one and five *problem statements*. All of these themes (except 'health issues') contain five to twelve *assessments*. *Advice-giving* occurs only in three of these themes: 'others' health issues', 'panic attacks', and 'sexuality'. In all but one of these

less frequent themes ('health issues'), the counselor employs *requests for information*. This indicates that the counselor aims to respond to every input from the client, even if she is not able to give advice in all themes.

In Section 6.2.1, I established that 'anxiety', 'depression', 'relationships', 'self-esteem' and 'stress' are the five most recurrent themes. Within these five themes, the discursive moves that were most frequently used are *advice-giving*, *assessments*, *problem statements* and *requests for information*. These are also the ones that occurred most frequently in the entire corpus. However, their specific distribution within the five most recurrent themes differs (Table 6.7).

Two of the most frequent themes – 'anxiety' and 'self-esteem' – share some similarities with regards to discursive moves. First, *advice-giving* moves are used in 23 percent of the theme 'anxiety' and in 24 percent of the theme 'self-esteem'. The advice given in these two themes is comparable as it consists mostly of suggestions of a range of coping techniques to manage the problematic issues more proficiently (see Chapter 9 for a detailed analysis of such coping techniques within the theme 'self-esteem'). Second, *assessments* also occur to a similar degree in both themes ('anxiety': 33%; 'self-esteem': 35%). Third, *problem statements* are similarly distributed, with 6 percent in 'anxiety' and 8 percent in 'self-esteem'. These results suggest that these two themes might be similar with regards to content. However, the distribution of *requests for information* differs. In the theme 'anxiety', *requests for information* amount to 14 percent of all moves. In the theme 'self-

esteem’, they make up 20 percent. A possible explanation for this difference could be that introspection and self-reflection from the clients might be especially needed in the theme ‘self-esteem’. Self-reflection and introspection might best be triggered through *requests for information*, or the counselor might assume that self-reflection and introspection in the complex theme ‘self-esteem’ might benefit from ongoing interaction between the clients and the counselor.

Table 6.7 Percentages of the four most frequent discursive moves in the five most frequent themes

Themes →						
Discursive moves ↓	Anxiety (n=330)	Depression (n=121)	Relationships (n=242)	Self-esteem (n=243)	Stress (n=72)	Overall (n=1,446)
Advice-giving (n=208)	23	7	14	24	22	14
Assessment (n=423)	33	44	38	35	39	29
Problem statement (n=122)	6	16	14	8	11	8
Request for information (n=192)	14	15	19	20	14	13
Total percentage of the four most frequent moves	76	82	85	87	86	64

Furthermore, the theme ‘relationships’ stands out with respect to several discursive moves. In comparison with ‘anxiety’ and ‘self-esteem’, the counselor uses a lower percentage of *advice-giving* moves in this theme (only 14%). Instead, a high percentage of *requests for information* (n=46; 19%) are employed in the theme ‘relationships’. With relationship issues, the counselor seems to encourage the clients to self-reflect and introspect instead of giving them specific advice. Moreover,

the clients utilize a higher percentage of *problem statements* (14%) when talking about their relationships. This might be because the clients feel a need to talk about their relationship troubles rather than finding specific coping techniques that they can then apply and assess.

Table 6.7 also reveals specific patterns with regards to the themes ‘depression’ and ‘stress’. *Requests for information* are used about the same amount in these two themes. The percentages of the other three discursive moves that are frequently used highlight specific differences between these two themes. To begin with, the theme ‘stress’ can be dealt with more easily via coping techniques and therefore contains more *advice-giving* moves (22%) than the theme ‘depression’ (7%). However, when it is taken into account that *referral* moves are a specific type of providing advice, the difference between them becomes less pronounced, as they are utilized six times in the theme ‘depression’ (5%) while only once in the theme ‘stress’ (1%). Further, 44 percent of moves are *assessment* moves in the theme ‘depression’, compared to 39 percent in the theme ‘stress’. A similar tendency occurs with *problem statements* (‘depression’: 16%; ‘stress’: 11%).

In comparison with other studies, similarities and differences can be found. I focus my comparison on Locher’s (2006) and Rudolf von Rohr’s (2018) studies as they also investigated online health practices and quantified their results from a discursive moves analysis. Locher (2006) reported that the two most frequent discursive moves in the topics ‘drugs’, ‘fitness/nutrition’, ‘general health’ and ‘sexual health’ were

*advice-giving/referral*<sup>15</sup> and *general information*. In the topics ‘emotional health’, ‘relationships’ and ‘sexuality’, the two most frequent discursive moves were *advice-giving/referral* and *assessments*. The data of the present study can best be compared to these latter topics in Locher’s study. My results corroborate this interpretation, since the two most frequent discursive moves in my data are also *advice-giving* and *assessments*, while *general information* moves were not often used.

Rudolf von Rohr (2018) analyzed the distribution of discursive moves in specific sub-sections of the smoking cessation sources as well. On the websites that promote smoking cessation, she analyzed the topics “addressing common questions/worries” and “listing practical tips” (ibid.: 162). In the former, the two most frequent discursive moves were *general information* and *assessment*. In the latter, *assessments* and “headers” (text passages that “have a text-structuring function” (ibid.: 160)) were used most often. In the forum data, she analyzed two specific forums with regards to the distribution of discursive moves. In one forum, she found that *assessments* (23%) and *advice-giving* (15%) were the discursive moves utilized the most. In the second forum, the forum members most frequently employed *assessments* (22%) and “own experience” (16%) (Rudolf von Rohr 2018: 157). In all datasets, *assessments* are frequently used. This is also true for the data in my study. In addition, members on one forum frequently used “own experience”. As

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<sup>15</sup> Locher (2006) merged the two discursive moves *advice-giving* and *referral* into one category.

I mentioned above, this move is similar to the discursive move *problem statement* in my data, which is also frequently used.

One discursive move clearly distinguishes email counseling from the advice column (Locher 2006) and the websites and forums on smoking cessation (Rudolf von Rohr 2018): the frequent use of *requests for information*. Their high prevalence, even from theme to theme, indicates that the collaborative aspect of online counseling is to some degree visible in the analysis of discursive moves. As the next section and later chapters will show, *requests for information* are used by the counselor to involve the client in the discussion and to position them as active participants in the therapeutic alliance. This clearly distinguishes the social practice of email counseling from other online health practices.

Overall, I showed that a high percentage of text passages containing the five most frequent themes can be categorized with only four discursive moves. This is in line with Locher's (2006) findings that a small number of discursive moves is used in the online advice column she analyzed. Rudolf von Rohr (2018) reported a similar finding for online smoking cessation sources. These findings indicate that specific online activities, such as providing advice or counsel, can be accomplished with a small set of discursive moves. Nevertheless, all three studies show that interactants also use some discursive moves that are linked more clearly to general activities (e.g. *greetings* and *farewells*) or to coherence and cohesion (e.g. *metacomments*) rather than the specific activity that the interactants aim to perform overall.

### **6.3.2 Distribution of Discursive Moves According to Individual Threads**

An analysis of the discursive moves in the individual threads further reveals that there are differences between threads, and that the clients and the counselor use discursive moves in different ways.

#### *Anna*

Anna talks about the following themes with the counselor: ‘anxiety’, ‘panic attacks’, and ‘stress’. Table 6.8 illustrates which discursive moves Anna and the counselor use when discussing these themes. Overall, the interactants employed 123 discursive moves (text passages in the open category for themes were left out of the analyses for all the threads in this section).

The interactants’ use of discursive moves confirms some of the overall patterns highlighted in the previous section. They most frequently employ the discursive moves *advice-giving*, *assessment*, *problem statement* and *request for information*. I have shown that the same is true for the entire corpus. Table 6.8 illustrates that out of these four moves, Anna uses *assessments* and *problem statements*, while the counselor employs *advice-giving* moves, *assessments*, and *requests for information*. Anna does not employ any *advice-giving* moves or *requests for information*, while the counselor does not use any *problem statements*. This reflects their roles as support-seeker and support-giver.

Table 6.8 Number of discursive moves in themes within Anna's thread

Interactant →	Anna			Counselor			Total	Percentages
	Anxiety	Panic attacks	Stress	Anxiety	Panic attacks	Stress		
<b>Themes →</b>								
<b>Discursive moves ↓</b>								
<b>Advice-giving</b>				<b>10</b>	<b>1</b>	<b>3</b>	<b>14</b>	<b>11</b>
Advice-requesting			1				1	1
Apology			1				1	1
<b>Assessment</b>	<b>12</b>	<b>2</b>	<b>2</b>	<b>17</b>	<b>3</b>	<b>9</b>	<b>45</b>	<b>37</b>
General information				6	1		7	6
Metacomment				5	2		7	6
Open category		1		9	1	1	12	10
Scheduling				1			1	1
<b>Problem statement</b>	<b>5</b>	<b>5</b>	<b>5</b>				<b>15</b>	<b>12</b>
Referral				3			3	2
<b>Request for info.</b>				<b>10</b>	<b>1</b>	<b>4</b>	<b>15</b>	<b>12</b>
Thanks	1	1					2	2
Total	18	9	9	61	9	17	123	101 <sup>∞</sup>
Percentages	15	7	7	50	7	14	100	

<sup>∞</sup>Due to rounding, percentages may not add up to 100 percent in this and the following tables.

Anna uses five *problem statements* in each theme, seemingly giving each theme the same amount of attention. However, there are clear differences in terms of how many discursive moves are used in each theme. In the theme 'anxiety', Anna uses a total of 18 discursive moves, only about a fourth of which are *problem statements* (n=5). She uses more *assessments* (n=12). In the themes 'panic attacks' and 'stress', Anna uses 9 discursive moves in each, meaning that more than half of those are *problem statements* (n=5). Clearly, Anna presented her troubles in each issue, but the subsequent discussion might have focused on



the theme ‘anxiety’, since she uses more *assessments* in this theme. Anna only uses one *request for advice* in the theme ‘stress’. This theme is not discussed extensively, however, because Anna and the counselor focus more on its cause, Anna’s anxiety.

The counselor employs 50 percent of all her discursive moves within the theme ‘anxiety’ in Anna’s thread. These 61 discursive moves mainly consist of *assessments* (n=17), *advice-giving* moves (n=10), and *requests for information* (n=10). Locher (2006) suggests that *general information* and *referral* moves can be interpreted as special cases of advice. This would mean that the counselor uses 19 moves that can be interpreted as advice (an additional 6 *general information* and 3 *referral* moves) in the theme ‘anxiety’. This can be explained by the fact that the counselor provides Anna with various coping techniques that aim to help her deal with her anxiety. Anna’s frequent use of *assessments* in the theme ‘anxiety’ indicates that she responds to the counselor’s input. The counselor uses considerably less *advice-giving* moves in the themes ‘panic attacks’ (n=1) and ‘stress’ (n=3). While the counselor uses some *requests for information* (n=4) and *assessments* (n=9) in the theme ‘stress’, she does not focus on Anna’s panic attacks.

### *Ellie*

Ellie talks about three themes: ‘anxiety’, ‘stress’, and ‘relationship’ issues that she has with her family members (see Table 6.9).

Table 6.9 Number of discursive moves in themes within Ellie's thread

Interactant →	Ellie			Counselor			Total	Percentages
	Anxiety	Relationships	Stress	Anxiety	Relationships	Stress		
<b>Themes →</b>								
<b>Discursive moves ↓</b>								
<b>Advice-giving</b>				1	14	12	27	20
Advice-requesting		2					2	1
<b>Assessment</b>		12	4		24	8	48	35
General information				1	5	2	8	6
Metacomment		6	1		2		9	7
Open category		6	1		2		9	7
<b>Problem statement</b>		12	1				13	9
Referral						1	1	1
<b>Request for info.</b>					14	4	18	13
Thanks		1	1				2	1
Total		39	8	2	61	27	137	100
Percentages		28	6	1	45	20	100	

Overall, Ellie and the counselor use 137 discursive moves. The focus on Ellie's relationships is highlighted by the fact that the discursive moves in this theme amount to 73 percent of the discursive moves in the entire thread (28% by Ellie, and 45% by the counselor). 35 percent of all the discursive moves are *assessments*. While the counselor uses an *advice-giving* and a *general information* move in the theme 'anxiety', Ellie does not employ any discursive moves in this theme. As I have discussed in the previous section, the counselor introduces 'anxiety' in Ellie's thread, but Ellie does not respond to it in any way. Like Anna, Ellie does not utilize any *advice-giving* or *request for*

*information* moves, while the counselor does not produce any *problem statements*.

Ellie mostly struggles with her relationships, which manifests itself in a high number of *problem statements* in this theme (n=12). She only employs one other *problem statement* in her thread: in the theme 'stress'. Ellie uses two *requests for advice* and twelve *assessments* in the theme 'relationships'. She utilizes four *assessments* in the theme 'stress'. Clearly, Ellie mostly contributes to the theme 'relationships' and employs the same number of *problem statements* and *assessments* in this theme.

The counselor treats the themes 'relationships' and 'stress' differently with regards to discursive moves. In the theme 'stress', she seems to focus on giving advice: *advice-giving* (n=12), *assessments* (n=8), and *requests for information* (n=4). In contrast, she clearly aims to involve Ellie in the discussion about her relationships by frequently requesting information (n=14). She further employs 14 *advice-giving* moves when talking about Ellie's relationship troubles. The counselor uses more *advice-giving* moves in the theme 'relationships' than in the theme 'stress'. However, the total number of discursive moves that are employed within each theme need to be taken into account. In the theme 'stress', there are 27 moves in total. The 12 *advice-giving* moves represent 44 percent of the total moves in this theme. In the theme 'relationships', there are 61 moves in total. The 14 *advice-giving* moves only amount to 23 percent in this theme. The counselor clearly provides more advice in the theme 'stress' than in the theme 'relationships'.

Instead, the counselor uses a high number of *assessments* (n=24) and *requests for information* (n=14) when talking about relationship troubles. She tries to involve Ellie in the discussion about her relationships much more than in the theme 'stress'. Overall, these points corroborate the impressions gained in the thematic analysis of Section 6.1 and further highlight the special case of the theme 'relationships' in advice-giving circumstances (see also Locher 2006).

### *Chris*

The thematic analysis of Section 6.2.3 revealed that Chris introduces the themes 'anxiety', 'depression', and 'sexuality' in his first entry. The counselor adds the theme 'self-esteem' in the second entry and they subsequently discuss all four themes for several entries. Table 6.10 shows that Chris and the counselor manage to use only four discursive moves for 86 percent of all 218 discursive moves: *advice-giving* (n=40, 18%), *assessment* (n=96, 44%), *problem statement* (n=21, 10%), and *request for information* (n=31, 14%). They use *assessments* especially frequently within all four themes. Both Chris and the counselor use the highest number of discursive moves in the theme 'anxiety'. Chris uses between 4 to 6 percent of the total discursive moves in each of the other three themes. The counselor contributes more to the theme 'self-esteem' than to the themes 'depression' and 'sexuality'. Chris does not give any advice and he does not use the discursive move *request for information*. No *problem statements* are employed by the counselor.

Table 6.10 Number of discursive moves in themes within Chris' thread

Interactant →	Chris				Counselor				Total	Percentages
	Anxiety	Depression	Self-esteem	Sexuality	Anxiety	Depression	Self-esteem	Sexuality		
<b>Themes →</b>										
<b>Discursive moves ↓</b>										
<b>Advice-giving</b>					24		15	1	40	18
<b>Assessment</b>	25	7	7	4	31	7	7	8	96	44
General information					6		1		7	3
Metacomment	2	1		1	3		2	1	10	5
Open category					4				4	2
<b>Problem statement</b>	10	4	4	3					21	10
Quoting	1								1	0
Referral					3	1	2	1	7	3
<b>Request for info.</b>					16	1	9	5	31	14
Thanks		1							1	0
Total	38	13	8	11	87	9	36	16	218	99
Percentages	17	6	4	5	40	4	17	7	100	

Chris confirms that he struggles with his self-esteem when he posts four *problem statements* in this theme. Chris introduces the themes 'depression' and 'sexuality' and thus indicates that he needs support in these two themes. Chris employs more *problem statements* (n=10) in the theme 'anxiety', which is also the most discussed theme in Chris' thread. Chris further employs a high percentage of *assessments*, especially in the theme 'anxiety' (n=25), but also in the themes 'self-esteem' (n=7) and 'depression' (n=7). He writes almost as many *assessments* as the counselor does. This is remarkable and shows that Chris frequently evaluates his own behavior, the coping techniques suggested by the counselor or other issues raised in the discussion.

The counselor seems to be reluctant to give advice in the themes ‘depression’ (n=0) and ‘sexuality’ (n=1). The absence of advice in the theme ‘depression’ can be explained by the counselor’s interpretation that Chris’ depression is mostly caused by his anxiety and low self-esteem. In both of these themes, the counselor suggests various coping techniques through many *advice-giving* moves (‘anxiety’: n=24, 19%; ‘self-esteem’: n=15, 32%). The counselor frequently uses *assessments* in the theme ‘anxiety’ (n=31) and to a moderate degree in the other three themes as well (‘depression’: n=7; ‘self-esteem’: n=7, ‘sexuality’: n=8). *Requests for information* occur surprisingly often in the theme ‘sexuality’ (n=5). In fact, 21 percent of this theme consists of *requests for information*. This might be because giving advice in this case is difficult as Chris keeps the discussion on his sexuality rather brief. *Requests for information* are also often used in the theme ‘self-esteem’ (n=9), but less so in the theme ‘depression’ (n=1). Overall, the counselor seems to follow a pattern of using many *advice-giving* and *request for information* moves in the themes ‘anxiety’ and ‘self-esteem’. In addition, both the counselor and Chris employ many *assessments* within these themes as well. This indicates that both themes seem to be highly interactive ones.

### *Mel*

Mel’s case is more complicated as she and the counselor touch upon eight themes in their thread (see Table 6.11). For ease of reading, but also due to clear patterns, I will discuss Mel’s case in two stages: first,

I discuss the themes ‘abuse’, ‘health issues’, ‘others’ health issues’, and ‘stress’; second, I focus on the more frequently talked about themes ‘anxiety’, ‘depression’, ‘self-esteem’, and ‘relationships’ (these are highlighted in yellow in the table). Table 6.11 depicts the results for all the themes in Mel’s thread. As a rule, Mel does not use any *advice-giving* and *request for information* moves, while the counselor does not utilize any *problem statements*.

Table 6.11 Number of discursive moves in themes within Mel’s thread

Interactant →	Mel								Counselor								Total	Percentages
	Abuse	Anxiety	Depression	Health issues	Other’ s health	Relationships	Self-esteem	Stress	Abuse	Anxiety	Depression	Health issues	Other’ s health	Relationships	Self-esteem	Stress		
<b>Advice-giving</b>									9	7			1	9	21	1	48	16
<b>Assessment</b>	1	5	12		1	12	17	1	4	7	15	1	4	20	27	4	131	43
General info.									1	1	4			1	9		16	5
Metacomment							1				3				2		6	2
Open category										2	2			2	1		7	2
<b>Problem stat.</b>	5		9	1	4	12	5	2									38	12
Quoting											1						1	0
Referral											3			1	3		7	2
<b>Request f. info.</b>									2	5	11		3	13	17	2	53	17
Total	6	5	21	1	5	24	23	3	7	24	46	1	8	44	81	8	307	100
Percentages	2	2	7	0	2	8	7	1	2	8	15	0	3	14	26	3	100	

First, the four less frequent themes (‘abuse’, ‘health issues’, ‘others’ health issues’, ‘depression’) share a specific pattern of discursive moves. On the one hand, Mel uses mostly *problem statements* within

these themes. She only uses one *assessment* in the themes ‘abuse’, ‘others’ health issues’ and ‘stress’, while she does not use any *assessments* in the theme ‘health issues’. On the other hand, the counselor seems to be reluctant to provide advice in these themes. She uses one *advice-giving* move each in the themes ‘others’ health issues’ and ‘stress’. Various explanations are possible: *advice-giving* on such a sensitive subject as ‘abuse’ carries an immense threat to the client’s face. Further, the counselor does not offer advice concerning physical ‘health issues’. As a counselor, she is not an expert on physical issues. Moreover, stress can be caused by low self-esteem or anxiety. Both themes are discussed extensively. The counselor uses four *assessment* moves in the themes ‘abuse’, ‘others’ health issues’ and ‘stress’. These can be explained by the counselor’s aim to display empathy in these delicate topics. She also employs some *request for information* moves (‘abuse’: n=2; ‘others’ health issues’: n=3; ‘stress’: n=2), inviting the clients to share more about these issues.

Second, there are also clear patterns in the four most discussed themes (‘anxiety’, ‘depression’, ‘self-esteem’, and ‘relationships’). In the themes ‘depression’ and ‘relationships’, Mel uses *problem statements* and *assessments* roughly to an equal amount (‘depression’: 9 *problem statements*, 12 *assessments*; ‘relationships’: 12 *problem statements*, 12 *assessments*). In the themes ‘anxiety’ and ‘self-esteem’, she employs *problem statements* less frequently than *assessments*. In fact, Mel does not utilize any *problem statements* in the theme ‘anxiety’. This theme was introduced by the counselor. She confirms that anxiety



is a problematic issue by using *assessments* (n=5). For example, she confirms that she applied suggested coping techniques in such *assessments*. In the theme 'self-esteem', Mel writes some *problem statements* (n=5), but uses many more *assessments* (n=17).

As I have already shown for Anna's, Ellie's and Chris' threads as well, the counselor uses a low number of *advice-giving* moves in the themes 'depression' (n=7) and 'relationships' (n=9). Instead, the counselor tries to show her understanding by frequently using *assessments* ('depression': n=15; 'relationships': n=20), as well as *requests for information* ('depression': n=11; 'relationships': n=13) to involve Mel in further discussions. In the themes 'anxiety' and 'self-esteem', the counselor employs many *advice-giving* moves ('anxiety': n=9; 'self-esteem': n=21) and poses almost equally as many *requests for information* ('anxiety': n=5; 'self-esteem': n=17). Within these two themes, the counselor uses many pre-written text blocks that explain how anxiety and self-esteem work. In addition, she includes many suggestions of coping techniques that the clients can try out (see Chapter 9 for a discussion of this in the theme 'self-esteem'). The counselor also uses a high number of *assessments* within these two themes. This type of pattern (high frequency of *advice-giving*, *assessments*, and *requests for information*) indicates the high interactivity within these two themes.

Taylor

Last but not least, Taylor and the counselor discuss five different themes. Table 6.12 illustrates the discursive moves that were used. Overall, the total number of discursive moves (n=311) is the highest out of all the threads. There is a considerable difference between the number of discursive moves that Taylor (n=66) uses and the number of discursive moves that the counselor (n=245) employs. Taylor only contributes 21 percent of the discursive moves. Anna, Chris and Mel contributed around 30 percent in their threads, and Ellie contributed 36 percent of the discursive moves in her thread. As in the other four threads, Taylor does not use any *advice-giving* or *request for information* moves. The counselor does not write any *problem statements*.

Table 6.12 Number of discursive moves in themes within Taylor's thread

Interactant →	Taylor					Counselor					Total	Percentages	
	Anxiety	Depression	Loneliness	Relationships	Self-esteem	Anxiety	Depression	Loneliness	Relationships	Self-esteem			
Themes →													
Discursive moves ↓													
<b>Advice-giving</b>						32	1	10	23			66	21
Advice-requesting				1							1	0	
<b>Assessment</b>	6	3	1	5	9	7	7	6	20	18	82	26	
General information						10		1	1	2	14	5	
Metacomment	1	1				8	1	2	1	1	15	5	
Open category	3					2	1		4	2	12	4	
<b>Problem statement</b>	4	6	4	11	10						35	11	
Referral						7	2		2	4	15	5	
<b>Request for info.</b>						15	6	6	19	23	69	22	
Thanks		1					1				2	1	
Total	14	11	5	17	19	81	19	15	57	73	311	100	
Percentages	5	4	2	5	6	26	6	5	18	23	100		

As mentioned in Section 6.2.3, Taylor initially only talks about her feeling of 'loneliness'. The other themes are brought up by the counselor. Taylor confirms them as problematic by using several *problem statements* in each of them. In fact, Taylor uses more *problem statements* than *assessments* in four themes: 'depression', 'loneliness', 'relationships' and 'self-esteem'. Only in the theme 'anxiety' does she use more *assessments* (n=6) than *problem statements* (n=4). This seems to suggest that Taylor focuses more on her problems than on finding solutions and seems to be in stark contrast to the solution-focused type of therapy (Kim 2008) that the counselor employs.

The counselor seems to use a high number of *assessment* moves in the themes 'relationships' (n=20) and 'self-esteem' (n=18). Taking into account the number of discursive moves that the counselor utilizes in each theme, however, shows that she uses *assessments* even more frequently in other themes: 'loneliness' (30%), 'relationships' (27%), 'depression' (23%), 'self-esteem' (20%), and 'anxiety' (7%). The counselor seems to respond to the high number of *problem statements* in all of these threads. A different pattern emerges for the discursive move *advice-giving*. The counselor does not use any advice in the theme 'loneliness'. Instead, she focuses heavily on giving advice in the themes 'anxiety' (n=32) and 'self-esteem' (n=23). This further highlights that while the counselor might empathize with clients and normalize their problems in *assessments*, she also tries to direct the client's attention towards tangible themes in which she can provide concrete advice. Finally, the counselor utilizes many *requests for information* in all of the

themes. The counselor tries to encourage Taylor to be more self-reflective and to contribute actively in the interaction. Last but not least, the counselor employs 15 *referral* moves in Taylor's thread, more than in any other thread. I argue that the counselor realizes that Taylor needs further support and tries to refer her to specific sources (e.g. websites that Taylor can use by herself or suggestions to visit a GP). However, only a closer analysis of Taylor's thread could verify this interpretation (see Chapter 10).

To summarize, clear patterns of discursive moves are present in the data. However, idiosyncrasies with regards to themes and individual threads occur as well. Overall, the clients do not use *advice-giving* or *request for information* moves, and the counselor does not employ any *problem statements*. Further, it has become clear that the *assessment* move is vital for both the clients and the counselor. 25 percent of all the discursive moves that the counselor employs are *assessments*. Within such *assessments*, the counselor demonstrates that she has understood the clients, displays empathy or normalizes the clients' experiences, and so on. As for the clients, they do not all use *assessments* to a similar degree, but all of them do employ them in several themes. The clients can demonstrate their self-reflection and report on progress in the *assessment* moves (for a more detailed analysis of *assessment* moves, see Chapter 7). Taylor's thread shows further that when a client is not ready or able to self-assess, *problem statements* keep reappearing and are then in need of further discussion.

Moreover, I have also uncovered patterns according to themes. For example, the counselor does not use *advice-giving* moves in the same way in all the themes. While she readily employs *advice-giving* in themes such as ‘anxiety’ and ‘self-esteem’, others, such as ‘relationships’, ‘abuse’, or ‘loneliness’, are themes in which it seems much more difficult for the counselor to give advice. Locher (2006) reported similar findings as she found that the advisory team of the online advice column did not use *advice-giving* frequently in the topic ‘relationships’. In my data, the counselor approaches the interaction in such themes differently by, for example, employing more *requests for information* to trigger the clients’ self-reflection and to involve them in the discussion. Themes like ‘anxiety’ or ‘self-esteem’ seem to profit from clear suggestions of coping techniques. Themes like ‘relationships’, on the other hand, might benefit more from introspection and self-reflection. While a description of these patterns is useful to understand online counseling from a holistic perspective, the question remains whether these patterns differ in individual entries of an entire thread.

### **6.3.3 Distribution of Discursive Moves over Individual Entries**

In Section 6.2.3, I have shown that the interactants do not talk about one theme after another, nor do they discuss all themes in every entry. It is likely that interactants do not use one type of discursive move in one entry and another in the next entry. Instead, interactants most likely use various types of discursive moves within one entry. However, it is

possible that there are specific patterns of discursive moves over an entire thread. For example, the clients might use more *problem statements* in early entries of the thread in which they explain their troubles. With time, they might start to use more *assessment* moves to evaluate their experiences or applications of advice. The counselor, on the other hand, might use more *advice-giving* moves at the beginning and less towards the end of counseling. If the clients progress, the counselor might not need to provide them with more advice. To uncover such patterns of discursive moves, I have analyzed what types of discursive moves interactants use in each entry of a thread.

A comparison over all threads is, again, not feasible as not all threads contain the same number of entries. I will, therefore, describe the patterns of the two threads I have already discussed for the themes: Ellie's and Chris'. For ease of reading, I only focus on the four most frequent discursive moves: *advice-giving*, *assessment*, *problem statements* and *requests for information*. In addition, I focus on the three most discussed themes within a thread. Themes that were discussed less do not readily lend themselves for a discussion as the numbers of discursive moves are too low to discover specific patterns.

### *Ellie's Thread*

As I have revealed in previous sections, Ellie and the counselor mainly discuss her relationship with her family and the 'stress' it causes Ellie. The counselor briefly introduces the theme 'anxiety', but Ellie does not respond to this theme. Table 6.13 shows the discursive moves that the

interactants use in these three themes. In this table and in Table 6.14, I have not ordered the discursive moves alphabetically. For ease of reading, I first listed *problem statements* and *assessments*, the two discursive moves that the clients use, and only then added *advice-giving* and *requests for information*, which are only used by the counselor.

Table 6.13 Number of four most frequent discursive moves in individual entries in Ellie's thread

Discursive move →	Problem statement			Assessment			Advice-giving			Request for information		
	Anxiety	Relationships	Stress	Anxiety	Relationships	Stress	Anxiety	Relationships	Stress	Anxiety	Relationships	Stress
Entry 01 Ellie	3	1										
Entry 02 Counselor				6	1		4	3		7	1	
Entry 03 Ellie												
Entry 04 Counselor												
Entry 05 Ellie	7			6	1							
Entry 06 Counselor				9	3		5	6		7	2	
Entry 07 Ellie	2			4	1							
Entry 08 Counselor				6	2		1	5	2			1
Entry 09 Ellie				2	2							
Entry 10 Counselor				3	2			1				
Entry 11 Ellie												
Total Ellie	12	1		12	4							
Total Counselor				24	8		1	14	11		14	4

In entry 1, Ellie writes three *problem statements* about her relationships and one that focuses on her perceived stress, while she does not use any *assessment* moves. The counselor responds to both themes in entry 2. In each theme, she uses *advice-giving*, *assessment* and *request for information* moves. She assesses (n=6) and requests further information

(n=7) mainly in the theme 'relationships'. However, she gives Ellie advice almost equally for her issues within her relationships (n=4) and for the theme 'stress' (n=3). This highlights the counselor's expertise that relationship issues can result in perceived stress and that Ellie needs coping techniques to deal with her perceived stress.

Entries three and four are organizational entries and do not contain the specific moves discussed here. Ellie continues to discuss her relationship issues in entry 5 and simultaneously uses *problem statements* (n=7) and *assessments* (n=6). The counselor's response in entry 6 shows that she now focuses her advice mainly on the theme 'stress' (n=6). This reflects the overall finding that *advice-giving* is used less often in the theme 'relationships' (n=5). However, the counselor continues to use *assessments* (n=9) and *requests for information* (n=7) to talk about Ellie's relationship issues.

In entry 7, a clear shift occurs as Ellie uses more *assessments* ('relationships': n=4; 'stress': n=1) than *problem statements* ('relationships': n=2; 'stress': n=0). Her focus is now clearly on the theme 'relationships'. In entry 8, the counselor continues to assess Ellie's progress, but also gives advice surprisingly often in the relationship theme (n=5). This is a result of Ellie explicitly *requesting advice* in entry 7 on how to deal with a specific situation in her family (not visible in the table). This request seems to facilitate the use of *advice-giving* moves, and the counselor provides Ellie with several suggestions. The counselor only requests further information about Ellie's perceived stress in entry 8.



Ellie responds in entry 9 by using four *assessment* moves ('relationships': n=2; 'stress': n=2). She does not use any *problem statements* anymore. In entry 10, the counselor responds with three *assessments* in the theme 'relationship' and two *assessments* in the theme 'stress'. She only uses one *advice-giving* move and does not request any further information. Entry 11 only contains Ellie's confirmation that the exchanges can be used in the present research project and therefore does not include any of the four discursive moves of the present analysis.

Overall, a clear shift is visible in Ellie's contributions from *problem statements* to *assessments*. The counselor uses *assessments*, *advice-giving* and *requests for information* from the start. In other words, she does not spend an entire entry with simply assessing Ellie's situation, but rather immediately provides advice and requests further information. A clear shift in the counselor's use of discursive moves is also visible. She starts decreasing her use of *advice-giving* and *request for information* moves towards the end of the thread. One specific idiosyncrasy occurs: Ellie's *request for advice* in the theme 'relationships' seems to encourage the counselor to give advice in this theme. In general, the counselor does not provide elaborate advice within this theme.

### *Chris*

Chris is one of the clients who uses the word document instead of the body of the email for the counseling content. Table 6.14 illustrates how the counselor and Chris use discursive moves in Chris' thread. I focus

again on the three most frequent themes and the four most frequent discursive moves.

Table 6.14 Number of four most frequent discursive moves in individual entries in Chris' thread

Discursive move →	Problem statement			Assessment			Advice-giving			Request for information		
	Anxiety	Depression	Self-esteem	Anxiety	Depression	Self-esteem	Anxiety	Depression	Self-esteem	Anxiety	Depression	Self-esteem
Entry 01 Chris	1	1										
Entry 02 Counselor				4	5	3	12	1	9	10	3	5
Entry 03 Chris	6	1	2	11	3	4						
Entry 04 Counselor				13	2	4	2		5	3	2	3
Entry 05 Chris	3	1		5	1	2						
Entry 06 Counselor				6	1		8		1	1		1
Entry 07 Chris			2	4		1						
Entry 08 Counselor				5			1			2		
Entry 09 Chris				5								
Entry 10 Counselor				3			1					
Total Chris	10	3	4	25	4	7						
Total Counselor				31	8	7	24	1	15	16	5	9

Chris initially introduces the themes 'anxiety', 'depression', and 'sexuality' (this last theme is not shown in the table) in entry 1. For each theme, he uses one *problem statement*. He does not use any *assessments* in entry 1 yet. The counselor responds to all three themes and introduces the theme 'self-esteem' in entry 2. While she assesses all four themes to the same degree, she uses *advice-giving* especially frequently in the themes 'anxiety' (n=12) and 'self-esteem' (n=9), a pattern already noted before in several sections. It is noteworthy that, as in Ellie's case,

the counselor already starts to employ all three discursive moves in entry 2.

Chris responds in entry 3 with further *problem statements* in all three themes but especially in the theme 'anxiety' (n=6). At the same time, he already uses *assessments* extensively ('anxiety': n=11; 'depression': n=3; 'self-esteem': n=4). The theme 'anxiety' is clearly foregrounded with the high number of *assessments* in entry 3. In entry 4, the counselor responds with several *assessments* herself in the theme 'anxiety' (n=13). Overall, she employs fewer *advice-giving* and *request for information* moves in all themes compared to entry 2.

In entry 5, Chris seems to struggle with his anxiety and employs 3 *problem statements* in this theme. He still uses *assessments* as well, but to a lesser degree than in entry 3. The counselor responds by providing more advice in entry 6. She uses eight *advice-giving* moves in the theme 'anxiety' alone. She clearly responds to Chris' *problem statements*.

Chris shifts towards using more *assessments* again in entry 7. He does not write any *problem statements* in the theme 'anxiety', but uses two *problem statements* in the theme 'self-esteem'. Surprisingly, the counselor seems to not respond in the same way as before to these *problem statements*, as she does not give any advice in entry 8 in the theme 'self-esteem'. However, she provides Chris with advice in the theme 'anxiety'. It might be that she interprets that the causes of Chris' problems in the theme 'self-esteem' stem from his anxiety issues. A closer analysis of this would be needed to provide a clear answer.

Nevertheless, the counselor uses two *requests for information* and five *assessment* moves in her discussion of Chris' anxiety.

Entry 9 and entry 10 only contain text passages that focus on the theme 'anxiety'. In entry 9, Chris responds with five *assessment* moves. He does not use any *problem statements* anymore. In the last entry, the counselor employs three *assessments*, but she provides Chris with one last piece of advice as well.

Chris' thread bears similarities with Ellie's thread. The clients use *problem statements* in early entries and move towards using more and more *assessments* as the interaction continues. In both threads, the counselor immediately proceeds to use three discursive moves from the beginning: *assessments*, *advice-giving*, and *requests for information*. Over time, she uses *advice-giving* and *requests for information* less and less. The interaction therefore clearly shifts towards assessing the clients' situation rather than focusing on the initial problems. Nevertheless, the counselor takes up idiosyncrasies in both interactions: she responds to Ellie's *request for advice* by providing advice in the theme 'relationships', which is a practice she usually abstains from. In Chris' case, the counselor seems to employ *assessments* more frequently than in other threads. This might be a response to Chris' elaborate use of *assessments*. Finally, the counselor ends the interaction in both threads by using *assessments* and one *advice-giving* move. These findings confirm the overall patterns that I presented in the previous sections. Nevertheless, the close analysis of two threads has also revealed specific idiosyncrasies and that the counselor accommodates her use of

discursive moves for individual clients. In other words, the counselor demonstrates considerable recipient design that is based on a thorough understanding and awareness of the client's situations, their conversational styles and her expertise in supporting clients.

#### **6.4 Sequence of Discursive Moves**

In this section, I aim to highlight how discursive moves are sequentially framed in the interaction. In other words, I analyze what type of discursive move precedes and what type of discursive move follows a given discursive move. Due to the complexity of this type of analysis, I limited my investigation to the four most frequent discursive moves (*problem statements, assessments, advice-giving, and requests for information*) within the three most frequent themes ('anxiety', 'relationships', and 'self-esteem').

Previous studies, such as Locher (2006) or Rudolf von Rohr (2018), also looked into the sequence of discursive moves. However, their analyses differ in specific ways from mine. Locher (2006), for example, analyzed the sequence of discursive moves within specific units within question and response letters of the online advice column *Lucy Answers*. Locher took advantage of the fact that each paragraph seemed to mark a specific unit in the question and response letters. She proceeded to analyze the typical discursive moves that start and end a letter, as well as the first and last discursive move within a unit. For her part, Rudolf von Rohr (2018) examined the sequence of discursive moves in forums that center around smoking cessation. She utilized the

fact that members of the forum write individual posts within a thread. She analyzed the initial and final discursive move in such posts.

Such an analysis is not feasible in my case for two specific reasons. First, Locher (2006) was interested in the activity of giving advice. In other words, she aimed to find patterns of how advice was solicited by the advice-seekers and how advice was provided by the team of advisors. Further, Rudolf von Rohr (2018) investigated persuasion in online sources about smoking cessation. She aimed to find out how messages were crafted to persuade smokers to quit smoking. My focus, however, lies on the collaboration between the clients and the counselor. In other words, I am interested not only in finding patterns within text passages by one writer, but especially also in how the collaboration occurs between two writers. For example, I am interested in whether a *problem statement* from a client is always followed by an *advice-giving* move from the counselor.

Second, in both Locher's (2006) and Rudolf von Rohr's (2018) studies, easily traceable units of analysis were given due to the message format. Locher (2006) utilized the fact that each paragraph could be identified as a unit, whereas Rudolf von Rohr (2018) identified entire posts from forum members as one unit. The interactive nature of my data does not allow for an identification of such clearly established units. Instead, I identified the specific discursive moves that I aimed to investigate: *advice-giving*, *assessments*, *problem statements*, and *requests for information*. These are the four most frequent discursive moves in my data. Due to their high frequency of occurrence, I limited

my analysis to the three most frequent themes: ‘anxiety’, ‘relationships’, and ‘self-esteem’. I extracted each of these discursive moves through an NVivo matrix query and manually identified the discursive moves that framed the one under investigation. In other words, I systematically looked at each discursive move and checked which other discursive move preceded and which other discursive move followed it.

This analysis was rather challenging for several reasons. I want to highlight four specific challenges here. First, the interactive and asynchronous nature of the counseling exchanges did not allow for a simple analysis of individual entries. Example (6.1) is an excerpt from Mel’s thread and includes text passages from entries 2 and 3. In this excerpt, the counselor suggests coping techniques so Mel can better deal with her anxiety. I have given each discursive move a number for ease of reference.

- (6.1) Counselor / Mel (Thread: Mel; Entry 2 / 3)
- 1 <Counselor; *Advice-giving*: Say out loud now, a few times, ‘I’m feeling guilty. *Advice-giving*>
  - 2 <Counselor; *Request for information*: *How do you feel right this second having said that?* *Request for information*>
  - 3 <Mel; *Problem statement*: A bit guilty. *Problem statement*>
  - 4 <Counselor; *Advice-giving*: Now change the wording and a few times say ‘I notice that I’m feeling guilty. *Advice-giving*>

A look at the second and third discursive moves reveals the difficulty of investigating discursive moves from separate entries. For example, I wanted to establish which discursive move followed the second discursive move, a *request for information* written by the counselor in entry 2. It is followed by discursive move number four, an *advice-giving* move from the counselor in entry 2, while the third discursive move is written by Mel in entry 3. In other words, this third discursive move did not exist at the time the second discursive move was written. At the same time, I searched for the preceding move of the third discursive move, the *problem statement* written by Mel in entry 3. The preceding move is the second discursive move, the counselor's *request for information* from entry 2. In addition, I wanted to look at the discursive move that followed this third discursive move: there is no discursive move that follows the third move, because the fourth discursive move in the example was written in entry 2 and could therefore not have followed Mel's discursive move that was written in entry 3.

Second, thematic boundaries were not necessarily helpful, as two discursive moves from different themes can be linked. A theme like 'self-esteem' could develop out of a different theme, such as 'anxiety'. The last discursive move in the theme 'self-esteem' could be the preceding discursive move of the first discursive move in the theme 'anxiety'. The (abridged) excerpt given in example (6.2) highlights such a case in Chris' thread. As in the example above, I have given each discursive move a number for ease of reference. All discursive moves are



from the counselor and from entry 2. I have indicated at the beginning of each discursive move to which theme it belongs.

- (6.2) Counselor (Thread: Chris; Entry 2)
- 1 <Depression; *Assessment*: I am aware that you have been dealing with your depression for many years [...]. *Assessment*>
  - 2 <Depression; *Advice-giving*: To help you shift your thoughts at these times Chris, you might find it helpful to write a list of your achievements and the positive qualities that helped you gain these achievements. This may feel difficult to do when you are used to being self-critical, and it is aimed at helping you to build up your self-esteem. *Advice-giving*>
  - 3 <Self-esteem; *Metacomment*: Here's the analogy I use to describe self-esteem; *Metacomment*>
  - 4 <Self-esteem; *General information*: We all have an internal garden, full of flowers, shrubs, trees, maybe a water feature and ornaments, grassy areas, hedges and weeds. The flowers, trees, ornaments etc represent our positive qualities, achievements, happy memories, and things we like about ourselves. [...]. *General information*>

While the first and the second discursive moves are about Chris' depression, the counselor shifts to the theme 'self-esteem' in the third discursive move. However, the third discursive move clearly follows the second discursive move. The counselor identified low self-esteem as a cause of Chris' depression. This already occurs at the end of the second discursive move. In the third and fourth discursive move (and the subsequent text passages not shown in

the example), the counselor tries to help Chris increase his self-esteem.

Third, a theme can in some cases be further divided into several sub-themes. This is especially challenging in the two threads that contain the counseling content in the body of the email. For example, Ellie talks about her troubling relationships with the counselor throughout the entire thread. In example (6.3) taken from entry 7, she talks about her family in the first paragraph and about her friends in the second one. Both paragraphs are coded in the theme ‘relationships’, however, their content is not directly related.

(6.3) Ellie (Thread: Ellie; Entry 7)

- 1 <*Relationships (family)*; *Assessment*: In my previous email I mentioned my frustrations at home, especially with regards to my failing relationship with my sister. Unfortunately we are still barely talking, however I liked using your suggestion of imagery and picturing people as animals. It helped me to put her personality into perspective and hopefully find ways around our issues in the future. *Assessment*>
- 2 <*Relationships (friends)*: *Problem statement*: With regards as to talking to my friends over the summer, very few of them know my situation at home and so I would not be comfortable to openly talk to them. As a person I find it difficult to trust people, especially something as personal as talking about my mum I find it particularly hard to open up to others. Those that do

know about my home situation I haven't had chance yet to meet up with but am hoping to organise something over the coming week. *Problem statement*>

The first discursive move is not followed by the second discursive move. Instead, the first discursive move is an answer to the counselor's *suggestion[s] of imagery and picturing people as animals* from entry six (not shown here). The second discursive move is a response to the counselor's question whether Ellie could confide in friends about her difficult situation at home (also from entry six and not shown in the example). Due to the fact that Anna and Ellie seldom copy-pasted the counselor's previous entry into their responses, I had to carefully decide which input from the counselor the specific discursive move from the clients were related to.

Fourth, at times a discursive move was preceded (or followed) by a discursive move that was not in one of the three most frequent themes. In example (6.4), Mel talks about her perceived stress. The counselor acknowledges this, but moves towards the theme 'self-esteem' as the cause of Mel's stress.

(6.4) Mel / Counselor (Thread: Mel; Entry 1 / 2)

- 1 <Mel; *Stress; Problem statement*: Work has also been stressful; we have had horrible deadlines that keep moving and I seem to be losing motivation because there is never enough time to do a good job and nobody seems to appreciate what we do manage to do. I work for a charity so there is little funding for training and I frequently feel that I am never quite knowledgeable enough for the job, almost like I'm bluffing my way through. I have also

been studying part time for about a year and a half and I enjoy what I'm researching but I don't have enough time to dedicate to it (one day a week) so I feel I'm not doing a great job of that either! *Problem statement*>

- 2 <*Counselor; Stress; Assessment: I can feel the stress as I read your words Mel, so really totally understandable that you are struggling right now. Assessment*>
- 3 <*Counselor; Self-esteem; Assessment: I also get the sense of your low self-esteem again, in your doubts about your ability to be knowledgeable enough for your job. Assessment*>

After Mel's initial *problem statement* (the first discursive move), the counselor acknowledges Mel's difficulties in an *assessment* that focuses on 'stress' (the second discursive move). She then uses an *assessment* to suggest that one of the causes of Mel's stress is low self-esteem (the third discursive move). This *assessment* occurs in the theme 'self-esteem'. In other words, I analyzed this third discursive move to find a preceding (and following) discursive move. The preceding discursive move, which is the second discursive move in the example above, is an *assessment*. However, it is not in one of the three most frequent themes. Nevertheless, I counted this *assessment* as an occurrence of a preceding *assessment* anyway, because it is the discursive move that triggered the one that I examined (the third discursive move in the example).

These four were only some of the challenges that I faced when I analyzed the sequence of the discursive moves. To account for these and other challenges, I devised several checklists that consisted of several tests to ensure that I followed the same procedure for each

discursive move. The interested reader can find these checklists in Appendix C. The rest of this section is used to present the results of my analysis of the sequence of discursive moves. The clients' discursive moves are presented in Section 6.4.1 (*problem statements*) and Section 6.4.2 (*assessments*). Section 6.4.3 discusses the counselor's *assessments*, while Section 6.4.4 contains the results of my analysis of the counselor's *advice-giving* moves. Finally, I discuss the counselor's *requests for information* in Section 6.4.5.

#### **6.4.1 Problem Statements by the Clients**

The previous sections have revealed that only clients use *problem statements*. I will first discuss the discursive moves that occur before *problem statements* and then proceed to discuss the discursive moves that occur after *problem statements*.

##### *Discursive Moves Occurring before Problem Statements*

While only clients use *problem statements*, the surrounding discursive moves can of course be written by either the client or the counselor. On the one hand, a client might write two *problem statements* in entry 1. The second *problem statement* is preceded by the first one. On the other hand, a client might respond to the counselor's *request for information* with a *problem statement*. In this case, the discursive move that occurs before the client's *problem statement* is a *request for information* by the counselor. Table 6.15 shows the results of this analysis for the discursive moves that occur before the clients' *problem statements*.

Table 6.15 Number of the four most frequent discursive moves **before** clients' problem statements in the three most frequent themes

Theme →	Anxiety (n=19)		Relation- ships (n=35)		Self-es- teem (n=19)	
	Interactant →					
	Clients	Counselor	Clients	Counselor	Clients	Counselor
Discursive move ↓						
Problem statement	5		12		4	
Assessment	6	1	7	2	2	2
Advice						1
Request for information		2		6		7
Total	11	3	19	8	6	10

The table should be read as follows: the top row shows the labels of the three most frequent themes. I only analyzed the *problem statements* that occur within these themes. Under each label for a theme, I have given the total number of *problem statements* that occur within this theme, 19 in 'anxiety', 35 in 'relationships', and 19 in 'self-esteem'. For each of these *problem statements*, I manually checked what the preceding discursive move was. The table focuses on the four most frequent discursive moves; for ease of comprehension I did not add others. Each number within the table stands for the *problem statements* that occur in one of the three themes. Depending on which row the number occurs in, a different preceding discursive move occurred. I explain this in detail for the theme 'anxiety': within this theme, 5 *problem statements* were preceded by a *problem statement* from the clients and 6 other *problem statements* were preceded by an *assessment* from the clients. In total, eleven *problem statements* in the theme 'anxiety' were

preceded by a discursive move from the clients. In the same theme, one *problem statement* was preceded by an *assessment* from the counselor and two further *problem statements* were preceded by a *request for information* by the counselor. In total, 3 *problem statements* within the theme 'anxiety' were preceded by a discursive move from the counselor. In other words, 14 *problem statements* were preceded by one of the four most frequent discursive moves. As there are a total of 19 *problem statements* in the theme 'anxiety', five of these were either not preceded by one of the discursive moves that do not belong to the four most frequent ones or do simply not have a preceding discursive move (see also below).

The table shows that a *problem statement* is usually preceded by a client's move in the themes 'anxiety' (n=11) and 'relationships' (n=19). These moves were either *problem statements* or *assessments*. In the theme 'self-esteem', the preceding discursive move of a *problem statement* is more frequently written by the counselor (n=10). Overall, the clients responded with a *problem statement* more frequently to a *request for information* than another discursive move from the counselor. This occurs in all three themes: 'anxiety' (n=2), 'relationships' (n=6), and 'self-esteem' (n=7). Table 6.15 further reveals that clients rarely respond to an *assessment* by the counselor with a *problem statement*. In addition, there was only one instance in which a *problem statement* followed an *advice-giving* move by the counselor. Clients might feel that they cannot follow the counselor's advice immediately with a *problem statement* as it might seem to disregard the advice given to

them. As I will show below, clients prefer to first assess the counselor's advice before reiterating that the problem persists.

Table 6.15 further reveals that several *problem statements* in each theme are either preceded by a discursive move other than the four most frequent ones or by none at all. This is, for example, visible in the theme 'anxiety': the total number of *problem statements* in 'anxiety' (n=19) is indicated under the label at the top of the table. The total number of preceding discursive moves that are one of the four most frequent ones is given in the bottom line: 11 by the clients and three by the counselor. In total, the clients responded to one of the four most frequent discursive moves with a *problem statement* in the theme 'anxiety' in 14 out of a total of 19 cases. In the remaining five cases, interactants could have used a different discursive move, such as a *metacomment*. Alternatively, the *problem statement* could have been written as the very first discursive move in the very first entry of a thread, meaning that there simply was no preceding move. These cases are not visible in the table since I focus on the four most frequent discursive moves for ease of reading. I will illustrate some of the salient sequences in the following discussion to show how these discursive moves can be linked.

To begin with, Table 6.15 has revealed that sometimes a *problem statement* is preceded by another *problem statement*. This is especially the case in the theme 'relationships'. The following example displays such an occurrence when Ellie talks about her problematic family dynamics:



## (6.5) Ellie (Thread: Ellie; Entry 1)

<*Problem statement*: I am already feeling increased pressure and stress even in such a short time of being at home. I have tried talking to my siblings and dad but have had very little response. I don't want this situation to get any worse as I still have studying to do over the summer as I need to sit an exam I missed in January. I'm not sure whether to raise the issue again because I don't want my dad to think I am not willing to help out and my sister calls me "selfish" and "ignorant" which upsets me. *Problem statement*>

<*Problem statement*: I'm not really sure what I should do because I don't like conflict and confrontation and I am worried that speaking about my feelings will cause exactly that. *Problem statement*>

Ellie first describes the emotional ramifications of the conflictual situation at her home. In the second *problem statement*, Ellie talks about her dislike of conflict; this adds more information on why the conflict is especially difficult for her. Clients frequently use two *problem statements* to describe several aspects of one problem in their lives. Locher (2006: 221) reported that advice-seekers on the online advice column frequently used questions before stating a problem, or even asked two questions at once. I argue that the use of two *problem statements* clearly distinguishes the interaction in email counseling from the online advice column. Clients in my data mostly refrain from asking questions, but instead narrate their troubles. I further argue that two consecutive *problem statements* are more likely to occur in online rather than face-to-

face counseling. Danby et al. (2009) compared online and telephone counseling and showed that counselors routinely used at least minimal responses to signal active listening to the clients. In other words, such minimal responses would likely interrupt two *problem statements* in face-to-face (or telephone) counseling.

Secondly, clients also use *problem statements* to respond to their own *assessment* moves. This occurs especially often in the themes ‘anxiety’ and ‘relationships’. Example (6.6) shows Anna’s *assessment* of her unhelpful thinking patterns, which is then followed by a *problem statement* about specific messages she gives herself:

- (6.6) Anna (Thread: Anna; Entry 5)  
 <Assessment: Yeah, they almost always start with “what if”. From that page, I can see that I definitely tend to “predict the future” a lot, even if what I’m thinking is irrational, I convince myself that it’s going to happen. I do this a lot, with small every day things, like checking my emails. Assessment>  
 <Problem statement: I’ll always assume that I’ve been sent some kind of email, telling me that I owe money (I don’t), or that I haven’t enrolled in uni properly and need to do my year again, silly things like that. [...] Problem statement>

In entry 4 (not shown in the example), the counselor asked Anna to describe her unhelpful thinking patterns. In Anna’s *assessment* shown in example (6.6), Anna evaluates her unhelpful thinking patterns and the frequency with which these thoughts occur. In the following *problem statement*, she describes specific problematic situations and their ramifications. A shift from observing and identifying unhelpful

thinking patterns (in the *assessment*) towards their negative consequences (described in the *problem statement*) is visible.

Third, the clients also write *problem statements* after the counselor has requested further information. Naturally, if the counselor wants to make sure that she has understood the clients correctly or needs further information about a problematic issue, the clients can respond with a *problem statement*. In example (6.7), Mel responds with a *problem statement* after the counselor has asked metaphorically about Mel's low self-esteem:

- (6.7) Counselor / Mel (Thread: Mel; Entry 2 / 3)  
 <Counselor; *Request for information: I wonder what your garden looks like Mel? Request for information*>  
 <Mel; *Problem statement: Very weedy to be honest, with a few nice flowers though. Problem statement*>

The counselor compares self-esteem with an internal garden that consists of nice flowers (positive qualities) and weeds (negative qualities) (not shown in the example). The counselor writes a *request for information* to ask Mel about her internal *garden*. Mel answers this *request for information* by providing a *problem statement* in which she confirms that she suffers from low self-esteem, i.e., her garden has some *nice flowers*, but is generally *very weedy* (see Chapter 9 for more information and a detailed analysis of the garden metaphor). Rudolf von Rohr (2018) mentions in her study that posters on one forum she analyzed used *requests for information* in final position of their posts to trigger further interaction. She did not indicate, however, whether such

requests were answered with *problem statements* (or in her case the discursive move “own experience”).

#### *Discursive Moves Occurring after Problem Statements*

Clear patterns also emerge for the discursive moves that follow *problem statements* (see Table 6.16).

Table 6.16 Number of the four most frequent discursive moves **after** clients' problem statements in the three most frequent themes

Theme →	Anxiety (n=19)		Relation- ships (n=35)		Self-es- teem (n=19)	
	Clients	Counselor	Clients	Counselor	Clients	Counselor
<b>Discursive move ↓</b>						
Problem statement	2		4		3	
Assessment	2	14	1	25	2	12
Advice						1
Request for information						1
Total	4	14	5	25	5	14

First, the majority of *problem statements* are responded to by the counselor (‘anxiety’: n=14; ‘relationships’: n=25; ‘self-esteem’: n=14). Only two of these responses by the counselor are not *assessments*. In the theme ‘self-esteem’, one *problem statement* is followed by an *advice-giving* move and one *problem statement* is followed by a *request for information* from the counselor. In contrast, clients rarely follow up a *problem statement* with another move (‘anxiety’: n=4; ‘relationships’: n=5; ‘self-esteem’: n=5). In the rare cases in which they do, they use *problem statements* rather than *assessments* (‘anxiety’: 2 *problem*

*statements* and 2 *assessments*; ‘relationships’: 4 *problem statements* and 1 *assessment*; ‘self-esteem’: 3 *problem statements* and 2 *assessments*).

I illustrate some of the major patterns with examples. First, clients’ *problem statements* within the three most frequent themes are mostly followed by an *assessment* from the counselor. Chris, in example (6.8), describes his anxiety in a *problem statement*. This is followed by an *assessment* from the counselor:

- (6.8) Chris / Counselor (Thread: Chris; Entry 3 / 4)  
 <Chris; *Problem statement*: *It does, it’s almost as if I’m in control when I first think about it, then the more I analyse it, the more the control slips away from me. Problem statement*>  
 <Counselor; *Assessment*: *That makes a lot of sense, coming back to ‘what you focus on gets bigger!. The more you focus on analyzing, and therefore thinking about the anxiety, the more it fills your attention. Assessment*>

Example (6.9) shows Mel’s description of different attitudes she and her boyfriend struggle with, written in a *problem statement* in entry 5. The counselor assesses this situation in her response in entry 6:

- (6.9) Mel / Counselor (Thread: Mel; Entry 5 / 6)  
 <Mel; *Problem statement*: *We have different attitudes to achievement in some ways – I’m quite driven but he puts things off, sometimes to the extent that he doesn’t get around to doing something that he wants or needs to do, and sometimes this causes tension. Problem statement*> <Counselor; *Assessment*: *I can hear your*

frustration, resentment and hurt Mel, and how hard you try to gain a balance with all the demands on your time. You are clear in describing how many different things you are dealing with, alongside the financial responsibility as your boyfriend isn't currently working. *Assessment*>

In both cases, the clients employ a *problem statement* to describe their struggles. The counselor then evaluates, normalizes, and shows her understanding of these problems in *assessments*. Clients' *problem statements* are hardly ever followed directly with *advice-giving* moves or with *requests for information*. The counselor first foregrounds her understanding of the clients' problems through *assessments*. Locher (2006) demonstrated that the advisory team on *Lucy Answers* overwhelmingly uses *assessments* as the very first discursive move of a response letter. Locher (2006: 78) suggests that the team uses these *assessments* to "create a personal link at the very beginning" of the interaction. In my data, in which the interaction is highly interactive, the counselor likely aims to demonstrate that she has read the clients' input and that she has understood them and takes their concerns seriously.

#### **6.4.2 Assessments by the Clients**

As clients' well-being improves, they start to increasingly assess their progress. I present the results of my examination of the preceding and following discursive moves of such client *assessments*.

*Discursive Moves Occurring before Clients' Assessments*

Table 6.17 shows which discursive moves precede the clients' *assessments* in the three most frequent themes.

Table 6.17 Number of the four most frequent discursive moves **before** clients' assessments in the three most frequent themes

Theme →	Anxiety (n=49)		Relation- ships (n=29)		Self-esteem (n=33)	
	Clients	Counselor	Clients	Counselor	Clients	Counselor
Problem statement	2		3		1	
Assessment	12	2	7	2	2	1
Advice		6		1		5
Request for information		14		11		18
Total	14	22	10	14	3	24

Clients' *assessments* are preceded by discursive moves that are written by the client ('anxiety': n=14; 'relationships': n=10; 'self-esteem': n=3) and by discursive moves that the counselor posted ('anxiety': n=22; 'relationships': n=14; 'self-esteem': n=24). Two cases occur only infrequently: a client's *assessment* is rarely ever preceded by a client's *problem statement* ('anxiety': n=2; 'relationships': n=3; 'self-esteem': n=1) and a client's *assessment* is almost never preceded by an *assessment* from the counselor ('anxiety': n=2; 'relationships': n=2; 'self-esteem': n=1). Within the theme 'anxiety', a client's *assessment* is most often preceded by another *assessment* from the client (n=12) or by a *request for information* from the counselor (n=14). In the themes 'relationships' and 'self-esteem', clients' *assessments* are most frequently

preceded by a request from the counselor ('relationship's: n=11; 'self-esteem': n=18).

I illustrate two of the more frequent patterns here. First, clients can report on their experiences with two *assessments* that immediately follow each other, but that are concerned with slightly different content. Example (6.10) is taken from Mel's interaction with the counselor:

- (6.10) Mel (Thread: Mel; Entry 7)  
 <Assessment: I have tried this approach in the past but he suggested that I cut down on the things that I do! Assessment> <Assessment: I've suggested that we have a 'date night', one evening a week where we definitely spend time doing something nice. He was a bit resentful at first, thinking perhaps that it was a cliché, but grew to the idea. Assessment>

In the first *assessment*, Mel evaluates a suggestion that the counselor made in a previous entry. In a second *assessment*, Mel reports back on how she used a different technique to overcome the problem she talks about. By comparison, in Rudolf von Rohr's (2018) study of the use of *assessments* in the forums on smoking cessation, the posters in one forum use *assessments* in initial position in 37 percent of posts, and in final position in 22 percent of posts. In the second forum, posters use *assessments* in initial position in 28 percent and in final position in 24 percent of posts. Most likely, some of these *assessments* occurred in the same posts, resembling the two *assessments* that follow each other in my data.



Second, I have pointed out above that clients' *assessments* are frequently preceded by a *request for information* from the counselor. This reveals that the counselor often succeeds in triggering a response. Then the clients can, for example, report on their self-reflection in *assessment* moves. Example (6.11) shows how Taylor's *assessment* in entry 11 was triggered by a *request for information* from the counselor in entry 10:

- (6.11) Counselor / Taylor (Thread: Taylor; Entry 10 / 11)  
 <Counselor; *Request for information: What phrase or image might help you to stop for moment to think about different perspectives, before responding?* Request for information>  
 <Taylor; *Assessment: It sounds a little callous but I try to think of all the embarrassing stuff they've done in the past and how I feel about it, and im pretty sure nothing my friends have said or done has ever mad eme think any less of them. Sometimes I get fixated on not hearing from them and I remember all the reasons they might have not to like me, but then when I do speak to them its fine again.* Assessment>

Taylor responds to the counselor's inquiry about phrases or images with an *assessment* move that outlines what she thinks at those specific times. In example (6.12), Chris responds with an *assessment* to the counselor's request about what image he uses to mentally destroy unhelpful thinking patterns:

- (6.12) Counselor / Chris (Thread: Chris; Entry 2 / 3)  
 <Counselor; *Request for information: What is your image Chris?* Request for information>

<Chris; *Assessment*: *This has also worked more than I expected it to. Instead of picturing the questions I ask myself, I picture the words ‘depression’ or ‘anxiety’ and think of destroying them. Assessment*>

Examples (6.11) and (6.12) have shown how the clients assess their own behavior and provide the counselor with further input. In both cases, the trigger from the counselor (the *request for information*) ignites the clients’ *assessments*.

#### *Discursive Moves Occurring after Clients’ Assessments*

In Table 6.18, all the occurrences for the discursive moves that follow clients’ *assessments* within the three most frequent themes are shown.

Table 6.18 Number of the four most frequent discursive moves **after** clients’ assessments in the three most frequent themes

Theme →	Anxiety (n=49)		Relation- ships (n=29)		Self-esteem (n=33)	
	Clients	Counselor	Clients	Counselor	Clients	Counselor
Problem statement	5		3		2	
Assessment	1	29	1	20	1	21
Advice		1		3		3
Request for information		2				2
Total	6	32	4	23	3	26

Clients’ *assessments* are almost exclusively followed by *assessments* from the counselor (‘anxiety’: n=29; ‘relationships’: n=20; ‘self-esteem’: n=21). This finding corroborates Locher’s (2006) report that the

advisory team on *Lucy Answers* frequently starts their responses with an *assessment*. Rudolf von Rohr (2018) also reports that *assessments* are overwhelmingly used in initial position in posts on the forums. It is noteworthy that clients' *assessments* are rarely followed by *advice-giving* or *request for information* moves by the counselor. It seems that the counselor prefers to assess the clients' own *assessments* before possibly adding further discursive moves. Giving advice immediately after the clients have assessed their situations might be taken as diminishing the client's improvement. As a result, such a practice carries a potential threat to the clients' face. This could also hinder the uptake of the advice the counselor gives (for more on this stepwise entry to advice, see Section 6.4.4 on *advice-giving* below). Some *assessments* from clients are followed by clients' *problem statements* (I have already discussed this sequence in Section 6.4.1).

I elaborate on the sequence in which a client's *assessment* is followed by an *assessment* from the counselor in the following illustrations. The first example is the continuation of example (6.12) above. Chris' *assessment* is followed by an *assessment* from the counselor:

- (6.13) Chris / Counselor (Thread: Chris; Entry 3 / 4)  
 <Chris; *Assessment: This has also worked more than I expected it to. Instead of picturing the questions I ask myself, I picture the words 'depression' or 'anxiety' and think of destroying them. Assessment*>  
 <Counselor; *Assessment: Yes, that's another really effective way to use imagery. By destroying these thoughts you are saying to your*

mind, that you are not going to listen to them.

*Assessment*>

Chris' *assessment* of the coping technique is further assessed by the counselor. In this *assessment*, the counselor explains why the slight change Chris made to the technique has positive effects on his troubles. Example (6.14) is an excerpt of Anna's thread. It illustrates how Anna's *assessment* of a coping technique the counselor suggested in an earlier entry has helped her:

(6.14) Anna / Counselor (Thread: Anna; Entry 11 / 12)  
 <Anna; *Assessment*: I'm still having my ups and downs, but again, I think that will improve over the summer as I get back into a routine. The thing that you suggested that helped the most was association – so in my case, watching films that I did as a kid, or listening to music that reminds me of last year.  
*Assessment*>

<Counselor; *Assessment*: Yes, having a routine really helps, and I'm glad you have found some associations that are positive for you and helping. I find this strategy is so simple, yet amazing effective!!  
*Assessment*>

The counselor reiterates Anna's success by highlighting how effective the suggested coping technique is. Such affirmations help to encourage and praise the client's improvement.

The high frequency of cases in which a client's *assessment* is followed by an *assessment* from the counselor confirms my interpretation that the counselor aims to respond to any input from the clients. This results in minimal *assessments*, such as a single emoticon:

- (6.15) Mel / Counselor (Thread: Mel; Entry 3 / 4)  
 <Mel; *Assessment*: I've done the list and it does help focus on my positives. I do feel that I could write a list of negatives too but I'm trying to push those thoughts away! *Assessment*>  
 <Counselor; *Assessment*: 😊 *Assessment*>

While minimal from a spatial point of view, the emoticon (Dresner and Herring 2010) carries out specific work: it signals that the counselor has read the client's *assessment* and agrees with it. In addition, it signals positive alignment with the client's *assessment*.

### 6.4.3 Assessments by the Counselor

*Assessments* are also used by the counselor. I have analyzed both the preceding and the following discursive moves of the counselor's *assessments*.

#### *Discursive Moves Occurring before the Counselor's Assessments*

Discursive moves preceding a counselor's *assessment* are more frequently text passages from the clients rather than the counselor herself. However, Table 6.19 shows that the counselor prefaces some of her *assessments* with either *advice-giving* or *request for information* moves, with the latter occurring more prominently.

The counselor's *assessments* are frequently preceded by a *problem statement* from clients ('anxiety': n=12; 'relationships': n=21; 'self-esteem': n=14) or by an *assessment* from clients ('anxiety': n=31; 'relationships': n=14; 'self-esteem': n=19). These numbers suggest at

first glance that the counselor responds more often to the clients' *assessments* than to their *problem statements* in the themes 'anxiety' and 'self-esteem', while the opposite seems to be true for the theme 'relationships'. However, I have highlighted above that clients use more *assessments* than *problem statements* in the themes 'anxiety' and 'self-esteem'. In the theme 'relationships', they employ more *problem statements* than *assessments*. In other words, the difference in the preceding moves of the counselor's *assessments* occurs because the counselor responds to the clients' differing input in those themes.

Table 6.19 Number of the four most frequent discursive moves **before** the counselor's assessments in the three most frequent themes

Theme →	Anxiety (n=61)		Relationships (n=64)		Self-esteem (n=52)	
	Clients	Counselor	Clients	Counselor	Clients	Counselor
Problem statement	12		21		14	
Assessment	31	3	14	5	19	2
Advice		2		5		7
Request for information		5		12		9
Total	43	10	35	22	33	18

The counselor's *assessments* are seldomly preceded by other *assessments* from the counselor. In some cases, *assessments* by the counselor are preceded by her own *advice-giving* moves. The most frequent discursive moves from the counselor that precede her own *assessments* are *requests for information* ('anxiety': n=5; 'relationships': n=12; 'self-esteem': n=9). The counselor seems to evaluate or explain her requests

for information through the *assessments* that follow. I will illustrate three specific patterns that I found: (1) the counselor's *assessment* is preceded by a *problem statement* from a client, (2) the counselor's *assessment* is preceded by an *assessment* from a client, and (3) the counselor's *assessment* is preceded by a *request for information* from the counselor.

First, the counselor's *assessment* in example (6.16) is preceded by a *problem statement* from Taylor:

- (6.16) Taylor/ Counselor (Thread: Taylor; Entry 3 / 4)  
 <Taylor; *Problem statement*: **My boyfriend isn't great with this stuff. Seeing him cheers me up I see him most weekends but when Im sad or having a bad day or crying, hes really not great to talk to. He say it brings him down, but he seems more annoyed. Not quite sure if hes annoyed cos he cant help or what. I don't like bringing this kinda stuff up with him really, he takes it quite personally.** *Problem statement*>  
 <Counselor; *Assessment*: I can hear how you are understanding and aware that his annoyance maybe more with himself for not knowing how to help you Taylor, while it is natural that his reaction would lead you to fell that you need to hold back and not tell him fully how you are feeling. I get the sense, though I could be wrong that he also has difficult stuff he is dealing with. *Assessment*>

The counselor clearly evaluates Taylor's problematic situation in the *assessment* and thereby demonstrates that she has understood Taylor.

Second, the counselor often responds to the clients' *assessments* with her own *assessments*. This is illustrated in examples (6.17) and (6.18) for the theme 'anxiety' in Taylor's thread and the theme 'self-esteem' in Mel's thread:

- (6.17) Taylor / Counselor (Thread: Taylor; Entry 5 / 6)  
 <Taylor; *Assessment*: I think the one that's worked best so far is the 'hello anxiety, nice to see you' one and I've changed it to be 'hello grumpiness' etc depending on the situation. They are helpful, though easy to forget about when you have a lot on your mind. *Assessment*>  
 <Counselor: *Assessment*: It's good to hear that something is helping a little, and I appreciate that it takes time to change familiar patterns of thinking. Your pattern of thinking anxiously has been around for a while and will take time to change. *Assessment*>
- (6.18) Mel/ Counselor (Thread: Mel; Entry 7 / 8)  
 <Mel; *Assessment*: I've been adding to the list but I admit I don't always manage to find three things each day! It does feel nice to think about achievements because it's so easy to focus on the negative.  
 <Counselor: *Assessment*: I can hear how this is helping you to shift your focus Mel, and gain a more balanced view of your day ☺ *Assessment*>



In both cases, the counselor manages to let the clients know she understands and cares about their input. This demonstrates that she takes the clients seriously and is tracking their progress.

Third, the counselor's *assessments* can also be preceded by her own *requests for information*. This type of sequence occurs most prominently in the theme 'relationships'. As the following example illustrates, a preceding *request for information* can be further explained through an *assessment*:

- (6.19) Counselor (Thread: Taylor; Entry 8)  
 <Request for information: I'm wondering about his view of you as childish Taylor, and whether this is a view shared by anyone else when you are expressing feelings of upset. Request for information> <Assessment: I'm reminded how feedback from others says as much about them as us. What I mean is that their comments about us are based on their beliefs, values, upbringing and assumptions, which influences their interpretation of what they observe about us. Assessment>

The counselor explains her request by elaborating on why she asked Taylor to think about the specific question.

#### *Discursive Moves Occurring after the Counselor's Assessments*

The counselor's *assessments* and the moves following them in the three most frequent themes are shown in Table 6.20.

Table 6.20 Number of the four most frequent discursive moves **after** the counselor's assessments in the three most frequent themes

Theme →	Anxiety (n=61)		Relation- ships (n=64)		Self-esteem (n=52)	
	Clients	Counselor	Clients	Counselor	Clients	Counselor
Problem statement	1		4		2	
Assessment	1	2	2	6	2	
Advice		14		15		16
Request for information		13		23		21
Total	2	29	6	44	2	37

Clients mainly abstain from responding directly to the counselor's *assessments*. In total, the clients respond to the counselor's *assessments* in the theme 'anxiety' with two discursive moves (1 *problem statement*, 1 *assessment*), in the theme 'relationships' with six discursive moves (4 *problem statements*, 2 *assessments*) and in the theme 'self-esteem' with two discursive moves (2 *problem statements*). As I have already shown in my discussion above, the counselor rarely writes two *assessments* in a row. Instead, most of the counselor's *assessments* are followed by either *advice-giving* moves ('anxiety': n=14; 'relationships': n=15; 'self-esteem': n=16) or *request for information* moves ('anxiety': n=13; 'relationships': n=23; 'self-esteem': n=21). I will illustrate these last two patterns with some examples.

To begin with, the counselor assesses the client's situation and then proceeds to give advice in example (6.20):

- (6.20) Counselor (Thread: Ellie; Entry 6)  
 <Assessment: I'm conscious that this is a really tough one Ellie, and that things seem pretty stuck right now. Assessment> <Advice-giving: It might be helpful to write down a list of bullet points of the things you want to say, as a way of getting the thoughts clear and deciding, when you are ready to talk, what are the important things to day. Advice-giving>

The counselor's acknowledgment that *things seem pretty stuck* aligns her with Ellie. This facilitates the uptake of the advice that immediately follows. Such stepwise entry into advice has been found by previous researchers as well (Locher 2006; Morrow 2012; Rudolf von Rohr 2018). They have all demonstrated that advice-givers carefully craft their responses and mitigate the potential threat to the advice-seeker's face. This is not just common in online health practices, but also in face-to-face encounters (see e.g. Heritage and Sefi 1992). In the interview, the counselor confirmed that her initial assurance that she has understood clients is intended to facilitate the uptake of advice:

I think it's really important to reflect back to the client so they know that you've heard them. I want them to know that I'm doing my best to understand and to give them that voice that they never really had to say what's on their mind. So giving the clients the space to talk about their troubles is really important, because then they're more likely to be open to try something else after being heard. So showing them that I understood them is really important in helping the clients get to a place where they're

gonna want to try that coping technique that I suggest. (Interview)

Clearly, the counselor is aware of the importance of a stepwise entry to advice, and my analysis reveals that she puts this awareness into practice in the exchanges.

Second, the counselor follows up her *assessments* with a *request for information* in the following examples from Anna's and Mel's threads:

- (6.21) Counselor (Thread: Anna; Entry 6)  
 <Assessment: I can hear a mix of anxiety and frustration about your exams and hurt at how these girls treated you Anna, while it's positive to hear that the panic attacks are less frequent. I'm guessing it took quite a bit of courage to ask them for help, only to be ignored. Assessment>  
 <Request for information: I'm wondering what support your tutors could offer you around revising? Request for information>
- (6.22) Counselor (Thread: Mel; Entry 8)  
 <Assessment: I'm conscious of the change in your approach to this situation Taylor. I hear that it is a familiar, if infrequent situation, and this time you felt strong enough to make it clear that his behaviour and words are unacceptable. Assessment> <Request for information: How did it feel to do this? Request for information>

In Anna and Mel's case, the counselor first assesses the clients' situation and then asks them to introspect with her *requests for information*.

Examples (6.20) to (6.22) show how the counselor can use *assessments* to evaluate the problems the clients present. However, she also aims to align with the clients. This is important in the continuation of the interaction when she wants to further involve the clients in the interaction.

I want to briefly highlight a pattern that I found especially frequently when analyzing the discursive moves that follow the counselor's assessments. Table 6.20 has revealed that there are a total of 61 *assessments* by the counselor in the theme 'anxiety'. Only 31 (2 by the clients, 29 by the counselor) are responded to with a discursive move that is either a *problem statement*, an *assessment*, an *advice-giving* move, or a *request for information*. In other words, 30 *assessments* by the counselor are followed by one of the discursive moves that do not occur frequently, such as *metacomments* or *general information*. Alternatively, it might be that some of the counselor's *assessments* are simply not responded to by either the clients or the counselor. A close analysis of the counselor's *assessments* in the three most frequent themes has shown that the counselor's *assessments* have not been responded to at all in 20 cases in the theme 'anxiety', in 9 cases in the theme 'relationships', and in 8 cases in the theme 'self-esteem' (these numbers are not shown in Table 6.20). The counselor does not comment on such silences in the exchanges and simply continues to respond to the clients' input.

#### 6.4.4 Advice-Giving by the Counselor

Section 6.3 has revealed that only the counselor uses *advice-giving* moves. As with the previous discursive moves, I will highlight here which discursive moves precede and which discursive moves follow *advice-giving* moves written by the counselor.

##### *Discursive Moves Occurring before Advice-giving*

I have provided the number of occurrences of discursive moves that are employed before the counselor's *advice-giving* moves in Table 6.21. *Advice-giving* moves are preceded by the clients' input in only five cases: two *assessments* in the theme 'relationships', and one *problem statement* and two *assessments* in the theme 'self-esteem'. Instead, many of the *advice-giving* moves are preceded by the counselor's own discursive moves. Within the theme 'anxiety', the advice is preceded by *assessments* (n=18), other *advice-giving* moves (n=25) and *requests for information* (n=15). A similar pattern emerges in the theme 'self-esteem': advice is preceded by *assessments* (n=15), previous *advice-giving* moves (n=19) and *requests for information* (n=16). In the theme 'relationships', *advice-giving* moves are less often preceded by other *advice-giving* moves (n=5), but more frequently by *assessments* (n=14) and *requests for information* (n=9). This possibly stems from the fact that *advice-giving* occurs less frequently in this theme overall. In general, the counselor is determined to guide the client carefully to the advice given and precedes *advice-giving* moves with other discursive moves. As I have pointed out above, this finding is in accordance with

previous studies that have highlighted how advisors employ a “stepwise entry to advice” (Heritage and Sefi 1992: 377-379; Locher 2006: 111). Interestingly, the counselor realizes the mitigation of advice differently according to theme: in the themes ‘anxiety’ and ‘self-esteem’, she seems to be able to write several *advice-giving* moves in a row, while at times also preceding the advice with *assessments* and *requests for information*. In the theme ‘relationships’, however, the counselor uses mostly *assessments* to preface the advice that she gives. I will illustrate these differences in the following examples.

Table 6.21 Number of the four most frequent discursive moves *before* the counselor’s advice-giving in the three most frequent themes

Theme →	Anxiety (n=76)		Relation- ships (n=33)		Self-esteem (n=59)	
	Interactant →					
Discursive move ↓	Clients	Counselor	Clients	Counselor	Clients	Counselor
Problem statement					1	
Assessment		18	2	14	2	15
Advice		25		5		19
Request for information		15		9		16
Total		58	2	28	3	50

In the themes ‘anxiety’ and ‘self-esteem’, the pattern that occurs most frequently is that one *advice-giving* move is preceded by another *advice-giving* move. For example, the counselor provides Taylor with advice on how to deal with anxiety. She suggests various coping techniques. In example (6.23), two such coping techniques are provided in two *advice-giving* moves:

- (6.23) Counselor (Thread: Taylor; Entry 2)  
 <Advice-giving: **Another one to try is literally saying 'hello, anxiety, thank you for being here'. Again, a simple acceptance of its presence (the unwelcome wedding guest) without trying to get rid of it. Advice-giving**>  
 <Advice-giving: **Or, repeat the word anxiety, out loud preferably, as fast as you can 100 times. Advice-giving**>

These are not the only two suggestions that the counselor makes at this stage of entry 2. Due to the fact that the counselor suggests various coping techniques and the fact that she encourages Taylor to find the right one for herself (not shown in the example), two consecutive *advice-giving* moves do not threaten Taylor's face. Locher (2006) also found this type of sequence in her study. It is in fact the combination that occurs most frequently in the response letters by *Lucy*.

In example (6.24), the counselor prefaces her advice by utilizing a *request for information* move in a text passage that is about low self-esteem. The italics and the bold font were in the original. The counselor informed the clients in her introductory message that she would like them to respond to any text passage written in italics. The bold font means that the counselor wants to emphasize the specific sentence.

- (6.24) Counselor (Thread: Taylor; Entry 4)  
 <Request for information: *What messages are you giving yourself? What common phrases do you use? E.g. 'I should... I must... Why did I... I'm no good' etc. Request for information*>  
 <Advice-giving: **Try and imagine that the**



*thought is in solid letters you can grab (carved out of stone, made of glass, wood, built of bricks etc), then imagine you are destroying those words (blowing them up, burning, smashing or shredding them). **This gives your mind a powerful message that you are no longer listening to them.** Advice-giving>*

This excerpt is from a text block the counselor uses to help the clients fight low self-esteem (it occurs in this and slightly altered form in three threads: Chris', Mel's, and Taylor's). By encouraging Taylor to think of specific messages that she is giving herself, the counselor tries to take Taylor's specific situation into account. In addition, Taylor will find it easier to envision the next step of mentally destroying those messages if she has a clear picture in mind (for a more detailed analysis of this text block, see Chapter 9).

Finally, example (6.25) shows how the counselor instructs Taylor to remember some techniques that they previously discussed in the theme 'anxiety':

- (6.25) Counselor (Thread: Taylor; Entry 8)  
 <Request for information: *I'm wondering what someone else might say if their dinner making had not turned out as they had expected?* Request for information> <Advice-giving: *Give me some examples of alternative viewpoints. ☺ Remember Taylor, we all have the ability to choose how respond – so is this a screw up, or an opportunity to learn. After all, we learn by trying, making*

mistakes and adapting! We are not computers who once programmed complete a task perfectly the first, and every time! ☺ Humour often helps, to laugh at a mistake, giving your meal a funny new name for instance. *Advice-giving*>

The counselor encourages Taylor to take on a different perspective when thinking of messing up dinner. She actively invites Taylor to switch perspectives in the *request for information*. Only then does the counselor remind Taylor that they have previously talked about such situations. The *request for information* mitigates the repetition of the advice that follows. This is highlighted even more through the smiley emoticon (Dresner and Herring 2010) that further mitigates the face-threat by showing a positive stance.

In the theme ‘relationships’, the counselor prefers to preface an *advice-giving* move with an *assessment* or, to a lesser extent, with a *request for information*. Examples (6.26) and (6.27) illustrate how the counselor frames her advice with a preceding *assessment* move.

- (6.26) Counselor (Thread: Mel; Entry 8)  
 <Assessment: Your confusion is very normal Mel. No situation or relationship is black and white, and naturally there are lots of great things about your relationship to build on. And of course the thought of ending it after 7 plus years is very scary. You have a long term commitment and history together. Assessment> <Advice-giving: I guess the important thing is that you are clear this is not something you want to have repeated and that if you are both committed to working out how to deal with these situations differently,

things will improve. It is natural that he wants to forget quickly, as he feels bad about what happened. However, as you know, forgetting means things can happen again. Which reminds me of a quote, 'those who choose to forget history as doomed to repeat it'. *Advice-giving*>

- (6.27) Counselor (Thread: Ellie; Entry 8)  
 <Assessment: It is really good to hear how much more positive you sound Ellie. *Assessment*> <Advice-giving: Keep on doing what you have been doing, and see how you get on with the suggestions I have made today. *Advice-giving*>

In example (6.26), the counselor normalizes Mel's situation and empathizes with Mel in the *assessment*. She delivers the advice subsequently in mitigated form (e.g. no imperatives, the mitigating structure *I guess*, etc.). In example (6.27), the counselor praises Ellie's positive attitude and progress. Her *advice-giving* move is intricately linked to the *assessment* as she advises Ellie to *keep on doing what you have been doing*, which aims to facilitate further improvement.

Last but not least, example (6.28) shows how the counselor uses a *request for information* before an *advice-giving* move in Ellie's thread:

- (6.28) Counselor (Thread: Ellie; Entry 6)  
 <Request for information: If she was an animal what would she be? What animal are you? Your Mum and your Dad? *Request for information*>  
 <Advice-giving: Think about the differences between these animals, what characteristics led

you to choose that particular animal for each of you. *Advice-giving*>

By first introducing the question, the counselor involves the client in the specific task. She also aims to trigger a clear picture in Ellie. This facilitates the uptake of the subsequent advice that the counselor gives: the more concrete the image is that Ellie imagines, the easier it will be to apply the advice.

#### *Discursive Moves Occurring after Advice-giving*

Table 6.22 reveals that *advice-giving* moves are not frequently followed by clients' responses either.

Table 6.22 Number of the four most frequent discursive moves **after** the counselor's *advice-giving* in the three most frequent themes

Theme →	Anxiety (n=76)		Relation- ships (n=33)		Self-esteem (n=59)	
	Clients	Counselor	Clients	Counselor	Clients	Counselor
Problem statement					1	
Assessment	7	4	1	4	5	4
Advice		20		5		15
Request for information		17		9		17
Total	7	41	1	18	6	36

The clients respond to the counselor's *advice-giving* moves only in 14 cases (out of a total of 168 *advice-giving* moves in the themes 'anxiety', 'relationships' and 'self-esteem'). 13 of these moves written by clients

are *assessments* ('anxiety': n=7; 'relationships': n=1; 'self-esteem': n=5) and only one is a *problem statement* (in the theme 'self-esteem'). It is telling that some of the counselor's *advice-giving* moves are responded to by clients in the themes 'anxiety' and 'self-esteem'. Within these two themes, the counselor uses pre-written text blocks that include various suggestions of coping techniques. It seems to be easier for clients to respond to a specific piece of advice in such cases than when the counselor gives advice in other contexts, such as in the theme 'relationships'.

The counselor, on the other hand, frequently employs an additional discursive move after an *advice-giving* move. Overall, the counselor seems not to prefer adding an *assessment* after her advice. It seems reasonable to assume that the counselor does not feel the need to assess her own advice. Locher (2006: 83) found a similar dispreference for *assessment* moves to occur after advice, albeit not as marked as in my data. In the themes 'anxiety' and 'self-esteem', the counselor tends to alternate between adding a second *advice-giving* move or a *request for information* move after advice. Locher (2006: 84) found that the combination of advice plus advice is the most frequent combination of discursive moves in the online advice column. I have elaborated above on the occurrences of two advice moves in a row.

The counselor's *requests for information* follow an *advice-giving* move quite often in all three themes: 'anxiety' (n=17), 'relationships' (n=9), and 'self-esteem' (n=17). I have shown above that an *assessment* or *request for information* move that is followed by an *advice-giving*

move signals a stepwise entry to advice. I argue that the sequence of an *advice-giving* move that is followed by a *request for information* also serves an interpersonal effect. On the one hand, it lays the responsibility of applying the advice in the hands of the clients. In other words, requesting clients to provide some information might make them feel more obligated to reply and therefore apply the advice. On the other hand, the clients are clearly invited to think along and feel like an active participant in the therapeutic alliance.

Examples (6.29) and (6.30) illustrate these aspects in the themes ‘anxiety’ and ‘self-esteem’ respectively:

- (6.29) Counselor (Thread: Chris; Entry 2)  
 <Advice-giving: Say out loud now, a few times, ‘I’m feeling anxious’. Advice-giving> <Request for information: How do you feel right this second having said that Chris? Request for information>
- (6.30) Counselor (Thread: Mel; Entry 4)  
 <Advice-giving: Yes, or another way that might help, is that when you feel low, to use an image that represents feeling strong, calm, happy and confident to focus on. Advice-giving> <Request for information: What might this Mel look like? What is she wearing, what is she doing, what expression does she have etc? Request for information>

In both cases, the counselor’s *requests for information* further illustrate the advice given and highlight specific aspects that clients should pay attention to. Both *requests for information* are written in italics. As I have previously mentioned, this means that the counselor would like

the clients to respond to this text passage. The italics and the interrogative form foreground that the clients are invited to share answers and to participate actively in the interaction.

### 6.4.5 Requests for Information by the Counselor

As I have discussed the occurrence of *requests for information* as preceding or following moves extensively already, I will only briefly focus on the most important results of the analysis of discursive moves that are used to frame *requests for information*. Only the counselor uses *requests for information*.

#### *Discursive Moves Occurring before Requests for Information*

The results for the discursive moves that occur before a *request for information* are presented in Table 6.23.

Table 6.23 Number of the four most frequent discursive moves **before** the counselor's requests for information in the three most frequent themes

Theme →	Anxiety (n=46)		Relation- ships (n=46)		Self-esteem (n=49)	
	Clients	Counselor	Clients	Counselor	Clients	Counselor
Problem statement					2	
Assessment	1	15	1	25	2	19
Advice		16		9		17
Request for information		1		6		2
Total	1	32	1	40	4	38

As with *advice-giving* moves, *requests for information* are rarely preceded by text passages written by the clients ('anxiety': n=1; 'relationships': n=1; 'self-esteem': n=4). The most common occurrence is that *requests for information* are preceded by an *assessment* from the counselor ('anxiety': n=15; 'relationships': n=25; 'anxiety': n=19) or an *advice-giving* move from the counselor ('anxiety': n=16; 'relationships': n=9; 'self-esteem': n=17). As I have illustrated such cases above, I will instead briefly look at instances in which the counselor employs two *requests for information* in a row. This mainly occurs in the theme 'relationships' (n=6).

Taylor and the counselor discuss her relationship troubles at length and the counselor poses *requests for information* quite frequently. In the case shown in example (6.31), the counselor links two consecutive *requests for information*:

- (6.31) Counselor (Thread: Taylor; Entry 6)  
 <Request for information: *I'm also wondering how you think your boyfriend views your relationship? If he were to describe you, what do you think he would say?* Request for information>  
 <Request for information: *You say that you're quite demanding at times, so help me to understand what you mean by that.* Request for information>

While the two *requests for information* are of course related as they are both inquiring about problems Taylor faces with her boyfriend, they specifically address two separate points that Taylor has previously made. Therefore, they can be interpreted as being two distinct *requests*



for information. The fact that the counselor uses two requests in a row highlights the force and immediacy of the problem. In addition, as Taylor uses a low rate of *assessments*, the counselor possibly uses two consecutive requests to facilitate Taylor's self-reflection and participation in the interaction. Nevertheless, as Table 6.23 reveals, such occurrences are rather rare and do not seem feasible, as they might overwhelm the clients.

#### *Discursive Moves Occurring after Requests for Information*

Table 6.24 reveals the discursive moves that follow a *request for information* that the counselor wrote.

Table 6.24 Number of the four most frequent discursive moves **after** the counselor's requests for information in the three most frequent themes

Theme →	Anxiety (n=46)		Relationships (n=46)		Self-esteem (n=49)	
	Clients	Counselor	Clients	Counselor	Clients	Counselor
Problem statement	3		6		9	
Assessment	11	2	9	13	17	5
Advice		7		7		8
Request for information		2		4		2
Total	14	11	15	24	26	15

*Requests for information* are answered by both the clients and the counselor. The clients respond to *requests for information* in all three themes: in the theme 'anxiety', the clients respond with more *assessments* (n=11) than with *problem statements* (n=3). In the theme

'relationships', the clients answer requests with a few *problem statements* (n=6), but still use more *assessments* (n=9). Finally, the clients also use *problem statements* (n=9) and *assessments* (n=17) to respond to the counselor's *requests for information* in the theme 'self-esteem'. The counselor seems to succeed in triggering some responses from the clients through the use of *requests for information*.

The counselor follows up her own *requests for information* as well. This might seem counter-intuitive at first. But I have already presented some examples above in which the counselor employed such patterns (e.g. a *request for information* is followed by an *assessment*). Such patterns aim, for example, to provide the clients with possible answers to the *request for information* and thereby mitigate the threat to the clients' face. The clients do not need to come up with answers all on their own, instead they are already provided with some sample answers in the counselor's *assessment*. Alternatively, the *assessments* were used to explain specific aspects of the *request*. In addition, I have also highlighted how *requests for information* that precede an *advice-giving* move can mitigate the threat of the advice and are reminiscent of a stepwise entry to advice.

I want to briefly address the fact that some of the *requests for information* are not answered with a discursive move at all. This occurs mostly in the theme 'anxiety', in which the counselor uses 46 *requests for information* in total. The clients respond to 14 of these, while the counselor follows up 11 of her requests with another one of the four most frequent discursive moves. That leaves 21 *requests for*

*information* moves in the theme ‘anxiety’ that are either not responded to or responded to with a less frequent discursive move. I briefly want to show an example and discuss its effects. Example (6.32) contains several *request for information* moves in the theme ‘anxiety’ that have not been answered by Taylor:

- (6.32) Counselor (Thread: Taylor; Entry 6)  
 <Advice-giving: **Ok, let's start with this. Say out loud now, a few times, 'I'm feeling anxious'.** Advice-giving> <Request for information: **How do you feel right this second having said that?** Request for information>  
 <Advice-giving: **Now change the wording and a few times say 'I notice that I'm feeling anxious'.** Advice-giving> <Request for information: **What difference do you notice?** Request for information>

The counselor's pattern of *advice-giving* moves that are followed by *requests for information* is not answered by Taylor in this example. The example is only a brief excerpt of a longer stretch of text by the counselor in which such combinations of *advice-giving* and *request for information* moves are continuously used. Taylor does not respond to the majority of them. She responds at the end of the entire text block that the counselor wrote (and which contains a variety of coping techniques) by writing *I shall try these!* (not shown in the example). However, this does not provide the counselor with any information on how Taylor fared when she applied these techniques. Such unanswered requests are, of course, problematic for the counselor. There can be many reasons

why Taylor does not respond, and without gaining further information about Taylor's silence, the counselor cannot be sure about any interpretation. In later entries, the counselor tries to include some of the coping techniques she suggested again. Nevertheless, unanswered *requests for information* clearly pose a problem for the counselor (see also Chapter 9).

### **6.5 Summary**

In this chapter, I have analyzed the distribution of themes and discursive moves and the sequence of the four most frequent discursive moves in the three most frequent themes. The results of the content analysis revealed that there are clear patterns with regards to the themes. To begin with, three themes are especially prevalent in the corpus: 'anxiety', 'relationships', and 'self-esteem'. To a lesser degree, the themes 'depression' and 'stress' also occur frequently. Individual threads focused on a low number of themes. While not all threads included all of the most frequent themes, at least two of them were discussed in each thread. The analysis of themes revealed further that not only the clients but also the counselor can introduce a theme. Moreover, the interactants do not talk about themes consecutively. In other words, they do not talk about one theme in the first few entries and about another in the latter ones. Rather, they continuously talk about several themes that are often thematically interlinked.

The distribution of discursive moves revealed that there is a clear preference for four specific discursive moves: *problem statements*,

*assessments*, *advice-giving*, and *requests for information*. However, their frequency differs according to theme. For example, the counselor uses *advice-giving* moves less often in the theme ‘relationships’ compared to the other themes. On the other hand, she frequently employs *requests for information* when discussing relationship issues with clients. This specific theme might lend itself less to giving advice as it deals specifically with individual relationships the clients struggle with. Locher (2006) also found that giving advice was less prevalent in the topic ‘relationships’ in *Lucy Answers*. In comparison, the themes ‘anxiety’ and ‘self-esteem’ contain a large number of *advice-giving* moves written by the counselor. These moves are used in specific text blocks in which the counselor suggests several coping techniques the clients can try out.

I have shown throughout Section 6.4 how email counseling differs from other online social practices. For example, the clients’ frequent use of *problem statements* and the marked absence of *requests for advice* or *questions* from the clients clearly differentiates email counseling from Locher’s (2006) online advice column. In addition, the very high frequency of the counselor’s *requests for information* illustrates the highly interactive and collaborative bond the counselor tries to establish with the clients. This is clearly indicative of the work the counselor invests to negotiate the therapeutic alliance. Such work seems to be less present in Locher’s (2006) and Rudolf von Rohr’s (2018) analysis of other online health practices. Clearly, each online

health practice is negotiated through distinct patterns of use with regards to discursive moves.

Further, the interactants do not use the same patterns of discursive moves in the beginning of the exchanges as they do towards the end. For example, clients employ more *problem statements* in early entries and shift towards *assessments* throughout the process of counseling. This is a clear indication that clients employ these two discursive moves on a continuum, depending on whether they still feel in need of support or see themselves already as active self-helpers. This clearly deserves more attention, and I specifically look at such changes in Chapter 8. Further, while the counselor continues to use *assessments*, *advice-giving* moves, and *requests for information* throughout the entire threads, there is a clear tendency that she uses fewer *advice-giving* moves the further the counseling process has advanced (see also Chapter 10).

Finally, there are clear preferences of certain sequences of discursive moves. First, *problem statements* are repeatedly followed by further *problem statements* or *assessments* written by the clients themselves. Such a combination did not frequently occur in other practices (e.g. Locher 2006; Morrow 2012; Rudolf von Rohr 2018). The counselor responds to almost all of the client's *problem statements* with an *assessment* move. Clients' *assessments* are also frequently followed by the counselor's *assessments*. This highlights the fact that the counselor responds to the clients' input whether the discursive move contains problem-oriented or evaluative input. An important characteristic of

email counseling is, in fact, that the counselor supports clients in dealing with their troubles, but also in assessing and encouraging their improvement and healthier well-being overall.

Second, an important result concerns the framing of advice. Previous studies found a stepwise entry to advice in various contexts (Heritage and Sefi 1992; Locher 2006; Morrow 2012; Rudolf von Rohr 2018). The results from my study confirm this practice. To start with, the counselor avoids giving advice directly after a text passage a client has written. Further, *advice-giving* moves are often preceded by an *assessment* from the counselor. This resembles the stepwise entry found in previous studies (e.g. Locher 2006; Rudolf von Rohr 2018). In addition, the counselor often follows up her advice by requesting information from the clients. I argue that this is a further step in facilitating the clients' uptake of the advice given; they are asked to self-reflect and therefore assess the advice they have just been provided. Additionally, clients are positioned as active participants in the therapeutic alliance when they are invited to contribute to the ongoing discussion. As a result, the specific pattern surrounding *advice-giving* moves facilitates not only the uptake of advice, but also the collaborative work the counselor and the clients carry out, all of which ultimately helps both interactants to negotiate the therapeutic alliance.

Third, I want to highlight a specific occurrence that emerged in the data: that *requests for information* are not always responded to by the clients. The medium of email might facilitate such silences or resistance. As a result, the counselor is left to interpret the lack of a

response to her *request for information*. While she can, of course, repeat the request, this might pose a potential threat to the clients' face, as it explicitly points out that the clients did not respond to the requests in the first place. Stommel and te Molder (2015) found that the absence of advice acknowledgements in chat counseling resulted in counselors not being sure whether their advice was helpful to clients. So far, it has not become clear how the counselor deals with such silences in my data. Further investigation, including more empirical research, might help to give a clearer descriptive framework of what takes place in such cases.

These main findings provide a thorough description of how themes and discursive moves are distributed and sequentially organized throughout the email counseling exchanges in my corpus. At several stages, I have already outlined and hinted at interpersonal effects that the choice of specific patterns of discursive moves can have on the interaction. The next chapter looks closely at the linguistic realizations of the four most frequent discursive moves. In addition, I also investigate the sub-functions of these four moves in more detail.



## **Chapter 7 The Linguistic Realization of the Four Most Frequent Discursive Moves**

### **7.1 Introduction and Methodology**

In the previous two chapters, I introduced the specific discursive moves that are used in email counseling (Chapter 5) and provided information concerning their distribution and the sequence in which they occur (Chapter 6). The present chapter considers how the four most frequently employed discursive moves – *problem statements*, *assessments*, *advice-giving* moves, and *requests for information* – are linguistically realized.

A close analysis of the linguistic realization of discursive moves can shed further light on how interpersonal effects are created within such moves. This is especially relevant and fruitful when comparing linguistic realizations of discursive moves with findings from research on other practices. Morrow's (2006) study of problem and advice messages in a forum on depression, for example, revealed that posters frequently employed the following lexical choices in advice-seeking as well as advice-giving messages: "use of first and second person personal pronouns ... and the inclusive use of we" (ibid.: 538). Morrow (2006: 544) notes that this reflects a "high level of involvement." Locher (2006: 88) reported that *advice-giving* moves could take the form of declaratives, imperatives, or interrogatives. She interprets the high number of declaratives as a "prefer[ence] to give options rather than directives" (ibid.: 108). Finally, Rudolf von Rohr (2018: 291) has highlighted how one discursive move can take on related but subtly different sub-functions. She found, for example, that the discursive move

*assessment* can be used to praise, reassure or normalize when used in a peer-to-peer forum on smoking cessation. All three studies revealed how linguistic choices condition the interpersonal effects of specific discursive moves or messages.

This sentiment is echoed by the counselor when she points out where her interest in language comes from as a practitioner. During the interview, she explains how she carefully chooses her words. She describes situations in which she asks clients whether they have tried out a coping technique that she had previously suggested:

I mince my words carefully because hopefully my intention will come across to clients. When I ask them whether they've tried out a technique I suggested, I try to phrase my question so it's ok if they have or haven't tried it out. My intention is they're allowed to say they haven't. (Interview)

That is, the counselor phrases her questions with specific *intentions* in mind. The interpersonal effect that she aims to achieve is to allow clients to answer either way without losing face. Further, the counselor pays special attention to *particular phrases* that clients might use to help her identify themes:

I'm thinking of what I'm listening out for. Clients might say "Oh, I feel really guilty about this". Or there might be something around the theme of guilt without clients explicitly saying it. Something around responsibility: "It was my fault." I am looking for particular phrases to get to themes that are bothering clients. (Interview)

The attention to specific linguistic phrases or patterns is thus also of interest from a practitioner's point of view. The aim of the present chapter, then, is to find specific patterns used by interactants, on the one hand, and on the other, to look closely at the effects these patterns can have on the negotiation of the therapeutic alliance and whether they are used to construct specific identities.

Finally, as Table 7.1 below will show, the analysis of the linguistic realization of discursive moves is the last step within the discursive moves analysis. I have already pointed out above how Morrow's (2006), Locher's (2006) and Rudolf von Rohr's (2018) studies show that the choice of lexis and syntax can create interpersonal effects. The results of this chapter inform the later analysis of linguistic expressions in context when I look at relational work and positionings in detail. Therefore, this last step in the discursive moves analysis foreshadows the close examination of relational work and the construction of identities in the form and function analysis.

As mentioned previously, out of the four most frequently used discursive moves, clients use *problem statements* and *assessments*, while the counselor uses *assessments*, *advice-giving* moves, and *requests for information*. For each discursive move under examination, I systematically look at the following three research questions:

- How is the specific discursive move syntactically realized?
- How is the specific discursive move lexically realized?
- Are there any functional sub-categories of the specific discursive move?

The first question aims to reveal the syntactic patterns of the exchanges to identify, for example, whether the counselor's style resembles the non-directive style found in the health advice column *Lucy Answers* (Locher 2006). The lexical analysis intends to reveal a more fine-grained picture of lemmata choices, such as personal pronoun use, which can reflect dialogic or conversational aspects of interaction (e.g. Biber et al. 2007; Morrow 2006), or verb usage, which can indicate personal reflection (e.g. Locher et al. 2015b). Finally, to gain greater insight into the interactional aspect of the four most frequently used discursive moves, a functional analysis will identify specific interpersonal effects that result from these moves.

To answer these research questions, I have conducted several different types of analysis. Table 7.1 revisits the methodological steps of my study.

*Table 7.1 Methodological steps 1 to 3 revisited: Linguistic realization of discursive moves*

Type of Analysis	Focus of Analysis		
Content analysis of themes	Types	Distribution	
<b>Discursive moves analysis</b>	Types	Distribution	
	Sequence	Linguistic realization	over-all syntactic lexical functional sub-categories
<b>Form and function analysis of linguistic expressions</b>	Relational work and positionings		

In this chapter, I focus on the step that is highlighted in yellow. The first research question is answered through an exhaustive syntactic analysis. I have qualitatively coded all sentences in the exchanges in NVivo, which allows me to conduct a matrix coding query between the syntactic coding and the discursive moves coding. Such a query reveals the number of occurrences of each type of syntax I coded (declarative, interrogative and imperative) for each individual type of discursive move.

Results for the second research question were found through word frequency analyses. These were conducted with the help of the program AntConc (Anthony 2016). NVivo allows for word frequency analysis as well. However, only stemmed words can be found (i.e., NVivo would not recognize the link between the past tense verb form 'went' of the verb 'go'). AntConc recognizes such links when a lemmata list is used that Anthony (2016) provides on his website. As my focus is on content words, I created a stop list to sort out function words from the word frequency lists. To help interpret the results from the word frequency analyses, I conducted collocation and cluster analyses of key lemmata; these revealed salient structural patterns. These collocation and cluster analyses can also be conducted in AntConc.

Third, I identified functional sub-categories of discursive moves. The functional analysis is entirely qualitative and provides a more fine-grained investigation of the four most frequent discursive moves. However, their boundaries remain fuzzy, and the functions overlap regularly. In a coding process, this would result in a large number of double codings, or a large number of discursive moves would need to be

categorized in an open category. Therefore, I have abstained from exhaustively coding the four most frequent discursive moves for sub-functions. As a result, the sub-functions have not been tested for reliability, nor have I calculated the number of occurrences for them. Instead, the results demonstrate the scope of functions rather than their numerical distribution. This still allows me to consider their interpersonal effect with respect to the therapeutic alliance.

The following sections of this chapter are ordered according to interactants. Section 7.2 focuses on the clients' realization of the discursive moves they frequently use. Section 7.2.1 looks at the syntactic and lexical realizations of *problem statements*, as well as their sub-functions. Section 7.2.2 focuses on the clients' use of *assessments*. The counselor's most frequent discursive moves are discussed in Section 7.3: *assessments* in Section 7.3.1, *advice-giving* in Section 7.3.2, and *requests for information* in Section 7.3.3. For all three, syntax, lexis and sub-functions are looked at in detail. Finally, Section 7.4 provides a summary of the results for both the clients' and the counselor's realizations of these discursive moves.

## **7.2 Linguistic Realization of Discursive Moves Used by the Client**

### **7.2.1 Problem Statement**

#### *Syntactic Realization*

The syntactic realization of *problem statements* appears to be very homogeneous. Table 7.2 reveals that clients overwhelmingly realize

*problem statements* as declaratives. In connection with the almost complete absence of *requests for advice* in the corpus, this reflects that counseling does really focus on the activity of talking.

Table 7.2 Percentages of syntactic realizations in clients' *problem statements*

Syntax →						
Threads ↓	Declaratives	Imperatives	Interrogatives	Open*	Total %	Total**
<b>Anna</b>	100				100	53
<b>Ellie</b>	97			3	100	34
<b>Chris</b>	100				100	64
<b>Mel</b>	99			1	100	153
<b>Taylor</b>	95			5	100	110

\*The open category contains clauses which cannot be clearly identified as one of the three established sentence structures. For example, the counselor uses the structure *Your choice, your control Ellie*. This structure consisting of only noun phrases cannot be categorized into traditional sentence structures.

\*\*The number of sentences does not correspond to the overall number of discursive moves shown in previous tables as one discursive move can contain several sentences.

This is not surprising and is supported by the counselor's statement about what she perceives clients want to do in counseling exchanges:

The general public see counseling as somewhere they go and talk. Quite often when I ask a client at the beginning of a session what are your best hopes, they will say: "I just want to be heard, to be able to off load, to talk." (Interview)

### *Lexical Realization*

A lexical analysis of all the words (n=10,603) occurring in *problem statements* revealed the twenty most frequent lemmata shown in Table

7.3, including their rank, the frequency, and word forms (including number of occurrences) that were included in the specific lemma.

Table 7.3 Word frequency in clients' problem statements (ordered by frequency; tokens: 7,721; types: 1,200)

Rank	Lemma	Frequency	Lemma word form(s)
1	I	758	
2	be	415	am (27), are (26), be (81), been (45), is (76), 'm (56), was (92), were (12)
3	have	240	'd (22), had (49), has (33), have (94), having (15), 've (27)
4	my	211	
5	me	183	
6	't	170	(designates negation)
7	think	97	think (83), thinking (11), thinks (3)
8	he	90	
9	feel	86	feel (68), feels (8), felt (10)
10	do	85	did (9), do (56), does (6), doing (8), done (6)
11	not	73	
12	like	72	like (68), liked (2), likes (1), liking (1)
13	time	69	time (55), times (14)
14	don'	68	(designates negation)
15	when	59	
16	friend	56	friend (12), friends (44)
17	go	54	go (23), goes (2), going (21), gone (2), went (6)
18	want	54	want (46), wanted (5), wanting (1), wants (2)
19	get	51	get (34), gets (5), getting (8), got (3), gotten (1)
20	very	50	

These lemmata can be grouped into specific categories: person reference (such as *I*, *me*, *friend*), verbs including their negation (such as *be*, *think*, *get*), lemmata hinting at causes and time (*when*, *time*), and a degree modifier (*very*). To begin with, person reference focuses on the clients themselves and their relationships. Three of the five most



frequently used lemmata are references to the clients: nominative first person singular pronoun *I*, accusative first person singular pronoun *me*, and the possessive determiner *my*. This further supports the observation that the threads focus on the clients' troubles and well-being, as well as their relationships with people in their vicinity (*he* and FRIEND<sup>16</sup>). Harvey (2013: 83) described a similar finding in his study on the Teenage Health Freak website, which delivers health information to adolescents: a dominance of first person singular pronouns in both subject and object position. Table 7.3 reveals a notable absence of the second person singular pronoun *you*, which occurs only four times overall in *problem statements*. Locher (2006: 233) reported a similar finding: advice-seekers tended to avoid addressing Lucy (the fictional advice-giver) directly in questions and focused instead on themselves or on the issues at hand. *Problem statements*, then, are employed to talk about the clients' problems instead of focusing on the interaction and the counselor's role as possible advice-giver.

Nine out of the twenty listed lemmata are verbs; these can be grouped into the categories of primary, activity, and mental verbs. The two activity verbs (GO and GET) frequently occur in interaction in general (Biber et al. 2007: 367). The primary verbs BE, HAVE, and DO (which incidentally also occur in the frequency wordlist of Harvey's (2013: 83) study) occur as primary auxiliaries, but also as main verbs. In their function as main verbs, they often "link the subject noun phrase

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<sup>16</sup> I use italics to indicate a specific lemma word form and capitals to indicate a lemma.

with a subject predicative or obligatory adverbial”; demonstrate a “logical relation” such as “physical possession”; “[link] a person to some abstract quality”; “[mark] causation” when clients use HAVE; or indicate an “activity meaning” for the verb DO (Biber et al. 2007: 428-431). All three primary verbs (in their main functions) therefore call attention to clients’ qualities, experiences, and relations to people, objects and abstract concepts.

The mental verbs (Biber et al. 2007: 362-363) can be grouped into two further categories. First, some mental verbs denote a “cognitive state” (THINK and in certain cases FEEL). These verbs point towards the clients’ more cognitive or reflective perspectives on their problems. The collocation *I think* can also be used as a mitigating expression. Secondly, FEEL, LIKE, and WANT are mental verbs connected to “emotional or attitudinal states” (Biber et al. 2007: 363). Verbs of the attitudinal group occur more frequently than the cognitive verbs. This is not surprising: in *problem statements*, clients discuss issues that are often connected to emotional turmoil.

Morrow (2006: 539-540) has commented on how users in an online forum about depression describe their emotional well-being with constructions that include *feel*<sup>17</sup>. Morrow (2006: 539) particularly mentions how “mostly negative feelings” are described and elaborates on

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<sup>17</sup> Morrow (2006: 539) talks about the “lexical item ... *feel*.” I therefore use Morrow’s choice of italics to indicate discussion of his analysis of *feel*, rather than the capitalized lemma version I use. Nevertheless, Morrow discusses the lemma rather than the lexeme, which reflects the analysis of the lemma FEEL in the data for the present study.

the high frequency of such collocations of *feel* as “*feel like, feel (as) if, and feel as though*” (ibid.: 540). Similar right collocates occur within *problem statements* of the present study: FEEL+*like* (n=20) and FEEL+*that* (n=8). FEEL also collocates with a range of lemmata that mostly denote negative feelings, for example *guilty* (n=4), *worse* (n=2), *sick* (n=2), *rejected* (n=1), *sad* (n=1), and so on. According to Ochs and Capps (2001: 146-152), a wide range of negative emotions can be indexed in personal narratives that are told in counseling. In fact, the frequency of such collocations describing a specific emotional state appears rather low. But this is not surprising: clients’ emotions and their perceptions of such emotions are idiosyncratic, as are their linguistic choices to describe these different kinds of feelings.

Further, three lemmata designate negation: ‘*t*, *not*, and *don*. The operator *don* is inserted due to negation in cases when a verb phrase does not contain an auxiliary verb. The negator *not* and its enclitic form ‘*t* collocate most frequently on the left side with the first person singular pronoun. A cluster analysis (cluster size: three) of ‘*t* reveals that the three most frequent clusters are: *I don’t* (n=56), *I can’t* (n=13), and *I didn’t* (n=12). Similarly, the three most frequent clusters for *not* are: *I’m not* (n=8), *I do not* (n=5), and *I would not* (n=3). On the right side, frequent collocates for ‘*t* are the verbs *want* (n=27), *think* (n=11), and *have* (n=11). *Not* collocates most frequently with *sure* (n=5), *want* (n=3), and *really* (n=3). Negation is thus mostly centered around the clients themselves and around wishes or uncertainty.

Finally, the lemmata *TIME* and *when* as well as the modifier *very* also occur in the twenty most frequently used lemmata. As clients describe troubling experiences or situations, it is natural that lemmata denoting temporal or causal relations occur. This is especially the case in text passages that take the form of narratives, in which events are chronologically narrated or relations between events and/or people are explained. These lemmata help the clients to coherently recount their troubles. The degree modifier *very*, used to boost adjectives, often collocates with negative emotion words such as the adjectives mentioned as collocates of *FEEL* above (for example *depressed* or *sad*). The fact that emotions are frequently emphasized with boosters such as *very* indicates the intensity or immediacy of the emotional turmoil the clients go through.

#### *Functional Sub-Categories of Problem Statements*

*Problem statements* can be further divided into sub-categories depending on their function in the exchanges. Client responses have been researched before. However, depending on the research questions in a given study, the differentiation of functions can also vary. For example, Bercelli et al. (2008a) mainly focus on whether clients agree or disagree with formulations the counselor puts forth, which implicitly foregrounds the counselor's role in the interaction. In contrast, I focus on how the interactants use the collaboration to develop their relationship and construct identities.

A closer look at the functions of *problem statements* serves to uncover the various positions clients construct through *problem statements*. Due to the various identities clients position themselves in, this sub-categorization takes the collaborative aspect of the texts into account. For example, the counselor's introduction of coping techniques opens the possibility for clients to respond. The following functions of problem statements are present in my corpus: (1) problem introduction; (2) problem confirmation (of a problem that was introduced by the counselor); (3) problem elaboration; and (4) problematizing an application of a coping technique. The first three are closely related and cannot always be easily distinguished, as their boundaries are rather fuzzy. The last function stands out more clearly with regards to how clients linguistically realize such *problem statements*. It is also more easily distinguishable from the other three functions as it always includes the application of a specific coping technique. In the following pages, I will briefly explain each function and illustrate them with prototypical examples.

To begin with, clients use *problem statements* to introduce a problem. These are statements that are initiated by clients and present particular problematic issues that they struggle with. Example (7.1) illustrates Anna's introduction of her panic attacks:

- (7.1) Anna (Thread: Anna; Entry 1)  
I've had what some would describe as panic attacks while I've been here and they've been more frequent in the past month. My heart races, my palms sweat, I can't think at all, and

I start to cry, or I find myself unable to talk.  
This has happened in public and when I'm on  
my own.

Anna introduces the problem by giving a mitigated self-diagnosis of panic attacks. She frequently uses first person pronouns, and her clear description of experiencing a panic attack shows how she reports on an issue that causes her distress. Further, when she mentions their increased frequency, she explains why they are currently troubling her. Anna thus legitimizes her claim to be an authentic and informed advice-seeker.

The second function of *problem statements* is to confirm a problem that the counselor has recognized and verbalized. While these *problem statements* can appear similar to the previous function with regards to the emotional descriptions that they contain, one specific characteristic is that they often include an effort to agree with the counselor's interpretation. In (7.2), Taylor uses two consecutive *problem statements* (each paragraph counts as one *problem statement*) to confirm the counselor's interpretation that she suffers from low self-esteem:

(7.2) Taylor (Thread: Taylor; Entry 3)

**Yes that's very true, I usually am very hard working, and I don't feel like this is being reflected in the work that Ive done, which In turn makes me feel worse, like a vicious cycle really.**

**I probably don't have the best self esteem, and Im certainly lacking in confidence**

Taylor first emphatically signals her agreement. After going on to give insight into what she specifically struggles with, her second *problem statement* mentions that she does not have *the best self esteem* and *lack[s] ... confidence*. Both *problem statements* contain several boosters (*very, really, the best, certainly*) to foreground the emotional impact of the lack of self-esteem on Taylor. Taylor repeats the terms *self-esteem* and *confidence* which the counselor introduced in entry 2 (not shown in the example). Clearly, then, Taylor does not introduce a ‘new’ problem, but rather confirms the counselor’s suspicion that Taylor lacks self-esteem and confidence.

Third, *problem statements* can be employed to elaborate on and further explain a previously introduced problem. The counselor can ask the clients to elaborate on specific problems or to give examples, or clients can give updates or elaborate on persistent troubles of their own accord. Example (7.3) shows how Ellie elaborates on her problematic relationship with her sister.

- (7.3)      Ellie (Thread: Ellie; Entry 5)  
             I think that my sister is jealous of me in some ways because she is older than me and I am away from home living a separate life when at Uni whereas she is still at home even though she is the eldest. She never attended Uni and I feel that some of the comments she makes to me are to purposely upset me and make me feel guilty.

Ellie first explains further why she thinks that her sister is *jealous* of her and then elaborates on her emotional reaction to *comments* from her

sister. Here, Ellie clearly uses *I think* and *I feel that* as reflective markers. Additionally, she employs the primary verb BE to establish specific relations between people and several emotional descriptors. There is no introductory statement such as the one found in example (7.1); nor is there explicit agreement with the counselor, as was present in example (7.2). In response to example (7.3), the counselor reformulates the relationship issue as *tensions between you and your sister* and positively evaluates Ellie's understanding of her own situation (not shown in the example above). Ellie's elaboration of her troubling relationship helped the counselor to understand Ellie's situation better.

Fourth, the introduction of coping techniques by the counselor allows clients to report on how they applied those techniques. Applications of coping techniques can have a positive or negative outcome. Negative outcomes are often described in additional *problem statements*. Even though a negative report about a coping technique is also a kind of assessment of the technique, the problematic concern usually outweighs the evaluative component of the statement. In example (7.4), Chris reports on how he copes with *anxious thoughts*:

- (7.4) Chris (Thread: Chris; Entry 5)  
 To be honest, even when I do manage to step back, I'm still experiencing the anxious thoughts to some degree. Some days they are manageable, some days they are still almost unbearable.

Chris implicitly reports that he applied the coping technique that aimed to help him *step back* from *anxious thoughts*. He explains how he has



not been entirely successful. His emotional description of these thoughts as *almost unbearable* clearly indicates the persistence of the problem. Similarly, example (7.5) finds Mel discussing her application of a coping technique:

- (7.5)      Mel (Thread: Mel; Entry 3)  
 I've written some of them below but I'm finding it hard to isolate all of them into individual memories – they flood my head so quickly and, while I'm sitting here being objective, it's hard to be certain which are the worst.

Mel explains how she felt in the moment of the application (*I'm finding it hard, it's hard to be certain*) and points out why the application did not work for her (*they flood my head*). Both examples reveal that the problem persists, even as Mel specifically elaborates on what she has trouble with. Both types of responses are highly relevant for the counselor to suggest further ways to overcome the specific issues and help clients to improve their mental health. All four functions allow clients to state their problems and to seek the counselor's support; that is, the clients position themselves as advice-seekers and the counselor as advice-giver. In *problem statements* that report on the application of coping techniques, clients also position themselves as appliers of coping techniques, even when their attempts have been unsuccessful.

### 7.2.2 Assessment

#### *Syntactic Realization*

The syntactic realization of clients' *assessments* is similar to how clients realize *problem statements*.

Table 7.4 Percentages of syntactic realizations in clients' assessments

Syntax →						
Threads ↓	Declaratives	Imperatives	Interrogatives	Open	Total %	Total
<b>Anna</b>	100				100	41
<b>Ellie</b>	98			2	100	41
<b>Chris</b>	92			8	100	100
<b>Mel</b>	98			2	100	100
<b>Taylor</b>	95			5	100	37

Table 7.4 shows that clients mainly use declaratives within *assessments*. This is not surprising as evaluations cannot readily be accomplished in imperative or interrogative form.

#### *Lexical Realization*

Table 7.5 reveals the results of the word frequency analysis of all words (n=6,911) within *assessments* written by the clients. The twenty lemmata shown can be summarized into specific groups: person reference, verbs including their negation, lemmata indexing time and future (*time*, *will*), and *more* as a quantifier or comparative degree adverb. These are roughly the same groups that I identified in the discursive move *problem statement* as well (see the previous section). However, the clients do not always use the same lemmata in the mentioned groups.

Table 7.5 Word frequency in clients' assessments (ordered by frequency; tokens: 4,988; types: 970)

Rank	Lemma	Fre- quency	Lemma word form(s)
1	I	486	
2	be	251	am (18), are (25), be (42), been (32), is (47), 'm (53), was (27), were (7)
3	have	180	'd (9), had (25), has (32), have (74), having (9), 've (31)
4	my	131	
5	me	88	
6	think	85	think (76), thinking (9)
7	't	76	(designates negation)
8	do	58	did (4), do (32), does (9), doing (9), done (4)
9	will	48	'll (17), will (31)
10	time	46	time (40), times (6)
11	feel	45	feel (38), feels (2), felt (5)
12	help	45	help (30), helped (9), helps (6)
13	not	42	
14	's	42	(designates is or possessive)
15	get	38	get (29), gets (2), getting (6), got (1)
16	more	37	
17	go	35	go (23), going (12)
18	thing	33	thing (6), things (27)
19	try	33	tried (5), try (18), trying (10)
20	them	32	

To begin with, four personal pronouns are among the twenty most frequently used lemmata in the clients' assessments: first person singular nominative (*I*), accusative (*me*) and possessive (*my*), and third person plural accusative (*them*). The first person singular pronouns can be explained by the continued focus on the client's well-being. On the one hand, the third person plural pronoun denotes friends, family members or significant others. The use of the pronoun instead of a proper noun or a name, for example, indexes familiarity. On the other hand, *them*

can also refer to coping techniques. Finally, I discussed the absence of the second person pronoun *you* in the discursive move *problem statement*. Despite the fact that *you* does not appear in the twenty most frequently used lemmata in the clients' *assessments* either, the 31 occurrences within 6,911 words in clients' *assessments* are significantly more frequent than the 4 occurrences in the 10,603 words in clients' *problem statements*. This increase of second person pronouns indicates a shift towards a more collaborative interaction between the clients and the counselor as the exchanges progress (clients' *assessments* tend to be more commonly used in later entries). Harvey<sup>18</sup> (2013: 86) also pointed out that despite the "overwhelmingly self-oriented" nature of adolescent health communication in the practice he observed, person reference is "not simply monologic." The clients' shift in personal pronouns, despite its subtle nature, displays a more collaborative interaction in the later stages of the counseling process when *assessments* are used more often.

Further, the verbs listed in Table 7.5 can be categorized into specific groups: primary, activity, mental, and facilitating verbs. The three primary verbs (BE, HAVE, and DO) occur in the twenty most frequent lemmata with both the discursive moves *problem statement* and clients' *assessments*. Their occurrence reflects the focus on clients' attributes and experiences. In the group of the activity verbs, the two common

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<sup>18</sup> Harvey (2013) does not distinguish the advice-seeker's and the advice-giver's lexical choices. However, comparisons can illustrate tendencies that occur in the choices of either groups.

activity verbs that are present in *problem statements* (GET and GO) also frequently occur in clients' *assessments*. In *assessments*, clients also frequently use the activity verb TRY (n=33). The most frequent collocate on the left of TRY is *I* (n=26), whereas the most frequent collocate on the right is the preposition *to* (n=16). These collocates position the clients as agents for both the verb TRY as well as the post-predicate infinitive clauses that can follow. TRY further highlights the clients' attitudes towards active participation to achieve better well-being, especially in the application of coping techniques.

The two mental verbs that occur in Table 7.5 are THINK and FEEL. These occur frequently in *problem statements* as well. In contrast to *problem statements*, the two attitudinal cognitive verbs LIKE and WANT do not occur in the twenty most frequently occurring lemmata in *assessments* written by clients (where they occupy frequency ranks 28 and 104 respectively). That is, there is a shift from attitudinal to cognitive mental verbs. This might indicate that clients move to a more rational approach to their problems. Locher et al. (2015b: 150) note that *feel* and *felt* are also indicative of the genre of reflective writing. In the present study, the collocations FEEL+*that* and FEEL+*like* occur frequently and might indicate clients' self-reflection.

Furthermore, adjective collocates with FEEL change in stance: most adjectives collocating with FEEL in *problem statements* denote negative emotional states, whereas adjectives that collocate with FEEL in clients' *assessments* shift towards a more diversified emotional range that also includes positive emotions, such as *better* (n=2), *comfortable*

(n=2), *calmer* (n=1), and *empowering* (n=1). This diversified expression of emotions is also noticed by the counselor. In the interview, she remarks that at the beginning of counseling clients often tend to mostly notice negative aspects of their experiences, whereas with time, they begin to notice the positive aspects as well:

There is a movement. It's as if a person has been kind of looking at this one view which might be quite unpleasant, this mountain of rubbish and they've been looking at that for so long, that's just the world to them. And you're there trying to kind of point out, if you look over there, there's some beautiful hills and trees and sunshine and it's beautiful over there. They might glance over and over time they start to turn their body. There's a period where they're kind of looking both ways and eventually they'll start looking less to the negative and will go more in the positive direction. (Interview)

In a metaphorical way, the counselor describes the gradual process of how clients move from a negative towards a more balanced perspective of their emotions and experiences.

Additionally, clients introduce a verb of facilitation (Biber et al. 2007: 363) in their most frequently used lemmata: HELP. It is used 45 times in clients' *assessments*. The most frequent collocation is HELP+*me* (n=12) and positions the client as the recipient of help. It is striking that clients do not explicitly seek support or help, yet they nevertheless reference the helpfulness of the counselor's input in their *assessments*. HELP occurs as a noun nine times and as a verb 36 times.

While the grammatical category differs, the noun *help* still refers to the activity of the counselor in providing supportive input to the clients.

Moreover, the lemmata TIME (rank 10 in Table 7.5) and WILL (rank 9 in Table 7.5) also occur in clients' *assessments*. Despite the fact that the lemma TIME is used in *problem statements* as well, its context tends to differ in clients' *assessments*: whereas TIME was predominantly used to point towards past events in *problem statements*, it is contextually more connected to the present in *assessments*, such as in the expression *this time* (n=5) and *more time* (n=4). The auxiliary verb *will* left-collocates most often with *I* (n=27) and *it* (n=8). WILL is often "used to mark logical (extrinsic) prediction as well as person volition and prediction of one's own future actions" (Biber et al. 2007: 496). A cluster analysis of right-collocates (cluster size: three) reveals 37 cluster types for the 48 cluster tokens. The lemmata of clusters appearing more than once are TRY, BE, TAKE, ENABLE, and IMPROVE. These five lemmata reflect a positive stance and are often used to express an intention or prediction with a positive result.

Last but not least, the frequent use of the quantifier or comparative adverb *more* (rank 16 in Table 7.5) in clients' *assessments* reflects a positive change in clients' perspectives. Instead of boosting mostly negative emotional adjectives as in *problem statements*, *more* is frequently used in clients' *assessments* to compare current perceptions or interpretations with previous ones. The collocations of *more* also indicate that the present is an improvement compared to the past (*more confidence, more optimistic, more supportive, or more manageable*). Thus,

clients' *assessments* are used to reflect the clients' progress and indicate their improved well-being.

#### *Functional Sub-Categories of Client Assessments*

Client's *assessments* can be further categorized as performing three functions: clients employ them to evaluate (1) the counselor's formulations; (2) their applications of coping techniques; and (3) their well-being (specific issues or overall). The last function, especially, can be sub-categorized according to whether the counselor specifically elicited such an *assessment* from clients.

First, clients evaluate the counselor's formulations with the help of *assessments*. The counselor regularly produces a formulation of the clients' *problem statements*. In Chapter 2, I have given Antaki's (2008: 26) definition of such formulations: "the practice of proposing a version of events which (apparently) follows directly from the other person's own account, but introduces a transformation." In other words, the counselor (re-)formulates what the clients previously wrote (see Section 7.3.1 for a more detailed discussion of such formulations in my corpus). Clients can assess these formulations as accurate or inaccurate. In the following two examples, Mel and Chris agree with the counselor's input (not shown in the examples):

- (7.6) Mel (Thread: Mel; Entry 5)  
 Yes, that sounds like me!



- (7.7)      Chris (Thread: Chris; Entry 3)  
               You're so right, and I've focussed on this recently and managed to get some control over it.

In both cases, the clients make an apparent effort to agree with the counselor's formulation (*yes* and *you're so right*) and tell the counselor why they agree. The agreement shown by both clients is relevant for two reasons: first, it signals that the counselor understands the clients. Secondly, the clients experience being understood as positive, indexed for example with the exclamation mark and the stance adverbial *so right*. Antaki (2008: 42) points out that formulations are used to "promot[e] the sense that [the counselor] has listened to the [client] and has extracted something that they themselves might have said." Antaki (2008: 32) argues (as do others) that a formulation "projects an agreement, which the speaker has actively to provide [or] combat in the next turn." In other words, the clients are encouraged to agree or disagree with the counselor's formulations. Both clients do this in the examples shown above: Mel agrees that the counselor's descriptions of avoiding experiences in order to stay in control *sound like* her. Chris adds further that he is trying to *get some control over* his constant over-analyzing. Such *assessments* from clients help the counselor to understand the signaled agreement and facilitate further input.

The second function of clients' *assessments* is to evaluate a coping technique the counselor has suggested. As with *problem statements* that address unsuccessful applications of coping techniques, clients can evaluate such techniques positively in *assessments*. The clients

foreground how the coping technique has helped them in these cases. In example (7.8), Anna illustrates how associations of British TV induce positive feelings in her:

- (7.8) Anna (Thread: Anna; Entry 5)  
 This definitely helps! I've been catching up on british tv when I feel like I want to go home, I find that this helps me feel better. Even watching BBC news makes me feel a bit calmer. Maybe it's because I associate it with being at home and feeling safe.

Anna, who is homesick while on placement abroad, recounts how watching TV programs that remind her of home *help* her *feel a bit calmer* and *safe*. Anna even explicitly points out at the beginning of the *assessment* that the technique of utilizing positive associations *definitely helps*. Anna's repeated use of the facilitative verb *help* and the attitudinal verb *feel*, in collocation with the stance markers *better*, *calmer*, and *safe*, indicate the positive evaluation of the technique. She further legitimizes her claim of progress by offering an explanation of why the technique helps. However, Anna also demonstrates that the counselor is not necessarily positioned as the source of the help. Rather, the technique itself is what has helped her.

The example illustrates how *assessments* of coping techniques differ from *problem statements* in which they are deemed unhelpful or not helpful enough yet. Such evaluations make it possible for the counselor to subsequently intervene in more appropriate ways. The clear indication that advice was followed, however, distinguishes the data of my study from the data of other studies. For example, in Morrow (2006:

545), interactants do not evaluate advice or acknowledge that they have applied it. The clearly assigned roles in counseling might facilitate or even promote such evaluations and acknowledgements.

Finally, clients also frequently employ *assessments* to report on improvement of particular issues or on a sense of improved well-being overall. These *assessments* are highly relevant to the progression of the counseling. This is because such *assessments* made by clients show that they are recognizing their improved well-being. The counselor addresses this in the interview:

If they just do a general “Oh I’ve improved”, I’ll ask them to tell me how, what they’ve noticed, what’s different, how they’ve noticed, because that’s cement then. If they’re seeing it, they’re writing it and see it written down, it’s gonna cement it for them.

(Interview)

As indicated in the counselor’s statement, clients’ *assessments* can be elicited by the counselor. Example (7.9) illustrates a case in which the counselor explicitly elicits an *assessment* about Taylor’s well-being towards the end of Taylor’s thread. She specifically asks Taylor to rate her well-being from 0 to 10. In other words, she uses a scaling question that is typical of solution-focused therapy (DeShazer and Berg 1997; Iveson 2002). Taylor responds in the following way:

- (7.9)      Taylor (Thread: Taylor; Entry 9)  
*I think I am feeling happier in [PLACE] so probably more at a 6ish most days sometimes less sometimes more, so I’ve been a more constant feeling better mood! I really like the*

*'hello anxiety' and I think I feel more aware of why I'm feeling certain ways at times. I never really realised I had such an issue with rejection, in the past I didn't attribute these feelings to me more to other people.*

While Taylor seems to initially mitigate her emotional well-being with *I think*, her extensive use of FEEL collocating with positive stance lexemes (*happier, better mood, more aware*) is telling. She further specifies one coping technique that has helped her the most in overcoming her anxiety (*the 'hello anxiety' technique*).

Example (7.10) illustrates an *assessment* from Anna that was not elicited by the counselor:

- (7.10) Anna (Thread: Anna; Entry 11)  
 I don't really have any new problems - if anything the problems I've had are starting to simmer down. But I thought I'd let you know anyway. At the start of this month I really couldn't tell which way things were going to go.

Anna highlights her overall improved well-being. Her *assessment* is that she does not have *any new problems* and that her previous problems have *simmer[ed] down*. She thus explicitly compares her current and previous state of mind and comes to a positive evaluation that her problems are decreasing. All this clearly focuses on the improvement she is noticing from her initial presentation of problems. In both these examples, the clients elaborate on their own progress. Such *assessments* can be mitigated to varying degrees and simultaneously position the clients

as having made varying amounts of progress. Overall, the clients' *assessments* often position them as successful applicers of coping techniques or even as active self-helpers.

### 7.3 Linguistic Realization of Discursive Moves Used by the Counselor

#### 7.3.1 Assessment

##### *Syntactic Realization*

As discussed at various points throughout Part II, the counselor also uses *assessments*. Like the clients, the counselor uses mostly declaratives in *assessments* (see Table 7.6). Such declaratives will be illustrated in the later examples when I explain the sub-functions of *assessments*.

Table 7.6 Percentages of syntactic realizations in the counselor's assessments

Syntax →						
Threads ↓	Declaratives	Imperatives	Interrogatives	Open	Total %	Total
<b>Anna</b>	100				100	56
<b>Ellie</b>	95	3		2	100	63
<b>Chris</b>	97	1		2	100	104
<b>Mel</b>	98			2	100	133
<b>Taylor</b>	100				100	97

I want to briefly explain the use of imperatives within *assessments*. Four imperatives are used by the counselor in *assessments*. They are rare exceptions and reflect a close connection between *assessments* and

*advice-giving* moves. In example (7.11), the counselor uses an imperative in an *assessment* in Chris' thread:

- (7.11) Chris (Thread: Chris; Entry 4)  
 That's ok, as I said last time it's all about experimenting and working out which strategies work for you. Simply tweak, or ditch the ones that don't fit you.

After Chris reported that he did not succeed in applying a specific coping technique, the counselor encourages him to find the techniques that work specifically for him. Thus, the imperative is part of the entire *assessment*. It is not categorized as advice, as it is a formulation of Chris' previous *assessment* (see the section on sub-functions of the counselor's *assessments* for a detailed explanation of formulations).

### *Lexical Realization*

The lexical analysis of all the words (n=9,963) in the counselor's *assessments* revealed the twenty most frequent lemmata shown in Table 7.7. Many of these twenty lemmata can be grouped into specific categories: pronouns and vocatives for person reference, verbs (primary, activity, communication, mental, and modal verbs) and their negation, wh-complementizers to introduce relative clauses, and a quantifier and an adverb.

Table 7.7 Word frequency in the counselor's assessments (ordered by frequency; tokens: 7,236; types: 1,044)

Rank	Lemma	Frequency	Lemma word form(s)
1	be	521	am (12), are (142), be (74), been (25), is (159), 'm (76), was (18), were (15)
2	you	485	
3	I	261	
4	your	225	
5	have	136	'd (1), had (10), has (25), have (83), having (14), 've (3)
6	can	104	
7	hear	98	hear (97), heard (1)
8	how	98	
9	's	82	(designates is or possessive)
10	while	75	
11	not	73	
12	sound	72	sound (10), sounded (1), sounds (61)
13	feel	68	feel (41), feels (12), felt (15)
14	get	61	get (43), gets (4), getting (11), got (3)
15	what	60	
16	Mel	59	
17	more	56	
18	feeling	53	feeling (36), feelings (17)
19	do	51	did (3), do (26), does (11), doing (9), done (2)
20	really	48	

Predictably, the use of pronouns in the counselor's *assessments* differs from their use in the clients' text passages; after all, the threads focus on the clients' lives and not the counselor's. Despite the fact that first person singular nominative *I* still occurs relatively frequently and is ranked in third position, it is not the highest ranked personal pronoun in Table 7.7. Instead, second person singular nominative pronoun *you* is ranked higher and second person singular possessive *your* follows in fourth position. Although *you* and *I* can be expected to appear

frequently in conversational discourse (Biber et al. 2007: 333-334), the fact that the second person pronoun is more frequent than the first person pronoun reveals that the counselor is clearly focused on the clients. Harvey (2013: 82) linked a similar preference for personal pronouns on the Teenage Health Freak website to an “emphasis ... on relationship building rather than on the production of factual information.” This emphasis is clearly visible in the exchanges between the clients and the counselor. Additionally, a vocative – *Mel* – appears in sixteenth position in the word frequency list. The counselor regularly intersperses her responses with vocatives “as a very conscious way to connect” with clients (Interview).

Table 7.7 further reveals the use of specific verbs that contribute to the supportive component of the counselor’s *assessments*. To begin with, the verbs can be grouped into five categories: primary, activity, communication, and mental verbs, as well as a modal verb. The counselor’s use of the primary verbs (in their main function) appears similar to the clients’ in that they index clients’ attributes and experiences. The activity verb GET is frequently used in a very specific way in the present context: the counselor signals her understanding through specific collocations of GET. For example, the following collocations occur: *I get the impression* (n=13), *I get the sense* (n=13), and *I get a sense* (n=1). Ekberg et al. (2016) have highlighted that therapists use such phrases to make the emotional impact of the clients’ troubles explicit. They argue that these phrases allow the therapist – or the counselor, in



my case – to demonstrate understanding without taking away the epistemic rights of the clients to their own emotional experiences.

The desire to signal understanding is further highlighted by two communication verbs: HEAR and SOUND. The former is used overwhelmingly in three ways: *I can* (+modifier) *hear* (n=53) and its variations of *I* (+modifier) *hear* (n=15) and *it's* (+modifier) *to hear* (n=28). The most used modifiers of the latter are the evaluative/emotive descriptors (Biber et al. 2007: 509) *good* (n=15) and *positive* (n=6). Frequent right collocates of HEAR are the three variations: *hear how* (n=36), *hear that* (n=17), and *hear you/your* (n=14). The collocation *I can hear* also explains why this particular modal verb is listed in the twenty most frequently used lemmata. The collocation is used to signal to clients that the counselor understood what they were trying to tell her. Further, the second communicative verb is used in a similar way: the counselor's two variations of collocates with SOUND (*it sounds* (n=29) and *that sounds* (n=17)) indicate her attempt to comprehend the clients' struggles. At the same time, these structures ensure that the epistemic rights to the clients' emotions still lies with the clients. Ekberg et al. (2016) argue that counselors can demonstrate their understanding of clients' emotions through affective inferences rather than claims to authority over emotions or experiences through such structures.

The mental verb FEEL is often used with second person pronoun in subject position, i.e., the clients are depicted as the agents of the emotional experience. The most frequent collocation is *you* (+modifier+) FEEL (n=26). The diverse range of right collocates resembles the

clients' diverse use of emotional adjectives and adverbials. Notably, the counselor only uses the collocation *I can feel* once, indicating that the expression of personal emotions is mostly reserved for clients. The pattern of mental verb usage therefore clearly corresponds to the overall focus of the interaction on the clients' troubles. Moreover, this pattern as well as the way that the communication verbs are used foreground issues that are important in counseling, such as demonstrating understanding and acceptance of clients and their emotions.

At first glance, it might be surprising that two *wh*-words appear in the twenty most frequently used lemmata, since the syntactic analysis revealed that the counselor does not use interrogatives in her *assessments*. The counselor employs *how* and *what* to introduce relative or complement clauses. I mentioned above that HEAR frequently collocates with *how* on the right side. Constructions such as *I can hear how* (n=36) are frequent and introduce a complement clause. Right collocates of *how* are: *how you* (n=26) and *how much* (n=7). *What* is used in a similar way and collocates with *you* (n=12) and *I* (n=9). Finally, *while* is ambiguous in its grammatical form: it can be a noun (n=8) or a subordinator (n=67). As a subordinator, *while* is often used concessively (Biber et al. 2007: 842) to establish a relation between two clauses. These three lemmata often come up in formulations (see below for a detailed description of such formulations). They are therefore important linking mediators that signal the counselor's attempts to show clients that she understands and sympathizes with their specific situations.

Finally, two lemmata of the twenty most frequently used ones are the boosters *more* (n=56) and *really* (n=48). Collocates of both of these lemmata follow a specific tendency. Although the counselor uses emotional descriptors that index positive and negative stance, there is a clear preference to modify positive emotions with these boosters. For example, *more* modifies adjectives (n=31) that index a positive emotion in 29 occurrences (such as *assertive*, *confident*, *focused*, *positive*, and so on). *Really*, modifying a right collocate 40 times, also indexes positive stance (such as *effective*, *good*, *happy*, *pleased*, and so on) more frequently (n=31) than negative stance (n=9). Despite the fact that the counselor occasionally acknowledges the clients' negative emotional experiences with boosters, she focuses on primarily foregrounding clients' positive attributes and experiences. This is clearly indicative of the solution-focused therapy (DeShazer and Berg 1997; Gingerich and Wabeke 2001; Kim 2008) that the counselor practices.

#### *Functional Sub-Categories of Counselor Assessments*

The counselor uses *assessments* for a wide range of functions. She assesses the clients' input to show comprehension and display empathy, she evaluates and encourages the clients' progress, or she predicts outcomes, among other things. As mentioned in Section 6.4.3, the counselor most often employs *assessments* after the clients' *problem statements* or *assessments*. The counselor's intent to show positive regard for the clients, for example by acknowledging the clients' troubles and affirming their progress, is salient to all of the following functions

of the counselor's *assessments*: (1) formulating the clients' input; (2) normalizing issues; (3) affirming applications of coping techniques; and (4) affirming progress.

To begin with, the counselor often 'formulates' the clients' *problem statements* or *assessments*. Antaki (2008: 26) defines a formulation as "the practice of proposing a version of events which (apparently) follows directly from the other person's own account, but introduces a transformation." In other words, the counselor formulates a client's statement by "giving the gist of it, ... picking out one of its natural upshots, delet[ing] a certain part of [it], and, ... selecting another part" (Antaki 2008: 31). Formulations are a common practice in counseling and have been researched in previous studies on counseling, as well as in a broader health context (see e.g. Antaki 2008; Bercelli et al. 2008a; Fitzgerald and Leudar 2012; Stommel and van der Houwen 2013).

In Anna's example below, the counselor formulates Anna's *problem statement* about anxiety and stress and how this affects her student life.

- (7.12) Anna / Counselor (Thread: Anna; Entry 1 / 2)  
 <Anna; *Problem statement*: I'm constantly feeling nervous and I can't concentrate at all. I can't take anything in during lectures so that's making me even more anxious about exams. I really don't think I'm going to do well, and the thought of doing them makes me feel sick. I need to learn how to cope with stress and anxiety, because when things pile up I just can't deal with them. It's affecting my day-to-day life and I don't want this to ruin my year

abroad, but I feel like it already has. *Problem statement*>

<Counselor; *Assessment*: I can hear how difficult you are finding things Anna, and what you say here helps me to get a sense of how you are finding yourself focusing on the worse case scenario, which is naturally increasing your stress further. I can also hear the pressure you are unwittingly putting on yourself to find a better way to cope. *Assessment*>

The counselor signals twice that she formulates, i.e., transforms what Anna has said through the construction *I can (also) hear*. She further points out that Anna's description helps her to support Anna (*helps me to get a sense*). These phrases signal her "active listening" (Antaki 2008: 35) in writing and indicate that she reflects on what Anna has said and that she has understood it. She summarizes Anna's emotional description as the gist of the statement with the lexeme *difficult* and the hint that Anna regularly *focus[es] on the worse case scenario*. She introduces an upshot by highlighting the ramifications (*increasing your stress further*), which explains the vicious cycle in which Anna finds herself. Importantly, the counselor ends her *assessment* by foregrounding Anna's willingness to find better ways to cope. The example illustrates that formulations do not necessarily assess a statement along the lines of positive or negative. Rather, formulations serve both to signal to the client that the counselor understands and recognizes the problem previously stated by the client and to carefully guide them in the

direction of working on particular aspects of their problems. Stommel and Van der Houwen (2013: 15) also mention how such formulations can “explicitly negotiate meaning”. This is further corroborated in my study by the fact that the counselor repeatedly follows up such formulations with *requests for information* that ask clients to clarify whether the formulation was accurate.

A second function that the counselor’s *assessments* fulfill is that of normalizing the clients’ issues. Normalization has been previously researched (Locher 2006; Miller and Gergen 1998; Placencia 2012; Rudolf von Rohr 2018), including in some of the studies that utilize a discursive moves analysis. Placencia (2012: 299), for example, researched how interactants “deproblematiz[e]” troubles that other interactants have brought up. Rudolf von Rohr (2018: 294) found that peers on a smoking cessation forum assessed other interactants’ experiences as “not out of the ordinary.” *Assessments* that are used to normalize the clients’ struggles go a step further than formulations; they signal clients that what they are going through is normal or common. It is important to note, however, that the counselor in my study does not deproblematize troubles as in Placencia’s (2012) study. Instead, she explains why particular reactions to specific troubles can occur.

Examples (7.13) and (7.14) are normalizing *assessments*:

- (7.13) Counselor (Thread: Mel; Entry 10)  
**What you describe is very normal Mel. Those anxious thoughts will naturally appear when making these kind of changes.**

- (7.14) Counselor (Thread: Mel; Entry 6)  
 That makes sense Taylor, and I'm conscious of that very common tendency to compare ourselves with others, and of course generally when it do this, it is to say that we are not as good! Yes, definitely a self-esteem thing!

In example (7.13), the counselor specifically asserts that what Mel experiences *is very normal* and a *natura[l]* process. In example (7.14), the counselor normalizes Taylor's behavior as a *common tendency*. While the counselor's description of Taylor's behavior resembles a formulation, the text passage is in fact a normalizing *assessment* in which inclusive first person plural pronouns indicate that 'people in general' suffer from such unfavorable comparisons. Finally, the counselor aligns Taylor to the therapeutic alliance with her emphatic agreement with Taylor's interpretation that the underlying problem is Taylor's low *self-esteem*, a theme Taylor and the counselor have been explicitly working on in Taylor's thread. The combination of the explicit repetition of the theme and the positive alignment paves the way for further advice on how to increase Taylor's self-esteem. All in all, then, formulations and normalizing *assessments* both often follow clients' *problem statements* and then conclude with sentences that prime clients for subsequent advice.

Third, the counselor uses *assessments* to evaluate the clients' feedback after they have applied coping techniques. In the following example, the counselor evaluates and processes feedback from Chris,

who has just said that he is trying to step back from a situation to diffuse the troublesome thoughts:

- (7.15) Counselor (Thread: Chris; Entry 6)  
*That's really positive to hear, that you are getting better at accepting the anxiety and diffusing the unhelpful thoughts 😊*

The counselor's use of the adverbial phrase *really positive* and the smiley emoticon emphasize her positive evaluation. She repeats Chris' positive feedback on the technique, which reinforces the positive impact. At the same time, she clearly positions Chris himself as the agent of change. Further, her use of the progressive aspect makes the action continuous and thus leaves room for further improvement. In her response, then, the counselor not only evaluates Chris' statement but also explains and affirms Chris' identity as an active self-helper.

Assessing overall progress is the last function I discuss for the counselor's *assessments*. In contrast to the previous functions, these *assessments* are concerned with the clients' improved well-being rather than with specific techniques. In (7.16), in the last entry in Mel's thread, the counselor reacts to Mel's overall evaluation of how she is doing. Not only does the counselor evaluate Mel's comment that she feels more positive and has learned which coping techniques help her the most, but she also assesses Mel's need for more time to progress further:

- (7.16) Counselor (Thread: Mel; Entry 12)  
*This is fabulous to hear Mel, while I acknowledge that it will take time for these*



strategies to work more fully and for your confidence to grow. What I do hear is that you are making great progress and you are trusting your own judgement more about what helps and hinders you. 😊

The counselor takes a very positive stance at the beginning of her *assessment*. She assures Mel that by continuously applying the coping techniques, Mel will further improve. At the end, the counselor positions Mel as an expert on finding the coping techniques that work best for her, which further affirms Mel's overall progress. She ends her *assessment* with a smiley emoticon that conveys her positive stance towards Mel's progress.

In contrast, example (7.17) illustrates how a client's progress can also be evaluated with quite minimal *assessments* from the counselor:

- (7.17) Counselor (Thread: Ellie; Entry 8)  
 It is really good to hear how much more positive you sound Ellie.

Again, boosters (*really, more*) and stance lexemes (*good, positive*) reinforce the positive evaluation and therefore also boost the client's progress. Minimal *assessments* are often followed up by *advice-giving* moves that urge clients to continue to progress (see next section), while they also serve to affirm the clients' improved well-being overall.

Examples (7.15) to (7.17) also highlight a characteristic of the sub-functions that are focused on the clients' progress: All three start with a modification of the construction *It's/That's/This is* + modifier (expressing positive stance) + *to hear*. This construction positions the

counselor as primarily a recipient of the clients' report on improvement. In contrast to this type of positioning, the counselor constructs herself as the agent of understanding clients' problems in formulations and normalizations. The counselor thus carefully positions herself in a way that supports the clients' current needs at any given moment. This facilitates the clients' positioning as legitimate advice-seekers or as active self-helpers, depending on the specific function of the *assessment*.

The positive reinforcement of the third and fourth function (affirming applications of coping techniques and affirming progress) of *assessments* is apparent in all of the above examples. The counselor praises the clients' progress and thus cements their improved well-being. The counselor's offer of encouragement and reassurance makes a vital contribution to helping the clients believe in their progress. Previous studies have also pointed out how important such activities are. Placencia (2012: 299) describes how peers on Yahoo!Respuestas use "expressions of reassurance", and Rudolf von Rohr (2018: 292) shows that participants of the smoking cessation forums tell "members that they are on the right track". In Morrow (2006: 543), posters in a depression forum expressed "positive regard ... through encouragement and reassurances." Further, as Fitzgerald and Leudar (2012: 14) point out, the principles of solution-focused therapy urge counselors to "maintain unconditional positive regard" for the patients/clients. The third and fourth function clearly highlight this characteristic. Finally, according to Locher (2006: 140), compliments are used to "creat[e] rapport with the reader" on the online advice column she studied. Clearly, positive

reinforcement is an important aspect of practices that center around advice- or support-giving.

To summarize, the counselor's *assessments* play an important role in counseling for a number of reasons. I want to highlight two that I have alluded to both in this section and throughout previous chapters. First, the counselor plays the important role of active listener to clients who may well have struggled with their difficulties for quite some time without having had a person to talk to. I have demonstrated in previous sections that the clients have a need to simply be able to talk about their problems; after all, the clients do not explicitly seek advice, but rather state their problems. The counselor puts considerable effort into demonstrating her understanding of the clients' troubles with *assessment* moves because being heard and understood might already be enough to begin the process of relieving the clients' distress. As the counselor repeatedly mentions in the interview: "[clients] need to be heard, they need to have their problem heard and acknowledged" (Interview). Both the lexical analysis and the functional analysis have outlined how much work the counselor invests in legitimizing the clients' need to be heard. Secondly, the counselor's *assessments* are often used to align clients to following *advice-giving* moves. For example, with her acknowledgment of the troubles clients struggle with and her affirmations of clients' strengths, the counselor positions the clients in very specific ways. Only once this work is carried out does the counselor proceed to suggest in various ways how clients might be able to improve their well-being.

### 7.3.2 Advice-Giving

#### *Syntactic Realization*

The syntactic realization of *advice-giving* moves follows three patterns. A look across the five threads (Table 7.8) reveals that the counselor uses declaratives and imperatives in all of them. There are only slight differences in use according to thread, such as fewer imperatives occurring in Anna's thread (14%) and more imperatives occurring in Chris' thread (33%). Interrogatives occur only twice in Ellie's thread. However, their absence can be explained by the fact that *requests for information* can have an advisory function. As they were written in italics to indicate the counselor's request for clients to answer them, these were coded as *requests for information* rather than *advice-giving* moves, as outlined in Chapter 5 (see Section 7.3.3 for details on the advisory character of some *request for information* moves).

Table 7.8 Percentages of syntactic realizations in the counselor's advice-giving moves

Threads ↓	Syntax →					
	Declaratives	Imperatives	Interrogatives	Open	Total %	Total
Anna	66	14		20	100	35
Ellie	63	26	2	9	100	82
Chris	59	33		8	100	66
Mel	73	24		4	101*	110
Taylor	67	27		6	100	131

\*Due to rounding, the percentage results in 101 percent.

A closer analysis of the declaratives and imperatives in *advice-giving* moves reveals specific patterns when the theme is taken into account (this is not shown in the table). For example, in the themes ‘stress’ and ‘depression’, almost the same number of declaratives (n=18 and n=5 respectively) and imperatives (n=15 and n=4 respectively) occur. In addition, I also closely analyzed whether imperatives that are used in *advice-giving* moves within specific themes occur more frequently in particular threads. For example, all imperatives in the theme ‘depression’ are used in Mel’s thread. These imperatives are repetitions of previous advice given in other themes. It seems that the repetition of advice that was previously given is less face-threatening when the advice was introduced carefully the first time it was mentioned.

Moreover, 13 out of the 15 imperatives in the theme ‘stress’ occur in Ellie’s thread. The counselor focuses on helping Ellie deal with stress caused by her difficult relationships. The advice mostly centers on techniques that are supposed to help Ellie relax. Thus, the potential face-threat of an imperative in such an *advice-giving* move is rather low and its use is therefore mostly unproblematic. In contrast, imperatives within *advice-giving* moves are used the least in the theme ‘relationships’. Chapter 6 revealed that *advice-giving* occurs less frequently in this theme. The fact that only around 15 percent of *advice-giving* moves in the theme ‘relationships’ are expressed as imperatives further highlights their face-threatening potential in this theme.

In the themes ‘self-esteem’ and ‘anxiety’, the counselor employs a high percentage of imperatives (27 and 28 percent respectively). In

these two themes, the counselor uses pre-written text blocks that contain suggestions of coping techniques with several steps. The counselor describes such coping techniques by employing *assessments*, *advice-giving*, *requests for information* and other discursive moves. The *advice-giving* moves are thus framed by *assessments*, *general information* moves, and *requests for information* that mitigate the advice provided in the *advice-giving* moves. This might be what allows the counselor to use imperatives more overtly.

Several studies have looked at the realization of advice from a syntactic point of view. Placencia (2012: 297-298) analyzes the directness of guidance moves and their realization in imperative form, but does not provide a quantitative account. Similarly, Morrow (2006: 544-545) shows that forum posters utilized declaratives, imperatives and interrogatives in advice messages concerning depression, but does not provide a quantitative account either. Hampel (2015: 114) notes that 83 percent of advice messages on a celebrity Facebook page that centers around “love and relationship matters” (ibid.: 100) are in imperative form. The fact that the advice is given by peers in a non-institutionalized and mostly unmoderated location might explain the extremely high numbers of imperatives.

Results from Locher’s study (2006: 88) on the advice column most closely resemble the results of the present study: “advice in the form of declarative sentences ... accounts for 52 percent of all advice moves.” Further, imperatives (both inviting future action and introspection) are used in 36 percent of sentences (ibid.: 88), leaving

interrogatives with the lowest frequency (11%). Further, “individual topic categories all prefer suggestions in the form of declarative sentences” (ibid.: 88). The syntactic realizations of *advice-giving* in my study are in accordance with Locher’s findings: declaratives are also used for around half of the sentences that make up the *advice-giving* moves in my corpus. However, a lower number of imperatives is employed in the present study (around 25% overall). In comparison to Locher (2006), the low number of interrogatives in *advice-giving* moves appears rather odd in my corpus. As I previously mentioned, some of the *requests for information* have an advisory character. Such text passages were written in italics, meaning that the counselor requests that clients answer them. I thus coded these text passages as *requests for information*. As a result, a comparison of interrogatives in *advice-giving* moves in Locher’s study or interrogatives in *requests for information* that have an advisory character in my corpus cannot be drawn very easily.

### *Lexical Realization*

I also conducted a word frequency analysis of all the words (n=9,715) occurring in the counselor’s *advice-giving* moves. The twenty most frequent lemmata are shown in Table 7.9. They can be grouped into four categories: person reference, verbs (activity, primary, mental, facilitating, and modal verbs) and their negation, the lemma TIME, and wh-words.

Table 7.9 Word frequency in the counselor's advice-giving moves (ordered by frequency; tokens: 6,830; types: 972)

Rank	Lemma	Frequency	Lemma word form(s)
1	you	465	
2	be	358	am (4), are (130), be (58), been (3), is (138), 'm (21), was (1), were (3)
3	your	206	
4	have	88	had (5), has (9), have (68), having (5), 've (1)
5	we	80	
6	will	75	
7	can	74	
8	do	70	did (3), do (35), does (4), doing (23), done (5)
9	feeling	70	feeling (42), feelings (28)
10	get	67	get (50), gets (83), getting (11), got (3)
11	help	67	help (60), helped (2), helps (5)
12	them	66	
13	focus	64	focus (43), focused (3), focusing (18)
14	not	64	
15	what	64	
16	time	58	time (44), times (14)
17	I	55	
18	use	52	use (26), used (15), using (11)
19	take	47	take (26), taken (3), takes (9), taking (9)
20	thought	47	thought (19), thoughts (28)

Five personal pronouns appear in the twenty most used lemmata in *advice-giving* moves, with second person singular nominative *you* appearing 465 times in advice given by the counselor. Despite the fact that 25 percent of the sentences are realized as imperatives, then, the pronoun for second person singular is the most frequent lemma. This focus on the client is reinforced through the second person possessive pronoun *your* (n=206). First person plural pronoun *we* is not necessarily used to refer specifically to the counselor and the client, but is also used to refer to people in general. For example, frequently occurring collocations in



*advice-giving* moves are *we can choose* or *we feel*. With such collocations, the counselor describes how people in general react in a given situation. *Them* appears as a person as well as a non-human reference in advice. Frequently, *them* denotes things the clients experience, such as *unhelpful thoughts*, or as a collective reference to the coping techniques the counselor suggests. Finally, and in surprisingly ‘low’ frequency, the first person singular pronoun *I* appears. Its comparably low frequency indicates that the counselor clearly focuses on the clients in *advice-giving* moves. In other words, she does not explicitly foreground herself as the advice-giver.

It is noteworthy that despite the counselor’s frequent use of vocatives, clients’ first names do not appear in the twenty most used lemmata in *advice-giving* moves. Since *advice-giving* moves are often preceded by an *assessment* or followed by *requests for information*, which both make use of vocatives, using personal names in *advice-giving* moves might become redundant.

The verb categories within the 20 most frequent lemmata are activity, primary, mental, facilitating, and two modal verbs. The primary verbs BE, HAVE, and DO appear in both auxiliary and main function in similar ways to those I described in the previously discussed discursive moves. All four other verb categories differ in terms of either the lemmata that are used, or the subject of the verb in question. To begin with, two additional lemmata in the activity group come up: USE and TAKE. These two verbs occur frequently in the advice column Locher (2006: 99) examined, where they appear in “very different

combinations”, or in other words, with a broad range of collocates. In the present study, however, both are used in very specific patterns, listed by frequency in Table 7.10.

Table 7.10 Frequent collocations for the lemmata USE and TAKE in the counselor's advice-giving moves

USE (n=52)	TAKE (n=47)
USE + det + <i>associations</i> (n=13)	TAKE + modifier + <i>care</i> (n=13)
USE + det + <i>image</i> (n=9)	TAKE + det + <i>energy/effort/practice</i> (n=5)
USE + <i>them</i> (n=4)	TAKE + <i>time</i> (n=4)
USE + det + <i>techniques</i> (n=3)	TAKE + det + <i>minute/moment</i> (n=4)
USE + det + <i>senses</i> (n=3)	TAKE + <i>away power</i> (n=4)
USE + det + <i>strategies</i> (n=1)	TAKE + <i>control</i> (n=2)

USE preferentially collocates, on the one hand, with *associations*, *images* and *senses* in specific coping techniques that the counselor suggests. On the other hand, it also collocates with *techniques* or *strategies* when the counselor talks about such coping techniques in general terms. Further, *them* can refer to either of these two possibilities. TAKE is used in three different ways. First, at times the counselor ends her entries with a modified version of *take care*. The modification of the expression marks it as an *advice-giving* rather than a *farewell* move, and in fact the modified version of *take care* is often followed by an additional suggestion, such as to *keep going*, which further distinguishes it from a simple farewell formula such as *take care*. Second, TAKE also occurs when the counselor tells the clients that improvement and the application of suggested techniques takes *time*, *effort*, *practice*, and so on. Third, three collocations occur in very specific coping techniques

in which clients are advised to *take a minute*, *take away power*, or to *take control* at particular stages of these techniques. All in all, then, both these activity verbs are closely connected to the goal of the *advice-giving* moves and are therefore a specific characteristic of this move.

The mental verb FOCUS<sup>19</sup> occurs mostly in infinitive (n=13) or gerund form (n=14). The most frequent collocate in the form of a personal pronoun is second person singular *you* (n=16). In its common use in the phrasal verb FOCUS ON (n=38), its collocates often index positives, such as *focus on what is helpful*, *focusing on what you can control*, or *focus on creating the new path*. The counselor thus ensures that clients focus on a more positive interpretation of their circumstances, strengths, and attributes. This is clearly indicative of solution-focused therapy (Gingerich and Wabeke 2001; Kim 2008).

As Table 7.9 further reveals, the counselor frequently uses *feeling* (rather than *feel*) in *advice-giving* moves.<sup>20</sup> In the 42 occurrences of *feeling*, there are three types of utilization: *you are feeling* (n=6), *I'm feeling* (n=8) as reported speech, and the gerund (n=22). *Feelings* can also be modified by determiners: *the feelings* (n=8) and *those feelings* (n=7), compared to *your feelings* (n=9). This resembles the findings of my analysis of the counselor's *assessments*, in which she also avoids the use of FEEL with a first person singular pronoun. The gerund and

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<sup>19</sup> FOCUS can also occur as a noun, but it only does so in nine cases out of a total of 64 occurrences.

<sup>20</sup> This does not necessarily mean that the noun is used more often than the verb, but AntConc (Anthony 2016) cannot distinguish the gerund or the present participle from the noun. A closer look reveals that *feeling* (n=42) is used more often than *feelings* (n=28), which clearly signals the noun form.

the non-personal determiners clearly indicate that the counselor prefers a neutral form. This might be in order to distance the client from the mostly negative stance that is expressed through FEELING and its collocations (such as *anxious, down, guilty, stressed* and so on) in their *problem statements*.

In a similar way, the counselor often talks about *negative* or *unhelpful thoughts* clients have cultivated over the years. THOUGHT also collocates mostly with negative stance lemmata (*anxious, perfectionist, stressful*, and so on). Additionally, the counselor similarly uses non-personal determiners such as *the* and *that* in THOUGHT collocations (35 out of 47 occurrences). With such impersonal collocations, the counselor helps such clients to distance themselves from negative feelings and thoughts.

The facilitation verb HELP and the modal verbs *can* and *will* need to be looked at in connection with person reference. The facilitation verb HELP frequently right-collocates with the second person pronoun *you* (n=45) in constructions such as *help you*. Thirty-two instances are infinitives, while thirteen are *will help*. Similar collocations were found in advice moves in Rudolf von Rohr (2018: 288). Further, the subject position of HELP is never filled by first person singular pronouns (i.e., constructions such as ‘I help you’). Thus, the client is foregrounded as a recipient of the help rather than the counselor as a possible source of the help.

In contrast, the modal verb *can* collocates most frequently with *you* (n=43) on the left side. Less frequently, it left-collocates with *we*

(n=15). The modal verb denoting ability therefore collocates most frequently with the client as the agent. A high frequency of the collocation *you can* was found in Locher (2006: 94) as well. Although less pronounced, a similar tendency occurs with the prediction modal *will*. Left collocates are: *you will* (n=26), *it will* (n=11), *this will* (n=5), and *what will* (n=5). The patterns for these three verbs indicate how the clients are positioned as the agents of abilities and predicted outcomes. In addition, they are also positioned as the recipients of help. Noticeably, the counselor is not necessarily positioned as the source of the support that is given to the clients.

Finally, I want to briefly consider the use of the lemmata *what* and *TIME* in the counselor's *advice-giving* moves. *TIME* often occurs in specific coping techniques or in relation with meta-discourse on how to practice techniques in general. On the one hand, collocations such as *time and effort*, *time and practice*, or *it takes time* caution the client not to expect sudden improvement. On the other hand, the counselor frequently says *a few times* when suggesting that clients should repeatedly practice coping techniques so that they become automatized. Last but not least, just as *wh*-words were used in the discursive move *assessment*, *what* is employed to introduce complement or relative clauses in *advice-giving* moves. The most frequent collocation is *what you + verb* (n=29).

*Functional Sub-Categories of Advice-Giving*

*Advice-giving* moves have several functions in the exchanges of the present study, and I will illustrate six of these with examples. I have previously mentioned that advice has been researched in various studies, including some of the discursive moves studies already mentioned in Chapter 5 and Chapter 6. Locher (2006: 88-92) provides a detailed analysis of not only the syntactic but also the linguistic realization of *advice-giving* moves. Some of the functions that occur in the present study are based on distinctions she made, such as advice to introspect versus advice to act. Additionally, I have found four further functions that the counselor uses. This results in the following list: (1) advice to introspect; (2) advice to act; (3) presentation of a specific coping technique; (4) task-specific advice; (5) meta-advice about coping techniques; and (6) affirmation to continue to progress. Advice to introspect and advice to act are of a more general nature in my study than in Locher's (2006), as I specifically use the third and fourth function to categorize advice passages in which the counselor introduces coping techniques or tasks for specific overarching themes. The last two functions relate to how advice should be (continuously) applied; thus, they focus on progress. It needs to be said that these functions overlap and their boundaries are fuzzy. It did not make sense, therefore, to code for these overly subtle differences, as interrater reliability could not be achieved. To illustrate these functions in the following pages, I use prototypical examples.

First, on numerous occasions, the counselor invites clients to introspect and reflect. She uses such *advice-giving* moves to encourage the clients to think about a situation from a different perspective, to think of solutions to tackle a specific difficulty, to think about certain aspects of a specific problem and so on. Example (7.18) shows how the counselor advises Anna to think about coping techniques that she has previously used:

- (7.18) Counselor (Thread: Ellie; Entry 2)  
This might be a good time to think about your previous counselling a bit more and remind you about what has helped you when you were younger to manage your anxiety more effectively.

The counselor encourages Anna to think about techniques that she already has at her disposal. The mitigated form (*might be, a bit more*) indicates that the counselor avoids suggesting directly that Anna has techniques available but is not currently using them. The counselor carefully constructs Anna as someone who was successful in managing her anxiety and thus positions her as having some expertise in coping with her anxiety. She encourages Anna to (re-)acquaint herself with her strengths and established coping techniques. As it does here, advice to introspect often aims to reconnect clients with their own strengths. As the counselor says in the interview:

I try to help the clients to recognize their resilience, help them to recognize what their coping techniques are. And even if they don't seem as particularly helpful, I really affirm for them that

those are pretty good, you know, they've been doing well enough with these techniques to still be at university and progress in their degree. (Interview)

The recognition and affirmation of the clients' coping techniques, even ones that were in place before the current counseling, is one of the characteristics of solution-focused brief therapy. Bannink (2007: 88) says that one central assumption in solution-focused brief therapy is that "the client possesses resources and competences that can be drawn on." Other kinds of introspection focus on shifting perspectives on a problem, such as looking at a relationship from the significant other's point of view.

Second, the counselor employs *advice-giving* moves to encourage the clients to take specific actions. The example given in (7.19) shows how the counselor suggests Taylor should try *writing a list*:

- (7.19) Counselor (Thread: Taylor; Entry 12)  
Perhaps it will help to write a list if what is good, and not so good about the relationship, and a list of what you want from your future, as a focus when you are upset. Seeing the not so good things will help you see the reasons that the relationship is not working, together with your future goals, will help you to see a future without him. The list of good things will help you to see what you want to build on, if you want to remain together.



Example (7.19) shows how much detail the counselor intersperses to explain what Taylor should do and how it might help her to come to a clearer interpretation of her relationship with her boyfriend. The example also shows how carefully the counselor tries to present a positive picture rather than to focus on the negative (e.g. *not so good things* instead of possibly ‘bad things’). The clear predictions of how the application of this advice will be helpful to Taylor align the client to try out the suggested action (*will help you* is repeated three times).

Third, the counselor uses *advice-giving* moves to present a specific coping technique. This function overlaps with the previous two in that introspection or action can be invited. However, it is listed as a separate category because such *advice-giving* moves are used to introduce a specific coping technique for an overarching problem or even theme to deal with rather than a single issue. Example (7.20) introduces a suggested coping technique that aims to help Ellie deal with stress:

- (7.20)      Counselor (Thread: Ellie; Entry 8)  
                  An alternative Ellie, is to have a worry notebook or jar besides your bed, so that you can easily write down the worry that is preventing you from sleeping, and tell yourself it is safely written down and does not need thinking about any more right now.

The suggestion of a worry notebook aims to reduce Ellie’s stress. As in previous examples, the counselor outlines what effect the advice might have. She points out possible improvement and progress before Ellie even applies the actual coping technique. The previous examples (7.18)

and (7.19) were responses to very specific experiences. In example (7.20), the counselor gives advice on how to deal with Ellie's general struggle with stress. Often, such types of *advice-giving* moves are followed by further coping techniques (i.e., further *advice-giving* moves of the same function) which clients can then choose from. In this way, the counselor ensures that the clients can find a coping technique that suits them and their situation.

The three functions discussed so far have several characteristics in common. First, they are mostly expressed in declarative form, with hardly any imperatives. Secondly, mitigation is central in all three examples of these functions. Finally, explanations and elaborations are given as to which experiences, feelings, and problems the clients might encounter while applying the advice. All of these aspects of the advice are carefully attended to by the counselor. She uses these characteristics to render the advice more appealing and to consequently facilitate its uptake. In any case, they are in stark contrast to how the next three functions I will now discuss are realized.

In the themes 'anxiety' and 'self-esteem', the counselor provides clients with specific techniques to better cope with the behavioral patterns and anxious, unhelpful thinking that are at the core of both themes. In the theme 'anxiety', the counselor suggests several related coping techniques that serve to acknowledge, normalize and accept anxious thoughts. In the theme 'self-esteem', the clients are encouraged to view their mind as a garden and are then guided through several steps to increase their low self-esteem (see Chapter 9). In both themes, the

specific techniques contain several pieces of advice. Example (7.21) shows an advice-giving move from a coping technique that aims to reduce anxiety. The *advice-giving* move<sup>21</sup> in example (7.22) is taken from the counselor's input in the theme 'self-esteem':

(7.21)      Counselor (Thread: Taylor; Entry 2)  
               **Say out loud now, a few times, 'I'm feeling anxious'.**

(7.22)      Counselor (Thread: Chris; Entry 2)  
               *Try and imagine that the thought is in solid letters you can grab (carved out of stone, made of glass, wood, built of bricks etc), then imagine you are destroying those words (blowing them up, burning, smashing or shredding them). This gives your mind a powerful message that you are no longer listening to them.*

In both cases, the counselor uses imperatives to illustrate the steps clients need to take. In the first case, Taylor is instructed to *say* a specific phrase *out loud*. The counselor thus presents Taylor with a clear and physical action to execute. In example (7.22), Chris is given guidance on how to *destroy* unhelpful thoughts. This is a more difficult application, and the counselor slightly mitigates her guidance when she urges Chris to *try*. Nevertheless, the clear instructions are in stark contrast to the way *advice-giving* moves were realized in the previous three sub-functions. The less mitigated realization of the current function can be

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<sup>21</sup> This text passage was coded as an *advice-giving* move despite the fact that it is written in italics. As it is not an interrogative and is reminiscent of the *advice-giving* moves that occur in other coping techniques, it is clearly intended as advice rather than as a *request for information* despite its italicized font (see also Chapter 9 for a more detailed discussion).

explained by the fact that these steps are framed in suggestions of specific coping techniques. At the beginning of such suggestions, the counselor explains aspects of the psychological concepts of anxiety and (low) self-esteem, normalizes their existence in *assessments* and *general information* moves, and continuously requests information to include the clients in the interaction (for a detailed analysis of how such coping techniques are presented in the theme ‘self-esteem’, see Chapter 9).

A further function of *advice-giving* moves is ‘meta-advice’. In this function, the counselor’s *advice-giving* moves outline how best to apply the suggested coping techniques or encourage the clients to continue with their applications. Example (7.23) illustrates the meta-aspect of such an *advice-giving* move:

- (7.23) Counselor (Thread: Mel; Entry 2)  
 You will need to try these a few times a day to see how they are for you Mel. Again, remember, they are not designed to get rid of the guilt, instead to help you accept and not expend energy fighting it.  
 ☺

The counselor first warns Mel that it will take practice to heighten the effect of the techniques and then repeats the main effect they aim to achieve. The *advice-giving* move ends with a smiley emoticon that aims to portray a positive stance and can also function as a mitigator that downplays the face-threat of the advice given. The ‘meta-advice’ itself is concerned with the application of advice that the counselor previously gave. A further variation of this function is moves that are used

to remind the clients to use techniques that the counselor suggested previously. ‘Meta-advice’ moves can contain imperatives and are realized in mitigated as well as non-mitigated ways. In general, it seems that ‘meta-advice’ contains less potential face-threat than other *advice-giving* moves in the counseling exchanges. This is supported by the fact that they are less frequently followed by *requests for information* that aim to involve the clients in the therapeutic alliance.

Finally, the counselor uses very specific *advice-giving* moves to encourage further progress in general. These are often very brief discursive moves and contain a very specific structure. Examples are given below:

(7.24)      Counselor (Thread: Anna; Entry 12)  
                   Keep on doing what you doing, and you will  
                   continue to progress :-)

(7.25)      Counselor (Thread: Mel; Entry 12)  
                   Keep on moving forward and building on this  
                   strong foundation that you have built! 😊

The phrasal verb *keep on* occurs in most of these *advice-giving* moves. The use of *keep on* makes several important points at once. The counselor conveys that the clients have achieved positive work so far and that if they continue the work, they will continue to progress. Rudolf von Rohr (2018: 296) points out that advice-givers on peer-to-peer forums also frequently use the construction *keep on* to conceptualize smoking cessation “as [an] ongoing process.” The clients’ aim to achieve better mental health can also be seen as such an ongoing process. Further, the counselor constructs the clients not only as having

improved, but also as the actual sources of the improvement. Such encouragements are manifold in all five threads and are used to affirm clients' positionings as active self-helpers. These *advice-giving* moves often occur at the end of an entry. The counselor offers an explanation for this finding:

It is that final paragraph when I do some affirming. And I'm consciously saying: "You're very self-resilient." In that final summary in an [entry] I can do a lot of affirming and building on what they've said and also some things that I've noticed. (Interview)

When she encourages clients to continue with their progress and affirms their new role as self-helpers, the counselor aims to ensure that clients will continue to work on their well-being after the final session has taken place. For more on the evaluation of progress and the counselor's role as encourager and praiser, as well as on the resolution of the counseling process, see Chapter 10.

### **7.3.3 Request for Information**

#### *Syntactic Realization*

The Oxford English Dictionary (OED) defines a request as "an instance of asking for something", indicating that these discursive moves might readily lend themselves to being realized as interrogatives. Table 7.11 shows that, apart from Ellie's thread, three types of syntactic realizations are used in *requests for information*. As expected, interrogatives appear frequently, but declaratives and imperatives also occur.

Table 7.11 Percentages of syntactic realizations in the counselor's requests for information

Syntax →						
Threads ↓	Declaratives	Imperatives	Interrogatives	Open	Total %	Total
<b>Anna</b>	35	12	47	6	100	17
<b>Ellie</b>	18		73	9	100	22
<b>Chris</b>	37	17	39	7	100	41
<b>Mel</b>	11	8	77	3	99*	61
<b>Taylor</b>	13	16	65	8	102*	86

\*Due to rounding, not all totals add up to 100 percent.

Declaratives are used in all the interactants' threads but with different frequencies: 35 percent in Anna's, 18 percent in Ellie's, 37 percent in Chris, 11 percent in Mel's, and 13 percent in Taylor's. A large percentage of these declarative sentences (34 out of a total 43 declaratives) are syntactically realized with the structure *I WONDER* + (post-predicate *wh*-clause). Such constructions were also found by Merrison et al. (2012: 1086), who identified them as external modifications of requests in email exchanges. In my data, the structure seems to be employed "to present an indirect question" via a "cognition verb" that signals "control" (Biber et al. 2007: 683). The mental verb *WONDER*, which frequently occurs in the progressive aspect (ibid.: 472), is characterized by a subject that is an "active agent controlling the thought process" (ibid.: 473). The progressive aspect can further signal interaction and "immedia[cy]" (ibid.: 473). This gives the impression that the counselor is thinking of the specific requests right at the time of writing. Further,

indirect questions might carry less potential to threaten a client's face. Finally, this syntactic realization allows the counselor to ask a specific question via the post-predicate.

Additionally, 15 of the 28 imperatives begin with the following construction: *help me to understand* + (post-predicate clause). The use of the facilitating verb *help* collocating with accusative personal pronoun *me* and the infinitive *to understand* positions the clients as the agents who will provide additional input. As the additional information will facilitate the counselor's comprehension, the clients are thus positioned as important members of the therapeutic alliance. Further, imperatives are employed in the counselor's requests for more information about specific issues or on progress. They are then realized in such constructions as *give me some examples*, *tell me about*, and *let me know*. These realizations position the counselor as the recipient of the information the clients will provide.

### *Lexical Realization*

The results of the lexical analysis of all the words (n=3,399) in the discursive move 'request for information' are shown in Table 7.12, in which the twenty most frequent lemmata are provided. These lemmata can again be grouped into categories: person reference, verbs (primary, mental, facilitating and modal verbs), two wh-words and the noun SENSE.

First, the counselor's person references differ slightly in *requests for information* when compared to the previously discussed discursive



moves. The utilization of second person pronoun *you* and *your* resembles previous findings on discursive moves in the present study. However, the frequent use of first person singular nominative *I* and accusative *me* differs from the counselor's usage in *advice-giving* and *assessment* moves. Here, the counselor explicitly positions herself as the one requesting information. This is especially the case in sentences realized in declarative form. For example, the construction *I WONDER* overtly positions the counselor as the inquirer.

Table 7.12 *Word frequency in the counselor's requests for information (ordered by frequency; tokens: 2,623; types: 527)*

Rank	Lemma	Frequency	Lemma word form(s)
1	you	216	
2	be	179	am (3), are (41), be (34), been (4), is (50), 'm (36), was (3), were (8)
3	what	127	
4	do	95	did (7), do (46), does (31), doing (5), done (6)
5	your	75	
6	I	72	
7	how	64	
8	have	59	had (6), has (9), have (38), having (5), 've (1)
9	help	45	help (41), helped (4)
10	think	37	think (26), thinking (11)
11	me	36	
12	wonder	36	wonder (11), wondering (25)
13	would	32	
14	feel	27	feel (24), feels (1), felt (2)
15	sense	23	sense (23)
16	Taylor	23	
17	understand	21	understand (20), understood (1)
18	Mel	20	
19	could	19	
20	feeling	19	feeling (16), feelings (3)

Further, two vocatives appear in the twenty most frequently used lemmata: *Taylor* and *Mel*. The counselor personalizes her text passages with frequent vocatives. I have shown that a frequent sequence of discursive moves is an *assessment* move followed by an *advice-giving* move, which is then followed by a *request for information*. The fact that *requests for information* appear at the end of such sequences explains why vocatives are used more frequently in requests: The counselor aims to involve the clients at the end of a sequence, but not in the middle of it. If only Taylor and Mel's personal names occur in the twenty most frequent lemmata in Table 7.12, that stems from the fact that their threads contain more words. As a result, the counselor has more opportunities to use their personal names. Chris' thread is also longer than Anna's and Ellie's. However, Chris explicitly asks the counselor not to use his personal name so frequently, as it makes him feel uncomfortable. The counselor duly responds and does not use his name anymore after his comment.

In comparison to the counselor's *assessments* and *advice-giving* moves, there are also differences in what types of verbs she uses and how frequently she uses them in *requests for information*. The primary verbs BE, DO, and HAVE occur more frequently due to their auxiliary function in interrogatives. However, activity verbs are not present in the twenty most frequently used lemmata, which can be explained by the fact that most *requests for information* ask the clients to introspect and reflect rather than to perform a specific action.

Four mental verbs appear in Table 7.12: THINK, FEEL<sup>22</sup>, WONDER, and UNDERSTAND. These four can be further grouped into two categories. THINK and FEEL are used to invite the clients to participate in the discussion and reflect on specific aspects. Both verbs are mainly used with the collocate *you*. Frequent collocations are *you feel* (n=13), *how you feel* (n =4 ), *how do you feel* (n=4) and *what do you think* (n=15), *what you think* (n=4), and *how you think* (n=3). In all of these cases, clients are positioned as the agents of the reflection. In contrast, WONDER and UNDERSTAND are centered around the counselor in very specific ways, as I have pointed out in the section on the syntactic realization. The counselor uses WONDER to introduce indirect questions and UNDERSTAND to position herself as the recipient of crucial information the clients will provide in order for her to better understand them.

The facilitating verb HELP is used to initiate the construction *help me to understand*. The most frequent collocation of HELP is *help me* (n=21), which positions the counselor as the recipient of the client's projected action. *Help you* (n=9), reversing the recipient of the help, occurs less frequently. The higher percentage of the singular first person pronoun is connected to the fact that the counselor positions herself as in need of clients' participation in the therapeutic alliance. The counselor does not use first person singular in subject position for HELP

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<sup>22</sup> FEELING could be included here, as it could be used in *are you feeling*. However, AntConc (Anthony 2016) cannot differentiate between the gerund and the noun form of *feeling*, as I have mentioned previously.

(just as she does not use such structures in *advice-giving* moves). The absence of such constructions indicates that she downplays her role as advice-giver. This reflects the counselor's aim to provide a safe place to talk for clients, as well as her aim of supporting the clients in finding their own solutions for their struggles. Further, the counselor tries to ensure that the clients understand her with her questions about whether what she says makes SENSE. The frequent occurrence of SENSE stems from such constructions as *does that make sense* (n=9) and *does this make sense* (n=8).

The modal verbs WOULD and COULD also frequently occur in the counselor's *requests for information*. Their frequent occurrence can be partially explained by the interrogative form of requests and the wh-words *what* and *how*. Locher (2006: 102) notes that the wh-words "*what ... and how* were most frequent" in *advice-giving* moves that were realized in interrogative form in her study. Frequent collocations in the present study are *what would* (n=10), *would you* (n=6) and *could you* (n=8). The wh-words also form interrogatives with other verbs, such as *what do you think* (n=14), *what you (+verb)* (n=12) or *how does this sound* (n=6). The counselor frequently uses such constructions to engage the clients in the discussion and the therapeutic alliance. It may seem obvious that both modal auxiliaries and wh-words are frequently used in interrogative forms. Nevertheless, it is important to specifically note that they are used to position clients as the agents of the reflection. This ensures not only that the discussion about the clients' struggles

continues, but also that, as part of the therapeutic alliance, the clients feel in charge of their fight against their struggles.

#### *Functional Sub-Categories of Requests for Information*

*Request for information* moves have various functions that are tied to three specific issues of the interaction. The first is comprehension: the counselor invests considerable time to ensure not only that her understanding of the clients' issues is accurate, but also that the clients understand her input. The two functions that are linked to this issue are (1) improving the counselor's comprehension; and (2) ensuring the clients' comprehension. The second issue is part of the *advice-giving* nature of counseling: The counselor uses *requests for information* to frame advice that she gives the clients. In addition, some *requests for information* have an advisory character themselves. The corresponding functions are (3) inquiring about client's readiness to apply advice; (4) suggesting reflection; and (5) posing technique-specific requests. I will explain these functions in detail below. The last function of *requests for information* is connected to the issue of improvement and progress: (6) inquiries about progress. All in all, as they aim to engage clients in the counseling process, *requests for information* are highly relevant for the collaborative work in the therapeutic process and the negotiation of the therapeutic alliance.

First, the counselor uses *requests for information* to improve her own understanding of the clients' struggles. She repeatedly requests that clients provide her with more information about specific issues so

that she can better understand anything particularly troubling or assess whether she has understood the clients' problems correctly. For example, the counselor asks Mel to elaborate on how she can *recognize and block unhelpful thoughts* in example (7.26). Example (7.27) illustrates how the counselor asks Ellie whether her formulation of her problem was accurate:

- (7.26) Counselor (Thread: Mel; Entry 2)  
*Help me to understand more fully how you recognize and block the unhelpful thoughts.*
- (7.27) Counselor (Thread: Ellie; Entry 2)  
*Have I understood this right Ellie?*

I have highlighted above how constructions such as *help me to understand* position the counselor as the recipient of information. Further, the complement clause positions Mel as an expert on recognizing and blocking specific thought patterns in example (7.26). In example (7.27), the counselor asks for confirmation of her formulation (not shown in the example). Apart from ensuring comprehension, this helps the counselor establish a specific interpersonal pattern in which such requests call for clients to actively participate in the interaction and thus invite them to voice their opinions.

The second function of *requests for information* concerns the clients' comprehension. This is illustrated in the following two examples from Anna's and Chris' threads and highlights the common pattern of the linguistic realization of these types of requests:

- (7.28) Counselor (Thread: Anna; Entry 2)  
*Does this make sense Anna?*

- (7.29)      Counselor (Thread: Ellie; Entry 6)  
                   I hope I'm being clear?

This function illustrates how constructions that seem rather simple can contain peculiarities, such as the varied syntactic realization occurring in the examples shown here. The counselor's frequent use of these requests demonstrates her desire to ensure mutual comprehension.

As I have noted above, some functions of *requests for information* are closely linked to the advisory nature of counseling. The third function involves an inquiry about whether the clients are ready to apply previously suggested advice. The fourth function of requests is suggestions to reflect on specific issues. And the fifth function is concerned with requests that are highly embedded in suggestions of specific coping techniques. I will explain these three functions separately, but it should be kept in mind that they are linked to giving advice in specific ways. The third function, then, is concerned with inquiring about a client's readiness to apply and experiment with specific coping techniques the counselor has suggested:

- (7.30)      Counselor (Thread: Anna; Entry 2)  
                   How does this sound as something to try Anna?

- (7.31)      Counselor (Thread: Mel; Entry 4)  
                   What do you think of this idea Mel?

These *requests for information* follow *advice-giving* moves and encourage the clients not only to try the advice that was suggested, but also to report back and evaluate the advice. This is again part of the counselor's attempts to position clients as active participants in the therapeutic

alliance who have the right to express their opinion. The counselor discusses this in the interview:

I often ask the clients: “Am I making sense? Am I being clear? How does that sound to you? What do you think of this idea?” I’m asking that regularly in the hopes to give the clients the message “I want some feedback.” And I might even say to some clients: “Is this making sense?” I want to ensure that I’m expressing myself in a way the clients understand. So throughout the exchanges I’m consciously putting in these questions to check whether what I say is helpful and to ensure that I’m understanding them correctly, but also to invite them to give me feedback and to engage in the process. (Interview)

Thus, the requests discussed so far help the counselor to create a positive environment that encourages the clients to **engage** freely in the discussion and to participate actively in the therapeutic alliance.

*Requests for information* in the fourth function, suggestions to introspect, are closely related to *advice-giving*. In this function, requests are specifically designed to trigger introspection in clients. Example (7.32) illustrates how the counselor asks Taylor to imagine a place that makes her feel better. The counselor asks Taylor to provide characteristics of this place:

- (7.32) Counselor (Thread: Taylor; Entry 2)  
*If you were feeling in a better place, what would be different about this imagine, or what image might replace it?*

This request for Taylor to share her image positions her as an active participant in the therapeutic alliance. Moreover, the personalized



image ensures that it is the accurate one for Taylor. A second example of such requests, example (7.33), shows how the counselor suggests Chris should look at a specific situation from his friends' point of view:

- (7.33)      Counselor (Thread: Chris; 4)  
*I wonder what your friends might be thinking about your lack of contacting them?*

The counselor mitigates the request via an indirect question. In both of these examples ((7.32) and (7.33)), the clients are asked to reflect rather than act. In example (7.32), the aim is for Taylor to realize clearly what could help her feel more comfortable in her situation. In example (7.33), the counselor wants Chris to change perspectives and recognize the consequences of his actions for other people. Clearly, this function of *requests for information* has characteristics that are closely related to *advice-giving*.

One might wonder why I have not coded such interrogatives as *advice-giving* moves. Several studies have labeled interrogatives with an advisory character as *advice-giving* moves (e.g. Locher 2006; Morrow 2006, 2012; Rudolf von Rohr 2018) or have labeled advisory interrogatives as similar to advice in analyses that did not specifically include a discursive moves analysis (e.g. Silverman 1997). These researchers also discuss why interrogatives are used to give advice. For example, for Morrow (2006) and for Rudolf von Rohr (2018), interrogatives are used to give indirect advice or to mitigate advice. Like Rudolf von Rohr (2018), Locher (2006: 103) argues that advice in interrogative form “ensure[s] that readers can take or leave the advice depending on how they would answer the questions raised.” In addition, Locher

(2006: 102) points out that such interrogative advice “tries to place the ball in the reader’s court.” She also adds that “the advice lies in encouraging the advice-seeker to ask the questions posed and to draw conclusions from them that may be a part of the solution to the problem.” Silverman (1997: 121) examined advice in HIV/AIDS counseling and explains that interrogatives are used so “client[s] can construct [their] own ‘advice’ from a question-answer sequence.” He adds that clients can “produc[e] the advice as a summary of the argument present in [the counselors’] questions” and that such summaries are “the strongest acknowledgements of a professional’s advice” (Silverman 1997: 124). For Morrow (2012: 273), interrogative advice is used to “creat[e] a more highly involved style” of interaction.

All of these arguments can also be made about the *requests for information* that have an advisory character in my corpus. However, there is a very specific and important difference between my study and these other studies. The counselor in my corpus may aim to make suggestions to the clients with such advisory *requests for information*, but she also aims to trigger further interaction. In other words, I agree that the counselor poses such advisory *requests for information* for all the reasons that the studies referenced above have discussed. However, I argue that she also wants the clients to actually respond to her *requests for information*. The counselor can only provide the clients with additional support when she receives new input from them.

This is in contrast to some of the findings of the studies mentioned above. For example, Locher (2006: 103) explicitly mentions that

on the advice column the interrogatives that give advice “remain on a purely rhetorical level.” Rudolf von Rohr (2018) also mentions that interrogative advice used on websites that focus on smoking cessation are rhetorical questions. The requests the counselor asks in my data are certainly not rhetorical, but aim to trigger further interaction. For Locher (2006: 103), such interrogative advice is “resolved by question-answer sequences or by the joint development of a topic” in face-to-face counseling. I argue that this is the case not only in face-to-face counseling, but also in email counseling. The counselor and the clients in my data jointly develop the advice that the counselor aims to trigger through such *requests for information* that have an advisory character. To account for this collaborative work, I labeled such advisory requests as *requests for information* rather than *advice-giving* in interrogative form. Ekberg and LeCouteur (2014: 65) found that therapists used “information-soliciting questions” to great effect. Therapists used such questions to “co-implicate the client in making decisions about how to achieve therapeutic goals” (ibid.: 60). In other words, such questions can serve to engage the clients in the therapeutic process. Requests for information are used in a similar way by the counselor.

I called the fifth function that *requests for information* fulfil ‘posing technique-specific requests’. These requests are closely linked to *advice-giving* moves that aim to provide the clients with specific coping techniques. In instances in which the counselor provides the clients with specific coping techniques, she often follows an *advice-giving* move with a *request for information* move. In the *advice-giving* move, the

counselor describes how the coping technique should be executed. In the *request for information*, she asks the clients to report on specific parts of the coping technique. For example, Ellie was presented with the task of imagining her family members as specific animals according to similarities in behavioral attributes or characteristics. The counselor asks Ellie which animals she chose and which of their attributes are helpful or difficult in a *request for information*:

- (7.34) Counselor (Thread: Ellie; 6)  
*If she was an animal what would she be? What animal are you? Your Mum and your Dad? [...] What aspects of each animal is helpful and a strength, and which aspects are unhelpful or a difficulty for you? If you could change the animal that is your sister, or tame it, what would you do?*

The technique aims to help Ellie identify strengths and weaknesses of herself and her family members. The direct style of the questions aims to facilitate the application of the technique.

In example (7.35), Mel is asked to reflect on how she felt while saying *I feel anxious* out loud. Here, it is worth looking at the sequence of the *advice-giving* move and the *request for information* move:

- (7.35) Counselor (Thread: Mel; 2)  
 <Advice-giving: *Say out loud now, a few times, I'm feeling guilty.* Advice-giving>  
 <Request for information: *How do you feel right this second having said that?* Request for information>

Noticeably, there is no mitigation employed in the *request for information*. In both example (7.34) and example (7.35), then, *requests for information* that belong to a suggestion of a specific coping technique reflect the realization of *advice-giving* moves that occur in such suggestions. Both moves contain hardly any mitigation and are presented in a very direct style.

Finally, the last function of *requests for information* is to inquire about the clients' progress. Such requests sometimes occur after the clients' lack of a response. In example (7.36), the counselor inquires whether Anna has connected with people in ways the counselor had previously suggested. In example (7.37), the counselor asks Mel whether she has continued to write a list of positive qualities and achievements:

- (7.36)      Counselor (Thread: Anna; 2)  
*I'm wondering whether you have had an opportunity to check out any of the societies or clubs, as a way of meeting new people, or trying out new activities?*
- (7.37)      Counselor (Thread: Mel; 6)  
 ☺ *How are you getting on with these Mel, and how does it feel looking back at your growing list of achievements?*

*Requests for information* that inquire about such progress contain a considerable potential to threaten the clients' face; after all, the counselor is reminding them to provide information that she had asked for previously. The counselor carefully constructs her requests in order to

mitigate the potential threat to the clients' face. In example (7.36), the counselor uses the construction *I'm wondering* + (post-predicate) to mitigate her request, while simultaneously reminding Anna why joining *societies or clubs* would be a helpful activity for her. In example (7.37), the counselor presumes that Mel has in fact carried out her suggestion and that she has managed to add to her *list of achievements*. She prefaces her request with a smiley emoticon, which further mitigates the potential face-threat by positively aligning Mel to the question. Both examples illustrate how carefully the counselor constructs such requests. The counselor describes such questions in the interview:

I think it is really important to say: "I'm wondering whether you've had the opportunity to try any of these things out." I mince my words carefully because I want my intention to come across: "It's ok if you have or you haven't tried it. I'm not expecting you to. I'm not gonna be cross or upset if you haven't, I'm simply wondering whether you had the opportunity." Hopefully, that makes it easier for clients to say: "Actually, no, I've been too busy" or "Well, I tried but it wasn't any good." (Interview)

Clearly, the counselor's attempt to save the clients' face is not only evident in her linguistic choices in my data, but also in her discussion in the interview of how carefully she constructs such *requests for information*.

## 7.4 Summary

In this chapter, I aimed to shed light on the four most frequently used discursive moves with regards to their syntactic and lexical realization as well as the sub-functions that they aim to fulfil. I have presented the results of the clients' and the counselor's utilization of discursive moves. Moreover, I have continuously highlighted how the linguistic realization influences the construction of the interactants' identities, the therapeutic alliance and the improvement of the clients' well-being.

*Problem statements*, which are only employed by the clients, often serve to position the clients as authentic and legitimate advice-seekers. The lexical analysis revealed that *problem statements* contain lexical choices that previous studies of advisory practices have also pointed out, such as a clear preference for self-orientation in person reference (Locher 2006; Morrow 2006; Harvey 2013) and a broad range of emotional expressions (Morrow 2006; Ochs and Capps 2001). I found a clear absence of lexical choices that are overtly connected to an advice-seeking activity (such as *advice*, *seek*, or *help*). The clients realize *problem statements* overwhelmingly with declaratives, whereas previous studies (Locher 2006; Morrow 2006; Placencia 2012; Rudolf von Rohr 2018) have shown that advice-seekers in other practices regularly realize problem messages or advice-seeking text passages in interrogative form or even use the discursive move *request for advice*. This finding foregrounds the "talking cure" aspect of counseling (see e.g. Launer 2005: 465; Peräkylä et al. 2008: 5). The counselor corroborates this

interpretation in the interview when she says that the clients' *best hopes* are *to be heard*.

The functional analysis revealed that *problem statements* mainly fulfill three functions. First, *problem statements* can be used to 'introduce a problem' and often include a presentation of the issue that troubles the clients. Second, *problem statements* can function as 'confirmations of problems'. These confirmations generally follow the counselor's identification and verbalization of a troubling issue that the clients had not overtly stated before. Third, *problem statements* are used to report on the 'application of a coping technique'. These *problem statements* stand out with regard to identity construction in that they encompass the clients' positionings as active albeit unsuccessful applicers of coping techniques. Overall, *problem statements* generally position the clients as in need of the counselor's support.

I have shown in previous chapters that the clients shift from stating problems to assessing their experiences, strengths, and so on. It is not surprising, then, that the clients realize the discursive move *assessment* in declarative form. The lexical analysis revealed in various ways that the clients adopt a more balanced attitude and perspective when they address their troubles in *assessments*. This shift is distinctly realized in two specific ways. First, in the clients' *assessments*, there is a clear decrease of attitudinal verbs in comparison to the clients' *problem statements*. The clients also use cognitive mental verbs more frequently in *assessments* than in *problem statements*. As Locher et al. (2015b) have argued, verbs such as *feel* (and, I would add, *think*) can index self-



reflection. Second, the diversification of emotional adjectives towards more positive stances reveals that the clients begin to focus less on their negative experiences and attitudes.

The functional analysis of the *assessments* used by the clients also revealed one particularity that seems to be specific to institutionalized discourse. The clients explicitly talk about the usefulness of suggested coping techniques via constructions such as (specific technique) + *help me*, which acknowledges that they have applied the suggested advice. This explicit acknowledgement stands in contrast to findings from advisory peer-to-peer practices in which such open confirmations of advice application was absent (Morrow 2006; Rudolf von Rohr 2018). Social factors such as the private, one-to-one, and professional-lay participation structure (Herring 2007) might facilitate such advice acknowledgements.

In their *assessments*, however, the clients do not regularly position the counselor as the source of their improvement. Instead, they foreground the usefulness of the coping techniques. To credit the techniques rather than the counselor's input for their own progress helps the clients to see themselves as the agents of their improved well-being. This facilitates lasting change in the clients, who thus start to see and position themselves as active self-helpers. Overall, the clients use *assessments* to share a more positive evaluation of their experiences and their well-being. In their *assessments*, the clients position themselves as active appliers of coping techniques or even as active self-helpers.

Of the four most frequent discursive moves, the counselor uses three: *assessments*, *advice-giving* moves and *requests for information*. The counselor's *assessments* usually follow either the clients' *problem statements* or the clients' *assessments*. Like the clients, the counselor mainly realizes *assessments* in declarative form. Although person reference reflects the clear client-orientation mentioned above, the use of first and second person pronouns marks the dialogic and conversational nature of counseling (Biber et al. 2007; Morrow 2006).

Further, I have found clear connections between specific functions of the counselor's *assessments* and their lexical realizations. For example, *assessments* that formulate or normalize the clients' input attempt to signal the counselor's comprehension of the clients and their struggles. In addition, the counselor uses these *assessments* to acknowledge that the clients are experiencing authentic and common reactions. Constructions such as *I can hear* or *I get the sense* reflect the counselor's intent to demonstrate her understanding and to take clients and their troubles seriously. Formulations often foreground specific issues the counselor wants to work on (see e.g. Antaki 2008; Bercelli et al. 2008a; Fitzgerald and Leudar 2012; Stommel and van der Houwen 2013). Normalization focuses on assuring clients that certain reactions are common (Placencia 2012; Rudolf von Rohr 2018). Importantly, the counselor refrains from deproblematizing the clients' troubles. This is in contrast to findings from some peer-to-peer interactions in advisory contexts (see e.g. Placencia 2012).

These two functions of the counselor's *assessments* are especially salient in the recognition and legitimization of the clients' positioning as authentic advice-seekers. The counselor regularly concludes such *assessments* with positive evaluations of clients' strengths or their willingness to learn to cope with their troubles. This is indicative of the solution-focused approach the counselor employs (Bannink 2007; DeShazer and Berg 1997; Gingerich and Wabeke 2001; Kim 2008). In addition, the counselor attempts to align the clients with the advice that usually follows such *assessments*.

Moreover, the counselor also uses *assessments* to affirm the clients' application of coping techniques and their overall progress. These *assessments* are characterized by the counselor's extensive work to foreground positive attributes and characteristics of the clients and their experiences. Again, this is highly salient as it shows that the counselor not only states that she applies solution-focused therapy, but that this application is also visible in the linguistic data. For example, the counselor uses stance lexemes to highlight the strengths and the coping techniques that the clients possess. These two functions (affirming the clients' application of coping techniques and affirming the clients' progress) aim to position the clients as active self-helpers and to encourage further progress.

I have also closely analyzed the discursive move *advice-giving*, which is only used by the counselor. She carefully crafts *advice-giving* moves to facilitate the uptake of the advice. She does so by taking the clients' face concerns into account. *Advice-giving* moves are realized in

declarative and imperative form. Other studies have also found that advice is realized in declarative and imperative form. It seems that the distribution of declaratives and imperatives in advice is specific to the social practice in which the advice occurs. For example, Hampel's (2015) study of a celebrity Facebook page revealed that around 85 percent of advice on that page is realized as imperatives. Locher (2006) reported that around 50 percent of *advice-giving* moves were realized as declaratives in *Lucy Answers*, i.e., in institutionalized discourse. Locher's results resemble the present study's results the most in that around half of the sentences in *advice-giving* moves are realized in declarative form (percentages of imperatives are slightly higher in Locher's study, however).

In my corpus, the declaratives and imperatives in *advice-giving* moves can be loosely assigned to specific functions that this move aims to fulfil. The three functions 'advice to introspect', 'advice to act', and 'suggestions of coping techniques' are mainly realized in declarative form. The other three functions ('coping-technique specific advice', 'meta-advice about coping techniques', and 'affirmation to continue to progress') are realized differently to varying degrees. The counselor uses declaratives as well as imperatives to deliver 'meta-advice' in which she often reminds the clients to use advice she previously provided. The functions 'coping-technique specific advice' and 'affirmation to continue to progress' are often realized as imperatives. Coping-technique specific advice is usually framed with preceding and following moves that mitigate the potential face-threat of advice. This allows

the counselor to give clear and direct advice in imperative form. In ‘affirmations to continue to progress’, the counselor positions the clients as active self-helpers and encourages them to continue in the same way they have so far, rendering mitigation redundant.

Further, specific lexical choices foreground the clients’ abilities, such as the constructions *you can*, *you will*, and *keep on*. Such constructions were also found in other studies (Locher 2006; Rudolf von Rohr 2018). Ultimately, the counselor uses *advice-giving* moves not just to give advice, but also to position the clients as prospective or even current self-helpers and active applicers of coping techniques who will succeed. It is noteworthy that the counselor invests extensive work in all *advice-giving* moves to not position herself as the explicit source of advice. Instead, she foregrounds the clients as recipients and beneficiaries of the advice and as capable human beings.

Last but not least, the counselor’s *requests for information* position the clients as active participants in the therapeutic alliance. While many *requests for information* are realized through interrogatives, some are also realized in declarative form. Many declaratives are realized through the pattern *I WONDER* + (post-predicate), which allows the counselor to pose questions in indirect and mitigated form (Biber et al. 2007; Locher 2006; Morrow 2006). Whereas the counselor’s role as advice-giver is not foregrounded in *advice-giving* moves, she emphasizes her position as inquirer and as future recipient of the clients’ input in her *requests for information*. The mental verbs *feel* and *think* occur frequently (especially collocating with second person pronouns) and

are used to invite the clients to participate in the discussion and share more information. These verbs are further employed to trigger the clients' self-reflection and to encourage them to contribute their own solutions to their problems (Silverman 1997).

Functional sub-categories of the discursive move *request for information* can be clearly differentiated in relation to three dimensions: first, to ease comprehension for both participants (the functions 'improving the counselor's comprehension' and 'ensuring clients' comprehension'); second, to inquire about advice that was previously given or to provide advice in interrogative form ('inquiring about readiness to apply advice', 'suggesting reflection', and 'requesting coping-technique specific information'); and third, to ask about progress ('inquiries about progress'). Despite the different functions of this move, the counselor uses all her requests to engage the clients in the therapeutic process and the therapeutic alliance.

These syntactic, lexical and functional results of the linguistic realization of the four most frequent discursive moves reveal that both the clients and the counselor invest extensive work in establishing, negotiating and maintaining the collaborative work that helps the clients to improve their well-being.

## **PART III**

## **Chapter 8 Narratives and Transforming Identities**

### **8.1 Introduction: From a Working Definition to Theory and the Research Questions**

According to Capps and Ochs (1995: 173), “when people seek therapy, they have a story to tell.” The clients in my corpus report on their troubles and often aim to better manage them. Often, these reports of troubles take the shape of narratives, in which clients not only report on an event but also position themselves in specific ways and perform important relational work. Taylor, for example, reports on how she had to give a presentation at work:

- (8.1) Taylor (Thread: Taylor; Entry 9)  
I had a presentation the other week, and it went so badly, as soon as everyone was looking at me I just messed it up so much, it was really embarrassing, I really didn't want to go to work for the next few days out of sheer shame, I left early because I was upset. I think that was a real kick in the teeth because I felt as if it was a chance to show I was hard working and educated, and that I was capable and deserving of working in that environment.

The aim of the present chapter is to shed light on the relational work that is carried out through and around the narratives that the interlocutors produce. Chapter 2 has shown that the analysis of narratives is an important issue in each of the three research fields of my study. In linguistics, there is a long-standing tradition of analyzing narratives. Many comprehensive reviews on narratives (see e.g. Bamberg 2007, 2013; De



Fina and Georgakopoulou 2012; Ochs and Capps 2001; Johnstone 2001) have highlighted research on such issues as degrees of narrativity, the communicative functions of narratives, the co-construction of narratives by two or more co-tellers, or the construction of identities through narratives.

In a health context, the narrative turn (see e.g. Gygax and Locher 2015) led to an increase in narrative analysis. Research on narrative medicine (see e.g. Charon 2006, 2014; Greenhalgh and Hurwitz 1999; Gygax and Locher 2015; Hamilton and Chou 2014) has foregrounded the importance of narrative competence for good healthcare. Key concepts include patient empowerment (Lucius-Hoene 2008) and empathy (Locher 2015). Narratives have also garnered much attention as a tool to make sense of health experiences (Gygax 2015; Kern-Stähler and Thiemann 2015). More specifically, in mental health discourse, Labov and Fanshel (1977) looked at structural features of narratives in psychotherapeutic sessions. Capps and Ochs' (1995) work on agoraphobia shows how narrative patterns can feed a mental illness. Similarly, Boothe (2015: 74) has argued that narratives are used to “enact and perform [mental] illness.” Further work by Kemp (2003) and Karp (1993, 1996) illustrates how subjective experiences of mental illness are described by patients. And Bercelli et al. (2008b) conducted a conversation-analytic study to examine the placement of narratives within psychotherapy sessions.

The analysis of narratives occurring online has also flourished (Dayter 2015; Dayter and Mühleisen 2016; De Fina 2016; Georgako-

poulou 2004, 2007, 2013, 2016; Hoffman 2010; Page 2012; Page and Thomas 2011). Two points are especially noteworthy. First, online narratives have prompted researchers to broaden their definition of narratives to include small stories (Bamberg and Georgakopoulou 2008; Georgakopoulou 2007, 2013) or even tiny stories (Bolander and Locher 2015; Dayter 2015). Second, online narratives have stimulated further research on the performance of identity, with such issues as gender (Page 2012), ethnicity (Heyd 2016) or authenticity (Mühleisen 2016) given prominence. Online narratives have also been researched in a range of contexts (e.g. on Twitter (Dayter 2015), blogs (Page 2012), web forums (Lindholm 2017), or in Web 2.0 (Page 2017)).

Online health or illness narratives have often been analyzed with a focus on how they are used to elicit or give advice. Kouper (2010) called attention to how problems can be conceptualized as narratives in order to solicit advice in the posts of a LiveJournal.com community centered around childrearing. A number of studies have looked at how narratives can be used to give indirect advice when advice-seekers and -givers are peers (see e.g. Anderson 2017; Armstrong et al. 2011; Hamilton 1998; Harrison and Barlow 2009; Lindholm 2010, 2017; Richardson 2003; Rudolf von Rohr 2018; Thurnherr et al. 2016). A recurrent focus of these studies is how narratives can be used to construct an expert identity that has the authenticity and legitimacy to give advice, as well as how to display empathy through narratives. However, more research is still called for to explain how narratives can be used to create interpersonal effects online (see e.g. Bamberg 2013: 3; De Fina and

Georgakopoulou 2012: 121; Lindholm 2017: 27). Additionally, online narratives in a mental health context have also not received much attention (Thurnherr et al. 2016). I will thus address how clients in my corpus use narratives to generate interpersonal effects.

An important point to note is that the present chapter does not aim to provide a definition or broader understanding of narratives as a text type. My analysis aims to explore, as Boothe (2015: 73) puts it, “how ... narratives in the [counseling] context are related to interpersonal dynamics and [the] curative potential of the [therapeutic alliance].” I want to spotlight how narratives are used as a tool to position interactants in specific ways and how the work in the therapeutic alliance facilitates a transformation in the clients. My analysis will reveal that the collaborative work (or in the words of Ochs and Capps (2001: 7) “the dialogic activity”) that the interactants exercise in and around the narratives is instrumental for the clients’ transformation.

As there is no clear agreed-upon definition of narrative (see e.g. De Fina and Georgakopoulou 2012; Gygas and Locher 2015; Ochs and Capps 2001), I used four criteria to identify text passages as narratives. These four points also establish a working definition of personal narratives as it applies to my study: (1) personal narratives are used to share a “reportable event” (Labov 1997: 398) through a personal voice, (2) narratives are embedded in social practices and exhibit different degrees of narrativity, (3) narratives are a means of making sense of the world and are a communicative process through which identities are

discursively constructed, and (4) narratives are used to construct a sense of self.

First, “there is a general agreement ... that a narrative must ‘involve the recounting of an event or events’ (Hawthorne, 2000, p. 225)” as Gygas and Locher (2015: 2) put it in their edited volume *Narrative Matters in Medical Practice across Disciplines*. However, I do not only include fully-fledged Labovian narratives, but also small stories and tiny stories (see below).

Second, Ochs and Capps (2001) argue that narratives are on a continuum of embeddedness, ranging from quite detached to highly embedded narratives. In my corpus, though, narratives are highly embedded in the counseling activity. As Ochs and Capps (2001: 37) explain, embedded narratives “are thematically relevant to a topic under discussion or activity underway.” They add that embedded narratives are “thematically and rhetorically organized by the earlier narrative(s)” (ibid.: 39) and are not only “intertwined ... with other forms of discourse” (ibid.: 40), but can also help “[tellers] to look at prior narratives from a new perspective” (ibid.: 39).

A related aspect is that of narrativity, which De Fina and Georgakopoulou (2012: 8) define “as the property that defines the difference between a narrative and a non-narrative” (see e.g. also Carranza 1998; Ochs and Capps 2001; Page 2012). De Fina and Georgakopoulou (2012) add that narrativity should be seen as a “scalar predicate” (ibid.: 9) ranging from “high [to] low narrativity” (ibid.: 9). The former means a text passage is very narrative-like while the latter is less narrative-

like. In other words, a narrative that exhibits high narrativity can be seen as the fully-fledged narratives that Labov and Waletzky (1967) and Labov (1997, 2013) have analyzed; they contain abstract, orientation, complicating action, evaluation, resolution and coda. Many of the narratives in my corpus are not of this kind, but fit the description of small or tiny stories (Dayter 2015; Georgakopoulou 2007). Georgakopoulou (2007: 148) uses the label of small stories for “a whole range of underrepresented narrative activities ranging from literally small and fragmented tellings to refusals to tell and deferrals of telling.” Dayter (2015: 20) defines a tiny story as “a low-tellable, undersized report of experience that contains no resolution.” The high embeddedness and the low narrativity of narratives in my corpus make it difficult to distinguish narratives from other text passages. I have therefore paid special attention to whether a reportable event was recounted when identifying narratives.

Third, narratives help people to make sense of the world and are used to construct identities. Klapproth (2004: 103) argues that “narratives are a means of structuring and processing personal human experience.” Boothe (2015: 78) sees this as important in psychotherapy, where clients can move towards a more balanced view of their life or mental health struggles “by telling and retelling their story to an attentive and compassionate listener until it has become a coherent narrative.” Making sense of one’s experiences is closely connected to the construction of one’s identity. Narratives are a communicative process in which identities are created (De Fina and Georgakopoulou 2012: 24).

From a constructionist perspective (see Chapter 2), narratives can be used to position oneself and others in various ways, both in the story world and in the ongoing interaction between teller and listeners (De Fina and Georgakopoulou 2012: 167).

Finally, Bamberg et al. (2012: 180) argue that narratives are used to “construct a sense of continuous self – one that fuses past and future orientation into one’s present identity.” This aspect is highly relevant for the interactants in the email counseling exchanges. Clients move between aspects of “constancy” and “change” (Bamberg et al. 2012: 180). At first, they aim to portray themselves as advice-seekers who have been suffering for quite some time due to their mental struggles – this is a depiction of constancy. Likewise, clients undergo a change during the counseling process, and (hopefully) move from an advice-seeker towards an active self-helper identity – this is an indication of change. The process of negotiating constancy and change is especially notable when comparing narrative text passages from the beginning to the end of the counseling process. We have stated elsewhere that this “transformation of the self is one of the key aims” (Thurnherr et al. 2016: 452) in counseling. In my analysis, I pay special attention to this transformation and how it is facilitated through narratives.

A final point I want to highlight is that I focus on narratives that are told in a personal voice. In other words, I have chosen to focus on narratives that report on an event that the teller has experienced. This necessarily excludes such narratives as anecdotes or hypothetical stories that the counselor might suggest. Since I am interested in the

transformation of the identities of the clients, this distinction has helped my analysis to reveal this transformation. I aim to answer the following research questions in this chapter:

- What interpersonal functions do the narratives carry out?
- What prototypical types of relational work are used?
- What prototypical types of positionings occur?
- Are there specific interplays of relational work occurring that help transform the clients' identities?

The first question is concerned with the functions of narratives. Ochs and Capps (2001: 37) point to rhetorical functions that narratives can fulfill when they observe that narratives can “illustrate a point, make [a] comparison, support an argument, or otherwise elaborate a focus of concern.” I focus specifically on the interpersonal functions of narratives. The second research question serves to shed light on the prototypical types of relational work that are used to convey interpersonal effects. The third research question then calls attention to how the client and the counselor are typically positioned through and around narratives. And finally, the last research question deals with the interconnectedness of relational strategies, i.e., whether certain types of relational strategies elicit other specific relational strategies.

In Chapter 4, I have outlined the structure of my analyses. Table 8.1 reproduces the overview I presented in that chapter. The analysis of narratives as well as the analyses of the following two chapters are situated in the last research step, the form and function analysis of linguistic expressions, which is highlighted in purple in the table.

Table 8.1 Methodological steps 1 to 3 revisited: Form and function analysis

Type of Analysis	Focus of Analysis
Content analysis of <b>themes</b>	Types Distribution
<b>Discursive moves</b> analysis	Types Distribution Sequence Linguistic realization
<b>Form and function</b> analysis of linguistic expressions	Relational work and positionings

I explained in Chapter 4 that the analysis of linguistic expressions with regards to form and function could not be administered to the entire corpus because it is simply too rich in interpersonal detail. A reading of the five threads, however, has shown that narratives are habitually used by the clients to convey interpersonal effects: clients position themselves in identifiable ways in the narratives. A closer look also revealed that those positionings seemed to follow a specific pattern (which I elaborate on in the results sections of this chapter). I have therefore chosen narratives as one type of linguistic expressions that can be analyzed with regards to function and form. For Locher (2006), interpersonal effects always need to be considered within their context. I account for this context by examining which themes and discursive moves the narratives occur in.

The current chapter is structured as follows: in Section 8.2, I provide an overview of where in the composition of the email threads the narratives occur. In other words, I will identify which themes the narratives occur in, and I will show which discursive moves the narratives are employed in and in which entries of a thread such narratives occur.



Section 8.3 focuses on the interpersonal functions of the narratives in the threads. I will explain each function and what kind of relational work and positionings they are linked to. Additionally, I will identify the previous and subsequent context in which the narratives occur. Section 8.4 provides a summary of the findings.

## **8.2 Narratives in Themes, Discursive Moves and Entries**

Overall, 105 text passages can be identified as personal narratives<sup>23</sup>. All of the 105 personal narratives were produced by the clients. As we have already noted elsewhere (Thurnherr et al. 2016: 455; see also Green 2010: 6), due to best practice guidelines in counseling, counselors do not share personal information, which includes personal narratives. Table 8.2 (next page) shows in which themes the identified narratives occur. The results are in line with the patterns I have found in Chapter 6 with regards to the distribution of themes overall: the themes ‘anxiety’, ‘depression’, ‘relationships’, ‘self-esteem’ and ‘stress’ occur more frequently than the other themes in the overall corpus. Overall, it is noteworthy that all of the five clients use personal narratives and that narratives appear in almost all of the themes. Nevertheless, most of the 105 narratives occur in the five most frequent themes in the corpus: ‘anxiety’, ‘depression’, ‘relationships’, ‘self-esteem’ and ‘stress’.

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<sup>23</sup> I coded the narratives in the entire corpus twice with considerable time between the two coding cycles. Retest reliability resulted in 89% agreement (93 out of the 105 narratives found initially were coded as narratives in the retest cycle). After careful consideration of each narrative found in the two coding cycles, I decided to examine all 105 narratives found in the first cycle.

Table 8.2 Narratives distributed across threads and themes

Theme →												Total	
	Abuse	Anxiety	Depression	Health issues	Loneliness	Open	Others' health	Panic attacks	Relationships	Self-esteem	Sexuality		Stress
Client ↓													
Anna		11						2				5	18
Ellie									9			1	10
Chris			14	9							3	1	27
Mel	4			6	1		1		12	5			29
Taylor			3	4					9	5			21
Total	4	28	19	1			1	2	30	13	1	6	105

Narratives are used in two types of discursive moves: *problem statements* and *assessments* (Table 8.3).

Table 8.3 Narratives according to thread and discursive move

Discursive move →			
	Problem statement	Assessment	Total
Client ↓			
Anna	11	8	19
Ellie	4	6	10
Chris	11	16	27
Mel	19	10	29
Taylor	14	7	21
Total	59	47	106*

\* The total amounts to 106 as one narrative contains a *problem statement* and an *assessment*.

Out of the 105 narratives, 58 appear within a *problem statement* and 46 within an *assessment*. One narrative (written by Anna) contains a *problem statement* and an *assessment*. This explains why there are 106

narratives in total (59 narratives in a *problem statement* and 47 narratives in an *assessment*). While there is a slight preference for narratives to occur within *problem statements*, it is interesting that clients use narratives in *assessments* as well. Yet, there are individual differences between the clients. Anna, Mel and Taylor use narratives more often in *problem statements* than *assessments*. In contrast, Ellie and Chris utilize narratives more often in *assessments*.

Table 8.4 (shown on next page) reveals that narratives are found throughout the entire threads. Only Mel (third session) and Taylor (second session) do not use narratives in each session. This reflects the pervasiveness of narratives in clients' texts. In general, narratives that occur in *problem statements* are used in early sessions of the counseling process, whereas narratives that occur in *assessments* are used more in later sessions. This reflects the finding of Chapter 6 that clients' *problem statements* can be found in early stages, while clients' *assessments* are employed more in the later stages of counseling. There are, however, two exceptions shaded in yellow in Table 8.4. Mel extensively employs narratives in *problem statements* in session 4 (n=7), in which she recounts an argument with her boyfriend. Taylor uses narratives in *problem statements* until the end of her thread. Taylor often inserts "door-handle comments" (Green 2010: 6), in which she adds problematic issues at the end of her entries. I elaborate on this in detail in Chapter 10.

Table 8.4 Location of narratives in threads and discursive moves

Client →	Anna		Ellie		Chris		Mel		Taylor	
	Problem stat.	Assessment	Problem stat.	Assessment	Problem stat.	Assessment	Problem stat.	Assessment	Problem stat.	Assessment
Discursive move →										
Session* ↓										
Session 1	4		2		4		7			
Session 2	6	3	2	2	5	9	4	4	5	
Session 3		3		2	1	4				2
Session 4				2	1	2	7	1	3	1
Session 5						1	1	4	3	3
Session 6							1		3	1
Total	10	6	4	6	11	16	19	10	14	7

\*Areas that are highlighted in grey indicate that these threads did not have a fourth, fifth and/or sixth session.

It is not surprising that all clients use narratives; after all, counseling is known as the “talking cure” (see e.g. Launer 2005 for the origin of this term), and clients need to recount experiences if they wish to deal with them. But it is surprising when compared to previous research that the clients in the present data use a high number of narratives in which they report on events that have a positive valence (these narratives occur mostly in *assessments*). Ochs and Capps (2001) “have been struck by the dearth of narratives that focus on positive life events from start to finish” (ibid.: 145). They explain that clients often recount “unexpected events that are unsettling [and] tend to be sources of some combination of fear, frustration, misunderstanding or confusion, irritation, shame or disapproval, malaise, and sympathy” (ibid.: 146). They add that these “form the emotional nucleus of many narratives of personal experience” (ibid.: 149). The clients in my data use narratives in a more diverse way. This might be influenced by the treatment approach the

counselor utilizes. Solution-focused approaches encourage clients to see the positive side of experiences and aim to foreground the clients' coping skills rather than their troubles (Gingerich and Wabeke 2001: 34-35). The counselor therefore aims to elicit positive stories from clients. Whether a narrative has negative (mostly narratives in *problem statements*) or positive (mostly narratives in *assessments*) valence is also connected to the interpersonal function that the narrative tries to convey.

### 8.3 The Functions of Narratives

While the previous section has identified which themes, discursive moves and sessions the narratives occur in, this section now details the actual form and function of the narratives themselves. The narratives found in my corpus fulfill the following four functions: (1) to seek advice; (2) to support a previously made claim; (3) to show compliance with advice that was given; and (4) to report on progress. These functions are by no means mutually exclusive. On the contrary, narratives often realize more than one function. The functions are also not clear-cut, but overlap at times. This is the case, for example, for the functions of seeking advice and supporting a previous claim. Narratives that occur in *problem statements* sometimes fulfill both of these functions. Additionally, some narratives that comply with advice also report on progress, but they do not need to. It is due to the fuzzy boundaries between the functions and the fact that narratives are multifunctional that the numbers I provide below should be interpreted cautiously. The

numbers indicate how many of the total 105 narratives can be interpreted as fulfilling the function that I discuss. It does not mean that they cannot fulfill another function as well.

### 8.3.1 The Function of Seeking Advice

Clients use narratives to seek advice or support. Importantly, the advice is sought implicitly with narratives rather than by explicitly asking for advice. As we have noted elsewhere (Thurnherr et al. 2016), this is characteristic of the counseling context and might stem from the institutionalized nature of counseling with its assigned roles of advice-seeker (client) and advice-giver (counselor), at least at the beginning of the counseling. The counselor's responses to advice-seeking narratives corroborate this interpretation of implicitness. The counselor regularly provides empathy for the clients and often suggests several ways to deal with the reported troubles.

51 of the 105 narratives in total can be perceived as seeking advice. 43 of these narratives are written within a *problem statement*, while 7 appear in an *assessment* move (see Table 8.5). One of the narratives contains a *problem statement* (hence a total of n=44) and an *assessment* (hence a total of n=8). This clear focus on problems is not surprising since *problem statements* often contain text passages that implicitly seek advice. Nevertheless, it is relevant that eight narratives occur in an *assessment*. As Table 8.5 further shows, there are 33 non-elicited narratives and 18 narratives that are elicited by the counselor. It is notable that the eight narrative passages that occur within an

*assessment* are all elicited by the counselor (I will focus on the elicited narratives in the next section as they most often also carry out the function of supporting a previous claim). The advice-seeking narratives are used in a wide range of themes, as can be seen in Table 8.6. The focus is on four specific themes, however: ‘relationships’ (n=17), ‘depression’ (n=11), ‘anxiety’ (n=8), and ‘self-esteem’ (n=8).

*Table 8.5 Number of advice-seeking narratives according to discursive moves*

<b>Narrative</b>	<b>Problem statement</b>	<b>Assessment</b>	<b>Total</b>
Non-elicited	33		33
Elicited	11	8	19
<b>Total</b>	<b>44</b>	<b>8</b>	<b>52</b>

Stress	2
Other’s health	1
Health issues	1
Panic attacks	1
<b>Total</b>	<b>51</b>

*Table 8.6 Number of advice-seeking narratives according to themes*

<b>Theme</b>	<b>Number of narratives</b>
Relationships	17
Depression	11
Anxiety	8
Self-esteem	8
Abuse	2

A wide range of relational strategies are used in the narrative passages in question, but four prototypical ones predominate: 'mitigation', 'boosting', 'appealing for empathy' and 'self-criticism'. Mitigation and boosting (see e.g. Bolander 2013; Locher 2006; Schneider 2010) are frequently used in all four functions. Boosting is used to "intensify or emphasise the force' of an utterance" (Holmes 1995: 76, as cited in Locher 2006: 119). Locher (2006: 141) argues that boosting is not always face-threatening but can also be face-enhancing. Mitigation, or hedging, which can "soften the impact of [a] negative statement" (Tannen 1993: 28), is "a means to express relational work which is geared to protecting the addressee's face" (Locher 2006: 121). Hedging or mitigation played a central role in the advice column Locher studied (Locher 2006: 127-133). Despite the fact that both of these strategies are frequently used in the counseling exchanges, they are not focused on in this chapter specifically, for others are more closely linked to the transformation of clients' identities. Two potentially face-threatening relational strategies are prototypically used in seeking-advice narratives that are linked to this transformation: appealing for empathy and self-criticism. I will explain these strategies and the interpersonal effects they can create in detail in the discussion of the exemplary narratives below.

In the seeking-advice narratives, clients use these relational strategies to position themselves as authentic and legitimate advice-seekers and the counselor as a potential advice-giver. However, many other subtle acts of positioning are performed to construct these identities.



Here, I will discuss three types of positionings that the clients perform by employing narratives that focus on seeking-advice. These three positionings foreground each a specific aspect: an illness career, the urgency of current struggles, and a further need for support. First, clients make clear that they have been suffering from mental health troubles for an extended amount of time. In other words, they depict their struggles as chronic. This persistent struggle legitimizes their role as advice-seekers and establishes their illness career. Second, some narratives claim that clients are struggling more now than ever. They emphasize the urgency of current struggles. Both of these issues are often part of narratives that appear early in the counseling process. At a later stage, a third issue is central: clients position themselves as active participants who comply with the counselor's advice, but who are still struggling to improve their well-being. This makes clear that further support is needed. All three of these issues position the clients as seeking support with their current situations.

### *Illness Career*

First, clients position themselves as sufferers of persistent mental health issues by reporting on their "illness careers" (Boothe 2015: 81). Mel discusses her experience with depression in example (8.2). She talks about two *bad phase[s]* she went through previously and how they are connected to her present emotional state:

(8.2) Mel (Thread: Mel; Entry 1)

I had a particularly bad phase during the second and into the third year of my degree (when I

was 20-21). It took me a while to realise what it was. I then went to my GP who gave me some anti-depressants but I had some nasty side-effects so stopped taking them but didn't go back to my GP, which was a mistake in hindsight. I had another bad phase two or three years ago. I was prescribed antidepressants and stayed on them for over a year. I was much improved by the time I stopped taking them but certainly not 'cured' and it's proving a bit of a battle to not slip back.

In this *problem statement*, Mel's description of her past struggles with depression and the evaluation of her current situation (*battle to not slip back*) aim to implicitly seek support for her *battle* with depression. She appeals for empathy through her explicit negative stance towards these phases (*particularly bad, nasty, mistake, another bad*) and the use of the conceptual metaphor HEALTH IS WAR. For Locher (2006), appealing for empathy is accomplished through "displays [of] emotions, distress and (at times indirectly) appeals to [the advice-giver] for sympathy" (ibid.: 212) and "often seems to be linked with problem statements" (ibid.: 229). Appealing for empathy can be face-threatening for clients, because they position themselves as going through troubles and needing support (Locher 2006; Morrow 2006; Pawelczyk and Erskine 2008). Mel clearly positions herself as having suffered for an extended period of time. In other words, she gives prominence to the constancy (Bamberg et al. 2012: 180) of her negative experience and thus

constructs an authentic and legitimate identity as an advice-seeker who deserves empathy and support.

*Urgency of Current Struggles*

Clients further establish that their struggles have gotten worse in the recent past. In example (8.3), Anna reports on her struggle with panic attacks:

- (8.3) Anna (Thread: Anna; Entry 1)  
I've had what some would describe as panic attacks while I've been here and they've been more frequent in the past month. My heart races, my palms sweat, I can't think at all, and I start to cry, or I find myself unable to talk. This has happened in public and when I'm on my own.

Anna uses an iterative narrative (Boothe 2015; Gülich and Hausendorf 2000) that does not report a single event, but similar recurring events (*panic attacks*). The emotional as well as physical repercussions of those experiences (*heart races, palms sweat, can't think at all*, etc.) are used to appeal for empathy and seek support from the counselor. She explicitly mentions that the panic attacks have become *more frequent* and uses present simple tense to highlight their recurrent and immediate consequences. She adds that these experiences occur *in public and when [she's]/on [her] own*. This further legitimizes her plea for help, as the experiences are having a serious impact on several areas of her life. The urgency, therefore, adds legitimacy to Anna's identity as advice-seeker (Horne and Wiggins 2009; Locher 2006) through its reflection of a change (Bamberg et al. 2012: 180) of Anna's well-being in a negative direction.

#### *Illness Career and Current Urgency Combined*

Chris combines his illness career and the current urgency for support in a narrative that occurs within a *problem statement* about his experience with depression. He positions himself as an experienced struggler with mental health by recounting his past emotional well-being. In a second

step, he positions himself as suffering more now than before, which legitimizes his current need for counseling:

- (8.4) Chris (Thread: Chris; Entry 1)  
Previously, my depression followed a very predictable pattern: I would have no issues at all during the day, and then every single night I would experience severe lows consisting of me being incredibly overcritical of myself and having very self-destructive thoughts which quite often led to very disturbed sleep. However, the light at the end of the tunnel was that I knew deep down that in the morning, I'd feel fine again.  
It no longer follows daily patterns, so I do not experience it every night (just most nights). But there are times where I go to bed feeling very down, and then wake up still feeling very down. The lows have also become more severe. Whilst I still experience the same self-destructive thoughts, I also now wish that I had never existed.

While Mel talked about two specific phases she went through, Chris describes the repetition of a *predictable pattern* of his depression. He uses past simple tense and temporal adverbials such as *during the day* and *every single night* to underline the recurrence of the pattern, i.e., the constancy of his negative experiences. With his emphasis on the emotional and physical (*very disturbed sleep*) repercussions of his struggles, Chris appeals for empathy from the counselor. He compares the earlier pattern of his depression, including the way he was able to

manage it, with the present pattern. This appeal for empathy is reinforced when Chris boosts the negative emotions (*feeling very down, still feeling very down, more severe*) he currently experiences. He indicates that the situation has become worse and unmanageable; that is, he depicts a change in a negative direction. He thus positions himself as in current need of support and simultaneously positions the counselor as a potential advice-giver.

Chris also employs self-criticism when he reveals that he is *incredibly overcritical of himself*. Bolander<sup>24</sup> (2013: 100) defines self-criticism as “unfavourable judgement [or] fault-finding ... towards his/her own appearance, actions, [and] thoughts” (see also Behn-Taran 2014; Locher 2004; Rudolf von Rohr 2018). Self-criticism or blaming oneself is face-threatening because clients deem some of their actions or attributes as inappropriate or unfavorable and often cite how they think they should have acted or felt instead. The self-criticism also positions Chris as an advice-seeker. Chris’ example exemplifies how clients perform an intricate dance between showing constancy (illness career) and change (urgency). On the basis of such an interplay, the clients construct an authentic and legitimate identity as advice-seeker.

I want to briefly show how the counselor reacts to such a narrative before describing the narratives that display a need for further

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<sup>24</sup> Bolander (2013:100) uses the label “criticism self” as a discourse move in her study. As her focus lies on dis/agreements, criticism of self and of others had to be distinguished on a discursive-moves level. In my data, criticism is more clearly on the level of relational work, in that it positions interactants in specific ways.

support. The counselor takes clients' illness careers and the current urgency of their struggles into account when she responds to narratives that seek advice. The counselor's reply to Chris illustrates several typical aspects of such responses. In general, the counselor responds with an *assessment*, in which she expresses her understanding of the clients' troubles. The counselor then often proceeds to provide advice or request further information or a combination thereof. For ease of reading and reference, the counselor's response to Chris' narrative shown above is split up into examples (8.5) to (8.7).

- (8.5) Counselor (Thread: Chris; Entry 2)
- I can hear how tough this is for you Chris, and I get the sense that you feel less in control now the depression is not so predictable. It sounds as if the predictability of it helped you to cope and focus on knowing you would feel better in the morning, shifting the focus a little. Now it sounds as if you feel more helpless to deal with the depression.
- It sounds as if when you are alone, with nothing obvious to distract you, your thoughts become very self-critical and judgemental, which naturally knocks your self-esteem and drags you down. [...]

In these *assessments*, the counselor takes up Chris' long-term struggles in several ways: she explicitly mentions her *aware[ness]* of its enduring nature (*for many years*), she reformulates his struggles, and she references the phases of his depression (*now*, or through past tense). These choices reveal the counselor's understanding of Chris' troubles, and she

thus displays empathy towards him. The relational strategy ‘displaying empathy’ is defined by Locher (2006: 118) as a “display of understanding of a[n advice-seeker’s] situation.”

The counselor also takes into account that Chris is struggling more now than before. She reformulates the lack of predictability of the current pattern of his depression and explains why he managed to cope with the previous pattern more easily (*the predictability of it helped you to cope, knowing you would feel better in the morning*). As a result, she reiterates Chris’ feeling of helplessness and demonstrates her understanding of his current situation and its emotional repercussions. These displays of empathy within an *assessment* are reminiscent of Locher’s (2006: 133) and Rudolf von Rohr’s (2018: 254) findings of such a link between *assessments* and displays of empathy in their data. Through the continuous display of empathy in the *assessments*, the counselor confirms Chris’ legitimacy and positioning as an advice-seeker.

The *assessments* are followed up with a *request for information* of how Chris *cope[d] in the past* with his depression and includes a reference to the *useful* counseling he previously had.

(8.6) Counselor (Thread: Chris; Entry 2)

*I am aware that you have been dealing with your depression for many years, so help me to understand what has helped you to cope in the past, and what you learned from your previous counselling that was useful.*

With her focus on the positive coping mechanisms that Chris might already have in place, the counselor positions Chris as an expert on the



coping techniques he already possesses and emphasizes how he previously managed his depression successfully. This foregrounds a more positive aspect of having an illness career and is typical of the counselor's approach to counseling, i.e., solution-focused therapy (Gingerich and Wabeke 2001: 34-35). Implicitly, this can be seen as praise for how Chris has previously coped with his struggles. Praising was a relational strategy found in Locher's (2006: 118) and Rudolf von Rohr's (2018: 302) studies as well. Locher (2006: 118) defines praise as follows: "the [advice-seeker's] attitudes and actions are highlighted as good." Both Locher (2006: 140) and Rudolf von Rohr (2018: 250) found that praising often occurs in *assessments*. When she offers praise in the *assessment* in example (8.6), the counselor provides Chris with an opportunity to report on his previous success of coping with depression (not shown here), i.e., an opportunity to praise himself. In addition, the counselor also empowers Chris to take charge of his mental health issues and of the coping techniques he already has at his disposal. The counselor ultimately offers Chris an opportunity to position himself as an active self-helper.

Finally, the counselor adds an *advice-giving* move to help Chris cope with self-destructive thoughts and being self-critical.

- (8.7) Counselor (Thread: Chris; Entry 2)  
To help you shift your thoughts at these times  
Chris, you might find it helpful to write a list of  
your achievements and the positive qualities  
that helped you gain these achievements.  
This may feel difficult to do when you are used

to being self-critical, and it is aimed at helping you to build up your self-esteem.

When the counselor suggests that Chris *write a list of [his] achievements and ... positive qualities*, she provides him with an activity he can engage in when he feels worst. The counselor clearly mitigates her suggestion (*you might find it helpful to*) and acknowledges that the application might *feel difficult*. At the same time, she explains how it might help, which encourages Chris to try her suggestion nonetheless (*aimed at helping you to build up your self-esteem*). Encouragement is akin to one feature of Locher's definition of empathizing, namely "re-assurance" (Locher 2006: 118). However, I distinguish the relational strategy 'encouragement' from a display of empathy, as it is used in a different way in my data. Watts and Pietrzak define encouragement as

communicating ... confidence in ... clients; focusing on clients' strengths, assets, and resources; helping clients generate perceptual alternatives for discouraging fictional beliefs, focusing on efforts and progress; and helping clients see the humor in life experiences. (Watts and Pietrzak 2000: 443)

They base their definition on Alfred Adler's (1956: 342) understanding of encouragement, who suggested that "altogether, in every step of the treatment [in therapy or counseling], we must not deviate from the path of encouragement." Solution-focused brief therapy has taken up Adler's suggestion, and encouragement has become one of their main foci in delivering what they call "strength-based counseling" (Kim 2008: 107; see also Chapter 3 for more information). Clearly, the counselor

uses this strategy when focusing on Chris' abilities *to cope in the past* and *[his] achievements and [his] positive qualities*. Rudolf von Rohr (2018: 205) and Placencia (2012: 299) also found that advice-givers often use encouragement to connect with advice recipients. In my data, praise and encouragement are frequently used in close proximity. This combination seems to aim at a more positive outlook on the client's future improvement; as a result, it is an important facilitator of the transformation of clients' identities.

#### *Further Support Needed*

Advice-seeking narratives are also used to demonstrate that clients still need further support at advanced stages in the counseling process. In the following example, Chris recounts (in a *problem statement*) an event (*moving away*) that has negatively impacted his well-being:

- (8.8) Chris (Thread: Chris; Entry 7)  
 I have been struggling quite a lot over the last couple of weeks, which can probably be put down to the move. I was very close to the people I was living with before, so it has been odd moving away from them.

This narrative is part of entry 7, i.e., session 4 of Chris' thread. Chris uses the present perfect progressive (*I have been struggling*) and time adverbials (*last couple of weeks*) to indicate that the negative impact of the reportable event has been enduring. In connection with negative affect (*struggling*) that is boosted lexically (*quite a lot*), Chris thus appeals for empathy. This still positions Chris as a struggling client who

is in need of and entitled to further support even though he has received counseling for three sessions already. In other words, Chris uses this narrative to highlight that he still needs further support at this stage of the counseling and is not ready to end counseling yet.

The counselor responds with an *assessment* that presents a more positive perspective on Chris' troubles:

- (8.9) Counselor (Thread: Chris; Entry 8)  
What feels really positive to hear is that you are being kind to yourself in recognising that you are naturally going to feel increased anxiety when going into a new situation, as well as experiencing the loss of old friendships and familiar places. You understand this process and the need to keep using the techniques, knowing that this rough patch will pass – like the weather, always changing!

The counselor explicitly focuses on the positive side of Chris' narrative. She draws attention to how Chris is showing himself empathy by *being kind to [himself] in recognizing* the reasons for his struggles. This is a marked change in comparison to the self-critical attitude that Chris expressed. The counselor also normalizes (on normalization see e.g. Locher 2006; Miller and Gergen 1998; Placencia 2012) his struggles by explaining them (*naturally, this process*) and praises his self-reflective skills. She encourages Chris by urging him to *keep using the techniques* and predicting improvement (*this rough patch will pass*). While she acknowledges Chris' struggle, the counselor positions him as a progressing client and as having a good understanding of his current

situation. Clearly, she aims to position him as someone who has already undergone a transformation.

To briefly summarize, my analysis confirms previous findings that narratives can be used to seek advice (see e.g. Kouper 2010). Seeking-advice narratives mostly occur within clients' *problem statements*. Clients use these narratives to position themselves as advice-seekers by foregrounding their illness career (Armstrong et al. 2011; Boothe 2015; Leppänen 2005) and the current urgency of their struggles (Locher 2006). To achieve these positionings, clients often use two types of relational work: self-criticism and appealing for empathy. Both of these strategies can create empathic opportunities, i.e., opportunities for the counselor to display empathy. Narratives are therefore tools for "catalysing empathy in [health] encounters" (Harvey and Koteyko 2013: 91).

The counselor responds most often with an *assessment* to such advice-seeking narratives, but follows these *assessments* with *advice-giving* and/or *request for information* moves. At first, the counselor's display of empathy confirms the positioning of the clients as advice-seekers. Locher argues that "'appealing' is in some sense a counterpart to 'empathizing' ... in that it may act as an invitation to the advisor to feel sympathy for the advice-seeker." My findings clearly support Locher's argumentation. Still, the counselor quickly starts to position clients as observers of their own experiences and behavior, as formerly successful copers of their struggles, and as appliers of coping techniques. All in all, the counselor clearly aims to portray clients as improving. I have shown that she accomplishes this with two prototypical

types of relational work: praise and encouragement. Both of these strategies are face-enhancing and were found in previous research on online health practices (Eichhorn 2008; Locher 2006; Placencia 2012; Rudolf von Rohr 2018).

Narratives that aim to seek advice are not always simply put forward by the client, but are specifically elicited by the counselor as well. In all but a few cases, these elicited narratives that seek advice also support a previous claim, as will be discussed in the next section.

### **8.3.2 The Function of Supporting a Previous Claim**

Narratives can be an effective tool to illustrate a previously made claim (see e.g. Lindholm 2010, 2017; Thurnherr et al. 2016). Supporting a previous claim is especially relevant in counseling as the content of the interaction often deals with rather complex and subjective experiences and perceptions. Tellers can add descriptions of their emotions and evaluations in a way that an abstract discussion about a problem cannot. As clients talk about very personal experiences, it is not surprising that they illustrate claims by reporting on personal events. In the present corpus, these stories are often linked to claims that implicitly seek advice. As a result, the narratives often not only support a claim, but also aim to seek further advice. The counselor responds to these narratives in similar ways to the ones that seek advice. She assesses the narrative and may request further information or give advice. The similar responses therefore confirm my interpretation that supporting a claim is often linked to seeking advice.

Out of the 105 narratives, 32 can be categorized as supporting a previous claim. 24 of these narratives can be found within a *problem statement* and 8 within an *assessment*.

Table 8.7 Number of support-a-claim narratives according to discursive moves

Narrative	Problem statement	Assessment	Total
Non-elicited	7		7
Elicited	17	8	25
Total	24	8	32

Table 8.8 Number of support-a-claim narratives according to themes

Theme	Number of narratives
Anxiety	8
Relationships	8
Depression	7
Self-esteem	4
Stress	3
Health issues	1
Panic attacks	1
Total	32

In other words, the focus lies on the clients' troubles. This is relevant, because clients could also support a claim of progress. But overall, the function of supporting a claim overlaps far more often with seeking advice than reporting on progress. Only 3 of the narratives that can be identified as supporting a claim can also be categorized as clearly reporting on progress. This might have to do with the brief treatment phase. While it is necessary to accurately establish the clients' troubles in such a treatment, there might not be enough time at the end of the interaction to extensively discuss progress over several entries. Rather than supporting a previous claim of progress, clients simply report on

progress right away through narratives (see Section 8.3.4). An alternative explanation is that the counselor's frequent requests to provide or share examples facilitates the clients' direct reporting on progress through exemplary narratives. As Table 8.7 further shows, the counselor elicits most narratives that support a claim (n=25). I will thus focus on the elicited narratives in the following discussion of specific examples.

The clients' narratives that support a claim cover a wide variety of themes, as Table 8.8 shows. The focus lies on the five most discussed themes overall: 'anxiety' (n=8), 'relationships' (n=8), 'depression' (n=7), 'self-esteem' (n=4) and 'stress' (n=3). When looking only at the elicited narratives (not shown in the table), there is a clear focus on the three themes 'anxiety' (n=8), 'relationships' (n=7), and 'depression' (n=6). As with the function of seeking advice, this distribution reveals that narratives are not tied to one specific theme.

The relational work performed within the narratives takes several forms. Both mitigation and boosting are employed frequently. In addition, clients appeal for empathy from the counselor and self-criticize their behavior or attitude. In addition, first instances of 'other-criticism' (that is, third-party criticism) and 'bonding' come up as well. The use of these two strategies might be facilitated by the fact that support-a-claim narratives appear more often from the second session onwards. At this stage, clients might already feel safer and more accepted in the therapeutic alliance and therefore feel more at ease with such face-



threatening strategies. I will return to this issue in the discussion of the examples below.

In most narratives that support a claim, clients generally position themselves as advice-seekers. This is not surprising as many of the narratives also aim to seek advice. But in addition, clients also begin to position themselves as experts on their own biography or experiences and as observers of their own behavior. This is even more apparent in the counselor's relational work after the narratives. She also positions the clients as experts and observers. These positionings help to balance the interactants' positions within the therapeutic alliance, because both interactants are positioned as experts, albeit in different ways and areas. Positionings as experts and as observers are only different in nuances. However, I present them here separately as the examples reveal why a distinction is justified.

#### *Experts on their own Biographies*

To begin with, clients position themselves – and are positioned by the counselor – as experts on their own biography (including their troubles, life events, behaviors, and attitudes). In other words, clients are experts on their lifeworld experiences (Hamilton and Chou 2014). Narratives that support previously made claims are excellent avenues to showcase clients' expertise in lifeworld experiences. Examples (8.10) to (8.12) are a sequence between Taylor and the counselor that spans from entry 2 to entry 4. Prior to this exchange, Taylor simply mentioned in one

sentence in entry 1 that she feels *quite down recently* (not shown in the example). The counselor requests more information on this issue.

(8.10) Counselor (Thread: Taylor; Entry 2)

**I notice that you have not been to see your GP, so help me to get a clearer sense of how low you are feeling Taylor. On a scale of 0 (feeling the worst you have ever felt, and suicidal) to 10 (everything is fantastic) where would you put yourself, and what are the reasons for that number?**

The counselor positions Taylor as an important source of information for the therapeutic process (*help me to understand*) and poses a scaling question typical of solution-focused brief therapy (see Chapter 3 or DeShazer and Berg (1997: 123); Iveson (2002: 151); Bannink (2007: 91)). She asks Taylor to share *reasons*, inviting Taylor to actively participate in finding the sources for her low mood. The counselor identifies Taylor as the only person who has access to this vital information and invites her to share it.

Taylor complies with the request and responds with a *problem statement* which contains an elaborate description of her mood(s) and how she experiences them in a narrative.

(8.11) Taylor (Thread: Taylor; Entry 3)

**This is one of the the thing I forgot to include before, I would say generally Im at a 4/5 (so just feeling normal / abit low) sometimesmaybe a 6 (slightly more cheery) but its like sometimes I just getthese crashes, when I hit like 2 (not suicidal) and I'll be sat in my room not being able to sleep and crying and stuff. And it doesn't have to be anything big that causes it, itll be say ill have a day where Im just in**

work all day and I don't really have anyone who I talk with at work, there all older, and maybe itll be a long day and maybe ill get home and ill be sat there feeling abit shitty, and maybe ill burn my dinner or maybe my boyfriend is too busy to talk or something, and its like all this can just pile up into me just being so over upset and I know its not all that reasonable for me to be upset but I just builds up into a massive thing like I guess snowballing into something. But the thing is that I don't have anything to cheer me up in [PLACE], its not like if im feeling shitty I can go see a friend, or go see my boyfriend or my family to take my mind off it, and I don't really know what to do about these escelations. I would say this happens maybe every few weeks?

Taylor uses an iterative narrative to describe *crashes* she goes through. With her detailed descriptions of her personal experiences and emotional reactions (*crying, feeling a bit shitty, being so over upset, feeling shitty*), she positions herself as a struggling client and appeals for empathy from the counselor. At the same time, this information from her lifeworld also positions her as an expert on her own experiences and shows that she has taken a first step towards self-reflection. Still, she does not explicitly present reasons why she feels low at these times, as the counselor asked her to do. Further, she acknowledges that her reactions and emotions *are not all that reasonable*. With this self-criticism, she positions herself as an irrational being during these crashes.

In a very mitigated way (*maybe, or something*), Taylor also implicitly criticizes her boyfriend for being *too busy* when she needs his

support (this also appears in much stronger forms in later entries). Bolder (2013: 100) defines criticism of others as “unfavourable judgement [or] fault-finding ... towards another party’s appearance, actions, [or] thoughts.” The counselor’s previous use of face-enhancing strategies (display of empathy, praise, encouragement (not explicitly shown above)) might have facilitated Taylor’s use of other-criticism, despite its potential threat not only to her boyfriend’s face, but to Taylor’s face as well. While other-criticism can serve, for example, as an in-group marker (e.g. gossiping about a third party can index a close bond between friends), it can also be interpreted as a face-threat to the speaker’s face if interactants, for example, do not agree with the criticism.

The counselor’s response consists of an *assessment* which starts with the counselor thanking Taylor for her response.

- (8.12) Counselor (Thread: Taylor; Entry 4)  
 Thanks for helping me to understand you better Taylor. You explain really well how much you struggle with these crashes, and I get the sense of your frustration at not feeling as if there is a clear reason for feeling this way. It sounds as if things can build up over the day, and the loneliness of being away from your boyfriend and friends naturally exacerbates the low feelings. I’m also aware Taylor, that you have noticed a bit of pattern for these crashes, happening every few weeks.

When she explicitly thanks Taylor, the counselor bonds with her and praises her active participation. ‘Bonding’ as relational work carried out

by the advice-giver is defined by Locher (2006: 119) as “an attempt to establish a connection with the advice-seeker”; it aims to “creat[e] positive rapport.” Locher (2006) found that the advice-seekers in her data did not use bonding extensively, but that the advice-giver did. In contrast, Rudolf von Rohr (2018) found that bonding was used both by professionals on smoking-cessation websites that promote healthy behavior and by peers in smoking-cessation forums. In my data, bonding on the counselor’s part can be seen as part of the active work she invests to establish and maintain the therapeutic alliance.

The counselor further praises Taylor’s self-awareness (*You explain really well, you have noticed*) and thus enhances Taylor’s face. The fact that praising occurs here is especially important since Taylor did not manage to provide reasons for her low mood and thus did not comply with the entirety of the counselor’s initial request. With this combination of bonding and praising, the counselor positions Taylor as an active participant and good observer. Interestingly, Locher (2006: 118) does not mention a combination of bonding and praising in her analysis. However, Locher focused on whether strategies are executed at the same time. We therefore do not know whether bonding and praising were used in close proximity in her data.

Finally, the counselor acknowledges Taylor’s troubling mood pattern (*struggle, frustration, loneliness, low feelings*). Her clear demonstration of her understanding of the vicious cycle in which Taylor finds herself displays empathy towards Taylor. This reaffirms

Taylor's position as an advice-seeker and the counselor's as an advice-giver.

The interaction surrounding the narrative provides an excellent way to construct Taylor's identity as an advice-seeker and an active participant in counseling at the same time. This is salient because it is important that Taylor feels that the counselor acknowledges her struggles and her position as an authentic and legitimate advice-seeker. Only once this is interactionally accomplished will the counselor have a chance to convince Taylor that she can also be an active participant in the therapeutic alliance. This process is what will ultimately facilitate the therapeutic process.

#### *Observer of Behavior*

The second type of positioning that is foregrounded in supporting-a-claim narratives is that of an observer of one's own behavior or attitudes. Examples (8.13) to (8.15) are the continuation of example (8.3), in which Anna reports on panic attacks (see previous section). Example (8.13) is the counselor's response to Anna's description of her panic attacks. Asking about a specific aspect of a previous narrative is a common practice in soliciting further personal narratives in counseling (Bercelli et al. 2008b). The counselor "defines some features of the requested story" (ibid.: 289). In Anna's case, these are coping techniques that she might have applied successfully in the past.

- (8.13) Counselor (Thread: Anna; Entry 2)  
That certainly sounds like panic attacks Anna, and I'm aware of how frightening they can be,

especially when you are away from home and the comfort and support of your family, boyfriend and friends. *Help me to understand what you have done in these situations to help get through the panic? Maybe there are some things you have done in the past to cope with anxiety, or learnt in previous counselling that could be useful.*

In an *assessment*, the counselor confirms Anna's experiences as panic attacks and displays empathy (*I'm aware of how frightening ...*). This is followed by a *request for information* asking Anna *what [she has] done in these situations*. The counselor provides an opportunity for Anna to share examples in which she managed to overcome panic attacks and develop her own solutions. In other words, the counselor positions Anna as an expert on her experiences with panic attacks and as a potential expert on coping techniques. In this way, the counselor tries to "shape the direction of [a future] narrative ... by eliciting a particular narrative component" (Ochs and Capps 2001: 175), namely the coping techniques Anna already has in place.

Anna responds with a *problem statement* and an *assessment* shown in example (8.14).

- (8.14) Anna (Thread: Anna; Entry 5)  
 If I'm having a panic attack, I will just try to breathe slowly and drink some water and to try to think positively, but this doesn't always work, because sometimes I become so focused on what I'm panicking about that I can't do anything but panic. I did a course of CBT when I was about 18 for anorexia (I

also had a few problems with anxiety at the time - I guess eating disorders and anxiety go hand-in-hand). My CBT counsellor said I would find making lists helpful - and it really did help, back then - writing everything down made me realise how ridiculous my fears were. I still find that making lists helps me to calm down, so there's one thing that I can do to deal with it. Rating things on a 1-5 scale of how serious they are and how likely they are to actually affect me, that kind of thing.

In the first paragraph (the *problem statement*), Anna explains her usual coping techniques in an iterative narrative. Anna positions herself as an observer of her own behavior. Having said that, she focuses extensively on what does not work (*doesn't always work, can't do anything but panic*). This amounts to an appeal for support and empathy from the counselor. She further recounts her struggles with an eating disorder and that she attended counseling for it. These choices still position Anna as an advice-seeker, including the more subtle positionings discussed above (such as having an illness career and the current urgency).

However, in the second paragraph (the *assessment*), Anna talks about what she has learnt in previous counseling with a different counselor (*making lists, writing everything down*). By trying to find solutions for her struggles, she actively contributes to the therapeutic process. She thus positions herself as an expert on the specific coping technique and implicitly praises her former success.

The counselor responds with an *assessment* in which she praises Anna's *self-awareness* and her suggestion of the coping technique.



(8.15) Counselor (Thread: Anna; Entry 6)

It sounds like you have really good self-awareness Anna, and clearly your previous counselling helped, especially as you remember and still use the techniques you learnt then. I can hear how list making helps you to occupy your mind so it focuses away from the panic. Yes rating your anxiety can help get a handle on it and recognise when it is subsiding. It can be helpful to think of our emotions as like the weather, always changing and sometimes unpredictable! No feeling is static or here for good, it *will* pass, and as you know, we can help unpleasant one pass by focusing away from them.

At first, the counselor praises Anna (*really good self-awareness, you remember and still use the techniques, as you know* etc.) and thus endorses Anna's identity as an active participant who provides good observations and solutions. She further bonds with Anna by agreeing with her (*Yes*). The counselor then discusses why the suggested technique works for Anna. She reaffirms the usefulness of the technique (*can help get a handle on it*) and indirectly praises Anna's suggestion further. The continued praise of both the technique and Anna clearly aims to position Anna as an active self-helper – and succeeds in doing so. All in all, Anna thus becomes much more involved as an active participant in the therapeutic alliance than if the counselor simply suggested a new coping technique.

In summary, support-a-claim narratives can be looked at in three phases: the elicitation phase, the actual narrative, and the response.

First, in the elicitation phase, the counselor often uses *requests for information* that aim to position clients as experts on their own biographies and experiences and as observers of their own behavior. The counselor uses only mitigated praise in such instances. Second, when clients respond to such elicitations with a narrative, they frequently use *problem statements* and only a few *assessments* to support a claim. While the clients confirm the counselor's suggested positionings as experts and observers of their own behavior and experiences, they also tend to reaffirm their identity as advice-seekers. They do so through the use of specific types of relational work: appealing for empathy as well as self- and other-criticism. As these narratives occur in entries three or later, clients also start to use another type of relational work: bonding. This type of relational work is used to create positive rapport with the counselor.

In the third stage, the counselor mostly responds to such narratives with *assessments* before turning to other discursive moves as well. The counselor carefully takes the positionings of the clients into account and further positions them with a carefully crafted use of different types of relational work: displays of empathy, bonding, praising and encouragement. The counselor thus manages to position clients in a variety of ways: as advice-seekers, astute observers of their own behavior, applicers of coping techniques, and active participants in the therapeutic alliance. Importantly, the counselor's relational work aims to move the clients towards an identity as an active self-helper. That is, it is the interactive exchange between the clients and the counselor that facilitates

the clients' move towards better mental health. The narratives that support a previous claim may initially emphasize constancy, in the sense of a reaffirmation of advice-seeker identities. Nevertheless, the counselor's clever constructions in the elicitations of and the responses to narratives facilitate a shift from an initial advice-seeker identity towards an active self-helper identity.

What is common to both of these functions (seeking advice and supporting a previous claim) is that the narratives often position clients as advice-seekers. As I have suggested earlier, clients could also position themselves as advice-seekers by explicitly asking for advice. Instead, my analysis has shown that narratives are used very readily by clients to position themselves as advice-seekers. In the interview, the counselor provides her view of why narratives are so pervasive early on during the counseling process:

Clients see counseling as a place where they can talk about their problems. People see it less as a place to ask for specific advice. When I ask clients what they would like to achieve in counseling, often they say just to talk about their problems, to get everything out and importantly to be heard. (Interview)

Central to the counselor's statement is the implied reference to the "talking cure" (Launer 2005) and that clients are aware of it when they come to counseling. As a result, the clients in my data use narratives pervasively right from the start of the counseling exchanges. They also volunteer narratives themselves and respond to elicitations from the counselor with narratives. They know that counseling is a place where

they can share their stories. However, the counselor also connects the clients' eagerness to tell their stories to the medium of email.

There is something about the email that when people start typing, it just flows without them really thinking or constructing their stories with a clear plan. I believe there is a process of getting the thoughts and feelings out and a felt need to explain especially in early sessions what they want me to hear and understand about their life stories. It really is a process of once you start typing, it is just flowing out. (Interview)

This process of writing about troubles has elsewhere been labelled the "writing cur[e]" (Bolton 2004: 1, emphasis removed). Bolton et al. (2004) looked at how writing can help clients make sense of their traumatic and troubling experiences. Ochs and Capps (2001: 114) also concisely summarize a need to tell a story when they say "we may recognize that we need others' input to adequately comprehend experience." In the context of email counseling, then, the writing of the emails themselves can help clients make sense of their personal and troubling experiences and move towards a more positive outlook on them. This is evident in the next two functions that narratives can fulfill.

### **8.3.3 The Function of Showing Compliance with Advice**

The third function that narratives can fulfill is to demonstrate that clients complied with the advice the counselor has previously given to them. Showing compliance has been researched in several different contexts: Morrow (2006), for example, found that peers in a forum on

depression did not reply to advice with an indication of their compliance. Rather, they simply thanked the advice-giver for the advice. In contrast, Harrison and Barlow (2009) report that peers in a self-management program for arthritis readily showed that they complied with the advice given to them. In my corpus, clients frequently show that they complied with the counselor's advice. One way of doing so is through the use of narratives. These narratives are highly salient for the interaction: the counselor receives feedback about **whether** the clients applied her suggestions, she learns **how** the clients applied the advice, and she discovers whether the clients were **successful**. The counselor needs this information to be able to respond appropriately to the clients' progress or lack thereof. The question of success also explains why this function often overlaps with other functions. In case the application was not successful, the overlap often occurs with the function of seeking advice. If the application was successful, clients often simultaneously report on progress (the last function I will discuss in the next section).

39 of the 105 narratives can be interpreted as showing compliance with advice. As Table 8.9 reveals, most of these narratives are elicited by the counselor (34 out of 39). This is not surprising since the counselor often asks clients to share their understanding of given advice or to share examples or their opinion about suggested coping techniques.

In contrast to the previous two functions I discussed, the narratives that show compliance are more often recounted in *assessments* (n= 29), as only ten of the narratives appear within a *problem statement*.

*Table 8.9 Number of showing-compliance-with-advice narratives according to discursive moves*

<b>Narrative</b>	<b>Problem statement</b>	<b>Assessment</b>	<b>Total</b>
Non-elicited	3	2	5
Elicited	7	27	34
<b>Total</b>	<b>10</b>	<b>29</b>	<b>39</b>

*Table 8.10 Number of showing-compliance-with-advice narratives according to themes*

<b>Theme</b>	<b>Number of narratives</b>
Anxiety	16
Relationships	8
Self-esteem	7
Depression	5
Stress	2
Sexuality	1
<b>Total</b>	<b>39</b>

While the narrative passages that show compliance still cover a broad range of topics, the focus is much more clearly on themes in which the counselor provides extensive advice: ‘anxiety’ (n=16) and ‘self-esteem’ (n=7). In addition, eight narratives that show compliance with advice also occur in the theme ‘relationships’.

At first glance, the function of showing compliance might seem to reaffirm the identities of advice-seeker and advice-giver for client and counselor respectively: the counselor gives advice, and the clients receive and confirm that they follow the advice. But as I already mentioned at the beginning of this section, the interaction results in a more complex pattern of relational work and positionings. It cannot be argued that clients are positioned as complying with the advice given. Depending on the outcome of the application, several different opportunities

for the use of relational work and positionings present themselves. Two very prototypical types of positionings are an unsuccessful applier of advice (implicitly still indexing an overall identity as an advice-seeker) and a successful applier of advice (implicitly moving towards an identity as an active self-helper).

Clients use several types of relational work to position themselves and the counselor in these narratives. Boosting and mitigation are frequently used and are not particularly linked to a specific type of positioning. The use of the other types of relational work is clearly linked to whether the application of the advice was successful or not. In accounts of unsuccessful applications, clients appeal for empathy and often criticize themselves. Both of these types of relational work were also used in the narratives that occur in the two functions I previously discussed. In addition, the clients also criticize the suggested coping techniques. The criticism of coping techniques rather than of the counselor has important interpersonal consequences that I will elaborate on in the discussion of the examples below. In accounts of successful applications of advice, rather different types of relational work are used. Clients praise themselves for their progress and praise the techniques that were suggested to them. On rare occasions, the counselor is also explicitly praised. As most narratives in the function of showing compliance with advice are elicited, my analysis will again focus on elicited narratives.

*Unsuccessful Applier of Advice*

Clients can show compliance with advice despite not having managed to apply it successfully. In other words, they recount the unsuccessful application of advice. Examples (8.16) to (8.18) are from Mel's thread. Mel struggles to express her opinion in front of others, so she and the counselor spend several entries discussing how Mel could practice *offering [her] view*. After Mel suggests a few situations (not shown here), the counselor inquires how Mel is *getting on with this experiment*, i.e., the situations Mel suggested.

- (8.16) Counselor (Thread: Mel; Entry 8)  
*Yes, they sound like low stress options. How are you getting on with this experiment Mel, and how did you feel when putting your view out there? I'm guessing that initially it would have felt pretty uncomfortable, while hopefully you felt more positive afterwards. Help me to understand more fully this experience for you.*

The counselor's elicitation of the narrative involves complex relational work that aims to position Mel in very specific ways. First, the counselor starts with praise of Mel's suggested options in an *assessment*, while also bonding with her through agreement (*Yes*). The counselor then uses a *request for information* (the first sentence in italicized font) to ask about Mel's progress. Mel is positioned as having been experimenting already (present progressive tense: *How are you getting on* and past simple tense: *how did you feel*) and is asked to reflect about her experience. Crucially, the counselor does not know at the time of writing whether Mel has practiced the suggested coping technique yet. As a



result, the counselor's direct request might be interpreted as a potential face-threat: if Mel has not experimented yet, she would have to admit it – at least in face-to-face counseling. Luckily, the asynchronicity (Herring 2007) of email counseling allows Mel to use the time between receiving the counselor's email and having to respond to it to *get on with this experiment*. Hence, the asynchronicity of email mitigates the potential threat to Mel's face in this request, which thus encourages Mel to experiment even as the counselor asks about experiences that she has already had.

In the following *assessment* in example (8.16), the counselor further downplays the previous face-threat with her acknowledgement that experimenting can be difficult (*felt pretty uncomfortable*). This displays empathy ahead of a possible appeal in Mel's future response. The counselor quickly introduces the possible positive outcome, though (*felt more positive*), which paves the way for the client to self-praise her progress in the future. Finally, the counselor uses a *request for information* (second sentence in italicized font) to encourage Mel to report on the application. This positions Mel as an observer and active participant in the therapeutic alliance, who *help[s]* the counselor *understand* Mel better. The counselor's relational work here exemplifies how she uses an interplay of face-saving (display of empathy) and face-enhancing (praising, bonding, encouragement) strategies to downplay the possible face-threatening question of how Mel is *getting on with ... experiment[ing]*.

Mel confirms that she has complied with the advice, albeit *only [at] a couple of opportunities*, and mentions two specific occasions:

(8.17) Mel (Thread: Mel; Entry 9)

I have only had a couple of opportunities to have a go at this. The first was suggesting somewhere to meet up for lunch and the second was choosing what kind of take-away to get. It did feel empowering giving it a go but I also had some worries alongside – ‘what if they don’t agree?’ ‘Or what if they don’t agree but decide not to say so so they don’t hurt my feelings?’ And then I worried that they weren’t enjoying my choice or were feeling resentful about it! I still find it difficult to overcome the idea that my opinion is as valid as anyone else’s.

Mel first evaluates her experience positively (*did feel empowering*) and then describes in detail what *worries* she had during the experiences. Mel thus appeals for empathy from the counselor and implicitly criticizes herself for not succeeding. With this appeal for empathy and with the self-criticism, she positions herself as a struggling client who needs further support. It is striking that in the last sentence, Mel produces a slip of the pen when she writes that she has difficulties in *overcome[ing] the idea that [her] opinion is as valid as anyone else’s*. It seems that Mel’s unconscious slip of the pen makes her difficulty in overcoming the idea her opinion is **not** as valid as anyone else’s rather overt.

The counselor’s response focuses on Mel’s anxious thoughts, rather than on the fact that Mel has not experimented many times.

- (8.18) Counselor (Thread: Mel; Entry 10)  
**What you describe is very normal Mel. Those anxious thoughts will naturally appear when making these kind of changes. Don't forget what I said about acceptance. By accepting that those thoughts are natural and refocusing onto the process and benefits of being more assertive, those feelings will grow!**

The counselor assures Mel in an *assessment* that it is normal to still experience such *anxious thoughts*, which displays empathy towards Mel and normalizes her situation. While this reinforces Mel's advice-seeker identity, the counselor immediately moves on to position Mel in a more positive way. In an *advice-giving* move, the counselor encourages Mel to further apply the technique (*Don't forget*), assures her that she will progress (*those feelings will grow!*), and thus anticipates Mel's possible success in the future. This positions Mel as a currently active applier of the suggested coping technique who, in the future, has the potential to be successful.

In Chapter 7, I have discussed the counselor's observation in the interview that, with time, there is a shift from negative towards positive emotion words in the clients' vocabulary. The counselor called this shift an "organic movement" and explained that clients gradually move from looking at negatives towards looking at positives (see Chapter 7 for further details). This can also be seen especially well in the narratives that are used in the function discussed here (showing compliance with advice), which can gradually shift from focusing on the unsuccessful application of advice towards the successful application. And as the

counselor suggests in the interview: “eventually they’ll start looking less to the negative and will go more in the positive direction”, which is a sign of success – or at least progress.

*Successful Applier of a Coping Technique*

Examples (8.19) to (8.21) illustrate how Ellie is positioned as a successful applier of coping techniques in a narrative that shows compliance with advice. Prior to these examples, Ellie mentions to the counselor that she feels stressed, because she often worries. The counselor then explains how worrying can turn into a vicious cycle (not shown in the example). She then makes several suggestions as to how Ellie could focus less on her worries and thus feel less stressed. Example (8.19) contains one of the counselor’s suggestions, the worry book technique.

- (8.19) Counselor (Thread: Ellie; Entry 6)  
*An alternative Ellie, is to have a worry notebook or jar besides your bed, so that you can easily write down the worry that is preventing you from sleeping, and tell yourself it is safely written down and does not need thinking about any more right now. What do think of this idea?*

The counselor first provides Ellie with advice on how to handle her negative thoughts at night. She gives clear instructions about what Ellie could do (*have a worry notebook, write down the worry, tell yourself*) and explains why this technique could work. When she explicitly asks in a *request for information* what Ellie *think[s] of this idea*, she invites Ellie to give her opinion. Ellie is therefore positioned as an active

participant in the therapeutic alliance who can evaluate coping techniques that the counselor suggests. The counselor does not explicitly ask for a narrative.

Ellie recounts how she complied with the advice by incorporating the technique into her sleep routine:

- (8.20) Ellie (Thread: Ellie; Entry 7)  
I have started writing down things on my mind in a 'worry book' which has been really helpful. I find that if I have written my worries down then I can stop thinking about them as much and try to focus on other matters instead. I have found that my sleeping pattern has started to become a bit better as there aren't as many thoughts on my mind when I am going to bed because I have written them down and tell myself I can think about them tomorrow with a fresh and open mind.

She praises the technique as *really helpful* and as a result implicitly praises the counselor for suggesting it. She then discusses why she thinks the technique was helpful (*I can stop thinking about ...*) and talks about how her actions have helped her (*I have found that*). She thus implicitly praises herself for improving her sleep pattern. Dayter (2014: 92) defines self-praise as “announcements of accomplishments as well as explicit positive evaluations of some aspect of self.” Ellie thus enhances the counselor’s and her own face with (self-)praise while also positioning herself as a successful applier of the counselor’s suggested coping technique.

The counselor responds positively to Ellie's narrative and reaffirms the usefulness of the technique.

- (8.21) Counselor (Thread: Ellie; Entry 8)  
That's clearly a strategy that works really well  
for you Ellie :-) So keep on doing it!

It is notable that the counselor does not praise herself for the advice she gave Ellie; rather, she refers to the helpfulness of the technique and shows her positive affect with a smiley emoticon. Still, the counselor could have positioned Ellie in a position with even more agency if she had said that Ellie successfully managed to overcome her vicious cycle of worrying by actively writing down her worries. This would have enhanced the client's face more forcefully. Nevertheless, the counselor encourages Ellie to *keep on doing it*. This can be interpreted as further implicit praise for the client. Importantly, the counselor's focus is clearly on praising either the technique or the client, rather than herself as the source of the coping technique. This reaffirms the position of the client as a successful applier of the coping technique, instead of foregrounding the counselor's position as a successful advice-giver.

To summarize, narratives are one tool that is utilized to show compliance with advice. As I have mentioned, previous studies have found mixed results when it comes to showing compliance with advice online. Harrison and Barlow (2009), in their study of a self-management program for arthritis, also found overt compliance with advice. They point out that the participants might have shown compliance so readily because of the nature of the program, which focuses on action plans and their feedback. Morrow (2006) did not find overt statements

of compliance on a peer forum on depression. I would argue that the findings of all three studies suggest that overtly showing compliance with advice is highly individual to each specific social practice and is an activity that is negotiated by the participants.

My analysis has also revealed the clear patterns of relational work in and around such narratives in my data. First, narratives that show compliance with advice are often elicited. The elicitations are often produced in *request for information* moves by the counselor and are rather brief. Importantly, they always provide the clients with an opportunity to voice their opinions or to narrate an experience – and the right to do so. Such *requests for information* implicitly position clients as appliers of the suggested coping techniques and active contributors to the therapeutic alliance.

In the narratives, clients prototypically position themselves in two ways, either as successful or unsuccessful appliers of the techniques. The former can be accomplished with self-praise or praise of the technique, the latter with a further appeal for empathy, self-criticism, or criticism of the technique.

The counselor's response is as diverse as it was to the narratives that support a previous claim. In each case, she takes the clients' narratives and their intent into account and responds accordingly. What is always evident is her aim to move clients towards an active self-helper identity. She does this with a range of relational strategies, such as encouragement, praising and bonding, as well as displays of empathy. Still, while an appeal for empathy by the client almost always elicits a

display of empathy by the counselor, praise by the counselor does not always elicit self-praise by the clients. This reflects the complexity of the relational work employed in and around the narratives in the corpus.

#### **8.3.4 The Function of Reporting on Progress**

Last but certainly not least, the clients use narratives to report on progress. Previous studies have looked at success stories in online health practices (see e.g. Lindholm 2017; Harrison and Barlow 2009; Richardson 2003). The implied black and white of failure and success stories does not lend itself well to the study of mental health. Clients may improve, but as the counselor suggests in the interview, it is a gradual move from feeling not well to feeling better. My decision to call this narrative function “reporting on progress” takes into account the gradual nature of this move and avoids taking anything away from narratives that actually do clearly celebrate progress (even if they do not boast about complete success). This function differs from the previous function in that narratives can be but are not necessarily connected to an application of a coping technique and clients are not necessarily positioned as appliers of coping techniques. The narratives allow clients to recount and in a way re-experience their progress, rather than simply asserting that they have improved. Actively talking about improvement makes the progress more tangible for the counselor and also confirms the progress for the clients. Overall, these narratives tend to position clients as being able to manage their difficulties, but they do not always position clients as active self-helpers.



A third (n=34) of the narratives found in my corpus (N=105) can be categorized as reporting on progress. Table 8.11 shows that the majority of these (30 out of 34) are delivered in an *assessment*. Only four occur within a *problem statement*. The narratives can further be divided into non-elicited (n=13) and elicited (n=21) narratives.

Table 8.11 Number of report-on-progress narratives according to discursive moves

Narrative			Total
	Problem statement	Assessment	
Non-elicited	3	10	13
Elicited	1	20	21
Total	4	30	34

Table 8.12 Number of report-on-progress narratives according to themes

Theme	Number of narratives
Anxiety	14
Relationships	9
Depression	4
Self-esteem	4
Stress	2
Sexuality	1
Total	34

The narratives that report on progress are used mostly in the four of the five most discussed themes overall: ‘anxiety’ (n=14), ‘relationships’ (n=9), ‘self-esteem’ (n=4) and ‘depression’ (n=4) (see Table 8.12). Progress narratives naturally lend themselves to the later stages of the counseling process. Consequently, they occur in the themes that are discussed extensively towards the end. Additionally, the theme ‘anxiety’ always includes large text blocks written by the counselor that include various coping techniques. In the theme ‘anxiety’, then, clients thus

report especially often on how they successfully applied the counselor's suggestions.

The clients use various types of relational work in progress narratives. As with the three previous functions, boosting and mitigation are employed very frequently. Two further types of relational work also come up often: self-praise and praise of a specific coping technique. The pattern differs slightly whether the narrative is elicited or not. Elicited narratives regularly contain the relational strategy 'praising techniques'. Since the counselor often provides suggestions before eliciting responses, the clients might feel obligated to praise the techniques the counselor suggested. In the non-elicited narratives, the clients praise coping techniques in a less pronounced way. These narratives often appear towards the end of an entry and are not connected to a specific piece of advice. Self-praise is used in both elicited and non-elicited narratives.

Clients use these relational strategies to foreground two particular positionings in progress narratives: a successful applier of a coping technique and an active self-helper. These two types of positioning are not mutually exclusive. In the former, the focus lies more on reporting back on a specific coping technique, while the latter foregrounds how clients come up with their own solutions in specific situations. I have discussed the positioning of the client as a successful applier in the previous section already. Here, I want to focus on how clients position themselves as active self-helpers.

*Active Self-helper*

Progress narratives can be used to illustrate how the clients have managed to deal with a specific situation. In example (8.22), Ellie discusses how she adapted the counselor's idea that feelings are like weather (not shown in the example) and used it in a conversation with her father. This narrative is not elicited by the counselor.

- (8.22) Ellie (Thread: Ellie; Entry 9)  
I like your idea about describing feelings as weather and I used it when speaking to my Dad about my plans at Uni next year. I have told him that I plan on coming home every three weeks but when I do I will be at home for three full days at a time so I will spend more time with my family and mum at those times. I have also said to him he could always bring my mum down to [PLACE] for a couple of days in between the times when I am at home so that I would be able to see them but also be able to keep up with my studies. He realised my commitment to my degree and my passion for my subjects and has since been a lot more supportive of my decision. He respects that if I don't spend enough time in [PLACE] then I won't be able to keep up with studying.

Ellie recounts in detail how she talked to her father and how she successfully convinced him to see her perspective and to agree with her plan. Instead of focusing on how the technique helped (i.e., the weather metaphor is not mentioned after the first sentence in the example) or

how she applied it, Ellie focuses on her agentive role in the discussion with her father (*I have told him, I have also said*) and implicitly praises her actions with her report on her father's positive reaction (*he realised my commitment, He respects that ...*). With this narrative, Ellie positions herself as an active self-helper who can stand up for herself. She also positions herself as someone who develops a plan and gets other people on board. By not praising the technique extensively, Ellie implicitly foregrounds the fact that she praises herself. Ellie's narrative exemplifies how the counselor moves to the background as a result of Ellie's focus on her actions and her achievements. While such overt self-praise may be face-threatening in other contexts or social practices, the collaborative work of the clients and especially the counselor explicitly created such opportunities for the clients to praise themselves.

The counselor responds in an entirely positive way to Ellie's progress narrative.

(8.23) Counselor (Thread: Ellie; Entry 10)

More smiles :- ) You found the courage to speak to him Ellie, and the words that helped him understand, and respect your needs. You have changed everything, by being calm, determined and strong! Imagery can be really helpful in expressing concepts and feelings that we are struggling to articulate, so I'm glad you found my weather analogy useful.

The counselor's expression of her positive emotional stance (*More smiles ☺*) can be interpreted as bonding. She praises Ellie extensively

when she positions Ellie as the agent and the source of the progress (*You found the courage, You have changed everything*), and she explains in detail how Ellie managed to get her point across to her father *by being calm, determined and strong!* Only then does the counselor concede that it was the imagery that she suggested that helped Ellie to talk to her father. The counselor's use of face-enhancing strategies and the assignment of Ellie to an agentive role both reinforce Ellie's positioning as an active self-helper.

I want to briefly consider the counselor's elicitations of such progress narratives, for they are highly salient for the counseling process. In the interview, when she was asked about some of the progress narratives in the corpus, the counselor readily explained why she explicitly and very consciously aims for clients to tell such narratives.

If they just do a general "Oh I've improved", I'll ask them to tell me how, what they've noticed, what's different, how they've noticed, because that's cement then. If they're seeing, they're writing it and see it written down, it's gonna cement it for them.  
(Interview)

Clearly, the counselor here points to an intrapersonal function of progress narratives. It is not only the counselor who can see the progress of the clients more clearly when she is presented with narratives, but also the clients themselves who can internalize their improvement when they recount detailed stories that depict their progress. In the interview, the counselor then takes this further:

That's really important to them moving forward to really recognize and take on board and affirm what those changes are. If I

just accept a general “Yeah, things are better”, that’s not gonna be particularly helpful for that client. So I’m really inviting them to elaborate. (Interview)

The counselor’s input shows that she invests considerable effort into helping clients recognize and internalize their progress. Despite the fact that this is facilitated by specific relational work, it aims at an intrapersonal effect within the client. Therefore, the work that clients enact through writing progress narratives is both interpersonal **and** intrapersonal. This becomes even more evident in how clients transform in the course of several narratives.

*The Transformation: From Applier of a Coping Technique to an Active Self-helper*

Narratives are also tools that can prominently showcase a transformation from advice-seeker to active applier of a coping technique and finally to active self-helper. Such transformations include elaborate relational work from both interactants. Examples (8.24) to (8.26) illustrate how this transformation takes place in the course of several entries in Anna’s thread. In example (8.24), Anna reports that she is applying a coping technique that the counselor suggested: *challeng[ing negative] thoughts*. In a *problem statement*, she explains with a narrative that she struggled to apply the technique and even experienced a physical manifestation of her anxiety.

## (8.24) Anna (Thread: Anna; Entry 7)

While I am starting to challenge my thoughts, I still almost had a heart attack when I was sending that letter to my tutor and asking to do the essay - I don't know why! And every time after that I felt sick checking my emails. However, at least I'm checking them - a couple of months ago I wouldn't have been able to bring myself to do it.

Anna criticizes herself for struggling: she [*does not*] *know why* she reacted this way. At the end of the narrative, she concedes, though, that she has managed to *check [her] emails*. She praises herself for this progress, as she was not able to do this before the counseling (*at least I'm checking them*). Anna positions herself as an active applier of coping techniques, but at the same time as a client who is still in need of support. This is highly salient, as Anna is expected to be an active participant in the therapeutic alliance. Had Anna not demonstrated that she is applying what she learns during counseling, the question would arise whether it is sensible to continue the counseling. Yet if Anna had reported that she was entirely successful with the application, she would have run the risk of the counselor suggesting that the counseling process can come to an end. The partial progression exemplifies how Anna is a willing participant in the therapeutic process and deserves to be supported further as an advice-seeker.

The counselor's response<sup>25</sup> in example (8.25) is delivered in an organizational entry.

- (8.25) Counselor (Thread: Anna; Entry 8)  
It sounds like you are making positive progress, and challenging your anxiety, even though it's really tough.

The response to Anna's narrative is an *assessment* in which the counselor first focuses on the positive side and praises Anna's progress (*you are making positive progress*). This assures Anna that she is moving in the right direction. Importantly, the counselor's repetition of the coping technique (*challenging your anxiety*) encourages Anna to keep using it. At the same time, her acknowledgement of Anna's difficulties displays empathy. In this *assessment* of Anna's narrative, the counselor clearly tries to move Anna towards a more positive perspective on her coping competence. Berceci et al. (2008b: 291) have found formulations that "direct the development of clients' [personal narratives]" in their data. The counselor's *assessment* here can be seen in a similar light. While that *assessment* does not contain a request for further information, Anna still responds with another narrative in the next entry.

In her response, Anna tells the story of how she coped with a difficult situation: missing a flight.

- (8.26) Anna (Thread: Anna; Entry 9)  
You're right, I am making progress - I had a panic attack on Wednesday (I missed my flight to

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<sup>25</sup> The entry is written in black in the original, as it is an organizational entry in which the counselor does not change the color of the font.



[PLACE] !), but managed to calm myself down relatively quickly by thinking logically. I made it back eventually!

First, Anna bonds with the counselor when she agrees (*You're right*) with her that [*she is*] *making progress*; this corroborates the counselor's perception of Anna's improvement. This sets the scene for her narrative. She then recounts how she used the coping technique to *calm [her]self down ... by thinking logically*. Her conclusion to her story then shows that her actions helped her to successfully *ma[k]e it back*. She praises herself and constructs her identity as an active self-helper who can successfully manage difficult situations. As a whole, then, this interactive sequence exemplifies how clients discursively construct several types of positionings through narratives. It is the interactive and specifically the relational work of both interactants that finally helps Anna realize her own accomplishments and achieve her transformation.

In summary, clients can use narratives to report on progress with the help of *assessments* in which the clients position themselves either as successful applicers of coping techniques, or as active self-helpers. In both cases, clients demonstrate their expertise in coping with their troubles. My findings confirm Harrison and Barlow's (2009) results that narratives are used to construct expert identities. The clients achieve this by using two types of relational work: self-praise and praise of specific coping techniques. Interestingly, the clients also use the relational strategy of bonding more frequently in such progress narratives, which serves to negotiate positive rapport in the therapeutic alliance. The counselor responds by confirming the clients' positionings with praise

and further encouragement, while also reinforcing the positive rapport in the therapeutic alliance with her own use of bonding.

#### **8.4 Summary**

The pervasive presence of narratives in my corpus has led me to analyze their interpersonal effects in the counseling exchanges. My results confirm findings of previous research that has revealed the multifunctionality of narratives in a wide range of contexts (Armstrong et al. 2011; Boothe 2015; Hamilton 1998; Harrison and Barlow 2009; Kouper 2010; Lindholm 2017; Richardson 2003; Thurnherr et al. 2016). In this chapter, I have focused on the clients' use of narratives to serve four specific functions: (1) to seek advice; (2) to support a previous claim; (3) to show compliance with advice; and (4) to report on progress. As this approach has made clear, narratives should not be taken at face value, but should always be looked at in their embedded place within a social practice. Especially in counseling or therapy, narratives often fulfill functions that are of an interpersonal nature (see also Ferrara 1994).

I have further pointed out that these functions follow a specific pattern in which they serve to put a transformation in the clients' identity on display. Table 8.13 highlights this transformation as it summarizes the relational work that clients enact through the narratives (the counselor's work is not shown in the table). As I have summarized each function in its section, I now want to draw some conclusions from this overview of the entire transformation.

Table 8.13 Narrative functions and the clients' prototypical discursive moves, positionings and relational work

<b>Narrative function</b>	<b>Discursive move</b>	<b>Typical (aspects of) positionings</b>	<b>Typical relational work</b>
Seek advice	- Mainly problem statements	- Advice-seeker - Illness career - Current urgency of suffering	- Appeal for empathy - Self-criticism
Support a claim	- Problem statements - Few assessments	- Being an expert on their own biography/ experiences - Being an observer of their own behavior	- Appeal for empathy - Self-criticism - Other-criticism - Bonding
Show compliance with advice	- Assessments - Few problem statements	- Applier of coping techniques a) unsuccessful b) successful	- Appeal for empathy (a) - Self-criticism (a) - Technique-criticism (a) - Self-praise (b) - Technique-praise (b)
Report on progress	- Mainly assessments	- Successful applier of a coping technique - Active self-helper	- Self-praise - Technique-praise - Bonding

Table 8.13 depicts the pattern of prototypical positionings for each narrative function. It also shows that these prototypical positionings are linked to specific types of relational work. It is the use of these types of relational work that helps create the specific positionings. Further, the relational work and their product (the positionings) seem to be linked to certain types of discursive moves (see below as well). All in all, a

clear pattern of discursive moves, relational work, and positionings comes up and appears to facilitate the transformation of the clients' identities. However, I do not mean to suggest that in all *problem statements* clients have to appeal for support or have to criticize themselves. Rather, the analysis of the narratives has revealed specific tendencies in how the discursive moves in which the narratives occur, the prototypical relation work in the narratives, and the acts of positionings in them are linked.

As I noted, Table 8.13 only shows a limited view of the actual interpersonal work that is carried out, as it does not show the counselor's relational work. While not providing her own personal narratives due to best practice guidelines in counseling (Green 2010: 6), the counselor does elicit and respond to narratives. Both activities are always carried out in order to facilitate the client's transformation from an advice-seeker towards an active self-helper, and the counselor's intricate interplay of relational work promotes this facilitation. In essence, the clients' and the counselor's work in and around narratives clearly confirms that narratives are not a "static product, but ... a dynamic and creative interactive process" (Ferrara 1994: 52).

A closer look at the use of relational work has also shown that my results confirm some of Locher's (2006) and Rudolf von Rohr's (2018) findings with regards to links between discursive moves and relational work. For example, clients appeal for empathy in narratives that appear in *problem statements*. Locher found a similar link between the discursive move *problem statement* and the relational strategy of

appealing for empathy, especially in the topic categories of “emotional health” and “relationships”, which resemble the counseling content of my corpus (Locher 2006: 227-228). Further, the counselor and the advisory persona Lucy (ibid.: 133) both display empathy in *assessment* moves. Locher (2006: 212) argues that there is a clear link between an appeal for empathy and a display of empathy in her data. I have found such a link as well. Moreover, I have shown that praising is employed in *assessments* and is used as “supportive relational work” (Locher 2006: 148), just as in Locher’s (2006) and Rudolf von Rohr’s (2018) analyses.

Yet there are also some differences between my work and these related studies. For example, the clients in the counseling exchanges use extensive self-criticism and self-praise. Neither strategy appears in the problem letters in *Lucy Answers* (Locher 2006: 212). Bolander (2013: 100) found that interactants used self-criticism in her analysis of interpersonal pragmatics in blogs on various topics, and Rudolf von Rohr (2018: 295) found self-deprecating comments by forum participants in her study. But I argue that the potentially face-threatening strategies of self-criticism and self-praise are only used in such a sensitive context as counseling once a certain amount of trust has been established over time. Clients only use these strategies in later entries, once they feel safe in the therapeutic alliance.

Additionally, I have identified encouragement as an important type of relational work that the counselor uses in the exchanges. Encouragement was also found by other researchers (Eichhorn 2008;

Placencia 2012; Rudolf von Rohr 2018). I have demonstrated that the counselor's extensive and highly salient use of encouragement is especially important in facilitating the clients' transformation, especially when encouragement is utilized in combination with praise. The occurrence of praise without encouragement could possibly be interpreted as face-threatening in a phase of struggles by the clients. In fact, encouragement signals a belief in the clients' abilities to improve, and that focus on potential future improvement mitigates the possible face-threat of praising clients while they are still struggling. At the same time, the interplay of praise and encouragement does not simply and automatically result in self-praise by the clients. This reflects the complexity of the relational work performed in counseling.

One aspect that I want to draw attention to is the fact that I have hinted at several points in my discussion that the interactants carry out not only interpersonal (i.e., between individuals) but also intrapersonal (i.e., within an individual) work. Often in linguistic research on interpersonal pragmatics, we focus on the discursive work and pay special attention to interpersonal effects. My analysis has shown that writing, or in broader terms interaction, can carry out essential intrapersonal work as well. In their work on Facebook status updates, Bolander and Locher (2015: 115) discuss the importance of repeated acts of positionings: "the more an individual performs similar acts of positioning over time, the more central they will become to the identity s/he constructs during a particular time period." My analysis has uncovered that it takes more than one act of positioning or a one-time use of a relational

strategy for clients to construct a legitimate advice-seeker identity. Even more so, the clients' immense work during the counseling process proves that it takes extensive effort and time for them to construct an identity as an active self-helper and that the counselor's support is absolutely essential. It is thus the repeated and similar acts of positioning by both the clients and the counselor that facilitate the transformation of the clients and help them make sense of their selves and their world. Clients need to **internalize** their progress and their newly emerging identities, and, as the counselor suggests in the interview, this transformation is gradual and takes time and effort. This is clearly facilitated, however, by how the writing process makes change more visible and cements new positionings even more. This intrapersonal aspect of relational work certainly deserves further attention in the future.

## **Chapter 9 Establishing the Therapeutic Alliance: The Garden Metaphor**

### **9.1 Introduction: From MIND IS SPACE to the Research Questions**

The previous chapter focused on the transformation that the clients undergo during the counseling process. The collaborative work of the clients and the counselor facilitates this transformation and helps the clients to realize that they can improve their well-being. All in all, it has become clear how important the therapeutic alliance is for the clients' improvement. However, Chapter 8 did not show how the therapeutic alliance is established in the early stages of the counseling exchanges. This early work on the therapeutic alliance can be seen, for example, when the interaction is focused on the issue of low 'self-esteem'. In Chapter 6, I showed that three clients (Chris, Mel, and Taylor) discuss low self-esteem with the counselor. The counselor is the one who brings up the issue in all three threads. More precisely, she asks the clients whether they struggle with low self-esteem. She also provides the clients with an explanation of what self-esteem is and suggests how they could improve their self-esteem. She describes the abstract concept of self-esteem with a metaphor. In this metaphor, she compares self-esteem with an *internal garden* that has *flowers*, *trees* and *ornaments* that represent positive qualities and *weeds* that stand for negative qualities.



Stott et al. (2010: 5), authors of the *Oxford Guide to Metaphors in CBT*<sup>26</sup>, explain that a “metaphor typically acts as a bridge between a source domain, which is more concrete or more familiar, and a target domain, which is more abstract or less familiar.” This definition resembles Lakoff and Johnson’s (1980) in its focus on the connection between two domains that are cognitively linked in order to understand one of the domains better. Stott et al. (2010: 6) argue that “those in psychological distress are often trying to wrestle with abstract concepts, such as different kinds of thinking processes, or behaviours that may be counter productive despite their initial appeal.” Metaphors can help clients to understand such behavior. In the example of the garden metaphor, the source domain of space is used to describe a specific aspect of the clients’ minds, i.e., self-esteem. The metaphor therefore belongs to the type that can be described as MIND IS SPACE. The familiar source domain of space, or more specifically a garden, is used to explain the abstract concept of mind, or more specifically self-esteem. As Stott et al. (2010: 21) put it, the goal is to create a “reframed perspective on the problematic domain” that helps the clients to get a better understanding of their behavior, attitudes and emotions. For reasons of space, I will not provide an analysis from the perspective of (conceptual) metaphor theory. The interested reader can consult Lakoff and Johnson (1980) for a linguistic perspective and Stott et al. (2010) for a psychological perspective on metaphor.

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<sup>26</sup> CBT stands for cognitive behavioral therapy.

The counselor explains self-esteem with the help of the garden metaphor in a text block that she inserts into three of the five threads in my corpus. This text block, along with others, are pre-written texts that the counselor has stored on her computer. In these text blocks, she explains abstract psychological concepts and suggests coping techniques to deal with them. I have provided the text block that discusses self-esteem from Mel's thread in its entirety here. In this chapter, I will provide a close analysis of the three phases that I identified within the text block: (1) the description of the internal garden; (2) the sorting out of the garden; and (3) the refocusing on positives. I have inserted the labels of these phases into the example (in black color and a different font) to show which parts of the text block they encapsulate:

(9.1) Counselor (Thread: Mel; Entry 2)

<Internal garden: [...] we all have an internal garden, full of flowers, shrubs, trees, maybe a water feature and ornaments, grassy areas, hedges and weeds. The flowers, trees, ornaments etc represent our positive qualities, achievements, happy memories, and things we like about ourselves. The weeds represent our regrets, the things we don't like about ourselves, the things we feel ashamed or uncomfortable about, the criticisms from others or ourselves over the years. Internal garden>

<Sorting out of the garden: If a gardener wants to sort out an untidy, weedy garden she has to pull up the weeds (while it's normal for there to still be some), and to start nurturing and tending the flowers and shrubs, and making sure the water feature is working well. To do this we have to recognise the weeds Mel – the unhelpful thoughts where we beat ourselves up, the unhappy past events we cannot change yet keep thinking about, or those hurtful criticisms, and destroy them. You

can do this by starting to listen to your thoughts when you are upset. *What messages are you giving yourself? What common phrases do you use? E.g. 'I should... I must... Why did I... I'm no good' etc.*

*Try and imagine that the thought is in solid letters you can grab (carved out of stone, made of glass, wood, built of bricks etc), then imagine you are destroying those words (blowing them up, burning, smashing or shredding them). **This gives your mind a powerful message that you are no longer listening to them.** What is your image Mel?*

Every time you use this image Mel you are giving your mind a message – you're not welcome anymore! Obviously it takes time and practice for your mind to get the message and to start with the thought will keep popping back as it is used to being listened to. So to help refocus away from the thought, immediately you have used your image, turn your attention to something positive to make it more difficult for the negative thought to pop back again. This could be thinking about a happy memory or putting on music you know makes you feel good, watching a favourite dvd - distracting your mind!  
Sorting out of the garden>

<Refocusing: Let's now think about ways to help you refocus onto building up your self-esteem, instead of undermining it. *Write a list of your positive qualities (**I am...**) and achievements (**I have ....**) - academic, sporting, musical, travelling, difficulties overcome etc. and pin these lists up where you can see them every day Mel, to help you connect to these real pieces of evidence of who you are!*

I'm guessing that your first reaction will be, I can't think of any! This is quite normal, especially with people who have low self-esteem. Maybe start by writing down ones you know you had in the past – fun, friendly. None of us has all our positive qualities out on display all the time. It is easy to think, 'yes, but' after every quality you think of. This is ok, it's about helping you to refocus on them,

even if you feel some have not seen the light of day for a while! Achievements need not be academic or ones where you got a certificate. They could be something you did for a short while, or a one off event.

Maybe get your Mum or boyfriend to help you. It is likely to feel uncomfortable at first as you are not used to acknowledging them; this is normal. **Pin them up somewhere you can see them every day, to help you connect to them.**

*How does this sound as something to try Mel?* Refocusing>

There are some minor details in the text block that the counselor personalizes for each client. For example, the counselor inserts *Mel*'s personal name in several instances and adjusts personal pronouns when necessary (*she*). Apart from these minor adjustments, however, the text block occurs in the same form for all three clients. In the interview, the counselor explains her use of such text blocks:

I have all these pre-written text blocks, which I then copy-paste into my answer. It would take me forever to write these text passages anew every time. But I make sure that I go through it really, really carefully to adjust whatever needs adjusting. It needs to be relevant to that specific client. I'm very careful about that. (Interview)

The counselor clearly appreciates the practicality of such text blocks. Moreover, she mentions her awareness of recipient design and refers several times to how careful she is to adjust the text block for each individual client.

Previous research on face-to-face counseling and therapy has analyzed therapists' and counselors' input with specific foci, such as

formulations (Antaki 2008), reinterpetative statements (Bercelli et al. 2008a), optimistic questions (MacMartin 2008) or proposals for behavioral change (Ekberg and LeCouteur 2012). Some studies have also looked at the clients' reactions to such input. Ekberg and LeCouteur (2012, 2014) have demonstrated that clients react more positively to information-soliciting questions that aim to induce behavioral change rather than the counselor's proposals in the form of hedged recommendations. In an online context, Lamerichs and Stommel (2016) have shown that the use of contrastive questions is counterproductive. Contrastive questions are used to downplay the clients' problems, which can result in clients feeling disaligned. Ekberg et al. (2016) consider how affective inferences by therapists in online Cognitive Behavioral Therapy can make clients' feelings overt without taking away their epistemic right to such feelings. These and further studies have shown the work that therapists and counselors invest in the therapeutic alliance.

Nevertheless, each study has focused on one specific aspect and analyzed a limited stretch of interaction. In addition, although these researchers have examined one specific type of input, such as contrastive questions or affective inferences, they have not been able to study interactive sequences in which the input from the therapists or counselors was exactly the same in three different cases. Consideration of the garden metaphor and the ensuing interaction between the counselor and each of the three clients can reveal how three different clients react to the same exact input. In addition, I can pay attention to how the subsequent interaction unfolds over several entries. This will also add to

previous research on email communication, which has primarily focused on single emails rather than threads (see e.g. Davies et al. 2007; Merrison et al. 2012), as well as to research that has uncovered a stepwise entry to advice (see e.g. Heritage and Sefi 1992; Locher 2006; Rudolf von Rohr 2018; Silverman 1997). Not only will I be able to demonstrate how this stepwise entry transpires in online counseling, I can also show how clients react to such a stepwise entry to advice and how the counselor responds to the three clients' distinct responses to the metaphor.

Such an analysis of the stepwise entry to advice is also based on my discursive moves analysis and the patterns of discursive moves I found. First, almost every *problem statement* from a client is followed by an *assessment* from the counselor. This confirms the collaborative aspect of self-disclosure (see also Pawelczyk and Erskine 2008). A close analysis of the relational work and positionings within such collaborative work is needed. Second, in my data, I have identified the prototypical pattern of the stepwise entry that the counselor performs: an *assessment*, followed by an *advice-giving* move, which is followed in turn by a *request for information*. Not every piece of advice is given in this particular type of sequence, but the counselor tends to adhere to this sequence in a majority of cases. As I have argued in Chapter 6, this sequence facilitates the uptake of the advice, and the *request for information* in the final position of the sequence encourages clients to actively participate in the therapeutic alliance. Finally, the discursive moves analysis has revealed that some (but by far not all) of the coun-

selor's *requests for information* are answered by the clients. A close analysis of this extended sequence over several entries will shed light on the collaborative work that the counselor and the clients perform to negotiate the therapeutic alliance and to improve the clients' self-esteem.

My analysis of the garden metaphor text block aims to answer the following research questions:

- How does the counselor establish the garden metaphor?
- How do clients respond to the garden metaphor?
- Are there differences in the relational work employed and the constructed positionings surrounding the garden metaphor in the three threads?
- Are there specific ways in which the interaction of relational work and positionings invokes the therapeutic alliance?

To answer the first research question, I consider at what stage of the counseling process the counselor introduces the garden metaphor and what linguistic choices she makes when she does so. The second research question then addresses the clients' idiosyncratic responses. Further, my analysis of the metaphor itself, but also of the ensuing interaction, will provide a description of the types of relational work and the positionings that occur within the threads. Finally, I will discuss the ways in which the relational work that the interactants carry out in and around those text blocks as well as the positionings they accomplish specifically contribute to the negotiation of the therapeutic alliance.

The chapter is structured as follows: I discuss the garden metaphor in Section 9.2. As the counselor also uses a jungle path metaphor that is related to the garden metaphor, this second metaphor is briefly discussed in Section 9.3. In Section 9.4, I highlight the differences between the three threads that are related to the specific realization of the therapeutic alliance in each client's individual interaction with the counselor. Section 9.5 then provides a summary of the results of this chapter.

## **9.2 The Garden Metaphor**

This section contains four sub-sections. Section 9.2.1 discusses the preceding context of the metaphor. In other words, I will briefly summarize some of the findings from previous chapters to provide the reader with an overview of what occurred in the three threads before the counselor introduces the garden metaphor. Section 9.2.2 discusses the first phase of the garden metaphor: the description of the internal garden. Section 9.2.3 then focuses on the second phase, the sorting out of an untidy garden, while Section 9.2.4 looks at the last phase, the refocusing on positives.

### **9.2.1 The Preceding Context of the Garden Metaphor**

Before reporting on the results of my analysis of the garden metaphor itself, I want to briefly give an overview of the context leading up to the garden metaphor. My content analysis has revealed that Chris talks about the three themes 'anxiety', 'depression', and 'sexuality' in his



first entry. Mel discusses six different themes in her first entry: ‘abuse’, ‘depression’, ‘health issues’, ‘other’s health issues’, ‘relationships’, and ‘stress’. Finally, Taylor only talks about ‘loneliness’ in her first entry. I have further shown that all three clients predominantly use *problem statements* in their first entries. While they do already use some other discursive moves, such as *greetings*, *farewells*, or *metacomments*, they do not use any *assessments* so early in the exchanges. Clearly, the focus is on the clients’ troubles and on themes that are easy for them to recognize. The theme ‘self-esteem’, though, is not explicitly introduced by the clients, but by the counselor. Yet in all three threads, ‘self-esteem’ is subsequently focused on to a considerable degree (see Table 9.1).

Table 9.1 Self-esteem and the garden metaphor in the three threads

Thread	Percentage of thematic text spent on theme ‘self-esteem’	Introduction of theme ‘self-esteem’	Occurrence of garden metaphor
Chris	18%	Entry 2	Entry 2
Mel	26%	Entry 2	Entry 2
Taylor	25%	Entry 2	Entry 4

The counselor introduces the issue of self-esteem in the second entry in all three threads. However, she utilizes the text block with the metaphor in the second entry only in Chris and Mel’s threads. In entry 2 in Taylor’s thread, the counselor only asks Taylor whether she is correct in assuming that low self-esteem is something that Taylor struggles with. This might stem from the fact that Taylor wrote only one paragraph in entry 1. This paragraph did not provide the counselor with a lot of information, so she only asks Taylor whether she struggles with such

themes as ‘self-esteem’ in entry 2. In entry 3, Taylor confirms that some of these themes are problematic for her, including ‘self-esteem’. Only in entry 4 of Taylor’s thread, does the counselor then introduce the text block containing the garden metaphor.

### 9.2.2 The Internal Garden

The first phase of the garden metaphor is the description of the internal garden. In all three threads, the counselor uses a metacomment (e.g. *I use images a lot*) to introduce the metaphor. She employs boosters (present simple tense, *a lot*) to emphasize that she habitually uses such metaphors. This constructs her expertise as an experienced advice-giver:

- (9.2) Counselor (Thread: Mel; Entry 2)
- I use images a lot, (as you are probably getting) and for self-esteem I describe how we all have an internal garden, full of flowers, shrubs, trees, maybe a water feature and ornaments, grassy areas, hedges and weeds. The flowers, trees, ornaments etc represent our positive qualities, achievements, happy memories, and things we like about ourselves. The weeds represent our regrets, the things we don't like about ourselves, the things we feel ashamed or uncomfortable about, the criticisms from others or ourselves over the years. I wonder what your garden looks like Mel?*

The counselor describes the internal garden in a *general information* move. She uses the metaphor to suggest that self-esteem is a characteristic of every person (see e.g. inclusive first person plural pronouns: *we, our, ourselves*). With examples from the source domain of gardening, she adds that every person has *positive* and *negative qualities* and experiences. The associated normalization of the fact that every person

can experience phases of low self-esteem establishes that the clients' experiences are common. The use of first person plural pronouns may demonstrate solidarity (Planchenault 2010), but for Gordon and Luke (2012), the signaling of alignment with the pronouns aims instead to involve interactants and thus index an egalitarian relationship. Even so, the counselor's explanation of an abstract psychological concept does position her as an expert on issues such as self-esteem, which simultaneously positions the client as an information-recipient.

This *general information* is followed by a *request for information* (*I wonder what your garden looks like Mel?*). This encourages the clients to share a description of their internal garden and to join the discussion of self-esteem issues. Asking a client to admit that they have low self-esteem has immense potential to damage their face. To avoid doing so, the counselor carefully minimizes the face-threat with several linguistic choices. First, the metaphor itself serves as a mitigating device: it is easier to describe an untidy garden than to describe one's low self-esteem. It can also facilitate the clients' recognition of positive and negative qualities and help them to verbalize how they feel. Moreover, as I have discussed in Chapter 7, the hedge *I wonder* plays a mitigating role in such requests. Biber et al. (2007: 683) report that this structure is used for indirect questions. It softens the face-threat compared to a direct question (e.g. 'What does your garden look like?'). Simultaneously, this hedge also positions the clients as vital sources of information. Ekberg and LeCouteur (2014) have shown that such information-soliciting questions serve to involve clients in cognitive

behavioral therapy. The counselor's use of mitigation thus facilitates the clients' self-disclosure and constructs them as important partners in the therapeutic alliance with special knowledge of their own qualities and achievements.

As I have mentioned, the counselor copy-pastes this text block into the threads of all three clients (Chris, Mel and Taylor). And all three clients react to it in their own ways. Chris is skeptical at first, but then responds to the prompt anyways. Mel readily provides an answer, but does not elaborate on the metaphor in the same way as Chris does. Taylor does not respond to the prompt at all. Chris' response begins with a *problem statement*:

(9.3) Chris (Thread: Chris; Entry 3)

*I feel like if I were to have this so-called garden, the plants I'd have in it would be spectacular beautiful plants from all over the world, but I would think that my friends plants are better and that they might think less of me for the style of plant I've chosen to put in my own garden.*

Chris voices his initial skepticism when he describes his *so-called garden* in a conditional sentence (*if*). Chris' skepticism carries the potential to threaten the counselor's face. Chris seems unconvinced by the metaphor and implicitly criticizes it. Since the counselor is the source of the metaphor, Chris also indirectly criticizes the counselor. The face threat is less explicit, however, as Chris does not overtly say that he does not like the metaphor. In the end, he still provides a detailed description of his internal garden and adds that his difficulties stem from negative comparisons of himself with others. The counselor's

information-soliciting question (Ekberg and LeCouteur 2014) seems to have facilitated Chris' self-disclosure. This corroborates Pawelczyk and Erskine's (2008) argument that self-disclosure is an interactional achievement.

In entry 4, the counselor responds to Chris' description with an *assessment* move that reformulates Chris' description:

(9.4) Counselor (Thread: Chris; Entry 4)

What I'm hearing, is how you recognise your achievements and positive qualities, while you unwittingly dismiss them by comparing yourself negatively to others, which is a common thing to do. The downside of this, as you know is that when we compare, it is generally to our own detriment! This reminds me of this list of common thinking mistakes – 'compare and despair' being one of them. See which others you recognise! There's a lot of other useful things on this website that you might like to look at as well.

<http://www.getselfhelp.co.uk/unhelpful.htm>

She normalizes Chris' experience as a *common thing*, untangles the negative consequences of such comparisons (*downside, detriment*), and thus displays her understanding and empathy. She uses a *referral* move to provide Chris with sources (*list of common thinking mistakes, website*) that he can use to analyze his unhelpful thinking patterns. The counselor positions herself as an understanding and resourceful advice-

giver. At the same time, she performs crucial relational work with regards to Chris' identity. Her assertion that Chris understands the ramifications of unfavorable comparisons (*as you know*) positions him as an equal partner in the alliance. Further, with the help of the list and the website, she invites Chris to introspect, which positions him as a client who can work independently on his troubles with the help of such source material. For now, the counselor does not continue to use language related to the metaphor. She might have picked up on Chris' skepticism and chosen to perform necessary recipient design instead (Stommel 2012). In any case, she did not respond to the potential threat to her face that Chris' skepticism posed.

Mel's response to the counselor's request to describe her internal garden is briefer than Chris', but also demonstrates that Mel has understood the counselor's metaphor. Mel's response comes in the form of a *problem statement*.

(9.5) Mel (Thread: Mel; Entry 3)

Very weedy to be honest, with a few nice flowers though.

As I have previously explained, the counselor's prompt contains a potential face-threat because clients are asked to confirm that they have low self-esteem. This is also visible in Mel's response. While she admits that her garden looks *very weedy*, she uses the stance marker (Biber et al. 2007: 975) *to be honest*, which indicates Mel's slight trepidation about giving an answer. Nevertheless, she acknowledges a few positive qualities in addition to the *weed[s]*. Thus, the information-soliciting question also facilitates the self-disclosure in Mel's case. In contrast to

Chris' response (negative comparisons with others), though, the counselor does not receive any information about why Mel has low self-esteem. Nevertheless, both Chris and Mel have extended the counselor's metaphor and described their internal gardens. Ferrara (1994) found that such extensions of interactants' metaphors can help build rapport in a psychotherapy or counseling context.

The counselor's subsequent *assessment* evaluates Mel's response positively (*great to hear*), and she then positions Mel as a good observer of her own behavior:

- (9.6) Counselor (Thread: Mel; Entry 4)  
It's great to hear you are able to see some nice flowers amongst the weeds Mel! Keep on focusing on nurturing, recognising and acknowledging your flowers, and pulling up your weeds.

She immediately proceeds with an *advice-giving* move in which she encourages Mel to actively continue to observe her positive qualities and achievements. While both positive (*flowers*) and negative (*weeds*) aspects of the garden or low self-esteem are mentioned, the overall tone of the *assessment* and the *advice-giving* move is positive. This is due to the counselor's application of solution-focused therapy (Bannink 2007; DeShazer and Berg 1997). In contrast to Chris' thread, the counselor has continued to use the metaphor; that is, she carefully reacts to who works readily with such visual tools. In both Chris' and Mel's threads, the clients do not react further to the counselor's input in this part of the text block (the description of the internal garden).

### 9.2.3 Sorting out the Garden

The second part of the text block in the garden metaphor focuses on the action of *sort[ing] out an untidy, weedy garden*. In this part, the counselor suggests how to deal with unhelpful thinking patterns. It is important to remember that this text block is written in Entry 2. In other words, the responses of the clients to the description of the internal garden I presented above have not been written yet. I present the counselor's text block from Mel's thread again. I have provided sub-headings (in black font) to delineate the individual paragraphs and to facilitate their subsequent discussion.

(9.7) Counselor (Thread: Mel; Entry 2)

<Action of gardening: If a gardener wants to sort out an untidy, weedy garden she has to pull up the weeds (while it's normal for there to still be some), and to start nurturing and tending the flowers and shrubs, and making sure the water feature is working well. Action of gardening>

<Recognizing negative thoughts: To do this we have to recognise the weeds Mel – the unhelpful thoughts where we beat ourselves up, the unhappy past events we cannot not change yet keep thinking about, or those hurtful criticisms, and destroy them. You can do this by starting to listen to your thoughts when you are upset. *What messages are you giving yourself? What common phrases do you use? E.g. 'I should... I must... Why did I... I'm no good' etc.* Recognizing negative thoughts>

<The destruction of the thoughts: *Try and imagine that the thought is in solid letters you can grab (carved out of stone, made of glass, wood, built of bricks etc), then imagine you are destroying those words (blowing them up, burning, smashing or shredding them).* **This gives your mind a powerful message that you are no**



**longer listening to them.** *What is your image Mel?*

The destruction of the thoughts>

<Takes time and practice: Every time you use this image Mel you are giving your mind a message – you're not welcome anymore! Obviously it takes time and practice for your mind to get the message and to start with the thought will keep popping back as it is used to being listened to. So to help refocus away from the thought, immediately you have used your image, turn your attention to something positive to make it more difficult for the negative thought to pop back again. This could be thinking about a happy memory or putting on music you know makes you feel good, watching a favourite dvd - distracting your mind! Takes time and practice>

The same text block (with altered personal names and personal pronouns) occurs in Chris' and Taylor's threads as well. This text block consists of four paragraphs. The first part describes the activity of sorting out a garden. In the second paragraph, clients are shown how to recognize negative thoughts, while the third paragraph demonstrates how these negative thoughts can be destroyed. The last paragraph explains that this activity takes practice. The clients insert responses after some of these paragraphs rather than only at the end of the fourth paragraph. I will discuss each paragraph separately and describe how the clients respond to each individual paragraph.

*First Paragraph: Action of Gardening*

The first paragraph, a *general information* move, extends the metaphor to include an action: *sort[ing] out an untidy, weedy garden.*

## (9.8) Counselor (Thread: Mel; Entry 2)

If a gardener wants to sort out an untidy, weedy garden she has to pull up the weeds (while it's normal for there to still be some), and to start nurturing and tending the flowers and shrubs, and making sure the water feature is working well.

The shift in pronoun use from the previously inclusive *we* to the third person pronoun *she*, as well as the introduction of the persona of a *gardener*, personalize the action of sorting out, with the clients as its agents. This positions the clients as the ones actively working on their self-esteem. Importantly, the inclusion of actions that focus on the positives (*nurturing, tending*) signals that positive qualities also need to be worked on. None of the clients insert any input after this part of the text block.

*Second Paragraph: Recognizing Negative Thoughts*

In the second paragraph, the counselor gives further *general information* on how to perform the action.

## (9.9) Counselor (Thread: Mel; Entry 2)

To do this we have to recognise the weeds Mel – the unhelpful thoughts where we beat ourselves up, the unhappy past events we cannot not change yet keep thinking about, or those hurtful criticisms, and destroy them. You can do this by starting to listen to your thoughts when you are upset. *What messages are you giving yourself? What common phrases do you use? E.g. 'I should... I must... Why did I... I'm no good' etc.*

The clients are given guidance about how to detect *unhelpful thoughts*. The counselor's use of inclusive first person pronouns (*we*) makes clear

that everyone has to perform these actions and thus normalizes them. The counselor then uses second person pronouns in an *advice-giving* move (*You can do this ... when you are upset*) to describe the actual (but not metaphorical) action. The responsibility for the action clearly lies with the clients. They are constructed as observers of their own thoughts (*listen*) rather than just as sources of information. At the end of the second paragraph, the counselor *requests information* from the clients in a non-mitigated, direct way (*What messages are you giving yourself?*). The form of the request might be intended to facilitate the process of recognition. The clients can easily transform the request into a question they can ask themselves (e.g. ‘What messages am I giving myself?’). This interpretation is supported by the fact that the counselor immediately follows up the requests by providing several examples in reported speech (Biber et al. 2007: 1118).

This paragraph does not receive any response from Chris and Mel. This is noteworthy, because the counselor has written her request in italics, thereby indicating that she would like to hear specific examples. The counselor does not comment on these silences, though. Taylor responds to the counselor’s request. Her response is shown in example (9.10), while the subsequent interaction between Taylor and the counselor is shown in examples (9.11) to (9.13).

(9.10) Taylor (Thread: Taylor; Entry 5)

I find myself thinking everything feels quite pointless at times, like whats the point in going to work, whats the point in seeing friends that are gunna forget about me, whats the

point in trying to make friends. My boyfriend might be going away next year which just feels awful when I think about it. Wanting to do well keeps me going, and ofc I don't want distance to ruin what feels like one of the best things to happen to me so that keeps me motivated. But I just feel quite shitty and useless a lot of the time.

Taylor's *problem statement* outlines her negative emotional state at length (*feels ... pointless, whats the point, feels awful, feel ... shitty and useless*). She uses boosters (*quite, a lot of the time*) to further emphasize the negative impact of her emotions. She clearly describes unhelpful thinking patterns and connects them to her emotional state, which makes this an appeal for empathy. While she reports on her negative emotions in detail, she does not show any uptake of the coping technique or of the metaphor. Instead, she positions herself as an advice-seeker. Nevertheless, Taylor's self-disclosure still provides the counselor with important information that she did not previously have.

The counselor takes up Taylor's negative feelings by reformulating (on formulations see e.g. Antaki 2008; Bercelli et al. 2008a) them in an *assessment*. In contrast to Taylor, she makes a point, though, to include positive aspects.

(9.11) Counselor (Thread: Taylor; Entry 6)

I'm conscious of hearing lots of 'what's the point' statements Taylor, and how much of your anxiety is focused on the future with your boyfriend. I'm also aware of hearing how you want to have a positive focus as well and to motivate yourself with

good thoughts about your relationship. Those pointless thoughts feel pretty heavy and I get the sense that they weight you down and can dominate your thoughts at times. *What affect do you think these thoughts have on your anxiety and self-esteem?*

She demonstrates her understanding (*I'm conscious, I'm also aware, I get the sense*) and displays empathy towards Taylor with her acknowledgement of the pain Taylor is in. Clearly, the counselor tries to show Taylor that she recognizes the emotional effect of Taylor's negative thoughts. The counselor follows this *assessment* with a *request for information* (the text passage in italics) that is designed to make Taylor reflect on her negative thoughts. I argue that the counselor is already aware of the effect: she does not request specific information that she does not have access to, but rather aims to trigger self-reflection in Taylor. That is, the counselor is trying to position Taylor as an observer of her own behavior and the emotional consequences.

The counselor adds a further paragraph in which she tries to steer Taylor back to the technique of destroying the mental image of the negative thoughts:

- (9.12) Counselor (Thread: Taylor; Entry 6)  
*How are you getting on with using an image to destroy those unhelpful thoughts Taylor? Or you could try focusing on a positive image of how you want to be, listening to calm, positive thoughts.*

The counselor crafts her request with the present continuous to suggest that Taylor has been practicing. In addition, she provides Taylor with

further advice that contains an alternative technique that Taylor could try out. Insofar as the counselor would like Taylor to practice those techniques, she is positioning herself as an advice-giver and Taylor as the recipient of the advice.

Taylor reacts to the input from the counselor shown in examples (9.11) and (9.12) with a response to the request in the former about how her negative thoughts affect her self-esteem. However, she does not respond to the request in example (9.12). Her response to the request in example (9.11) is given below in example (9.13). She describes her mental and emotional state in a *problem statement* that links her negative thoughts to her feelings of inadequacy in performing daily tasks:

- (9.13) Taylor (Thread: Taylor; Entry 7)  
Probably not great. Its easy to screw something up as small as making dinner, or losing a game, and just thinking ‘whats the point’ and it seems to expand to everything in my life. I don’t feel like Im worth much I guess. I don’t think anyone would miss me if I just disappeared, I don’t feel like I add anything. This is one of the reasons I study neuroscience, so I can help cure depression so no one needs to feel like shit and so my life would actually be worth something.

Once more, Taylor focuses mainly on describing her negative emotions (*screw up, losing, whats the point, [not being] worth much, disappeared, shit*) and appeals for further empathy. This indicates that Taylor is not ready to engage in self-reflection. She has thus resisted the counselor’s move towards more positive aspects of her behavior in example

(9.11): *positive focus, motivate yourself*. According to MacMartin (2008), clients sometimes resist counselor's optimistic questions that seem to foreground clients' positive behaviors rather than their troubles. Lamerichs and Stommel (2016) also warn of the negative impact on the ensuing interaction that contrastive questions that aim to reduce the clients' troubles can have. Taylor's repeated focus on her negative emotional state legitimizes her need for (further) support and continuously positions her as an advice-seeker. In her response to Taylor's answer, the counselor does not mention the suggested coping techniques anymore and instead tries to encourage Taylor to take on another perspective by asking what someone else would say in her current situation (not shown here for reasons of space). These findings are in accordance with MacMartin's (2008): as it ensures the continuation of the therapeutic work, even resistance can to some degree advance the therapeutic process.

### *Third Paragraph: The Destruction of the Thoughts*

While the first paragraph focuses on the action of gardening and the second on recognizing negative thoughts, the third paragraph offers the clients instructions about how to destroy the unhelpful thoughts that they recognized. It is important to keep in mind that the paragraph I am discussing here occurs in the same entry as the initial input on the metaphor (in Chris and Mel's case: in entry 2, in Taylor's case: in entry 4). The counselor instructs the clients to imagine *the thought ... in solid letters* and to *destroy* it.

## (9.14) Counselor (Thread: Mel; Entry 2)

*Try and imagine that the thought is in solid letters you can grab (carved out of stone, made of glass, wood, built of bricks etc), then imagine you are destroying those words (blowing them up, burning, smashing or shredding them). This gives your mind a powerful message that you are no longer listening to them. What is your image Mel?*

In the *advice-giving* move, the counselor uses imperatives (*imagine*). Imperatives in *advice-giving* moves have been found in a range of studies (see e.g. Locher 2006; Morrow 2012; Placencia 2012; Rudolf von Rohr 2018; see also Chapter 7 for a discussion on imperatives). The imperative foregrounds the action. This is especially salient here with an imagined action. The counselor slightly mitigates (*try to*) the imperative of the cognition verb. Since it is not an easy task, the mitigation serves to save the clients' face in case they are not successful. She provides concrete examples of the way such images can be destroyed (*blowing them up, burning, smashing, shredding*). The gerunds emphasize the immediacy of these actions. In addition, the examples are visually impressive, which facilitates the imagination of such actions.

In the following *request for information*, the counselor asks the clients *what image* they have used. She does not use any mitigation in this request. Instead, she asks a direct question (*What is your image Mel?*). Since this task is difficult, especially for clients who suffer from low self-esteem, the directness serves as an invitation to share a very clear image. The advice and the direct request position the counselor as the source of the coping technique, which reinforces her identity as an



advice-giver. Nevertheless, she still invests extensive work into positioning the clients as the active executors of the technique.

Taylor does not respond to this last paragraph. However, both Chris and Mel provide an answer. Chris' response is shown in example (9.15). I discuss this response from Entry 3 and the counselor's reaction to the response, which occurs in entry 4 and is provided in example (9.16).

- (9.15) Chris (Thread: Chris; Entry 3)  
*This has also worked more than I expected it to. Instead of picturing the questions I ask myself, I picture the words 'depression' or 'anxiety' and think of destroying them.*

Chris uses an *assessment* to praise the usefulness of the coping technique. His initial skepticism towards this technique is still noticeable (*worked more than I expected*) which can be interpreted as face-threatening to the counselor. Nevertheless, Chris clearly indicates that he has applied the coping technique. He positions himself as an active applier of coping techniques and the counselor indirectly as an expert advice-giver, as she was the source of the technique. However, Chris also manages to position himself as an expert who has been able to alter the technique to make it more effective for him personally. This positions him as an active self-helper who can adjust coping techniques to his specific circumstances.

In her response in entry 4, the counselor signals agreement (*Yes*) and assesses the altered technique positively (*really effective*).

However, she does not explicitly position Chris as the source of the altered technique:

- (9.16) Counselor (Thread: Chris; Entry 4)  
Yes, that's another really effective way to use imagery. By destroying these thoughts you are saying to your mind, that you are not going to listen to them. Remember them to focus onto something helpful, such as your list of achievements, or just a TV programme or music that you enjoy.

She displays her expert knowledge with her comments on why the altered technique is working from a psychological perspective, provides advice with her reiteration of how Chris should focus on something positive after the destruction image, and makes a direct link to her suggestion of a *list of achievements*. This list of achievements is provided in the last phase of the garden metaphor (see example (9.24) below for my discussion of this suggestion), so it occurs in entry 2 in Chris' thread, i.e., it already exists at the time the counselor wrote the text passage shown in example 9.16. With her reference to the list of achievements, the counselor links two phases of the garden metaphor and reinforces her position as an expert advice-giver.

In these examples, Chris' application and alteration of coping techniques positions him as an active participant in the therapeutic alliance. He also acknowledges that the technique works for him. The counselor responds positively and mentions the effectiveness of Chris' alteration. However, when she provides further suggestions, she again positions herself as an advice-giver instead of foregrounding Chris'

new position as active participant in the therapeutic alliance with, for example, praise of him as the source of the altered coping technique.

Mel also responds to the counselor's request to share images of how she mentally destroys negative thoughts. She is not as successful as Chris in applying the suggested technique, and she and the counselor address this issue in entries 3 to 6. I illustrate this with examples (9.17) to (9.20), starting with Mel's *problem statement* about her application of the technique:

(9.17) Mel (Thread: Mel; Entry 3)

I've had a go with the 'smashing' image. I'm finding it hard – I think one reason is that I tend to get multiple negative thoughts arriving quickly, so it's hard to identify and 'grab' them in time. I might need some more practice!

Mel provides the specific destruction image she thought of, which directly responds to the counselor's request. In contrast, Chris replied in a more abstract way with his report on how he altered the technique. Mel's answer, then, positions her as a source of information and a recipient of the advice the counselor provided, while Chris positioned himself as an active and equal participant in the therapeutic alliance.

Mel evaluates the technique as being *hard*. She explains that *multiple negative thoughts arriv[e] quickly*. However, instead of finding fault with the technique or criticizing the counselor for providing it, she attributes her difficulties to the fact that she *might need some more practice*. This suggestion that she is responsible herself clearly saves the counselor's face. In the study by Stommel and van der Houwen (2014), clients in email counseling also avoided blaming the counselor

for what they perceived to be impersonal answers. In their case, the clients blamed the medium rather than the counselors. In contrast, Mel blames the fact that she has not had enough practice yet. Overall, Mel positions herself as an (as of yet) unsuccessful applier of the coping technique. This clearly provides the counselor with an opportunity to give further advice.

As example (9.18) shows, the counselor takes up this opportunity and suggests an alternative technique in an *advice-giving* move that is followed by a *request for information*:

- (9.18) Counselor (Thread: Mel; Entry 4)  
*Yes, or another way that might help, is that when you feel low, to use an image that represents feeling strong, calm, happy and confident to focus on. What might this Mel look like? What is she wearing, what is she doing, what expression does she have etc?*

The *advice-giving* move starts with a brief agreement (*Yes*) that acknowledges Mel's struggle. The agreement signals alignment with the client and might be used to facilitate the uptake of the advice, i.e., the new coping technique. This quick focus on the solution rather than the problem is a clear reflection of the solution-focused approach the counselor practices (Gingerich and Wabeke 2001; Kim 2008). The advice itself displays the counselor's expertise: she has skillfully taken on board the specific problem that Mel reported. As Muntigl et al. (2014) have shown, affiliation of emotional stance is highly important in counseling. Thus, when the counselor recognizes Mel's specific troubles and provides a suitable suggestion, she facilitates the uptake of the advice.

She then proceeds to request another clear description of an image through direct interrogatives, simple vocabulary and the present continuous. These are the same linguistic characteristics that the counselor used in the request to share the destruction image.

Mel demonstrates that she has applied this new suggestion in a *problem statement* in which she reports back on the difficulties she has encountered in conjuring the image:

- (9.19) Mel (Thread: Mel; Entry 5)  
It's not easy to imagine: perhaps smiling... I'm finding it hard to know who I am at the moment, from basic things like what I wear to what I want to do with my time and my future. I think I'm having trouble generating this image because of indecision – I don't know what I want it to look like.

This again positions her as an unsuccessful applier of the coping technique, but this time she does not say that she thinks she simply needs more practice. Instead, she describes her difficulties in more detail and provides a reason why she encounters them. She thus positions herself as an observer who can provide vital information that will help her and the counselor to work further on this issue. Nevertheless, her admission that she is not quite sure who she is at the moment can be interpreted as a threat to her own face.

The counselor displays her understanding in an *assessment* and consoles Mel about her admission.

- (9.20) Counselor (Thread: Mel; Entry 6)  
That makes sense Mel. As you practice being kinder to yourself, putting your views and needs

first, you will start to get a clearer sense of who you are and what you want from life.

Again, the counselor clearly focuses on Mel's explanation of her difficulties rather than the difficulties themselves; this is part of solution-focused therapy's attention on "solution talk" rather than "problem talk" (Gingerich and Wabeke 2001: 34). The counselor assures Mel that she will *get a clearer sense of who [she is]* with time and practice. She goes on to introduce Mel to the practice of mindfulness to help her shift her focus to the present and herself (not shown in example). Overall, Mel's reports on her difficulties in applying the coping techniques position her as an unsuccessful applier who needs further help. At the same time, her explanation of why she struggles positions her as an observer who provides important information. The counselor briefly consoles and then encourages Mel, and provides further advice, which reinforces her advice-giver role. Nevertheless, it is Mel's criticism of the techniques as well as her observations that help the counselor intervene with a further coping technique. This corroborates the argument that even *problem statements* about applications of advice can advance the collaborative work in the therapeutic alliance, and is reminiscent of MacMartin's (2008) finding that even resistance can be therapeutically useful. In my opinion, it is the counselor's supportive relational work that negotiates the therapeutic alliance in such a way that Mel feels comfortable sharing her difficulties openly. And this in turn facilitates the search for a more appropriate coping technique in the end.

*Fourth Paragraph: It Takes Time and Practice*

In the fourth paragraph of the text block about sorting out the untidy garden, the counselor encourages the clients to keep on trying this technique as *it takes time and practice*. It is important to keep in mind that this text block occurs in Entry 2 in Chris' and Mel's threads and in Entry 4 in Taylor's thread. In other words, at the time of writing this fourth paragraph, the counselor has not received the input from the clients I have discussed above. The counselor does not refer to the metaphor *per se* anymore, but simply to the image the clients are supposed to imagine.

(9.21) Counselor (Thread: Mel; Entry 2)

Every time you use this image Mel you are giving your mind a message – you're not welcome anymore! Obviously it takes time and practice for your mind to get the message and to start with the thought will keep popping back as it is used to being listened to. So to help refocus away from the thought, immediately you have used your image, turn your attention to something positive to make it more difficult for the negative thought to pop back again. This could be thinking about a happy memory or putting on music you know makes you feel good, watching a favourite dvd - distracting your mind!

The counselor carefully considers the clients' face and tries to foresee potential difficulties that they might encounter. She begins by summarizing the effect of the technique: *you are giving your mind a message*. The counselor's use of second person pronouns (*you, your*) positions the clients as the executors of the coping technique. In addition, her use of tense (present simple) indicates that the clients should habitually execute this technique. At the same time, the counselor acknowledges that

applying this technique is difficult. The stance adverbial (Biber et al. 2007: 764, 966) *obviously* boosts this acknowledgement. The counselor carefully describes a possible difficulty. She suggests that it is not the clients who might not succeed; rather, it is the *negative thought* that might *pop back again*. All of these linguistic choices serve to save the clients' face in case they encounter difficulties. These clear depictions of difficulties and the counselor's encouragement to overcome them are written in the same entry (entry 2) as the advice-giving occurs. This is a specific idiosyncrasy of online counseling when compared to face-to-face counseling, as several turns by the client would interrupt the counselor's metaphor in face-to-face encounters. Ekberg et al. (2013) found a similar pattern in which counselors added an information-soliciting question directly after commiserating with the clients' problem statements, i.e., the commiserating and the information-soliciting question occurred in the same turn. They argued that this speeds up the process of counseling as it directs the interaction quickly towards a next phase.

Taylor does not respond to this last paragraph of the sorting-out phase. However, both Chris and Mel respond. They both implicitly report that they have applied the technique, but at the same time admit that they have encountered some difficulties:

(9.22) Chris (Thread: Chris; Entry 3)

At the moment, this technique is a very short-term fix, and the niggling thoughts sometimes come back within the hour.

(9.23) Mel (Thread: Mel; Entry 3)

I think I'm getting better at this aspect, although thinking of a happy memory sometimes upsets me because I



begin to wish I was that happy at that moment but, at that moment, it doesn't seem possible.

Chris and Mel use *problem statements* to report on their struggles (*short-term fix, upsets me*). When Chris blames the *niggling thoughts* rather than himself for the difficulties, he echoes the counselor's phrasing of the cause of difficulties. This is not the case in Mel's response. She criticizes herself, because [*she*] *wish[es she] was that happy*. Nevertheless, both clients indicate with their reports on how their application of the coping techniques has gone that they are willing to actively participate in the therapeutic alliance.

I argue that these responses are highly salient for the therapeutic process and the therapeutic alliance. The counselor invests extensive work to foresee possible difficulties. Since the counselor does not request any information at the end of the paragraph, the clients do not need to respond. The fact that both Chris and Mel report on their difficulties suggests that they feel comfortable enough to report that the application has not just run smoothly. This is a testament to the counselor's relational work, her concern for the face of the clients and her willingness to invest extensive effort into negotiating the therapeutic alliance.

#### **9.2.4 Refocusing**

The last phase of the garden metaphor *refocus[es] onto building up [the clients'] self-esteem*. As with the sorting-out phase, the counselor uses several paragraphs to describe this phase. Example (9.24) shows the

entire text block of this phase from entry 2 in Mel's thread. I will discuss the paragraphs one by one in examples (9.25) to (9.28). In contrast to the previous phases of the metaphor, the clients did not respond to several individual paragraphs. Instead, Mel and Taylor respond at the end of the entire text block and Chris responds in a different place in the thread. I will report on these responses after explaining the entire text block of the refocusing phase shown here.

(9.24) Counselor (Thread: Mel; Entry 2)

<List of positive qualities and achievements: *Let's now think about ways to help you refocus onto building up your self-esteem, instead of undermining it. Write a list of your positive qualities (**I am...**) and achievements (**I have ....**) - academic, sporting, musical, travelling, difficulties overcome etc. and pin these lists up where you can see them every day Mel, to help you connect to these real pieces of evidence of who you are!* List of positive qualities and achievements>

<Accounting for difficulties: *I'm guessing that your first reaction will be, I can't think of any! This is quite normal, especially with people who have low self-esteem. Maybe start by writing down ones you know you had in the past – fun, friendly. None of us has all our positive qualities out on display all the time. It is easy to think, 'yes, but' after every quality you think of. This is ok, it's about helping you to refocus on them, even if you feel some have not seen the light of day for a while! Achievements need not be academic or ones where you got a certificate. They could be something you did for a short while, or a one off event. Accounting for difficulties>*

<Pinning up the list: *Maybe get your Mum or boyfriend to help you. It is likely to feel uncomfortable at first as you are not used to acknowledging them; this is normal. **Pin them up somewhere you can see them every***

**day, to help you connect to them.** Pinning up the list>

<Asking for client's opinion: *How does this sound as something to try Mel?* Asking for client's opinion>

In the first paragraph, the counselor suggests that clients write a list of positive qualities and achievements. In the second paragraph, the counselor accounts for difficulties and how to counter them. The third paragraph is used to suggest getting help and to further normalize difficulties, while also suggesting they pin the list up somewhere. I call this paragraph 'pinning up the list' as I see the previous suggestion as a face-saving strategy that facilitates the activity of pinning up the list (I explain this in more detail below). Finally, the counselor asks clients for their opinion in the last paragraph.

*First Paragraph: List of Positive Qualities and Achievements*

The main aim of this paragraph is to help the clients recognize and nurture their *positive qualities and achievements*. The paragraph consists of a *metacomment* and a *request for information* move. This text passage is written in italics and thus aims to elicit an answer from the clients, so it is coded as a *request for information* despite its advisory character.

(9.25) Counselor (Thread: Mel; Entry 2)

Let's now think about ways to help you refocus onto building up your self-esteem, instead of undermining it. Write a list of your positive qualities (**I am...**) and achievements (**I have ....**) - academic, sporting, musical, travelling, difficulties overcome etc. and pin these lists up where you can see them every day Mel, to help

*you connect to these real pieces of evidence of who you are!*

In the *metacomment*, the counselor references the therapeutic alliance with the “collective first person imperative” (Biber et al. 2007: 1047) *Let’s*, which aims to “propose a joint action by speaker and hearer(s)” (Biber et al. 2007: 1117). That is, the counselor positions herself and the client as a team who work collaboratively to improve the client’s well-being. She immediately switches to second person pronouns, however, to position the client as the agent of the action (*building up*). The following *request for information* is written in imperative form and does not include any hedges. Since the action itself is aimed to enhance the clients’ face, no hedge is necessary. The counselor includes phrases that aim to facilitate the writing of the clients’ list with first person singular pronouns (*I am...*, *I have...*) in reported speech and provides various areas in which such qualities or achievements could have occurred. Moreover, the counselor clearly establishes that the clients possess good qualities and achievements: she uses second person possessive pronouns (*your*) when talking about qualities and achievements, and she describes them as *real pieces of evidence of who* the clients are. Evidence is usually linked to hard facts. The counselor’s use of this term, with the booster *real* and the exclamation mark, thus aims to enhance the clients’ face.

#### *Second Paragraph: Accounting for Difficulties*

This paragraph is highly salient from a CMC perspective. The counselor foresees that the clients might encounter difficulties. Due to the

asynchronous nature of email, the clients cannot report on these difficulties immediately, as they could in face-to-face encounters. To not lose precious time, the counselor invests considerable effort in depicting the clients' side of a possible conversation about the clients' difficulties. She further provides solutions for such difficulties. This demonstrates her expertise and experience as a counselor:

(9.26) Counselor (Thread: Mel; Entry 2)

I'm guessing that your first reaction will be, I can't think of any! This is quite normal, especially with people who have low self-esteem. Maybe start by writing down ones you know you had in the past – fun, friendly. None of us has all our positive qualities out on display all the time. It is easy to think, 'yes, but' after every quality you think of. This is ok, it's about helping you to refocus on them, even if you feel some have not seen the light of day for a while! Achievements need not be academic or ones where you got a certificate. They could be something you did for a short while, or a one off event.

The counselor downplays her expertise to some degree. For one, the use of the mental activity verb *guess* indicates that it is the clients' epistemic right to agree or disagree with the counselor's guess. In addition, the counselor uses direct speech (Biber et al. 2007: 1118) to present the clients' voice (*I can't think of any*). This gives their voice more weight. Beckwith and Crichton (2014) have found that counselor's in CBT construct the client's voice to mitigate possible resistance to the homework that they are given. They argue that such strategies highlight the counselor's expertise. I argue that these choices also advance the therapeutic process in the short-term therapy format that the counselor employs. In addition, she saves the clients' face by anticipating difficulties. As the

counselor has already mentioned that it is normal to encounter such difficulties, clients can report on any difficulties they encounter without threatening their own face. In other words, the counselor invests extensive work to take the clients' face concerns into account and to safeguard the therapeutic alliance, while also aiming to advance the therapeutic process. As I have previously noted, this is reminiscent of what Ekberg et al. (2013) found in online Cognitive Behavioral Therapy, where counselors commiserated with clients and asked a further question to elicit information in one single turn.

*Third Paragraph: Pinning up the List*

At the beginning of the third paragraph, the counselor suggests that the clients enlist the help of friends and family:

- (9.27) Counselor (Thread: Mel; Entry 2)  
Maybe get your Mum or boyfriend to help you. It is likely to feel uncomfortable at first as you are not used to acknowledging them; this is normal. **Pin them up somewhere you can see them every day, to help you connect to them.**

The imperative *get* is downplayed by the hedge *maybe* and is followed by an *assessment* that normalizes the difficulties. In an *advice-giving* move, the counselor then reiterates that the clients should pin up the lists (written in bold font to emphasize its impact). In fact, she uses the same lexemes and syntactic choices that she used the first time she mentioned that the clients should create and pin up a list. This repetition, combined with the use of bold font, foregrounds this piece of advice.

As the action itself aims to enhance the clients' face, no hedges or mitigation are needed.

*Fourth Paragraph: Asking for Clients' Opinion*

The last paragraph of the refocusing-phase consists of one sentence in the form of a *request for information*:

- (9.28) Counselor (Thread: Mel; Entry 2)  
*How does this sound as something to try Mel?*

The counselor does not ask about specific aspects of the coping technique, but rather asks a general question about whether the clients would like to try the technique. Importantly, the counselor positions the clients as the ones who can make the decision whether they want to apply the technique.

*The Clients' Reaction to the Refocusing Input*

Mel and Taylor respond to the last *request for information* I just presented above. Mel actively applies the technique and reports back to the counselor how she fares.

- (9.29) Mel (Thread: Mel; Entry 3)  
 I've done the list and it does help focus on my positives.  
 I do feel that I could write a list of negatives too but I'm  
 trying to push those thoughts away!

She explicitly says that she has complied with the advice and that the technique is helpful. She admits, however, that she has encountered difficulties as well. She immediately presents a solution for these difficulties. Overall, Mel positions herself as an active applier of the coping

technique who is willing to tackle the difficulties she encounters in the application.

The counselor responds positively to Mel's report and takes up Mel's difficulties:

(9.30) Counselor (Thread: Mel; Entry 4)

☺ You might also find it helpful Mel, at the end of the day to write a list of three things you have achieved or when well that day. It takes just a minute or and can include meeting someone for coffee, or writing part of an assignment, or even finishing one! Get a pretty notebook just for this and see the lists growing. It will help you to focus at the end of the day on what you have done, and enjoyed, and not on what you think you haven't done!

The counselor displays her positive affect through a smiley emoticon (Dresner and Herring 2010). The emoticon can also be interpreted as an alignment with the positive tone of Mel's response. In an *advice-giving* move, the counselor provides Mel with an alternative way of applying the technique. At first, the counselor hedges her suggestion (*might, also*), but then even chooses imperative form to suggest Mel *get a pretty notebook just for this*. As buying a notebook is not a face-threatening task, no mitigation is needed. She immediately explains why this strategy will be helpful to Mel. Mel responds in the next entry that she bought a book and that she will continue to write down achievements (not shown any more here).



Taylor also responds to the counselor's question about whether she would like to try the suggested coping technique. However, she encounters more difficulties than Mel does:

- (9.31) Taylor (Thread: Taylor; Entry 5)  
Sounds like a good idea, just need to think of some good qualities!

Taylor aligns with the counselor by reacting positively towards the suggestion. However, she mitigates this alignment through the use of the structure *sounds like*. Additionally, she explicitly says that she cannot *think of [any] good qualities*. She boosts the explicit message with the exclamation mark. This positions her in two specific ways: on the one hand, she seems to indicate that she does not possess any good qualities. This admission threatens her face, especially as she does not seize the opportunity the counselor provided to praise some of her own good qualities. On the other hand, with her failure to provide examples, she seems to implicitly position herself as a rather inactive participant in the therapeutic process. Taylor thus seems to be resisting the counselor's optimistic description of Taylor's positive qualities and achievements. This resembles the resistance to optimistic questions that MacMartin (2008) found in face-to-face solution-focused therapy. She interpreted this resistance from clients as a sign that they are not ready to focus on their resources rather than their problems.

Nevertheless, the counselor takes up Taylor's input and provides some examples to help her find some good qualities:

- (9.32) Taylor (Thread: Taylor; Entry 5)  
 Ok, well list some here for me Taylor. Looking back through this email exchange you have identified a few already!  
**“I am very hard working”**  
**“I am motivated” (keeps me motivated)**  
 Have a look through this link of affirmations and highlight the ones that you connect to and like the sound of and pin it up where you can see it every day to help you focus on them!  
<http://www.getselfhelp.co.uk/affirmations.htm>

The counselor has made the effort to look through the previous entries that Taylor wrote and quotes some text passages directly (and manually) in her response in quotation marks (“*I am very hard working*”, “*I am motivated*”). This is especially remarkable, because the counselor reported in the interview that time constraints usually prevent her from re-reading entire threads when she writes a new entry. With the listing of these qualities, the counselor indirectly praises Taylor. Additionally, her observation that Taylor had mentioned these good qualities herself positions Taylor as a good observer of her own behavior and attitudes. Similar to Hamilton’s (1998) finding that patients constructed doctor’s utterances through direct speech and thereby gave the doctor’s voice more force in the patients’ narratives, the direct quoting of Taylor’s own statements enforces the content of these statements. This makes it more difficult for Taylor to disagree with these qualities, as she had proposed them herself. Finally, the counselor refers Taylor to a website that contains positive affirmations. Taylor can use the website to find

further good qualities and achievements. In all these ways, then, the counselor tries to position Taylor as a potential active participant in the therapeutic process. However, Taylor does not respond at all to the counselor's input, and the interactants start to focus on other events that trouble Taylor.

Chris and the counselor talk about a list of positive achievements in several passages in Chris' thread. Chris responds to the idea of writing a list in such a case, but not directly within the garden metaphor. I present the response that he gives to the list here. It did not occur within the refocusing phase of the metaphor, however, but in a different place in the thread.

(9.33) Chris (Thread: Chris; Entry 3)

While I have not written these as a hard-copy yet (as I live in a very public environment, and I feel like a list of this type would lead to questions from my housemates that I would not feel comfortable answering), I have thought about such achievements during my low points, and this seems to be helping in some way.

Chris' overall positive evaluation of the coping technique is accompanied by his explanation why he does not feel comfortable producing a *hard-copy* of the list. While he positions himself as an active applier of the coping technique, he also raises the counselor's awareness about a problematic aspect of the application. Notably, he does not criticize the counselor, nor does he suggest the technique is not helpful. Rather, his specific circumstances prevent Chris from applying the technique in the exact way that

the counselor suggested. Ekberg and LeCouteur (2015) found similar responses that highlighted external factors that prevented patients from complying with therapists' proposals for behavioral change. Through this disclosure, however, Chris opens an opportunity for the counselor to give further advice on how to deal with this issue.

The counselor responds to Chris' input with an *assessment* and briefly aligns with the positive effect the technique seems to have on Chris (*That sounds useful*):

(9.34) Counselor (Thread: Chris; Entry 4)

That sounds useful. I'm wondering whether you could write the list as a phone memo or on your computer? So it is still written (which makes them more solid and tangible), while safe from anyone else reading them.

She immediately follows up this *assessment* with a *request for information* that includes an alternative suggestion. This suggestion is mitigated through lexical choices (*I'm wondering whether, could*) and by the explanation that immediately follows. The counselor cleverly takes Chris' hesitation about the technique into account and thereby saves his face, while also demonstrating why the technique works and how he could adjust it so it is compatible with his circumstances. The counselor thus acknowledges and reinforces the positioning of Chris as an active applier of the coping technique. At the same time, she positions herself

both as an expert on the coping technique and as an advice-giver who takes Chris' difficulties seriously and adjusts her input accordingly.

Chris embraces the counselor's suggestion in an *assessment* in entry 5:

(9.35) Chris (Thread: Chris; Entry 5)

I also thought about writing a list somewhere more private and forgot about it again until you mentioned it. This evening I shall write a positive list on my computer and phone, and I'll be sure to look over it if I'm ever feeling self-critical.

Chris' answer is highly salient from an interpersonal-pragmatic perspective. Instead of foregrounding the counselor as the source of the suggestion, he says that he *also thought about* the same solution himself. His reiteration of the counselor's suggestion to write the list on his *computer and phone* clearly acknowledges the usefulness of the counselor's input. While he admits that he *forgot about it again*, he positions the counselor simply as someone who *mentioned* this solution to him and not necessarily as the source of the solution overall. Chris thus positions himself and the counselor as equal partners in the therapeutic alliance, who propose similar suggestions.

The counselor's subsequent *assessment* reinforces Chris' positioning as the source of the solution:

(9.36) Counselor (Thread: Chris; Entry 6)

**This is a great idea and it would be good to hear how it is helping you. It all comes back to 'we all have the *ability* to choose how to respond', and having these lists will help you respond to anxiety by shifting your focus onto recognising and connecting to your strengths and attributes! 😊**

Her praise of the *great idea* suggests that it is Chris' rather than her own. This positions Chris as a resourceful and active self-helper. The counselor also asks Chris to let her know how he fares with the technique, but she does so in a way that does not necessarily position her as the expert to whom Chris needs to report. Instead, the counselor's question is mitigated through a declarative form and through the modal verb *would*. In addition, she does not use italics to mark her question as a request. This positions the counselor as a bystander who is interested in Chris' activities rather than as an advice-giver or expert. If the *general information* move that follows slightly foregrounds the counselor's expertise again in her explanation of why such lists can help Chris, she nevertheless continues to use second person pronouns to demonstrate that Chris is the agent of the technique and therefore the source of the activities that improve his well-being. Last but not least, the counselor ends with a smiley emoticon that sums up the counselor's positive evaluation of the discussion of this technique.

### 9.3 The Jungle Path Metaphor

In two of the three threads I discussed above (Chris' and Taylor's), the counselor adds a further text block that alludes to the MIND AS SPACE metaphor and that uses nature as a source domain: the jungle path metaphor. I present this text block in its entirety in example (9.37). It is taken from Chris' thread, but occurs in the exact same form in Taylor's thread as well:

- (9.37) Counselor (Thread: Chris; Entry 4)
- <Description of the jungle paths: Your pattern of thinking anxiously has been around for a while and will take time to change. Imagine your mind is jungle with several well-worn paths cut through the undergrowth. Even though you know that many of these paths lead to dangerous places; a crocodile infested swamp, a family of every hungry fierce tigers living close to the path, quicksand across another path, loose rocks in a cliff above another path; you still keep travelling down them, because they are the only paths in the jungle. Description of the jungle paths>
- <Creating new paths: To create new paths to pleasanter parts of your jungle, where there are green glades that butterflies congregate in, with crystal clear spring water and lush grassy areas to rest on; you know you that to get there you will have to get out your machete and physically cut that new path. This will take energy, time and effort. Creating new paths>
- <Prediction of improvement: All the time the existing paths are beckoning, and you will keep

finding yourself going down them out of habit, as they are familiar and well worn. However, *the more you focus on creating the new path, the more open and easier to travel down it will become, and the less you travel down the old path, it will slowly become overgrown and more difficult to go down.* Prediction of improvement>

<Comprehension question: *Does this make sense?* Comprehension question>

The jungle path metaphor can be divided into four distinct parts: the description of the jungle paths, creating new paths, the prediction of improvement, and the comprehension question at the end. The first part is reminiscent of the counselor's description of the internal garden: simple but visually impressive images are chosen to establish the vividness of the metaphorical image, while the present continuous is used to create immediacy for the clients' action of *travelling down* the same path. The second part deals with the action of creating new paths. Here, the clients are positioned as knowledgeable (*you know that you will have to*) and in control and in possession of the right tool (*machete*). This tool symbolizes the coping technique(s). The application of the coping technique is described as a concrete action (*cut that new path*). The counselor also points out that it will *take energy, time and effort*, which normalizes possible difficulties and problems that clients encounter. The third part predicts what happens with and without intervention. With her use of present simple tense, the counselor characterizes the clients' newly established actions as habitual and therefore as probable.



Finally, the *request for information* asks clients whether her explanations *make sense*.

Overall, the counselor positions the clients as active self-helpers who have various techniques at their disposal and can cope with their difficulties. At the same time, the counselor is positioned not as an expert advice-giver on specific coping techniques but rather as an expert encourager and motivator who wants the clients to use their abilities to deal with their difficulties. Additionally, the jungle path metaphor differs from the garden metaphor as it is only used to explain the application of coping techniques and does not require clients to get actively involved in the discussion of the metaphor. The only place where they are encouraged to participate is at the end when the counselor asks whether the metaphor she used makes sense to the clients.

In Chris' thread, the counselor inserts this text block in entry 4 right after Chris indicated in entry 3 that he struggles with his attempt to destroy the image of his negative thoughts (see example (9.22) above). Taylor reports at the end of entry 5 that she struggles generally with applying all the techniques the counselor suggested. In entry 6, the counselor adds the jungle path metaphor text block after Taylor's *assessment*.

Taylor does not respond to the counselor's jungle path metaphor at all. Chris does not respond directly after the text block that contains the jungle path metaphor, but he refers to it when he evaluates another technique:

(9.38) Chris (Thread: Chris; Entry 5)

I think this technique will help me 'cut a new path', as you suggested in your most recent suggestions.

Chris' reference to the jungle path metaphor makes clear that he understood the counselor's input. This positions the counselor as an expert advice-giver who provided him with a helpful suggestion. At the same time, Chris positions himself as an active applier of the coping technique – that is, as the agent of the action *cut a new path*. This is significant because it implies that Chris can apply the jungle path metaphor in his therapeutic work overall. Chris thus demonstrates his expertise in applying coping techniques and tools that the counselor provides him with, such as these metaphors.

#### **9.4 The Interactive Idiosyncrasies of the Three Threads**

I have outlined the clients' individual reactions to the garden metaphor and the jungle path metaphor above. Overall, we can identify specific interactive differences between the three clients' responses and the subsequent interaction with the counselor. In the interview, the counselor commented on the clients' different responses to the metaphor. I will briefly discuss each dyad and their interaction with the garden metaphor. I will also provide the counselor's input from the interview.

Chris responds to the counselor's garden metaphor with a certain amount of skepticism at first. Nevertheless, he provides answers to the counselor's requests for feedback several times and indicates that he

applied her suggestions. The counselor explains that such skepticism is normal, especially in face-to-face counseling.

It can happen that clients respond with skepticism at first. It happens quite often in face-to-face counseling, where they say “I’m not quite sure whether I want to try that, but I’ll just go with it for the moment.” Such clients need a little bit of encouragement to keep going. (Interview)

The counselor’s awareness of the occurrence of such skepticism and her open-minded attitude about it exemplify how the solution-focused approach to therapy focuses on solutions and on the positive qualities and behaviors of clients (Gingerich and Wabeke 2001; Kim 2008). Furthermore, she demonstrates that she is aware that at times she has to invest work in order to encourage the clients to continue. It is highly interesting that she mentions that such skepticism occurs more often in face-to-face than in online counseling. I suspect that the medium in itself does not play a role with regards to such skepticism. Rather, it might be easier for clients to just not respond in online counseling. In face-to-face counseling, it is more difficult to ignore the counselor’s input, and the skepticism about the metaphor can then become explicit in the clients’ reactions.

The counselor takes up Chris’ input, and they go on to discuss Chris’ self-esteem and the application of the coping techniques in the course of several entries. They also briefly discuss the jungle path metaphor. Chris demonstrates that he understands the metaphor correctly by referring to it in a different section of the thread. In these interactive

sequences, Chris positions himself as an applier of the coping techniques and as an active participant in the therapeutic alliance who tweaks the techniques whenever he needs to. When he adapts the counselor's suggestions of how to improve his low self-esteem, and even comes up with his own, he constructs an identity as an equal participant in the therapeutic alliance. The counselor encourages these positionings through her own choices: she praises Chris for his progress, she foregrounds Chris' active participation, and she positions him as an expert on the coping techniques. Simultaneously, she increasingly positions herself more as a bystander than an advice-giver. This, in turn, reinforces the egalitarian relationship that she and Chris are negotiating.

Mel responds readily to the *requests for information* in the garden metaphor and provides the counselor with important information. She describes her internal garden in vivid fashion (*weedy with a few nice flowers though*) and demonstrates that she is immediately on board with the metaphorical interpretation of self-esteem. The counselor describes this reaction in the interview:

This person must be a visual person, and she just went with it.

(Interview)

However, Mel does not provide the counselor with the same amount of introspection and input as Chris does. Mel mainly reports how the application of the coping techniques has been going. She does not change any aspects of the coping techniques, nor does she come up with any of her own. Moreover, she mentions several times that she struggles with applying them. Importantly, she does not criticize the counselor as the

source of the coping techniques, nor does she criticize the coping techniques themselves. Rather, she suggests that she needs more time and practice for the coping techniques to work, a suggestion that saves the counselor's face. At the same time, she positions herself as an advice-seeker who needs further support. The counselor responds by suggesting alternative techniques that might be easier for Mel to apply. With Mel, then, the therapeutic alliance does not change in the same way as in Chris' thread. Throughout the interactive sequence of the garden metaphor, Mel is an advice-seeker who applies the coping techniques the counselor provided from her position of advice-giver. It is important to keep in mind, though, that the interaction between Mel and the counselor still progresses and that Mel is repeatedly positioned as an active applier of the coping techniques.

This is not the case in Taylor's thread. Taylor seldom responds to any of the counselor's *requests for information* in the garden metaphor sequence. The requests she responds to center around the notion of unhelpful and negative thoughts. In these cases, she reports on the negative messages that she gives herself and lists several of them. She does not indicate whether she applied the suggested techniques of the garden metaphor and does not report on any progress with regards to her self-esteem. The counselor argues in the interview that Taylor might simply not be a visual person:

This person is possibly just not a visual person and was thinking "what's this all about." I know not everybody's visual. I tend to react by saying "ok, that's fine, don't worry about it. That wasn't helpful for you, let's think of something else." (Interview)

While the counselor might be right about Taylor not being a visual person, there might have been other causes of Taylor's hesitant behavior in response to the garden metaphor. In other sequences in the thread, Taylor does not respond to many other *requests for information* from the counselor either. In other words, the garden metaphor is just one example among many of how Taylor does not react to input from the counselor. It is telling that she does respond in cases where she can report on her troubles and problems. In the garden metaphor, those are the requests that focus on the unhelpful thinking patterns. The content analysis in Chapter 6 revealed that Taylor uses *problem statements* right until the end of the thread. This is rather unusual in comparison with the other clients, who move towards mostly using *assessments* in later entries (see also my discussion in the following chapter on the closure process in the counseling exchanges). It might be that Taylor struggles more with the counselor's therapeutic approach than with the visual nature of the metaphor. In solution-focused brief therapy, counselors are supposed to foreground clients' strengths, positive qualities, and solutions rather than talk at length about the clients' problems. Taylor may simply not respond well to this kind of therapy.

In addition, in later entries Taylor indicates that she has been applying some of the coping techniques the counselor suggested. This is a further indication that she might struggle with the short-term therapy format that the counseling service offers. She might need a little more time to progress than the other clients do. All in all, it is likely that all of these issues influence Taylor's contributions to the counseling

exchange. But the counselor does in fact struggle the most to establish a positive therapeutic alliance with Taylor, and she does not manage to facilitate the transformation of Taylor's identity in the same way she did with the other two clients.

### **9.5 Summary**

This chapter has addressed the process of establishing the therapeutic alliance in the early stages of the counseling exchanges. This was accomplished through an analysis of the garden metaphor text block which occurs in the exact same form in three of the threads examined in this study. In other words, I tracked the early negotiation of the therapeutic alliance in three different threads and by comparing the unfolding interaction in those threads after the same input. This input consisted of a text block in which the counselor explains the psychological concept of self-esteem. I have demonstrated how the interaction in each thread varies after the counselor's introduction of the garden metaphor. Unsurprisingly, each client reacted differently, and the ensuing interactions moved in distinct directions. I showed how the clients' reactions and the subsequent interaction between the counselor and the clients had a direct impact on the therapeutic alliance. In each thread, the therapeutic alliance was negotiated through relational work and the positionings of the individual identities that the interactants performed.

As I have discussed in the previous section, Chris and the counselor establish a relationship in which both interactants collaboratively work to combat Chris' struggles. While the counselor introduces coping

techniques, Chris alters them or comes up with solutions himself. Chris and the counselor thus negotiate the therapeutic alliance as a somewhat egalitarian relationship in which both interactants contribute to solving Chris' struggles.

In Mel's thread, the client and the counselor also both contribute actively to their interaction. The counselor provides Mel with the same initial input as Chris, but Mel struggles slightly more with applying that input than Chris does. As a result, she only reports back on the application without providing her own solutions or adjustments of coping techniques. In this exchange, then, Mel and the counselor are repeatedly positioned as advice-seeker and advice-giver respectively. Mel is also positioned as an applier of coping techniques, but within the theme 'self-esteem' she does not position herself as an active self-helper. This has an impact on the therapeutic alliance: Mel and the counselor seem to enact an asymmetrical relationship in which the counselor is continuously positioned as an expert and Mel as someone who needs support.

Of the three responses to the garden metaphor, Taylor's seems to be the most difficult one for the counselor to deal with. Since Taylor mostly contributes to the problem-focusing aspects of the metaphor, the counselor does not manage to facilitate Taylor's transformation in the same way as she does with Chris and Mel. Taylor almost exclusively positions herself as an advice-seeker and the counselor as an advice-giver. While the counselor tries to position Taylor in different ways, she remains unsuccessful, and Taylor's own relational work continuously reverts her back into an advice-seeker position.



Returning to my theoretical framework outlined in Chapter 2, several observations can be made. First, Davies and Harré (1990: 46) raised our awareness that speakers interpret what goes on in an interaction from the position they have taken up. My analysis of the garden metaphor provides empirical evidence of Davies and Harré's argument. All three clients interpret and respond to the counselor's input in their own way, despite the fact that the input is exactly the same in each thread. Chris takes up the counselor's input as suggestions that he can try out, tweak, experiment with and make his own. He interprets the counselor's input from a position as an active participant in the therapeutic alliance. In contrast, Mel interprets the counselor's input as advice that is provided by an expert and that she is supposed to follow. In other words, she strictly views the counselor's input from a position as an advice-seeker and an applier of coping techniques suggested by an expert. Finally, Taylor reacts to the counselor's input from the position of someone who attends counseling because she wants to talk about her problems. Taylor may respond to requests from the counselor when she asks about Taylor's struggles, but she does not respond when the counselor wants to know how the application of the coping techniques has been going. Each of the clients, then, takes up a distinct position that determines how they interpret both the counselor's input and their ensuing interaction with the counselor.

Second, my analysis provides further evidence that identities always stand in relation to other identities and are intersubjectively achieved (Bucholtz and Hall 2005). The counselor continuously aims

to position the clients as active participants in the therapeutic alliance and as self-helpers who have tools at their disposal to combat their difficulties. She begins doing so with the introduction of the garden metaphor in entry 2 (entry 4 in Taylor's case). While it is understandable that such a position might not be taken up by the clients in early entries, with time both Chris and Mel start to position themselves in similar ways, i.e., as applicers of coping techniques. These changes in the positionings of the clients allow the counselor to shift from being an advice-giver to being an encourager – and in Chris' case, she even becomes just a bystander witnessing his progress. If it is thus clear that the identities within the therapeutic alliance stand in relation to one another and that they are highly interdependent, this becomes the most obvious in Taylor's thread, where Taylor continuously positions herself as an advice-seeker. In response, the counselor does not manage to transform her own identity in the same way as in the other two threads. She is continuously positioned as the recipient of Taylor's troubles tellings and as an advice-giver, but never positioned as an encourager of Taylor's progress, let alone as a bystander or witness of advanced progress, as in Chris' thread. My analysis thus demonstrates the relationality principle of Bucholtz and Hall's (2005) approach to identity and foregrounds the intersubjective nature of identity construction.

Third, previous research has demonstrated that empathy is an interactional achievement that consists of empathic opportunities, displays of empathy and the ratification of displays of empathy (Muntigl et al. 2014; Pudlinski 2005; Wynn and Wynn 2006). While I have also

shown that appeals for empathy are often followed by displays of empathy (as has Locher (2006) in her study of the advice column), similar interpretations might be possible for other relational strategies, such as praise. In the garden metaphor, for example, the counselor implicitly praises the clients' positive qualities and achievements. She also asks the clients to write down such positive qualities and achievements on a list. I argue that she thus creates an opportunity for clients to praise themselves. While they do not provide specific examples, Chris and Mel both confirm that they have thought about or even written down such positive qualities and achievements. With this confirmation, they implicitly praise themselves. The counselor's positive evaluation of their work then ratifies their self-praise.

In contrast, Taylor explicitly writes that she cannot think of any good qualities that she possesses. She does not seize the opportunity for self-praise that the counselor created. Still, the counselor does not give up; instead, she provides Taylor with some examples that Taylor herself had previously written about herself elsewhere in the thread (e.g. *I am very hard working*). That is, the counselor ratifies Taylor's previously mentioned positive qualities, and then she goes on to urge Taylor to list more of them. All this gives Taylor an even more explicit opportunity for self-praise. But Taylor does not respond with self-praise nor does she ratify the counselor's praise. It is not just empathy that is an interactional achievement, then, but other relational strategies as well, such as praise or self-praise. However, much more research needs to be

dedicated to this kind of interactional analysis of relational strategies, and it needs to address a wide range of such strategies.

Fourth, my observation that the counselor in my corpus practices a stepwise entry to advice is in accordance with previous research on giving advice (e.g. Heritage and Sefi 1992; Locher 2006; Morrow 2006; Rudolf von Rohr 2018). As in the findings in Locher (2006) and Rudolf von Rohr (2018), I have found that this stepwise entry to advice is realized through specific sequences of discursive moves (e.g. *assessments* precede *advice-giving* moves) and specific relational strategies (e.g. displays of empathy, praise, and encouragement). In addition, I have shown that this stepwise entry to advice can be extended to include a specific ‘exit strategy’: the counselor uses *requests for information* to involve the clients in the unfolding discussion of the advice. Within these requests, the clients are positioned as important sources of information and as observers of their own behavior, attitudes and emotions. This can make them aware of their value as active participants in the therapeutic alliance. Still, my analysis has also shown that not all stepwise entry to advice is successful. Rather, just like relational strategies or positionings, giving advice is an interactional achievement that depends not just on the careful production of advice, but also on its uptake. It is ultimately the collaborative work between the counselor and the clients that makes specific pieces of advice successful.

Finally, with regards to the CMC and counseling context, I have shown that the counselor invests extensive work to adapt to the asynchronous nature of email counseling. For example, she foresees

difficulties that the clients might encounter when applying the advice she gives. She even goes so far to give the clients a voice in her own writing when she depicts their possible reactions through direct and reported speech in the text block of the garden metaphor. As this takes the clients' face concerns into account, such anticipation can itself be interpreted as performing relational work. Her success in such work is a testament to the counselor's awareness of face concerns and to her experience both as a counselor overall and as one who works online in particular. Finally, I have demonstrated that an interpersonal-pragmatic perspective can also shed light on why particular kinds of interactional trouble can occur in counseling exchanges. For example, a close analysis of Taylor's reactions to the counselor's *requests for information* have shown that Taylor focuses on her problems rather than on finding solutions. This clearly clashes with the counselor's psychotherapeutic approach of solution-focused therapy and the counseling services' brief therapy format. With a linguistic analysis of such clashes, linguists can sharpen practitioners' understanding of why such interactional trouble occurs.

## **Chapter 10 The Closure Process in Email Counseling\***

### **10.1 Introduction: From Previous Literature to the Research Questions**

In Chapter 8, I illustrated how narratives are used for specific interpersonal effects. The analysis of narratives from the beginning until the end of the exchanges revealed how the use of relational work and positionings change over time during the counseling process. In Chapter 9, I focused on how the relationship between the counselor and the clients is established within the first exchanges of counseling. I showed that the counselor and the clients are highly collaborative as they work on exploring the clients' identities and in finding ways to cope with difficulties. That is, I provided a holistic approach to the analysis of relational work and identity construction in the first chapter of Part III, and a focus on the beginning stages in the second chapter. In this last chapter of Part III, I analyze the last stages of the counseling process.

Counseling is an ongoing process and does not simply end when clients stop going to counseling. Clients hopefully continue to use the coping techniques they learnt in counseling, maintain their new behavior patterns and work on their attitudes even after attending counseling

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\* This chapter is an extension of the results presented in a previously published article (Thurnherr 2017) that also focused on the closure process of the counseling exchanges. However, Thurnherr (2017) did not include any results from the content analysis and the analysis of the ensuing interaction after the counselor's use of the *metacomments*. The present chapter therefore adds to the findings presented in Thurnherr (2017) by combining the discursive moves analysis with an analysis of the form and function of linguistic expressions that focuses on the entire closure process.

sessions. Nevertheless, ending the counseling sessions is a pivotal moment for clients. They are now “on their own”, or, in more relational terms, independent of the concrete support that the counselor offered during the sessions. They can still draw on everything they learnt in counseling, but the immediate and concrete exchange with the counselor comes to an end. In this chapter, I look at how this ending, or “closure” (see e.g. Robinson 2001; West 2006), transpires.

Specifically, I am interested in the collaborative work that the counselor and the client perform to facilitate a successful closure of the email counseling process. As in the preceding chapters, the previous steps of my analysis (especially the discursive moves analysis) build the foundation for the analysis of the closure process. Neither Locher (2006) nor Rudolf von Rohr (2018) have specifically focused on this process in their analyses. However, Locher (2006) has researched what types of relational work occurred in farewell moves: bonding (*ibid.*: 136), praising (*ibid.*: 140), and humor-bonding (*ibid.*: 147). Rudolf von Rohr (2018) has looked at what types of discursive moves are used in the last position or the one right before, but she does not elaborate on the more fine-grained relational work that might ensue in such (pre-) closing discursive moves. All in all, then, relational work during the closure **process** in online health practices has not been getting the analytical attention that it surely deserves.

Throughout Chapter 2, I highlighted that sequential aspects of interaction, be it medical or otherwise, have received extensive attention in linguistics. Closings have been researched in various contexts in

face-to-face encounters (see e.g. Broth and Mondada 2013; Button 1987; Mondada 2006, 2009; Schegloff and Sacks 1973) as well as online ones (see e.g. Raclaw 2008; Spilioti 2011). In connection with health, four studies of face-to-face encounters are especially noteworthy for my study. First, White et al. (1994) and White et al. (1997) examined how practitioners perform closings in medical encounters. In White et al. (1994: 26), specific physician behavior is identified that seems to facilitate the closing, such as “clarify[ing] the plan of care” or “orient[ing] the patient to specific next steps of the visit itself.” Elaborating on these results, White et al. (1997) have further identified a set of specific communication skills that enable physicians to close medical encounters effectively (White et al. 1997: 164-165): “summarizing the visit, reviewing the plan, setting up the next visit, discussing interim contact, demonstrating caring and offering reassurance.” The focus of this study on how to improve the actual practice of medical practitioners is striking, and the authors explicitly note that “only when both patient and doctor are ready to close the visit will they do so successfully” (ibid.: 163).

Robinson (2001) and West (2006) focus their analyses on preclosings and their “turn-by-turn organization” (West 2006: 381). Robinson (2001) explored whether two types of preclosing sequences were adequate in the sense that clients felt they could express all they wanted to in the encounter. These preclosing sequences are “arrangement making” (Robinson 2001: 643) and a “final-concern sequence” (ibid.: 647). Robinson argued that the final-concern sequence is more suitable to



elicit additional concerns. West (2006: 392-395) identified specific preclosings and examined their sequential patterns. She found the following types of preclosings in her data: “announcement of closure”, “the work of doctoring”, “anything else” questions, and “making arrangements”. The majority of the encounters she researched contained a closing that involved making arrangements. All four studies on face-to-face encounters showed that specific types of (pre-)closings are used and that they are embedded within the interactional context in meaningful ways.

Considerably less research has been done on closings and preclosings in health encounters that take place online. Two studies are of special relevance to my own analysis. Stommel (2012) highlights that counselors in online chat counseling designed each individual closing to fit the specific recipient it was addressed to. Her analysis, which focuses on formal and informal salutations, closings and address terms, reveals that when clients either requested or simply initiated more informality, counselors often emulated this practice. In closings, this meant, for example, less formal farewell formulas, as well as first names at times, instead of first and last names. Stommel (2012) links this recipient design by counselors to the negotiation of positive rapport. Stommel and te Molder (2015) analyzed preclosings in online chat counseling. They found that counselors routinely use preclosings to urge clients to close the chat session. Stommel and te Molder (2015: 287) found three types of preclosings: (1) “questions projecting the client’s future action”; (2) “elicitations of direct advice acknowledge-

ment”; and (3) “offers of a new advice sequence.” Stommel and te Molder have thus illustrated the interactive nature of the closing sequence within chat sessions and even hinted at the interactants’ performance of relational work.

As I have noted elsewhere (Thurnherr 2017), there are four ways in which my analysis of the closure process differs from previous literature. First, my focus lies on mental health encounters. Previous studies have mainly focused on medical encounters, and despite the fact that these encounters also include a health professional and a lay patient or client, the closings in a counseling dyad need to be closely researched as well. Second, the focus of previous studies has mostly been on face-to-face encounters. Apart from Stommel (2012) and Stommel and te Molder (2015), there has not been much other work on closings in online health encounters. Third, most of the studies mentioned above (with the exception of White et al. (1994) and White et al. (1997)) are conversation-analytic studies. Conversation analysts have convincingly demonstrated how (pre-)closings can be interpreted from an organizational and turn-taking perspective. My analysis aims to complement these insights with an interpersonal-pragmatic perspective. This leads me to the fourth distinction between my work and previous studies: rather than single sessions or single encounters, I look at multiple-session exchanges. As a result, I do not analyze the closings or preclosings of single sessions, but rather the closure of the overall counseling process.

The aim of the present chapter is to adopt an interpersonal-pragmatic perspective on the closure of the counseling process and how

relational work and identity construction tie into this process. I aim to answer the following research questions:

- Who initiates the closure of the counseling process?
- What types of closure initiations are used and in what discursive moves do they occur?
- In what type of context do the closure initiations appear?
- What prototypical types of positionings are performed in the closure?
- Are there specific interplays of relational work utilized before, during and after the initiation of the closure process?

The first research question aims to shed light on who initiates the closure process in my data. The result can then serve as a point of comparison with previous research. The second research question explores the types of closure initiations that occur, and which discursive moves they appear in. As with the first research question, this aims to compare my data with other health encounters mentioned above. Like this second question, the third research question also considers the discursive moves of such closure initiations, but here with the goal of determining what kind of pattern of discursive moves is utilized before the closure initiations. Finally, the last two research questions aim to identify the prototypical relational work that is employed in the closure process, with special attention being given to the interplay of relational strategies and the resulting positionings of the clients and the counselor. These research questions guide my interpersonal-pragmatic analysis of the closure process in email counseling.

*Metacomments Functioning as Pivots that Initiate the Closure Process*

I want to briefly clarify how I dealt with some of the hurdles involved in analyzing the closure process. One issue that comes up is how to identify initiations of closures. I found the fact that the counseling exchanges are short-term therapy exchanges very helpful. In other words, the number of exchanges is limited to six sessions (see Chapter 3 for more details on short-term therapy). Close readings of the data revealed that the counselor uses *metacomments* to reference the short-term nature of the counseling. Specifically, the counselor mentions a final upcoming session in four of the threads and explicitly reminds the fifth client that she can only provide short-term therapy. As I have mentioned elsewhere (Thurnherr 2017: 218): “These metacomments can be interpreted as pivots that aim to raise clients’ awareness that the counseling will likely come to an end in the (near) future.” The *metacomments* were my guide as to where the closure process was explicitly initiated. I then extended the locus of my analysis to the interaction that precedes these comments as well as to the interaction that follows. This made it possible to consider how these *metacomments* are situated within the ongoing therapeutic process. My method for doing so was to do close readings of the context surrounding the *metacomments*, with a special emphasis on the discursive moves, relational work and positionings that appear in these contexts.

Stommel and te Molder (2015), as well as Jager and Stommel (2017), have argued that it is the clients’ epistemic right to close a chat counseling session. In my corpus, the counselor initiates the closure of

the counseling process in all five threads with some form of reference to the short-term nature of the therapy that she practices. Stommel and te Molder (2015) and Jager and Stommel (2017) also say that counselors can trigger closings with specific linguistic choices. This is in line with previous studies on closings in medical encounters (Robinson 2001; West 2006; White et al. 1994; White et al. 1997). In my data, the counselor does in fact use specific *metacomments* to make the client aware of a possible final session or of the short-term therapy format in general.

There are three different types of such *metacomments* in my corpus: (1) announcing a last session (Section 10.2); (2) inquiring about a last session (Section 10.3); and (3) inquiring to take stock (Section 10.4). Despite the fact that the difference between the first and the second *metacomments* seems subtle, it is noticeable, especially in the context of the relational work that is carried out before those *metacomments* occur. In other words, these *metacomments* do not appear in a random fashion, but are very specifically used by the counselor at moments that depend on the progress the clients have made in the therapeutic process. In the interview, the counselor discusses her awareness of the subtle differences between the *metacomments*:

Some people might not need all sessions and I get a sense of that with some clients. Like the one where I said “would you like another one”, I probably had a sense “actually they’re really making good progress and they’re identifying changes”. So I was inviting them to make that choice rather than assuming that they would want to continue. And the other ones I could see they will

take all the sessions that are available and so I kept going. (Interview)

The counselor explicitly mentions her recognition of the progress that some clients make, as well as the change that takes place in such clients' relational work. Importantly, the counselor says that when she notices such a change, she invites clients to be part of the decision-making process with regards to a final session. What will become apparent through the close analysis of all three types of *metacomments* in the following sections of this chapter is that both the clients and the counselor have performed intricate relational work and constructed a myriad of identities for both interactants before the *metacomments* appear. The particular realization of the counselor's *metacomments* is dependent on this previous relational work, as the counselor hinted towards in the interview.

In the next sections, I will introduce each type of *metacomment* separately and will point out which threads the counselor used them in. I will further determine the patterns of discursive moves that are used before the *metacomments* and how the interlocutors' collaborative work facilitates the introduction of the *metacomments*. Moreover, a detailed analysis of how the *metacomments* initiate the closure process will be provided. And finally, I will explain how the collaborative work proceeds from the *metacomments* and then describe the actual closure of the counseling exchanges. These discussions of the types of *metacomments* will identify a clear pattern of *metacomments* and show that it is highly dependent on interpersonal aspects of the interaction.

## 10.2 Metacomment Announcing a Last Session

The first *metacomment* I examine is the type “announcing a last session.” West (2006: 393) has found that in medical encounters such *metacomments* are used “few and far.” In my corpus this *metacomment* is used in Ellie’s and Mel’s threads. Table 10.1 shows the specific location of the *metacomment* within their threads. In Ellie’s case, the *metacomment* is used by the counselor in entry 8 and the thread contains eleven entries in total. Entries 9 and 10, which occur after the *metacomment*, constitute session 5 in Ellie’s case. Entry 11 only contains Ellie’s consent for her data to be used in this study. In Mel’s thread, the counselor writes the *metacomment* in entry 10 out of a total of twelve entries. Entry 11 and 12 constitute the last session. In other words, in both threads the clients and the counselor write one more entry each, which taken together are one final session. The *metacomment* therefore seems to work from this rather superficial point of view.

Table 10.1 Location of metacomment according to the total number of entries (Mel and Ellie’s threads)

	Ellie	Mel
Specific entry containing metacomment	8	10
Total number of entries in thread	11	12

In the *metacomment*, the counselor simply announces that the next session will be the last one. West (2006) sees such closure announcements as initiating the closure process. The same can be said here: the *metacomments* seem to indicate that the counselor initiates the closure. However, a close analysis of the context in which this *metacomment* appears reveals that both the clients and the counselor perform extensive

relational work beforehand. It is this relational work that allows the counselor to initiate the closure process in such a straightforward way.

### **10.2.1 The Preceding Context of *Announcing a Last Session***

The discursive moves that are utilized throughout Ellie's and Mel's threads emerge in a certain pattern. Table 10.2 shows the distribution of the four most frequent discursive moves overall (*problem statement*, *assessment*, *advice-giving*, *request for information*) within the three most discussed themes ('anxiety', 'relationships', 'stress') in Ellie's thread. Table 10.3 shows the distribution of the four most frequent discursive moves overall within the three most discussed themes ('depression', 'relationships', 'self-esteem') in Mel's thread. The entries in which the counselor uses the *metacomment* are shaded in yellow.

There is a clear shift in Ellie's entries and in Mel's entries. Both clients gradually use fewer *problem statements* and more *assessments*. In the entries that immediately precede the one in which the counselor uses the *metacomment*, both clients use more *assessments* than *problem statements*. Further, in the entries after the counselor posts the *metacomment*, neither client uses any further *problem statements*. The patterns of discursive moves alone are enough, it seems, to show that the counselor introduces the *metacomments* at a reasonable time with great effect. Nevertheless, a closer analysis of what ensues within these discursive moves by the clients is needed for a thorough understanding.



Table 10.2 Number of discursive moves in the three most frequent themes in Ellie's thread

Discursive move →	Problem stat.	Assessment	Advice-giving	Request info.
Entry 01 Ellie	4			
Entry 02 Counselor		7	7	8
Entry 03 Ellie				
Entry 04 Counselor				
Entry 05 Ellie	7	7		
Entry 06 Counselor		12	11	9
Entry 07 Ellie		2	5	
Entry 08 Counselor		8	8	1
Entry 09 Ellie		4		
Entry 10 Counselor		5	1	
Entry 11 Ellie				
Total Ellie	13	14		
Total Counselor		32	26	18

Table 10.3 Number of discursive moves in the three most frequent themes in Mel's thread

Discursive move →	Problem stat.	Assessment	Advice-giving	Request info.
Entry 01 Mel	5			
Entry 02 Counselor		11	12	18
Entry 03 Mel	10	12		
Entry 04 Counselor		14	11	6
Entry 05 Mel	3	7		
Entry 06 Counselor		10	6	8
Entry 07 Mel		7	7	
Entry 08 Counselor		15	4	6
Entry 09 Mel		1	10	
Entry 10 Counselor		9	3	3
Entry 11 Mel		4		
Entry 12 Counselor		4	1	
Total Mel	26	40		
Total Counselor		63	37	41

A close look at the entries preceding the ones containing the *meta-comments* reveals specific relational work. In Ellie's case, we need to look at entry 7. The following passage from that entry involves Ellie depicting her progress with an explanation of how she successfully applied previously provided advice (this example was discussed in Chapter 8 as well):

(10.1) Ellie (Thread: Ellie; Entry 7)

I have started writing down things on my mind in a 'worry book' which has been really helpful. I find that if I have written my worries down then

I can stop thinking about them as much and try to focus on other matters instead. I have found that my sleeping pattern has started to become a bit better [...].

Ellie uses self-praise when she “announc[es her] accomplishment” (Dayter 2014: 92). She further uses boosting (*really helpful*) to increase the effect of the self-praise. Ellie not only mentions that she has applied the coping technique that the counselor previously suggested, but also that she has done so successfully (*a bit better*). She positions herself as a client who is applying the techniques she has learnt during counseling. As argued earlier in Chapter 8, Ellie’s self-praising enhances not only her own face, but also the face of the counselor – after all, it was the counselor who provided her with the useful coping technique. That is, Ellie positions the counselor as a successful advice-giver.

As I have previously shown, clients also position themselves as active self-helpers. This can be observed in the following example taken from Mel’s thread. The example appears in entry 9, and the counselor’s *metacomment* is in entry 10 (see example (10.6) for the discussion of the *metacomment*). Mel is nervous about moving into a new and smaller house with her boyfriend, so she provides an action plan for times when she feels overwhelmed:

(10.2) Mel (Thread: Mel; Entry 9)

The house has a separate log cabin with a wood-burning stove (and some electric heaters for a quick fix!) so that could be somewhere to go that wouldn't be too uncomfortable. I thought we

could maybe arrange for each of us to have 'alone time' in the house [...].

When Mel provides her own action plan for a difficult situation, she positions herself as an active self-helper. While there is some mitigation in her utterance (*could, wouldn't be too uncomfortable, I thought, maybe*), she nevertheless comes up with a solution. In short, Ellie and Mel both position themselves as experts on coping techniques and as active self-helpers. One relational strategy that is especially useful in doing this is self-praise. *Assessments* in Ellie's entry 7 and in Mel's entry 9 (although in Mel's case slightly mixed with mitigation) are full of such relational work and positionings, so the entries clearly mark the clients' improvement.

Entry 8 in Ellie's thread and entry 10 in Mel's thread contain the counselor's positive response to the clients' improvement. Her praise of their progress affirms their positionings as experts on coping techniques and as active self-helpers. As she usually does, the counselor responds to every text passage the clients wrote in the previous entries (not shown here). After this input, the counselor provides a further paragraph towards the end of entry 8 in Ellie's thread and entry 10 in Mel's thread. These are presented in the following examples to show how the counselor affirms the overall improvement that Ellie and Mel have achieved:

(10.3) Counselor (Thread: Ellie; Entry 8)

It is really good to hear how much more positive you sound Ellie. Keep on doing what you have

been doing, and see how you get on with the suggestions I have made today.

(10.4) Counselor (Thread: Mel; Entry 10)

I can hear how you are continuing to make progress Mel, and are slowly becoming more assertive and recognising more fully that your needs are important and deserve nurturing more! You are clearly working hard to think and focus more positively, and while it is difficult at times, you are able to do this! 😊

In both examples, the counselor's *assessments* (and subsequent *advice-giving* move in Ellie's case) urge the clients to progress with their improvement. The counselor uses both praise and boosting (*how much more positive, clearly working hard, more positively*) to affirm the clients' progress and improved attitudes. In Mel's case, she even adds a smiley emoticon that portrays a positive emotion (Dresner and Herring 2010: 256). She explicitly encourages Ellie, especially, to continue with her progress (*keep on doing*). A further salient point is that the counselor positions the clients as the agents of change (*you have been doing, you are continuing, You are clearly working hard*) and thus makes them responsible for their progress. These strategies recall what Locher (2006: 139) found the fictional advisory persona of *Lucy* doing in her corpus. It is also highly relevant here that the counselor praises not only specific improvements by the clients, but the overall progress they have made. When the counselor discusses these final *assessment* moves in the interview, she says that she uses "that final paragraph to do some

affirming.” That is, she is clearly aware of the interpersonal effect she creates in such paragraphs.

The clients and the counselor, then, have collaboratively worked together to position the clients as experts on coping techniques and as active self-helpers. They have done so with such specific relation strategies as self-praise, praise, encouragement, and boosting. It is important to emphasize that the self-praise of the clients was followed by praise and encouragement provided by the counselor. This reinforces and ratifies the self-praise by the clients and also the positionings that they have performed. It is this recognition of the clients’ progress that allows the counselor to now introduce the *metacomments*.

### 10.2.2 The Metacomment *Announcing a Last Session in Action*

The counselor adds the following input in Ellies’ and Mel’s threads after the overall affirming paragraphs shown above:

- (10.5) Counselor (Thread: Ellie; Entry 8)  
I’ve booked you in a final slot, when I will reply to your response to this email on [DATE].
- (10.6) Counselor (Thread: Mel; Entry 10)  
As it’s our last exchange next time, it would be useful if you thought about how things have changed since you first contacted me, what you have done differently to help yourself move forward, and what will help you to keep on building on these changes. On a scale of 0 (life couldn’t be worse) to 10 (everything is sorted, and you feel

calm and in control, in a good way!) where are you?

To begin with, both announcements of a last session are in *metacomment* moves. This is especially obvious in example (10.5). The counselor simply says that she *booked ... a final slot, when [she] will reply [next]*, which seems more like a transactional than a relational utterance. In example (10.6), the counselor uses a *metacomment* and a *request for information* to initiate the closure. The *metacomment* (*As it's our last exchange next time*) clearly establishes that the next session will be the last one. Yet the *request for information* that follows is important, given the relational work carried out by the interactants beforehand. As I discussed above, Mel slightly mitigates her improvement in entry 9. Taking this into account, the counselor explicitly provides Mel with an opportunity to reflect on her improvement in the next entry. This is enough in itself to position Mel as a competent observer of her own behavior, but it is also worth noting that the counselor uses a scaling question in the *request for information*. This typical question in solution-focused brief therapy (Kim 2008: 108) explicitly invites Mel to compare her current situation with how she previously felt. This clearly aims at a positive comparison and a report on improvement. In the interview, the counselor implicitly confirms this conclusion:

In the penultimate session, I invite clients to reflect and I ask them scaling questions. I'm inviting them to consider and then to prepare for next time "what's changed, how have you changed?"  
(Interview)

Such a scaling question is similar to Stommel and te Molder's (2015: 287) "elicitation of direct advice acknowledgement" in chat counseling. In both cases, the counselor clearly tries to elicit an acknowledgement of improvement. Since my corpus contains multiple-sessions counseling, it is not enough for the clients to simply acknowledge the advice. Instead, clients are invited to explicitly demonstrate how the advice they have received during the counseling process has resulted in an improvement of their well-being. At first glance, such *metacomments* seemingly take away clients' epistemic rights to close the counseling sessions. But with the relational work that preceded these *metacomments*, both interlocutors have been active participants in the generation of an opportunity for the counselor to introduce the *metacomments* that contain the announcement of a last session.

### **10.2.3 The Response to the Metacomment *Announcing a Last Session***

As previous studies have shown (see e.g. White et al. 1994, 1997; Harrison and Barlow 2009), it is important to look at reactions to utterances in order to judge whether the utterances are appropriate in a specific social practice or context. In their last entries, both clients utilize only *assessments* and no *problem statements*. Ellie uses four *assessments* in her last entry (entry 9), as does Mel (entry 11). It cannot be determined whether the *metacomments* used by the counselor in the previous entries might have led Ellie and Mel to the conclusion that they should

not provide further *problem statements*, or whether they really do not have further *problem statements* that they want to add.

Both clients use an *assessment* to respond to the actual *meta-comment* provided by the counselor. Ellie's (abridged) response in entry 9 is shown in example (10.7):

- (10.7) Ellie (Thread: Ellie; Entry 9)  
 I am feeling really positive at the moment and hope that things keep improving the ways they have been [... ]!  
 Thank you for all your help and ideas, I can see a massive improvement in myself and have had comments from friends and people around me that I am looking really well which has boosted my confidence also.

Ellie first responds with an update on her emotional well-being (*feeling really positive*) and on her hopes for the future (*hope that things keep improving*). She links this hope with the improvement she has undergone during the counseling and positions herself as having moved away from an advice-seeker identity. Still, her improvement is mitigated. She does not position herself as the agent of change (*things keep improving*), which might reveal some trepidation about the closure process. In the second paragraph, though, Ellie does position herself as a keen observer of her improvement (*I can see a massive improvement in myself*). At the same time, she thanks the counselor for her *help and ideas* and thus positions the counselor as a successful advice-giver and as the implicit source of her improvement. This thank you comment is highly salient in its implicit agreement that these entries are going to be the



last ones (Robinson 2001; West 2006). In this light, the thank you comment can be interpreted as a closing move.

In Mel's previous entries, as discussed above, she mitigates her progress more than Ellie does. This is even more evident in Mel's response (entry 11) to the counselor's *metacomment*:

- (10.8) Mel (Thread: Mel; Entry 11)  
 I do feel more positive since I first contacted you. I don't feel 'fixed' (if you see what I mean!) because there hasn't been enough time but the advice you have given me will enable me to cope with things much better than I had been previously and that this will improve over time. [...] I think I'm between 6 and 7 on the scale at the moment but I'm aiming for it to get higher as I work on your suggestions!  
 A massive thank you for all your help! ☺

Mel starts out with a report on her *more positive* emotional well-being. Immediately, though, she mitigates this improvement with her remark that she does not *feel 'fixed'*. Still, she acknowledges that this is not because the counseling is not working, but rather because not *enough time* has passed for her to improve further. But as with Ellie, Mel has a positive outlook on the future (*much better, will improve over time, aiming for it to get higher*) and positions herself as having moved away from an advice-seeking identity, while also anticipating that this movement will progress even further. She also clearly positions herself as someone who will continue the work she has learnt in counseling. Like Ellie, though, Mel does not position herself as the agent of change, but

rather credits the counselor as the source (*the advice you have given me, your suggestions*). Finally, Mel also concludes her entry with a thank you message and adds an exclamation mark and a smiley emoticon. All in all, then, Mel's linguistic choices clearly position the counselor as the source of her improvement and as a successful advice-giver. Additionally, the thank you can again be seen as a closing device to agree that this is in fact the last session.

In their last entries, both clients cautiously position themselves as having improved without explicitly mentioning themselves as the agents of change. Instead, both clients clearly foreground the counselor as the source of the change. Importantly with regards to the closure initiation, neither client comments directly on the *metacomment* or the fact that they are writing their last entry because of the counselor's *metacomment*. However, their thank you messages can be seen as confirming that they agree that this will be their last entry. West (2006: 398) has shown that *metacomments* that arrange for further meetings can also be a way of coercing a thank you from patients in medical encounters. It might be that clients in my corpus feel compelled to thank the counselor after the counselor's *metacomments*. There is no way to tell whether they really do not feel a need for further sessions.

In entry 10 in Ellie's thread and entry 12 in Mel's thread, the last input is given by the counselor before she concludes the counseling exchanges. Examples (10.9) and (10.10) are the counselor's reactions to Ellie and Mel's last paragraphs discussed above.

- (10.9) Counselor (Thread: Ellie; Entry 10)  
 That's my pleasure Ellie, I'm just really happy that things have improved so much for you. Getting so much positive feedback from others noticing the changes is such a lovely confirmation of all you have done. :-)  
 Take really good care of yourself Ellie, and you know where we are if you should need any further support in the future.  
 Counselor
- (10.10) Counselor (Thread: Mel; Entry 12)  
 That's my pleasure Mel and I'm really pleased I have been able to help you. Take really good care of yourself,  
 Counselor ☺

The counselor's responses first acknowledge the clients' thank you notes through a display of positive stance (*That's my pleasure*) and then indicate her positive emotional reaction to their improvement (*I'm just really happy, I'm really pleased*). Then the responses differ in specific ways. In Ellie's case, the counselor reacts to Ellie's statement that her friends and family have noticed her improvement as well (*lovely confirmation*). This further affirms Ellie's progress. She then clearly positions Ellie as the agent of change (*all you have done*) and makes her responsible for the progress. In Mel's case, in contrast, the counselor does not position Mel as the source of the progress, but rather credits herself (*I have been able to help you*), which reproduces the positions of advice-giver and advice-seeker. The counselor then concludes

her entries in both cases by providing a last, seemingly standardized, piece of advice (*take really good care of yourself*) and signs off with her signature (and a smiley emoticon in Mel's case). This last input closes the counseling exchanges on a positive note.

In summary, the analysis has shown that both the client and the counselor perform considerable relational work throughout the later stages of the counseling exchanges. The employment of relational strategies such as self-praise, praise, encouragement and boosting position the clients as successful appliers of coping techniques and as active self-helpers. The establishment of these positionings allows the counselor to employ a *metacomment* that simply announces that the next session will be the last one. In return, the clients perform further relational work that confirms their improvement, albeit in a slightly more mitigated way than before. They also thank the counselor for her support. They do not write, at least explicitly, that they are not in alignment with the counselor's initiation of the closure process. Finally, the counselor uses the last entry to affirm the clients' progress one last time. Surprisingly, some of the counselor's linguistic choices in parts of the last paragraph of the entire counseling process do not explicitly position the clients as the source of the improvement. Nevertheless, her last piece of advice clearly foregrounds their agency for their well-being and concludes the counseling exchanges on a positive note.

### 10.3 Metacomment Type Inquiring about a Last Session

The second type of *metacomment* to initiate the closure process is used in Chris' and Anna's threads and is an inquiry whether one last session is either needed or enough. This *metacomment* is similar to the preclosing device "making an arrangement", which has also been found in medical encounters (Robinson 2001; West 2006). Table 10.4 shows which entries of Chris' thread (entry 8) and Anna's thread (entry 6) the *metacomments* occur in. In Chris' case, there are two more entries after the *metacomment*, equaling one last session. In Anna's case, there are six more entries. Four are of an organizational nature and do not contain extensive counseling content. The last two entries (entries 11 and 12) constitute the last session. In other words, both dyads seem to agree on one more session, which will be the last one.

Table 10.4 Location of metacomment according to the total number of entries (Chris' and Anna's threads)

	Chris	Anna
Specific entry containing metacomment	8	6
Total number of entries in thread	10	12

#### 10.3.1 The Preceding Context of *Inquiring about a Last Session*

As with the first type of *metacomment* I discussed above, I want to look at the patterns of discursive moves that are employed within the entries of Chris' and Anna's threads. Tables 10.5 and 10.6 show the four most frequent discursive moves overall (*problem statement, assessment, advice-giving, request for information*) within the three most discussed

themes for Chris and Anna respectively. In Chris' case, the specific *metacomment* was used by the counselor in entry 8 and in Anna's case in entry 6. These entries are highlighted in yellow in the tables.

Chris uses *problem statements* and *assessments* in the entries that lead up to the entry containing the *metacomment*. The ratio (almost always 1:2) does not change considerably. Overall, from an early stage onwards, Chris uses an unusual amount of *assessments*. In contrast, Anna uses six *problem statements* in her first entry and no *assessments*. In her second entry that contains counseling content (entries three and four are organizational entries between Anna and the counselor and do not contain any counseling content), Anna uses seven *problem statements* and seven *assessments*. Even though she uses more *assessments* than initially, she does not stop providing *problem statements* (which would have been an indication that she had extensively improved). In comparison to Mel and Ellie's threads, which I discussed in Section 10.3, the discursive moves pattern is not enough to suggest that there might have been a remarkable improvement so far for either Chris or Anna. This is a first sign of why the counselor uses a more mitigated *metacomment* that references a last session in their threads compared to Mel's and Ellie's.

In the entries that precede the one with the *metacomment* by the counselor, Anna (entry 5) and Chris (entry 7) use self-praise to report on their progress in *assessments*. In contrast to Ellie and Mel, however, they also employ mitigation and, importantly, appeal for further support and empathy in *problem statements*. Both clients may report on how

they applied the advice the counselor previously gave them, but they primarily focus on their struggles applying it.

Table 10.5 Number of discursive moves in the three most frequent themes in Chris' thread

Discursive move →	Problem stat. Assessment	Advice-giving	Request info.
Entry 01 Chris	2		
Entry 02 Counselor	12	22	18
Entry 03 Chris	9	18	
Entry 04 Counselor	19	7	8
Entry 05 Chris	4	8	
Entry 06 Counselor	7	9	2
Entry 07 Chris	2	5	
Entry 08 Counselor	5	1	2
Entry 09 Chris	5		
Entry 10 Counselor	3	1	
Total Chris	17	36	
Total Counselor	46	40	30

Table 10.6 Number of discursive moves in the three most frequent themes in Anna's thread

Discursive move →	Problem stat. Assessment	Advice-giving	Request info.
Entry 01 Anna	6		
Entry 02 Counselor	11	8	8
Entry 03 Anna			
Entry 04 Counselor			
Entry 05 Anna	7	7	
Entry 06 Counselor	10	5	7
Entry 07 Anna	2	1	
Entry 08 Counselor	1		
Entry 09 Anna	1		
Entry 10 Counselor	1		
Entry 11 Anna	7		
Entry 12 Counselor	6	1	
Total Anna	15	16	
Total Counselor	29	14	15

Anna reports on the advice she was given for her unhelpful thinking patterns. She is supposed to identify the patterns and use a specific coping technique to focus on more positive thoughts. Anna does identify unhelpful thinking patterns, but she does not report on whether she was successful in moving towards more positive thought patterns:

- (10.11) Anna (Thread: Anna; Entry 5)  
Yeah, they almost always start with “what if”. [...] I definitely tend to “predict the future” a lot, even if what I'm thinking is irrational, I convince myself that it's going to happen. I do this a lot, with small every day things, like checking my emails.

As Anna details her negative experience in a *problem statement*, she appeals to the counselor for empathy and thus still clearly positions herself as an advice-seeker. Similar uses of relational work and positionings as advice-seekers appear throughout the entries by Anna and Chris that are under consideration here. The closer to the end of the entry they move, the more explicit these positionings become. Example (10.12) is the last paragraph in Chris' entry 7:

- (10.12) Chris (Thread: Chris; Entry 7)  
I have been struggling quite a lot over the last couple of weeks [...]. I've been trying the different techniques that we've discussed previously and I think they've helped me a bit, but I just need to give it some time before this rough patch is over. Mainly just the 'worthless' feelings again, not so much the anxiety. Fingers crossed it will pass with time.

The recounting of his struggles clearly positions Chris as an advice-seeker. He even boosts this negative emotional state (*quite a lot*). This depiction of his negative well-being (*struggling, rough patch, 'worthless' feelings*) appeals for empathy and makes this last paragraph of his entry a summary of his positioning of himself as an advice-seeker and



the counselor as an advice- or support-giver. Clearly, Anna and Chris have not experienced an improvement comparable to Ellie and Mel's.

The counselor, though, takes Anna's and Chris' perception of limited progress into account when replying to their entries. She responds to the clients' *problem statements* with *assessments* and acknowledges their difficulties. She further normalizes the problems and displays empathy towards the clients. She then proceeds with several *advice-giving* moves that contain several different coping techniques that the clients can try out. This further positions the clients as advice-seekers, or at least advice-recipients. As I have already discussed this pattern in previous chapters, I will not develop it further here. Instead, I want to address how the counselor manages to introduce the *metacomments* despite the continued appearance of *problem statements* and the perception of limited progress.

The counselor concentrates on the progress that Chris and Anna report on in their entries. This is a common maneuver in short-term and solution-focused therapy, where the counselor aims to highlight the positives rather than the negatives. The counselor's positive and very brief summary of the clients' improvement aims to establish a positive stance before the introduction of the *metacomments*:

- (10.13) Counselor (Thread: Chris; Entry 8)  
I can hear how much better you are doing [...].<sup>27</sup>

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<sup>27</sup> This affirmation is the first clause of a two-clause sentence. The second clause contains the *metacomment* that initiates the closure of the counseling process (see example 10.15).

(10.14) Counselor (Thread: Anna; Entry 6)

That's really good to hear Anna - keep on doing these things, they're working!

Both of these statements start with an *assessment* in which the counselor very briefly but very positively summarizes the clients' progress. The praise the counselor uses is even increased by the boosters she adds (*how much, really*), while it also positions the clients as having moved away from an advice-seeker identity. Throughout entry 8 in Chris' case and entry 6 in Anna's case, she has sometimes positioned the clients as advice-seekers and at other times as successful appliers of coping techniques or even active self-helpers. In other words, there has been a mix of positionings in these entries. The clear focus on the more positively-valanced identity as an active and progressing client at the end of the entry is therefore quite marked. Nevertheless, it seems to be a necessary step before the introduction of the *metacomments* that aim to initiate the closure process.

### 10.3.2 The Metacomment *Inquiring about a Last Session in Action*

Due to the clients' reports of partial progress, the relational work the counselor employs is more diverse with Chris and Anna than with Ellie and Mel. If the counselor is aware that Chris and Anna might need more support than Ellie and Mel did, she nevertheless introduces a *metacomment* that aims to initiate the closure process. But the type of *metacomment* that the counselor uses with Chris and Anna differs in very

specific ways from the one she uses with Ellie and Mel. For starters, the counselor does not *announce* a last session, but rather *inquires* about a last session. Announcing produces a much stronger interpersonal effect than an inquiry. Clients can disagree with an announcement of a last session, but there is more potential of a threat to their face than in cases where the counselor inquires about a last session. Additionally, the inquiry can be phrased in different ways. Depending on the phrasing, the clients are invited to agree or disagree in more or less explicit ways.

Example (10.15) shows the *metacomment* the counselor uses in Chris' thread in entry 8, and example (10.16) contains the *metacomment* used in Anna's thread in entry 6:

- (10.15) Counselor (Thread: Chris; Entry 8)  
[...] and I'm wondering whether one final session to summarise and review your progress will be sufficient for now? [...]
- (10.16) Counselor (Thread: Anna; Entry 6)  
Please let me know by next Wednesday of you would like another email exchange [...].

In Chris' thread, the counselor inquires whether an additional session would be enough to conclude their exchanges. This implies that she wants to hold that last session. In Anna's case, though, she positions Anna in such a way that Anna has to decide on her own whether she wants another session. While the answer to the inquiry posed to Chris prefers a positive response, i.e., that one final session is enough, the counselor leaves it open to Anna to decide whether they should have another session. Clearly, both clients are positioned as participating in

the decision, but the counselor's specific phrasing seems to leave Anna more options than Chris. Still, the counselor positions Chris in a very specific way: her reference to the tasks of *summari[zing] and review[ing his] progress* affirms his positioning as an astute observer of his behavior and his improvement. This is especially important because, throughout the exchanges, Chris has displayed that he is an analytical thinker who can observe and interpret his own behavior very well. Mentioning those strengths clearly positions Chris just as much as part of the therapeutic alliance as the *metacomment* does with Anna.

The counselor thus astutely appeals to the particular strengths of each client even within the phrasing of the same type of *metacomment*. These *metacomments* clearly make an arrangement for a further session and resemble preclosing devices used in medical encounters (Robinson 2001; West 2006). In a way, as clients can ask for further advice in the next session, they also seem to resemble Stommel and te Molder's (2015: 287) "offers of a new advice sequence". However, further sessions do not always contain – or, from the counselor's point of view, are not meant to contain – any more advice sequences. On the contrary, and as the *metacomment* in Chris' case clearly indicates, the aim of the last session is to affirm progress and provide clients with a further opportunity to self-praise.

### 10.3.3 The Responses to the Metacomment *Inquiring about a Last Session*

In Chris' thread, the response to the *metacomment* takes a path similar to the directions in Ellie and Mel's cases. In entry 9 (the *metacomment* occurred in entry 8), Chris employs no further *problem statements*; instead, he writes five *assessments* in which he uses self-praise to report on his progress and to position himself as an active self-helper (not shown here). His direct response to the counselor's *metacomment* is shown in example (10.17):

(10.17) Chris (Thread: Chris; Entry 9)

I think this counseling has definitely helped my since I first contacted you, and I would be comfortable with only one more session. The techniques that you have suggested have helped me gain more control over my difficulties and see them for what they are. [...]

This is similar to Ellie and Mel's responses to the *metacomments* they encounter: he summarizes the helpfulness of the counseling exchanges, praises the techniques that helped him, and even includes a booster (*definitely*). Although he positions himself as having improved, he also enhances the face of the counselor as he praises her support. He even positions the counselor (*you have suggested*) rather than himself as the source of his improvement.

In contrast to Ellie and Mel, Chris explicitly responds to the inquiry about a last session and confirms that he *would be comfortable with only one more session*. This is noteworthy, but it is not surprising: the inquiry about a last session requires a response from the clients, and Chris readily provides the counselor with a positive response. It even might compel him to use self-praise throughout the entry and to position himself as an active self-helper. After all, since he argues that a last session (which contains entry 9 and entry 10) is enough, he needs to convincingly demonstrate that he has improved in meaningful ways.

The counselor responds to Chris in entry 10 with three *assessments* and one *advice-giving* move. Part of the counselor's response is shown in example (10.18), which contains her direct response (in abridged form) to example (10.17) above and is the final paragraph of entry 10.

(10.18) Counselor (Thread: Chris; entry 10)

It's good to hear that you have found this process helpful and that you are feeling more on control of your difficulties. [...]

I would encourage you to keep writing as a way of expressing, releasing and reflecting on your thoughts and progress.

[...]

I wish you all the very best and hope that you do not feel the need to use our service again 😊

Take care,  
Counselor

In an *assessment* (first paragraph), the counselor confirms Chris' positive summary with her positive reaction (*It's good to hear*) and mentions one crucial issue that Chris has been working on throughout the counseling exchanges, namely to be in *control of [his] difficulties*. In the second paragraph, she provides Chris' with a last piece of advice: she encourages Chris to *keep writing* and explains why that would be helpful to Chris. She thus implicitly positions Chris as someone who is good at *expressing, releasing and reflecting on [his] thoughts and progress* by writing about them. This is important, as clients need to apply the techniques they have learnt even after the counseling exchanges end. At the end of her entry, the counselor wishes Chris well for the future and jokingly remarks that she hopes he will not need the counseling service again. The counselor may be aware that this utterance could also be interpreted negatively, in the sense of suggesting that he should not contact the service again. However, the use of the smiley emoticon as a mitigating device (Dresner and Herring 2010: 256) can be interpreted as signaling that the counselor does not mean it in a face-threatening way. She signs off with a formulaic farewell and her signature, concluding the exchanges between her and Chris.

Anna's case is complicated by the fact that the counselor asked her in the *metacomment* whether she would like another session (see example (10.16)). This means that Anna has to make a decision about another session herself. Anna decides that she does need another session, which leaves her with the complicated task of legitimizing this need. In her response in entry seven, which is an organizational entry that does not contain much counseling content, she uses two *problem statements* and one *assessment*. This use of discursive moves indicates that she has not overcome all her problems yet and legitimizes her need for further support. Example (10.19) is Anna's direct response to the counselor's *metacomment*:

(10.19) Anna (Thread: Anna; Entry 7)

I think maybe having another appointment at the end of the month or in early [MONTH] would be helpful, but only if you've got a free slot. Maybe just to talk about anything that may come up.

[...]

Thanks for all your help!

Anna performs rather complex relational work here. She first highly mitigates her request for another session (*I think, maybe, would be, but only if you've got a free slot, etc.*). Clearly, she does not want to impose on the counselor and signals that she has understood the short-term nature of the counseling. At the same time, she also wants to explain herself (*just to talk about anything that may come up*). Up until here, her



choices are all about the legitimization of her advice-seeking identity. Yet such a clear indication that she is still an advice-seeker also poses a threat to the counselor's face, or more specifically, to the counselor's identity as a successful advice-giver. Anna takes this into account and thanks the counselor for her help. Through this interplay of relational strategies and positionings, Anna manages to both legitimize her claim for support and nevertheless still enhance the counselor's face and position her as a successful advice-giver.

In entries 8 to 10, Anna and the counselor organize this last session rather than exchanging counseling content. Examples (10.20) to (10.22) include the relevant parts of the entries for the arrangement of this last session:

- (10.20) Counselor (Thread: Anna; Entry 8)  
How about [DATE] to send me an update for a full reply?
- (10.21) Anna (Thread: Anna; Entry 9)  
[DATE] should be fine!  
[...]  
I'll send you my full email in a few weeks.
- (10.22) Counselor (Thread: Anna; Entry 10)  
I look forward to hearing from you by the [DATE]  
[...].

As these examples show, the last session is arranged without a glitch. Entries 11 and 12 are then the last session between Anna and the counselor. These entries work in very similar ways to the last entries between the counselor and Ellie, Mel, and Chris, so I will not discuss these

entries between Anna and the counselor in detail. Anna and the counselor manage to end the counseling exchanges on a positive note, with Anna using self-praise to position herself as an active self-helper and praising the counselor as a successful advice-giver. The counselor responds with further praise of Anna as an active self-helper, which affirms this new identity for Anna.

For all four clients discussed so far then, the closure initiation works fairly well, as does the closure process as a whole. This was in part because the clients and the counselor could see a degree of improvement in the clients' attitudes and behavior patterns and because the clients and the counselor worked collaboratively to manage this improvement and the closure process. In contrast, Taylor does not exhibit the same degree of improvement in her thread, and as a result, the work that she and the counselor engage in is quite different from what I have discussed so far.

#### **10.4 Metacomment Type Inquiring to Take Stock**

In contrast to the *metacomments* discussed previously, the counselor does not refer to a final session in this last *metacomment*. Rather, she proposes to Taylor that they should hold several more sessions. Interestingly, she uses this opportunity to ask Taylor to take stock of how she has improved so far and what else she would like to achieve. The fact that the counselor suggests several further sessions is also visible in the location of the *metacomment* within Taylor's thread (Table 10.7).

Table 10.7 Location of metacomment according to the total number of entries (Taylor's thread)

	Taylor
Specific entry containing metacomment	8
Total number of entries in thread	12

The *metacomment* is presented in entry 8, and the thread goes until entry 12. In other words, the *metacomment* occurs in session 4 (entries 7 and 8), which is followed by session 5 (entries 9 and 10) and session 6 (entries 11 and 12).

#### 10.4.1 The Preceding Context of *Inquiring to Take Stock*

Throughout entries 1 to 7, both Taylor and the counselor perform extensive relational work that repeatedly positions Taylor as an advice-seeker. This is also visible in the use of discursive moves. Table 10.8 shows the use of the four most frequent discursive moves overall (*problem statement*, *assessment*, *advice-giving*, *request for information*) in the three most discussed themes ('anxiety', 'relationships', 'self-esteem') in Taylor's thread. Taylor does not undergo such a clear shift from using fewer *problem statements* and more *assessments* as the other clients do.

Table 10.8 Number of discursive moves in the three most frequent themes in Taylor's thread

Discursive move →	Problem stat. Assessment	Advice-giving	Request info.
Number of entry ↓			
Entry 01 Taylor*			
Entry 02 Counselor	4	19	10
Entry 03 Taylor	11	1	
Entry 04 Counselor	8	14	12
Entry 05 Taylor	3	4	
Entry 06 Counselor	8	8	12
Entry 07 Taylor	4	3	
Entry 08 Counselor	6	10	9
Entry 09 Taylor	3	8	
Entry 10 Counselor	12	7	10
Entry 11 Taylor	4	4	
Entry 12 Counselor	7	7	4
Total Taylor	25	20	
Total Counselor	39	64	57

\*Entry 1 consists of one *problem statement*, but it does not occur within one of the three most frequent themes in Taylor's thread. Therefore, it is not listed in the table.

Up until entry 7, Taylor still reports extensively on her difficulties. She also does not frequently acknowledge the counselor's advice. Often, she simply writes that she will try the counselor's suggestions, or she does not respond at all to the *requests for information* that frequently follow advice. Additionally, she often adds new *problem statements* towards the end of her entries, which establishes her identity as an advice-seeker even more. An example of this from entry 7 is shown here. It appears at the end of Taylor's input in entry 7.

(10.23) Taylor (Thread: Taylor; Entry 7)

So this is the new bit:

So I guess most the time I feel blank, I postpone going to work then I postpone leaving work. I feel blank, add I feel sad at times, I spend my time playing video games to distract myself. [...]

Taylor indicates that *this is the new bit* and clearly positions herself still as an advice-seeker with a description of her negative emotional state (*feel blank, feel sad*) that serves as an appeal for further empathy and support. After these new *problem statements* (not all are shown in the example), Taylor simply tells the counselor *Thanks for your help so far* (also not shown in the example). She does not indicate in any way whether the counselor's help has been useful and whether she has applied, successfully or not, the advice that she received.

The counselor responds in entry 8 through her usual pattern of using *assessments* to acknowledge and reformulate Taylor's difficulties, which again displays her understanding of Taylor's problems and thus her empathy for Taylor. She also provides further advice and requests more information from Taylor. In these moves, the counselor encourages Taylor to keep working on her mental health and praises her for any progress she has made. As she does so often with all her clients, the counselor aims to position Taylor as a progressing client and an active participant in the therapeutic alliance.

Importantly, the counselor also uses *referral* moves, in which she encourages Taylor to seek other support as well (such as her GP) and even provides her with further sources of support (e.g. the website [www.getselfhelp.co.uk](http://www.getselfhelp.co.uk) (Vivyan 2018)). This attempt to provide Taylor with additional help is a subtle and more implicit hint towards the upcoming end of the counseling sessions. As Taylor can contact these further sources of help after the counseling ends, she will not suddenly be completely without sources of support. What all these activities on the

counselor's part have in common is that they necessarily reaffirm Taylor's positioning as an advice-seeker. This is in clear contrast to how the counselor positions the clients that I have previously discussed. The counselor recognizes the need to take into account that Taylor is not ready to finish the counseling sessions any time soon and designs her *metacomment* accordingly.

#### 10.4.2 The Metacomment *Inquiring to Take Stock in Action*

Clearly, the specific details of the collaborative relational work that Taylor and the counselor are engaged in makes it difficult to affirm substantial progress and render any inquiry about a final session inappropriate (let alone announcing a final session). Instead, the counselor simply reminds Taylor that she only offers short-term therapy and proceeds to suggest *another couple of sessions*:

- (10.24) Counselor (Thread: Taylor; Entry 8)
- We've had four sessions so far Taylor, and as you know we offer short term therapy, so if we have another couple of sessions, what would like to achieve in them? (...)
- What have you learnt so far that has been helpful, and how would you say you might have changed through this learning?
- These questions will help us to gauge how you are doing and remind you of your progress. 😊

Within the *requests for information* (first and second paragraph), the counselor directly asks Taylor to report on progress. This serves multiple functions. First, it positions Taylor as an active participant in the

therapeutic alliance who can provide information and set goals. Second, it provides Taylor with a very explicit opportunity for self-praise, which she has not used extensively in the previous entries. However, the counselor seems to be aware of the potential face-threat that this opportunity poses to someone who is not accustomed to praising themselves, so she mitigates her request (*would, might*). She then goes on to explain why she asks these questions (*to remind [Taylor] of [her] progress*) in an *assessment* (last paragraph). The mitigation is further enforced by the use of the smiley emoticon, as the “standard smiley ... often serves mitigating functions” (Dresner and Herring 2010: 257). Finally, the clear tasks that the counselor mentions are also relevant for the closing process. The task of setting one specific goal can be interpreted as a “final concern”-sequence, as Robinson puts it (2001). Setting a specific goal gives the interlocutors the chance to focus on this goal in the next few sessions and to terminate the counseling exchanges once this goal has been achieved.

The refined relational work contained in this *metacomment* is evidence that the counselor has constructed it very carefully. She confirms this in the interview: “I could probably see they will take all the sessions that are available and kept going.” She adds that in such cases she “invites them to review where they’re at.” Clearly, the counselor has initiated the closure process with this *metacomment*, but it also reveals her awareness that it might not transpire as quickly as in other cases.

### 10.4.3 The Response to the Metacomment *Inquiring to Take Stock*

In entry 9, Taylor responds to the counselor's *metacomment* from entry 8. She replies more willingly to the counselor's advice than in earlier entries. She also takes advantage more frequently of the self-praising opportunities that she has been offered, even as she still mitigates her progress most of the time. Further, Taylor confirms that she has sought the help of several of the sources that the counselor has referred her to and acknowledges that they are helpful as well (not shown here). Example (10.25) is her direct response to the counselor's *metacomment*:

- (10.25) Taylor (Thread: Taylor; Entry 9)  
*I think I am feeling happier in [PLACE] [...], so I've been a more consistant feeling better mood! I really like the 'hello anxiety' and I think I feel more aware of why Im feeling certain ways at times. I think if we had a few more sessions, perhaps a way to deal with rejction and these feelings Ive been having? I feel as if that might help me function a lot better socially, as I think a lot of what Ive been feeling is due to my interpersonal (or lack of) relationships.*

Taylor provides a summary of her current feelings in an *assessment*. Taylor may introduce her progress via mitigation (*I think*), but she then describes her overall improvement in positive ways (*feeling happier, better mood*). She also reports on a coping technique that she likes to apply and that seems to help her (*'hello anxiety'*). Taylor agrees that *a few more sessions* would be useful; then she adds that she would like to



work on coping better with *rejection* and elaborates on her reasons for that suggestion (*might help me function a lot better*). In this paragraph, Taylor manages to position herself both as a good observer of her own behavior and her needs and as an active participant in the therapeutic alliance who can set goals that she wants to achieve. So far, the specific relational work Taylor engages in here reveals a willingness to continue and to contribute to the therapeutic process in a productive way.

Taylor immediately follows this up with another *problem statement* that reports on a confrontation that she had with her boyfriend. Example (10.26) is the beginning of this *problem statement*:

- (10.26) Taylor (Thread: Taylor; Entry 9)  
There was something I forgot to mention before, which, considering how many problems its caused I can't believe I forgot it, at the start ish of dating my boyfriend (so 3 months of seeing each other, 3 months official dating) [...] I was curious about a girl he had been talking to [...], so I went on his facebook and I saw some messages to her [...]

Taylor's emotional description of *how many problems [the issue] caused* clearly appeals for empathy from the counselor. Her previous efforts to construct her identity as an improved client are therefore immediately called into question by this renewal of her positioning of herself as an advice-seeker. This renewed advice-seeker identity appears after the seemingly summarizing paragraph in which Taylor has commented on her improvements (shown in example (10.25)). So her *problem statement* in example (10.26) can be interpreted metaphorically as

what Green (2010: 6) identifies as a “door handle comment”: “when the client says something to you and that you recognise to be possibly significant just as she is getting ready to leave, or indeed on her way out of the door” (ibid.: 6). Other researchers have called this same phenomenon the “by the way syndrome” (West 2006; White et al. 1994) or “doorknob concern” (Robinson 2001). I have opted for Green’s terminology as it “has become known [that way] in counselling parlance” (Green 2010: 6). It is not just its location at the end of entry 9 but also its content that clearly mark example (10.26) as a door handle comment that explicitly positions Taylor as an advice-seeker. As it lacks any form of alignment on progress or improved well-being, this does not create a “closure-relevant environment” (see e.g. Robinson 2001; West 2006). It also stands in stark contrast to the thank you messages that the other clients have used in their entries as closing devices.

In entry 10, the counselor responds to each of the identities that Taylor has just constructed – both the active participant in the therapeutic alliance and the advice-seeker. The counselor uses praise to affirm the active participant and provides empathy and further advice for the advice-seeker. In the additional advice, the counselor suggests techniques that she has previously presented to Taylor. She does so for at least two reasons. First, she wants to remind Taylor that she has learnt coping techniques during their exchanges that she can apply now. Second, the counselor most likely does not want to introduce further techniques which might need further input in future sessions. That is, the

counselor apparently keeps the fact that the counseling is coming to an end in mind when she gives advice this late in the counseling process.

The *last session* continues to be invoked by both interlocutors in the rest of the exchange. Example (10.27) from entry 11 reveals Taylor's awareness that she has entered the last session. Right before this text passage, Taylor has told the counselor that she is struggling to cope with her recent break-up with her boyfriend:

- (10.27) Taylor (Thread: Taylor; Entry 11)  
**I know this is our last session so I was wondering if you could give me some tips for coping? When it happened [...] I seemed to fall straight back into my old routine of drinking to much, crying down the phone to a lot of people (including the Samaritans) and just feeling miserable.**

Taylor explicitly mentions their *last session* and requests *some tips for coping*. This is strongly marked insofar as she has actually received numerous suggestions of coping techniques from the counselor throughout the entire counseling process. The “persistence of the transcript” (Herring 2007) in the medium of email would actually allow Taylor to go through the entire content of the counseling exchange again. That is, Taylor has an entire word document full of the counselor's suggested coping techniques, so she could easily read up on them. Taylor's failure to do so could be interpreted as a threat to both her own face and the counselor's. Be that as it may, the appeal for further support clearly positions her as an advice-seeker. Her recounting of her negative

emotions after the break-up is also a further appeal for empathy. After this *request for advice*, Taylor goes on to make yet another door handle comment (not shown here) and thus reaffirms her positioning as an advice-seeker. The clear absence of self-praise and lack of positionings as an active self-helper or even just a successful applier of coping techniques this close to the end of the counseling process poses a problem for the counselor.

Due to the short-term therapy format, the counselor is under pressure to end the counseling in entry 12. She first provides Taylor with further advice (writing a pro-con list about her relationship) and displays further empathy. She does not comment on the fact that the client has asked for coping tips at this late stage despite having been provided with many coping techniques in earlier stages of the counseling process. Instead, the counselor focuses on ending the counseling exchanges. This is clearly visible in her last paragraph of entry 12, which contains several *advice-giving* moves:

- (10.28) Counselor (Thread: Taylor; Entry 12)
- Be kind to yourself Taylor, and keep pulling back your perspective to look at things from more than one angle. You can, and are, getting better at recognising your positives and strengths. Keep on doing this, accepting the anxious and low thoughts, and shifting your perspective – you can do it! 😊
- Take good care, and do get back in touch if you feel you would benefit from sessions in the future (while you are a student here).

## Counselor 😊

Two aspects of this entry are highly salient in comparison with the final input the counselor gives the other four clients. First, the counselor goes to great lengths to point out positive qualities that she assigns to Taylor and to repeat some of the main suggestions she has made throughout the counseling process (*look at things from more than one angle, accepting the anxious and low thoughts, shifting your perspective*). She also encourages Taylor by saying that she *can, and [is] getting better* and that she should *keep on doing* what has helped her so far. These final suggestions and affirmations are much stronger than in the other four threads. Clearly, the counselor feels that they are necessary in Taylor's case.

The second way in which this final entry is noticeably different from those in the other four threads is that the counselor explicitly mentions that Taylor can *get back in touch* if she needs to. This explicit invitation to contact the counseling service again signals the counselor's awareness that Taylor might not have progressed far enough to be left to her own devices. Read in this light, the counselor's last paragraph seems to imply that she feels that Taylor could have profited from a longer type of counseling format. She signs off with her name and a smiley emoticon.

All in all, then, the *metacomment* in Taylor's thread already indicates that the closure process will differ from those that appear in the threads of the other clients. This was confirmed in the following sessions between Taylor and the counselor and was exacerbated by

Taylor's consistent use of door handle comments. The counselor was obligated to respond, which made it difficult for the counselor to close the counseling exchange. Due to the short-term therapy format that is offered by the counseling service, the counselor was under pressure to end the counseling process within six sessions. While the medium of email does not solely explain the difficulties that Taylor and the counselor encounter in closing the counseling process, it does not help the process either. I want to briefly shed some further light on this issue in the next section.

### **10.5 The Asynchronous Nature of the Closure Process in Email Counseling**

What I have left more or less implicit in my discussion of the closure process so far is the fact that the asynchronous nature of email counseling has an impact on the way that these closures take place. In this section, I want to foreground this issue and show how the work that the interlocutors perform in the closure process is even more complicated than it seems at first sight – and that it is the medium of email itself that causes these further complications.

To explain how the closure process works over several entries, it is worth looking at the location of the *metacomments* that initiate the closure process again (Table 10.9): The *metacomments* never occur in the last session, so the closure process is a multiple-session activity in the exchanges in my corpus. A closer look at a specific example will

show more clearly how a closure process transpires over several entries and sessions.

Table 10.9 Location of metacomment according to the total number of entries and sessions (all threads)

	Ellie	Mel	Chris	Anna	Taylor
Specific entry containing meta-comment	8	10	8	6	8
Total number of entries in thread	11	12	10	12	12
Specific session containing metacomment	4	5	4	2	4
Total number of sessions in thread	5	6	5	3	6

In Chris' thread, the counselor uses the *metacomment* in entry 8. I have already discussed how much relational work was carried out in the entries leading up to entry 8. As one session always consists of a client email and the counselor's response, entry 8 is therefore the counselor's response part of session 4 (session 4 = entry 7 + entry 8). Due to the asynchronous nature of email, Chris responds to the counselor's *metacomment* in entry 9. Entry 9 is the client's part of session 5 (session 5 = entry 9 + entry 10). In entry 9, Chris responds to advice that the counselor provided him with in previous entries, gives an update on how he feels and, last but not least, agrees at the end of entry 9 that this current session (session 5) is the last one. It is important to remember that Chris already concludes his participation in session 5 in entry 9. In entry 10, the counselor responds to Chris' input from entry 9. Due to the asynchronous nature of email, the counselor therefore responds to Chris'

message that already contains Chris' *farewell*. The counselor still responds to all the input that Chris wrote in entry 9. Finally, she says her own *farewell* in entry 10 and thus closes the counseling process for good. The agreement on having a last session, then, takes place over three separate entries and two separate sessions. In Chris' case, they are session 4 (entry 8 by the counselor) and session 5 (entry 9 by Chris and entry 10 by the counselor). This type of asynchronous interaction is clearly characteristic of email counseling and contrasts starkly with face-to-face counseling or even chat counseling (Stommel 2012). Stommel and van der Houwen (2014) found that clients in Dutch email counseling managed the counselors' face concerns in a similar way; that is, they also took the asynchronicity of the medium into account. My findings clearly demonstrate that the work performed by the clients and the counselor show that such a complicated interactive sequence as the closure process can work asynchronously – and importantly, collaboratively.

## **10.6 Summary**

Throughout this chapter, I have shown that my analysis confirms some findings from previous studies with regards to the closure of health encounters. For example, previous research has shown that it is primarily the professional who initiates the closure process with preclosing devices (Robinson 2001; Stommel and te Molder 2015; West 2006; White et al. 1994; White et al. 1997). In my data, it is also the counselor who initiates the closure process. More specifically, she uses three different



types of *metacomments* to initiate this process: (1) announcing a last session; (2) inquiring about a last session; and (3) inquiring to take stock.

Both announcing and inquiring about a last session resemble “making arrangement” sequences that were found in other studies (Robinson 2001; West 2006). In contrast to West (2006), who found that doctors almost never just announce the closure in a medical encounter, the counselor in my data does just that in two of the five threads. Further, a comparison can be made between Robinson’s (2001) “final concern”-sequence or the “offer of new advice”-preclosing devices identified by Stommel and te Molder (2015) and the *metacomments* inquiring about a last session and inquiring to take stock. In both inquiries, the clients could easily add further points that they would like support with. Be that as it may, no final concern or new advice sequence necessarily has to take place after either *metacomment*. I have further shown that one client uses door-handle comments that forestall the closure process. Such linguistic devices have been found in previous studies as well (Green 2010; Robinson 2001; West 2006; White et al. 1997).

What has become clear throughout this chapter is something that also confirms the results of earlier studies: the closure process is an innately collaborative process that can only be effective if both interlocutors actively work together to reach it (Robinson 2001; West 2006; White et al. 1994). This collaboration typically includes substantial relational work, as my analysis has shown, and it is in fact my

interpersonal-pragmatic perspective that has generated these results that add to the excellent previous research that has been done. Nevertheless, my analysis is ‘only’ an analysis from an interpersonal-pragmatic perspective. An analysis that integrates several perspectives, such as conversation analysis and interpersonal pragmatics, would certainly be profitable for the consideration of such a salient and highly consequential activity as closures in health encounters. As White et al. (1994, 1997) point out, a qualitatively good closure of a health encounter has strong benefits for health consumers, not least by fostering better compliance and satisfaction in them.

My interpersonal-pragmatics perspective has revealed that the relational work in the closure process follows patterns that can be clearly traced. The first two *metacomments* that focus on a last session depend on the advanced progress of the clients. This progress is visible in the use of discursive moves (fewer *problem statements*; more *assessments*), in the relational strategies that are used by the clients (e.g. an increase in self-praise) and in their specific positionings (e.g. a move towards active appliers of coping techniques and self-helpers). I have discussed in previous chapters how the counselor encourages the clients to use specific relational strategies that position the clients in particular ways. Once these relational strategies have established new positionings, the counselor puts considerable effort into affirming them. For example, the counselor further praises and encourages clients, and as a result, clients internalize their transformation. Only once this relational work has been carried out does the counselor introduce the

*metacomments* to initiate the closure process, and it is interpersonal issues that then determine what type of *metacomment* the counselor decides to use. This is readily seen when taking the third type of *metacomment* into account (inquiring to take stock), which aims to create a closure-relevant environment even when little progress has been made.

In previous chapters, I have discussed links between distinct types of relational work. A link clearly exists between an appeal for empathy by clients in a *problem statement* and a display of empathy by the counselor in an *assessment*. Locher (2006) has also found this link in her data. The present chapter has further shown that praise and encouragement by the counselor in *assessment* and *advice-giving* moves often occur in close proximity. Further, their combination offers an opportunity for clients to use self-praise in a next entry. However, whereas an appeal for empathy rather frequently results in a display of empathy, there is nothing like an automatic link between praise and encouragement by the counselor and self-praise by the client. Nonetheless, praise and encouragement from the counselor can **facilitate** self-praise in clients. This suggests that the counselor's intricate interplay of relational work is an important part of the counseling process that facilitates the creation of a closure-relevant environment within the counseling process. This result is highly salient for practitioners and deserves much more research attention in the future.

## **PART IV**

## Chapter 11 Concluding Remarks

In the introduction, I stated that the aim of my study is to describe how the therapeutic alliance, i.e. “the collaborative bond between [the counselor] and [the client]” (Krupnick et al. 1996: 532), is established and negotiated in email counseling. I explained in Chapter 2 that my study is situated in three specific research fields: interpersonal pragmatics, computer-mediated communication (CMC), and health discourse (see Figure 11.1). I will briefly revisit these three research fields to show how my study complements and adds to previous research in each of them.

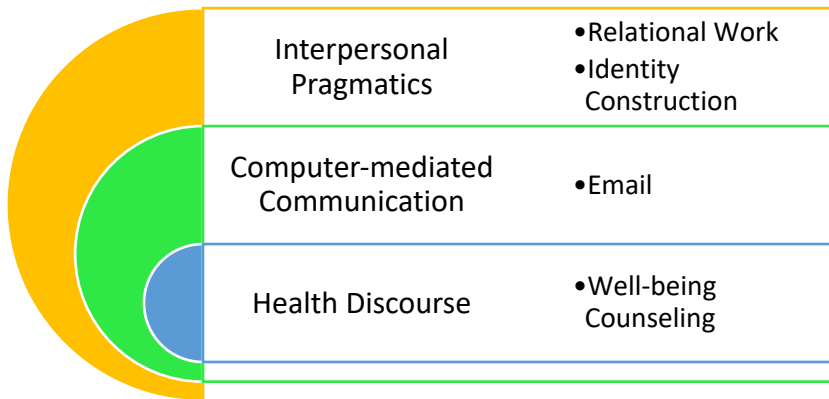


Figure 11.1 The interface of the three research fields revisited

Interpersonal pragmatics examines language in use from a “relational/interpersonal perspective” (Locher 2015: 6). Within this field, I have paid special attention to relational work, which encompasses “the entire spectrum of the interpersonal side of social practice” (Locher and Watts 2008: 78). I have examined various relational strategies and added to previous research on such strategies (see e.g. Bolander 2013;

Dayter 2014; Lindholm 2017; Locher 2006; Schneider 2010; Schnurr 2010; Stapleton 2010; Rudolf von Rohr 2018). My second focus within interpersonal pragmatics has been the construction of identities. I have provided empirical evidence in support of a social-constructivist perspective on identity, as described in Bucholtz and Hall's (2005) sociocultural linguistic approach. I have specifically applied Davies and Harré's (1990) positioning theory and showed how identity construction is both intersubjective and dynamic and that identities always stand in relation to each other. Finally, several researchers have called for an analysis of how notions such as relational work and the construction of identities are linked (see e.g. Garcés-Conejos Blitvich et al. 2013; Hall and Bucholtz 2013; Locher 2008; Locher and Schnurr 2017). My empirical examples have demonstrated how relational work involves "the ways in which the construction of identity is achieved in interaction" and that identity is "the 'product' of ... linguistic and non-linguistic processes" (Locher 2012: 511). In Section 11.2, I will go into more detail about how my study contributes to research on interpersonal pragmatics, the research field that has been my overall focus.

Since the early 2000s, research focusing on CMC has made clear that studies of online practices should focus on both technical and social factors (Androutsopoulos 2006; Herring 2001; Herring et al. 2013). In the 2010s, several researchers have also called for online social practices and online activities to be studied in their own right and in more detail (Garcés-Conejos Blitvich and Bou-Franch 2019; Georgakopoulou and Spilioti 2016; Locher 2014). To my knowledge, email

counseling has never been researched from an interpersonal-pragmatic perspective. Additionally, CMC research has further focused on “the complex *emergence of situated relational and interpersonal language use*” (Locher 2014: 562, emphasis in original), which includes the study of relationships and identity (see also Garcés-Conejos Blitvich and Bou-Franch 2019; Georgakopoulou and Spilioti 2016). My analysis of the therapeutic alliance (including the use of relational work and the construction of identities) in the online social practice of email counseling adds to this research area.

Androutsopoulos (2006) introduced the notion of research waves in CMC studies. The first wave investigated language in CMC as if it were “a single, homogeneous *genre* or communication type” (Herring 2007: N/A). The second wave focused on the “interplay of technological, social, and contextual factors” and the “linguistic variability in the formation of social interaction and social identities” (Androutsopoulos 2006: 421). Garcés-Conejos Blitvich and Bou-Franch (2019: 4) describe this second wave as being “concerned with the study of digital social practices.” My study clearly deals with such a digital social practice, and I have paid attention to technological and social factors as well as its embeddedness within the larger context of the counseling service. Georgakopoulou and Spilioti (2016: 6) argue that third wave research should include an ethical agenda and take on a self-reflexive stance, while “current research seems to converge on pointing out challenges rather than offering solutions.” They encourage researchers to “revisi[t] procedures and practices for gaining informed consent” and to be

“sensitive to data collection processes that can put participants ... at risk” (ibid.: 6). I have responded to this part of the call for third-wave CMC research with my development of specific ethical guidelines for my study that I have adhered to throughout the entire research process. Chapter 3 outlined these ethical guidelines in detail both for reasons of transparency and to offer future researchers some possible solutions for dealing with data from online counseling.

Despite the fact that “the potential of CMC for emotional and psychological counselling is clearly booming” (Locher and Schnurr 2017: 705), mental health is an under-researched area of health discourse (see e.g. Collins et al. 2011; Hamilton and Chou 2014; Harvey and Koteyko 2013). Since the early 2010s, some researchers have started to look into institutionalized mental health practices that work online (see e.g. Danby et al. 2009; Ekberg et al. 2013; Ekberg et al. 2016; Harris et al. 2012; Jager and Stommel 2017; Locher 2006; Stommel and van der Houwen 2014). All but one of these studies have utilized a conversation-analytic approach and have provided vital insights into specific aspects of online mental health practices. I pointed out in Chapter 2 that research on online mental health practices has undergone similar shifts to those in CMC research. Early studies compared online counseling to face-to-face counseling to establish similarities and differences. Later studies focused on comparing different types of online counseling. At the end of the 2010s, studies increasingly focus on the particular issues of individual practices. My study complements the findings of these previous studies by providing a holistic perspective on



email counseling (for a discussion of my choice of methodology, see also Section 11.4 on the limitations of my study).

To analyze email counseling from such a holistic perspective, I focused on the language that interactants use to negotiate the therapeutic alliance. My focus on the therapeutic alliance is explained at least in part by what Green (2010: 14, emphasis in original) says about what counseling actually is: “counseling is not something you do *to* someone, it is something you do *with* them, as partners in the enterprise.” To shed light on the collaborative work in the therapeutic alliance, I have looked at the five naturally occurring email counseling threads in my corpus to understand the relational work employed in them and the resulting identities that the participants construct. At the same time, I have continuously taken the context and the situatedness of the practice into account in order to provide a holistic description of the practice. I have aimed to answer the following research questions outlined at the beginning of my study:

- What are the medium and situation characteristics of email counseling?
- What types of themes are discussed?
- What types and patterns of discursive moves can be found?
- What types of relational work come up and how are they employed?
- What types of identities are constructed, and how?
- Are there links between discursive moves, relational work and identities?

To answer these questions, I have used a mixed methodology: (1) a content analysis to uncover the themes the interactants discuss; (2) a discursive moves analysis to reveal the types of moves and the patterns in which they occur; and (3) a form and function analysis of linguistic expressions. Every new step was based on and informed by the results of the previous one(s). In addition, I utilized corpus-linguistic techniques to gain further insight into the linguistic realization of four specific discursive moves. Finally, I triangulated my data by interviewing the counselor who participated in the counseling exchanges that I analyzed. These methodological steps have allowed me to present a holistic description of the therapeutic alliance and to answer the six research questions listed above.

The results of my analyses were presented in Chapter 3 and Chapters 5 to 10. Chapter 3 focused on answering the first research question about the typical characteristics of email counseling. Chapters 5 to 7 focused on themes and discursive moves, including the patterns in which they occurred and their linguistic realization. Finally, Chapters 8 to 10 answer the research questions about relational work, identities, their connection and how they relate to discursive moves. At the end of each of these chapters, I have presented comprehensive summaries in which I come to conclusions about specific features of the interaction and make comparisons to previous research, so I will not go into detail on these results and comparisons with other research here. Instead, I will draw together some of the strands in my study to consider both the online health practice of email counseling in general (Section 11.1) and

my contribution to the theoretical framework within interpersonal pragmatics (Section 11.2). Finally, I will revisit my intention to make my work accessible to counselors and other practitioners (Section 11.3) before discussing some limitations of my study and possible future research (Section 11.4).

### **11.1 Email Counseling as an Online Health Practice**

I have described the online health practice ‘email counseling’ from a counseling perspective and outlined how email counseling is embedded within the counseling service at BEI, which offers several types of counseling, both face-to-face and online. The service’s website characterizes email counseling as well-being counseling (Chapter 3). The content analysis revealed the specific themes the interactants discuss in the exchanges: the five threads mostly focus on the five themes ‘anxiety’, ‘depression’, ‘relationships’, ‘self-esteem’ and ‘stress’. These themes confirm that the interactants perform well-being counseling and not other types of counseling. These themes also resemble the topic categories of “emotional health”, “relationships”, and to some degree “sexuality” in Locher’s (2006) study of *Lucy Answers*, as well as the data in other research on online counseling such as Danby et al. (2009), Stommel (2012), or Ekberg et al. (2016). Yet these thematic foci clearly distinguish the counseling in my corpus from other types of counseling, such as genetic counseling (e.g. Zayts and Schnurr 2011), AIDS/HIV counseling (e.g. Silverman 1997) or information-based counseling (e.g. Jager and Stommel 2017). The clear focus of the interactions in my

study is on the mental health of the clients and their desire to improve it. My analysis of situational factors has also identified the specific counseling approaches that the counselor employs: a humanistic-existential approach to human nature combined with cognitive behavioral therapy and solution-focused brief therapy. Not only does the counselor provide these labels on her website and in the interview, I have illustrated throughout the discursive moves analysis and the analysis of relational work and positionings that she practices these approaches in the exchanges. For example, I have pointed out in several chapters that the counselor clearly focuses on solutions and the strengths and positive abilities of the clients, which is indicative of the solution-focused approach. In addition, I have highlighted how the short-term therapy format has a particular impact on the closure process of the counseling exchanges.

My description of email counseling from a CMC perspective has also made clear that the practice is constituted by specific medium and situation factors, including the use of the copy-paste function, the use of italics and several font colors, or the persistence of the transcript, which can influence the interaction between the clients and the counselor. Another such factor is how the counselor shifted from using the body of the email for the counseling content towards the use of a separate password-protected word document. Along with such technical factors, I have also considered idiosyncratic differences between the clients in how they interact with the counselor, while also taking the technical characteristics into account throughout my analytical steps.

It has been the form and function analysis of specific linguistic expressions that has made especially clear how the interactants face specific medium challenges in their attempts to work collaboratively on the clients' struggles. For example, the counselor does not receive an immediate reaction to her input, as she normally would in face-to-face counseling. In such traditional counseling, a turn by the counselor is likely followed by a turn from the client. The asynchronous nature of email does not easily allow for such turn-taking. However, I have shown how the counselor and the clients take the asynchronicity of the interaction into account when they draft their entries: For example, the counselor puts considerable effort into including the clients' voice through reported speech when she explains the abstract concept of self-esteem in the garden metaphor. In addition, the clients provide their last input in the penultimate entry. In this penultimate entry, the clients (except for Taylor) position themselves as successful applicers of coping techniques and sometimes even as active self-helpers. Before the counselor can respond to such positionings in the very last entry, the clients have already offered a positive summary and assumed their role in the closing sequence of the closure process. As such practices make clear, the interactants may face some challenges because of the medium, but they still manage to turn its specific technical details to their advantage.

I have found both similarities and differences between my study and other studies that have analyzed online practices that center around supporting others. For example, Locher (2006), Morrow (2012) and Rudolf von Rohr (2018) found a similar set of discursive moves used

in the practices they studied. In particular, Locher's (2006) analysis of an online advice column shares similarities with my study with regard to the set of discursive moves used in the practice (e.g. *assessments*, *advice-giving*, *problem statements*, *general information*, and *meta-comments*). However, there are also clear differences between email counseling and other practices. For example, the advice-giver in my data, i.e., the counselor, does not use any personal anecdotes or her own experience to give advice. Lindholm (2010) and Rudolf von Rohr (2018) have found such instances in the form of narratives and own-experience moves. Such moves are not used for giving advice in my data, but after all, best practice guidelines explicitly encourage counselors not to share any personal information during counseling (Green 2010). This finding clearly distinguishes the practice of email counseling as an institutionalized practice from the peer-to-peer interaction studied Lindholm (2017) and Rudolf von Rohr (2018). In addition, advice-seekers in other studies use *requests for advice* readily (e.g. Locher 2006; Morrow 2012; Rudolf von Rohr 2018), while the clients in my corpus rarely do so. This is part of the "talking cure" (see e.g. Launer 2005: 465) aspect of counseling: Clients do not necessarily want to receive specific advice; instead, they want to be able to talk to someone about their struggles and thus to be heard and understood. All in all, the discursive moves analysis has facilitated a comparative discussion of the similarities and differences between email counseling and other supportive online practices.

One aspect of the interaction that has been found in previous research and that is also prevalent in the email counseling exchanges in my corpus is that of a stepwise entry to advice. Previous studies have found that advice-givers invest considerable work in facilitating the uptake of advice (see e.g. Heritage and Sefi 1992; Locher 2006; Rudolf von Rohr 2018; Silverman 1997). The counselor in the email exchanges here puts considerable effort into ensuring that the clients take up the advice that she provides. She frequently precedes *advice-giving* moves with *assessment* moves; that is, she first signals her understanding of the clients' struggles before offering suggestions about how to better deal with them. This practice was also found in Locher (2006) and Rudolf von Rohr (2018). In *assessments*, the counselor uses such relational strategies as displays of empathy and bonding to ensure that the clients feel understood and taken seriously. Only then does she proceed to give advice. In her *advice-giving* moves, she tailors the advice to the specific situation the clients find themselves in. She adjusts the linguistic realization and the interplay of relational strategies to take the clients' face concerns into account. For example, she mitigates the force of the advice with declaratives and lexical items such as *might* and *try*, or presents a positive stance with smiley emoticons. She also uses relational strategies such as encouragement and praise to save or even enhance the clients' face. In addition to such a stepwise entry to advice, the counselor regularly practices a specific exit strategy from advice in which *requests for information* position the clients as important participants in the therapeutic alliance. She encourages the clients to

experiment with suggested coping techniques and actively invites them to voice their opinion. In all of these ways, the counselor puts considerable work into the therapeutic alliance.

I have also provided insight into very specific details of the email counseling exchanges: narratives as tools to position the clients in specific ways, a metaphor to explain and work on the clients' self-esteem, and the closure process of the counseling exchanges (Chapters 8 to 10). These chapters have analyzed the types of relational work that are performed and the identities that are constructed by the interactants. My findings have shown that the counselor pays special attention to the therapeutic alliance and that she puts considerable effort into positioning the clients as active self-helpers and participants in the therapeutic alliance. I will review some of these findings in more detail in the section below that discusses how my study contributes to the research field of interpersonal pragmatics.

My analysis shows how the counselor helps clients identify their strengths and positive qualities. In addition, I have shown that the counselor provides several of the clients with coping techniques that help them to better deal with their struggles. The interactants therefore manage to work collaboratively on the clients' journey to better mental health and seem to succeed, and as I have shown, specific interplays of discursive moves, relational work and positionings are crucial in this collaborative work. Chris summarizes the practice of email counseling and how it has helped him in his last entry (abridged version):



(11.1) Chris (Thread: Chris; Entry 9)

I think this counseling has definitely helped me since I first contacted you, [...]. I also much preferred this online style of counseling that the traditional style I tried before. I find that I can write down everything I feel and it is less intense than sitting in a room.

Chris' description of how the email counseling has helped him and how he felt more comfortable with *this online style of counseling* shows that the online health practice of email counseling can be helpful. My holistic analysis has made it possible for me to go into the details of how such email counseling exchanges unfold and thus can be helpful to the clients. Email counseling is thus a valuable complement to the face-to-face counseling offered at the service at BEI. It allows clients who prefer to write about their struggles to choose a type of counseling that suits them, while others who feel more comfortable with face-to-face counseling can also choose accordingly. Without the option of either type of counseling, some students might be left behind. Overall, the framework of interpersonal pragmatics and my focus on relational work and identity construction have allowed me to consider the establishment and negotiation of the therapeutic alliance both in detail and overall.

As mentioned in the introduction to my study, research on how the therapeutic alliance is negotiated has been scarce (Ackerman and Hilsenroth 2003; Nienhuis et al. 2018), and Berger (2017) has called for further qualitative research on the therapeutic alliance in Internet-based psychotherapies and counseling to be conducted. I have provided

a detailed description of the negotiation of the therapeutic alliance and have shown that the interactants invest considerable work into this negotiation. That is how this study contributes to research on the therapeutic alliance in general and its role in email counseling in particular. In turn, my analysis of the therapeutic alliance also contributes to research on interpersonal pragmatics.

### **11.2 Contributing to Research on Interpersonal Pragmatics**

Locher and Graham (2010: 10) noted that “ultimately, every set of linguistic data can be looked at from the perspective of interpersonal pragmatics.” My study has shown that email counseling consists of interactions that are particularly rich in linguistic choices that create interpersonal effects. This is also confirmed by psychotherapeutic research that highlights how important the therapeutic alliance is for the outcome of psychotherapy or counseling. Psychotherapists and counselors are specifically trained to pay attention to the therapeutic alliance and to relational work, both by the clients and themselves (see e.g. Comer 2010; Green 2010; Kim 2008). I have aimed to identify the relational strategies that are used to create the therapeutic alliance and the interactants’ identities. My study has confirmed findings from previous studies and generated some further findings. I want to highlight five findings that are especially salient to research within interpersonal pragmatics: (1) the interdependence of discursive moves, relational work and identity construction; (2) the interrelatedness of individual positionings and its effect on the therapeutic alliance; (3) the differences in

use of relational work over time; (4) the interactional achievement of relational work and positionings; and (5) the intrapersonal causes and effects of relational work.

First, my study has confirmed the interdependence of discursive moves, relational work and identity construction (see e.g. Bolander 2013; Lindholm 2017; Locher 2006; Morrow 2012; Placencia 2012; Rudolf von Rohr 2018). To account for this interdependence, I have conducted content, discursive moves and form and function analyses of the five threads. In several steps, these analyses have revealed several ways in which interpersonal effects can be created. For example, the interactants' choice of specific discursive moves or particular sequences of discursive moves creates interpersonal effects: with *problem statements*, the clients position themselves as advice-seekers, while the counselor's *advice-giving*, *referral*, or *general information* moves position her as an advice-giver. The linguistic details within such discursive moves further create interpersonal effects. The frequent use of negative emotional stance adverbials in *problem statements* depict the emotional turmoil the clients go through; the clients use them to appeal for empathy. The counselor's use of first person plural pronouns in *general information* moves marks information as applicable to a general readership and thus normalizes it. As this positions the clients as undergoing common challenges, it saves their face.

I have further demonstrated how the four most frequent discursive moves (i.e., *advice-giving*, *assessment*, *problem statement*, *request for information*) can carry out specific sub-functions. *Problem*

*statements*, for example, can be used to introduce a new problem, confirm a problem that the counselor introduced, or reiterate that the clients need further support. While their overall aim is to position the clients as advice-seekers, their results can differ in specific ways. For example, a confirmation of a problem that the counselor identifies can have an additional impact on the therapeutic alliance: it makes clear that the counselor understands the clients. *Problem statements* that reiterate the clients' need for further support keep the clients in the position of advice-seekers and the counselor in the position of a potential advice-giver, even if they may have been positioned in other ways before (e.g. the clients as active appliers of coping techniques and the counselor as encourager). While these differences are subtle, they clearly influence the therapeutic alliance and the ongoing interaction.

The analysis of relational work within discursive moves has revealed that there are clear tendencies for particular types of relational work to occur more frequently in particular discursive moves. This result confirms findings from previous studies (see e.g. Bolander 2013; Locher 2006; Morrow 2006, 2012; Placencia 2012; Rudolf von Rohr 2018). I have determined, for example, that the relational strategy of appealing for empathy is clearly linked to the discursive move *problem statement*, while the counselor frequently displays empathy in *assessment* moves. In addition, my analysis has revealed that *problem statements*, which are only used by the clients, are frequently followed by an *assessment* from the counselor. As appeals for empathy occur in *problem statements* and displays of empathy occur in the subsequent

*assessment* moves by the counselor, the discursive moves and the relational strategies can be clearly linked.

Moreover, I have provided further empirical evidence that relational work is employed to construct identities. In other words, I have shown that relational work refers to the ways that interactants perform identities, with the end product of this work being the identities (Locher 2012, 2013; Tracy 1990). As found in previous studies (Bolander 2013; Locher 2006; Rudolf von Rohr 2018), the interactants in my study use an interplay of relational strategies to construct specific identities. For example, the clients use an interplay of appealing for empathy, boosting, and self-criticism to position themselves as advice-seekers. The counselor responds by displaying empathy and consoling the clients, which affirms the clients' position as authentic and legitimate advice-seekers. Alternatively, the counselor uses praise and encouragement to position the clients as active self-helpers who have a set of coping techniques at their disposal to deal with their struggles.

Further, my study's empirical evidence demonstrates that the interactants interpret an interaction from the position they have taken up (Davies and Harré 1990). This was made clear by my analysis of the garden metaphor and the specific reactions of the three clients that were exposed to it. All clients had their own distinct reaction to the same *requests for information* that the counselor had produced, and their reactions were based on the particular position they took up: as an active participant in the therapeutic alliance, as an applier of coping techniques provided by an expert, or as a person who feels the need to talk

about their struggles rather than finding solutions. That is, some of the clients used *assessments* that contained self-praise to position themselves as active self-helpers, while others employed relational strategies such as appeals for empathy and self-criticism in *problem statements* which positioned themselves as advice-seekers. All of these findings highlight how discursive moves, relational work and the construction of identities are interdependent. They also confirm that it is essential to investigate relational work in context. I have done so with my combination of content, discursive moves and form and function analyses.

A second overall finding of my study that I want to focus on here is that individual positionings always stand in relation to other positionings. In other words, my analysis has provided empirical evidence that corroborates Bucholtz and Hall's (2005) argument that identities are intersubjective and always stand in relation to other identities. This was visible in many ways throughout my analysis; I briefly discuss three specific ones here. The positions of advice-seeker and advice-giver stand in relation to each other within the therapeutic alliance. When the clients produce troubles tellings in *problem statements* and appeal for empathy from the counselor, they position themselves as advice-seekers. Simultaneously, this positions the counselor as a potential advice-giver. Once the counselor gives advice, she positions herself as an advice-giver and the clients as recipients of the advice, i.e., the ones who sought advice.

Moreover, the positions of the clients as advice-seekers and active self-helpers also stand in relation to each other. The interactants

position the clients at the beginning of the exchanges as advice-seekers. They do so by employing discursive moves (*problem statements, advice-giving*) and relational work (appeals for and displays of empathy, self-criticism) that highlight an advice-seeker identity. Once the clients' well-being improves, a transformation of their identities takes place: they become appliers of coping techniques or even active self-helpers. These positions move to the forefront relative to the clients' previous positioning as advice-seekers. In other words, the clients' improved well-being is visible in the transformation of the identities the interactants construct. This is especially clear when the counselor specifically asks the clients towards the end of counseling to think about their improvement (e.g. *it would be useful if you thought about how things have changed since you first contacted me*) or when clients overtly state their progress (e.g. *I do feel more positive since I first contacted you, I think this counseling has definitely helped my [sic] since I first contacted you, You're right, I am making progress*).

Further, I have shown that the connection between the clients' and the counselors' identities is linked in specific ways to the transformation of the interactants' identities. The transformation of the clients' identities from advice-seekers towards appliers of coping techniques and active self-helpers allows the counselor to move from a position of advice-giver towards the position of an encourager and maybe even a bystander who witnesses the clients' improved well-being. This was visible in Chris' thread. This pattern becomes even more salient, however, in cases where the corresponding transformation is resisted. In

Taylor's thread, the counselor tries to position Taylor as an applier of coping techniques, but Taylor resists this positioning and instead keeps positioning herself as an advice-seeker. In turn, this makes it difficult for the counselor to position herself as an encourager and renders a position as a witness of Taylor's progress impossible. Thus, the transformation of the clients' identities has a clear impact on the counselor's ability to transform her own identity. All three examples show that identities always stand in relation to other identities and that identity construction is clearly an intersubjective and interactional achievement.

Third, I have described the specific patterns of relational work that occur in the different stages of the counseling process. For example, my investigation has shown that the clients use the relational strategies of appealing for empathy and self-criticism in early entries (and overwhelmingly in *problem statements*), but they use praise of both themselves and the suggested coping techniques in later ones (and mostly in *assessments*). In contrast, the counselor uses a range of relational strategies, such as praise, encouragement and bonding, throughout all entries (and in several types of discursive moves). At the same time, she displays empathy more often in early entries (and in *assessments*) and less in later ones. That is, there is a clear shift in the use of relational strategies (and discursive moves in which these strategies occur) over time. The utilization of relational strategies clearly changes from the establishment of the therapeutic alliance, to its negotiation in the middle stages of the process, and finally in its potential resolution in the last stages of counseling. Such patterns running through several



stages of a practice have not been researched extensively before. Clearly, such extended interactions that transpire over several entries or ‘encounters’ deserve more attention from an interpersonal-pragmatic perspective. A holistic analysis such as the one I applied makes it possible to identify such changes of patterns throughout the entire interaction within a given social practice.

Fourth, not only are positionings and identities interactional achievements, but so are relational strategies. Previous research has shown that empathy is an interactional achievement (Muntigl et al. 2014; Pudlinski 2005; Wynn and Wynn 2006). My findings have corroborated this understanding of empathy. To my knowledge, other relational strategies have not been researched in the same way as empathy. My results demonstrate, however, that relational strategies such as praise and self-praise are also interactional achievements. The studies on empathy referenced above have characterized how empathy consists of three parts: an empathic opportunity, a display of empathy, and the ratification of this display. Only once the display of empathy is ratified is empathy really achieved. In Chapter 9, I established that self-praise might work in a similar way: the counselor provides opportunities for the clients to praise themselves when she, for example, suggests that the clients should write down a list of positive qualities and achievements. Some of the clients respond positively and report that they have thought about or written down such qualities and achievements. The counselor subsequently ratifies this self-praise when she praises the clients for their lists. Chapter 10 shows that the counselor

uses praise and encouragement to create such opportunities for clients to use self-praise. However, praise by the counselor does not automatically result in self-praise by the clients. In other words, the clients do not always take up the opportunity to self-praise that the counselor provides. Nevertheless, praise and encouragement from the counselor can facilitate self-praise in clients. Future research should take such mechanisms of interactional achievements into account when investigating relational strategies.

Fifth, my analysis makes clear that interpersonal-pragmatic research should not only consider the interpersonal work (i.e., work between individuals) employed in interaction, but also the intrapersonal work that interactants perform (i.e., the work that is caused by or aimed at effects within an individual). Previous research has shown that it is repeated acts of positioning that result in the construction of specific identities (Bolander and Locher 2015). In other words, a one-time use of the relational strategy of appealing for empathy might not result in the clients' positioning as an authentic and legitimate advice-seeker. Rather, it is the clients' repeated use of an interplay of such strategies as appealing for empathy and self-criticism that can make it possible for them to perform an authentic and legitimate identity as an advice-seeker. My analysis has shown that this is not just an interpersonal but also an intrapersonal issue. Clients who use self-praise when they report on the application of a coping technique in one instance might not be convinced that they are now active self-helpers who have overcome their difficulties. But if clients can repeatedly praise themselves for

having been successful (for example, in applying coping techniques), they might start to believe that they are in fact well-equipped to deal with their difficulties. I have argued in Chapter 8 that the clients need to repeatedly position themselves in specific ways if they are going to internalize progress. Further, when they praise themselves, the clients might not use mitigation just to reduce the face-threat that such overt self-praise might project; instead, they might also use mitigation to signal that they are not entirely convinced that they have succeeded. In other words, the causes or effects of specific choices in relational work might be on an intrapersonal level instead of an interpersonal level. Such intrapersonal effects of relational strategies and of acts of positioning have not been yet given due attention. All in all, intrapersonal effects should be studied in a variety of contexts, and ideally with the help of the interactants themselves, who can provide vital insight into such issues.

### **11.3 The Applied Element in a Study of the Therapeutic Alliance**

In Chapter 4, I agreed with Pick's (2011) call to include a practitioner's perspective in research on such practices as counseling, coaching or mediation. I have tried to make my study a response to Pick's point. On the one hand, I hold a Master's degree in English linguistics as a major subject and in psychology as a minor subject. In other words, my educational background has given me a special insight into the data (like Ferrara (1994), who attended training sessions for future psychothera-

pists): I have been able to apply fundamental knowledge about psychology when interpreting the exchanges. In addition, my interview with the counselor who provided the data for the present study gave me further insights into what transpires within the five counseling threads. I have continuously drawn on the counselor's statements throughout the study, so the practitioner's perspective is always present. In addition, discussions with interested practitioners have also guided some of my foci during my research. For example, a frequent question from practitioners has been how they can convey empathy when they only write their answers and do not have any additional non-verbal cues such as gazes, facial expressions or gestures at their disposal. I have tried to explain how the counselor in my data still manages to convey empathy and other relational strategies despite the lack of face-to-face interaction.

In addition, in my ethical guidelines in Chapter 3, I mentioned that it is clear to me that I should make my results available to practitioners in order for them to benefit from my research. I have been trying to accomplish this goal in several ways that I will briefly discuss here. I had the opportunity to give a workshop for counselors of the counseling service at which the counselor in my data works. After a presentation of some of the results, a discussion ensued about specific issues, including the use of the specific technical characteristics of the medium, the practice of a stepwise entry to advice, or the relational work in the garden metaphor text block. We discussed how specific parts of their work could be shared among counselors, such as text blocks like the

garden metaphor, and how attention to linguistic details in supervision discussions could help the counselors to find ways to convey empathy towards clients. These discussions led the counselors to implement supervisory meetings (without my presence) in which each counselor would bring along written examples of issues to share and discuss with each other. Thus, my study and the workshop I held sharpened the counselors' attention to linguistic detail and generated the possibility of discussing such linguistic details in their supervision meetings.

I have also presented some of my results at counseling services in Switzerland, such as the *Beratung Kind, Jugend und Familie, Stadt Luzern* (Counseling service for Children, Teens and Families in the city of Lucerne), and in supervision meetings of coaches who work with a wide variety of clients. I will continue to hold such workshops to share the results of my study for the benefit of practitioners and their clients. In addition, I aim to make my work available in open access form so that practitioners can have free access to it (e.g. most of the articles published so far, such as Thurnherr et al. (2016), Thurnherr (2017) and Locher and Thurnherr (2017) , are available online and free of charge).

While it is my hope that my work can facilitate practitioners' understanding of their own practice and raise their awareness of the crucial linguistic work they invest in the therapeutic alliance, a word of caution is necessary. Georgakopoulou and Spilioti (2016) have argued that part of moving towards a third wave of CMC research involves taking a critical stance towards online practices. Such a critical stance "should also lead analysts to the scrutiny of how certain social media-

afforded communication practices may be ultimately disadvantaging socio-cultural groups and individuals” (Georgakopoulou and Spilioti 2016: 6). Although my study has demonstrated how the counselor establishes mostly positive therapeutic alliances in the five email counseling threads, I am not calling for all counseling to be provided online. Neither potential clients nor practitioners should be forced to conduct counseling in an online environment if they do not wish to do so. As the National Health Service in the UK (NHS 2018, emphasis added) says on their website: “Research shows that, **for some people**, [online counseling] can be just as effective as face-to-face therapy with a therapist for depression, anxiety and other mental health problems.” Some people clearly benefit from online counseling, such as Chris, who highlighted at the end of his thread that he felt more comfortable with online counseling than with traditional counseling (see example (11.1) above). Access to online counseling benefits the well-being of people like Chris. Other people might not feel comfortable with writing or with online media in general. Such people would likely not benefit from online counseling in the same way. In addition, some counselors might also feel less well-equipped to conduct written counseling. These personal preferences need to be taken into account, and no person should be forced to attend or conduct online counseling instead of face-to-face counseling. I strongly advocate for both types of counseling to be made available for people who struggle with their mental health to choose from.

**11.4 Limitations of the Present Study**

Finally, I want to discuss some limitations of my study and how they could be overcome with future research. To begin with, one clear limitation of my study is the small data set. As I have only studied five counseling exchanges in which only one counselor has participated, I cannot make generalizations of my results. Nevertheless, my combination of a content analysis, a discursive moves analysis, and a form and function analysis of linguistic expressions has made it possible for me to provide a holistic description of the exchanges that make up my corpus. Additionally, the small dataset has allowed me to exhaustively code the data for specific features, such as themes and discursive moves. In addition, my triangulation of the data with the interview with the counselor has given me another perspective on the data. However, future research should expand to further email counseling exchanges that are conducted by several counselors who apply different psychotherapeutic approaches and with a range of clients differing in gender, age, occupation, familiarity with the Internet and so on.

Further, I have shown that the quantification of the discursive moves analysis has provided salient results. Due to the richness of relational work and the various subtle acts of positioning that occur within the exchanges, I could neither conduct an exhaustive analysis of these issues, nor provide a quantification of their occurrences within discursive moves or themes. Instead, I had to focus on specific points, such as narratives or the closure process; only then could I thoroughly analyze relational work and positionings. While these close analyses have

provided highly relevant results, there are numerous further displays of relational work and further acts of positioning present in the data. Coding of the entire corpus for relational work or positionings could generate further insights into the interpersonal effects that are created by the interactants.

Despite the fact that I have combined three types of analysis and triangulated my analysis with a participant interview, it would be worthwhile to further study the dataset from additional perspectives. For example, previous conversation-analytic research has examined a range of aspects of counseling, be that face-to-face or online. While my research complements these previous studies, an analysis of the same dataset from other perspectives would allow for better comparison between the research perspectives and ultimately provide better insight into the practice of email counseling. In addition, it would be helpful to include the perspectives of practitioners and psychologists, such as discursive psychologists, not just through an interview, but as research participants throughout the entire research process. This would facilitate an even more detailed understanding of the psychological aspects of the counseling exchanges. While I had training in psychology, a fully trained counselor, psychotherapist or discursive psychologist could certainly add a more experienced view to the analysis of the exchanges.

When I began to be interested in the linguistic realization of the therapeutic alliance in online counseling, interpersonal-pragmatic research had not been conducted into this specific issue. I therefore chose to analyze naturally occurring email counseling exchanges with regards



to the therapeutic alliance and the ways in which this alliance was constructed solely through the written words of the clients and the counselor. Despite the limitations I have just described, I hope that my research contributes to our overall understanding of such online counseling practices and more generally of how people try to improve their mental well-being. I also hope that my study encourages further interpersonal-pragmatic research as well as other types of research into (online) counseling. NHS Digital (2016) reported that “around one in six adults (17 per cent) surveyed in England met the criteria for a common mental disorder (CMD) in 2014.” They add that

39 per cent of adults aged 16-74 with conditions such as anxiety or depression, surveyed in England, were accessing mental health treatment, in 2014. This figure has increased from one in four (24 per cent) since the last survey was carried out in 2007. (NHS Digital 2016)

Clearly, there is a need to understand how mental health care is delivered. I hope to have answered some questions, but without a doubt there are still many other questions that deserve further attention.

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## Appendices

### Appendix A. Outline of Research and Letter of Intent Sent to Participants

UNIVERSITÄT BASEL  
PHILOSOPHISCH-HISTORISCHE FAKULTÄT  
DEPARTEMENT SPRACH- UND LITERATURWISSENSCHAFTEN

**Outline Subproject "Relational Work in Email Counseling" of the  
SNF-Project "Language and Health Online"**

The project "Language and Health Online" (<http://p3.snf.ch/project-143286>), funded by the Swiss National Science Foundation (2012-2015) researches e(lectronic)-health interaction in asynchronous, written computer-mediated communication from a linguistic perspective. By exploring this interface, we want to contribute to a better understanding of e-health practices. The project consists of two parts: "Persuasion in smoking cessation online" and "Relational Work in Email Counseling", which pursue joined as well as individual research questions. Our project aims at shedding light on how language is used to create and maintain the relationship between professionals and clients.

The sub-project "Relational Work in Email Counseling" researches the therapeutic alliance of email therapy. Krupnick et al. (1996: 532) define the therapeutic alliance "as the collaborative bond between therapist and patient." It is this "collaborative" and interactional aspect that is researched in this study: how do therapist and patient construct the therapeutic alliance when their only contact is through emails? The quality of the therapeutic alliance has a significant effect on the successful outcome of therapy. This is well researched in face-to-face therapy (e.g. Krupnick 1996: 536). Psychologists working online (e.g. Jones and Stokes 2009: 19) have reported that the bond created in email therapy equals one of face-to-face therapy. Thus, this study aims at finding strategies that are used to construct the therapeutic alliance in therapeutic emails. The perspective of relational work, defined by its originators Miriam A. Locher and Richard J. Watts (2005: 10) as "the 'work' individuals invest in negotiating relationships with others", provides a linguistic framework for the study. Hence, the strategies looked for are of relational nature. Jones and Stokes describe one of such possible relational strategies from a psychological perspective in their book *Online Counselling: A Handbook for Practitioners* (2009: 18): "Many online counsellors use a favourite ending phrase which appeals to them such as 'warm regards' or 'warm wishes'. [...] This is a useful way of personalizing the email and showing it has come from you." The use of endings has here clearly a relational purpose; the psychologist wants to convey warmth and empathy. In other words, psychologists use relational strategies to construct and negotiate the therapeutic alliance.

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My research centers around two dimensions of the therapeutic alliance: the construction of the identities of the interactants and the relational work they carry out to negotiate the therapeutic alliance. The construction of identities, as well as relational work are of central importance for the quality of the therapeutic alliance.

The data for this study consist of therapeutic emails from email therapy. It is of central importance that the data are not constructed but are real life examples. The reason for this is that we aim at describing relational strategies that are actually used by counselors and their clients. This is vital since we aim at providing counselors with a descriptive framework of their own work in order for them to profit from the linguistic perspective as much as possible. Furthermore, it is essential that the therapeutic exchanges must be conducted by professionals: the counselors need to be registered members of the profession, as well as have undergone basic training in online counseling. These requirements are chosen for ethical reasoning: it is important that we can ensure that patients are treated professionally during their therapy.

The aim of this study is twofold: firstly, we want to further our understanding of the relational aspect of language in the field of mental healthcare. Secondly, and of central importance, we conduct this study as applied research: it is essential that practitioners can profit from our findings in their daily work as counselors.

Finally, some considerations on ethics are in order. We strictly follow the four ethical pillars of the Georgetown Mantra on Ethical Medical Research<sup>1</sup> and the ethical guidelines put forward by the Association of Internet Researchers (AoIR) Ethics Committee (Markham et al.: 2012), detailing how researchers should work with online data, in order to ensure that the therapists' as well as their clients' confidentiality and anonymity is protected at all times. The research group of our project has outlined a specific data collection plan in order to comply with confidentiality and anonymity: The therapists will be the sole contact between researcher and client. Hence, the therapist asks his or her clients whether they agree to release their data to us for research in an anonymized form (including publication of linguistic examples). If the clients consent, the therapist anonymizes the data. We have chosen this data collection process for two reasons: first, the client can be assured that no identifying information will be revealed in the study, not even to the researchers. Additionally, we strongly believe that the therapists are

<sup>1</sup> The four ethical pillars of the Georgetown Mantra on Ethical Medical Research are non-maleficence (do no harm), beneficence (minimize potential harms and maximize expected benefits of the research), respect for autonomy (self-rule), and justice (fair balance of risks and benefits).



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more knowledgeable of the identifying markers of their clients and will, thus, be able to anonymize the appropriate information more accurately. Additionally, we will make sure that any information left that seems to be identifying the client or the therapist will be checked with the therapist and made anonymous as well. These careful steps will warrant the privacy of both therapist and client appropriately and impeccably. All these ethical guidelines will be upheld during the entire duration of the project.

**References:**

Krupnick, Janice L., Stuart M. Sotsky, Sam Simmens, Janet Moyer, John Watkins, Irene Elking, and Paul A. Pilkonis. "The role of the therapeutic alliance in psychotherapy and pharmacotherapy outcome: Findings in the National Institute of Mental Health Treatment of Depression Collaborative Research Program." Journal of Consulting and Clinical Psychology 64.3 (1996): 532-539.

Locher, Miriam A., and Richard J. Watts. "Politeness theory and relational work." Journal of Politeness Research 1 (2005): 9-33.

Jones, Gill, and Anne Stokes. Online Counselling: A Handbook for Practitioners. Basingstoke, UK: Palgrave Macmillan, 2009.

Markham, Annette, and Elizabeth Buchanan. "Ethical Decision-Making and Internet Research: Version 2.0 Recommendations from the AoIR Ethics Working Committee"; 2012.

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Dear Sir or Madam,

14<sup>th</sup> of March 2013  
 Basel, Switzerland

I am writing to you as a researcher of the Swiss National Science Foundation-project "Language and Health Online" of the Department of Languages and Literatures at the University of Basel, Switzerland. We are conducting a study on the relational aspect of language used in the (mental) health context on the Internet, such as in email counseling. Our project's aim is, hence, to shed light on how language helps to create the relationship between professionals and clients.

Many counselors have reported how well the relationship in email counseling can be established. We are investigating what kind of linguistic strategies are used to do this. For example, when a counselor wants to convey warmth at the end of an email, he or she might choose a specific ending phrase, such as 'warm regards' or 'warm wishes'. We aim at providing counselors with a descriptive framework of such strategies to shed some light on their work from a linguistic perspective. Our research is aimed at benefitting the counselors, and in connection also their clients, by outlining the linguistic opportunities and potential of their work.

It is very important to us to note that we are not judging choice of words or linguistic phrases in a positive or negative way. Rather, we describe what kind of words and phrases counselors and clients use to establish their relationship. Since we aim at a description of linguistic strategies that are in fact in use, it is essential that we can work with natural data (as opposed to constructed examples). We are, hence, collaborating with counselors from Cardiff University to ask whether you would consent to release your email exchanges with your counselor to our research project.

We are aware of the private and confidential nature of such email exchanges, of course, and we would like to comment on how we want to make sure that your privacy and confidentiality will be ensured. You are contacted by your counselor in confidence, hence no information or any parts of your exchanges with your counselor have reached us so far. Your counselor will only release your exchanges to us if you have given informed consent. Hence, your counselor asks you whether you agree to release your data to us for research in an anonymized form (including publication of linguistic examples). Additionally, and very important for you to know, you have the option of editing your text in the sense that you can delete passages that you do not wish to share. However, you should make deleted passages visible with the following substitution "[deleted passage]", so that we know where gaps are. This procedure is set up to ensure your absolute privacy, confidentiality and anonymity.

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Your anonymized exchanges will be stored on safe and protected computers, which only the researchers of this project have access to. All these ethical considerations will be upheld during the entire duration of the project.

If you have any questions about our study, your counselor will pass them on to us confidentially and anonymously. If you would like to contact us personally, please feel free to do so as well. Additionally, if you are interested in the results of our study, we will also readily make them available to you, of course.

Thank you very much for your time and consideration.

Yours sincerely,



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## Appendix B. Codebook Discursive Moves

### Instructions on coding

Carefully read through the instructions before each coding session!

Preliminary steps:

- Read through the entire text first to know the gist of the counseling exchange
- Read through the coding schema carefully

Coding:

- Start of a code: always the first letter of the discursive move
- End of a code: always include the punctuation marks (i.e. . : ; ! ? –) but not the space afterwards (→ possible exceptions: in last moves in an entry which are not a *Farewell*, a comma can also count as a punctuation mark)
- Code exhaustively (→ you need to code the entire text, including names, punctuation marks and possible hyperlinks)
- Code at least within sentence boundaries (→ if you find two discursive moves within one sentence, code the entire sentence as the discursive move that seems to be more important to the text overall. In general, go for content, i.e., code two sentences as one discursive move if they are content-wise connected.)
- Discursive moves may, in exceptional cases, go further than one paragraph (→ code as 1 discursive move)
- Code as open category, when you are not sure what discursive move the text passage is. (However, make a clear note in your assigned Memo explaining the problem)
- Code as open category, when there are two equally balanced discursive moves in one sentence. (However, make a clear note in your assigned Memo explaining which part of the sentence should be coded with which discursive move)

Criteria for all codings:

- Illustrations, elaborations, explanations should be coded as part of the illustrated / elaborated on / explained discursive move
- Background sentences should be coded as part of the discursive move they serve (→ look closely at the purpose of the background sentence and determine which discursive move they introduce, elaborate, explain, etc.)

- Emoticons: when occurring within a sentence, code the emoticon as part of the discursive move that categorizes the sentence. When occurring on its own, code the emoticon as a separate discursive move on its own.

#### Hints for coding:

- Compare text passages with other possible semiotic choices to identify subtle cues
- Pay attention to sub-clauses and decide carefully which is more important as to the purpose of the text passage
- While a text passage does not have to fulfill all inclusive criteria, make sure that you do not code something that matches exclusive criteria

#### Advice-giving

- Definition: a recommendation/suggestion on introspection or action
- Examples:
  - “Hold onto that need inside even when signs of it are not apparent in your life yet, visualize exactly what it would be like, and sooner or later you will find yourself living it.”
- Inclusive criteria:
  - Text passages that are illustrations or examples of advice should be coded within that advice move.
  - Text passages that are recommendations to introspect, to think about specific situations, coping techniques, and so on.
- Exclusive criteria: --

#### Apology

- Definition: interactant apologizes for something
- Examples:
  - “Sorry it’s taken me forever to email.”
  - “I’m sorry that my email is so long.”
- Inclusive criteria:
  - If the following part of a sentence is merely an explanation or illustration of why the person is sorry, code the entire sentence as an *Apology* (“I’m sorry I don’t understand that, I have never heard of that before.”).
- Exclusive criteria:



- If the word ‘sorry’ is used as a generic input/starting point, but the sentence is, for example, an *Assessment*, code the entire sentence as an *Assessment* (e.g. “Sorry, but I think you are focusing too much on the stress level.” → code as *Assessment*).

### Assessment

- Definition: refers to a text passage in which the client’s particular situation is mentioned and evaluated
- Examples:
  - “So I’m glad you chose this way of taking care of yourself.”
  - “That includes the good work you are doing here.”
- Inclusive criteria:
  - General
    - A clear evaluative component needs to be in the text passage to qualify as an *Assessment*.
    - If you have a text passage that seems equally balanced as *Thanks* and *Assessment*, code it as *Assessment*. However, make a note in your memo.
    - If you have a text passage that seems equally balanced as *General Information* and *Assessment*, code it as *Assessment*. However, make a note in your memo.
  - *Assessment* by the clients:
    - Inclusive criteria:
      - A coping strategy was used by the client and is now discussed by her/him (Example: “I’ve tried your strategy of having 10 minute breaks to refuel my energy. I have had a bit of trouble with really being able to do that, but I noticed already that it becomes easier with doing it regularly.”).
      - A text passage that is written as an intention of applying a suggested coping technique in the future (usually by the client).
      - A recognition of a situation as improved compared to the initial problem.
      - A discussion of achieved success during/after counseling
    - Exclusive criteria:

- A clear evaluative component is missing.
- A text passage introduces a new problem not mentioned earlier, unless it is immediately evaluated.
- A recognition that one has a problem should not be coded as an *Assessment*, but as a *Problem Statement*.
- *Assessment* by the counselor:
  - Inclusive criteria:
    - An evaluation of a problem, an assessment, or progress in general of the client by the counselor.
  - Exclusive criteria:
    - Information is given that is general (i.e., could be directed towards a general audience), such as general information on a suggested coping technique.

### Farewell

- Definition: function of a farewell note, always include the name/signature in the coding
- Examples:
  - “Best wishes, Amy”
  - “Take care, John”
- Inclusive criteria:
  - If the last move is a generic “Thanks, Amy” or “Thank you, John” → code as *Farewell* (see also exclusive criteria for the discursive move *Thanks*).
- Exclusive criteria:
  - If the farewell is marked, i.e., is different from a generic or stereotypical *Farewell*, do not code as *Farewell* (“Take good care of yourself now, Amy” → code “Take good care of yourself now,” as *Advice-giving*, BUT code “Amy” as *Farewell*).
  - If there is a generic farewell embedded in a larger sentence, do not code as *Farewell*, but as the discursive move that the rest of the sentence represents right until the name/signature (“Take care and believe me that you are making great progress Amy, Rebecca” → code “Take care and believe me that you are making great progress Amy,” as *Assessment* and “Rebecca” as *Farewell*).

### General information

- Definition: delivering information that is general, i.e., that has no direct personal link to the client's situation
- Examples:
  - "In fact the resurfacing of what happened "back there" is called the 'anniversary reaction' when it's around the same time of year. Feeling alone and disjointed is a natural reaction to loss. So is a lack of focus and a lack of enthusiasm for work. It is called grief and it is one of the most powerful human emotions, like love."
- Inclusive criteria:
  - The information needs to be non-personal and is rather about a coping technique or feelings/situations that people go through in general.
  - An explanation of a psychological concept that could be aimed at a broader audience.
- Exclusive criteria:
  - Introductory information about the process of email counseling should not be coded as *General information* (→ see coding for *Introductory message*).
  - Do not code as *General information* when a personal 'you' or 'yourself' is used (as opposed to a generic 'you', which can be coded as *General information*).
  - A text passage that seems equally balanced as *General Information* and *Assessment*, should be coded as *Assessment*. However, make a note in your memo.

### Greetings

- Definition: function of a greeting note in an entry
- Examples:
  - "Hi Amy,"
  - "Dear John,"
- Inclusive criteria: --
- Exclusive criteria: --

### Introductory message

- Definition: 'standard' introductory message, usually explaining how email counseling works
- Examples:

- “Welcome to E counseling, where we can exchange several back and forth letters, in this confidential shared space. My name is John and I will be your e counsellor.”
- Inclusive criteria:
  - Only occurs in the first email by the counselor.
  - Specifically introduces the counseling process and not the content of the counseling itself (as opposed to *Metacomment*).
  - Explanation on what will happen during the counseling exchanges and how the interactants will work together.
  - Can (but does not have to) span over several paragraphs in the counselor’s first entry.
- Exclusive criteria: --

### **Metacomment**

- Definition: consists of both text structuring devices as well as devices that structure the process of counseling
- Examples:
  - “As I continue I’m going to make some suggestions for you to experiment with.”
- Inclusive criteria:
  - Text passages that are solely used to ensure cohesion of the text.
  - Text passages that represent dates (such as 14.10.2014) to highlight the starting point of a new entry in the text.
  - Remarks that guide the reader as to what is coming next in the text, e.g. a counselor mentioning that a new technique will follow.
  - Remarks that guide the reader as to how the current text passage connects to things said earlier.
  - Comments (in declarative form) made by the counselor as to whether something was understood by the client (example: “I don’t know if this makes sense.”).
- Exclusive criteria:
  - If a text structuring remark occurs as a sub-clause within a clause that can be coded as another discursive move, do not code the sub-clause as *Metacomment*. Code the entire clause as the respective other discursive move.

- Comments (in interrogative form) made by the counselor as to whether something was understood by the client, code as *Request for information* (example: “Does this make sense?”).

### **Problem statement**

- Definition: explicit mention of the problem that requires counseling
- Examples:
  - “I need to talk to someone and feel like there’s no one who understands what I’m going through. Life pushes you on to keep moving but I am still stuck back there.”
  - “My husband was an amazing man who loved me and the kids more than anything in the world. He wasn’t perfect by any stretch but he did make our lives full. A fact we all feel so much, the hole he left, especially for my daughter. We had some very special times before he died because he wanted to die at home so we looked after him at home till the night he died.”
  - “I’m constantly feeling nervous and I can’t concentrate at all. I can’t take anything in during lectures so that’s making me even more anxious about exams.”
  - “I’ve been to the doctor and she wasn’t particularly helpful. She told me to defer my year abroad til next year, which isn’t an option for me, and it would only make things worse, probably.”
- Inclusive criteria:
  - A problem such as feeling stressed or anxious about something (including illustrations, elaborations, and examples).
  - A situation that results in experiencing worry, stress, or anxiety (including illustrations, elaborations, and examples).
  - A recognition that the speaking interactant experiences an issue as problematic (→ recognition of a problem without an evaluative component should be coded as a *Problem statement*).
  - A text passage identifying something as seen/felt missing/wrong/troubling.
- Exclusive criteria:
  - If the client is mentioning a problem/situation as an example of how they dealt with it successfully (including the successful use of a coping technique), do not code as *Problem*

*statement*, but code as *Assessment* (as an example of a successfully used coping technique).

- Mentioning of a former problem is compared to a current improved situation, do not code as *Problem statement*, but as part of the *Assessment*.

### Quoting

- Definition: a text passage of a previous email that was copy-pasted
- Examples: --
- Inclusive criteria:
  - Only use this when the copy-paste function was employed.
  - If two paragraphs were copy-pasted as one instance, code the entire copy-pasted instance as one discursive move.
- Exclusive criteria:
  - Manually retyped reported speech should not be coded as *Quoting*, but as part of the discursive move in which it occurs.

### Referral

- Definition: an interactant is encouraged to seek personal and professional help elsewhere, and/or is given addresses, phone numbers or website links to find more information about the topic at hand
- Examples:
  - “The website ... has additional information on ... .”
  - “Your GP can give you a prescription and further information about these medications.”
- Inclusive criteria:
  - A link for a website or a book title should be included in the coding of the referral move.
  - Mentioning of an attached text document (such as a handout, etc.).
- Exclusive criteria: --

### Request for advice

- Definition: an interactant asks the other interactant for specific advice on a particular, personal issue
- Examples:
  - “How do I go about putting some focus back into my life?”
  - “Can you help me deal with my anxiety attacks?”

- Inclusive criteria:
  - Mainly about requesting help with a particular situation or problem.
  - Personally and situationally linked with the interactants' issues at hand in order to receive advice.
- Exclusive criteria:
  - If there is a request only for additional information, code as *Request for information*

### **Request for information:**

- Definition: interactant asks for more information about a specific topic
- Examples:
  - “If it feels right, I would like to hear about your husband, what you loved about him and your experience of ‘good-bye’; how you felt during his illness, and what family life means to you now.”
- Inclusive criteria:
  - Request for information by the client:
    - Asking for general information such as information on medication or disorders, or further information on treatment options.
  - Request for information by the counselor:
    - Asking for further information about a problem/situation/additional person.
    - Questions (interrogative form) whether something will be understood by the client (example: “Does this make sense?”).
- Exclusive criteria:
  - Strictly to be differentiated with *Request for advice*, i.e., advice on a specific issue that needs to be treated in counseling and invites the respondent to ‘give advice.’

### **Scheduling**

- Definition: text passages that set up/confirm a next entry
- Examples:
  - “I’ve slotted you in for another answer on Thursday the . . . . Please let me know if that works for you.”
  - “Yes, Thursday the . . . is fine with me.”
- Inclusive criteria:

- Proposing, confirming, agreeing on a date.
- A confirmation to send a next email by (date).
- Exclusive criteria: --

### Thanks

- Definition: interactants thank their reader for a specific issue
- Examples:
  - “Thank you for your warm, authentic reply.”
- Inclusive criteria:
  - A marked version of a formulaic thank you comment at the end of an entry.
- Exclusive criteria:
  - A generic ‘thanks’ or ‘thank you’ as a farewell → code as *Farewell*
  - A generic ‘thanks’ or ‘thank you’ occurs in the same sentence (either before or after, or nested within) that is clearly a different discursive move, do not code the sentence as *Thanks*.
  - A text passage that seems equally balanced as *Thanks* and *Assessment*, code as *Assessment*. However, make a note in your memo.

### Open category

ALWAYS make a memo entry with an explanation of why a text passage is coded as open!

- Requests to fill in a feedback form or a well-being scale should be coded as *Open*, please make a note in your memo (i.e., “→ feedback”, “→ well-being scale”).
- A text passage about informed consent is coded as *Open*.
- Text passages that could be clearly assigned to two distinct discursive moves are coded as *Open*.
- Sentences that contain two discursive moves that are equally balanced and therefore cannot be coded as one or the other are coded as *Open*.



## Appendix C. Checklists for Analysis of Sequence of Discursive Moves

### *Checklists for Discursive Moves in the Body-of-the-Email Threads*

Checklist determining the **preceding** discursive move of an investigated discursive move (in red, a fictitious example is given to illustrate the tests).

- **Test 1:** Where does the investigated discursive move occur?  
[e.g.: Entry 2 → Theme 2 → Thematic Sub-Block 2.c]  
**Go to test 2**
  
- **Test 2:** Is there a preceding discursive move within [Entry 2 → Theme 2 → Thematic Sub-Block 2.c]? → what type?  
**Yes:** list the type of the preceding discursive move.  
**No:** go to test 3
  
- **Test 3:** Is there a preceding entry within [entry 2 that is either entry 1 or entry 2 (as an entry above 2 did not exist at the time when entry 2 was written)]?  
**Yes:** go to test 4  
**No:** list 'no preceding discursive move'.
  
- **Test 4:** Where does the preceding entry occur?  
[Entry 2 → Theme 2 → Thematic Sub-Block 2.c → Entry 1 copy-pasted]  
**Go to test 5**
  
- **Test 5:** Is [Entry 2 → Theme 2 → Thematic Sub-Block 2.c → Entry 1 copy-pasted] linked to the investigated discursive move content-wise?  
**Yes:** list the type of the last discursive move in [Entry 2 → Theme 2 → Thematic Sub-Block 2.c → Entry 1 copy-pasted] as the preceding discursive move.  
**No:** list 'no preceding move'.

Checklist determining the **following** discursive move of an investigated discursive move (in red, a fictitious example is given to illustrate the tests).

- **Test 1:** Where does the investigated discursive move occur?  
[Entry 2 → Theme 2 → Thematic Sub-Block 2.c]  
**Go to test 2**
  
- **Test 2:** Is there a following discursive move within [Entry 2 → Theme 2 → Thematic Sub-Block 2.c]? → what type?  
**Yes:** list the type of the following discursive move.  
**No:** go to test 3
  
- **Test 3:** is [Entry 2 → Theme 2 → Thematic Sub-Block 2.c] copy-pasted in the next entry?  
**Yes:** list the first discursive move of the entry that follows the copy-pasted version of [Entry 2 → Theme 2 → Thematic Sub-Block 2.c] as the following discursive move.  
**No:** go to test 4
  
- **Test 4:** Is there a following entry within [entry 2 that is labeled as entry 2]?  
**Yes:** go to test 5  
**No:** list 'no following discursive move'.
  
- **Test 5:** Where does the following entry occur?  
[Entry 2 → Theme 2 → Thematic Sub-Block 2.d]  
**Go to test 6**
  
- **Test 6:** Is [Entry 2 → Theme 2 → Thematic Sub-Block 2.d] linked to the investigated discursive move content-wise?  
**Yes:** list the type of the first discursive move in [Entry 2 → Theme 2 → Thematic Sub-Block 2.d] as the following discursive move.  
**No:** list 'no following discursive move'.

*Checklists for Discursive Moves in the Word-Document Threads*

Checklist determining the **preceding** discursive move of an investigated discursive move (in red, a fictitious example is given to illustrate the tests).

- **Test 1:** Where does the investigated discursive move occur?  
[Theme 1 → Thematic Sub-Block 1.2.a → Entry 7]  
**Go to test 2**
  
- **Test 2:** Is there a preceding discursive move within [Theme 1 → Thematic Sub-Block 1.2.a → Entry 7]?  
**Yes:** list the type of the preceding discursive move.  
**No:** go to test 3
  
- **Test 3:** Is there a preceding entry within thematic sub-block 1.2.a that is entry 7 or lower (as an entry above 7 did not exist at the time when entry 7 was written)?  
**Yes:** list the last discursive move of the preceding entry as the preceding discursive move.  
**No:** go to test 4.
  
- **Test 4:** Is there a preceding entry within a previous thematic sub-block regardless of a thematic boundary that ends with an entry 7 or lower (as an entry above 7 did not exist at the time when entry 7 was written)?  
**Yes:** go to test 5  
**No:** list 'no preceding discursive move' .
  
- **Test 5:** Where does the preceding entry occur?  
[Theme 3 → Thematic Sub-Block 3.1.b → Entry 6]  
**Go to check 6**
  
- **Test 6:** is [Theme 3 → Thematic Sub-Block 3.1.b → Entry 6] linked to the investigated discursive move content-wise?  
**Yes:** list the type of the last discursive move in [Theme 3 → Thematic Sub-Block 3.1.b → Entry 6] as the preceding discursive move.  
**No:** list 'no preceding discursive move'.

Checklist determining the **following** discursive move of an investigated move (in red, a fictitious example is given to illustrate the tests).

- **Test 1:** Where does the investigated discursive move occur?  
[Theme 3 → Thematic Sub-Block 3.1.a → Entry 4]  
**Go to test 2**
  
- **Test 2:** Is there a following discursive move within [Theme 3 → Thematic Sub-Block 3.1.a → Entry 4]? → what type?  
**Yes:** list the type of the following discursive move.  
**No:** go to test 3
  
- **Test 3:** Is there a following entry within the same thematic sub-block 3.1.a that is labeled as entry 4 or higher?  
**Yes:** list the first discursive move of the following entry as the following discursive move.  
**No:** go to test 4
  
- **Test 4:** Is there a following entry within a next thematic sub-block regardless of a thematic boundary that starts with an entry 4 or higher?  
**Yes:** go to test 5  
**No:** list 'no following discursive move'.
  
- **Test 5:** "Where does the following entry occur?  
[Theme 3 → Thematic Sub-Block 3.1.b → Entry 4]  
**Go to test 6**
  
- **Test 6:** is [Theme 3 → Thematic Sub-Block 3.1.b → Entry 4] linked to the investigated discursive move content-wise?  
**Yes:** list the type of the first discursive move in [Theme 3 → Thematic Sub-Block 3.1.b → Entry 4] as the following discursive move.  
**No:** list 'no following discursive move'.

Online communication has become ever more present in our lives and has encompassed the personal as well as the professional sphere. This expansion has continued into the professional workspace of mental healthcare workers who conduct counseling online. Special emphasis needs to be given on how mental healthcare workers utilize online communication to work collaboratively with clients.

Previous research has shown that the quality of the therapeutic alliance significantly impacts the outcome of counseling. In this book, the therapeutic alliance is examined from an interpersonal pragmatic perspective. Using a mixed methods approach, five naturally occurring email counseling threads are scrutinized to shed light on how the counselor and her clients work collaboratively to improve the clients' well-being. The content analysis reveals the specific topics that are dealt with in the counseling exchanges. The subsequent discursive moves analysis uncovers systematic discursive patterns that occur within the exchanges. Zooming in on specific aspects through a discourse-analytic approach finally allows for an in-depth description of three captivating phenomena: the use of a metaphor to combat unhelpful thoughts, the use of narratives to construct varying identities, and the intricate process of exiting the actual counseling process once clients have improved.

By employing two notions from interpersonal pragmatics – relational work and identity construction – empirical evidence is provided to show how they are linked. Thereby, the book adds to research on interpersonal pragmatics, but also on online and mental health communication. Importantly, it serves as a guide to mental health practitioners by demonstrating how language in online counseling can be analyzed and utilized to negotiate the therapeutic alliance and support clients in their endeavor to improve their well-being.

Franziska Thurnherr is a researcher in the public health sector in Switzerland. She has published on interpersonal pragmatics, (online) mental health and computer-mediated communication.

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Die Publikationsreihe NIHIN – New Ideas in Human Interaction – entstand 2010 und ist ein Kooperationsprojekt zwischen der Hermann Paul School of Linguistics (HPSL) und der Universitätsbibliothek Freiburg (UB).

NIHIN bietet eine moderne, frei zugängliche Plattform für wissenschaftliche Essays erfahrener WissenschaftlerInnen sowie Prädikatsdissertationen, Textsammlungen zum Thema Sprache in der Interaktion und multimodale Sprachkorpora.

