



Embedded instruction: Proxy voicing in couples therapy

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Abstract

This paper takes up the issue of how instruction can be accomplished in circumstances in which an instructional orientation during interaction is considered to be or is treated as problematic. In couple therapy, as with other interactional settings, talk about an actor's experience, especially when participants have different access to that experience, can be a delicate matter. Therapist's formulations can make a client's talk or conduct accountable as a lapse of competence or conduct, leading to client opposition in therapy. One procedure used to avoid the possibility of such opposition is to embed a formulation of a client's talk in an understanding check using a form of reported speech called *proxy voicing* (Seedall and Butler, 2006) in which the therapist speaks to a client as that client. In this paper, I show the way that proxy voicing is produced to serve as a form of embedded instruction in a Jeffersonian sense. As the basis for a therapeutic enactment, the therapist's candidate understanding, is not simply a form of repair or correction, it is a form of embedded instruction in the form of a demonstration. I show that embedded instruction provides both opportunities and resources for clients as learners to engage in learning's work (Zemel, 2014) under the supervision of the therapist while relieving the client of the requirement that he or she account for what the therapist considers a therapeutic problem of competence or conduct.

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1. Introduction

Differences in what people know, differences in their entitlements to know, and differences in what they are authorized to say about what they know open the possibility that such differences can be interactionally delicate matters when other-correction occurs in instruction-relevant settings. In their seminal work on self-repair, Schegloff et al. (1977) noted that other-initiated repair can be seen as problematic or delicate. Other-correction performed as instruction is often considered delicate in medical settings such as doctor–patient interactions, surgical instruction in the operating room, and precepting of medical interns. Maynard (1989) observed that a speaker may first elicit a perspective-display from a recipient to deliver difficult and sensitive diagnostic news about children in pediatric consultations. In surgical education in the operating room, attending surgeons avoid explicit correction of residents and medical students and resort to various reformulations of questions they ask in instructional settings (Zemel et al., 2011). Correction and instruction have been shown to be delicate matters in the training of medical students (Zemel and Koschmann, 2011) and interns (Ende et al., 1995; Pomerantz et al., 1995, 1997). Psychotherapists also recognize that “therapist directiveness and teaching behaviors may increase the likelihood of therapist-client struggle” (Seedall and Butler, 2006, p. 421) during therapy

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sessions (Butler and Bird, 2000; Chamberlain et al., 1984). When explicit forms of didactic instruction are considered possibly problematic in psychotherapy, therapists find other ways to instruct their clients.

Actors use various procedures to mitigate the interactional effects of other-correction. One way to do this is to embed other-correction in other activities. According to Jefferson (1987), embedded correction relieves participants of having to account for any lapses in competence or conduct. Kushida (2011) describes how other-initiated correction in the form of a candidate understanding of a speaker's talk can be used to assist the speaker with an alternative formulation of a trouble-source in his or her talk. O'Connor and Michaels (1993, 1996) have shown that in initiation-response-evaluation (IRE) sequences (McHoul, 1978; Mehan, 1979; Sinclair and Coulthard, 1975), teachers may reformulate a student's talk as an alternative and presumably preferred version of the student's initial formulation in a manner that credits the student with authorship of the alternative (cf. Ferris, 2014; Hmelo-Silver and Barrows, 2006).

In this paper, I examine a particular procedure used in couple therapy by which therapists and clients engage in instructional work in an embedded manner, displaying their orientation to instruction as a delicate activity in therapy. In a manner similar to Kushida's (2011) observations regarding understanding checks (cf. Schegloff et al., 1977), the therapist 'checks' her understanding of the client's utterance by producing a formulation of a client's talk, addressed to that client as the quoted speech of that client. This use of quoted speech is designed to elicit an endorsement of the therapist's formulation from or correction by the addressed client. As such, this use of quoted speech can serve as an embedded form of instruction by offering an alternative way of talking in a manner that demonstrates how that talk might be accomplished.

In psychotherapy, quoting the speech of a client to that client is a practice known as *proxy voicing* (cf. Seedall and Butler, 2006). Proxy voice interventions are a therapeutic response to how a client is speaking and is designed to "facilitate the client's ability to operate at a deeper level and with greater understanding of inner dynamics" (p. 423). According to Seedall and Butler (2006), proxy voicing is "unique in that the therapist points out the core elements in the context of couple interaction, seeking to model appropriate expression, offer alternative hypotheses, and coach clients' interactions while maintaining the overall fluidity and flow of the interaction" (p. 423). Proxy voicing is "focused not on restructuring, but on facilitating, softening and negotiating attachment reparation" (Seedall and Butler, 2006, p. 423).

To get a sense of what proxy voicing looks like, consider Example 1.¹ The client (M) addresses a vulnerability to his partner (lines 1, 2, 34, 35). The therapist (T) formulates M's talk as an understanding check in the form of quoted speech (lines 33, 37, 38, 41–44):

Example 1: John & Julia Transcript (00:54:18:03)

- 1 M: Yeah I don't I don't wanchu to think I'm (0.6)
 2 a wimp
 3 (0.2)
 —
 — ((lines omitted))
 —
 33 T: -> You're telling h[er
 34 M: [You're like my whole support
 35 network and and
 36 (0.9)
 37 T: -> You're telling her "Its really hard for me to

¹ The full set of transcription conventions is given in Jefferson (2004). Square brackets are used to mark overlap between transcribed elements (i.e., turns at talk or other transcribed conduct). Numbers enclosed in single parentheses represent pauses measured to a tenth of a second. Periods denote delivery with falling intonation. Question marks denote delivery with rising intonation. Colons represent sound stretching. Text enclosed between degree signs represents talk delivered at diminished volume. Annotations supplied by the transcriber are enclosed in double parentheses.

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