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Conversation Analysis of Counselling Interaction. The Action Scheme of Counselling, Problem Versus Solution Orientation, and the Place for Biographical Counselling

SHORT DESCRIPTION

This module uses conversational analysis and interactional sociolinguistics to analyse an authentic counselling session within the context of the action scheme of counselling.

LEARNING OBJECTIVES

1. To be able to engage with a detailed analysis of conversational structure
2. To recognise the importance of language and conversation in the counselling process
3. To develop awareness of communicative tasks and linguistic expression
4. To understand and apply the Action Scheme of Counselling
5. To understand the importance of biographical processes in counselling

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1 Introduction

The sequence of modules approaches the topic of biographical counselling from a variety of different angles. Theoretical discussions of biography analysis and biographical processes are given, as well as empirical examples from counselling practice in the different countries that are participating in the project. Among the empirical data are case descriptions and descriptions of ongoing counselling processes, interviews with counsellors about their professional work and about their interaction history with particular clients, and biographical interviews with clients who had undergone counselling in situations of professional rehabilitation. Whereas some of the empirical material is available in the form of ethnographic descriptions, the interviews with counsellors and the biographical interviews are tape recorded and transcribed and made available to a contextualized analysis, that takes into account the development of content and processes of the linguistic rendering of content. When comparing content and form, researchers do not only have access to what is being said, but also to how it is said; this surplus of procedural information provides researchers with valuable insights into the inner attitudes of their informants and into the larger biographical and social processes their accounts are embedded in.

This module among other things deals with a very particular kind of empirical data, so far not looked at in other modules, namely an authentic counselling session, which was tape-recorded and transcribed for analysis. This type of data gives a rather direct view on what is being done in counselling, since it allows the reader to follow a counselling session just as it once unfolded - and not through the filter of an interpreter who talks about his or her perception of it. It is very obvious, though, that access to real counselling is difficult to get, and we are very grateful to those counsellors and clients, who allowed us to not only attend but also to tape record their counselling sessions!

The transcript sheds light on an authentic session between a counsellor and her client in a centre for vocational training and professional rehabilitation in Germany, where the counsellor and her client meet for the first time to talk about the problems and needs of the client and the resources the center can offer in order to help the client (Erstinformationsgespräch). The counselling sessions occur within an institutional framework; the client has been sent to the center by the authorities, and the center is responsible for providing some sort of services to the client. As one can imagine, the institutional framework has quite some influence on what is going on in the counselling session: The client has to present herself at the center, the center has a certain repertoire of services that can be suggested to the client, the counsellor has developed a particular style of counselling, and when the client enters the center, it is up to the center to structure the interaction, of course taking into account the client’s needs and history. The data as presented in this paper is an English translation from the authentic tape-recorded counselling session, which was originally in German.

For reasons of contrastive comparison, this module introduces another set of data. It is from a counsellor’s description of his counselling, that he gave to a client over a longer period of time and on different occasions. This second type of material does not provide direct access to any of those counselling sessions, since it consists in the rendering of the
When analysing talk in interaction, I am drawing from ethnomethodological conversation analysis (Sacks, 1995; Kallmeyer, 1994) and from interactional sociolinguistics (Schiffrin, 1994; Gumperz, 1982; Dittmar, 1997). Emphasis on one or the other theoretical framework is more a matter of whether researchers see the analysis of conversation as anchored within the context of sociology or within the context of linguistics. As Harvey Sacks suggested in his lectures, a detailed analysis of talk in interaction provides the ground for doing sociology with different means. The sociolinguist Deborah Schiffrin described the field of interactional sociolinguistics as being concerned with the contextualization of what is said, that is, “how language is situated in particular circumstances of social life, and how it reflects, and adds, meaning and structure in those circumstances” (Schiffrin, 1994, p. 97).

When looking at actually ongoing counselling as tape-recorded and transcribed for analysis, we are dealing with situated, that is socially embedded, communication, that refers to social life, which it reflects and interprets; we are dealing with communication that is meaningful to interactants and at times may produce new interpretations to account for the social circumstances reflected upon. Interactants can rely on the existence of communicative processes that lead them through the exchange: They have means at their disposal to refer to each other and they have knowledge of communicative genres, as for example of what needs to be done in counselling. The existence of communicative processes, which are intuitively known by the interactants, helps them through the interaction and gives it an orderly appearance – however difficult the tasks to be performed may be. By the very means of communication, some sort of reliable structure is produced and laid over the circumstances of social life. And to look at counselling from Harvey Sacks’ point of view, a detailed analysis of conversational structure is necessary to let the underlying order emerge and to analyse social circumstances as they materialize by means of talking.

2 Interpretation

One of the fundamental assumptions in conversation analysis is that social and conversational order is continuously created by the interactants through their practices of interpretation and the generation of meaning while speaking. As Goffman (1981) suggested in his book “Forms of Talk”, the exchange of utterances cannot be conceived of in terms of a sender-receiver model of communication, where the sender produces an utterance that is conveyed to the receiver in a one-to-one fashion. Goffman rather suggests we see the complexity of the speaker and listener roles: A speaker has a large repertoire to modulate his or her utterances with respect to truth claims and inner engagement, whereas a listener may be less attentive at times and display different amounts of interest. Goffman describes communicative interaction in terms of complex participation frameworks and production formats: Interactants change their footing quite frequently, that is, their alignment to each other and to the things to be talked about. They may be serious or joking with regard to the topic of discourse, hostile or friendly, formal or informal towards each other and contribute to the entire interaction with more or less inner engagement. They generate sociality while speaking and allude to different social contexts, which they make relevant for the current

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1 We are very grateful to Erika Gleisner, who worked as a research assistant in the Leonardo project, for her excellent work in transcribing and translating into English many of our interviews!
interaction. The repertoire of means interactants have at their disposal to modulate their involvement in the interaction as well as the strength and seriousness of their propositions suggests we not only look at what is said but also at how it is said. Only a contextualized analysis, that is, an analysis that compares what is said to how it is said, helps to more clearly determine what a speaker means with his or her utterances, what activities he or she performs while speaking, how these fit into the larger action scheme and communicative genre, and how the attitudinal framework is established between the interactants.

3 Order at all Points

Harvey Sacks’ lectures are based on the insight from ethnomethodology that “human activities are describably methodical” (Sacks, 1995, Part VII, Appendix I, p. 805; cf. Garfinkel, 1967). Interactants create and reproduce the social order that is operating in the interaction at hand by means of communication, and therefore structural order can be found and described in communicative interaction.

When looking at transcripts of conversations, we at first have the feeling that communication develops in a disorderly way. The impression of disorder is, however, largely the result of our very unfamiliar reading experience of following a piece of written discourse that was originally spoken. As interactants in the real world, as speakers who are actually speaking, we are capable of participating in communicative interactions more or less easily, and even if things get complicated, the conversation may still go on. As everyday interactants, we have a notion of communicative order and disorder, and we have a repertoire of communicative means to cope with order and disorder. Communicative processes display the underlying order that is innate to all meaningful communication. As Harvey Sacks suggested in his lectures, “persons will use ways to not ignore what they properly ought to do” (Sacks, 1995, Part I, Lecture 1, p. 7) – even if they linguistically act counter to expectations. In other words, when a complication occurs, interactants show to each other that they have a notion of some sort of normal communicative unfolding of events: They use repair mechanisms and make reference to communicative order despite an – only apparent – lack thereof. Harvey Sacks has examples from telephone conversations in a suicide prevention center, where people for some obvious reasons are unwilling to give their names. What they do instead is use complex communicative strategies to make sure the relevant communicative slot for giving their names is never opened.

The analyst makes use of the inherent order in conversation and of the fact that communicative order refers to, enforces and renews aspects of the social order that are relevant for the interactive exchange at hand. With respect to transcripts of counselling sessions, the linguistic surface is symptomatic for many of the phenomena the analyst wants to study. It provides the analyst with the means to say something about the interaction from an analytical standpoint. Thanks to this analytic approach anchored in discourse analysis he or she can say more about the conversation than the interactants themselves may be able to do. This is why it is worthwhile to study thematic development and structural unfolding of counselling interactions even for experts in counselling, as it provides a different perspective on the counselling process. More detailed accounts of the theoretical foundations and methodological repertoire of conversation analysis are given in Deppermann (2001), ten Have (1999), Linell (1998), Hutchby and Wooffitt (1998), Kallmeyer & Schütze (1976), Kallmeyer (1988), Bergmann (2001).
4 Levels of Analysis

When analysing conversational interaction with methods of conversation analysis, there are at least four levels that need to be considered. These levels are fundamental to the constitution of the interaction, and they make reference to different aspects of reality. The conversational phenomena that are of interest have a different range of local extension and are to be distinguished on different analytical levels: They may concern the linear unfolding and sequential ordering of speech (4.2), they may be anchored mainly on the structural surface level of speech (4.3), or they may consist of a variety of structural features that comprise larger stretches or the entire discourse (4.1, 4.4).

What needs to be done in order to not just summarize content is to consider what is being talked about, how it is done, and to what ends.

4.1 The Overall Gestalt of the Conversation, i.e., the Communicative Genre

Counselling is a particular communicative genre that poses certain requirements for the interactants as to what can be dealt with, how this can formally be done, and as to the interactional identities of the contributors. Further considerations refer to the institutional embedding of the counselling and to what extent it has an influence on the counselling interaction (for a discussion of communicative genres, cf. Luckmann, 1986; Keppler, 1994; Ehlich, 1986; Rehein, 1988; much work has been done on the institutional embedding of conversation, e.g., Günthner & Kotthoff, 1992; Erickson & Shultz, 1982; Hinnenkamp, 1985). In terms of major formal patterns, it is necessary to look at the dominating communication scheme of presentation, that is, one has to determine by what major structural formats the interactants unfold their themes. These can be the communication schemes of narration, description, and argumentation.

4.2 Sequential Unfolding

In conversation analysis, social reality is considered as a procedural phenomenon, that is, social reality unfolds as a process in concrete situations of communicative interaction, when interactants show to each other what to consider in what order. The development of topics and major topical lines is therefore relevant for the procedural construction of reality in discourse. The linearization of topics in discourse informs about temporal, causal, spatial, and social relations. Researchers concerned with text linguistics sometimes speak of *experiential iconicism*, when the discourse, by means of its linear order, becomes an icon of the reality it constructs (Enkvist, 1981).

4.3 Formal Structure of the Conversation

The analysis of the formal structure of the conversation says something about the *ethnomethods* the interactans employ while they converse. In terms of ethnomethodology, those are the techniques of understanding and making oneself understood. Another term used in the literature is *contextualization cues* (Gumperz, 1982): Through linguistic means, interactants refer to parameters of the social framing of the exchange, to status, age, gender, emotional quality of the relationship, as well as to the relevance of the biographical dimension.

In particular, it is useful to look at the following phenomena: *Fluent versus disfluent speech*: In any conversation, there are stretches of speech, which are obviously more fluent
than others. Variations in speech pause patterns, speech errors, and linguistic markers of reflection display different degrees of fluency and may be interpreted in terms of degrees of ease or difficulty in the formulation of ideas. *Intonation contours* inform about the conclusion of idea units and of larger segments of speech as perceived by the interlocutors. Quite a variety of linguistic means are employed to symbolize the *strange and foreign* versus *attitudinal closeness* as for example hedges (in a certain sense, to a certain degree, some sort of) or deictic markers of closeness and distance (here-there, this-that, I,we – one). Also, *vagueness of expression* may sometimes be interpreted as a an indicator of alienation. The *modality of speech*, that is, degrees of seriousness, joking, or irony, informs about inner attitudes towards what is said. Finally, the creation of *reciprocity* says something about the quality of the interaction, that is to what extent interactants refer to each other, pick up ideas and show support or competition.

Questions to be asked relative to a particular counselling interaction may be what characterizes the interaction on the formal side and are there major ruptures or transformations in the formal patterns as displayed.

### 4.4 Identities to be Negotiated

Interactants use a variety of linguistic means to express on a more general level aspects of social identity: They may display expertise or helplessness, age and gender, counsellor or client behaviour, professional identity, education, social and regional belonging, or simply their wish or disinclination to cooperate in counselling for professional rehabilitation. As Garfinkel pointed out, as interactants in the social world, we do not act in terms of fixed social roles, that only need to be spelled out. We rather have to make sure that the features we want to strengthen during the exchange are somehow demonstrated to the partner. For a counselling session this means that counsellor and client have to actively design their interactional identities for the ongoing interaction and demonstrate to each other what kind of counsellor and client they are. Also, the setting of the counselling interaction is a matter of interactional work: The counsellor is for example up to decide how decisive or open-ended he or she wishes to design the setting, how much he or she refers to the institutional framing of the exchange, and at what points he or she lets the particularities of the client’s situation enter the framework. The client demonstrates through his or her interactional work how he or she designs herself within the interaction, how much he or she wishes to contribute, and how he or she relates to the counsellor and the interactional framework and topics to be discussed.

The formal features as discussed in 4.3 are now taken together and interpreted to come to some higher level considerations with regard to the discourse and the construction of identities as they emerge from the interaction.

### 5 The Action Scheme of Counselling

As discussed above, the communicative genre of counselling causes interactants to pay attention to a number of thematic and formal requirements. When going through the communicative process of counselling, they have to fulfill and linguistically spell out a sequence of tasks, that are suggested by the action scheme of counselling.

I am referring here to Werner Kallmeyer’s (2000) outline of the component parts of counselling, that is, the tasks the interactants have to fulfill when being engaged in a counselling session.
(a) Definition of the situation and establishment of the action scheme of counselling

In the beginning of a counselling session (which may be the first in a series), the necessity of counselling has to be stated and the counsellor has to be elected as the person doing the counselling. The first few exchanges are therefore concerned with establishing the communicative genre of counselling. This has to do with the negotiation of responsibilities, competence, and trust. These dimensions are the enabling conditions for carrying through the action scheme of counselling, and the setting of parameters at this stage will play a major role in any further exchange to come, for example as to the emotional quality of the exchange or the way the institution enters the framework.

(b) Presentation of the problem

The client presents his or her case, making reference to how it developed and how it became problematic, and what means have been taken so far to solve the problem.

(c) Development of a definition of the problem

The counsellor asks questions in order to understand the problem, and counsellor and client work on the development of a definition of the problem as a basis for the counselling process.

(d) Redefinition of the problem and definition of the topic of counselling

When knowledge about the nature of the counselling need increases, the interactants can state more clearly what the topics and tasks of the exchange should be.

(e) Development of a solution

The interactants think about means of solving the problem as defined, they reflect on the conditions that need to be fulfilled, give and reflect on pieces of advice, and evaluate their problem solving.

(f) Processing and digesting the piece of advice

The client thinks through what has been offered to him or her as a piece of advice, evaluates it and may decide to accept the piece of advice as the result of the counselling.

(g) Preparation for realization

Client and counsellor mentally enact the viability and consequences of the advice and decide whether the advice is feasible.

(h) Release of the counsellor

The client more or less explicitly states that the task of the counselling session is fulfilled and possibly thanks the counsellor.
Kallmeyer’s flow scheme of the communicative tasks of counseling has been developed as the result of empirical studies of a variety of counseling processes in different contexts. It presents an idealized version of the tasks to be fulfilled in a counseling session. Kallmeyer remarks that these steps of counseling do not always occur in the order as presented, and that the demarcation lines between the sequences are often fluid rather than fixed. To use Harvey Sacks’ terminology one more time, a context-free scheme such as the one presented by Kallmeyer can be applied to rehabilitation counseling and with context-sensitivity refined, so that new insights may emerge about counseling in general and about rehabilitation counseling in particular. One of the topics that this sequence of modules is concerned with is the biographical dimension as it materializes in rehabilitation counseling.

EXERCISE: Suggested Discussion

When looking at the flow scheme of the tasks to be performed in counseling as presented in section 5, one can certainly identify slots where biographical considerations are very likely to occur. In order to get more familiar with the model, it is useful to identify stages in the counseling process as described, which are particularly prone to biographical considerations.

6 Case Analysis

In this section, larger excerpts from an authentic counseling session are presented and described in terms of the model of the action scheme of counseling. Attention will be paid to the rendering of content within the different activity stages as described in Kallmeyer’s action scheme model of counseling, as well as to the formal rendering of the interactional moves. One segment will be selected for a closer discussion of the biographical input being dealt with by the interactants.

The case unfolds as follows: When the transcript sets in, the interlocutors have already managed to negotiate their interactional roles as counsellor and client. Their share is suggested by the institutional framework in which the interaction occurs: The client has been sent to the counsellor in order to be provided with a help scheme for professional rehabilitation. The requirements for stage a of the model, the definition of the situation, have been fulfilled, and the action scheme of counselling could be established by the interactants.

In the first few lines to be discussed now, the client (Cl) presents her problem (stage b). She is asked by the counsellor (Co) to do so.

Co:   ehm . generally it is like that/ & I don’t know say it again (-) . the health problem is (-) .
Cl:   skin (-) . (dampness)
Co:   contact/ contact . allergy

The client is a hairdresser, and because of allergy problems with her skin she cannot continue to work in her learned profession. The major problem the client has is formulated in terms of one medical category.
The next few exchanges are concerned with the development of a *definition of the problem* (stage c). This is quite an interesting phase in the counselling interaction, since client and counsellor need to share a more thorough understanding of the problem at hand and therefore work on different aspects of the problem.

Co:  ehm . to certain things (?)  
Cl:  no . everything wet (,)  
Co:  only dampness (?) .  
Cl:  yes (,). well and nickel . very strong (,)  
Co:  well (-) . [comments on what she has written down till +] damp . ness . . + but not those things which are used in the trade of hair dresser’s (?)  
Cl:  there is nothing (,) . there is nothing at all nay (-)  
Co:  that was tested (?)  
Cl:  yes . . but it is already enough when I take a wet cloth in my hand or something like that (,) . with me it is always something wet (,)  
Co:  and what happens then (?) how is it at home when you take something in your hand/  
Cl:  well I get then/ . well then I get ( ) and I get small blisters (,)  
Co:  and at home (-) . what are you doing there (?)  
Cl:  well (-) . most of the time I use gloves (,) .  
Co:  mhm (-) . . that works out (?)  
Cl:  it has to (,-) . ((quick laugh))  
Co:  mhm  
Cl:  but there I have myself well (-) . where I have worked it was much worse of course (,) .  
Co:  mhm  
Cl:  but I have been out of this trade (-) for over a year now (-) . and nevertheless , well this won’t change . I think that that (-) . that that is there with my (-) . skin problem & and (-) .  
Co:  mhm . and this is (-) predominant on your hands yes (?) .  
Cl:  yes only on my hands (,)  
Co:  not anywhere else . that this is simply going on or so (?)  
Cl:  nay only on the hands nay  
Co:  mhm (,)  

The counsellor needs a more thorough understanding of the problem and asks questions as to the substances that cause the allergy, to the symptoms that occur and in what contexts. It is worthwhile to note that the definition of the problem appears to be a rather complex task in the counselling process, which requires a few exchanges between counsellor and client. Counsellors should not expect the problem or set of problems to be presented right away; lengthy exchanges around the problem statement are more the rule than the exception.

As Kallmeyer points out, stretches of the presentation and definition of the problem can occur in different phases of the counselling process, so that a refined view of the problem can even emerge rather late during the counselling session.

Client and counsellor then proceed to the *definition of the topic of counselling*, that is, clarification is needed as to what the counselling should focus upon. In our example, the counsellor is now becoming very active in that she explains what the institution has on offer for the client (stage d). Sometimes reflexions about the possible contributions of counselling may again include a redefinition of the problem.
Co: basically it is like that ('). that we (-) ehm (-) train on a dual basis ('). do you know what we mean with dual (?) .

Cl: regarding that now no . nay (-)

Co: yes (-) . well you do one part at the vocational school ('). the whole theoretical part (')

Cl: mhm

Co: for instance if it is office administrator (') you go twice a/ one week you go once a week to the vocational school and one week twice in the week (-) . and . the rest time/ of the time (-) . ehm . for the rest of the time we are looking for an apprenticing company for you . where you are working (-) . on a permanent basis there (,)

Cl: mhm

Co: where you can gain practical experiences (-) . trying to contribute things to the team (-) . taking over tasks (-) . and there has to be a trainer (,) who is responsible for you (-) . who also has such a schedule for you (,) . is kinda accompanying you a bit (,) . that means dual well connected (-) . theory and practise (,) . alright (?)

Cl: mhm

Co: that is our way of retraining here (') . there are other possibilities (-) . other educational establishments . ehm . they offer (-) . that one is doing an apprenticeship for two years and sits at the school desk (') and only for a quarter of the year . one is doing practical work (,)

Cl: mhm

Co: somewhere in a firm (,) . alright (?) .

Cl: mhm

Co: then you are a real on-the-job trainee (-) . whereas you are a real retrainee with us here (-) . or a trainee (-) . only you 've got a shortened training period (,) . well (-) . a trainee . for a second time . right (?) . .

ehm (-) . in general it has a lot of advantages (') . because you are integrated in a firm for two years of course ('). and you can contribute to it already (,) . you can take over certain areas of responsibility (-) . especially when someone maybe is going into maternity leave . or someone will be leaving: (-) . or in general . it is an expanding business & then you have the opportunity very quickly if they have been knowing you for two years (-) . to slip in very quickly in this field (,).

Cl: mhm

Co: but . it is a proven fact (') . often it is independent of (-) . or most of the time it is independent of whether you are really good or not good (-) . the mon/ er . business has no money (-) :then: . often there is no takeover (,).

Cl: mhm

Co: nevertheless because of the loads of practical experiences (-) . you’ve got a very good base after it to apply (,) . then you can of course include in your application that you have done a „two-year training with a lot of practical experience . in (faster till +) these those these those those fields“ (,) + . right (?) .

Cl: mhm

Co: is an advantage for (-) . everyone (,) . the firm (-) . doesn’t have to pay a training allowance for you (') . right (?) . but the pension scheme is doing the whole lot for you (-) . in your case now the cooperative union (,).

Cl: mhm

Co: who pays the bridging benefits (-) . and the firm got you for free for two years (,) . right (?) . is simple (-) . you’ve got a disadvantage because of your handicap (') . right (?) . the allergy (') . but an advantage in this way (,) . to get integrated there . right (?) . so a financial advantage (,).
In the first part the counsellor takes on an institutional perspective: She focuses very much on the rehabilitation center and explains its philosophy. In the second part the counsellor brings in the perspective of the companies that accept trainees from the center; they usually have a lot of benefit from them. Only in the third part the counsellor concentrates on the perspective of the client, who also benefits from the training scheme as presented.

It appears that there is hardly any time allotted to questions from the client. The center perspective is very dominant, and since phase d is also concerned with a redefinition of the problem, one can see from the structuring work of the counsellor that she makes it very much a problem that is to be dealt with institutionally, with only minor emphasis on and input from the client.

It is, however, very evident that the professional rehabilitation center runs a very strong programme for retrainees, that rigorously combines theory and practice and that includes a philosophy to seriously accompany their clients once they are in the retraining process.

In the next segment of the counselling session counsellor and client are concerned with the development of a solution (stage e, ca. 8 transcribed pages), the most demanding task in a counselling process, and also one which can benefit much from a lively exchange of the interlocutors. As one might suspect from the foregoing exchange, the counsellor again takes the initiative and presents the scope of occupational activities that can be supported by the center. The counsellor goes through a long list of professions. Since this enumeration goes on for quite some time, I am presenting just a few excerpts in order provide an impression of the solution of the problem work in this particular counselling.

Co: that are the occupations (') which we (-) ehm . up to now (-) . we have been working here I believe since ninety one ('). :in: (-) . the field of vocational rehabilitation in firms ('). :but: (-) . here are the occupations which we have trained up to now ('). right (?) . . . :ehm: . let's go through them slowly ('). & businessman in the retail trade ('). well that are retail outlets where things get sold (-) . businessman in wholesale and foreign trade ('). that would be for instance (-) . we have to look for leanings abilities interests . right (?) . for example I could imagine if we have a chemist's wholesale trade or something like that . you know about the products there . or so (')

Cl: mhm

Co: there we would have to look especially for wholesale . trades . where you say "well (-) . I've got knowledge . abilities and leanings there too (-) . and I could imagine this quite well . ehm . as a businessman of wholesale and foreign trade to make a training (') . there" . :right: (?) .

Cl: mhm

Co: ehm , a lot of . those who come from the construction sites (-) . and who 've got knowledge about building materials :or: (-) . I've got a builder for tiled stoves there and he says that "I've got a lot of knowledge about this and that field" . those prefer to go into the building material/ wholesale of building materials (-) . or in a DIY superstore or (-) . in a special electrical wholesale if someone was an electrician (') . right (?) . so . we simply have to look for the leanings and interests (-) . where you would like to go , but (-) . as I said (-) . that really starts where the in/ interests are (') . right (?) . where we find an apprenticing company (') . :ehm: . businessman in the estate and housing industry (-) . that's the estate agent (') . right (?)

Cl: mhm

Co: I think you know all this & just say stop if you don't know (')
It is characteristic for the exchange that it is very much dominated by the counsellor, who lists the occupational opportunities that are on offer in the center. Reference to the client perspective is made mainly by means of giving examples from other clients, who were brought into professional training. Of course, the counsellor mentions that it is a matter of the “leanings and interests” whether a training programme will be successful – with respect to that category, however, the listing of professions must appear rather random to the client.

The counsellor has a particular way of pre-structuring her presentation, in that she mentions for some of the professions that they put high demands on the trainee – too high demands in her assessment of the client.

Co: assistant to solicitor articulated clerk national insurance agent and administration employee (-) . their training is quite of high demand (,) . so nearly on the level of the A-levels . so there . ehm . one . to get the opportunity to find a place to train (-) . you have to bring very good certificates with you (-) . and the training is very demanding (,) . I’ve got to know that from those who we have(-) . tried to integrate (,). \(\text{in addition}\) considerable expenses for intermediate exams and additional courses come up (,) . where you would probably get support in/from your cooperative union too(-) . but . if others get it from other cost bearers then it’s always a bit different isn’t it (\(?)\) . \(\text{(softer till +)}\) is there (\(?)\) . (a . b) (\(?)\) + .

Cl: I informed myself about assistant to solicitor before I started my apprenticeship & but when you say it’s with A-levels and (-) .

Co: may not only (,) . well I think you just have to look (,) . we would have to look into it again (‘) . I tick this box alright (?) .

Although the training as an assistant to solicitor is judged to be of too high demand for the client, the client informs the counsellor that she had an interest in that profession. A short exchange starts between counsellor and client, which ends in the counsellor ticking a box on her questionnaire.

The solution development phase is a very long one in the exchange. This is in part due to the fact that the counsellor has a large number of professions on offer. On the other hand, the solution development phase poses the most complex tasks for the interlocutors. With respect to the segment at hand, it has to be mentioned that the counsellor uses shortening strategies in order to get through with her counselling scheme: Although the client expresses some interest in a particular profession, the counsellor does not further inquire about what in particular appealed to the client with respect to a particular profession. Even if she may be right in her assessment that a training as assistant to solicitor may be too demanding for the client, it should certainly be of interest for her further counselling to explore the dimensions that are of interest for her client, such as for example whether it is office work, customer contact, communication, interesting subject matters, variability of tasks, etc., that appealed to her client. Even though the client communicates her interest, the counsellor is not very talented in using her client’s reactions to produce more client orientation in her counselling.

Besides the suspected intellectual ability of the client to work in particular professions and not in others, the counsellor focusses very much on the health dimension.

Co: expert for hotels and restaurants (’) .

Cl: I would have liked to work (,) . in a hotel too (-) . and what is that exactly (‘) . expert for ho/ well for restaurants (?)

Co: yeah well you are (-) . responsible for catering trade/ catering stuff
Cl: but that would be wet as well or not (?)  
Co: I think you will have to wipe tables you will have to/  
Cl: that’s (,) well that is it (-) .  
Co: both (,) I think with the expert for hotels it’s the same too . as far as I am informed (-)  
Cl: one always starts at the bottom (,)  
Co: if you start at the bottom then you will be responsible of course for the room service and so on  
Cl: ((louder till +)) I mean (-) . ehm I would always have fun with that . but ehm . I know that I was written on sick leave now and when I go into such a occupation again (-) .  
Co: well we have to see (,) . well we have to be careful there & and if you are not sure about that (,) well we can tick the box anyway (,) . then you just got to check this out medical wise (,) .  
Cl: mhm  
Co: we can check this out via internet later on (,) there we find always the conditions healthwise (,) well if it says there (,) ehm . eh . no respiratory desease and no contact allergies or anything like that or (,) eh .ehm . a healthy skin for one hundred percent (,) then we can skip that (,) . right (?) . well for the beginning (-) . I ticked the box (,)  

Again, the client points at a profession that appealed to her. This time, the profession is discussed entirely relative to the health conditions it requires, and again, the counsellor does not further inquire what else it is that made it attractive for her client.

It should be interesting now to look at the particular passage in the counselling process where a profession is finally selected for the client (still stage e). This happens after the counsellor is through with her list of professions, and when the client gets a chance to talk.

Co: that are the occupations which we have here now (-) . :ehm: . on offer (,)  
Cl: well to me it’s important that I am not only sitting at the computer but also that I am dealing with people (,) here for instance with the health system (,) . well I had to do too . with hair dresser with ol/ let me say old people (,) . that you could talk to them and I enjoyed that a lot (,) .  
Co: mhm  
Cl: that you can help a bit or so (-) . . .  
Co: we have to see (-) . whether it is like that (,) . right (?) . I’ve got two (-) participants in the [Blindenförderungswerk] here in Dresden who I got a place as businesswoman in the health system (,) . because they got diverse institutions (,) . ehm . it’s quite well possible (,) . one has to go through the hall (,) meet the people (,) . especially old people are always specially grateful for friendly words and for a wee chat in between or so (,) . it has to be like that . I believe one has to be the person for that right (?)  
Cl: mhm  
Co: and you simply have to say friendly words for once and again . and to be willing to listen (,) . right (?) . but (-) . I think for the most part it is an office job (,) .  
Cl: yes but it is the old people or (-) . let me say that where you do (-) . get a change or so (-) .
Co: yes . mhm . yes (-) . . but that is possible with the office administrator as well . because the office administrator is varied usable there you could sit at the reception of a car dealership (-)
Cl: mhm
Co: for instance we’ve got an office administrator (-) .who . ehm . ehm is doing her training at the reception of the vet (-) .right (?)
Cl: mhm . . that is nice as well yes (-) . ((short laughter))
Co: well only as examples (-) . ehm . you also could be put in a real administrative body of a hospital (-) and you hardly ever have contact to any . people who are ill (-) . right (?)
Cl: mhm
Co: it doesn’t have to be like that (-) . I think this is the individual/ the field is so wide (-) . that you . yeah can have a look (-) . where . ehm. you find a field right (?)
Cl: mhm
Co: with the office administrator (-)

After the counsellor is through with her script, a negotiation phase sets in, in which the client says a little more about her leanings and expectations. Office administrator, which was one of the items on the counsellor’s list, gets into the focus of attention through an intervention of the counsellor, who thinks that this profession responds to quite a number of demands and in her view should be interesting to the client. Rather through indirect communicative acts (“but that is possible with the office administrator as well”), office administrator is strongly suggested as a possible profession for training to the client by the counsellor. It is therefore worthwhile to note that office administrator, the choice that is made only a few exchanges later, is basically a choice of the counsellor!

The counsellor is not too much encouraging her client to elaborate on her interests, but rather proceeds to describing how two other participants in the training programme are very successful as businesswomen. The sort of client orientation this counsellor displays consists very much in her experience with other clients. With her help, services could be provided for a considerable number of clients, and she uses these cases as a basis of comparison when she has to find placements for new clients.

Comparing cases is a useful means to feed professional experience into new counselling processes. The shortcut of this method, however, consists in a lack of consideration for the individuality of the actual client. The counsellor does not seem to have a repertoire at her disposal that would allow her to further elaborate on the particular case structure of her actual client.

The solution that is reached for the client in this counselling – to take up training as an office administrator – goes back to an uneven exchange between counsellor and client, that is largely dominated by the counsellor, guided by an institutional perspective and by the experience the counsellor has with other clients. The counselling suffers from a lack of client orientation in that the counsellor provides little space for her client to present and further develop her own wishes and needs.

In the next segment to come, counsellor and client have the chance to think through the result of the counselling so far reached (stage f, processing and digesting the piece of advice) and to introduce some reflexivity into the counselling: The client inquires about the conditions that will affect where one will get placed as a trainee for office administrator later on. The counsellor reflects about the demands of particular placements. The overall goal is to reflect on the decision taken so far and to look at it from different perspectives. The client lets the counsellor further elaborate on the particular profession, when she says:
“well that sounded nice earlier on what you have said”. At the end of the exchange, the solution “office administrator” can be fixed:

Co: would that be then let me say & your decision (‘)
Cl: yes

As has been said before about the general ductus of the counselling session, the counsellor uses shortening strategies in order to come to a solution. She goes through a list of professions that is not pre-configured for the need of her client, and she does not let her client discuss the various options. Some professions are mentioned but immediately sorted out by the counsellor, because she thinks that these are too demanding for her client. When the client expresses some vague interest, the counsellor is unable to further inquire into the concrete dimensions that seem interesting for her client. These might have been of great help for the ongoing counselling process. The counsellor does not even ask her client about her motives for selecting her first profession.

There is, however, one part in the exchange where the counsellor allows further discussion: When the decision has been taken to start a training as an office administrator, the counsellor could have easily concluded the selection process and proceeded to the next step in the counselling, namely to clarify what needs to be done in practice to start the programme. These tasks can be summarized as preparation for realization activities (stage g). However, before coming to the preparation phase, the counsellor opens the floor again and goes through some other professions that were selected beside office administrator. For example, she asks “to what extent does it look assistant . to lawyer . (?) . what are your concerns so (?) .. or why would you go for it (?)”.

The very final decision is left to the client:

Co: think about it in more detail again (. . . so (-) . anything else which jumped out to you (?) ((( 6 sec.))) mhm (-) . . I’ve understood it that way that you’ve got to think about these occupations again right (?) . or (-) . would you already do an evaluation . on what you have written . down & which should be on first place on second place and on third place (.).
Cl: ((soft till +)) only offic/ office administrator (. + .)
Co: yeah (?) . (( 4 sec.))

Beside the deficiencies as discussed, which are the price for the shortening strategies as employed by the counsellor, the counsellor does allow some sort of counter-movement in her counselling, in that she does not conclude the counselling after the first solution has been found, but goes through a couple of other options, before the solution is finally fixed. It is in this phase of the interaction, that the counsellor allows open-endedness of the counselling at least to a certain degree. The reconsideration of further options might have caused a complete reorganization of the counselling, so that further development of solution and processing of advice activities might have been necessary. This, however, does not happen, office administrator remains the final choice, and its realization is in the focus of the exchange to come.

When looking at the entire counselling interaction from some distance, it appears that we get a rather differentiated picture of the professional training institution, what their repertoire is, how they organize the training, how they recruit their trainees and what they do for them. Also, the counsellor conveys a lot about her script of counselling. When we look at the client, however, her picture remains amazingly opaque. Her selection is based
on the vague assessment that the profession is very varied. How the client relates to this new profession, which might dominate her whole professional life – or lead to a new retraining, if it turns out to be the wrong one – does not at all come out from the exchange.

**EXERCISE: Suggested Discussion**

The counsellor for professional rehabilitation uses a number of shortening strategies, when she goes through her counselling. Where is she rather concise in her counselling work? What are the benefits of her shortening strategies? In which stages of the model of action schemes could she have done more? What are the problems of her using shortening strategies in her counselling?

The professional rehabilitation centre supports a large repertoire of professions to the benefit of their clients, and they are very successful in bringing large numbers of clients into new professions. The great strength of their work lies in the very elaborate system to accompany their clients who are in training processes: Days of practical training in companies alternate with days of class at the vocational school in the centre, and clients have their personal counsellors from the centre at their disposal, who are in constant exchange with their trainees about the progress of their retraining. So there is a lot of discussion and reflexivity in the retraining framework in later stages of the programme. As we know from many clients who gave us biographical interviews, these counsellors often have become very significant for their professional as well as for their personal biographies. The criticism that has been formulated in this module relative to an individual transcribed counselling session is by no means meant to run down the excellent work of the professional rehabilitation center. Only with reference to the action scheme of counselling as developed from research in conversation analysis and with reference to sociological biography analysis, some suggestions for improvement of the first counselling could be made. Counsellors do of course look at the biographies of their clients. It is in the particular focus of the Leonardo project, however, to develop a more comprehensive, process oriented understanding of the biographical dimension and to make it fertile for further counselling.

Opportunities to compare counselling in the different countries contribute to sharpening the view of biographical counselling.

Another set of data will be introduced now, that shows the work of a counsellor from another of the countries contributing to the Leonardo project. This counsellor is more aware of biographical categories as defined in this sequence of modules, and his approach can be termed process oriented. Also, compared to the foregoing set of data, his work focuses on different stages of the action scheme model of counselling.

The second set of data is from an interview with a counsellor, who is offering his services to a hospice. He is talking about a particular case which he presents as it unfolds. The counselling is not on professional rehabilitation, but it is a good example for a very successful counselling process, that does include biographical counselling. On the general level of action schemes of counselling, it can be used as an example for contrastive comparison in order to show at what stages of the model biographical counselling is likely to occur and how it is included into the task scheme to be realized. Also on the thematic level, it can be assumed that biographical counselling is relevant in both contexts: Just as professional life is very much connected to biographical processes of the people concerned, the confrontation with death affects the biographies of the patients and of close relatives. The second set of data thus informs very well about the complexity of biographical
concerns as they are discussed within the framework of this sequence of modules on biographical counselling.

The hospice staff calls up the counsellor in an immediate emergency situation, when the hospice staff cannot cope with the difficult behaviour of the wife of one of its patients:

Co: I was first introduced to her because the sister in charge of the day hospit/hospice . . came running to me saying “Uhh: (’) . . John, yeah ((fast till +)) John you must have this with this woman she is a terrible woman (’) + she ‘s been on the :phone: she is going to :throw: him out of the house she ‘s had mental health services involved (,) We don’t know/ (   ) we can’t cope with it! You are a counsellor you must deal with it . . Here is the telephone number “(,) . . ((laughs))

I: ((laughs))

Co: So I thought “Oh my goodness what/ what is this?” Not at all what I have been expecting to have to do. So with some :fear: and apprehension I telephoned ((laughs)) her

The counsellor is approached by the hospice staff in an emergency situation and confronted with the vague and at the same time complex task of taking care of the wife of a patient, who is behaving very much counter to all expectations and therefore causing trouble on the ward. Not without some dramatizing means in his presentation – he formulates the exchange with the sister in charge and his own thinking rather directly as experienced speech and with some degree of imitation and movement in his tone of voice – the counsellor tells how he got into contact with this particular client.

He further tells how he could establish the action scheme of counselling. Also, he says that their relationship developped in a positive manner and that his client “obviously decided that I was someone with whom she would choose not to have a robust ((laughs)) relationship” (stage a, definition of the situation and establishment of the action scheme of counselling).

It is very often the case that counselling evolves from a rather difficult and complex situation. The focus of counselling, however, is only loosely defined, and further work of the interactants is needed to get a clearer picture of the set of problems at hand and an idea about the means to solve them. The complexity on the problem side of the counselling is reflected in stages b to c of the counselling model, where the problem is presented, defined and redefined, and the topic of the counselling is negotiated. This applies to counselling in general, and as we can see from the examples given so far, it applies to professional rehabilitation counselling as well as to hospice counselling. The two cases differ, however, in how this task is fulfilled. Whereas the rehabilitation counsellor puts in an institutional perspective and focuses very much on the symptoms of the allergy, the hospice counsellor now enters into a deep inquiry into the various perspectives of the problem in order to come to a deeper understanding of the behaviour of his client.

Co: So we’ve had a really nice . time talking (. ) The basic thing is . she was terri:fied: of dealing with her husband’s . . illness (. ) . And he had ehm . . a tumor of the bowel (‘) . and ehm they had a marriage in which there was very little personal sharing. They didn’t discuss their feelings, they didn’t discuss any important matters even . questions of money. He handled all the :money: and the insurance and/ she/ and that was another aspect. She was terrified of how is she going to manage when he had :died:
The client was perceived by the hospice staff to be unable to adequately relate to her husband. As the counsellor finds out, there are two areas of difficulties for the client: One results from the emotional side of it, the other from a very practical side. So, what the counsellor does is start a detailed inquiry into the circumstances of his case and client in order to come to a deeper understanding of the problem and to a more informed definition of the topic of counselling – or rather of the topics, since there are quite a few (stages c & d).

After the counsellor had understood more about the perspective of his client, he brings in another perspective, namely that of the society and its conception of illness (stage d):

Co: as you probably know from the media and films and stories and so forth. We have a rather . . unrealistic idea that the moment somebody becomes the victim of cancer they are almost sanctified somehow that person however difficult they were in life.
I: mhm
Co: However difficult they are with their illness. You/ they must be put in the centre of the life of the family.
I: mhm
Co: even though they may not in the past of it ((laughs)) deserved such a position
I: mhm
Co: So the people who are in the caring professions (,) the people with cancer find it very difficult when the relatives . or the carers of someone with illness are not . putting their own . needs in a very . secondary position
I: mhm
Co: to the person who has the cancer.

The counsellor broadens the scope of his case consideration. The emotional side, the practical side, and the society’s perspective taken together allow the counsellor to formulate a first explanation for the hospice staff’s rejection of his client:

Co: So, the things that this lady had been saying over the phone to the hospice staff about . . you know “what’s going to happen to me/ and I’m in a/ this is making my life very difficult this years so”/ they found out very difficult to accept/ and they had/ they developed a very negative attitude to this wife: . . And that wasn’t helping the situation because
I: mhm
Co: she was clearly picking that up every time she had contact with them. They were thoroughly disapproving of this woman who is putting her own fears.
I: mhm
Co: for the future before . what they felt was a . wifely duty to put her husband in ( )

From the case description presented so far, the topic of counselling is not reduced to the misbehaviour of the client as perceived by the hospice staff, but lies in the manifold dimensions this particular case has in its complex embedding in biographical and social processes. The counsellor then proceeds to formulate his expert opinion about the case, in that he presents his own judgement and combines all the perspectives so far discussed.

Co: This lead to a quite a lot of incidents where . . ehm she ran away from the home for a weekend leaving him to . go/ ((faster till +)) I mean he was able to :cope:+ . but he wasn’t :well: and that further made people think what a terrible woman this is for running away
Bärbel Treichel: Conversation analysis of counselling interaction

I: mhm mhm
Co: Instead of staying at home (,) Erm . . on one occasion it was reported she’d threatened to commit suicide
I: mhm
Co: because she couldn’t face . life/not so much life without him emotionally but life without . his practical and financial and financial :know-how: (,)
I: mhm mhm
Co: and that’s the big thing (,) . . Eh however as I got to know her and I got to know him ((fast till +)) because a lovely thing about it was + I/I knew him because he started to come into the day hospice and he and I found . a sort of a friendship . . And when I saw them :together: ((quieter till+)) both when they were in the hospice together having lunch or when they came to see me together or when I visited them at home + (,) I could see that they really did love each other (,) This was something which . the other staff in the hospice had . . not really had an opportunity to see but also didn’t wish to see (,) They already made up their :minds: . that this was . selfish woman (,)
I: mhm
Co: Ehm but I found no no no that there was a warmth in this relationship, they liked :walking: in the hills together that was one of their hobbies (’) they actually spent a great deal of time together (’) and ehm . . So I helped them to value that. I helped the couple . . because the man himself realised how terrified she was about being left on her own (,) And he didn’t seem to :mind: that she . was putting her own fears ahead of his well-fare. So he didn’t have a problem with it, it was just the staff in the hospice that had a problem with it (,) And of course they’d become increasingly important people in their :lives: because as he became more ill . and had to spent more time in the hospice with . . their circle of friends outside the hospice became less important and their circle of . professionals in the hospice became more important (,) So therefore the negative attitude of the staff to this woman . . . was even more significant in how she was fearing . . the future

We can see from this segment that the definition of the topic of counselling and the development of a solution (stages d & e) ideally go hand in hand. The counsellor works with the client on her attitude towards her husband and the situation of upcoming death, he makes the staff see her in a different light, and he also includes the patient’s perspective.

This variety of perspectives enters into his counselling plan: He organizes support for her in practical affairs in that he arranges for husband and wife to sit together and discuss how he was keeping accounts and to sort out things about the pension. He helps the client to better express her feelings and receive some validation for what she contributes, so that husband and wife can concentrate more on their emotional relationship and develop it further. And he separates these kinds of processes from the professional work to be done on the patient, so that the hospice staff can concentrate on their patient and gain a more positive view of his wife.

Co: So . . although I say it myself and perhaps I shouldn’t . I think my being . a resource at the hospice (,) made the lives of everybody in this/ for this particular couple much better (,) Because by allowing her: to express her feelings and get some degree of validation for them (,) and then to find a practical . solution to the problem (’) . helped her . . spent a little bit more time emphasising with her husband
I: mhm
Co: allowed the husband to . get his treatment and his support as necessary
I: mhm mhm
Co: and also allowed the hospice staff not to be bombarded with all this information

7 Discussion

In comparing the two counselling processes so far discussed, there is one important sentence the hospice counsellor says, that I would like to start with: “There wasn’t an overall counselling plan.”

Whereas in the rehabilitation counselling, the counsellor goes through a list of professions with the goal of ending up with a definite choice, the hospice counsellor enters into an open-ended counselling process, in which much time is spent on exploring the multidimensionality of the problem at hand and the various perspectives of all the actors involved. He can do this in concentrating very much on the problem definition and on the extensive work done on the development of a topic of counselling (stages c & d). On this background, the hospice counselling can be termed problem-centred, whereas the rehabilitation counselling is more solution-oriented (focus on stage e).

Another difference lies in the strategies employed by the counsellors to enable their clients to talk about their cases. In our everyday linguistic activities, we do not normally acquire all the linguistic means we need to easily master a counselling exchange: While everyday language is to a large degree concerned with practical activities and concrete events in the past and present (Malinowski, 1923; social scientists often refer to the talking about past events in terms of reconstructive communicative genres), we do not have very much training in everyday life in communicative genres that require the capacity to talk about inner feelings and leanings and dispositions. The hospice counsellor works with his client to enable her to express her inner feelings and her needs, so that she comes out of the counselling process as a more competent individual in speech as well as in everyday social interaction. The reason why the professional rehabilitation client remains so pale in her personality in the interview lies partly in the fact that she lacks the language to express her leanings and dispositions, and the counsellor does little to offer her the means to do so. Quite the contrary happens in some segments of the professional rehabilitation exchange: The counsellor rather cuts off her client’s efforts to expand on one or the other topic and rapidly proceeds to the next item on her list or mental schedule.

The problem of linguistic expression goes even deeper in that some of the things that are highly relevant in a counselling process can never be expressed at all but need to be reconstructed by the experienced counsellor. The hospice counsellor pays much attention to his client’s means of expression, and it can be suspected that he uses these insights to come to a second grade perspective on his case, that is, he develops a quasi-scientific perspective, which combines what his client explicitly says with how she says it and under what biographical and social conditions.

These considerations lead us more directly to the biographical dimension as reflected in those two cases of counselling: The hospice counsellor finds some of the reasons for his client’s inadequate behaviour in earlier experiences and social frames. His client has not learned to organize everyday life on her own, which is very much a result of the traditional orientation of the couple’s marriage. The worries she has make her blind to the emotional side of her relationship with her husband in a situation of upcoming death. Also, the counsellor finds out that his client has had an early bad experience with death in her family, which makes her panic, when she has to cope with the upcoming death of her husband.

In terms of process structures of the life course, we can say that she is in a trajectory of suffering (Riemann & Schütze, 1991; Schütze, 1995), and that her life is threatened by severe practical and emotional disorganization. The counsellor explores the various dimensions that keep her trajectory going, and with his help some of these dimensions can
be eliminated. Her life can be stabilized again, and this helps her to develop the emotional relationship with her husband, to cope with his upcoming death, and to enter into a more adequate relationship with the hospice staff. The counselling process not only gets rid of some of the trajectory dimensions, but also leads her into a process of biographical transformation, in that it enables her to be a more competent individual in life affairs than before. Also, her reflexive capacities grow, which is partly the result of the linguistic means to refer to inner states and to talk things through, which she has acquired in the counselling process.

The professional rehabilitation counsellor clearly has less sensitivity for the biographical processes of her client; sometimes she does not even pick up minor biographical facts. She does not look at the biographical conditions and the social framings of the case structure she encounters. She for example overhears her client ask what will affect where she will get placed. This information is highly relevant to the client, since, as it turns out later, she has a small child and can only work close to her hometown. The counsellor’s relative ignorance to biographical considerations is rather amazing, since the counselling need is caused by an allergy, which makes it impossible for the client to continue in her profession. The counsellor spends very little time on further inquiring into the life conditions of her client. She takes the fact that she is suffering from an allergy as the starting point of her counselling and searches for new professions for her client. The allergy may very well be just a reaction to the wet substances the client had to work with. On the other hand, allergies are very often the symptomatic expression of other conditions an individual has difficulties with: The client may have been in a difficult biographical period, possibly a trajectory of suffering, that makes her vulnerable to all sorts of symptoms and that may as well have heightened her disposition to develop some sort of allergy. Such circumstances can be grasped better with a clearer perspective on biographical processes, as developed in this sequence of modules.

Also, the client has quite some difficulty of expression as to her wishes and needs. In this respect, the rehabilitation counsellor does not reach a perspective beyond what has explicitly been said; she relies on what is in the interview, however scarce this may be.

The little negotiation that goes on in the rehabilitation counselling session points at another problem, that clearly is beyond the scope of the counsellor’s action plan: When training for an entirely new profession is initiated, this does not only affect the professional life of the client, but may develop into a process structure of biographical transformation. The rehabilitation counsellor, as she presents herself in the session as described, has no means to detect, guide, and accompany such a transformation.²

### 8 Concluding Remarks

In this module, an analysis is presented that looks at two counselling processes in terms of an action scheme model of counselling. This model is based on research in the field of conversation analysis, and it conceives of counselling as a sequence of communicative tasks to be performed by counsellor and client interactively. When proceeding through the sequence of tasks, emphasis can be put on different tasks in the action scheme model, for example on the solution development stage (as in the professional rehabilitation counselling) or on the problem definition, redefinition and topic development stages (as in

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² This criticism only refers to the counselling session as discussed. The professional rehabilitation center does excellent work in accompanying and supporting their clients once they are in the retraining process, their professional and personal development being part of it!
the hospice counselling). Biographical considerations fit in on various stages, and it is a matter of degrees of open-endedness and the inclusion of perspectives in the individual counselling design, whether these are allowed to play a major role in the counselling.

Another line of argument was developed relative to the linguistic means of expression a client brings into the counselling exchange. These may be more or less elaborate and often show different degrees of development for the presentation of inner experiences as compared to outer events. Sensitivity to linguistic means of expression may help counsellors to understand disorder, scarcity of expression, or a “robust” communicative approach as something to look deeper into. The hospice counsellor works with his client on the development of her means of expression for inner attitudes. Also, he shows his reconstructive capacities in the counselling process, since some of the things, which are important to a client, can hardly be expressed at all but have to be reconstructed by the counsellor, again with reference to biographical processes, to discourse processes and to the microstructure of linguistic expression. As shown in other modules of this programme, there is a relationship between process structures of the life course and their linguistic expression (cf. also Treichel, 2004).

As Harvey Sacks suggested in his lectures, we should analyse language where it is deep and interesting (Sacks, 1995, Part III, Lecture 23). I cannot think of any communicative genre where this requirement is met with more distinctness than in counselling. Counselling is concerned with the negotiation of meaning: In the process of interpreting each other’s utterances, the interactants have to find out what is relevant, what weight should be assigned to the things that are talked about or may be left out, all this within the overall framework of giving advice that provides orientation and may have far reaching consequences for quite an extended period of biography. Sensitivity to process structures of the life course, knowledge of the action scheme of counselling, and awareness of the means of the linguistic expression of outer events and inner attitudes will help counsellors to better understand their cases and to provide better counselling.

I would finally like to mention that counsellors in their professional practice usually do not have available transcripts of their sessions. Going through transcripts in this sequence of modules will help to develop the capacity of doing conversation analysis. In professional everyday business, the repertoire of the analysis can only be applied in an abbreviated form, and expertise in conversation analysis helps to raise awareness for discourse phenomena that are relevant for an analytic approach. Being familiar with discourse phenomena and how they relate to biographical categories and social life circumstances sensitizes analysts for the concatenation of phenomena, which are all relevant for good counselling practice.

References


Key to signs of transcription

. short break
.. medium break
... longer break
(( 5 sec.)) long break
( ) word not understood/ possible utterance
emphasised word emphasised
:lengthened: utterance lengthened
:>softer:< softer in comparison to normal volume
:<louder>: louder in comparison to normal volume
& „fast connection“
„we go ..“ quotation
((faster till +)) comment on utterance
(.) voice goes down
(’) voice goes up
(-) voice in the balance
(?) question
th/ the self-correction
[...] remark of the interviewer
Cl client
Co counsellor
I interviewer