

# CONVERSATIONS ON CONTEXTS AND MEANINGS: ON UNDERSTANDING THERAPEUTIC CHANGE FROM A CONTEXTUAL VIEWPOINT

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**ABSTRACT:** Recent developments within family therapy theory, often referred to as the Post-Milan Movement, have once again stressed the therapeutic encounter's *quality of conversation*. When therapy is looked upon as conversation, attention is not only paid to the fact that most of what happens in a session is talking. Rather, a more fundamental stance towards *human life as basically meaning-making* is taken. This is one of the essential premises of the contextualist approach to the social sciences.

When applied to human problems this approach claims that "symptoms" evolve when (1) a person gives meaning to and performs a social act within a context inappropriate to the socially shared meaning of that act, and (2) the behavior of the person is accepted as a "symptom" by him/herself and the observing community. The therapeutic conversation establishes an exclusive context within which the domains of discourse of the client's life can be accounted for and renegotiated. With the acceptance of these accounts, changes evolve in the context-act relationships (i.e. meanings) construed by the client. This appears to be the basis for the self-healing aspects of psychotherapy.

In their influential article on circular interviewing the members of the Milan team put forth the question, whether "family therapy

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(can) produce change solely through the negentropic effect of our present method of conducting the interview without the necessity of making a final intervention?" (Selvini Palazzoli et al., 1980, p. 12). It appears that this question was a starting point for a new development within the field of family therapy. This development has materialized as a gradual shift away from a preoccupation with strategic and systemic terminology in theory building toward a growing interest in more "humanistic" themes.

As soon as the *information exchange* between clients and therapists once again came into the foreground, it became evident that the therapeutic encounter's quality of a *conversation* has to be taken into consideration. The interest that articles on "human systems as linguistic systems" (Anderson & Goolishian, 1988), "interventive interviewing" (Tomm, 1987), and "the reflective team" (Andersen, 1987) have generated bear witness to these developments, often referred to as the Post-Milan Movement (Hoffman, 1988).

When we look at the therapeutic encounter as conversation, it is not sufficient only to pay attention to the obvious fact that most of what happens in a therapeutic session is talking. What we must attempt to grasp is the fundamental interrelationship between human conduct and language. Human life is meaning-making, be it on the level of acting or wording. If this basic premise of the contextualist approach to the social sciences (Rosnow & Georgoudi, 1986) is accepted, then we have to consider the development, as well as the alleviation, of "symptoms" in close connection to the properties of language as a meaning-generating system. What also has to be asked is: *what are the essentials of the therapeutic conversation that make change possible?* These considerations, I hope, will prove to be applicable to family and individual therapy alike.

## METAPHORS OF CHANGE

How does change occur in psychotherapy? It seems that the difficulties inherent in answering this question mainly stem from a distorted way of conceiving change. When talking about change in psychotherapy, we tend to use words like "influence", "recovery", "restructuring", "remediation", and of course "treatment". All of these expressions allude to a basic metaphor of action initiated by a therapist on a malfunctioning, pathological, or sick psychological structure or organization. Our language embeds the way we think about

change in therapy into an analogy between the “doings” of the therapist and the “doings” of others, like a carpenter.

What this, in fact, means is that our talking about change in therapy is confined into one of the most basic metaphors of western thought—the metaphor of “thing-acting-upon-thing” (Shotter, 1986). A metaphor can be conceived of as a basic model giving shape to the way we perceive and think about the world. The metaphor that Shotter, a social psychologist, refers to urges us to “see” the world as consisting of material things influencing each other. This metaphor is heavily backed up by the structure of the language. The linguistic phenomenon of nominalization, which is characteristic of scientific speech, seems to be the primary linguistic device through which a social process is transformed into the shape of a material one.

As an example; instead of saying “Because the client resisted treatment, the therapist showed him/her empathy” we tend to use an expression like “The resistance of the client was handled by the therapist’s showing of empathy towards him/her”. Here the process (to resist, to show) becomes a thing (the resistance, the showing) and the actor (client, therapist) a possessor of this thing. The language then delivers to us a picture of the therapist, working with his tools on the psychological structure of the client (or the psychosocial structure of the client family).

It is exactly this metaphor that I find misrepresenting. It seems to underlie a strategic, and to some extent, a systemic, approach to psychotherapy. There is another basic model of thinking—more often associated with a psychodynamic frame of reference—that also poses problems for understanding therapeutic change. This is the individualized model of thinking of traditional psychology. To explore it I have to approach the relation between human conduct and language.

### *Human Conduct and Language*

The notion of an individual psychic structure is another instance of nominalized (i.e. going from process to thing) western thinking. Rom Harré (1985) has pointed out the linguistic base of this notion. He refers to the identity in grammatical structure between, what he calls first-person avowals (e.g. “I am in pain”) and third-person assertions (e.g. “Tony is in pain”). In spite of the grammatical equivalence of these statements, there is an essential difference in their use. The first one is a part of the expression of pain, while the second one is a judgment made on the basis of some criteria. In the first instance we

express and experience, while in the second one we ascribe a mental state to another person.

The use of identical grammatical structures for first-person avowals and third-person assertions begs, however, for the notion of an "inner self" to which the mental states of the experiencing subject can be ascribed. This becomes even more evident, when we consider expressions like "I think I am in pain" or "I remember I was in pain". When we use language in this way we construct what Harré (1985), following Wittgenstein, calls the language game of self-ascription. Here the primary *indexical* use of the first-person avowal—the function of which is to turn the listener's attention to the speaker—is overshadowed by its *referential* use. What follows from this is that it is no longer "me" but "my-self" who is experiencing pain, joy, sorrow, comfort, etc.

This, according to Harré (1985), is basically the linguistic foundation for the common notion of an independent self to which personal experiences are attributable. This notion can be seen as a very general hypothesis, shared by common and academic psychology alike, about the structure of the phenomenal world. This hypothesis holds psychological, cognitive, and emotional phenomena as instances of mental states ascribable to separate individuals. Furthermore, these individuals have the ability to express their inner states by the means of psychological mechanisms.

This commonly shared hypothesis is well rooted in a western metaphor of the world existing of "formless matter" + "things with form" (Shotter, 1986). In this case "psychological phenomena" stands for formless matter and "individual personality structures" as things-with-form. Our mental make-up seems well suited to accept this way of thinking. The fundamental problem associated with this epistemological view is that it serves as the basis for a *decontextualization* of psychological phenomena, including those we call symptoms of psychic disturbances. Psychological phenomena become situated in the "inside" of the person, apart from the relationships between persons.

What then could be the basis for a *recontextualization* of psychological phenomena. In his "Personal Being" Rom Harré (1983) writes that "the fundamental human reality is a conversation, effectively without beginning or end, to which, from time to time, individuals may make contributions . . . The structure of our thinking and feeling will reflect, in various ways, the form and content of that conversation" (Harré, 1983, p. 20). He says that "there are two primary realities in human life: the array of persons and the network of their

symbiotic interactions, the most important of which is talk" (Harré, 1983, p. 20). If we take this point of departure, the "person" is no longer understood as a natural object, but as a cultural artifact. Far-reaching consequences follow from this understanding.

What does it mean to say that the person is a cultural artifact? To quote Harré again: "A person is a being who has learned a theory, in terms of which his or her experience is ordered" (Harré, 1983, p. 20). To be a person, in the full sense given to that notion within our culture, is to act and think about yourself and others according to this socially based theory (e.g. a schizophrenic is a human being who does not share this common theory). What muddles things up, in a philosophical as well as a practical sense, is that this theory is misleading. As Shotter (1985) has shown, it provides us with an illusion of a third-person position in relation to our own conduct. We talk about ourselves as if we were *reporting* on something that is happening outside the situation in which we talk. But, according to Shotter, when we are talking about ourselves we are in fact *telling* something (i.e., we are giving an account of our conduct—an account by which we establish one or another position in a social network). The language game traps us in a way that makes the use of language, as in fact the creation of a social situation, invisible to us.

The difference between reporting and telling has consequences of vital importance for how the therapeutic conversation and therapeutic change are conceived. I will return to this later. Suffice it to say here that the social situation which is construed through the telling of the experience *is* the context that makes the experience intelligible (i.e. gives it meaning). Thus the social situation, in fact, constructs the experience. The reporting-mode of talking, though, makes the experience appear independent of the situation in which it is told. A closer look at how language works as a meaning generating system gives some clues to why this is so. The crucial point is how communication through language shapes what is communicated.

### *The Language as a Meaning-Generating System*

According to the linguist M.A.K. Halliday (1978), language should primarily be seen as social semiotics. This means that language is one means (and although the most important, not the only one) of expressing the social order. Halliday sees the relationship between culture and language as one of realization; language is a realization of the social system. Although there are other semiotic sys-

tems capable of realizing the social system (e.g. art, religion, music, sports, architecture, politics), the outstanding feature of language is that in the system of language a *form* is placed between the *content* and its *expression*. This form is the structured *lexico-grammar* of language.

The notion of a relationship of realization between the culture and the semiotic systems conveys a view of interdependence between the two. There is no independent existence of culture or social order outside its realization. The culture can be seen as a vast *potential of conduct*, which can be realized through a *potential of meaning*, which in its turn is realized through a *potential of wording* (in the case when language is the realizing semiotic system). In other words: "I can do what I can mean and I can mean what I can say" and the other way round "I can say what I can mean and I can mean what I can do".

Coming back to the lexico-grammar, which is unique to language as a semiotic system, this structure gives the language an inner organization into which its social functions are projected (Halliday, 1978). Language is used to coordinate actions (the "*interpersonal*" metafunction of language according to Halliday) and to depict experiences and circumstances (the "*ideational*" metafunction). But language is also used in a self-referential way, to move, so to speak, within the system. This is the "*textual*" metafunction of language, through which a coherent narrative is made possible.

The interpersonal, ideational and textual metafunctions of language constitute the *discourse semantic stratum* of the language system (Halliday, 1978). This stratum is realized by the stratum of the lexico-grammar in a manner analogical to the one in which discourse semantics realizes the culture or the context (I will use the term "context" for that level of the system from here on).

The realization of discourse semantics through the lexico-grammar goes beyond the scope of this paper, but I would like to point out the interdependence between the strata or levels within the language system once again. What seems to be important, for the purposes of this article, is that in the same manner as the context (social "reality") is realized by meanings embedded in it and the meanings are dependent on the context, is the realization of the semantic level of language through the lexico-grammar shaping the stratum being realized. In other words, the grammar of the language is not only a passive conveyer of meaning into sound, but has an active part in what and how meanings can be expressed. This is another way of saying that meanings are not simply generated in one instance of the

language system (as Saussure's distinction between signifier and signified would imply) but through the system as a whole. It is precisely here that the power of language in shaping our experiences and our world-view lies. The language-game of self-ascription, referred to above, is a good example of this.

### *Contexts, Symptoms and Meanings*

What is the difference between doing and wording? It appears to me that as elements of human conduct, doing and wording should be seen as equivalent in the sense that they are both meaning-making. More simply: wording is doing, but with a special quality to it. This is the quality of a *relative* independence of the social situation.

The "distance" of language to actual situations in contexts (i.e. the distance between content and expression) is made possible by the textual metafunction and the lexico-grammar and it has fundamental consequences. These seem to be of the utmost relevance to the topic of this paper. One consequence is that language as social semiotics makes cultural life possible. A not insignificant instance of this is the social construction of the person to which we alluded above. But then again, the praxis of living in the world in language or through languaging puts us in a complicated relationship with our experiences. This is a topic that Maturana (1988) has dealt with thoroughly. It is as if language has an almost demonic dual quality of enabling and restricting the communication of experience.

The main problem, an epistemological one, inherent here is that we cannot deal with any experience without constructing a *domain of discourse* within which to deal with this experience. There is no way to contemplate on, communicate or explain "pure" experience. In fact, this is exactly what the notion of realizing (or constructing) the context through meanings refers to. Bruner has, from the point of view of language acquisition, stated that "discourse presupposes a reciprocal commitment between speakers . . . that includes at least three elements: (1) a shared set of conventions for establishing speaker intent and listener uptake . . . (2) a shared basis for exploiting the deictic possibilities of spatial, temporal, and interpersonal context . . . and (3) a conventional means for jointly establishing and retrieving presuppositions" (Bruner, 1985, p. 38). These are the elements of a shared context or a joint domain of discourse, which are prerequisite for "smooth" communication.

From the point of view of therapeutic endeavors there are funda-

mental problems connected with the notion of a shared context. It has been pointed out by the linguist James Martin (1989) that the context is, within the semiotic system of language, the one content level that does not have an expression form of "its own" (in the sense that the lexico-grammar is the expression form of discourse semantics and phonology/orthography the one of the lexico-grammar). The intra-linguistic resources for context definitions are sparse and the construing of a shared context is heavily based on extralinguistic features. In other words, the speaker/listener is not provided with any grammatical resources to aid him/her in the marking of the context.

Put another way, no other semiotic system possesses the power to generate meaning outside the immediate contextual situation. This is a point that Watzlawick et al. (1967) dealt with by introducing the notions of digital and analogic communication. One consequence of this state of affairs seems to be that there are no very definite clues or markings to aid the interlocutors' sensitivity to anomalies in the context-meaning relationship (in the sense that grammatically ill-formed utterances serve as markers for possible anomalies in the meaning-sounding relationship). At least in theory there is the possibility of seemingly smooth communication in totally unshared contexts (a fact shown by the movie "Mr. Chance"). But, while this might be true for linguistic conversations and texts, it is absolutely untrue for any semiotic system based on ritual. The ritual is so fundamentally context-forming, that there can be no question of a ritual in the "wrong" context.

The semantic power of language enables us to separate the word-ing from the doing and to build up a text that can, at least apparently, be understood outside the context of its origin. This semantic power is, paradoxically enough, the basis for the *multiversa* (Maturana, 1988) in which we find ourselves living. Ritual unifies experience—words create a diversity of microcosms.

In line with Harré's (1983) view on conversation as the fundamental human reality, can the personal life of an individual be equated with the realm of domains of discourse in which he/she can participate? This "life space" (to use an old phrase by Lewin, 1936) can be illustrated as a network of possible action lines. In this network the individual moves around fairly smoothly, as long as there is no unbearable incongruence between acts and contexts. Maturana (1988) pointed out that words function as important nodes within this network, because they open up new possible domains of discourse.



There would be no texture of personal life without the meaning-producing power of language.

Troubles are destined to appear, when there are “rubs” (an expression used by Efran, Germer, & Lukens, 1986) in the act-context relationship. Consider for instance the two conditions of incest and impotence. There is an interesting complement between the two as the first one constitutes bringing in a sexual act into a desexualized context and the other of doing just the opposite: the lack of a sexual act in a context that begs for it. These rubs can be understood as conflicting demands between the domains of discourse into which an individual enters within the texture of his/her personal life.

When committing an act of incest a person can be seen as using the “words” of sex within a “domain of discourse” of intrafamilial affection. An instance of impotence again (when not organic in origin), seems to arise when a person has, for one reason or another, defined a sexual context as “a domain of discourse” of intrafamilial affection in which “words” of sex are not appropriate. What does such an anomaly between act and context (or word and domain of discourse) tell us? According to Efran et al., (1986) it tells us something about the conflicting demands on the person at his/her *location* in the *social matrix*. The “rubs” “expose the shape of the social terrain with which the individual is forced to contend” (Efran et al., 1986, p. 171), and thus they can be meaningfully dealt with only within the context of that social terrain. We are interested in the social terrain as conceived of by the individual actor, not as something objectively measurable.

Thus the act-context anomaly experienced as a “rub” is indicative of an experienced conflicting position within a social network. To be considered as “symptoms”, such rubs have to fulfill two conditions: (1) a person gives meaning to and performs a social act within a context inappropriate to the socially shared meaning of that act and (2) the behavior of the person is accepted as a “symptom” or “problem” by him/herself and the observing community.

### *The Therapeutic Conversation*

Why do symptoms persist? This seems to be the complementary question to the one concerning the essence of therapeutic change. Within the frame of the “thing-acting-upon-thing” metaphor of therapeutic change, would the persistence of symptoms be attributed to some kind of rigidity of the psychological structure of the client or the

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psychosocial structure of the client family? This, as we well know, has been done. If we accept the "rub" definition of the symptom again, will the persistence of the symptom be equated with the meaning-context anomaly of the act? The symptom persists as long as this anomaly persists, and is socially accepted as a symptom. Change would occur with a shift in the meaning-context relationship in which the act (or more accurately array of acts) is embedded.

How can such a shift be brought forth? Here again a linguistic trap allures. We have to come back to the distinction between reporting and telling suggested by Shotter (1985). The metaphor of "thing-acting-upon-thing", when it is shared by client and therapist alike, presents the picture of the client *reporting* on his/her conduct as he/she would be on the functioning of one of his/her internal organs. The illusion of the third-person position is immediately there. But in relationship to conduct there is no third-person position.

What the client or client family in fact is doing, is *telling* the therapist something. Telling is giving an account of one's conduct in a way that makes it intelligible and legitimate to others. Telling is shaping a social relationship. Telling "instructs (another) person in what is going on in a particular situation, such that (the persons involved) can go on in it in an appropriate way" (Shotter, 1985, p. 169). To put it simply: we tell stories in order to be accepted as persons.

As therapists, we have no possibility of stepping outside the therapeutic relationship and adopting an uninvolved position in relation to it. The practice of an observing team seems to support this illusion. The "observing" team is in fact no observer, but one agent in the social situation to which something is told. The shift from an "observing" team to a "reflecting" team seems to indicate a new understanding of the position of the team in accordance with these considerations.

But if there is no possibility for an observer's position, then there is no need for it. The therapeutic relationship, be it a client-therapist dyad or a family-team encounter, is the context in which the acts of the persons involved have to be accounted for. And it is precisely this relationship in which conversations on contexts and meanings are deemed to evolve as these accounts are given and accepted. What then is constituted is a new domain-of-discourse: a domain in which the conversational domains of the client's life space can be accounted for and renegotiated.

One peculiarity of psychotherapy (family or individual) is the impossibility of "acting out" in the social situation. Everything said or

done (all the doings and wordings) is *representing* something. This is something usually at first experienced as extremely stressful. There is no "hiding place", when all doings have to be accounted for. It is the *acceptance* of the accounts that is emotionally relieving as these open up new possibilities to move within the texture of personal life.

What we seem to be approaching here is an understanding of the self-healing aspects of any therapeutic practice based on conversations. I am much in favor of Vincent Kenny's (1988) proposal that psychotherapists really should be called *iatrologicians*, grounded on the phrase *iatroi logoi* (healing words) used originally by Aeschylus.

## CONCLUSIONS

If the considerations presented in this paper are accepted, two rather surprising conclusions seem to suggest themselves. The first one is that therapeutic change, as soon as the therapeutic relationship has been established (and it should be heavily accentuated that even the suggestion of a consultation establishes a relationship), cannot be avoided. The other conclusion is, that, in the strict sense of the word, there can be no theory or model of psychotherapy. *Psychotherapy as human conduct can not be technically described, neither can the therapeutic session be "planned"*. Therapy is a social situation which can only be accounted for.

Another point is that for therapeutic change to occur it does not seem necessary that a "therapeutic understanding" be reached. In fact, the account for the change can be renegotiated at times over and over again or different views on how change was effectuated may be permanently held by the participants in the process. Very seldom, if ever, do we really "know" how change occurred.

What I have tried to show in this paper is that although this is the case, there is nothing magical or mystical about change. Psychotherapy is magic without magic.

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