

6 Conversation analysis and psychoanalysis: Interpretation, affect, and intersubjectivity

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In this chapter,¹ I will use conversation analysis to explore some themes that are central in the clinical theory and practice of psychoanalysis. These themes include interpretation (which is a central theme in classical psychoanalytic theory), and affect and intersubjectivity (which are central themes in some contemporary psychoanalytic discussions). I will discuss these themes using two kinds of empirical material: clinical notes arising from my own psychoanalytic practice, and transcribed materials coming from a corpus of fifty-eight tape recorded psychoanalytic sessions collected by Sanna Vehviläinen and myself. Clinical notes involve the traditional method of representing interaction in psychoanalysis. The aim of the chapter is to show how the conversation analysis of tape recorded material can radically expand our understanding of the key practices of psychoanalysis.

In theoretical and methodological terms, this chapter draws upon the idea of “professional stocks of interactional knowledge” (SIKs). We (Peräkylä & Vehviläinen, 2003) have proposed that professions dealing with clients have their specific stocks of knowledge which describe and prescribe the professional interactions. We suggested that conversation analysis should enter into dialogue with such SIKs; this chapter is one effort towards such a dialogue (see also Forrester & Reason, 2006).

I should acknowledge my specific position in relation to psychoanalysis and conversation analysis. For nearly twenty years, I have been involved in doing conversation analytic research on therapeutic and medical encounters. Since 2003, I have been involved in psychoanalytic training organized by The Finnish Psychoanalytic Association. Currently, I also practise part time as a candidate psychoanalyst, doing psychoanalytic work with an intensive supervisory backing by a senior analyst. Apart from personal interest, I have been drawn to psychoanalytic training by (a somewhat

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intuitive) adherence to the ethnomethodological idea of “unique adequacy requirement.” Ethnomethodologists suggest that social researchers should “learn to be competent practitioners of whatever social phenomena they are studying” (Rawls, 2002, p. 6). In conversation analysis, such competence cannot be considered as a prerequisite for successful research as, for example, the insightful research on medical consultations conducted by researchers without medical training shows (see Heritage & Maynard, 2006). However, I believe that learning the professional skills can also lead to some additional understanding in conversation analysis.

So, when researching psychotherapy, I am not an outside observer, but a (candidate) member of the psychotherapeutic community. At the same time, my research orientation is strictly conversation analytic. This “dual membership” inevitably involves risks, but I hope it also makes it possible to explicate some aspects of psychotherapeutic practice that might otherwise remain unnoticed. Although it is rather common in some other forms of psychotherapy research for the researcher also be a practitioner (for examples, see Chapter 1), not many conversation analysts, to my knowledge, have acquired clinical training in psychotherapy. It should be added that “psychoanalysis” as the topic of this chapter is a rather contingent choice. In principle, a similar kind of analysis could be performed on any established psychotherapeutic regime (such as cognitive-behavioural therapy, interpersonal psychotherapy, or the like).

Interpretation

Doing psychoanalysis involves a specific way of hearing the client’s talk, a specific way of doing inferences. This specific way of inferring has been institutionalized in the technique of psychoanalytic interpretation. A canonical definition of psychoanalytic interpretation is given by Greenson in his textbook on the technique and practice of psychoanalysis (1967, p. 39): “To interpret means to make an unconscious phenomenon conscious.” The analyst hears the client’s talk in terms of the unconscious phenomena that it may index, and at times, he suggests to the client what he thinks he is hearing. Greenson indeed considered interpretation as the decisive hallmark of psychoanalysis: unlike in other psychotherapies, “in psychoanalysis interpretation is the ultimate and decisive instrument,” as “every other procedure prepares for interpretation or amplifies an interpretation” (p. 39).

Analysts are advised to take clinical notes; usually, as in my case, they are written soon after each session. The notes describe what happened in the session. They are a resource for the analyst’s own reflection of his or her work and the client’s progress, for supervision, and for case reports and

other research that is done with the clinical materials. Due to my conversation analytic background, my notes may be somewhat more detailed and more often in a dialogical form than is typical. But, basically, they are ordinary clinical notes and, as such, they exemplify the way in which clinicians represent their work. Therefore, let us consider an example of an interpretation, taken from my clinical notes. The client works as a janitor in a library. He has recently decided to end the analysis, about ten months after he started it. It should be mentioned that this is a very early termination of analysis, which can usually last up to three years. The client is telling a story about an alcoholic using his library. For reasons of space, some sentences have been omitted from the original notes. CL stands for the client, AN for the analyst. All data to be presented (clinical notes and segments from tape recordings) are translated from Finnish.

Extract 1 (clinical notes)

- Cl: Yesterday there was a homeless alcoholic sitting in the reading room. He stayed there from noon until late afternoon. He smelled as the alcoholics smell . . . In my mind, I was worried about him. It was a very cold day and hence I could not kick him out from the library. I was wondering whether I should call the police. As the closing time came near, he gave me a nice surprise: he went away on his own initiative. He moved very slowly. I was worried how he would manage. Last Friday an alcoholic had been found dead nearby the library. . .*
- An: What comes to my mind is this: The alcoholic, the library, and the idea of kicking him out may have something to do with you quitting the analysis. It is as if there were something unbearable in you, something that forces you to end the analysis.*
- Cl: I don't feel that you would want me to stop the analysis. . . One can think that I myself might have a feeling that there is something so shameful in me, or the like, that I cannot continue the analysis. I don't have the strength to think about that now, I don't feel that this idea is anywhere close to me now.*

In Extract 1, the analyst (remember that these are my notes, but I will be referring to myself in the third person) hears the client's story about the alcoholic at the library in the context of the relationship between himself and the client, as indexing the imminent termination of the analysis. He proposes this hearing to the client. The analyst suggests that alongside its literal meaning, the story also conveys the client's perception of his decision to quit the analysis. The client's response to the interpretation is equivocal. He admits that in principle one could see things in the way that the analyst suggests, but he reports not having the "strength" to consider that possibility "now."

This segment of clinical notes illustrates vividly the analyst's reasoning concerning the client's talk, and concerning the client's state of mind in face of the termination of the analysis. But as *post hoc* reconstruction of the interaction, the notes do not give us access to many aspects of the actual

practices in delivering and responding to the interpretation. For example, the segment does not tell us whether, and in which ways, the analyst possibly prepared the ground for his interpretation before its actual delivery, for example through the ways in which he initially responded to the client's story. It does not reveal the ways in which he possibly chose specific words for his interpretation so as to convince the client that there indeed was a "hidden meaning" in the story that he just told. Or the exact ways in which ways the client combined, in his response, the rejection of the interpretation with its conditional acceptance.

We need more exact data, and more rigorous method of analysis, to deal with questions like these. In studies reported recently (Peräkylä, 2004a, 2005; Vehviläinen, 2003a) Vehviläinen and I have used conversation analysis (CA) to explore the interactional ramifications of the delivery and reception of interpretations.

Vehviläinen (2003a; Chapter 7, this volume) has described in detail the interpretative trajectory leading up to an interpretation, showing how the analyst's interventions such as extensions of the client's turns and formulations of the client's talk step-by-step create a puzzle, the solution of which is the interpretation. Interpretations sometimes suggest things that would at first sight appear wild – that was also the case in the preceding clinical vignette. Analysts' ways of receiving clients' talk, for example by means of formulations, rearrange the clients' initial stories and descriptions in such ways that make the subsequent interpretations plausible and possible (see also Peräkylä, 2004a). Thus, CA work on interpretations has quite directly specified what Greenson (1976) suggested in general terms: that other procedures in psychoanalysis prepare for interpretations.

Conversation analysis also helps us to specify what happens after interpretations (Peräkylä, 2005). When clients align to the interpretation, they sometimes do that "minimally," by utterances that plainly claim their agreement (e.g. "it is absolutely true"). More often, however, clients respond to interpretation by utterances in which they take up some part of the interpretation and continue it, in the client's own terms as it were. By so doing, the clients show their acceptance and understanding of the interpretation (see Bercelli *et al.*, Chapter 3 this volume). To put it in terms of psychotherapeutic theory, this kind of response can involve such "insights" or "chains of fresh associations" that psychoanalysts consider to be the goal of an interpretation. (See Peräkylä, 2005, for the ways in which it can also involve hidden resistance toward the interpretation.) Extract 2 involves an example of an elaboration from our tape-recorded data. The client's elaboration extends to lines 27, 29, and 32, where she says, referring to her childhood: "Yes just to dance and to sing . . . so that others would be happy and pleased with me." Let us examine how this utterance comes about.

At the beginning of Extract 2, the client talks about her grief after the recent death of her partner. In examining her own feelings, she has realized that she is worried that she might get stuck in her grief. In line 18 the analyst begins an interpretation in which he makes a link between the client's current reluctance to be drawn into grieving, and her "childhood sorrows." Through the design of his interpretative statement (see e.g. "again" in line 19 and "these" in line 21) the analyst shows that he is not suggesting something entirely new but, rather, returning to a theme that the participants had been addressing earlier.

Extract 2 (tape recording).

01 Cl: . . . maybe there is some kind of
 02 fear that I . . .
 (*five lines omitted*)
 08 Cl: or that I will become like [that
 09 An: [(coughs)] hmm
 10 (.)
 11 Cl: old relative of mine so I will just walk
 12 around then and say oh I wish I could get away.
 13 (1.0)
 14 Cl: I mean that is no (.) .hhh .hh (0.3) way to live.
 15 (0.4)
 16 Cl: You either live or you don't live.
 17 (1.8)
 18 An: .hhh I do think that it has (0.5) uh considerable
 19 dimensions that thing so that it .hhh again I would
 20 indeed connect it to your (0.4) childhood situations
 21 to these (.) gre[at sorrows.
 22 Cl: [Yeah:,
 23 (0.3)
 24 An: When >you have the kind of< feeling that they must just
 25 (0.4) be left behind right away.
 26 (0.5)
 27 Cl: ye[:s (just<
 28 AN: [One shouldn't be drawn in [to griev ing .
 29 CL: [To dance and to sing.
 30 (.)
 31 AN: Yes,
 32 CL: So that others would be happy (.) and pleased with me.
 33 (.)
 34 AN: Yes and you too would feel bet ter .
 35 (2.3)
 36 AN: But there is the problem then that .hhh
 37 how much of that grief then goes completely un°grieved.
 38 CL: Yes well: now at this moment so far there's not any
 39 .hhh .hhh KRÖHHHH (0.4) köh köh krhmm (0.4) mt .hhh
 40 great danger yet that I #would get rid of it#.

41 (3.3)
 42 CL: But but I (0.5) well I balance things so that,
 43 (1.0) go around (0.5) and do things and. (0.8) .hhh
 44 I went to buy some bulbs of amaryllis and will put them
 45 to the ground . . .

The first part of the analyst's interpretation in lines 18–21 is met by the client's minimal agreement token in line 22. After a brief gap, the analyst then adds an increment to the interpretation in which he points out that in her childhood, the client felt that sorrows have to be "left behind" quickly (lines 24–25). Finally, overlapping with the client's turn beginning, the analyst adds a third component (line 28) which exemplifies the client's attitude.

The first part of the client's elaboration of the interpretation is started by the word "just" after the second agreement token in line 27, then aborted, and completed in line 29. The elaboration is sequentially tied to the second part of the analyst's interpretation (lines 24–25) in which he described the client's childhood scene. The client uses metaphorical language to illustrate the same experience that the analyst was describing: she moved on "to dance and to sing," instead of allowing herself to take time for grieving. After an agreement token by the analyst (line 31), the client expands her description of the childhood scene. She adds an explanatory dimension to the description, referring to the expectations of "others" as a reason for her inability to mourn (line 32). By this two-part elaboration, the client shows her understanding and acceptance of the interpretation.

Usually, in psychoanalytic texts, the interpretation is understood as a two-phase procedure: the analyst's interpretation is followed by the client's response which, when things go well, incorporates new insight instigated by the interpretation. In psychoanalytical terms, the client's elaboration in lines 29 and 32 indeed seems to be an occasion of such insight. The contribution of CA here is to show the linguistic and interactional realization of insight. However, there is more to be said about this case.

Conversation analysis can also show that what happens after the interpretation is very much a co-product of the client and the analyst alike. Insight is not a private business. After the client's elaboration (or other response to an interpretation) there is an opportunity for the analyst to show his stance towards that response. Let us return to Extract 2. In line 31, the analyst agrees with the initial part of the client's elaboration, thereby as it were ratifying it. The client's expansion of her elaboration in line 32 is then produced in this context of agreement. And the analyst not only agrees with the client's elaboration, but he also joins in producing it. In line 34, after an agreement token "yes" (Finnish *iii*, which does affiliative work – Sorjonen,

2001) he produces an utterance that is designed to be a grammatical continuation of the client's preceding turn (line 32). Here, the analyst adds another reason for the client's inability to mourn: by not mourning, the client also made herself feel better. So, in the sequence consisting of the analyst's interpretation, the client's elaboration, and the analyst's further extension (cf. Vehviläinen, 2003a) of the elaboration, the participants collaboratively draw a sketch of sensitive aspects of the client's childhood experience, in the context of the talk about the client's current bereavement. In this case, it is evident that the interpretation is not at all a unilateral act, the analyst interpreting something and the client receiving the interpretation but, instead, is a co-product of both parties.

To sum up, CA research on interpretations explicates the sequential structures, or patterns of activity, that lead towards interpretations, and follow from the interpretations. By so doing, the research reveals some until now unexplicated aspects of the technique of psychoanalysis, and some until now unexplicated ways in which the clients display or reveal the mental events that the interpretations instigate in them. CA also shows how the client's understanding of his or her mind, sought after in interpretations, is a thoroughly dialogical achievement.

Affective communication

Traditionally, interpretation has been regarded the key technique of psychoanalysis. However, in recent discussions concerning the nature of the change that is supposed to take place in the client in psychoanalysis, the importance of interpretation has been called into question. It has been suggested that instead, or along with, interpretation, the very interaction, especially affective interaction, between the analyst and the client is an agent of change in analysis or therapy (see e.g. E. E. Jones, 1997).

The members of the Boston Change Process Study Group have explicated the grounds for this kind of view (Bruschweiler-Stern *et al.*, 2002; Stern *et al.*, 1998; Tronick *et al.*, 1998). They view mother–infant interaction as a kind of blueprint for the therapeutic relation: similar processes that enhance the infant's mental growth can occur in therapy, enhancing the client's (and the therapist's) growth in that setting. The participants in the therapeutic relation are involved in mutual recognition and regulation of their affective displays, involving moments of mutual affective understanding as well as moments where the understanding gets lost and possibly reestablished (Tronick *et al.*, 1998). This process modifies the participants "implicit relational knowing," i.e. mostly unconscious expectations regarding the ways of being with other people (Stern *et al.*, 1998, pp. 910–911; see also Streeck, Chapter 10, this volume).

The following extract from my clinical notes illustrates a moment saturated by affect. It is from the very beginning of a session. The preceding day, the client had told me that she would bring to this next session her delayed monthly fee. The passages in italics involve my reflections while writing up the notes immediately after the session. Again, some sentences have been omitted to save space.

Extract 3 (clinical notes).

- Cl: I'm sorry, I was not yet able to organize the money.
 An: Well what comes now to your mind about that.
My question comes up very quickly. I'm aware of the tone of my voice when uttering the question; I'm trying to make my voice non-accusatory, and it becomes somewhat brisk.
The question makes Cl somehow embarrassed, struck, or "frozen." Her talk becomes perturbed. I don't remember too well what she says; in any case she tells how difficult the bills are for her to deal with . . .
Thereafter there is a silence for a few minutes. I seem to remember that I feel concern for Cl during the silence, somehow I am afraid of her bad feeling which I consider has been caused by me.
 An: When we talk about money right now, do you become paralyzed in the way that you have been talking about quite a lot here in the analysis?
 Cl: Somehow I do.
 (. . .)
 An: Questions related to money are probably intertwined with many of your experiences. These experiences are sort of summarized in questions regarding money.
 Cl: Yes. Paying bills is linked with adulthood and with independence.
 An: And somehow money is also related to the father.
 Cl: Yes it is related to him.
 (. . .)
Approximately here there occurs a new silence, longer than the previous one, this one might have been about five minutes. During the silence (or at some other point) I am wondering whether Cl could get a permanent job instead of the insecure and badly paid freelance work that she is now doing . . . During the silence I also think about what this silence feels like. I have a peaceful feeling, but I don't know what Cl feels like. I think about the way in which she lies on the couch and breathes, she indeed appears peaceful, not anxious.
 Cl: I cannot get hold of anything.

The analyst responds to the client's announcement (that she hasn't got the money today) with a "paradigmatic" psychoanalytic question, "what comes to mind." According to the clinical notes, the analyst is quite self-conscious in uttering the question: alive to the moral and emotional implications that it may have. He perceives the client's response to be one suffused with negative emotion. There ensues what appears a moment of mutual discomfort. In the subsequent talk, the analyst links the current emotion with the client's

recurrent feelings of being paralyzed. This paralysis is indeed a major problem which the client has described during the treatment. During the long silence that follows, the analyst is thinking about ways in which the client's situation could be improved. He is also following his own and the client's emotional states, listening to the client's breathing in a way that a father might listen to his baby breathing.

So, during the episode described in Extract 3, the client's negative emotion is aroused, it gets recognized both verbally and nonverbally, and the participants probably move towards some regulation of that experience. The link, suggested by Stern, Tronick and others, between emotional regulation in early interaction, and that in the therapeutic relation, seems quite plausible here.

As I did when discussing interpretation, I also want here to compare the understandings based on clinical notes with those that arise from conversation analysis. Let me first point out a domain of action that is available in the clinical case material but, as far as I can see, not in conversation analytic data. The clinical notes can give us access to the analyst's account of his or her thoughts and experiences during the interaction. In recent decades, analysts have stressed increasingly the importance of the analyst's subjective experience, as a source of understanding of the client's affective state and the client's relation to the analyst (see e.g. Ogden, 1997). Arguably, these experiences are part of the analytic situation, part of the activity of doing psychoanalysis, especially when it comes to affect. Clinical notes may reveal something of that better than video or audio recordings on their own.

Conversation analysis, in turn, can contribute by specifying the ways in which affect gets expressed and regulated in psychoanalytic sessions. It can explicate one step further the affective interactions that the case reports refer to in general terms. In the clinical notes above, the client was described as being "embarrassed, struck, or 'frozen'." The notes do not show how this came about. At the moment, the aim of CA studies, as I see it, is to identify the loci of affect (cf. Besnier, 1990) in therapeutic interaction, i.e., the recurrent sequences and means of expression that convey participants' affective states, and serve as a means for their interactional management.

The emergent CA research on affect and emotion (e.g. Goodwin & Goodwin, 2000; Peräkylä, 2004a; Peräkylä & Ruusuvuori, in press; Ruusuvuori, 2005) has shown how the expression and management of affect involves lexical and syntactic choices as well as prosody, gesture, and facial expression. However, regarding affect in psychotherapy, there is no prior CA research to build upon (see Leudar *et al.*, Chapter 9, this volume). Therefore, we are very much at the exploratory stage. In her ongoing dissertation work, Voutilainen (in prep.) examines the cognitive therapist's

responses to assessments made by the client. There is frequently an affective dimension in these assessments – for example, the client may be assessing negatively people close to her, or events that she has participated in. Voutilainen has identified two different responses to assessments by therapists: one is to confirm the assessment, and the other is to interpret the assessment. In confirmation, the therapist makes a second assessment, claiming that the assessable is intersubjectively available. Thereby, the therapist reactualizes and intensifies the client's affect involved in the assessment. When interpreting the assessment, on the other hand, the therapist treats the affect as something that is in the client's mind but not as such shared by the therapist. Rather than sharing the affect, the therapist suggests that the participants should examine it further. So, in her ongoing work, Voutilainen is in the process of uncovering one "locus of affect" in therapeutic discourse.

Dreams

I would like to suggest that talk about dreams serves as one locus of affect in psychoanalysis. Traditionally in psychoanalysis, dream interpretation has been understood as an exploratory area. Dream is considered as the "royal road to the unconscious": by examining dreams, the client and the analyst can access unconscious, repressed contents of the client's mind. By examining sequences of dream talk in our tapes, I have come to think somewhat differently. It appears that dreams are used, in our tapes, not so much to find new contents from the client's mind, but to return to something that is already known, and to re-cognize, to become once again aware of, the possibly painful affect that is related to those states of affairs.

Let us examine in more detail one recurrent detail in talk about dreams. Frequently in our tapes, one party, or both parties, uses a figure originating in the client's dream – i.e., description of a scene or an element of the dream – as a resource in the description of the client's "out-of-the-dream" circumstances. The figure from the dream is inserted in the description of the everyday reality. Through this insertion, the affect related to this aspect of everyday reality is recognized and often also intensified. Extracts 4 and 5 are examples.

At the beginning of the session from which Extract 4 is taken, the client reported a dream where the analyst tells her that she is exhausted and will take three months' sick leave, then falls down and cries in the client's arms. When the client in the subsequent talk describes her worries concerning the analyst's recent illnesses, the analyst in response inserts the figure of "nursing the analyst," originating in the client's dream, into her sympathizing assessments.

Extract 4 (tape recording)

(Cl is talking about her (and her friend's) worries concerning the analyst's recent illnesses)

- 01 Cl: (.hh) we were quite @anx[ious@² a]nd worried and,
 02 An: [mhhh]
 03 Cl: .hhhhhhh >SO< REALLY however [>so<
 04 An: [ye:a,
 05 Cl: >like< quite (0.4) #really worr[ied plus#] then
 06 An: [ye:a,]
 07 Cl: the, .hhhhh (somehow) such a (1.0) child's (0.2)
 08 thought that this ground is cracking no[w(h)].
 09 An: [yeah:.
 10 (1.0)
 11 An: .yeah (0.2) yes, .
 12 (1.0)
 13 → An: you have to start nursing me and that is
 14 quite (1.2) quite like (.) too hard.
 15 Cl: and it is con- so >somehow it< is connected also
 16 to the fact tha- or I mean this feeling. . . .
 ((Cl continues by describing her recent feeling of depression))

In line 8, the client's narration has reached its climax and can be heard as completed. Through the metaphor of "cracking ground," and by shifting in present tense in line 8, she creates a strongly affective scene. The analyst responds first by three softly uttered yes/yeah tokens (variants of Finnish *joo*). Thereafter in lines 13–14, she adds, as an extension to the client's narration, a figure from the dream (you have to start nursing me) and then produces an assessment of this figure. These lines constitute a strong complaint which the analyst does on the client's behalf and through which she affiliates with the client. The inserted figure serves in recognizing once more the client's painful affect.

In Extract 4 above, the analyst's extension of the client's narration, by employing a figure originating from a dream, constituted an action whereby the analyst affiliated with the affect that the client had expressed in her narration. In Extract 5 below, the insertion of the figure from a dream does different kind of work. Here, as in a previous example, the insertion serves as a recognition of the client's affect; but in this case affect that the client has not brought about in his narration. In Extract 5, the client's initial dream was about a cow grabbing him in the neck and shaking him. After the client told the dream, the participants agreed that "cow" is a pejorative symbol for a woman. In the subsequent talk, the client describes a workplace meeting, with tension between the female and

² Material between @ signs displays a marked change in prosody.

male staff members. The client points out that during that tension he felt that he was allied with the women.

Extract 5 (tape recording).

(Cl telling about a workplace meeting)

- 01 Cl: mt .hhhh and somehow I sort of think so that the<
 02 the .hhhhhhhhhh ehhhh the hhh woman in me was
 03 then as it #were# (0.4) #somehow allied# (0.5)
 04 completely with< (.) with these women.=and and< and
 05 I understood the situation from their perspective
 06 then or felt it.
 07 (0.4)
 08 → An: mt .hhhh but at the same time a cow grabbed you
 09 in the neck and shoo- shook you.
 10 Cl: yes.
 11 (9.2)
 12 Cl: .hhhhhnfff #so (it comes)# >could you< >think that
 13 if one< takes as point of departure (the fact that) . . .
 ((Cl continues about the "female" and "male" side in himself))

After a point where the client's narration can be heard as complete, the analyst here, as in the preceding example, produces an extension in which he employs a figure originating in the dream (in this case, the grabbing cow). The extension accomplishes recognition of the negative affect between the client and the women in the meeting: the sensation of a cow grabbing and shaking one's neck is an unpleasant one, and the participants have also agreed that the cow refers to women in a pejorative way. However, unlike in preceding example, here the extension is not in line with the thrust of the client's preceding narration. In his story, the client felt at one with the women; the extension points out an uneasy relation between them. The client merely acknowledges the extension (line 10) without taking up the perspective suggested in it. In the subsequent discussion (data not shown) the analyst pursues – but no more successfully – his point about the unease in the relation between the women and the client.

So, it seems to me that figures originating in the client's dream, when inserted into extensions of narratives about out-of-the-dream reality, can be used to recognize the client's affects related to the events that are narrated. Lets consider Extract 6 as a further, and somewhat more complex, example. In the talk some time before this extract, the client recounted a dream in which an acquaintance ("Hanna") insists on moving into Cl's house, against her will. After the dream telling and some discussion on it, the client and the analyst have discussed the client's recent bereavement after the death of her partner ("Jussi"). The client has also reported

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another dream. In the segment that we will see, the figure of somebody moving by force into Cl's house is inserted into the description of Cl's current life situation after the death of her partner ("Jussi"). The dream is "retold" so that "(Jussi's) death" takes the place of "Hanna".

Extract 6 (tape recording).

- 1 An: .mhhhh So I d_o think that b_oth the d_reams
 2 are dealing with (0.3) Jussi's d_eath (0.6) and< of c_ourse
 3 its no wonder that they d_eal [with it.
 4 Cl: [Well h_ow would that apply to the
 5 dream about H_aнна then.
 6 (0.3)
 7 An: It has (0.3) h_appened a_gain to you that s_omebody has (.)
 8 .hhh t_aken something away from you (0.3) by f_orce.
 9 (2.4)
 10 Cl: er[m::
 11 An: [H- Hanna had as it were once a_gain entered into your
 12 l_ife .
 13 (0.4)
 14 Cl: In w_hich wa_y.
 15 → An: [In the shape of d_eath.
 16 (0.7)
 17 → Cl: So that she c_omes l_ives in my .hhh d_eath comes to l_ive
 18 → in my h_ome.
 19 (.)
 20 An: Y_es.
 21 (0.9)
 22 Cl: Y_es.
 23 → An: [J_ussi's d_eath l_ives now in your h_ome ,
 24 (0.5)
 25 Cl: Ye:ah it is<=
 26 An: =Even though you wouldn't e- in a_ny way want [that .
 27 Cl: [tch R_ight.
 28 (2.0)
 29 Cl: So that I fight (.) f_iercely (0.5) a_gainst that.
 30 (0.7)
 31 An: But nevertheless it c_omes.
 32 (2.0)
 33 Cl: Yes.
 34 (0.3)
 35 An: In a r_ude and a_rrogant [way .
 36 Cl: [.hhh Yeah,
 37 (2.2)
 38 Cl: M_aybe there is (something) () ()
 39 (4.0)
 40 Cl: Y_es but h_ow d- did you #c_onnect as it were m- my#
 41 m_other to that (2.0) so of c_ourse >I can say
 42 that. . . ((continues))

In lines 1–2, the analyst suggests that both dreams that the client has reported during the session are related to the recent death of her partner. In lines 4–5, the client challenges that interpretation regarding the dream about “Hanna” moving into her house. An exchange between Cl and An ensues (lines 7–15) which ends up with the analyst suggesting that Hanna has “once again entered” the client’s life, “in the shape of death.” The expression “in the shape of death” (line 15) invokes the strong negative affect associated to death. This interpretation of the dream is taken up by the client. In lines 17–18, she produces a formulation, or candidate understanding, of the analyst’s suggestion, narrating anew the key content of the dream, through a self repair substituting “death” for “she” initially referring to Hanna. The final version of the utterance, “death comes to live in my home,” emphasizes the negative affect by linking “death” and “home,” i.e. the ultimately fearsome and the ultimately safe. After a cycle of confirmatory “yes” / (Finnish *nii*) tokens, the analyst in line 23 rephrases the core narrative. By substituting “lives now” for “comes to live,” and by specifying “death” as “Jussi’s death,” the analyst may emphasize the actual presence of death in the client’s life and thus upgrade the affect. In line 25 the client initiates a sentence that seems to be aiming at a further description or evaluation, but cuts off and aborts her utterance. The analyst then expands his earlier description in line 26 by characterizing the client’s unwillingness to accept the situation; and this expansion is agreed on by the client in line 27. After a gap, the client in line 29 again produces a formulation, or candidate understanding, now regarding the analyst’s characterization of her attitude in line. The candidate understanding upgrades the affect through the words “fiercely” and “fight.” The description is yet again expanded by the analyst in line 31, and after the client’s agreement, still once again in line 35.

So, in Extract 6, there is a sequence where the participants collaboratively tell anew the core content of a dream reported earlier. The dream was about an acquaintance moving by force into the client’s house. In the retelling, the participants substitute an object from the client’s everyday life (“Jussi’s death”) for one element of the dream (“Hanna”). The participants do not orient to ideas about the client’s bereavement as something previously unknown (they had, indeed, discussed the bereavement shortly before), while the connection to these ideas to this particular dream is presented as novel understanding. The dream was used as a resource of description that made it possible to return once again to this bereavement, to recognize once again the client’s affects related to it. This recognition of affect was embodied particularly in the lexical choices of the collaboratively produced descriptions.

On the basis of the examination of sequences of dream discourse with linguistic features similar to those in Extracts 4–6, I would like to suggest

that sequences where figures of dream are inserted to descriptions of everyday reality are indeed one locus of affect in psychoanalytic discourse. In other words, they are sequences that allow for recognition affect, involving moments of mutual understanding (for example, in the affiliative scene in Extract 4) as well as moments where understanding is not achieved (for example, in Extract 5). But this is but one specific locus of affect – there is much work to be done in explicating the others.

Intersubjectivity

During the past decade or two, the concept of intersubjectivity has entered into the vocabulary of a number of psychoanalysts. Ideas associated with this term involve a major shift in the conceptualization of the psychoanalytic process: while it has traditionally been considered to be a process taking place within the client's mind, intersubjectivists consider it to be a process that involves not only two minds but, perhaps more importantly, something that these two minds create together, a process that cannot be traced back to the individual minds (see Streeck, 2001; Chapter 10, this volume). Ogden (1994), who is one of the leading proponents of this thinking, has given the name "analytic third" to this emergent extra-individual dimension of the analytic situation.

Stern (2004) defines intersubjectivity as "mutual penetration of minds" (p. 75), that is, the ability to experience what the other is experiencing (cf. Aron, 1991; Benjamin, 1990). This capability is neurologically and developmentally anchored in us, and Stern argues – in line with classical social psychological theory – that our sense of a differentiated self arises from the intersubjective. Like the development of the child's mind, the therapeutic process also occurs "in an ongoing intersubjective matrix" (Stern, 2004, p. 78). Stern also talks about short-lived moments of special complementarity of actions and understandings between the therapist and the client. Such "moments of meeting" are, according to Stern (2004) and his colleagues (Bruschweiler-Stern *et al.*, 2002; Stern *et al.*, 1998) of special importance in transforming the "implicit relational knowing" of the participants (see Streeck, Chapter 10 this volume).

Conversation analysis involves a particular, empirically grounded theory of intersubjectivity. According to Heritage (1984b) the sequential organization of talk is the key for the possibility of intersubjectivity: in each turn at talk, the speaker shows his or her understanding of the preceding speaker's actions and intentions (see also Lerner, 1991; Levinson, 2006; Schegloff, 1992).

Even though there is not a full match between the psychoanalytical and the conversation analytical concepts of intersubjectivity, we can use CA to

learn something more about intersubjectivity in therapeutic interaction. From the perspective of both CA and intersubjectively oriented psychoanalysis (as I understand these two traditions), “mind as experienced,” “mind as expressed,” and “mind as understood” cannot be strictly separated. In conversation analysis, what we have access to is expressions of mind and the ways in which these expressions are received and understood by the co-participants; and it is to that multifaceted field that I refer to below, when talking about “mind.”

In the final part of this chapter, I will look back at some of our examples, so as to examine once more the construction of intersubjective understandings in them. I will focus on the collaborative construction of description, i.e. segments of interaction in which the participants jointly, turn-by-turn, produce a description (cf. Ferrara, 1994; Vehviläinen, 2003a). In a way that I find intriguing, what might be called communion and divergence of minds seem to be quite tightly intertwined in these examples.

Let us first return to Extract 2. As we saw earlier, in lines 18–21, the analyst gives an interpretation linking the client’s experiences in her current bereavement, and her childhood experiences. He expands the interpretation twice. In lines 27 and 29, the client elaborates the interpretation by saying “just to dance and to sing.” Thereby, the client displays her understanding and acceptance of the analyst’s preceding interpretation. I think this can be considered as a point where the client’s and the analyst’s minds – as expressed and as responded to – come together in describing collaboratively the client’s childhood experience.

Segment of Extract 2 (tape recording).

- 18 An: .hhh I do think that it has (0.5) uh considerable
 19 dimensions that thing so that it .hhh again I would
 20 indeed connect it to your (0.4) childhood situations
 21 to these (.) gre[at sorrows.
 22 Cl: [Yeah: ,
 23 (0.3)
 24 An: When >you have the kind of< feeling that they must jus
 25 (0.4) be left behind right away.
 26 (0.5)
 27 Cl: ye[:s (just<)
 28 An: [One shouldn’t be drawn in[to grieving.
 29 Cl: [To dance and to sing.
 30 (.)
 31 An: Yes,
 32 Cl: So that others would be happy (.) and pleased with me.
 33 (.)
 34 An: Yes and you too would feel bet ter .
 35 (2.3)
 36 An: But there is the problem then that .hhh

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37 how much of that grief then goes completely un°grieved .
 38 Cl: Yes well: now at this moment so far there's not any
 39 .hhh .hhh KRÖHHHH (0.4) köh köh krhmm (0.4) mt .hhh
 40 great danger yet that I #would get rid of it#.

In and through the unfolding of a collaborative description, the minds of the participants remain together for a short while. The final point of the collaboration is in line 34 where the analyst, in extending the client's prior turn, shifts the perspective from the expectations of "others" to the dynamics of the client's own mind. This shift of perspective is met by the client's silence, and the collaborative production of description is halted. By now, it seems that the communion of minds, as incorporated in the sequential relations of the adjacent turns, is dissolved. The further two turns at talk confirm this divergence: the analyst produces an assessment of the client's attitude (lines 36–37), and the client declines the relevance of that assessment (38–39).

So, in terms of the mutual penetration of minds that Stern talks about, there is in Extract 2 a short "moment of meeting" which is followed by divergence of the perspectives displayed in the participants' talk. There is no evidence about a dramatic change in the participants' ways of relating to each other (cf. Stern, 2004, pp. 165–176). Rather, there is a brief moment where their perspectives touch one another after which they move along their divergent paths.

Also in Extract 6 shown earlier, the participants were involved in collaborative description, in this case telling anew the client's dream, with the key figure ("Hanna") substituted by "death." The client takes an active part in this collaborative production through her utterances in lines 17–18 and 29. Communion and divergence of minds are here even more inextricably intertwined than in the previous example.

Segment of Extract 6 (CA materials).

11 An: H- Hanna had as it were once again entered into your
 12 li fe .
 13 (0.4)
 14 Cl: In which wa [y.
 15 An: [In the shape of death.
 16 (0.7)
 17 Cl: So that she comes lives in my .hhh death comes to live
 18 in my home.
 19 (.)
 20 An: Yes.
 21 (0.9)
 22 Cl: Yes.
 23 An: [Jussi's death lives now in your ho me ,
 24 (0.5)
 25 Cl: Ye:ah it is<=

- 26 An: =Even though you wouldn't e- in any way want [that .
 27 Cl: [tch Right.
 28 (2.0)
 29 Cl: So that I fight (.) fiercely (0.5) against that.
 30 (0.7)
 31 An: But nevertheless it comes.
 32 (2.0)
 33 Cl: Yes.
 34 (0.3)
 35 An: In a rude and arrogant [way .
 36 Cl: [.hhh Yeah,
 37 (2.2)
 38Cl: Maybe there is (something) () ()

The client takes part in the joint production of the affective description of her painful situation in an ambiguous way: partly designing the descriptions as ones that arise from her own experience, and partly designing them as her understandings of the analyst's talk. I will first explicate the latter aspect. The client uses turn initial *Että* in both her utterances (lines 17 and 29). I have translated Finnish *että* as "So that." This turn beginning frames the ensuing utterances as the speaker's, i.e. the client's, understandings of what the other party was suggesting, not as her own suggestions. "So" alone – Finnish *siiis* – would tie the utterance more closely to the speaker's perspective, as would, in the case of the second formulation, the use of "and" or no turn initial particle at all. So, as a whole, the segment of talk extending from line 17 to line 36 is hearable as an insert sequence (Schegloff, 2007) through which the client establishes what the analyst means by "in the shape of death" in line 15. After the insertion, the client in line 38 takes stance to the analyst's initial statement.

Yet, the client does not at all employ all available means for portraying her talk as (just) a candidate understanding of what the other party has said. She doesn't preface her candidate understandings with any question components, such as "do you mean that?" She uses indicative, not conditional form (she says "death comes" and "I fight" instead of, for example, "death would come" or "I would fight"). She also upgrades the affect in her candidate understanding in line 29. And she produces, after all, *nii*-agreements at some key points respective to the analyst's talk.

The analyst, in turn, does not frame his extensions of descriptions (see especially lines 23 and 31) as clarifications of proposal that the client is striving to understand – which he could do for example by saying "I mean that" or "So," but rather, offers them as extensions to descriptions, the meaning or validity of which is not under question.

So, in a closer look, it appears that the client in Extract 6 is at the verge of fully subscribing to the affectively dense description of "death living in her

house,” but still withholds the final step. In other words, the claim of recognition of the client’s affective experience conveyed by the analyst’s utterances was not fully met by the client. Communion and divergence of minds were inextricably intertwined.

In Extracts 2 and 6, reexamined above, what at first sight appeared as an intersubjective moment of meeting turned out to be, on closer analysis, something where complementarity of actions and understandings between the client and the analyst is mingled with non-complementarity. I believe that these are not just odd, individual cases (for comparable patterns in clients’ responses to interpretations, see Peräkylä, 2005).

Further explication of the interactional ways in which the matching and mismatching, complementarity and non-complementarity of the therapist’s and the client’s actions takes place, is probably one of the central tasks of conversation analysts investigating psychotherapy. I believe that our method is sensitive enough for that task – much more sensitive than, for example, the psychoanalytic case reports based on clinical notes can ever be.

Conclusion

Conversation analytic research does not entail any theory of psychotherapeutic process. However, the observations presented above can be discussed in the context of such theories, and they may raise questions to them. In the contemporary models which seek to show the parallels between psychoanalysis and early interaction, the early interaction is described as consisting of phases of regulated affective interaction and phases of dysregulation, that is, phases of match and phases of mismatch between the child’s and the carer’s actions. The dysregulation and mismatch can involve, for example, the carer trying to make an infant continue to smile and play in such a moment when the infant turns her gaze away, wanting to withdraw. The analyses presented above hint towards the possibility that psychoanalytic interaction is more saturated by moments of mismatch than we are used to thinking. If that’s the case, then the task of psychoanalysis can be to work with these mismatches, again and again, so as to allow opportunities for the interactional, relational, cognitive, and affective patterns associated with them to be transformed. Occasionally, there may be genuine “moments of meeting,” but more often, we may find the communion and divergence of minds intertwined, as in Extracts 2 and 6. Mismatch between the analyst’s and the therapist’s actions need not be something that should be overcome, but it can also be a trigger of the growth of the client. In any case, it appears to me that conversation analysis has the potential to elucidate interactions that can be at the very heart of the talking cure (see also Streeck, Chapter 10, this volume).

Through the data analyses presented in this chapter I have wanted to convey the nation self-understanding. They studeed that psychoanalysis needs conversation analysis to enhance its self-understanding. The turn towards affective interaction and intersubjectivity in psychoanalytic theory has created new opportunities for the meeting between psychoanalysis and interaction research. Right now, CA can offer new ways for dealing with questions that arise from psychoanalytic theory and practice.