

# “As it’s our last exchange next time...”

## The closure initiation in email counseling\*

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### Abstract

This paper reports from an interpersonal pragmatics perspective on the negotiation of closure of the counseling process in five naturally occurring email counseling exchanges between one counselor and five different clients. I focus on three aspects: who initiates closure, in what form, and in which interpersonal context. A mixed methodology consisting of a discourse-analytic approach combined with a participant interview serves to examine the closure initiation from multiple perspectives. Results show that extensive collaborative work (e. g. relational strategies such as showing empathy or praising) is carried out to create a “closure-relevant” environment in which the initiation of closure can occur. The counselor, who initiates all five closures, tailors the initiation according to clients’ progress so far and elicits specific relational work (e. g. self-praise) from clients that aims to position them as active self-helpers. It is the collaborative work by counselor and clients that facilitates the closure initiation of the counseling process. The analysis of the collaborative work from an interpersonal pragmatics perspective provides further empirical evidence of the link between relational work and identity construction.

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### 1 Introduction

Over the past two decades, counselors have increasingly utilized the Internet to reach out to clients online (Jones/Stokes 2009: 3). The fact that a qualitatively good therapeutic alliance – i. e. “the collaborative bond between therapist<sup>[1]</sup> and patient” (Krupnick et al. 1996: 532) – benefits the outcome of counseling has led to various studies of the quality of the therapeutic alliance online, each of which has reported positive results (Cook 2002; Dunn 2012; Knaevelsrud/Maercker 2007; Kraus/Stricker/Speyer 2010). It is evident that the therapeutic alliance is a vital aspect of counseling and merits research from as wide a range of perspectives as possible. Interpersonal pragmatics concerns itself with the analysis of the “relation-

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\*\* At the request of the University of Basel, the affiliation is explicitly mentioned.

<sup>1</sup> According to the therapeutic approach followed in the counseling exchanges examined in this paper, I will refer to the interactants in counseling as counselor and client in the remainder of the paper.

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al/interpersonal [aspect] of interaction” (Locher 2015: 6) and is therefore an approach that is highly relevant for the study of the therapeutic alliance. Researchers in interpersonal pragmatics have, for example, highlighted how interactants dynamically work to create identities and negotiate relationships. Locher (2015: 8) further explains that such interpersonal dynamics can be observed at “crucial moments within the composition of [...] texts” in which “subtle negotiations of positionings [...]” are implemented. Regarding the special focus of closure pursued in this paper, I agree with Spilioti (2011: 68), who postulates that “the unavoidable end of a conversational encounter” is a “critical moment in interaction”. Spilioti (2011: 70) adds that “[c]losings have been associated with verbal strategies attending to the participants’ interpersonal relations”. The closure of the counseling process – by which I mean the ending of the entire counseling process rather than single-session closings that often consist of institutionalized farewell formulae such as *Take care* – is inherently linked to the relationship between the identities of the interactants. The goal of solution-focused brief therapy, which is the type of counseling conducted in the data for the present study, is to help the client move from an initial identity as advice-seeker towards an active self-helper. This is achieved through the interpersonal work the client and the counselor perform. With the present study, I aim to add to literature on closure (and closings) and to highlight the crucial aspect of how to bring the online counseling process to an end. I further aim to contribute to on-going empirical research in interpersonal pragmatics with regards to the link between identity construction and relational work, i. e. “the work people invest in negotiating their relationships in interaction” (Locher/Watts 2008: 78).

In a first step, I will familiarize the reader with the theoretical background of the study and present a brief literature review of previous research on the subject. This will establish the research niche that this paper aims to fill (Section 2). In Section 3, I will outline what type of data was used and what kind of methodology was chosen to best answer the research questions. The discussion section highlights how the closure initiation in email counseling is carried out from an interpersonal pragmatics perspective (see Section 4). Finally, I will present concluding remarks, including suggestions for further research.

## 2 Literature review

### 2.1 Interpersonal pragmatics

In the introduction to *Interpersonal Pragmatics*, Locher/Graham (2010: 2) state that “people adjust their language to their addressees and the situation in order to achieve interpersonal effects”. It is the “relational/interpersonal perspective” (Locher 2015: 6), and more precisely relational work and identity construction, that is focused on in this paper. According to Locher/Watts (2008: 96), relational work refers to “all aspects of the work invested by individuals in the construction, maintenance, reproduction and transformation of interpersonal relationships”. Previous studies have approached research on relational work in various ways. For example, some authors have focused on specific aspects of relational work (e. g. humor [Schnurr 2010] or mitigation [Schneider 2010]). Other studies have identified relational work strategies in specific practices (e. g. personal/diary blogs [Bolander 2013] or peer-to-peer support in forums [Rudolf von Rohr 2017]). Health discourse has been a valuable field for studies on relational work. For example, Locher (2006) identified a range of relational work

strategies, such as appealing, showing empathy, praising and boosting, which were carried out in an online health advice column. Lindholm (2010, 2017) analyzed how peers use narratives to offer support and show empathy on a parenting forum. And, specifically in a counseling context, Zayts/Schnurr (2013) reported on the use of relational work to accomplish non-directiveness in prenatal screenings in Hong Kong. These studies have identified relational work in use and have analyzed its effect from an empirical perspective.

The second interpersonal aspect that I focus on is identity. I approach identity from a constructionist perspective. In other words, I see identity as “a social, discursive, emergent and relational phenomenon” (Thurnherr/Rudolf von Rohr/Locher 2016). I follow Bucholtz/Hall’s (e. g. 2005) and Davies/Harré’s (1990) work. Bucholtz/Hall (2005: 587) view identity as “intersubjectively rather than individually produced and interactionally emergent rather than assigned in an a priori fashion”. Drawing on Davies/Harré’s (1990) discursive psychological approach to identity, they understand identity “as ‘the social positioning of self and other’” (Buchholtz/Hall 2005: 586). For Davies/Harré (1990: 48), “positioning [...] is the discursive process whereby selves are located in conversations”. Bucholtz/Hall (2005) and Davies/Harré (1990) thus clearly highlight the discursive construction of identity. Various studies on health discourse have taken on this perspective. Locher (2006), for example, specifically highlights how *Lucy*, the fictional advisor persona in an online advice column, is written “into being” by “the frequent mention of her name” (Locher 2006: 187). Further, her expert identity is created by, for example, displaying “a sense of humor”, providing “accurate information”, or using “an easily accessible, informal and inoffensive range of vocabulary” (Locher 2006: 184). Finally, Thurnherr/Rudolf von Rohr/Locher (2016) look at how narratives are used to construct credible and authentic advice-seeker and -giver identities in three online health practices.

Relational work and identity have been previously researched, but their link has been given special attention in the past few years and several authors have encouraged research to integrate the two approaches (Hall/Bucholtz 2013; Locher 2015). Locher (2015: 8) explicitly calls for studies “to combine the study of relational work with identity construction”. She previously stated that “there is a straightforward link between relational work and identity construction” (2013: 146), adding that “the work [people] invest, i. e. the choices they make in interaction in situ, is what we term relational work, and the result of their choices is identity construction”. The therapeutic alliance is highly important in counseling and the interactants actively work on their relationship to help move clients from a support-seeker towards an active self-helper identity. Counseling – be it face-to-face or online – serves as a salient practice in which interactants frequently employ relational work to construct specific identities.

## 2.2 Online counseling

Previous studies have looked at various aspects of face-to-face counseling from a linguistic perspective. Peräkylä et al. (2008) published an edited collection of conversation-analytic studies on topics such as formulations (Antaki 2008) or resistance (Bercelli/Rossano/Viaro 2008; Vehviläinen 2008). Other studies have focused on aspects of a specific approach to counseling or therapy (e. g. homework [Beckwith/Circhton 2014] or proposals [Ekberg/Lecouteur 2012] in Cognitive Behavioral Therapy), or on a specific psychological problem (e. g. the linguistic construction of suicidal help-seekers [Kupferberg/Gilat 2012] or psy-

chotic patients [Wynn/Rossano/Viaro 2009]). While Susan Danby and colleagues reported in 2009 that only a few studies on online counseling had been conducted so far, recent years have seen an increase in research focused on online counseling from a linguistic perspective. Several studies have researched the Web chat feature that the Australian counseling service *Kids Helpline* added in 2001: for example, Danby/Butler/Emmison (2009) compared opening sequences of online and telephone counseling, and Harris et al. (2012) focused on how counselors try to convince clients to switch from email to telephone counseling. Ekberg et al. (2013) examined online treatment of depression with Cognitive Behavioral Therapy (CBT), focusing on specific aspects of CBT. Ramanathan (2015) studied narratives on blogs by people suffering from Post-Traumatic Stress Disorder, highlighting the “therapeutic” aspect of reporting on psychological disorders. Further, Stommel (2012), Stommel/van der Houwen (2013/2014), Stommel/te Molder (2015), and Jager/Stommel (2017) have utilized a conversation-analytic approach to examine various aspects of online counseling, such as closings (Stommel 2012) and preclosings (Stommel/te Molder 2015) or metacommunication to account for interactional trouble (Jager/Stommel 2017).

### 2.3 From closings and preclosings to the initiation of closure

Closings and preclosings have been previously researched in interaction. In the medical context, research focused first on closings and later turned to preclosings. To situate my study, I will briefly discuss both types in the health and mental health context. Closings have been researched in face-to-face (see e. g. Broth/Mondada 2013; Button 1987; Mondada 2006/2009; Schegloff/Sacks 1973) as well as online contexts (see e. g. Raclaw 2008; Spilioti 2011). In the health context, White/Levinson/Roter (1994) and White et al. (1997) focused on establishing how closings in medical encounters can be effectively executed from a practitioner perspective. Robinson (2001) looked at two types of preclosing sequences in medical encounters to examine whether they allowed clients to express their full agenda of concerns. West (2006: 392–395) identified specific types of preclosings used by physicians: “announcement of closure”, foregrounding “the work of doctoring”, questions such as “anything else”, and by “making arrangements”. All four studies highlight the collaborative work that needs to be carried out for closings to take effect in the medical context.

There has been considerably less research on closings in online health encounters and online counseling. Stommel (2012) highlighted the counselor’s recipient design in constructing closings, and Stommel/te Molder (2015) examined preclosings used by counselors in online chat counseling. While they argue that closings are an epistemic right reserved for the caller, i. e. the clients, counselors routinely make use of preclosings. These authors identified three types of preclosings: 1) “questions projecting the client’s future action”, 2) “elicitations of direct advice acknowledgement”, and 3) “offers of a new advice sequence” (2015: 287). In all three cases, counselors aim to account for the clients’ epistemic right to close the counseling.

Four salient aspects need to be kept in mind with respect to how the present study fits in with previous research on (pre)closings in health contexts: first, despite the fact that previous studies are concerned with health encounters in which one health professional supports a lay patient/client, the present study is specifically concerned with mental health and counseling rather than physical health and medical encounters. Second, previous literature on closings in

(mental) health encounters, apart from Stommel (2012) and Stommel/te Molder (2015), focused on face-to-face interaction. Third, the counseling exchanges analyzed in the present paper are multiple-session exchanges rather than single sessions or single encounters. Fourth, previous studies, except for White/Levinson/Roter (1994) and White et al. (1997),<sup>2</sup> used a conversation-analytic perspective to closely look at organizational and turn-taking aspects of (pre)closings. My study aims to complement the insights garnered in previous research by focusing from an interpersonal pragmatics perspective on the closure of online counseling conducted over the course of multiple sessions. I aim to shed light on interpersonal requirements, accomplishments, or effects (such as eliciting an expression of gratitude towards the advice-giver) that are linked to the closure of the counseling exchanges. Special attention is given to the initiation of the closure of the counseling process, i. e. the point at which the ending of the counseling process is first introduced. The following research questions are of interest here:

1. Who initiates the closure of the counseling process?
2. In what way is the closure initiated?
3. Are there specific interpersonal patterns occurring before, during, and after the initiation?

In the following section, I describe the data and methodology I use to answer these research questions before I go on to present and discuss the results in Section 4.

### 3 Data and methodology

The primary data for the present study are five naturally occurring email exchanges obtained from a counseling service at a British university. The counseling service aims to support clients in developing coping techniques to deal with such diverse themes as depression, anxiety, stress, or relationship issues. Face-to-face and online counseling (in various mediums) is offered, and clients can freely choose which type they would prefer. The service provides short-term therapy.<sup>3</sup> Email counseling consists of exchanging messages between client and counselor without ever meeting face-to-face. The short-term format translates to six to twelve emails (one session always consists of a client email and the response email by the counselor). As a written and asynchronous medium, email allows the counselor and client to send the content back and forth in one-to-one and private messages (Herring 2007). The counseling service updated their online services during the data collection phase, and two varying types of email counseling are analyzed in the present study: 1) the content of the counseling is written in the body of the emails, and 2) the content of the counseling is written in a password protected word document that is attached to the emails. While there are five clients (Anna, Ellie, Chris, Mel, and Taylor<sup>4</sup>), the same counselor responded to all of them. The corpus comprises five threads of email-counseling exchanges, a thread being defined here as “a series of chained e-

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<sup>2</sup> White/Levinson/Roter (1994) and White et al. (1997) only elaborate on the way they achieved agreement of coders, but do not explicitly state what type of analysis they used. However, White et al. (1997) name the professions of the coders (two general internists, a clinical psychologist, and a communications professor) and indicate that they most likely applied, on the one hand, a practitioner approach, and, on the other, a communication-analysis approach.

<sup>3</sup> Despite the fact that the data come from counseling, I refer here to short-term therapy as this is how the approach is correctly termed. The counseling service and the counselor refer to it in the same way.

<sup>4</sup> These are pseudonyms I have given the five clients for ease of reading.

mail exchanges between a counselor and a client over an extended timeframe” (Harris et al. 2012: 25). Each thread in my corpus contains ten to twelve emails (57 emails in total), resulting in approximately 52,000 words. To account for the fact that for some clients, the content of the counseling was sent in a word document rather than in the body of the email, for the remainder of this paper I will talk about individual entries rather than emails that make up a client’s thread. Thus, there are 57 entries in total in my corpus, and one session always contains two entries (a client entry and the response entry by the counselor). The counselor is a senior accredited member of the British Association of Counseling and Therapy (BACP), has received training in online counseling, and has worked as a counselor for more than two decades.

For the present study, the focus lies on the initiation of the closure in email counseling. This raises the question of how the initiation can be located in the data. I have identified specific metacomments the counselor uses that initiate this process. These metacomments are connected to the notion of short-term therapy in two ways. In four threads, the metacomments reference a final upcoming session. In the fifth case, the counselor explicitly reminds the client that the service provides short-term therapy. These metacomments can be interpreted as pivots that aim to raise clients’ awareness that the counseling will likely come to an end in the (near) future. In my analysis, I explore how the previous interaction influences what type of metacomment is utilized and how these metacomments can be used to create specific interpersonal effects, and then I give a brief overview of the interaction that unfolds after the metacomments.

The secondary data for the study consist of a Skype interview with the counselor who provided the primary data.<sup>5</sup> The purpose of the interview is to “include [the counselor’s] perspective in the analysis” in order to allow her to “share impressions, expectations and so on about the interaction” (Pick 2011: 74). Following Angouri’s (2010: 34) differentiation of triangulation according to research phases, the triangulation of the data through the interview mainly facilitates the analysis phase of my research. In the interview, the counselor was familiarized with a selection of findings and was asked to elaborate on her interpretation of these findings and the data that they are based on. For the present study, for example, I explained the findings that specifically concern the initiation of the closure and asked the counselor to comment on them. I then presented her with the types of metacomments she used to initiate the closure and asked her to interpret them from her perspective.

The mixed methodology<sup>6</sup> of using primary and secondary data (the actual exchanges and then the practitioner interview) allows me to gain as broad an understanding of the practice as possible. My research is informed through the findings of the conversation-analytic studies previously mentioned. The discourse-analytic approach allows me to tackle the closure of the counseling process from a different perspective. In other words, while conversation-analytic studies have shown how (pre)closings can be executed from an organizational turn-taking perspective, the discourse-analytic approach allows me to consider the interpersonal pragmat-

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<sup>5</sup> I abstained from client interviews to further protect the clients’ anonymity.

<sup>6</sup> In the broader project, which was part of the Swiss National Science Foundation-project *Language and Health Online*, I also include a content analysis. Due to space, the results of this analysis are not explicitly mentioned in this paper.

ic aspects surrounding the closure of the counseling process. After having identified specific metacomments, I conducted close readings of the contexts before and after them. I specifically focused on finding relational strategies and positionings that were used in these contexts and seem to influence or are influenced by the choice of metacomments. In the discussion section, I will elaborate in more detail on the context that leads up to the metacomments. In this article, due to limitations of space, I will only briefly discuss the interaction that develops after the metacomments. Throughout the discussion of the metacomments (Section 4) and their context, I will selectively draw on the interview data mentioned above to include the counselor's interpretations of the process of exiting the counseling.

Studies of online and counseling data pose ethical dilemmas for researchers (see e. g. Bolland/Locher 2013; Pick 2011). Several ethical steps were carefully considered. These were adhered to during data collection, the analysis process, and the publication of results. For example, due to the "private" aspect of the medium and the "sensitive" (McKee/Porter 2009: 21) nature of the content, I opted to gain retrospective informed consent for two reasons: to avoid the observer's paradox and to safeguard the counseling process itself by not being "present" in the interaction before the counseling was resolved. Additionally, the counselor contacted clients with my request to gain access to their exchanges to further safeguard clients' anonymity. The counselor proceeded to anonymize the exchanges, ensuring no identification markers would be present in the data.

#### **4 Results**

My analysis revealed that, in all five threads, it is the counselor who initiates the closure of the counseling process. While Stommel/te Molder (2015) and Jager/Stommel (2017) argue that the epistemic right to close a session of chat counseling lies with clients, they also align with previous studies on medical encounters (Robinson 2001; West 2006; White/Levinson/Roter 1994; White et al. 1997), which show that professionals can initiate closures through specific linguistic choices. The counselor in the present multiple-session exchanges uses metacomments to raise the client's awareness that a final session (or several, in one case) will serve to conclude the counseling process. She does so by using metacomments that evoke the agreed-upon short-term therapy that is offered by the service. These metacomments always occur at the very end of a specific entry before the counselor signs off with a closing (e. g. with a farewell formula and signing her name). I differentiate between three types of such metacomments in my data: 1) announcing a last session: the counselor comments in an entry that the next session will be the last one; 2) inquiring about a last session: the counselor inquires whether one more session is enough or necessary; and 3) inquiring to take stock: the counselor asks the client to take stock by providing reports on progress and sharing troubles they would like to continue to work on. Importantly, the type of metacomment the counselor uses is not random, but rather depends on discursive work that has been carried out previously by both the client and the counselor. After being presented with the data for the present study in the interview, the counselor elaborates on her linguistic choices:

Some people might not need all sessions and I get a sense of that with some clients. Like the one where I said 'would you like another one', I probably had a sense 'actually they're really making good progress and they're identifying changes'. So I was inviting them to make that

choice rather than assuming that they would go on. And the other ones I could see they will take all the sessions that are available and so I kept going.

(interview)

The counselor points to her sense of recognizing that some clients have progressed well and that a client's identity has possibly moved from an initial advice-seeker towards an active self-helper. In each thread, the interactants perform significant identity work<sup>7</sup> using various relational strategies before, during, and after the metacomments are presented by the counselor. In the following three sections, I will first briefly introduce what type of metacomment is used, mention in which client threads they occur, and explain where in these threads they are located. Secondly, I will highlight how the collaborative interpersonal work unfolds before each type of metacomment. In a third step, I will explain in more detail how the counselor initiates the closure through the metacomment. Finally, I will discuss how clients react towards the metacomments before briefly summarizing when and how the interactions are closed (due to space, I cannot elaborate on the actual closings). The discussion of each metacomment aims to describe how their use is motivated by the previous interpersonal work that has been carried out. While I will present each type of metacomment separately, I will comment on similarities and differences between them throughout Sections 4.1–4.3 and in the concluding section.

#### 4.1 Discussion of metacomment type *announcing a last session*

The first type of metacomment, namely when the counselor announces that the next session will be the final one, seems to indicate that the counselor exerts control over the closure and simply decides that it is time to resolve the counseling process. However, a close analysis of the preceding context reveals that the interactants collaboratively work to allow the counselor to use this specific type of metacomment. In my corpus, the counselor uses this type of metacomment in Mel's and Ellie's cases. Table 1 shows in which entry the metacomment occurs and how many entries there are in total in each thread. In both threads, the interaction continues for one more session after the entry containing the metacomment. In other words, one entry by the client and a response by the counselor follows entry 8 in Ellie's case and entry 10 in Mel's case.

	Ellie	Mel
Specific entry containing metacomment	8	10
Total number of entries in thread	10	12

**Table 1: Location of metacomment according to total number of entries (Mel and Ellie's threads)**

Ellie (in entry 7) and Mel (in entry 9) employ specific relational strategies in the entries that immediately precede the counselor's entries containing the metacomments. For example, the clients self-praise to position themselves as successful applicers of previously discussed coping techniques and as active self-helpers. They thus show their improved well-being overall. In contrast to single-session health encounters (e. g. Stommel/te Molder 2015; West 2006), both clients not only acknowledge advice, but importantly show that they have complied with

<sup>7</sup> While I point out how the counselor is positioned in the interaction in salient occasions, due to space, I mainly focus in this paper on how the clients are positioned by themselves or by the counselor. Importantly, I do not wish to imply that the counselor's identity is less important than the clients' in the interaction.



and successfully applied advice. Ellie, for example, reports on how she successfully applied the counselor’s advice to use a *worry book* to destress before going to sleep:

(1) Ellie (Thread: Ellie; Entry 7)

I have started writing down things on my mind in a ‘worry book’ which has been really helpful. I find that if I have written my worries down then I can stop thinking about them as much and try to focus on other matters instead. I have found that my sleeping pattern has started to become a bit better [...].

Ellie self-praises by “announc[ing her] accomplishment” (Dayter 2014: 92) and boosts (*really helpful*) the effect it has on her well-being. She thereby positions herself as a successful applicer of the suggested coping technique. Since the advice was given by the counselor, Ellie’s self-praise enhances not only her own but also the counselor’s face. By doing so, she positions the counselor as a successful advice-giver.

Clients further position themselves as active self-helpers by providing their own action plans for specific situations. Mel, feeling a certain degree of trepidation about moving to a smaller apartment with her boyfriend, provides the following action plan in entry 9:

(2) Mel (Thread: Mel; Entry 9)

The house has a separate log cabin with a wood-burning stove (and some electric heaters for a quick fix!) so that could be somewhere to go that wouldn’t be too uncomfortable. I thought we could maybe arrange for each of us to have ‘alone time’ in the house [...].

By providing a solution to a specific problem, Mel positions herself as an active self-helper. Throughout Ellie’s entry 7 and Mel’s entry 9, they continually position themselves as experts on coping techniques and active self-helpers via specific relational work, such as self-praising and boosting, or specific “tasks” such as action plans. Ellie uses these interpersonal strategies especially frequently, whereas Mel still mitigates her improvement at times.

In entry 8 in Ellie’s thread and entry 10 in Mel’s thread, the counselor first responds by assessing the clients’ self-praise and progress positively. She praises their successful applications of coping techniques and action plans and affirms their positionings as active self-helpers. After having responded to each text passage the clients wrote in the preceding entries (Ellie’s entry 7 and Mel’s entry 9), the counselor adds a final paragraph before the meta-comment and farewell (towards the end of entry 8 in Ellie’s case and entry 10 in Mel’s case). In these paragraphs, she affirms the clients’ overall improvement and urges them to continue to progress:

(3) Counselor (Thread: Ellie; Entry 8)

It is really good to hear how much more positive you sound Ellie. Keep on doing what you have been doing, and see how you get on with the suggestions I have made today.

(4) Counselor (Thread: Mel; Entry 10)

I can hear how you are continuing to make progress Mel, and are slowly becoming more assertive and recognising more fully that your needs are important and deserve nurturing more! You are clearly working hard to think and focus more positively, and while it is difficult at times, you are able to do this! 😊

The counselor foregrounds the clients' improved well-being by praising their progress and improved attitudes. The counselor further specifically boosts the positive aspects she outlines through lexical items (*how much more positive, clearly working hard, more positively*) and the smiley emoticon that indicates a positive emotion (Dresner/Herring 2010: 256). Locher (2006: 139) reported on how *Lucy* praises "an advice-seeker's attitude or action [as] positive". While throughout the entries the counselor previously praised such specific actions as applying coping techniques (not shown here), in these final paragraphs she focuses on praising the clients' overall improvement (shown in examples (3) and (4)). As the counselor elaborates in the interview, she uses "that final paragraph [to] do some affirming". Importantly, both clients are positioned as the agents of the overall progress. The metacomments initiating the closure only occur after these final paragraphs and are discussed below.

The collaborative interpersonal work carried out so far consists of the clients' self-praise and positioning as active self-helpers and experts on coping techniques as well as the counselor's numerous affirmations through praise and thereby reinforcements of the clients' own positioning. This work allows the counselor to introduce the closure of the counseling process. Following the affirming text passages presented in examples (3) and (4), the counselor immediately proceeds to make the metacomments shown in (5) and (6):

(5) Counselor (Thread: Ellie; Entry 8)

I've booked you in a final slot, when I will reply to your response to this email on [DATE].

(6) Counselor (Thread: Mel; Entry 10)

As it's our last exchange next time, it would be useful if you thought about how things have changed since you first contacted me, what you have done differently to help yourself move forward, and what will help you to keep on building on these changes. On a scale of 0 (life couldn't be worse) to 10 (everything is sorted, and you feel calm and in control, in a good way!) where are you?

Both (5) and (6) show that the counselor simply announces a final session. At first sight, this seems to run counter to previous findings that the epistemic right to close counseling lies with the clients. However, the interpersonal work carried out by both the clients and the counselor lays the ground for the counselor's metacomment here. Since the aim of counseling is to improve clients' well-being, the clients' account of such improved well-being indicates that the aim has been achieved. As I mentioned above, Mel mitigated her achievement in subtle ways. The counselor takes this into account: she further requests Mel to reflect on her achieved progress. In doing so, she positions Mel as a competent observer of her own behavior. She further uses a scaling question to inquire about Mel's well-being, a task routinely carried out in solution-focused brief therapy (Kim 2008: 108). The question aims to elicit a response that contains explicit acknowledgement of improvement. The counselor mentions in the interview:

In the penultimate session, I invite clients to reflect and I ask them scaling questions. I'm inviting them to consider and then to prepare for next time 'what's changed, how have you changed?'

(interview)

By inviting clients to share how they have changed, the counselor tries to elicit specific relational work. The scaling question can be seen as the equivalent of Stommel/te Molder's

(2015: 287) "elicitation of direct advice acknowledgement". Since email counseling consists of multiple sessions, acknowledgement of improvement, rather than advice, is necessary here.

Ellie (in entry 9) and Mel (in entry 11) answer the counselor's input by further praising their progress and positioning themselves as active self-helpers in their responses. Neither explicitly confirms or protests that this session is the final one (entry 9 in Ellie's thread and entry 11 in Mel's thread are the first entries of the final sessions, see Table 1). They rather comment on the counselor's affirmation of their progress:

(7) Ellie (Thread: Ellie; Entry 9)

I am feeling really positive at the moment and hope that things keep improving the ways they have been [...]!

Thank you for all your help and ideas, I can see a massive improvement in myself and have had comments from friends and people around me that I am looking really well which has boosted my confidence also.

(8) Mel (Thread: Mel; Entry 11)

I do feel more positive since I first contacted you. I don't feel 'fixed' (if you see what I mean!) because there hasn't been enough time but the advice you have given me will enable me to cope with things much better than I had been previously and that this will improve over time. [...] I think I'm between 6 and 7 on the scale at the moment but I'm aiming for it to get higher as I work on your suggestions!

A massive thank you for all your help! ☺

Both clients confirm that they continue to progress through lexical choice (*keep improving, feel more positive*) and tense (*they have been, will improve, I'm aiming*). They indicate that they have moved away from their initial identities as advice-seekers. Both clients indicate some trepidation about the upcoming closure of the counseling process, however. In (12), Ellie does not position herself as the agent of change (*things keep improving*), and, in (13), Mel foregrounds several times that she still needs and wants to progress further (*will enable me*). Mel also answers the scaling question without further explanation of her rating and a comparison to future rather than achieved improvement. Both clients clearly position the counselor as the source of the support they received. The clients explicitly thank the counselor for *all [her] help* and Mel adds a smiley emoticon that indicates a positive emotion (Dresner/Herring 2010: 258). Mel highlights the counselor's identity as advice-giver multiple times (*the advice you have given me, your suggestions*). These thank-you messages can be interpreted as agreement with the fact that these entries are part of a final session and can function as closing moves. The counselor responds to both clients with one last email (entry 10 for Ellie's thread and entry 12 for Mel's thread) in which she further assesses and affirms their progress through praise and boosting and uses both preclosing and closing devices to execute the closure (due to space, I cannot show this here).

#### 4.2 Discussion of metacomment type *inquiring about a last session*

The second type of metacomment I discuss is when the counselor inquires about a last session rather than announcing it. In these metacomments, the clients are positioned as collaborative decision-makers. In Table 2, the specific entry containing the metacomment is listed for the two clients' threads in which this type of metacomment occurs, namely Chris' and Anna's.

Further, the total number of entries in each thread indicates how many more entries occur afterwards. In Chris's case, the metacomment is introduced in entry 8 and leads to two more entries, equaling the counselor's suggestion of one final session (as previously mentioned, one session equals two entries). Anna and the counselor's interaction continues for five more entries after the metacomment is introduced in entry 6. They wrap up the content of the counseling in entry 10. The thread runs until entry 11, but entry 11 only contains Anna's consent that her thread could be used in my research, rather than actual counseling content. In the threads of the other four clients, informed consent was gained with a separate email exchange and was not included in the exchanges that are researched here. In other words, Anna and the counselor utilize four more entries (equaling two more sessions) after the counselor's metacomment.

	Chris	Anna
Specific entry containing metacomment	8	6
Total number of entries in thread	10	11

**Table 2: Location of metacomment according to total number of entries (Chris and Anna's threads)**

I argue that the specific relational work performed in the interaction previous to entry 8 in Chris' and entry 6 in Anna's thread can explain the counselor's choice of metacomment. Chris and Anna praise their progress in the entries prior to the ones containing the inquiry about a last session. However, they mitigate their self-praise more explicitly than Ellie and Mel, and they appeal for further support (for appealing, see Locher 2006: 228). They do so by only acknowledging advice rather than reporting on its successful application. Example (9) shows how Anna reports on advice she was given concerning unhelpful thinking patterns. She was invited to identify such patterns and report on the coping technique that aims to help her focus on more positive thoughts (the counselor's advice is not shown in the example):

(9) Anna (Thread: Anna; Entry 5)

Yeah, they almost always start with "what if". [...] I definitely tend to "predict the future" a lot, even if what I'm thinking is irrational, I convince myself that it's going to happen. I do this a lot, with small every day things, like checking my emails.

By characterizing her unhelpful thoughts but not reporting on the application of a coping technique, Anna appeals to the counselor for support and positions herself as advice-seeker. Additionally, Chris and Anna position themselves rather explicitly as advice-seekers towards the end of the entries (entry 7 in Chris' thread and entry 5 in Anna's thread) that occur immediately before the counselor's entries that contain the metacomment. Example (10) shows Chris' final paragraph of entry 7 (the counselor's metacomment about a final session occurs in entry 8 in Chris' thread):

(10) Chris (Thread: Chris; Entry 7)

I have been struggling quite a lot over the last couple of weeks [...]. I've been trying the different techniques that we've discussed previously and I think they've helped me a bit, but I just need to give it some time before this rough patch is over. Mainly just the 'worthless' feelings again, not so much the anxiety. Fingers crossed it will pass with time.

Chris explicitly reports on his struggles, even using a booster (*quite a lot*), and positions himself as advice-seeker. The fact that these interpersonal aspects occur in the final paragraph emphasizes his appeal, as the final paragraph is often used to summarize the client's current state of well-being.

The counselor responds to the clients' interpersonal work in entry 6 in Anna's thread and entry 8 in Chris' thread. She first provides feedback to the clients' input before adding an affirming message at the end of the specific entries. After the affirming messages, the counselor introduces the metacomments that initiate the closure. I will go through these three steps in chronological order here. First, the counselor takes up the clients' limited amount of reporting on progress and their positioning as advice-seekers. By reformulating and normalizing the clients' persistent troubles, the counselor displays empathy towards the clients, thereby further emphasizing the advice-seeking identities of the clients (Locher 2006: 133). The counselor often proceeds to give additional advice and requests clients to provide her with more information, which can prolong the interaction as further input is exchanged. Both activities (to give additional advice and to request more information) foreground the advice-giving identity of the counselor and the advice-seeking identities of the clients. However, the counselor's requests for further information also invite clients to share success stories and to report on progress. The counselor thereby provides clients with future opportunities to self-praise. Secondly, and similar to the generally affirming text passages that occur immediately before the announcement of the last session in Ellie's and Mel's cases, the counselor writes a final overall affirmation right before the metacomments in entry 8 in Chris' and entry 6 in Anna's threads:

(11) Counselor (Thread: Chris; Entry 8)

I can hear how much better you are doing [...]!<sup>8</sup>

(12) Counselor (Thread: Anna; Entry 6)

That's really good to hear Anna - keep on doing these things, they're working!

In both cases, the counselor praises the clients with the help of boosters (*how much better, really good*) and positions them as having improved.

The collaborative work has highlighted the partial progress the clients have made. The clients' mix of appealing and self-praising resulted in the counselor not only praising and boosting the clients' progress, but also showing empathy and giving further advice. The counselor's relational strategies position clients both as successful and as not yet successful self-helpers. Following the affirming text messages, the counselor uses the metacomments to inquire about one more session as a pivot to include the clients in the decision-making about the closure of the interaction:

(13) Counselor (Thread: Chris; Entry 8)

[...] and I'm wondering whether one final session to summarise and review your progress will be sufficient for now? [...]

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<sup>8</sup> In Chris' case, the affirming statement is in fact one part of a two-clause sentence that continues with the metacomment about a final session (example 13).

## (14) Counselor (Thread: Anna; Entry 6)

Please let me know by next Wednesday of<sup>9</sup> [sic] you would like another email exchange [...].

By linking her inquiry with a specific task that she wants Chris to accomplish – *to summarise and review* [his] *progress* – the counselor positions Chris as an astute observer of his own behavior and a vital participant in the therapeutic alliance. While the counselor asks for the client’s opinion in both cases, Chris’ example indicates that he might not be ready to stop immediately yet, as the counselor indicates through her lexical choice (*sufficient*). The counselor leaves it up to Anna to decide whether she *would like another* [...] *exchange*. Nevertheless, in both cases the clients are asked to contribute to making the arrangement and are positioned as participating decision-makers. At first sight, these inquiries might loosely resemble Stommel/te Molder’s (2015: 287) “offers of a new advice sequence”. However, inquiring about a further session does not necessarily result in new advice and aims at different interpersonal effects, such as clients’ self-praise.

The clients’ responses to the metacomments are similar to those by Ellie and Mel discussed in Section 4.1. The responses to the metacomments discussed in this section are shown in example (15) for Chris and (16) for Anna. The clients report on progress by self-praising and position themselves as experts on specific coping techniques and active self-helpers. Nevertheless, there is one notable difference to Ellie’s and Mel’s responses, as Chris and Anna both explicitly reply to the counselor’s inquiry about a final session:

## (15) Chris (Thread: Chris; Entry 9)

I think this counseling has definitely helped me since I first contacted you, and I would be comfortable with only one more session. The techniques that you have suggested have helped me gain more control over my difficulties and see them for what they are. [...]

## (16) Anna (Thread: Anna; Entry 7)

I think maybe having another appointment at the end of the month or in early [MONTH] would be helpful, but only if you've got a free slot. Maybe just to talk about anything that may come up.

Chris acknowledges the helpfulness of counseling before he confirms that *one more session* is enough. He backs up his claim by stating that the coping techniques have helped him. While Chris’ explanation praises his progress, and thereby positions him as an expert of the coping techniques, Anna mitigates her progress when she confirms she would like another session. The counselor’s specific phrasing of the metacomments that inquire about a last session influences the clients’ ease of self-praising and positionings as active self-helpers. Since the metacomment in Chris’ thread invites him to agree that one more session is enough, Chris can position himself as an active self-helper, because one more session is suggested anyway. Anna, on the other hand, is asked whether she needs another session. She positions herself as still needing further support so that she can legitimize her agreement to need one more session. While this difference is subtle, it influences the specific interpersonal work that is carried out

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<sup>9</sup> I did not correct any spelling or grammar in the examples of the primary data.

by the clients. This becomes even clearer in Anna’s response to the counselor’s metacomment, as Anna writes a thank you message after agreeing that one more session is needed:

(17) Anna (Thread: Anna; Entry 7)

Thank you for all your help, having online counselling has made much more of a difference than I thought it would, so now I know where I can turn when and if these problems affect me again. [...]

Anna points out how *much* [...] *of a difference* the counseling made and thereby implies progress. The thank-you message thereby also emphasizes the counselor’s advice-giving identity and can be seen as a response to the metacomment that initiates the closure of the counseling process.

The counselor presented the metacomment in entry 8 in Chris’ thread and entry 6 in Anna’s thread. Chris agrees with the metacomment in entry 9. As I mentioned at the beginning of this section, Chris’ interaction with the counselor concludes after exchange 10. In other words, Chris and the counselor used the proposed final session to conclude the counseling process. Anna confirms that she does need another session in entry 7. The interaction between Anna and the counselor continues until entry 10 (entry 11 contains the consent agreement for the research). Hence, Anna and the counselor conduct two more sessions after the counselor’s metacomment. Due to the asynchronous nature of email, the agreement on a last session (or two in Anna’s case) takes place over two sessions: the penultimate (containing the counselor’s metacomment) and the ultimate session (containing the agreement of the clients). As one session always consists of a client entry and the responding counselor entry, this means that the metacomments are written in session 4 in Chris’ thread and session 3 in Anna’s thread. The clients agree to the counselor’s suggestions in session 5 (Chris) and session 4 (Anna). The fact that the agreement on the final session spans two sessions can be interpreted as a characteristic of email counseling.

Throughout this and the previous section, I have demonstrated how dynamic collaborative work leads to the introduction of the metacomments about a possible final session. The clients’ specific use of self-praising and appealing for further support influences the counselor’s choice of metacomments. Especially when clients’ position themselves as at least still partly in need of support, the counselor mitigates the metacomments that initiate the closure. The mitigation is carried out by the counselor’s choice to inquire about rather than announce a final session. It has become clear that advice acknowledgements alone, which occurred in all four clients’ text passages, were not enough to allow the use of a metacomment that announces a last session. This distinguishes the present practice from those previously studied (Heritage/Lindström 2012; Stommel/te Molder 2015; West 2006). I argue that the multiple sessions of email counseling and the time-frame between the individual sessions foregrounds the improvement of well-being rather than advice-giving and its acknowledgement. When asked about how she responds to clients who do not include reports on progress and success stories, the counselor elaborates in the interview:

If they just do a general ‘oh I’ve improved’, I’ll ask them to tell me how they’ve improved, what changes they’ve noticed, what’s different, and how they’ve noticed all of these aspects. Reporting on these aspects cements their progress. If they’re writing it and see it written down, it’s gonna cement it for them. [...] That’s really important to moving forward, to really recog-

nize and take on board and affirm what those changes are. [...] So I'm really inviting them to elaborate.

(interview)

Throughout a client's thread as well as through the metacomment more specifically, the counselor aims to elicit face-enhancing strategies from the client that aim to enhance the client's face. The counselor provides opportunities for clients to position themselves as active self-helpers. However, this becomes intricately more difficult if a client has not progressed enough to be ready to exit the counseling process. The third type of metacomment – inquiring to take stock – deals with such a situation and its interpersonal aspects are discussed in the next section.

### 4.3 Discussion of metacomment type *inquiring to take stock*

Whereas the previously discussed metacomments mentioned one final session only, the counselor proposes several more sessions in Taylor's thread. Table 3 shows in which specific entry the metacomment occurs (entry 8), and how many entries there are in total. In other words, four more entries, i. e. two sessions, occur in Taylor's thread after the metacomment is introduced in entry 8.

	Taylor
Specific entry containing metacomment	8
Total number of entries in thread	12

**Table 3: Location of metacomment according to total number of entries (Taylor's thread)**

Before the counselor's metacomment at the end of entry 8, Taylor and the counselor employ extensive relational work to position Taylor as an advice-seeker who is not ready to end the counseling process yet. In entry 7, for example, Taylor reports on her difficulties. She only minimally acknowledges some advice, while not responding to other advice or requests at all (not shown here). At the end of entry 7, she reports on new difficulties she has encountered:

(18) Taylor (Thread: Taylor; Entry 7)

So this is the new bit:

So I guess most the time I feel blank, I postpone going to work then I postpone leaving work. I feel blank, add I feel sad at times, I spend my time playing video games to distract myself. [...]

Taylor clearly appeals for further support through her description of her persistent negative feelings and therefore positions herself as an advice-seeker. Her only acknowledgement of the usefulness of the counselor's advice occurs after she extensively reported on these new difficulties, albeit without any indication of the application of advice either: *Thanks for your help so far*.

In entry 8, the counselor responds to Taylor's input by reformulating Taylor's difficulties and showing her empathy. She gives Taylor further advice and asks her to share more information on specific difficulties as well as on the application of her advice. At various points, the counselor also refers Taylor to external sources of support, such as her general practitioner or websites that provide users with tools and tasks to help themselves (e. g.: [www.getselfhelp.co.uk](http://www.getselfhelp.co.uk)). As the counselor tries to equip Taylor with additional help – a subtle hint towards the need for



support outside of the counseling process – these activities position Taylor as an advice-seeker. In contrast to the other four threads, the counselor does not add a final affirming paragraph in Taylor’s thread at this point. Since Taylor has consistently positioned herself as an advice-seeker, the counselor cannot easily affirm progress. Due to the collaborative work of the client and the counselor, which delineates that the client needs further support, the counselor does not announce or inquire about a final session. Instead, the counselor reminds Taylor of the short-term therapy they offer and suggests having *another couple of sessions*:

(19) Counselor (Thread: Taylor; Entry 8)

We’ve had four sessions so far Taylor, and as you know we offer short term therapy, so if we have another couple of sessions, what would like to achieve in them? [...]

What have you learnt so far that has been helpful, and how would you say you might have changed through this learning?

These questions will help us to gauge how you are doing and remind you of your progress. ☺

The counselor asks Taylor to set a specific goal and to report on progress, thus positioning Taylor as an active participant in the therapeutic alliance. When presented in the interview with the metacomment in Taylor’s case, the counselor says: “I could probably see they will take all the sessions that are available and kept going”. She further adds that she “invit[es] them to review where they’re at...” and thus offers Taylor an opportunity to praise her progress in the next entry. Since Taylor has not previously indicated much progress, the potential face-threat of being expected to self-praise explains the counselor’s mitigated realization (*would, might*). The counselor explains that the reason behind her questions is to clearly establish Taylor’s current well-being. By giving an explanation, the counselor mitigates the face-threat of the questions further. The smiley emoticon (☺) boosts this mitigation as well. As Dresner/Herring (2010: 257) point out: “the standard smiley [...] also often serves mitigating functions”. The counselor, that is, carefully constructs the surrounding context of the metacomment in entry 8.

In entry 9, Taylor sporadically responds to the counselor’s input from entry 8, but does not utilize self-praise readily. Nevertheless, Taylor says that she has consulted several sources the counselor referred her to and acknowledges their helpfulness. She responds to the counselor’s metacomment in the following passage:

(20) Taylor (Thread: Taylor; Entry 9)

I think I am feeling happier in [PLACE] [...], so I’ve been a more consistant feeling better mood! I really like the ‘hello anxiety’ and I think I feel more aware of why Im feeling certain ways at times. I think if we had a few more sessions, perhaps a way to deal with rejection and these feelings Ive been having? I feel as if that might help me function a lot better socially, as I think a lot of what Ive been feeling is due to my interpersonal (or lack of ) relationships.

In (20), Taylor describes her overall improvement (*feeling happier, better mood*), but employs an introductory mitigation (*I think*). She further acknowledges a specific coping technique that she liked most. Taylor agrees with the counselor’s suggestion of *a few more sessions*, and states one specific issue that she would like to work on – *rejection* – and her reason (*might help me function a lot better*). Thereby, she positions herself as a competent observer of her

troubles and as an active participant of the goal-setting aspect of solution-focused brief therapy (Kim 2008: 108). Taylor's interpersonal work signals her willingness to continue and contribute in further entries.

However, in entry 9 Taylor adds another passage right below the passage shown in example (20). She reports on an incident that happened at the start of her relationship with her boyfriend:

(21) Taylor (Thread: Taylor; Entry 9)

There was something I forgot to mention before, which, considering how many problems its caused I can't believe I forgot it, at the start ish of dating my boyfriend (so 3 months of seeing each other, 3 months official dating) [...] I was curious about a girl he had been talking to [...], so I went on his facebook and I saw some messages to her [...]

In example (21), Taylor clearly appeals for the counselor's support due to her emotional description (*how many problems its caused*). While Taylor previously positioned herself in example (20) as an active participant of the therapeutic alliance and as an observer of her own improvement, she immediately follows that up by positioning herself as an advice-seeker. The asynchronous nature of email counseling allows Taylor to present this new difficulty without being interrupted by the counselor. Since this passage is written after the seemingly summarizing passage in (20), example (21) can be interpreted as a "door handle comment".<sup>10</sup> Green (2010: 6) defines this phenomenon as follows: "This is when the client says something to you and that you recognise to be possibly significant just as she is getting ready to leave, or indeed on her way out of the door." The location of (21) at the end of entry 9 and its content are in line with how Green characterizes a door handle comment. (21) clearly foregrounds Taylor's positioning as an advice-seeker. All in all, Taylor's interactional work here does not create a "closure-relevant environment", as it does not depict agreement on progress or improved well-being.

Taylor's interpersonal work influences the subsequent interaction in entries 10 to 12 with regards to closure. On the one hand, the counselor responds to Taylor's positioning as an active participant in the counseling process. On the other hand, she also responds to Taylor's door handle comment. She displays further empathy by reformulating and acknowledging the client's troubles, and she also provides further advice. Green (2010: 7) notes that, in face-to-face counseling, the counselor could take "note [of the difficulty] and return to it in future sessions". In Taylor's case, the counselor responds to the client's input within the session. Overall, the interaction between Taylor and the counselor continues until entry 12. Due to space, I cannot elaborate in more detail on how the relationship is negotiated after entry 10. However, the counselor and Taylor do close the counseling process in entry 12, which is also the maximum number of six sessions that the service allows.

In sum, while the relational work carried out in Taylor's thread looks quite different from previously discussed threads, the work is nonetheless collaborative. In other words, the interactants take each other's interpersonal work into account when constructing their own entries.

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<sup>10</sup> I have chosen to use Green's (2010: 6) terminology of the "door handle comment" as she mentions that it "has become known [that way] in counselling parlance". Other researchers have termed the same phenomenon the "by the way syndrome" (West 2006; White/Levinson/Roter 1994) or "doorknob concern" (Robinson 2001).

## 5 Conclusions

In this paper, I have explored how the closure of the counseling process is initiated. Through an interpersonal pragmatics perspective, I answered the following research questions:

1. Who initiates the closure of the counseling process?
2. In what way is the closure initiated?
3. Are there specific interpersonal patterns occurring before, during, and after the initiation?

I found that the counselor initiates the closure of the counseling process using metacomments that aim to carry out the task of arranging one or several further sessions. Making arrangements as an initiation for closure has been found in previous studies (Robinson 2001; West 2006). As my analysis further revealed, the counselor uses three different types of metacomments to initiate the closure: 1) announcing a final session, 2) inquiring about a final session, and 3) inquiring to take stock. Specific interpersonal work influences the counselor's choice of metacomment in the individual threads. This clearly points towards closure initiations being context-dependent and not random. The interpersonal pragmatics perspective allowed me to look closely at the discursive work that the clients and the counselor carry out before the actual initiation of closure. First, the metacomment in which the counselor announces a final session requires clients' progress to be well advanced. In other words, clients position themselves through self-praising and boosting as active self-helpers and experts on coping strategies. Second, the metacomment containing an inquiry about a final session allows for clients to still partially position themselves as advice-seekers. They do so through appeals for further support or highly mitigated self-praise. Third, if a client has not visibly progressed, i. e. still positions herself as an advice-seeker by mainly appealing for further support and abstaining from self-praise, the counselor urges the client to take stock. It has become apparent that the clients' own interpersonal work and self-positioning is vital. This corroborates Stommel/te Molder's (2015: 282) postulation that the epistemic right to close a counseling session seems to lie with the clients. In other words, if the counselor praises the client and positions her as an active self-helper while the client does not yet agree, the closure would most likely fail. All three metacomments share the same aim: to arrive at a "closure-relevant environment". This is achieved through extensive collaborative work between the clients and the counselor. One type of discursive activity that seems to complicate a smooth closure process are door handle comments. As these comments (written by clients) occur towards the end of the interaction and position clients as advice-seekers, the closure-relevant environment is not given, and further interpersonal work is needed.

The interpersonal perspective further highlighted that the initiation of the closure not only aims to end the counseling process, but is also used to elicit specific relational work and positionings. The counselor utilizes the metacomments to provide clients with future opportunities to self-praise. Consequently, clients can position themselves as active self-helpers and experts on coping techniques. Collaborative interpersonal work is used not only to discursively negotiate the therapeutic alliance and both the clients and the counselor's identities, but also to create a "closure-relevant" environment and to move towards a point where an actual "closing" of the interaction can be carried out.

While the present study illustrates how the counselor introduces the closure of the counseling process and how these introductions are motivated in previous text, the fact that only five cli-

ents and, more importantly, only one counselor (and therefore only one approach to counseling: solution-focused brief therapy) are part of the corpus that is researched necessarily limits generalizations of results from the present study. Further analyses with a range of clients and counselors (and a range of counseling approaches) would likely yield more diverse results and give us a clearer picture of different kinds of initiations of the ending of the counseling process. Due to space, I was only able to show previous interpersonal work in detail, but not the following interaction that occurs after the metacomments. There are bound to be subtle differences in how the specific interpersonal work unfolds, not only across the three types of metacomments, but also within a specific type. Finally, I have paid special attention to the initiation of closure in the counseling process in this paper. But I could not include the actual closings of the individual entries or the threads overall in detail due to space. Further work could also include how these two aspects are realized in counseling and whether related patterns are present in closings of interactions.

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### **Bionote**

Franziska Thurnherr is a PhD candidate in English linguistics at the University of Basel. Her research focuses on interpersonal pragmatics in online (mental) health discourse. She researches health interaction especially with regards to relational work and identity construction and how these concepts influence the therapeutic alliance or doctor-patient relationships. She is further interested in an applied approach to health communication research. She has been a research member of the SNF-project *Language and Health Online* (143286).