School of Communication 530: Conversational Interaction

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Course Description

The materials for this class are comprised of a sampling of phone calls in the San Diego Conversation Library (SDCL) entitled "The Malignancy Series" -- a corpus of 60 recorded and transcribed conversations, over a 13 month period, involving family members who have been informed that their mother's tumor has been diagnosed as "malignant". The calls begin with Dad "delivering the news" to Son and ongoing conversations with other family members (including the Mom/patient) and friends as the cancer develops. Final recordings were made as Son has traveled home awaiting Mom’s death. This study, the first natural history of a family talking through cancer from initial diagnosis until death, was funded by the American Cancer Society under the title “Conversations about cancer: Understanding how families talk through illness”. (#ROG-98-172-01).

This examination of “conversations about illness” may usefully be contrasted with the close examination of medical interactions, which have typically focused on the institutional character of professional/lay communication most generally, and particularly doctor/nurse/practitioner-patient relationships. Topics ranging from problems in creating mutual understandings, soliciting complete medical histories, constructing and responding to “stories”, describing problems and displaying empathy, delivering good and bad “news”, interrelationships between “biomedical” and “psychosocial” models of treatment and diagnosis, and making referrals have received considerable attention. Across these studies, participants’ relative “power” and “status” have been addressed as “asymmetrical”. For example, when considering such phenomena as “lay vs.technical knowledge”, “questions and answers”, and “overall constraints” associated with medical diagnostic interviews or therapy/psychiatric sessions, how medical professionals display and patients deal with medical authority, and the imposition of agenda-relevant actions, has been given systematic attention and is certainly deserving of further inquiry. With the ACS grant, attempts are being made to identify a parallel and “essential problematics” for families in the midst of a cancer dilemma.
While class activities will involve lectures and discussions on extant literature, the bulk of our time and efforts will be given to “informal data/listening sessions” -- repeated, rigorous, and grounded attempts to identify and substantiate patterns of human conduct-in-interaction. The grist for our mill, then, are naturally occurring phone calls submitted to repeated listenings and, with transcriptions, inspections of ordinary family concerns. The overriding focus of the class will be to begin to discover -- literally for the first time -- the kinds of interactional patterns families co-generate when working through medical concerns, and to reveal interrelationships between casual and clinical encounters. Emphasis will be given to close examinations of single instances as well as analysis of "collections" of interactional phenomena.

**Text:**

Two xeroxed packages (readings and syllabus/transcriptions) available at Aztec Book Store (second floor); reserve readings on first floor of Love Library. (Readings may also emerge as class progresses, and will be placed on reserve on an ongoing basis.)

**Grading & Evaluation:**

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<th>Component</th>
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<tr>
<td>Midterm Examination</td>
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<td>Final Examination</td>
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<td>Participation</td>
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**Exams & Participation:**

Each exam involves a one-month take home exercise, focusing on close analysis of selected moments from the phone call corpus. Handouts for each exam will be provided, describing the data to be analyzed and procedures to be enacted. Class sessions will be devoted to data sessions directly related to the take home exercises, so you are strongly encouraged to come to class expecting that each day will aid you in your independent analyses and writing efforts.

Class participation is evaluated according to: Regular and prompt attendance; preparation (i.e., display of careful and critical examinations of readings, data); constructive, thoughtful, and detailed involvements in class discussions and activities; individual innovativeness and motivation.

Beginning with the third absence, final grades will be discounted 1/3 grade (e.g., B+→B).
I. History & Overview of Psychosocial Inquiries

A. Historical Sketch: Social Aspects of Illness, Death, & Dying


B. Introduction: The Noticeable Absence of Interactional Research


C. Overview & Perspectives: Psychosocial Research in ‘Family’ Cancer


**II. The Delivery and Reception of “Good and Bad News”**


**III. Interactional Uncertainty**


**IV. Hope and Optimism as Interactional Achievements**


**V. Talk About Troubles on the Airlines & Miscellaneous Activities**


**Some Related Readings**

Wayne A. Beach (1996). Editor’s Preface and Introduction (pp.ix-xvii); Finding bulimia (Ch.1, pp.1-19); Interaction and social problems (Ch.5, pp.101-112). In *Conversations about illness: Family preoccupations with bulimia*. Mahwah, NJ: Lawrence Erlbaum Associates, Inc.


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