Laughter in correction sequences in speech therapy sessions

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Abstract

This article deals with the interactional achievement of laughter in speech therapy sessions with adolescents suffering from speech and language impairments. We aim to describe how laughter is locally organized by the adolescent and his/her therapist, and how laughter production provides relevant information about the organization of preference in speech therapy interactions. Using both a conversation analytic approach and quantification, we analyzed video-recorded speech therapy interactions between therapists and adolescent patients in French-speaking Switzerland. We show that adolescents initiate more laughs than therapists overall, but that this pattern is even stronger in correcting contexts, in which such laughs are also predominantly not shared. In correcting activities, the sequential organization of laughter is related to the type of correction trajectory and to the participants' priority in terms of task management. The adolescent produces unilateral standalone laughter when the therapist produces an overt correction, and produces a unilateral laughter-infiltrated second pair-part after the therapist invites him/her to self-correct. By producing unilateral or shared laughter, participants index the importance of correcting business as the main instructional task (unilateral laughter) or as a side activity in the management of an interactional task (shared laughter). Thus, the sequential organization of laughter is not only tied to the asymmetry of institutional status but also to the type of action jointly performed by the participants. By investigating a phenomenon that is still little-known – laughter in therapeutic interactions with dysphasic adolescents – our study provides relevant therapeutic resources for therapists in the collaborative management of a central activity in therapeutic intervention: the business of correction.
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1. Introduction

This article deals with communicative functions of laughter in speech therapy sessions with adolescents suffering from speech and language impairments. We propose (1) to study how participants mobilize laughter in speech therapy interactions; (2) to observe at what particular moments participants' laughter is recurrently produced in therapeutic sessions; (3) to better understand why participants laugh in this context.

Conversation analytic studies have shown that laughter is not an uncontrollable reaction to something funny, but a conversational resource that is very precisely organized by conversationalists to achieve many relevant interactional actions, e.g. managing topics (Holt, 2010; Bonin et al., 2012), managing turn-taking (Glenn, 2010; Ikeda and Bysouth, 2013), solving an interactional trouble (Potter and Hepburn, 2010; Glenn, 2013; Shaw et al., 2013; Petitjean and González-Martínez, 2015)

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and/or displaying (dis)affiliation (Jefferson et al., 1987; Glenn, 1995; Holt, 2012; Fatigante and Orletti, 2013). Concerning the field of speech and language therapy, studies show that laughter may be a very relevant resource that aphasic speakers (Norris and Drummond, 1998; Madden et al., 2002; Wilkinson, 2007) and autistic children (Auburn and Pollock, 2013) use to manage their language disorders while minimizing their impact on the interactional flow. However, to our knowledge, how and why dysphasic adolescents laugh during speech therapy interactions still remain little-known phenomena.

Using a conversation analytic approach (Sacks et al., 1974), we analyzed video-recorded interactions taking place during speech therapy sessions involving one therapist and one adolescent with speech and language disorders (see Section 3). Participants' laughter seems to play an important role in a specific type of repair sequence, i.e. correction sequences (see Section 4). We also noticed that adolescents laugh more frequently than therapists, and more often in a unilateral way (the therapist does not join in the adolescent's laughter). Previous studies have already shown how aphasic speakers laugh to manage prolonged repair sequences (Wilkinson, 2007). Moreover, several studies on laughter in institutional talk have shown that it is a relevant resource for displaying participants' institutional roles: subordinates laugh more than superiors, and subordinates' laughter is mostly not shared (Lavin and Maynard, 2001; Haakana, 2002). However, these studies do not provide any information about the following points: in speech therapy sessions, do adolescents laugh more often in correction sequences than during other activities? Do adolescents initiate more laughs than therapists (and mostly in a unilateral way) because of their respective institutional roles or because of the activity in which they are involved? By performing quantitative analyses (see Section 4.2), we show that adolescents initiate more laughs than therapists overall, but that this pattern is even stronger in correcting contexts, in which such laughs are also predominantly not shared. According to these findings, we analyzed adolescents' laughter in correction sequences to understand how and why laughter is unilaterally or jointly produced (see Section 4.3). We show that sequential organization of adolescents' laughter depends upon (1) the type of correction (i.e. other- or self-correction); (2) the participants' orientation toward instructional or person-oriented tasks.

Repair trajectories are particularly delicate in contexts in which language impairments are a central issue (Milroy and Perkins, 1992; Merrison and Merrison, 2005). In speech therapy interactions, repair sequences create opportunities to focus on instructional issues (Ridley et al., 2002; Radford, 2008) as they may challenge the linguistic and interactional competence of the patient (Wilkinson, 2007), which may trouble the progression of the interaction. By showing how therapists and patients jointly adjust laughter to maximize the instructional value of the repairable while minimizing the problematic features of correction in terms of epistemic positions, our study offers therapeutic resources to help speech therapists develop a greater sensitivity to the functions of adolescents' laughter in speech therapy sessions (see also Petitjean and González-Martínez, 2015, on classroom data). This study thus highlights how laughter may be a resource for facilitating therapeutic intervention (see Potter and Goodman, 1983; see also Wilkinson, 2014 for an overview of ''interventionist'' CA applied to aphasiology). By focusing on how adolescents with language impairments use laughter to manage interactional difficulties, this study shows that adolescents' ''errors'' display not only a problem of language performance but above all a sign of interactional competence (see also Jefferson, 1974).

2. Laughter and repair sequences in speech therapy contexts

2.1. From repair to correction in talk-in-interaction

Since repair deals with problems in speaking, hearing or understanding (Schegloff et al., 1977; Schegloff, 2007), this is a vital mechanism in the management of talk-in-interaction (Hayashi et al., 2013): by repairing, participants solve troubles that may disrupt mutual understanding and inter-subjectivity (Seedhouse, 2004). Several studies describe the sequential organization of repair (Schegloff et al., 1977; Hayashi et al., 2013), distinguishing between repair initiation and repair completion. Repair may be initiated by the speaker of the trouble source (self-initiation) or by another participant (other-initiation). In the same way, repair may be completed by the speaker of the trouble source (self-repair) or by another participant (other-repair).

In educational contexts, repair management is mainly linked to instructional tasks (McHoul, 1990; Seedhouse, 2004; MacBeth, 2004) and thus to the business of correction (Jefferson, 1987). Correction is viewed as a particular type of repair (Schegloff et al., 1977). Repair deals with the mutual understanding of the ongoing talk, while correction is linked to the appropriateness of the previous reply (Jefferson, 1987; MacBeth, 2004). However, correction and repair remain *co-operating organizations* (MacBeth, 2004). In classrooms, the teacher may check that he/she has correctly understood the student's answer before beginning a correction sequence that overtly deals with the inappropriateness of this answer (MacBeth, 2004; for the link between repair and correction in classroom interactions, see also Hall, 2007a and the consequential debate and response papers: Seedhouse, 2007; Hall, 2007b).