Language and Action: Wittgenstein and Dewey in the Practice of Therapy and Consultation

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Introduction

Managers, leaders, consultants and therapists may all be described as practitioners of an art. The practice of the art which we refer to is living in and by communication and conversation. This is what the Ancient Greeks called the arts of praxis. Hannah Arendt (1958) draws our attention to the central arts being those of living together in ways that are coherent. There are two aspects of this that are important to note. Firstly that living is always in relation with others.

"No human life, not even the life of the hermit in nature's wilderness, is possible without a world which directly or indirectly testifies to the presence of other human beings" (op cit p. 22)

Secondly, all living is action which "is entirely dependent upon the constant presence of others" (op cit p. 23). Central to the process of human action is language, because language is not simply talk about action, it is intrinsic to action itself. When, for example, managers have difficulties, when organisations have problems, when families come for therapy or leaders are in conflict, they frequently describe these as "not knowing how to go on" or "not knowing what to do next". They sometimes seem trapped between destructive or anti-social behaviour on the one hand and what is non-sense for behaviour on the other. These common observations have led consultants, managers and therapists to pay closer attention to the nature of language and discourse. This attention includes the task of finding ways of using such concepts as meaning, coherence and understanding in more productive working practices for their clients. The purpose of this paper is to elaborate a particular tradition with respect

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to language, meaning and action that we think will be helpful to therapists, consultants, managers and the like.

This paper is, therefore, written for therapists, consultants and others who are concerned with 'persons in conversation' and who are committed to the idea that conversation is the primary focus for understanding how people live together. Conversation is defined in the Shorter Oxford English Dictionary (1964) as, 'the action of living or having one's being in or among', and 'the action of conversing with others; living together'. We take this definition of conversation as central to the way in which we are describing consultation and therapy. Thus conversation and communication are of primary interest for understanding how problems arise and also how we are able to create ways forward beyond problems and difficulties. This approach to a way of working is part of a greater tradition that has its roots in the writings of William James, John Dewey and the later work of Ludwig Wittgenstein. The similarities between the later Wittgenstein and the pragmatist philosophers James and Dewey have been long recognised by philosophers (Bernstein 1966). There is a rich contemporary literature on therapy and consultation which has been developed exploiting their seminal ideas. As a consequence, practitioners who work in this tradition, are concerned with conjoint action, what persons do together. By this, they mean that persons do not merely exchange messages, nor simply become coupled by communication. Rather, such practitioners mean by conjoint action that persons 'act into' the actions of the other and in so doing together create who they are, their social abilities and a social world.

"In this view, people as much "act into" a set of future possibilities as "out of" a set of past actualities, and in doing so, find their actions influenced just as much by the actions of those around them as by their own interests and desires" (Shorter 1994).

Practitioners who take this orientation take the subject of human language and meaning very seriously. In so doing they mean to rescue communication processes from the role of mere perturbations of individual cognitive states (von Glasersfeld 1991).

Language and meaning are essential to an understanding of human communication but they certainly do not exhaust the skills necessary for the conjoint bringing forth of social reality. Other skills could be listed as, for example, emotion, touch, manipulation, gestures and the like (Shorter 1984). We wish to be clear that whilst this paper is focused on language and meaning we do not believe that there is a sharp division between the subject of language and other aspects of social interaction. In the course of the essay we will therefore have to make reference at many points to these extra linguistic features of experience (Wittgenstein 1953 PI para 108).

The view of language that we will develop here is characterised by the following commitments. Language and meaning are matters of use and doing in conjoint action rather than codes or a vehicle for ideas. Thus language is conceived of as being intrinsically social rather than a method by which individuals make social connections. Persons and society do not exist by communication but exist in and through communication. Communication is the very process by which we co-create what we are. Language is part of an emergent process whereby social realities are created by persons in joint action and not primarily a metaphorical representation of something deep and hidden.

This paper explains our perspective on meaning and language in therapy. In the process of doing this we hope to provide a way of enriching the practice of therapy and consultation.

In the course of this paper we will introduce the idea of 'meaning as use' (Wittgenstein, 1953 PI paras 43, 150 & 151). The discussion will give a general account of meaning as something that we make and do in episodes of joint action. Here we will be concerned with the relationship between episodes of lived experience and the stories that people tell us in such episodes: stories such as those about the self, the organisation, the family relationships and prior conversations. Next we want to introduce the notion of persons co-creating their "grammatical" abilities. We will do so through a discussion of Wittgenstein's notion of the "rules" which make up "grammars". We shall then discuss the relationship between the "grammar of an episode" and what Wittgenstein called "depth grammars" and "forms of life". In the third section we will discuss language from the perspectives of the stories which persons live and tell. Here we shall be concerned also with issues of voice, power, culture and consciousness. Finally, we will, in the fourth section, discuss the implications of our perspective for the concept of the person. We will be concerned with showing the difference between treating persons' use of language as a form of action rather than a form of representation. In the process of doing all this we will point to some of the implications of this perspective on language for working in consultation and therapy for the way in which to treat the stories clients, therapists and consultants weave together.
At each stage of the development of this way of practising we will illustrate the practical value of this terminology for either management or therapy and consultation by providing definitions and actual case examples. In so doing we will illuminate the links between this conception of language and meaning and practices of circular questioning (for example see Selvini et al. (1980), Peen (1982), Tomm (1987 & 1988)), and other forms of activity when consulting. Clearly we are not the first or the only authors to take a serious look at the relationship of language and meaning to therapy and consultation. However, we do not find, in the literature, a systematic treatment of language from a Wittgensteinian-Deweyan perspective.

**Meaning as Use**

*Meaning in Contexts of Use* is to know the meaning of a word, a phrase, a sentence, a paragraph and the like is to know how to use it and how to respond to it in a particular context. Almost anyone working from the systemic tradition would agree that to know the meaning of an utterance depends on the context in which that utterance takes place (Wittgenstein 1953; Dewey 1925, Bateson 1979). A simple example of this is the use of the words "bleeding heart". These words could refer to the biological heart bleeding, they could refer, among other things, to romance, sadness, a little red flower, a tropical fish and so on. Knowing which of these meanings to relate to necessitates some knowledge of the context within which the words are being used.

However, the notion that meaning is context related is not sufficient. Although the derivation of the word context comes from a Latin verb meaning "to weave together", it is often used in a static way as a noun. Used as a noun it becomes a frame which you can place over something like a word or a phrase. This may be confusing, particularly to clinicians and consultants in training. For clinicians and consultants the term "re-framing" is commonly used. It often comes to be used in the sense of placing a frame around a work or phrase in order to place that word or phrase in a new context and thus for a new meaning to emerge. This use is somewhat mechanistic and does not do full justice to the activity which clinicians and others are engaging in when using a term like "reframing". If we return to Watzlawick's description of reframing:

"To reframe, then, means to change the conceptual and/or emotional setting or viewpoint in relation to which a situation is experienced and to place it in another frame which fits the "facts" of the same concrete situation equally well or even better, and thereby changes its entire meaning" (Watzlawick et al 1974 p. 95).

Wards like "frame" and "context" fail to grasp the kind of dynamic practice that Watzlawick had in mind. This dynamic practice is related to the use of the Latin origins of "context" meaning "to weave together". Let us illustrate this point with a recent case example and see what it can tell us about meaning as use.

A client starts telling, in the flow of an interview, how he was lonely and isolated from his peer group when aged ten at school. In the flow of the conversation the interviewer asks the question, "Did the other children try to involve you in their lives and their activities?" The client replies affirmatively, asserting that many children were both consistent and determined, repeatedly trying to involve him in play with them. Furthermore, when he was an adolescent this continued. The interviewer proceeds to ask, "How did you find a way to keep yourself separate from the other children; to resist their repeated invitations?" The client begins to entertain this shift in perspective and over a brief period of conversation, which plots how the client manages to maintain this separation and individuality over increasing periods of time, and with considerable skill and determination, a new meaning emerges. The interviewer expresses admiration for his action and introduces the term "hero" to describe this process of maintaining a stance of separation, individuality and uniqueness against the attempts by many others in the client's life to incorporate him into their circles. The client begins to play with this description of heroic individuality and, at one point, he asks the interviewer for some further exploration of the hero idea. That further exploration he describes as trying to sort out what this new understanding might mean for him in the future. He also asks for some discussion of how this now influences his view of the past. The interviewer and the client then proceed, jointly, to explore the possibilities and constraints created through the new meaning which is emerging here.

There are several things to observe about meaning and language from this example as we have developed it at this point. Firstly, the client was struggling somewhat and working hard to find a way to construct sensible extensions of his story using the term "hero". When he asks for a further explanation and elaboration of the notion "hero", the kind of explanation he is looking for is a description of how words like heroic, separated and lonely might sensibly fit together along with other elements of his story. He does this because, in his story, loneliness and separation are conceived of as relating to being at the mercy of others. In the conversation out of which the "hero" motif emerges a
different view is co-created with the interviewer. The client who experienced himself as being acted upon by others, he was excluded and isolated now begins to tell a story of being an actor with considerable ability. In exploring the new meaning further, the client is asking for the meaning of the words, "heroic" and "hero" in the particular episode of conversation taking place between the interviewing therapist and himself. To use the word meaningfully is the same thing as being able to "go on" with it coherently in the conversation (Wittgenstein 1953 PI 150 & 151). So, knowing the meaning is knowing how to go on coherently and co-ordinate with the interviewer in this episode. There remains a further activity of importance which is to begin to explore the co-ordination of this new meaning in future episodes with others outside of the therapeutic interview.

When we are asking for the meaning of an utterance we are asking for an explanation of how to go on in the use of it (Wittgenstein 1953 PI 560). How to go on in the use of it, includes how to relate to others in the future, and in what contexts it is appropriate to act in this way. For the client he has the ability to make sense, with the interviewer, in the action of constructing new stories about his life. It is not that we put a frame on it and suddenly new sense is made of it but rather that when the word is introduced the client, by the way in which he and the interviewer relate to it, develops the ability to go on from it. Going on includes understanding those particular relationships and contexts in which he will be living after an interview.

If meaning was not a matter of use, but (instead was inherent in the word) itself, or in the connection between the word and mental or physical object, therapists, consultants and others would not have to create the subtle and complex practices they have to create to bring about change. It would not be easy but not be all that difficult to plop a new word into an old pattern and figure out what connections there could be made among the individually meaningful elements. But that is not the way language works. The relationship of a word such as "hero" in one episode to its use in another is a matter of multiple and changing resemblances and dissimilarities. Another example - from Baker and Hacker (1984) - looks at the uses of a word such as "close" in English. For example, we use it in phrases like, "the surgeon closed the wound... the play closed in one week... his mind is closed... the door is closed..." There is no singular essence that runs across all of these uses only multiple similarities and dissimilarities that connect its use from one case to another but perhaps not to a third of these expressions.

The contexts we act into and then co-create have a crucial moral dimension. They have to do with what we can do, must do and must not do (Pearce & Croon, 1980, Croen 1991). They indicate conditions in which we are not to be held responsible as well as when we are to be held responsible. The use of pronouns is important to the creation of this moral dimension (Harré 1984, Shouter 1984). Shouter observes that when we talk in the vocabulary of "I and YOU", first and second person singular, we take on and describe moral obligations different from those invoked when we speak in the language of you or they, he or she.

Suppose, in a consultation interview a manager turns to a subordinate and says "I think you don't take sufficient responsibility when I'm not around". Or take the example, when, in an interview with a family, a mother says to her daughter, "You break the rules as soon as my back is turned and that upsets me". In both of the foregoing examples the speaker takes the position of first person singular and addresses the other directly as second person singular 'you'. By contrast, consider the following utterances. A manager during a consultation says to his subordinate, "As a manager, for this company, I have to be sure that you, as a worker, follow the rules as they are given to me". A mother in therapy says to her daughter, "As a mother, I must insist that adolescents learn to follow the rules". In the latter two examples the speaker takes a third person position addressing a second person singular 'you'. Notice how moral responsibility is shifted. In the first two examples the speaker takes an immediate responsibility for making sense to the person addressed and takes the responsibility for their actions themselves. In the latter two, responsibility is shifted. The responsibility for what the manager does is shifted to the role prescribed by others in the organisation. The responsibility of the mother is primarily to the role of mother as constituted in culture, community and family traditions. The responsibility of the manager is defined according to his position in the organisation with its norms and values. In both these latter cases the appeal is to something outside the personal "I". This shift also suggests different responsibilities for the person addressed if they wish to respond. In the managerial example the subordinate is addressed as a member of a class or group and invited to respond as a conduit for that group's ideas just as the manager claims to be speaking as a conduit for higher management's and the organisation's ideas. In the family example the child is invited to respond as a member of a group of adolescents whilst the mother speaks as a representative of a group of mothers with a common set of responsibilities. Of course the respondent may resist the effort at being put in this position. The worker, for example, might respond, "Look here, I'm talking to you and how you chose
to act with me". The daughter might respond, 'I'm not all adolescents. I'm your daughter and you're my mother'. It is most interesting to watch the way that the grammar of conversation moves responsibility in a consultation or a therapeutic interview.

Of course the kinds of moral responsibilities we live in will be influenced by the specific language in which a conversation is held. So, for example, when a speaker of Spanish employs the formal "U" and the formal "you" she or he is using linguistic features that have no exact parallel in contemporary English but which create important obligations that are readily recognized by a speaker of Spanish. Thus the kinds of moral responsibilities will also be influenced by the cultures and communities in which it is used.

Non-Sense In Contexts Of Use
If we return to the example of the client with whom the "hero" story was created, we can also get an idea of Wittgenstein's notion of non-sense. When the term "heroic" and "hero" were used, it may have been the case that the client responded, "A lonely kid rejected by his peers as a hero. I don't get it", and, despite all efforts of explanation the client has no way of going on coherently talking about his experiences as "heroic". The "heroic" ability does not fit for him. For him, the use of heroic in this conversation is "non-sense". It may be objected that, of course, the word hero makes sense to the client and is not non-sense. If we were to ask the client to describe what a hero is he could clearly do so and perhaps he could even give the exact dictionary definition and the etymology of the word. That ability simply indicates that the word hero is meaningful for the client in a game of word definition. If we were to play a game with him whereby I choose the word and he has to give a dictionary like definition he would know quite well how to go on in such a school boy like exercise or game. The points that emerge here, are first, that a word or utterance is non-sense when we do not know how to go on in a sensible or coherent way using it in a particular episode. In such cases clients frequently look puzzled and say something like, "That doesn't fit". It is as if we were playing tennis with the client and midway through a point we said, 'Tennis - that's a moving pick. I get a free throw' as in basketball. It makes non-sense in that context, as it is not clear how to go on in the light of the one comment being linked to the other. Thus, being able to make sense, is not simply seeing the word or hearing the utterance in a new frame, but being able to act from that utterance in a way that extends or develops the action as a sensible sense making action for both participant in a conversation.

Sometimes a practitioner deliberately acts so as to question the coherence of the way in which clients may talk. For example, the members of a family, in an interview, talk about being a really close family. However, they also describe a way of family life in which they talk little to each other and share very few activities. The practitioner asks, "If you are so close, how come you talk and share so little and find it difficult to say many things to each other?" In doing so the practitioner reminds the family that it is often the case that close families interact a great deal. The interviewer introduces the notion that "close" does not make sense in a context where everyone is withdrawing into their own lives and fearful of talking to each other. After the interviewer's question one member of the family responds by revising her description of the family from "We are close" to "We are trying to be close!" The interview then develops in a new way to a discussion of who is distant, how they show it and what the consequences and explanations of this distancing are. The mother who had been depressed and withdrawn becomes interested and animated, keen to know what has been happening that members of the family have been so private about and which she has been so ignorant of. The interviewer is able to highlight what is non-sense by putting together parts of the story which do not seem to fit or make sense as it is heard by the person interviewing. This frequently leads to new developments. The so called "counter-paradoxical interventions" (Palazzoli et al 1978) sometimes used at the end of an interview are meant to function the same way. They make it incoherent - - non-sense if you will - - to go on using the same rules or patterns for relating after the practitioner has spoken.

Use and Prior Use
In any ongoing conversation the participants are not making sense as if from nowhere; we are always acting into patterns that have developed and are part of lived practice, prior to our own participation in them. For example, the new born baby developing a co-ordination with a parent figure is acting into patterns of parenting as well as patterns of childhood practice that owe a debt to features developed through time with similarities and differences across generations and in cultures. In a therapeutic conversation when a therapist introduces some new language that language will have a heritage of connections in past use, culturally, institutionally and in the experience of the therapist and client. When new language is introduced into present episodes it will not have meaning only in relation to past use; the way it gets used, those with whom it is used and the contexts in which it is used will all become aspects informing the elaboration of the meaning of the word. The current use will reflect back upon the interpretation of prior uses, which will, in themselves
be transformed in some way. Similarly, future uses will both transform the situation in which words are used whilst simultaneously the meaning too of the word is constantly elaborated.

This claim about the flexibility of meaning has often been a point of confusion. Gergen (1994), for example, has argued that we can legitimately "run amuck the text and take it as something useful for yourself and the community; we can go about ripping thing's out of texts for use in other domains". From our point of view we would say that we attend to the internal integrity of a text or an utterance.

"The question is," said Alice. "Whether you can make words mean so many different things!" "The question is," said Humpty Dumpty, "which is to be master - that's all" (Carroll 1971 p 269).

"That's a great deal to make one word mean," Alice said in a thoughtful tone. "When I make a word do a lot of work like that said Humpty Dumpty I always pay it extra" (Carroll 1971 p 270).

So then the problem is, how is it that there is some stability to the meaning of words as well as flexibility and evolutionary openness. There are two terms which Wittgenstein uses in discussing this point. One term which he uses, and which we find is helpful to our understanding is when he treats exemplars as "centres of variation" (cited in Baker & Hacker 1985 p 191).

Let us take as an illustrative example the reading of a case description by a well known therapist. What is learned from reading the case study is not how to do exactly the same thing again that the well known therapist did, literally doing what the description talks about in all details with a group of clients like a family. Nor is it the case that one learns from another clinician by simply using some pat words or phrases in utterly different therapeutic situations. What one does learn from reports of others at work is how to use examples of others' work as what Wittgenstein called a 'centre of variation'. We can use a case of insightful therapeutic work in many different ways in different consultative and therapeutic settings of our own. When you borrow any bit you do it with an appreciation for the larger tradition of practice in which that bit is situated. The consistency connected with usage in a tradition both restricts and opens up possibilities for future use. We like Wittgenstein's term for this reason. 'Centre' we see as referring to the consistency with past use whilst "variation" we see as related to the possibilities for elaboration in future use. This both respects and validates the use of words, sentences, paragraphs and plots in the tradition whilst simultaneously affirming the elaborative possibilities which these have in future use. In our view the introduction of novel utterances into a client's story is much like proposing a new "centre of variation". Centrally a part of therapy is to explore the "centre of variation" in relation to the fullness of any sets of clients' future living. Such explorations are creative enterprises, because utterances, emotions, movements and the like are not related to each other because they share common essences or properties. They are connected by people finding or making what Wittgenstein called "family resemblances".

Let us return to the example of the client and the hero story. We observe that the therapist by using the term "hero" introduces heroic stories that the client knows from his educational experience as centres of variation. In the ongoing therapeutic conversation therapist and client explore family resemblances between episodes of the client's experiences and aspects of heroic stories. In no sense are the therapist and client searching for a precise match between a particular hero story and the life of the client. Indeed as a consequence of their conversations the client may even interpret classical hero stories in a different way. Those herostories then become potentially available for future use in new ways. Together client and therapist explore episodes of conversation in which hero will come to have meaning for the future through co-ordinated practice.

Wittgenstein uses the notion of family resemblances deliberately to avoid suggesting that the meaning of words is connected to an essence or a property. Instead he talks of words, and the like, as having their meanings with the sorts of various 'resemblances' that hold between members of a family. These may be of very different kinds: resemblance in build, facial features, colour, eyes or hair, gait temperament, manner of speaking, attitude, or manners. In specifying respects of resemblance between people recognizably of the same family, we do speak of such things as the Churchillian manner or Hapsburg chin. Although we can make such respects of resemblance precise, it is not in virtue of their all having some set of common properties that we group together members of an extended family; no property is sufficient for membership in the group, nor is any one necessary. This is what makes the metaphor of family resemblance so illuminating..." (Baker and Hacker 1980 p. 191).

Whilst meeting with an individual lends itself to hypothetical exploration of other co-ordinating possibilities of others grammars as they stand and how new co-ordinations might go. When meeting with a group of people such as
a family or family and professional network the possibilities for elaboration is greatly enriched. Everyday present participates in the exploration simultaneously. Without other participants in the interview it is not possible to explore in immediate joint action how the co-ordinating patterns of new stories or understandings will go. When more than one person of significance is present in the interview you live out - use - the co-ordination of emergent grammars which is the creation of meaning in lived experience for all those present together.

Diagnostic Criteria and Therapeutic Use
Wittgenstein's notions of 'meaning as use' and 'family resemblances' have particular implications for how we might regard diagnostic criteria and diagnostic documents such as DSM 4 or ICD 10. Obviously the views of Wittgenstein and Dewey are incommensurate with the very notion that animates the production of these documents and criteria. Diagnostic criteria are lists of symptoms which are taken to be merely the signs of something more important. The more important thing, that is the real objec of therapeutic interest, is the mental disorder. Diagnostic criteria are supposed to help the therapist determine which of the mental disorders the patient is suffering from on the assumption that there is a culturally invariant set of such disorders. Thus disorders and the symptoms that support them are divorced from the contexts out of which they arise.

Should we then systematically object to all use of diagnostic criteria? Let us take, as an example anorexia nervosa. Suppose a client, weighing fifty pounds, says to a therapist, 'I am terrified of being fat. I look so disgusting.' The meaning of what she says must be understood within its place in a pattern of life; that pattern includes the way the client eats, talks about herself, interacts with her parents, family and friends and so on. We are interested in the observation that a number of clients use similar phrases and we are interested in the observation that same clients have similar patterns of eating and use somewhat different phrases. If these similarities are not due to reflecting an underlying disease, in an objective sense, how do we account for them? Nothing in the perspective being described here denies that people are born into existing patterns of cultural, community and familial discourse. We would expect that there will be some similarities of practice within social groups. People learn to be anorectic in cultures where this is fitting. It is useful to observe similarities in our clients' grammars. However an utterance like 'I am terrified of being fat' has its meaning in a pattern of use that varies across persons and episodes. For this reason the words 'I am terrified of getting fat' uttered by two different people should lead us to think about this redundancy as a family resemblance as we discussed above. With this orientation our primary interest is not to interview in such a way as to prove or disprove the hypothesis that the client is an anorectic. Saying the person is anorectic may be useful for purposes of reporting, gaining funding, admitting to hospital for treatment (if this is your choice). There is nothing intrinsically wrong with this kind of shorthand (by shorthand we mean one way of looking at diagnosis) gloss for a particular purpose. However for purposes of therapy the symptoms that are talked about provide ways of leading the therapist into the details of relations and ways of living in which the person with the symptoms is located and in which the symptoms emerged. One of the things that becomes interesting for the therapist is to understand and enter the grammar of the particular symptoms as ways of living for each of the people who talk about such symptoms. Those circumstances and details will have elements radically different for each person and the contexts in which they arise will differ radically from one person to another. In therapy it is these differences which we work with. In this way the words 'I am terrified of being fat' uttered by different clients might best be thought of as connected by family resemblances rather than by common essence or property. Therefore our most profound interests are in the situated moments and differences from case to case.

One of the aspects of the way in which the diagnostic story is told is that it highlights the unfinished character of meaning in use. The final observation we want to make is that meaning always points beyond the immediate discussion, and, at the same time, always reflects back on previous meanings and ways in which a word or phrase has been used (Gunn 1992). This is quite different from each utterance taking its meaning from a context or frame put over it. In our 'heroic' example, if the client can work with and develop the story including the word 'hero' his prior actions and previously lived experience appear differently as a consequence of including the word 'hero' in the story. Thus he gets a completely different story about the past events and the relationships connected with those events. Moreover the new utterances produced using the notion 'hero' open for both the client and the interviewer new affordances for elaboration and development. In other words, we act from and into ongoing practices. Notice that from this vantage point if we are asked the question, 'What does that utterance mean in this context?' the only completely accurate answer we can give is 'I don't know - it is not finished yet'. Wittgenstein makes the point this way when asserting that meaning is always incomplete and emergent (Wittgenstein 1953 PI 86-88) for where explanation leaves off practice takes over.
What you have here is that you extend the ability of the client to engage in other conversations outside of therapy in ways different from those he or she has done before. In those conversations additional abilities to create coherent patterns of talk in co-ordinated action with others develop or emerge. Since we cannot predetermine the episodes in which words will be used the meaning of the word is never finished nor final, it is, we would say, capable of infinite elaboration (Lang, Little & Cronen 1990).

"...experience in its vital form is experiential, an effort to change the given: it is characterised by projection, by reaching forward into the unknown: connection with a future is its salient trait" (Dewey 1966/1916 p. 23).

Connection with the future includes, not only the ability to make coherent sense either for yourself, or only in therapy. Connection with the future also includes the ability to co-ordinate with others in a way that they too can go on in the joint production of social action with you. Thus the ability to create and conjointly live new stories or new patterns must extend beyond therapy episodes. The kind of abilities that develop in a therapy episode need to include that of telling more general stories; stories that have implications for constructing coherent conjoint conversations with a variety of persons and situations and relationships. A client may make sense in the conversation with the therapist but then she goes on to conjoint action with others informed by the notion for example of heroism. What is happening here? For this to make sense and go somewhere the person must be able to engage with another person's ways of making sense and participating in the ongoing conversation.

John Dewey has an interesting way of talking about this which is particularly useful in guiding questions by a therapist or consultant. He describes aspects of being uniquely human as, "(1) the ability to respond in several ways to an impulse (of appetite or whatever); (2) the ability to rehearse the consequences of each channel of response, without actually responding; (3) the ability to see how each of these sets of consequences will close or leave open channels for the exercise of other appetites ("some being seen to be consistent with one another, and hence capable of co-existence... other being incompatible... getting in another's way"); (4) the ability to co-ordinate several possible channels of response into a single complex response." (Tilles 1988 pp 193f) Following his description we find that one of the points being made here is that it is possible to learn to create a conversation about a conversation. Taken together, all the aspects which are listed here, as what Dewey called "reflective imagination." (Dewey 1925/58 p 370). We might add that persons can develop the ability to act in ways that go beyond all the reflections described above.

When consulting we can work into the future through questions which will explore the patterns which Dewey talks about here. Fruitful questioning will explore the different relationships which a person may meet as well as the contexts of those meetings, after a therapy session. They may explore how the people a client might meet will respond to the client relating in ways which have emerged as new, in the process of therapy. Questioning can include setting out future possibilities and scenarios with particular people and exploring ways of relating in moment by moment episodes of what the client and others might do together. In therapy, for example, we might discuss the reactions of others and create not one but a number of ways of responding to the way people might relate. In a management consultation an interviewer might explore a variety of plans for the future or a variety of ways of relating to a work group so that there is always more than one possibility of practices for going on in relationships. Some examples of this way of interviewing are described by Karl Tomm (1987 & 1988) and Peggy Press (1982).

The claim that meaning is co-created in material moments of social life leads us to prefer to meet with groups of people such as families, working groups (including managers and workers), couples, individuals and those significant to them. For, when, in the process of an interview with a group of people, a new story emerges, a number of significant things take place. Firstly, the "lived experience" of all those present in the interview begins to change. The process of co-creating a new story is one in which everyone present becomes in some way involved. Secondly, following on from this involvement, the group together begins to co-create future episodes and how they will co-ordinate with each other in relation to the new stories which are emerging. That is why it is crucial to bring together those who are the relevant and the significant group connected with particular problems or concerns rather than a random group of people with a similar problem. This is not to say that support groups for people with similar problem may not have their uses. However, it is our experience that the presence of significant others in any interview dramatically enhances the possibility of development and change both during and after an interview. Because of the importance of this consideration we have developed numerous ways of including people in an interview. This entails working with those who one might not normally consider it possible to have in the same room together. (Lang & McAdam in press) The decision to try to move from individual to family, couple or groups in the interview is sometimes made.
because the consultant or therapist becomes very concerned that he or she cannot tell, or is very unclear about, how new non-therapy episodes may emerge. Another concern may be that the client's new emergent grammar of action will not fit or may be usurped or may drown in the ongoing grammars of others unless those new emergent grammars are helped to co-evolve.  

Rules, Grammatical Abilities and Ways of Living

To know the use of a word is to know how to engage in patterns of conjoint action in which the word is used. We want to use the term episode to refer to distinguishable patterns within conversations. What makes one pattern or episode distinguishable from another? Wittgenstein says that the internal coherence of a pattern is the result of the participants using rules that give them the sense of an emerging order distinguishable from other orders (Wittgenstein, 1953 PI para 7). Of course, the notion of rule is a fiction; people don't have heads full of rules. The term rule describes persons' knowledge of how to create and connect utterances in episodes of conjoint action. Coherent patterns are produced through weaving together our actions with those of others.

Taken together, Wittgenstein calls the rules that persons use to create an episode, the grammar of that episode. The rules that a particular conversants is able to bring to bear in an episode constitutes what we know of that person's grammatical abilities (Wittgenstein 1953 PI para 90; para 304). In Wittgenstein both the terms, 'rules' and 'grammar' refer to words, sentences, paragraphs, gestures, emotions and patterns of behaviour. These are all inter-related in the process of co-ordination. 

The Wittgensteinian understanding of rules has direct implications for the choice of a systemic as opposed to an individual, internalised centred mode of therapy. Wittgenstein is concerned with the question of how our language in use can have coherence and at the same time a relative stability. He says that knowing a rule is a very different matter from being able to use a rule - and it is use that is primary. Let us begin with Wittgenstein's own example of a child learning to calculate. The child may be able to repeat certain rules about calculation that appear in a text book, however the child may still make calculation errors. The instructor believes that the child has mastered calculation and the child believes that she has grasped it when that child works out a problem and the instructor can say "There, now you've got it!" When the child is making mistakes she may think she is following the rule and indeed be able to explain what she has done in terms of the rule.

In a similar sense Wittgenstein argues that if we take an individually centred viewpoint a clever person could come up with a rationalisation for why virtually any utterance is in accord with a rule. Left at this point, language would have no coherence for virtually anything could be said at any moment. An example of such rationalisation can be found in cases of schizophrenic behaviour. There are a number of rules that people typically use for organising discourse with their parent. In one sort of case a schizophrenic sends a greeting card to his father with the words, "To a person who acted just as if he were my father". What strikes us is the inappropriate nature of sending such a card. When the father asks his son about the card, the son says, "Since you are my father you must act in the way fathers act and so you act as if you are my father." The son's logic is impeccable for a particular kind of episode. However, the son is not using the expected rules for an exchange of birthday greetings with a parent and the parent does not know how to go on. At the same time the son's behaviour is an attempt to gain coherence in relation with the father in terms of the son's own stories. So when challenged he gives an answer within an entirely different language game made up of its own rules.

"That a person's action is normative, that he is following a rule, (or better, guides himself by reference to a rule) is a manner in which he uses rules, invokes rule-formulations, refers to rules in explaining what he did, justifying what he did in the face of criticism, evaluating what he did and correcting what he did, criticising his mistakes and so forth." (Baker and Hacker 1985 p. 45)

So when interviewing, as a consultant or therapist, asking for someone to give, for example, an explanation of what they did, we will find that their answer will indicate the use of some rule which is part of the language game which they are acting out. It is important to observe that problematic rules are not so because someone is using the wrong one. To say that would imply that persons must always use rules that are widely available and sanctioned by a community. Rather the problems emerge when the rule one uses produces problematic responses from others or creates an inability to know how to go on in the relationship on the part of others. Rules are not individual matters, but they may be idiosyncratic in one particular episode whilst nonetheless relating coherently to other, perhaps even, less obvious social situations. One of the tasks of therapy is creating connections with those episodes of coherence. Change comes about as new rules emerge in conversation with therapists, consultants and significant others.
The foregoing example illustrates Wittgenstein’s point that grasping a rule is not an individual psychic problem but a problem of co-ordination with others. One knows how to conduct an exchange of greetings when one grasps rules for that game in a way that facilitates the response of others so that both parties can go on coherently.

Rules cannot be individual, private matters. It is important to emphasise the innately social character of rules. This does not mean that rules must be exactly the same for two persons conversing. It does mean however that to know a rule is not the same thing as to see a rule (Wittgenstein 1953 para 201). We have all had the experience of thinking that we have understood something only to find that when we need to put that understanding into practice we understand much less than we thought that we did. We may think that we know just what to say in an essay or a set of case notes, but when we actually begin to compose, we find that there is much more creative effort to do - effort that substantiates the process as a piece of writing.

In therapy, it frequently happens that we develop a hypothesis which we would like to use in the process of the interview. However we find that when sitting with the family, for example, and they begin to talk with us that we have to engage in a process of creativity in which our thinking is formed in part by the kinds of responses the clients give us. Often therapists and consultants will act in a way with one group of clients that is particularly helpful for that group. On meeting with another group the interviewer might try and use a way of relating based on what worked for another group. Frequently it is found that this does not work because it does not arise out of the unique circumstances and responses of this new group of clients. So use is thus a matter of co-ordination which is always situated in relation to particular groups of people at particular moments of time.

It is typically the case that two persons do not have exactly the same understanding of an utterance on the basis of their individual reports; their explanations will vary. Indeed because no two persons can be in exactly the same position in the conversation it is virtually impossible that their grammatical abilities would be identical. That is not crucial. It is not necessary that two persons report exactly the same understanding when asked. What is crucial is that they develop abilities that allow them to co-ordinate with the other in ways that make sense and allow them to go on. In this view it is absolutely mistaken to try to fix the system such that all persons will share the same understanding; understandings will emerge, diverge and change. So what we work with in therapy or consultation is the process of co-ordinating the forms of joint action.

From this perspective Wittgenstein says that we can investigate the grammar of a word, a gesture or an emotion for by doing so we understand what anything is (Wittgenstein 1953 para 373). By this he means understanding the ways a particular word can and cannot be connected with others in ways that make sense. These rules organised ways of connecting emerge such that there is “no space” between a rule and its application. This means that rules are not the sort of things that are put on over events nor are words tucked into rule structures, rather the grammar of our words emerges in use.

We wish to illustrate the idea of grammatical abilities with an example taken from everyday conversation. A patient goes to see their family doctor about some symptoms they have been experiencing. The family doctor is someone they have come to know very well over many years of association. The doctor comes into the room where the patient is waiting. They shake hands.

The doctor says: “Hi! how are you doing?”
The patient responds: “Not too bad really.”

Doctor: “Saw you get to the second round of the town tennis tournament and that you then lost badly.”

Patient: “Couldn’t handle my opponents serve.”

Doctor: “Sometimes I must show you how to deal with that kind of serve. So how are you doing?”

Patient: “I’ve been having this constant pain in my…”

Doctor: “Well, lets have a look at you.”

If interviewed, the patient in the conversation above could tell you a story about how the opening episode of conversation usually goes with this doctor. In that opening episode, “Hi! how are you doing?” does not obligate the patient to talk about symptoms; it is legitimate even though they are doctor and patient to sensibly say “Not bad really”. The doctor understands that the patient is willing, indeed, perhaps anxious to go on with a non medically oriented episode and begins to talk about tennis. Later in the conversation the doctor, this time asks, “So how are you doing?” The patient understands this utterance to introduce a very different episode in which the enquiry about how he is, obligates an account of symptoms and prohibits the introduction of non medical topics. Thus we can say that in this brief conversation there are two episodes that work by very different rules. The grammatical ability that the patient brings
to this conversation is informed by stories about past episodes in the story of his relationship to this doctor and perhaps other stories as well. The doctor's grammatical abilities are similarly informed by a variety of stories including stories about how to teach tennis and how to conduct medical examinations.

We move to an example from a therapeutic conversation to illustrate the idea that, when working with clients, we are exploring the grammar of utterances. A client and therapist are in a conversation about stress and anxiety. Early in the interview, the client has frequently talked about her many responsibilities including work, marriage, children. The work context involved being responsible for the survival of the company of which she was a partner owner which frequently results in work taking precedence over home and family life.

The consultant asks: "How would things go if you negotiated for more time for yourself and the children and less time at work?"

Client: "I am working very hard on myself to reduce my stress so that I can do both because when I'm not at meetings things fall apart."

Consultant: "What about the children then?"

Client: "I have to spend time with my children..."

Later, the consultant asks: "When were you first aware of the sense of obligation that you are personally and individually responsible for so many things?"

In reply, the client tells a story about being very young and using the knife instead of the spoon in the jam at afternoon tea in her family. Her parents were most upset and admonished her about how she was responsible for the image of the family in such situations.

What the consultant is doing here is exploring the grammar of the words 'responsibility, stress and time'. The therapist is not concerned with any general structure of rules into which these words fit. Working that way would assume that there is space between the words and lived practices. The consultant is interested, instead, in the episodes, past and present, in which this grammar emerged. In the episode with the consultant the client seems to use rules that when a problem at work is introduced she is obligated to respond in terms of her own responsibility and imply an ability to control the situation. When asked to assess her success or failure the client seems to use a rule that obligates her to respond in terms of the standards others use and not refer to her own standards. Here we are beginning to see, in the interview, features of the client's grammatical abilities. We are also finding that the client's grammatical ability is informed by connecting stories, including a story about an early episode and its implications, as she has worked them out for how to create a story about her life and responsibilities and how to create other stories about responsibility in episodes of family and work. The consultant asks questions in such a way as to facilitate the client's bringing forth the stories that inform the episode they are enacting and creating together.

Notice that in working this way, when a therapist talks to a client and new stories and connections are being created the client and therapist are mutually developing one another's grammatical abilities.

It is also noteworthy, that when grammatical abilities change the person is able to enter into conversations in new ways. Those conversations are not fully within the control of any one participant. So when something new is introduced, either by a client or a therapist, the new abilities to enter into a conversation open up the possibilities to learn and participate in new and unanticipated patterns of action. Thus all changes in one's grammatical abilities are potentially episodes of learning how to learn for both therapist and client. We say, potentially, because there is no guarantee that the new episodes created will be enriching and even make any sense either to the therapist or the client. It is always possible that the other conversant, for example the therapist, may be unable to create a co-ordinated new episode in relation with the client's introduction of something new. It is, of course, possible that the other conversant may shift to an episode in which the new actions of the client or therapist just do not get anywhere and may be rejected or ignored.

What Practitioners Can Learn from Fixed Rule Games

Ludwig Wittgenstein presented his ideas about meaning as use by employing several analogies each of which was to give us a different perspective. His most famous analogy is the fixed rule language game (Wittgenstein (1953) para 197). An example of such a game would be chess. In this game rules about how to move pieces and conditions that constitute winning and losing are unchanged by the playing of the game. Indeed when people playing the game find it interesting and enjoy playing it they are reconstituting the "THIS IS CHESS" story. By playing, you reconstitute the game and reconstitute the rules that give it its coherence and its coherent character. Many clients come to us with the complaint that they go on playing games which have the character of fixed rule games - namely playing them in certain ways reconstitutes them. For
example, the client who complained about stress seemed to engage in episodes about work, family and responsibility that are very similar each time the game of stress is played. The rules for how to be coherent in this game are by some process reconstituted in the course of playing. The implications for effective interviewing are very clear. For example asking the question, “What are you suffering from...?” may carry with it the obligation for a client to respond with symptomatology because the client’s grammar has some very clear ways of going on from an enquiry about suffering. In the experience of some therapists the questioning of a person with psychotic symptoms about those symptoms leads to an increasing display of those symptoms, for the client has a well developed ability to go on in such questions. Here a therapist could be said to be playing a fixed rule game and thus feeding into it.

The analogy to fixed rule games calls our attention to the physical, social and cultural conditions in which they are played. Basketball, for example, cannot be played on a football field. Certain episodes of creating and sharing secrets between certain members of a family requires conditions of privacy and a time in which those conditions are met. For example sexual abuse cannot take place without such conditions of privacy and time in which to take place. Notice how this episode, for example of sexual abuse, has to have a coherent place among other episodes. Most fixed rule games are associated, not only, with physical conditions to be able to play them but also for a time for their appropriate playing. American basketball is played when certain viewing audiences are available, namely after work. In family life we are not talking about developmental stages, but we are saying that certain things cannot happen without other episodes being there prior to it. For example, in a family which has a discussion about how the work day was and they listen to each other and give each other support, this takes place in the evening; such a discussion cannot take place in the morning. You need a work day to talk about. The logic of the episode requires a work day to refer to.

Turning to the cultural background of games it has been observed that games like chess make sense in cultures where there is a tradition of warfare and an emphasis on establishing winners and losers. In western culture the tradition has been to socialise men to compete in practices which include an emphasis on games that determine a winner and loser. It has only been more recently that women too have been encouraged to participate in such games. Fifty years ago it would not have been culturally coherent for groups of women in a community to form a league to play soccer. Cricket is a very different example and illustrates our point. In the seventeenth and eighteenth century women cricketers were relatively common. At the same time the way cricket was then played the majority of games ended in a draw; winning or losing was rare. In this century there has been a change in the cultural pattern. Teams of women playing cricket are less obvious and the game has become dominated by men. Going with this has been the rise of different ways of playing cricket; these different ways of playing enable more games to be played in such a way that winning or losing become central to the majority of games whilst draws, as a result, become more the minority.

A further example of the cultural background of fixed rule games is the case of a Hawaii group that objected to building on a certain piece of land which the United States’ government wanted to use for building. There was no one on the land and no deeds to the property therefore “we can use it”, was the attitude of the U.S. government. The law of the U.S. said so. On the other hand, the Hawaiians claimed that this land belongs to God and therefore no government has an automatic right to take it. The problem that emerged in the court is that the grammar of court practice is not informed by cultural stories anything like those of the Hawaiians.

What Practitioners Can Learn from Emergent Rule Games

While Wittgenstein placed more emphasis in his writing on the fixed rule game analogy he was also very clear that natural conversation often differs from fixed rule games in very important ways (Wittgenstein PI para 36). Wittgenstein wrote about the “fluctuation” of everyday talk. Cronen and Pearce (1981) called attention to the emergent quality of conversational rules. They observed that the rules of conversation differ from the rules of chess or the rules of algebra. The rules of doing algebra do not change no matter what equations we set up to solve. An episode of doing algebra is governed by a transcendental logic i.e. the rules transcend all episodes of practice no matter where or when. However conversations are not like that because the rules for how to engage in an episode of interaction may become ritualised and fixed but even in such cases they emerge from the doing.

Consider the very young infant lying in its crib its head below the bumper pads. The baby manages to lift its head high enough to look over them and then, perhaps for lack of strength, lets its head go down to the bed again. The parent notices this and says “Baby is playing peek”. The next time the baby lifts its head the parent says “Peek”. Later the parent hides behind the bumper pad lifting her or his head above the bumper pad. As this goes on the baby and parent develop a co-ordination. Before long the baby lifts its head and lowers
two groups in a joint exploration suggested that the context for the work might be that of the Fifth Province taken from Irish Mythology (McCarthry & Byrne 1988). The consultants explained the forms of relating which were part of fifth province behaviour. These included leaving your weapons outside of the meeting, listening to people stating their positions as an expression of position rather than as an attack or criticism; when a person made a statement it could be related to by becoming curious, asking questions to understand the logic of that position rather than countering it. The group agreed after some careful questioning and scrutiny of the Fifth Province approach to use these as guidelines for action during their work together. At the beginning of the day when the group agreed to work according to these guidelines this agreement was already the emergence of a new relationship. The negotiation for agreement to work in a particular way established the beginnings of a new relationship through the very process of negotiation.

This was anything but the end, rather only a beginning. As the day progressed, there were repeated episodes when the emergent possibilities of what was happening began to go in less fruitful directions. It was the consultants’ task to ask questions each time that this happened which led the participants to develop the Fifth Province ways of relating more fully. As they did so, a new meaning, and new ways of relating when working together emerged for the people involved. Both professionals and managers began to see each other as equally relating to a wider context in which neither side had the freedom to act which the other side had thought. Instead they began to work together on ways of relating to this wider context more fruitfully for both sets of important grammars that they had arrived with. They ended the day with an affirmation of needing to work together to ensure that the new emergent meaning of being a group working in an institution would be further developed.

The foregoing example illustrates something very important about communication and rules. Mutual understanding is not a prior condition for communication as is often supposed. Rather, in this view, useful rules emerge in the course of understanding. Whether different persons use very similar rules is not of primary importance. Whether persons can find ways to go on that are coherent for all parties is what matters.

Another important point arising from the foregoing example is that while rules have a “normative” function they do not need to be widely shared or long enduring. Rules may indeed be fleeting emerging at a moment in conversation and obviated as the conversation progresses.
Persons, Stories and Positions

The idea of an emergent grammar, composed of rules, provides the therapist with a way of describing what is being done when the position of the client or client group is deliberately altered by the subtle change in pronouns or in the introduction of a reflecting team (Anderson 1987). For example, the therapist might listen to a member of a family tell a story about the family's conflict with the extended family. The person speaking talks in terms of "we," positioning the self as the spokesperson for the whole family which addresses certain members of the extended family. By asking questions such as, "Who agrees with father's ideas about grandmother the most, and who, the least?", the therapist may be subtly shifting the spokesperson from the position of first person plural - from spokesperson for the collective "we", to spokesperson in the first person singular, "I". The family member may know very well how to tell the story about grandmother from the first persons plural, "we", using the grammar associated with the third person plural; they may even use this in a way that amounts to a fixed rule game. The therapist, by subtly moving the conversation in certain ways, opens the opportunity for that same family member to create, along with other members of the family, a story about grandmother, with a grammar entailing the first person singular. This may lead to a conversation resulting in a very different story with a very different emergent grammar. Enacted in this emergent grammar is a different "lived experience" and different forms of relating to members of both the family and the extended family.

Davies and Harré (1990) discuss the importance of what they call "position". Their idea is very similar to the symbolic interactionist's term "altercation". In both these conceptions, persons attempt to establish an orientation in their conversations with others. One way persons do this is through the use of pronouns. (Harré 1984; Shottor, 1984). Shottor especially stressed the way in which persons acting from a first or second person position have different moral obligations from those claimed for a person acting from a third person position. The work of the symbolic interactionists (Hewitt and Stases) usefully contributes to the idea that we speak, not only, from a position for ourselves but that we also cast the other in our conversations as having a certain position. For example, suppose two friends are having a discussion, and one friend describes her relationship to another friend and asks for some advice. We would say that the speaker takes a first person position and addresses her friend as in a second person position. In so doing, what is invited, by the first speaker, includes a moral obligation upon her friend to respond in a way that makes sense to the first person in the terms of how the relationship is defined.

Whether you have succeeded in doing that is largely a matter in the judgement of the first conversant. By contrast suppose the second person responds like this, "According to Knapp's book on relationships you are in stage two and should expect this to happen". What has happened here is that the respondent has attempted to move to a third person position in which she is responsible primarily for being academically accurate. Notice, in this example, that there is more going on than the use of pronouns when persons position themselves in a conversation. The first speaker works to index her words as her own thereby indicating that she expects a response that is the unique opinion of a friend. The friend responds indexing the source of her response primarily as an outside authority. Her responsibility is thus not only to her friend but, importantly, to being an accurate conduit for authority. Thus, she is less responsible for the consequences of the advice. The positioning involves both taking a position for herself and, simultaneously, indicating a position for the other. The other may accept or attempt to renegotiate that casting of position. Positioning involves both the use of the pronoun system and the indication of the voice with which we speak.

Let us take, as another example, the use of reflecting conversations (Andersen 1987) and we will view them as changing grammatical positions. Reflecting conversations are often used by systemic therapists when working as a team. The interviewing consultant may pause, during an interview, and the team of consultants may engage in a series of reflections in the presence of the group being consulted to. When this happens we would say that the client group, who have been listening to the discussion of the reflecting team, moves out of a first or second person position in the conversation and into a third person position. Listening to a reflecting team, the client listens to the conversation in an unfamiliar position. In that unfamiliar position the client listens and recalls and attends, perceives and recalls from that new position. This process of being an observer to themselves from the third person pronoun position involves a new way of experiencing and observing themselves. Thus, when the therapist is again alone with the clients, and asks them to comment on the team's conversation, the clients may be able to construct new stories because of the experience of changing position and speaking from that new position. We wish to caution the reader, however, that the third person position is not somehow a naturally preferred or privileged position. However, in Western culture, deeply informed, as it is, by the tradition of objective knowledge, the third person position is often taken to be the voice of authority and truth. It is not uniformly useful to move the client to a third person position to give them 'objectivity' nor is it desirable that the therapist maintain a third person
An illustration of the usefulness of moving person positions was seen in an episode of therapeutic conversation when movements between positions became fruitful in a number of ways. The interviewer observed that, in response to questions about present possibilities and preferences, the husband would tell a first-person story about past episodes addressed to the interviewer, not looking at his wife. For example, "I used to like to go to the country and I have always liked being with my friends there. I need to escape the tomb of the city." This escaping the city entailed leaving his wife behind in a manner which was to her profoundly distressing. However, as the conversation developed, the interviewer observed an important shift in the grammatical position of the husband which supported the hypothesis that some change was taking place. The husband shifted to talking about those "escape stories" in the impersonal third person. (e.g., "One can see now what one was doing in the past and how that was making us distant."") In doing so he was specifically indicating that they were in the past. After doing so he would directly address his wife in the first person, "I see we were co-operating to create distance, weren't we?" The move to the first person is very important because first and second persons have obligations to each other in the immediate situation, whereas third persons obligations are to principles or reports which are not immediate in the same way as first and second person obligations. In this episode the use both of the first person and the third person position were fruitful for the client and his wife in the creation of an emerging new story.

The Professional, The Problem and Games that Can Be Played

We wish to emphasize that one of the tasks of therapy, consultation or management involves entering the grammar of the groups which we are working with or relating to at any point. However, we would like to tell a cautionary tale about entering into the grammars of others. Questions which we attend to here include, "How do you want to enter the grammar?" From what position and in what way do you wish to enter the grammar? "What might be the consequences of entering the grammar in particular ways?" "Which words, phrases or details do we wish to enter the grammar of, for what purposes and with what potential for emergent consequences?"

It is possible to enter the conversation in a way that reconstitutes what is problematic or pathological. In our discussion of fixed rule games we drew attention to the point that playing these games reconstitutes the rules that give the game its coherence. Thus entering the grammar in a particular way has an effect that reconstitutes those rules which can be part of the maintenance of the problem. In our discussion of emergent rule games a further danger is implied. Namely, that by entering the conversation about a problem or a pathology, we may be in danger of extending and further developing the problem or the pathology. This can be done in a number of ways. One example of how this danger can take place can be when a therapist enters the grammar of something like grief and then proceeds to talk, in detail, about the feelings connected with grief. Take, for example, a therapist meeting a young mother with four children after the accidental death of the father. At the moment of meeting, the conversation which these two people are about to engage in has many emergent possibilities. These are contingent upon ways in which elements of the story which this woman lives is put together in the context of the therapeutic conversation. Imagine the discussion when, in the middle of a therapeutic conversation, the therapist asks the question, "Have you never felt angry with your husband for leaving you?" The client looks bewildered and says, "I never thought about that before! Can you be angry with someone for dying in an accident?" The therapist asks, as a next question, "What's happened to your anger? Are you afraid of it?" The client answers, "I have always been taught that anger is dangerous".

In this episode, a first point to notice is that the therapist is participating in the development of a grammar of grief and anger that may not have existed before. In fact, a further pathology is being created whereby the client now sees herself as pathological because she is unable to express anger. In the practice of the therapist this could also be seen as pathological. The process of emergence might then proceed with both co-creating the grammar, that here is a pathology which needs working on and resolving in order for the client to be able to recover from grief as they both now construe it. The therapist does this by taking a particular position in which it is important to note at least two dimensions. The first dimension, is that of a therapist being in the knowing position, which is embodied as an Iyon grammatical position which is predicated on a relationship where I as therapist know more than you as client. We would note that if the therapist says something like, "In the literature" or "In studies it has been known for some clients to say that they are angry with a person who died," the therapist would be taking a third person position. This latter way of approaching the subject of anger might have a greater potential of not leading to an emergent pathological conversation. In this example we would say that the I grammatical position relates closely to the notion that "I really care for you and am using my knowing in that way". Contrary to
expectations it may have the consequences of pathologising rather than going in another direction. This is not to say that third person position, or remaining aloof and being uncaring is the point here. Rather we are highlighting the possibility in therapy and conversations for pathology to be deepened and co-created by the way in which we work. What is central to our point, is that the direction in which a conversation goes is always contingent upon the situated moment of episodes of particular people in particular moments in time.

The potential for extending the problem or pathology is accentuated when strong emotions, experiences of ways of suffering or being a victim are involved. This is so, because, in the West, emotions are treated as psychic realities that are a bit like biological realities. Thereby experts seem the appropriate sources of knowledge for the nature and treatment of these realities much as a medical doctor is the appropriate source for how to deal with a bacterium or a virus. One possibility, then, is for the therapist or consultant to respond to the expectation that they will ask relevant questions to reveal the suffering and symptoms which will lead to a diagnosis of a hidden condition, namely the real feeling at issue. This process which emerges frequently results in more difficult work in the consultation as what gets created then has to be resolved. The whole work may become much more difficult.

The difficulty of working both for consultants or therapists and clients is often exacerbated by getting more deeply into the story of suffering, or the story of problems and pathology. Through this process we often multiply or add to problems and pathology in a way which is unhelpful to the client’s future life. Emotional experiences like all other aspects of experience are ways of living, rather than symptoms of something hidden. Thus there is a grammar to emotion just as grammars for verbal expressions. Indeed, we would wish to say that the grammars of emotion and the grammars of expressions go together in a unity. We learn how to have the experience of love or hate or grief and we learn how to have them under particular circumstances. We also learn how to enact them and to expect certain responses to our acting. One of the dangers of over attention to the complexities of a pathology is that by so doing we lose focus on the place of the emotional enactment or pathology in the course of life. We may also lose focus on the way in which the person who comes to a consultation is asking us to work with them on how to go on in future living. At the time of grief, for example, as with problems and pathologies, what people are asking for is help to know how to go on with life. Working usefully we can ask questions which locate the emotions, pathologies and problems in the contexts of episodes of joint action both in the past and also in the future.

We find that focusing on the future is particularly important. If we take the example of a young woman who had been sexually abused by her father. The therapist working with her thought that it is required that she talk with the client about the experiences of abuse and thus asks detailed questions about what happened and how she felt. The client, after some moments of thought, requests that she does not wish to talk about that at present. Rather she presents, as her concern “Its the summer and I do not know how to go down to the beach. What will people think of me when they look at my body in a swimming costume? Help me to do this please.” This client alerted us to the importance of giving attention to working with the future. We have found that is some of the most useful work that we do, concentrating on prospects of the future rather than re-respectively talking about the past.

The reader is, of course aware that there is a tension between the problem of exploring the client’s grammar and the problem of extending or creating a pathology or problem. This tension cannot be resolved by a set of simple guidelines. The points which we are making here are intended to help in the development of clinical judgement but cannot substitute for clinical judgement and experience. Clinical judgement closely involves what Dewey constantly draws attention to in using the term “reflective imagination”, namely constantly reflecting on the consequences of any particular action we might take.

Telling Stories about the Games

Dewey's account of "reflective imagination" may be glossed as having the ability to tell creative stories about the games we live. It has been implicit, in much of what we have said thus far, that there is a distinction to be made in the discussion of persons' grammatical abilities between the living of a story as a co-ordinated practice and the telling of a story about other episodes (Peach 1989 p 68). Of course the telling of a story is part of a story lived. However, every time we tell the story it is told in the "now", in the present context and under particular circumstances in a particular way. The context of the present and the particular circumstances under which the story is told profoundly affects the details which are told and the manner of the story's telling.

We Learn to Tell Stories

Persons may be able to co-ordinate an episode of practice with another but not be able to tell a very coherent story of what they have just done. This ability must be developed. For example, if we take a young child who has just come back from a wonderful day at the playground and the park in which the child
engaged in all kinds of smoothly co-ordinated activities. When the child is asked, "What did you do today?" the young child may have a very difficult time instructing a story that makes sense to us about those lived episodes. The child may start by describing some random but important moment which we do not understand because we do not know what came before that moment. The adult may help the child learn different ways of telling such stories, for example, putting particular moments together. Of course, the way children will learn to tell stories will vary depending upon cultural factors, family practices and other conversational influences. The child will also learn what sorts of episodes it is important to have a story about such that the story can be retold for certain others.

**Power and Stories**

In the course of this paper we have talked about emergent grammatical abilities and discussed the fact that these abilities emerge at a moment of practice and are substantiated at a moment of practice. This process takes into account lived moments of interaction requiring co-ordination both with one another and also with the stories that a person has learned to tell. Meaning is not created ex nihilo at the moment of interaction. The moment of interaction is typically informed by multiple stories. In a previous example we discussed the client who told a story about the knife and the jam. This is a family story that informed moments of lived experience. However we are observant that this is not the only story informing that person's actions. There are also stories she tells about her relationships with her children and stories about her work experiences. There are other stories as well. Which stories are relevant at a particular moment will of course vary. Therefore, a person's grammatical abilities are informed by multiple stories. The same holds true for the therapist who is also informed by multiple stories. Included among the multiple stories informing the therapist may be a professional story about how to conduct an episode in a distinctly systemic way. A therapist will be informed by some stories about ethical responsibilities of a therapist. These may include stories about power, gender and race.

It is not our belief that some stories are naturally more powerful than others, nor that a particular story is dominant across time and episodes. But it is our strong belief that at particular moments of practice it is important to examine the grammatical relationships among the stories. By a grammatical relationship we mean the way the grammatical features of one story may be embedded or interwoven in another.

Let us consider the following example. A school bus driver is asked to explain why she put a young boy off the school bus. In the course of discussions she tells the story of what happened on the bus. A story that includes the fact that he was talking loudly and that he did not stop when she told him to do so. When challenged that she acted harshly, she tells a story about her relationship to the little boy in the bus. It is noteworthy that she asserts that this story about little boys is different from her relationship to little girls. Telling her story she says that she loves this boy more than his parents do. Why? Because the parents have not controlled his behaviour and she is trying to do so. This trying to control his behaviour shows her love. When asked to explain how this is love the bus driver tells yet another story. It is a cultural story. She says that boys, unlike girls, are little savages that need to be civilised through discipline. It is only through discipline that little boys can become good people. After these particular stories in relationship with each other emerge it is much clearer how she can coherently say that she loves the boy more than the parents and that her behaviour on the bus is a demonstration of her love.

How do these stories relate with each other? At particular moments of interaction some stories carry "greater authority" or "conviction". Some of these stories have the features of what Foucault called "discursive formations". By this he meant deeply inscribed and highly formalised patterns of talk and action. For example, the story about little boys as savages needing to be civilised is widely available story in many American communities. The rules for telling this story are widely shared and readily recognised. Some communities regard this story as received wisdom, carrying, if not the authority of truth, then, at least the authority of tradition. At particular moments of interaction these stories may be highly influential in the way in which particular episodes develop. In the example above, the grammar of civilising (the culturally available discursive formation) is crucial for understanding the grammars of love and control (the driver's professional/occupational story) and the grammar of putting the child off the bus (the episodic story). The way these grammatical connections can be formed, within stories, is by using or creating what Wittgenstein calls "family resemblances" (Wittgenstein 1974 PG p. 746f). A family resemblance is

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1. Lynn Hoffman (1992 pp 12-13) criticises Co-ordinated Management of Meaning theory saying that "levels", or it is used in CMM, amounts to a "sacred cow". The view advanced here, which is exactly consistent with Co-ordinated Management of Meaning Theory (1994) is not based on the Russell and Whitefield/Batesian view of levels which is what Lynn Hoffman regards critically. Cronen et al (1998) made explicit their criticism of "logical type" theory. The CMM view advanced here is critical that which Hoffman endorses (1992 p. 13) and which she claims to be original with her.
not a shared essence of any kind, nor is it a common position in a "semantic space", nor a place in a language-code.

**Stories and Voice**

The idea which we find important is for the therapist to consider with what voice a client is telling her story and living her experience at a particular time. Here we are using the idea of voice developed by the Russian literary critic Mikhail Bakhtin (1981 & 1986). Recall the example of the bus driver and the boy she put off the school bus. When we hear her begin to report the discursive formation about growing boys needing to be civilised we suspect that we are hearing not only her voice but also the voice of a particular community; a voice telling us who "we" are and what "we" know to be the way that people are and should be. Thus, for example, in a therapeutic conversation it is often fruitful to ask questions about whose voices are speaking when people describe life. For example "If you were to depart from that point of view, who would notice and how would they react?" or "If you continued to affirm a particular point of view or practice who would be most pleased?" When asking such questions the therapist is not only trying to understand the grammatical abilities of the clients, but also helping the client develop the ability to describe the connections between different voices for example the voices of community, culture, family, peer group, parents, the self and the like. Therapists and consultants can ask questions between these different voices and the unique voice of the client. In doing so we explore the ways in which the grammatical features of one story and the voices speaking in it may be embedded in another (Cronen 1994 pp 183-207).

**Stories and Depth Cultural Grammars**

Various therapists have observed how a particular word or utterance may figure very importantly in a wide variety of stories that clients tell. Valeria Ugasio (KCC Summer School July 1993) has observed that families in which phobic symptoms are present often describe the experience as a conversation around the antithesis of "dependence and freedom". In her account she discussed how, in these families, dependence and freedom are treated as contradictory polarities. Of course, there is nothing in the nature of these terms that they must be treated in that way. Ugasio then describes what we would call the grammar, or rather, the depth grammar of these terms. "Dependence" in the grammar of phobic states can be coherently connected with "attachment", and freedom with "exploration". These deep grammatical formations alone do not deterministically produce phobia. Rather they may be organised into particular stories lived and told in such a way that phobia is produced as a coherent way of living. Notice that in this point of view phobic behaviour is not a metaphor for something internal and deeper. It is an aspect of people's grammatical abilities and those grammatical abilities seem to have the common feature of a depth grammar indicating how notions of freedom and dependence may be organised in that grammar. The "phobic person" can be said to occupy a position in the family whereby he/she is trying to reconcile contradictory stories informed by the family's depth grammar.

**Consciousness as The Connections Between Stories**

To see the significance of the ability to tell and relate to the embedded nature of multiple stories as part of our grammatical abilities we want to turn to an example from consulting practice. It has been reported to us that managers tell a story about the future of the organisation and its lively, flexible response to market forces. This story is told when managers are interviewed by the consultant. Later, in the consultation process, it is learned that this story is only told in episodes of consultation or in meetings of top management. When living episodes of ACTUAL management practice are described it may be learned that a very different grammar is used. For example, the story told about flexibility is contradicted by the traditional hierarchical way in which senior managers co-ordinate their activities with middle management. For example, when meeting with others as a manager these top managers simply command and demand unquestioning loyalty and obedience in a way that contradicts the story of lively, flexible responses to events.

This is not necessarily an example of simple deception. Rather, these managers have never encountered the opportunity to tell a third story about the relationship between the other two. In such a case, it would not be unusual to say that the managers are not conscious of the connections between the two stories. We want here, for a moment, to pay special attention to stories people tell about themselves, that is when people are engaged in the action of identifying, the self for oneself and others. What this approach implies is that consciousness is not something within persons, but is intrinsically connected to our grammatical abilities that are socially constructed in lived episodes. When we tell a story about a story that is what we call consciousness. When we tell a story about the unique features of life which import for our own personality

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1. The character that such stories of self identification take will vary greatly across cultures. For a
lived experience this is what we call self consciousness. This description of self consciousness is fitting whether the events described are relevant for ourselves or for others. From this point of view telling a story about the self – identifying – is not a report of a mental trace or of an attribute possessed by the self; the issue is not whether we are getting an accurate or a muddled report of whether we are really like one thing or another. When persons tell an autobiographical story they are always telling it at a particular time and in a particular situation.

The perspective we take here is that the way the story is told relates to the particular context as well as the exercise of grammatical abilities in a particular situation. Thus the focus is not on whether the client is giving a muddled report of a mental trace: the issue before the therapist or consultant is why is the story being told in this way to you. The implications for therapy are crucial. Taking this view you do not say that I am going to help the client to articulate what the experience has been and then searching for the factual nature of it, nor is the person telling us a clear description of what is happening in their head. The process of telling the story together with the therapist is one whereby the social reality of personal identity comes into being. For example, at the beginning of a consultation a therapist may ask a group or family, "What is the concern which you would like to discuss?" The clients give an answer which the consultant may follow up on with the question "What was happening when you became aware of this concern or concern?" In the process of answering these questions, or telling these stories, clients begin to construct a new story about the connection between the concerns and the events surrounding them and other stories. This process of connecting is what we call consciousness.

Persons as Doers not Representers

The foregoing discussion of "identifying" in the context of "meaning as as" has important consequences for our conception of the person. Treating human agents as showing us who they are, rather than representing who they are, illuminates a very fundamental position which we have been taking about language and meaning. Traditionally, language has been treated as a way of re-presenting the thoughts of an individual. Our claim is that language is not fundamentally representational at all.

Wittgenstein develops his critique on the representational view by asking whether the utterance "I have a pain" is a representation of an internal state. If language was representational asks Wittgenstein, how in the case of "pain" would anyone know whether for two instances of sensation they should use the same word (PI para 127)? There would have to be some criteria for application and thus some residual doubt about whether the next case meets the criteria (PI para 258). However, he argues, people do not say that they might be in pain and have to consider the definition of pain more carefully to be sure that they are really having it (PI para 288). Persons simply say that they are in pain. Similarly if someone says he "hopes" someone will come, this is not the sort of matter on which someone can have doubts. Of course the person can doubt if she or he should hope for the event, but, if they do, there is no gap between the hope and its natural expression in language (PI para 585). Sensation words, like "pain" and "hope", simply present the condition they do not represent it; they avow our condition calling others attention to it, they do not function on the basis of criteria (Harré 1984). A person simply learns the ability to call attention to the condition of pain. This calling of attention, is within episodes which are part of what is known in a particular community. Earlier, in this essay, we indicated that all utterances have the quality of pointing beyond themselves creating new affordances and prohibitions for other actors. Here the cry "I am in pain" or "OUCH!" may be uttered without the actor intending any particular response, it is merely habit. Nevertheless, the utterance has an intentional quality in that it creates obligations for those who hear it.

James Edwards (1985 pp. 103-159, 194-197) underlines the implications of sensation words for other kinds of expression. If sensation words do not represent mental objects, do any words function this way? There are times when we refer to criteria, but what are we doing when we do refer to criteria? To illustrate his point Wittgenstein refers us to the case of knowing, which we have of, how to use the towel in a bathroom. Wittgenstein says criteria are not involved. We simply know this is a toed and what we do is "like directly taking hold of something" (OC para 510). It may be objected that there are conditions in which criteria are exactly what we require. For example, "Is this live bone part of the neanderthal we are assembling?" and "Is it acceptable to castle after moving one's rook?" These are both examples of needing criteria to decide. In the traditions of Dewey and Wittgenstein the questions are asking us to show the ability to engage in an episode appropriate to anthropology or chess. We show that it is coherent to assign the bone a place or not to castle in light of the episodes enacted by different communities. The citation of criteria is an action internal to the episode. It is not a matching of episodic action to a mental trace.

So we may say that the citation of criteria is part of the pattern of practice.
connected with the two activities which we may be engaged in. The role of language in telling a story about other lived episodes depends on the kind of episode in which our abilities develop. Wittgenstein suggested that we can demonstrate the identity of language and ideas by trying this game. Take the following utterance "Plato's theory of forms requires non material entities". Try to hold on to the ideas - the mental traces - without the use of any of the words. In this case there is nothing to the idea except the words. By contrast consider this, 'Pick a ripe apple from a tree and bite it'. Try the same thing, of course you can hold on to this idea without the words. In this latter case learning the ability to pick and eat an apple is not dependent on the words. However, we develop and learn ways of telling, in words, a story about picking and eating apples. In so doing, we represent one form of action, the picking and eating with another, the telling. Such representations are among the many things we may learn to do with language though representation is not the essence of language. When a client tells a story about a physical experience, that is of course using language to represent that which was physical in a new way. However, the ability to do such representational work does not mean that the essence of language is representation.

When people leave a consultation they engage in living which involves a lot more than words. The consultant needs to take into account the physical, sensual feel of everyday practice that cannot be neatly separated from language but which can never be fully talked about. When meeting on a later occasion with a group for a further consultation, one of the foci for work may be to begin to tell stories about the lived practices that the group has been engaging in. The efficacy of therapy is connected with the ways stories are told about the way life has been lived and the dimension of morality and accountability which telling these stories creates.

If we take persons to be doers, how does this conception of their doing inform us about their creative possibilities as agents? As people act into the activities of others, they not only learn to use particular rules, they also learn how to create and use rules. This is what Bateson (1972) called 'learning to learn'. Persons' brains do not contain bits of information represented in language. Rather learning is a chemical change in the brain itself and when we act into the activities of others we change the abilities that we have. What is of great moment is the character of those interactional patterns, whether in consultation, therapy or everyday life. For, indeed, it is possible for persons to create patterns of lived practice that rigidify, simplify and stereotype their abilities. Perhaps that is why Bateson once described himself as an angry person; angry about the ways that people limit their possibilities of life through the patterns of practice that they themselves make.

At the beginning of this paper we described therapists, consultants, managers and the like as practitioners of an art. It is an art that has everything to do with how people make a way of life in conversation; an art that has therefore much to do with the way language works and how meaning is made. By exploring the Wittgensteinian and Deweyan view of language and meaning we contribute to illuminating the character of that art. Wittgenstein once said that "The limits of my language are the limits of my world". The philosopher Richard Rorty mistook Wittgenstein's point to be equivalent to the claim that sense could only be made within the confines of existing language-using groups. Responding to this misinterpretation Clifford Geertz shows that the point of Wittgenstein's analysis was not about the limits of language-using groups but about the way the character of our world of experience is changed by the way our communication abilities change when we act into the activities of others (See Geertz 1986; Rorty 1986).

One of the difficulties in the development of systemic practice has been that its commitment to communication interdependence and change runs contrary to the traditional views of language. In those traditional views language is taken to be representational, a community code or a set of universal speech act possibilities. In those older views of language it appears that internal ideas, community codes, or precision of practice must change on the part of the individual before relational change occurs. Yet those are exactly the ideas that the systemic movement challenged.

In the course of this paper we have introduced a number of ideas and terms some of which we are sure were familiar and others which must seem new and even esoteric. We introduce them because we think that this view of language does make sense in the systemic perspective. The people who developed the systemic perspective were making the same critique of the traditional view of language that systemic therapists were making of traditional individual intrapsychic therapy. We hope that ideas like family resemblance, consciousness as story making and emergent rule games will themselves become helpful centres of variation as systemic therapists work through the implications of these notions through the practice of their art.
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Notes and comments
1. Steve de Shazer, for example, has used aspects of Wittgenstein in relation to the practice of therapy. He outlines through the use of Wittgenstein’s conception of “language games” ways of viewing therapy as a “language game”. But in this discussion he was not attempting a systematic presentation of Wittgenstein’s main tenants. (de Shazer, Steve (1991) in Putting Difference to Work, W. W. Norton & Co, New York). In a recent paper Boscolo et al ([1995] Language and Change. The Use of Key Words in Therapy. Boscolo L, Bertrand F, Mervi Palvanen R, Peretta J. Human Systems 4.2 pp 65-78) provide a useful discussion of how the introduction of what they call key words may influence a client’s story. However they do not provide a developed conception of meaning to explain some of what therapists are doing in using key words. 2. To validate is to take something as to be a true expression of the form. A test is valid when the test is logically connected to some reality that is out there. This is not what we do in therapy. In therapy we respect the story and the experiences that this is part of as arising through the process of interaction and communication.

3. The reader interested in alternative philosophies of language and meaning will note that at this point our treatment develops a very different emphasis from that in the later writings of Wittgenstein. Wittgenstein did not emphasise the uniqueness of the abilities and experience that different persons bring to the effort of producing a co-ordinated conversation.

4. Ineffable elaboration does not mean that any elaboration at any moment will work or make sense. For some utterances may produce non-sense - the inability to go on with others. The test of usefulness includes coherence but goes beyond the coherence of the moment to include the broader possibilities and consequences that are created through joint action. Broader consequences include both those far and within social and cultural life in any community. That is what the pragmatic philosophers meant when they argued that the test of an idea was its consequences. For further discussion of this see Dewey John (1957) Reconstruction and Philosophy (1920/57) Boston Beacon Press. (Originally published 1920)

5. The ethical implications of seeing, for example, only the individual or only a particular group are important. If one part of a group has participated in developing a changing pattern of use/doing connected from other parts of a group of persons there are various consequences for those added to the session who have not asked for change. Pursuing the ethical implication of this therapeutic practice is beyond the immediate scope of this paper.

6. Anthropologists have observed how utterly transformed a game like cricket is where it is played in a culture that strives to avoid determining winners and losers. They make sure that the game winds up in a tie and that there is no end to it. Just imagine trying to play a game like British Cricket or American Softball with everyone determined to have the game end in a tie. The very meaning of each act is changed.

7. There is a great deal of debate about Wittgenstein’s notion of depth grammar. There is a great deal of ambiguity in his use of these terms. The ambiguity arises over the question of whether some of Wittgenstein’s examples seem to make depth grammar inherent features of the human condition. We do not read Wittgenstein that way. We take his arguments about depth grammar to be they are grammatical features that pervade many of the episodes that make up forms of life in important ways and that those grammatical features are influenced by the fact of our embodiment on earth.


9. When persons act intentionally they are engaged in a kind of discourse that is socially learned. Shutter (1984) observes that mothers interacting with their infants give the child intentions. They teach the child how to act intentionally. This topic we will not pursue here as we wish to limit our focus to language and meaning.

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