Factualization and Plausibility in Delusional Discourse

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Abstract: According to social constructionism factuality, the establishment of accounts as corresponding to an objective external reality, is an interactional accomplishment ordinarily achieved in everyday conversations. In cases of disagreement regarding the interpretation and nature of events, however, not only the plausibility of the account, but also the rationality, integrity, and accountability of the participants is at stake. Delusions present extreme cases of such disagreement. This paper analyzes extracts from an interview with an individual diagnosed as delusional focusing on the factualization devices used in the negotiation of accounts. The question of whether the observation of conversational rules documented in the interview is sufficient to establish the plausibility of an account and the rationality of its teller leads to arguments around the necessity of shifting the focus from the grounded micro-analysis of talk to wider social and institutional processes.

Keywords: discourse analysis, social constructionism, psychopathology, reality, delusions, psychosis, mental illness, context

Implausibility and the Diagnosis of Delusions

Delusions are defined in psychiatric literature as abnormal beliefs and are included in the diagnostic criteria for all the major psychotic disorders (American Psychiatric Association [APA] 1994; World Health Organization [WHO] 1992). Their defining characteristics are implausibility (their content is false, implausible or bizarre), idiosyncrasy (they are not shared by other members of the person’s culture or subcultures), conviction (they are not simply strong beliefs but convictions of absolute certainty), and incorrigibility (they are not amenable to change through compelling counterargument or proof to the contrary) (Taylor 1983). Implausibility and idiosyncrasy refer to the belief’s informational value, the belief’s content as judged by logical-experiential and sociocultural criteria, respectively (Butler and Braff 1991). Conviction and incorrigibility are concerned with the form in which beliefs are expressed and argued. The difference between the two strands is one of emphasis on the relative importance of content or form for diagnosis (Boyle 1996).

This paper focuses on the issue of implausibility. The degree of implausibility required for the diagnosis of a belief as delusional ranges from it being completely impossible to it being bizarre, strange, or unusual (reviewed in Butler and Braff 1991). Other researchers, however, have pointed out that the issue of plausibility or implausibility of beliefs is almost impossible to resolve (Garety and Hemsley 1994; Harper 1992; Walkup 1990). Although implausibility appears as just one of the four diagnostic criteria, I argue that it plays the central role in the diagnosis of delusions, due to its equation with falsity in psychiatric literature. The essence of the psychiatric definition of delusions is that they are “false beliefs” (APA}
understood as implausible claims on reality. The formation and expression of a true, plausible, belief presupposes a rational, sane, socially competent agent who can correctly observe reality and make claims that are both consistent with it and socially acceptable. Implausibility in psychiatric literature is conceptualized as an issue of correspondence with some postulated external reality, according to the empiricist and rationalist paradigms which found modern science (Gergen 1985). Reality is assumed to be perceived and processed through universal perceptual and cognitive innate mechanisms and the beliefs about reality formed through them to be transparently expressed through speech. Inaccurate claims on reality are formed as an effect of some bias or fault in these internal mechanisms. The falsity of beliefs can, therefore, be judged against reality and the faulty processes through which these beliefs have been formed and sustained can be demonstrated by scrutinizing the person's thought processes (Gillett 1994; Harper 1996).

Factualization and the Discursive Construction of Reality

The founding premises of empiricism and rationalism have been challenged in a number of disciplines from a broadly defined social constructionist perspective (Burr, 1995). According to social constructionism, reality enters the social world through interactions between people in specific social environments. Knowledge of the world is arrived at not through observation of some external reality but rather through employing culturally available assumptions about the self and the world. Accounts on reality, then, are not transparent reflections of the world or the mind of the speaker. Plausibility is an interactional accomplishment that entails processes of validation and negotiation in specific intersubjective, social, and cultural contexts. In this respect the accomplishment of plausibility is treated as synonymous to factualization, the discursive establishment of accounts as mere descriptions of the world, uncontaminated by biases, faults, and interests of their producer.

The management of factualization does not take place between disinterested individuals trying to faithfully establish between them what the world is like. Accounts are formulated and disputed in the arena of social action, where interested participants struggle to justify actions, attribute responsibilities, and validate their perceptions of themselves and of the world (Edwards and Potter 1992). Accounts, therefore, have both an epistemological orientation (they attend to their own factuality) and an action orientation (they perform social acts). Establishing the factuality of accounts is of course in itself a social act; however, a number of other social acts are also ordinarily accomplished in the course of interactions (Potter 1996).

There is a very intimate and complex relation between the factuality of accounts and the status of their producers. Objective, factual accounts describe states of affairs as they are, minimizing the role of the speaker. Accounts treated as factual have a character of out-there-ness, of reported events uncontaminated by speakers' concerns, interests, or biases. In this context, the speakers' perception, thought, and speech are assumed to be transparent vehicles representing reality (Pollner 1987). The imputation of the implication of the speaker's subjectivity in terms of interests or biases is ordinarily used as a strategy to undermine the factuality of accounts (Edwards and Potter 1992). On the other hand, the status of the speaker can be used to strengthen an account's factuality when the speaker is presented as a member of a category of persons with particular entitlements to accurate knowledge (Sacks 1992). Category entitlements are not intrinsic properties of speakers; they can be built up and undermined in the negotiation of accounts. For the most part of social interactions, they are assumed or indirectly attended to, although in some cases they can become themselves the direct subject of dispute. The most basic category entitlement, the foundation for any account to be treated as factual, is that of the speaker as a normal and rational individual. In the majority of interactions the normality of the speaker is simply assumed (Avery and Antaki 1997). In cases where the normality of the speaker might
be at stake, as for example in accounts of paranormal experiences, the status of the speaker is indirectly managed through a fortification of the account’s defensive operation, its careful construction in a way that fend off the possibility of the experience being attributed to defaults in the account producer (Wooffitt 1992). Direct challenges to the normality of the speaker are, however, very rare.

The ascription of mental illness is among the strongest strategies of undermining accounts, and is the kind of ascription that simultaneously rejects the factuality of the account and the normality of the speaker (Coulter 1973, 1975; Pollner 1975). As with all category entitlements, mental illness can be invoked in different kinds of interactions. I argue, however, that the institutional discursive contexts within which interactions take place condition the range of entitlements that can be invoked and negotiated. In psychiatric contexts, the context in which the current study was conducted, the category of mental illness underlies all exchanges and becomes readily available to interlocutors as a way of undermining accounts produced.

ANALYZING DELUSIONAL DISCOURSE

In the next section, I examine the negotiations of accounts of reality and their implications for the rationality of the speaker in the analysis of an interview with an individual diagnosed as delusional. The interview was conducted as part of a research project on psychotic discourse (Georgaca 1996). A number of unstructured interviews were carried out with patients in a psychiatric ward of a Teaching General Hospital. The interviewees were asked to speak about their recent experiences and the interviews took the form of conversations, where the interviewer, myself, was free to solicit speech and converse in any way seen fit. All interviews were recorded, transcribed, and analyzed using discourse analytic methods.

The interview with the person I call Don is used as a case study for the discussion of the close relation between the negotiation of plausibility and the speaker’s rationality. The analysis focuses on the rhetorical strategies through which claims on reality and experience are negotiated and is used to consider the extent to which the employment of conversational rules and rhetorical strategies and the appeal to socially available systems of understanding guarantees the establishment of an account’s plausibility. Methodologically, the analysis draws on

- work on the rhetorics of fact construction and negotiation conducted in ethnomethodology, conversation analysis, and discourse analysis (Potter 1996).
- work on the Foucauldian notion of discourses and the way they are drawn on in texts (Burman and Parker 1993; Parker 1992).
- the notion of subject positions (Davies and Harre 1990) and footing (Goffman 1979; Levinson 1988), which refer to the way speakers are positioned with regard to their statements and to each other and the implications of this for agency, neutrality and accountability.

The analysis developed is reflexive (Parker 1994) and engages with both the interviewer’s and interviewee’s turns of speech (Leudar and Antaki 1996). The line numbers indicate the place of the extracts in the interview. D refers to Don’s and I to the interviewer’s turns. Don is a British man in his late 30s, diagnosed as schizophrenic with no prior history of psychiatric treatment. The interview took place on the second day of admission.

“I’M AT THE MERCY OF THE DEVIL”: BUILDING UP A FACTUAL ACCOUNT

In the beginning of the interview, Don states that he has come to hospital because he hears the Devil’s voice and appeals to the Bible as a source of his claims.

EXTRACT 1

82. D: cause I swore the bible, and I had lost my soul. I swore the bible, and dear . . . I
83. went to court about it, you know?
84. I: hmm
85. D: I had done something
86. I: hmm
87. D: so God’s forgotten me and I’m at the mercy of the Devil
88. I: hmm . . . but you can always return to God, can’t you? can’t you? I mean, I think
89. it is also in the bible, isn’t it, like if you repent and, and recognize your sins and
90. things then
91. D: the thing is, what’s happening now, I’m so away, God’s given me the chance
92. I: yeah
93. D: to get back to him . . . it’s probably why he sent the voices to me
94. I: hmm
95. D: to punish me
96. I: hmm . . . right, right, so, so you think that it will last for a certain period of time
97. until the punishment finishes
98. D: yeah

In this extract, Don continues building up evidence for his claim by drawing on Christian religious discourse. The text abounds in religious phraseology [lines 82, 87, 91–93]. The claim is articulated as a straightforward factual account. The systematic vagueness of the statements (“I swore the Bible” [82], “I went to court about it” [82–83]) is a typical factualization device that allows the account to be constructed as an instance of a well-recognized scenario while avoiding possible questioning based on the event’s details (Edwards 1994).

After my minimal response to Don’s initial statements [84, 86], I articulate my disagreement [88–90]. My turn, articulated from within the same discourse, also abounds in religious terms and appeals to the Bible as the source of evidence. The disagreement is articulated quite strongly with tag questions (“can’t you?,” “isn’t it?”), which stress the obviousness of my statements and project anticipated agreement based on the event’s details (Edwards 1994).

98. I: hmm . . . but then who, I mean how do you know you’ve been followed?
99. D: cause I see people
100. I: so these devils, they are people?
101. D: yeah . . . someone was in the room the other day
102. I: mm hmm
103. D: he didn’t say anything, I don’t know how
104. I: so is it like real people?
105. D: yeah
106. I: being in the room
107. D: I told the staff about him
108. I: yeah?
109. D: but when they came, the staff come round there was no one there
110. I: yeah . . . do you think you might have just seen it without anybody being there?
111. D: dream it you’re saying?
112. I: like seeing a vision . . . not, not having someone there, like imagining it, that
113. you’ve seen it
114. D: no I didn’t imagine it
115. I: hmm
116. D: there was definitely someone there
117. I: hmm . . . did you, but you just felt him, you didn’t touch him
118. D: no
119. I: you didn’t speak to him
120. D: no
121. I: hmm . . . yeah, but I guess you would recognize what is like a shadow, or what
122. you’re not sure if it’s there or not and what is there . . . so you saw someone there, is
123. that it?
124. D: yeah

The extract starts with my explicit request for Don’s source of evidence concerning his claim that he is followed by smaller devils [98]. His response that he sees people [99] indicate the acknowledgement of my request and his willingness to provide evidence through appealing to perception. He then moves from a general statement to recounting a specific event of seeing someone in his room [101]. My questions [100, 104, 106] focus on the status of the devils as independently existing perceivable entities. Located at points where agreement or disagreement is sequentially expected, they serve the function of withholding agreement. This is also strengthened through the expression “these devils,” whereby I attribute the devils indirectly to Don, and “is it like,” which is a vague formulation with a flavor of potential dismissal. Don responds to my request for clarification with an attempt to articulate consensus and corroboration for his experience [107] (Potter 1996). Although obtaining consensual validation is constructed as a failed attempt [109], the important rhetorical function of evoking it is that Don establishes the status of the devils as independent observable entities and himself as someone who is actively concerned with intersubjective validation of his claims. The failure of his attempt is, therefore, constructed simply as an unfortunate incident.

My next turn is an explicit challenge to the factuality of Don’s account, articulated as a question on whether Don might have “just” seen something without it being there [110]. “Seeing something without it being there” is a difficult concept to articulate. Seeing is a subjective experience, but it also presupposes an existing object of perception that causes the experience. In this first turn, I grant Don the subjective experience of seeing and question the existence of a referent of perception, which seems a contradiction in terms. Don picks this up and appeals to the subjective state of dreaming, which consists of seeing images with no simultaneous perceptual referent [111]. However, he is careful to attribute this statement to me with a change in footing. I clarify my original statement as “seeing a vision” [112], whereby I still grant the experience the status of seeing, but undermine the status of the referent as imaginary both implicitly (“a vision”) and explicitly (“not having someone there”). Then I proceed to “imagining . . . that you’ve seen it” [112–113], which is a more radical challenge to the status of Don’s subjective experience. Don’s response is a definite and unmediated denial of my challenge [114, 116]. The no in the beginning and the definitely later establish his certainty around his claims and his straightforward assumption of his statement in terms of footing.

Subsequently, I launch a second wave of challenges [117, 119], by formulating Don’s experience as “just felt him” as opposed to “touch him” and “speak to him.” The choice of the verb felt here is interesting. Feeling something refers to a subjective experience with a referent in the external world, but the subjective side is semantically stronger than the referent. It is also general enough to be used as an alternative to seeing and imagining, both of which have been made conversationally nonavailable. “Just feeling” in the lack of “touching” and “speaking to” is constructed here as further grounds for discrediting the status of the referent as an observable entity and therefore the status of Don’s claims as factual descriptions. Don is put in a position where he cannot but unwillingly accede to my version of his claims being the product of imagination rather than a factual account.
Interestingly enough, after my success in undermining the factuality of Don’s account, I backtrack and grant him a possibility that his claims are indeed factual [121–122]. I, however, perform this maneuver through a shift in footing, whereby I request Don to take responsibility for the statement, through the expression “I guess,” which prefaces my statement and question “is that it?” which immediately follows.

The strong negotiation of the factuality of Don’s claims is also played out in the interplay between the personal and impersonal pronouns used. In the first half of the extract, Don consistently refers to the object of his perception using third-person personal pronouns, in a way that descriptions of seeing someone are typically constructed (“someone” [101], “he” [103], “him” [107], and “no one” [109]). In the articulation of my challenges to Don’s account, I refer to the referent of Don’s experience using the impersonal pronoun it (“seen it” [110–112], “imagining it” [112]), therefore indirectly suspending agreement to Don’s claims to having perceived someone. I use personal pronouns only in negative phrases (“without anybody being there” [110], “not having someone there” [112]). Don takes this up in the subsequent turns, but distances himself from this formulation, in the first case by attributing the statement to me (“dream it, you’re saying?” [111]) and in the second case in the context of a negative statement (“no, I didn’t imagine it” [114]). When he subsequently asserts his position, he returns to the use of a personal pronoun (“there was definitely someone there” [116]). After Don’s strong reassertion of his claim, I take up his formulation and use the personal pronouns in the context of my next challenge [117, 119]. In my closing, backtracking statement I fluctuate between impersonal constructions in the beginning (“what is like a shadow,” [121] “what is there” [122], etc.) and the personal pronoun in the end, when I grant his account a factual status but carefully locate it in him (“so you saw someone there, is that it?” [122–123]).

The reason for this backtracking at the end of the extract needs considering. My challenges throughout the extract concerned the factuality of Don’s account and involved undermining both the status of the referent of Don’s experience and the status of the experience itself. Challenging the status of one’s experience is a common way of addressing reality disjunctures (Pollner 1975). It does, however, have profound implications for the integrity, credibility, and finally normality of the account’s producer (Coulter 1975), because subjective experience is ordinarily treated as a realm whereby each person has authority over themselves (Harre 1989; Shotter 1981). Granting Don the ability to recognize his experience, to have authority over it, is therefore a crucial step from my side to grant him enough integrity to make the conversation sustainable.

“You Might Have Seen It Because There Is Something Wrong With You”: Ascribing Mental Illness

If in the previous extract the rationality of the participants, which is the sine qua non of the sustainability of exchanges, was preserved through a backtracking maneuver from my side, in the following extract that very rationality is directly challenged through the ascription of mental illness.

**Extract 3**

139. I: hmm . . . so, but then, I mean you, if all this is happening to you then why did you want to come here?
140. D: cause someone said to me there’s something wrong with me, so hopefully the doctors will tell me what’s going round in me head
141. I: mm hmm [. . .]
149. I: yeah but like you’re saying on the one hand all this is happening and on the other hand you say there’s something wrong with you . . . so could you be imagining or . . .
151. D: someone’s told me that I was paranoid
152. I: yeah
153. D: so I went to see a doctor
154. I: yeah . . . so do you think there might be a chance that you are paranoid and then you, these are not really happening to you?
156. D: something’s happened
157. (4)
158. I: I mean, yes, I mean I believe, I absolutely believe that you [interruption by staff] I do believe that you hear the voices and you saw this person here... there is one possibility that this person was really here but there is another possibility that you might have seen it because there is something wrong with you or something, so, have you ever thought of that, that maybe that’s the reason why you’re seeing things and... 159. D: that I’m ill? 160. I: yeah 161. D: yeah 162. I: hmm, yeah (2)

The extract starts with a contrast constructed by me as a challenge to the factuality of Don’s claims [139–140]. One side of the contrast is “all this happening to you,” namely, being punished by God and followed by devils, phrased in a vague way and prefaced by if, indicating doubt and suspension of agreement. On the other side is a question around the reasons Don “wanted” to come to hospital, a request regarding Don’s motivation for his voluntary admission. The underlying assumption is the common knowledge that people admitted to psychiatric wards are mentally ill. The implicit reference to mental illness is picked up by Don in his response [141–142]. Two elements are worth noting here. First, Don’s statements around his mental illness are constructed as having others as their principals (“someone” and “the doctors”), whereby he is simply reporting what others told him or are expected to tell him. In this way, he addresses my question while simultaneously withholding authorship and responsibility for the statements uttered (Pomerantz 1984). Second, the statements have a degree of vagueness, which allows them to be seen as addressing the assumptions underlying my challenge but also leaving open the possibility of other explanations. “There’s something wrong with me” and “what’s going round in me head” can refer either to mental illness or to the explanations he has offered up to this point, namely, having sinned. Through these two strategies, Don addresses my concerns while distancing himself from the imputation of mental illness that my challenge implies.

After a short description of the admission process [144–148], I pursue the challenge, again in the form of a contrast between “all this happening” and “there is something wrong with you” [149–150]. Both are treated as a rewording of his accounts, whereby I am constructed as a neutral judge simply pointing to the inconsistencies between them. It is worth noting that this is a contrast that I construct because my formulations focus on some of the assumptions these vague assertions carry; I construct the Devil version as a clear factual account of “things happening to him” and the “something wrong with me” version as referring to mental illness. Subsequently, drawing on the common sense assumptions around mental illness, I articulate a conclusion around Don imagining things in the form of a question.

The way the contrast is formulated leaves Don little way out. If he admits to the inconsistency pointed to, he would be undermining his rationality and by implication falling into the category of being mentally ill. If he takes on the version of “this happening to him” he would be unable to account for him voluntarily entering the hospital. If he takes on the “something wrong with you” side of the contrast, he would be willingly constructing himself as mentally ill and by implication his accounts would be undermined as the product of mental illness. His preferred response is a repetition and clarification of his earlier statements [151–153]. This repetition cannot, however, be attributed to a nonadherence to conversational principles; it is rather the result of Don’s difficulty of directly addressing my challenge without putting his rationality and credibility as a speaker seriously at stake.

My response carries on with the same challenge [154–155]. Don’s response to my relentless pursuit does not directly engage with the contrast I have constructed and retains the vagueness of his previous statements. “Something’s happened” [156] seems to reassert the factuality of his version, but it can also refer to something happening “in his head,” that is, “being paranoid.” The statement has an objectivist flavor, of
something—be it punishment by God or paranoia—happening to him independently of his will and interests, which he has no subjective implication in. The vagueness of the statement, together with the strength of its assertion, seems to bring the conversation to a halt, indicated by the long silence that follows [157].

Subsequently, I attempt to recover the conversation by granting Don that “something has happened” before I proceed to repeat the same challenge [158–163]. In the first part of my statement, I grant Don his subjective experience of hearing voices and seeing something, while questioning the factuality of his account and offering mental illness as an alternative explanation. The undermining of Don’s account can be traced through the gradual passage from “you saw this person” to “you might have seen it,” and ending with “you’re seeing things,” which has a strong discrediting flavor typically associated with mental illness ascription. Don translates my statement as an ascription of mental illness and for the first time uses the term [164]. He still, however, distances himself from it, articulating it as a question and as an implication of my statement. Moreover, his using ill is ambiguous enough to leave open the possibility of other conditions, such as physical illness, neurological problems, and so on. The exchange at the end of the extract concerning Don’s uncertainty about this statement [167–169] is again an attempt to smoothen up the conversation and make it viable to continue.

In this extract, the factuality of Don’s account is challenged through a direct ascription of mental illness. Mental illness was invoked as an overall discrediting strategy, having the power to automatically undermine the whole of Don’s account. My challenge draws on the medical discourse on mental illness that permeates common sense understandings of it with all its implications for the rationality and credibility of the person to whom it is attributed (Harper 1992). The assumptions around mental illness ascription seem to be shared by both participants in this interview. I actively construct it; Don recognizes the construction, articulates it, and is drawn to reluctantly assume it. As with extract 2, questioning the factuality of accounts via the rationality of participants is a difficult enterprise and the context of disagreement and conflict is apparent in both extracts.

**CONCLUSIONS: Factualization, Plausibility, and Discourse**

The analysis of selected extracts from the interview with Don is offered as a case example of the negotiation of claims on reality and experience in reality disjunctures (Pollner 1975) and interpretive asymmetries (Coulter 1975), cases in which the nature and interpretation of events, respectively, are at stake. The intricate negotiations through the use of factualization devices and the appeal to socially validated discourses as well as the elaborate shifts in subjective positions establish both participants as competent social actors, sharing cultural assumptions, and observing conversational rules. The implication of this for the psychiatric diagnostic criteria for delusions has been explored elsewhere (Georgaca 2000) and will not be addressed here.

The aim of this paper, apart from documenting the use of factualization devices in cases of extreme disagreements over accounts, is to discuss the relation between ordinary factualization and the discursive establishment of plausibility. It is acknowledged in discourse literature that the competent employment of factualization devices is the precondition for the factuality of an account to be considered, but that this does not automatically guarantee the establishment of an account’s factuality, because any account can be conversationally disputed (Potter 1996). The question of why certain accounts are then treated as factual and others are not is side stepped rather than addressed in discourse literature. This, I argue, is due to the impossibility of addressing the issue when the analysis and discussion are restricted to the local context of negotiation. The accomplishment of factuality is treated by ethnomethodologists and conversation and discourse analysts as a conversational matter that is locally disputed and managed. The management of factuality is addressed to the extent that it becomes an issue that participants them-
selves orient to in the course of interaction (Sche- gloff 1997). The removal of reality as a ground against which local negotiations of claims can be judged, together with the researcher’s commitment to epistemological indifference and refusal to transcend local and ordinary modes of reasoning, leave conversation and discourse analysts no other position than to follow through local negotiations around reality while being unable to account for the prevalence of certain claims over others (Bogen 1990; Wetherell 1998).

Moreover, the restriction of focus to local conversational exchanges does not allow an analysis of the way certain accounts of reality are taken for granted and acted upon in the course of social action. Conversational participants can argue over accounts endlessly, and there is no way of definitely establishing claims on reality through conversational means; in practice, however, individuals validate certain accounts through acting upon them in a way that grants them factuality (Pollner 1975). The practical decision of which of the competing accounts will achieve this status, I add, depends less on how well they are argued and more on wider social factors.

In the interview presented, the plausibility of Don’s accounts was the direct and indirect subject of negotiation; it therefore qualifies as a participants’ concern. In the extracts analyzed, no agreement seems to be reached concerning the factuality of Don’s accounts apart from the mutual establishment of the reality of hearing and seeing as subjective experiences. Throughout the interview, I fluctuate between subtly withholding agreement and vehemently challenging Don’s claims. The first point that needs accounting for is why Don’s claims are denied the status of factual descriptions. His accounts seem to be adequately structured, presented, and defended against, using well-documented factualization rhetorical strategies. Moreover, they are backed by an appeal to Christian religious discourse (extract 1) and to the domain of subjective experience (extract 2), both of which are recognizable discourses, domains of cultural understandings. From my side, I recognize the social currency of his claims and directly engage with them in the first two extracts. The culmination of my discrediting Don’s account, however, is performed through an appeal to medical discourse around mental illness (extract 3). The starting point, then, for addressing the question can be the consideration of the differential social currency of the discourses we appeal to. Christian discourse is readily available to members of contemporary Western societies, but with religion being in decline, appeals to God and the Devil do not have the same social potency. On the other hand, with the increasing medicalization and psychologization of Western societies (Rose 1989) the medical discourse offers a much stronger and indisputable version. This differential social currency of the two discourses and their potential for building plausible accounts is witnessed in the interview, where I use the mental illness ascription to discredit Don’s religious explanation, but he does not use the Christian discourse to challenge my version. It could be imaginable, for example, that he could discredit my claims on the grounds that I am not a believer and therefore not worth engaging with.

The above comment leads to the second issue, the primarily offensive orientation of my claims and the primarily defensive orientation of Don’s. Why is it that I am conversationally given the right to challenge Don’s claims, and he does not respond back by challenging mine? The differential social currency of the two discourses provides a first answer. But it is more than probable that if this exchange took place in a monastery, the positions would have been reversed. The social currency of discourses is not independent of the context within which appeals to them take place. The interview took place in a psychiatric ward in which Don has been institutionally positioned as a mentally ill person, a patient, not only through conversational exchanges (conversations, diagnostic interviews, treatment sessions, etc.) but also by the physical act of having been voluntarily admitted in a psychiatric ward and receiving medical treatment (Barrett 1988; Hak 1989). His claims of being punished by God have more than likely been treated as symptoms of his mental illness by his social environment and mental health professionals. Category entitlements can be rhetorically played up and un-
dermined in the course of conversations. Some subject positions, however, might be already socially and institutionally determined, and this to a large extent conditions their availability for rhetorical use and seriously hinders the potential of their refutation. At the end of the day, however well Don argues his case in interactions within the ward, he cannot but argue it from the institutional position of a patient; his account, however rhetorically persuasive, is always already undermined in practice.

The factuality and plausibility of Don’s account has been undermined both locally in the interview and within the institutional context the interview took place. The discrediting of Don’s account has not been based on testing his claims against reality; it has rather been a discursive process through and through. The analysis developed in this paper demonstrates the discursive negotiation of accounts through the use of rhetorical strategies and the appeal to socially available discourses, and supports the social constructionist thesis of the discursive construction of reality. The conclusions, however, drawn from it indicate that for an adequate understanding of the discursive establishment of plausibility, the notion of discourse cannot be restricted to local conversations, but should include the wider social and institutional processes that establish the conditions of possibility for certain claims to achieve the status of facts more easily than others (Parker 1990; Stenner and Eccleston 1994; Wetherell 1998).

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