

Stories of Change:

Comparative Time-Framed Experience Telling in Health Promotion Group Discussions

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### **Abstract**

In this article, we examine comparative time-framed experience telling: episodes of interaction in health promotion group discussions in which one of the participants tells their experience and, in response, another participant tells their own experiences from separate moments or periods of their life and compares them. In so doing, group members reinforce and encourage the previous speaker's positive stance or challenge the negative stance towards contextually relevant objects: behavior change and suggested solutions. This practice allows group members to demonstrate their independent access to experiences that are similar to those of the other, present evidence of similarities and differences between the experiences, and show their epistemic independence regarding their claims. By recontextualizing the experience of the other in this way, it becomes possible for the group members to interpret and even oppose it while maintaining a level of understanding of the differences between the experiences in question and respecting them.

## Introduction

In institutional group work, such as health promotion groups, talking about experiences is one of the central ways in which the objectives of the group are pursued (Borek & Abraham, 2018; Frigerio & Montali, 2016; Cormack, Jones, & Maltby, 2018; Öster et al., 2013; Due-Christensen et al., 2012; Mazanderani, Locock, & Powell, 2012; Lund et al., 2019; Patterson, Fleming, & Doig, 2019; Kennedy, Rogers, & Crossley, 2007; Logren et al. 2017a&b). Nevertheless, talking about experiences poses a practical dilemma for the participants: how to manage, on the one hand, the uniqueness of an individual experience, and, on the other, the accessibility, shareability, and comparability of experiences – and thus, how to address the claims participants make on the grounds of their experiences? The main contribution of this article is to describe one interactional practice that participants of health promotion groups use to overcome the dilemma: *comparative time-framed experience telling*. These are episodes of interaction where, in response to other group members' experience telling, speakers tell about their own experiences in separate moments or periods in their lives – two points in the past, or one point in the past and the present moment – and compare them. Thus, by contrasting their own experiences through the two reference points in time, speakers produce a story of a successful change process and relate it to the experience of the first speaker.

Health promotion activities are commonly conducted in groups, but there is little empirical research on the interaction that takes place between group members. Earlier research has explored the efficacy of group interventions and the experience of participation in groups, showing that interaction processes are indeed important with regard to how the group functions and whether it may achieve its objectives (Hoddinott et al., 2010; Taggart et al. 2012; Hughes et al, 2017; Boström et al. 2014). Studies on interaction have mainly focused on the activities of the group leaders (for example Miller & Silverman, 1995; Pino, 2016;

Tiitinen et al., 2018), instead of on the discussions that take place between group members.

This article aims to illustrate comparative time-framed experience telling as one specific interactional practice that contributes to talking about experiences in health promotion group discussions.

### **The Interactional Constraints and Resources of Telling and Sharing Experiences**

Experiences are the “working material” in many institutional group contexts where the aim is to work on the client’s perceptions and to reflect upon them: to redefine and reinterpret them in order to achieve change in the mental and behavioral processes of the client (for example, Stead, Carroll, & Lancaster, 2017; Weiste, Voutilainen, & Peräkylä, 2015). Further, telling and sharing similar experiences among group members is considered a crucial activity through which institutional tasks are pursued (Yalom & Leszcz, 2005; Kennedy et al., 2007; Holmes & Kivlighan, 2000; Halonen, 2008). One resource for sharing experiences is the so-called second story, which is given in a response to the first speaker’s story (Sacks, 1992, Vol. 2, pp. 249-260). Second stories, in which the teller positions themselves in a way similar to the way the teller of the first story positioned themselves in their story, are considered to show understanding and empathy towards the experiences of the first story teller (Arminen, 1998, 2004) and to interpret and recontextualize the described problem (Ruusuvoori & Voutilainen, 2009). Hence, second stories are considered to have a therapeutic effect. Our own previous studies have shown that sharing and addressing experiences is a central activity in group discussions, and they are closely intertwined with practices of *stance-taking*, (Logren et al. 2017a, 2017b, 2019) – that is, the ways in which participants in interaction evaluate the topics of talk, position themselves in relation to these topics, and align their positionings in relation to those of the other participants (DuBois, 2007; DuBois & Kärkkäinen, 2012).

Telling an experience is a combination of knowledge and affect: the speakers display their epistemic access – that is, their acquired knowledge of certain events, and their affective

stance towards these events (see Heritage, 2011). The epistemic primacy, that is, ‘the ownership of experience’, is regarded to belong to the one who has experienced it. Hence, others have limited epistemic access to the experience, and thus limited rights to assess, interpret, and define that experience (Sacks, 1984, pp. 424-428; Peräkylä & Silverman, 1991). At the same time, if others can demonstrate that they have epistemic access to a similar experience, the individual experience can be treated as shared. The epistemic primacy of individual experience and limited access to the experiences of others is constantly oriented to in interaction (Sacks, 1992, vol. 1, pp. 764-769, vol. 2, pp. 243-244 & 255-256; Heritage, 2011, 2013; Kuroshima & Iwata, 2016; Hayano, 2016). Due to the epistemic primacy of the teller of the experience, the telling operates in a powerful way in supporting the argument of the speaker (Heritage & Raymond, 2005; Kääntä & Lehtinen, 2016), and claims made on the grounds of the experience may be difficult to deny. Furthermore, since telling an experience embeds an affective stance, it creates relevance for affiliation (see Heritage, 2011; Heritage & Lindström, 2012; Ruusuvuori, 2005; Ruusuvuori et al. 2019; Jefferson, 1988). This, in turn, is a crucial element in the collaborative building and strengthening of an argument and in the co-constructing of a shared understanding or identity (Arminen, 1998; Pollner & Stein, 1996; Lehtinen, 2006; Kääntä & Lehtinen, 2016; Andersen 2017).

When people talk about their experiences, they strive to account for their responsibility and motives regarding their conduct; this is achieved through various features of talk (Wiggins, 2017, pp. 71; Webb, 2009; Edwards & Potter, 1992, pp. 168), including references to time. References to time offer a resource to create coherence and order in the telling (Raymond & White, 2017; Sacks, 1992, Vol. 2, pp. 171-172, 1988). Raymond and White (2017) argue that different ways to design a time reference invoke different kinds of affordance and, thus, serve different kinds of social purposes – for example, in terms of who knows what, who is entitled to know it, and what kind of knowledge is known to be shared by

the participants. Furthermore, different ways of designing time references are able to convey temporal qualities, like permanence or something occurring only temporarily, happening suddenly, or developing slowly. These aspects may become important in the context of the telling, for example in accounting for knowledge, attributing responsibility, or establishing the intelligibility of the reported behavior or events. Clark and Rendle-Short (2016) show that in therapy, clients use time references when they provide accounts and updates concerning what has happened between the therapy sessions, hence orienting to the expectations of achieving the change that they consider relevant in that particular institutional context.

The research question we ask is how health promotion group members take a stance on the discussed issues while also managing their relationships with each other when they talk about their experiences. We describe a particular interactional practice we have identified, *comparative time-framed experience telling*, and the objective of this article is to examine what is accomplished in and through this practice.

### **Data and Method**

The study draws on the analysis of video recordings of health promotion group sessions in two types of interventions in Finland. The first intervention targeted adults at risk for developing type 2 diabetes, and the second female entrepreneurs. We will henceforth refer to these interventions as ‘Diabetes groups’ and ‘Wellbeing groups’. The Diabetes groups met face-to-face with one group leader, while the Wellbeing groups met mostly via Skype with two group leaders. Further information of the data is described in Table 1.

	<b>Diabetes groups</b>	<b>Wellbeing groups</b>
<b>Context of the intervention</b>	Health counseling for adults at risk of type 2 diabetes (face to face)	Health and work ability counseling for women entrepreneurs (via Skype)
<b>Aims of the intervention</b>	To increase skills for losing 5 kg of weight, follow a diet of high nutritional quality, improve cognitive eating restraints, and increase physical activity.	To promote work ability and health, increase physical activity and nutritional quality, and support stress management and recovery from work.
<b>Duration of the intervention</b>	4 sessions (90 minutes each) over 2 months, 1 or 2 follow ups within 6 or 12 months	4 sessions (90 minutes each) over 4 months, 1 follow up within 6 months
<b>Characteristics of groups and participants</b>	6 groups, 4–8 group members and one leader per group. Total 38 group members (female and male) and 4 leaders.	4 groups, 3–6 members and two leaders per group. Total 20 group members (all female) and 4 leaders.
<b>Amount of the analyzed sessions</b>	15 x 90 minute sessions, 1–3 sessions per group	18 x 90 minute sessions, 3–5 sessions per group
<b>Duration of the analyzed data (h)</b>	22.5 hours	27 hours

Table 1. Summary of the data.

Both interventions were developed and organized by the Finnish Institute of Occupational Health<sup>1</sup>. Third author J.L. was involved in developing and organizing the interventions and gathering the data. First author A.L. and second author J.R., who conducted the analysis, have no connection to the interventions. The collection and the use of the data was approved by the coordinating ethics committee of the hospital district of Helsinki and Uusimaa (document number 50/E0/2007) for the Diabetes groups and by the ethics committee of the Finnish Institution of Occupational Health for the Wellbeing groups. The group participants were recruited via health care services to participate in the Diabetes groups, and via entrepreneurial organizations, social insurance institutions, and media to participate in the Wellbeing groups. All participants gave their written informed consent.

<sup>1</sup> Laitinen et al., 2010; Turpeinen et al. (forthcoming).

The Diabetes group sessions were recorded with two video cameras so that all participants were visible in at least one of the cameras. The Wellbeing group Skype sessions were recorded by focusing the camera on the group leader's screen or by using the screen capture feature of Skype, hence capturing the same view as the group participants themselves had on their screen, displaying the current speaker and the shared materials. The sample of the data was chosen so that it would include the captured sessions from different groups in different phases of the interventions as diversely as possible. The analysis focused on interactional practices and the unit of analysis is a turn in talk. All data are in Finnish and were transcribed verbatim, and all personal details were changed to pseudonyms. After establishing the analytic focus, relevant sections of data were transcribed following the Jeffersonian system, in which details of talk such as overlaps, gaps, intonation and laughter are taken into account (Jefferson 2004; see supplementary material for transcription key).

The theoretical and methodological background of this study is discursive psychology. It focuses on the practices of interaction in and through which participants bring up their orientation to the responsibility and accountability regarding the particular issues they talk about and make them relevant for the other participants. Interaction is understood to be situated in the immediate social context, both taking into account and forming the participants' understanding of the current situation. The basic principle of discursive psychology is that speakers use a variety of interactional resources to construct "versions of the world" – explanations of events, attributions of psychological notions and cognitive states, and accounts of conduct – which in turn may have implications in the local context (Edwards & Potter, 1992, pp. 2 & 168; Wiggins, 2017, pp. 4-19). The analytic aim is then to describe how particular discursive practices are constructed, and, further, what kind of consequences they may have in their context. The validity of discursive psychological analysis is based on the principle that the claims made are grounded in observations of the data and in

participants' own orientations towards specific aspects of conversation (Wiggins 2017, pp. 135-145).

The research question – how group members take a stance on the discussed issues while also managing their relationships with each other – was formulated from an emic, data-driven perspective and was based on earlier analysis and observations of the data. Going through the data, we found segments of talk in which a speaker makes a comparison between different phases or moments of their life in response to the experience telling of other group members. These turns were not always in an immediate second position in relation to the previous experience telling, but nevertheless referred to that turn. As such sequences of talk have not been previously documented in interaction research, we chose them as the focus of our analysis in order to examine what is accomplished in and through them.

In the analytical process, after compiling a collection of twelve segments of comparative time-framed experience telling, we analyzed them in their sequential context. First, we examined how the speakers described the similarities and differences of their own experiences in relation to what the previous speaker had described, and how they located the details of experience in time. Then, we examined what they accomplished by doing so. The departure points for the analysis were epistemic and affective stances – that is, the way participants display their knowledge upon and affectively assess the topic of talk, and how they orient to equivalent displays from the other participants – and how this stance-taking is accomplished and treated in interaction. In this study, stance-taking is regarded, first and foremost, as social: displays of knowledge and affect are not understood as expressions of cognitive states, but as displays and management of social relationships (Heritage, 2013, 2002; Du Bois, 2007; Du Bois & Kärkkäinen, 2012). Furthermore, we scrutinized how the speakers positioned themselves as experiencing subjects in their stories and in relation to the previous speaker's turn (Sacks, 1992, Vol. 2, pp. 249-260). Finally, we categorized the

segments according to the stance taken in the first speaker's turn, and further according to the position the second speaker takes in their turn in relation to the position in the first speaker's turn.

### **Results**

The main finding we present in this article is a practice of interaction that we call comparative time-framed experience telling, which are, essentially, explicitly designed stories of change. We show how comparative time-framed experience telling displays independent access – the speaker has obtained particular information on their own – (Heritage, 2013) to comparable experience and reinforces epistemic independence – that the speaker's views were formed independently, prior to the ongoing discussion (Heritage, 2002) – in relation to the previous speaker's experience and to the claims that are made on the grounds of that experience. Further, we show how comparative time-framed experience telling may differentiate the speaker's own position from the position of the other and show respect for the other's differing experience. It simultaneously produces and reflects the similarity and difference of the experiences, hence explicating the possibility of change and positioning the speaker in a favorable light as successful and experienced, thus entitled to interpret and even redefine the experiences of others.

In this section, we show how comparative time-framed experience telling reinforces, acknowledges, and encourages or challenges the previous speaker's talk. In the data, there were altogether twelve instances of the practice (Table 2). They occurred in response to turns in which a first speaker took either 1) a positive stance or 2) a negative stance towards a particular change in behavior.

<b>Category:</b>	<b>1a</b>	<b>1b</b>	<b>2</b>
<b>First speaker's turn:</b>	Takes a positive stance towards change and describes an accomplished change in behavior	Takes a positive stance towards change, presents a current problem and some plans for solution	Takes a negative stance towards change or recommended solutions for change
<b>Second speaker's turn:</b>	Comparative time-framed experience telling: a story of change		
<b>Stance in the story of change:</b>	Aligns with the positive stance of the first speaker's turn	Aligns with the positive stance of the first speaker's turn	Differs from the negative stance of the first speaker's turn
<b>Positioning of self in the story of change:</b>	Similar as the first speaker described	Similar in the first reference point of time, different in the second	Similar in the first reference point of time, different in the second
<b>What is achieved with the story of change:</b>	<i>Reinforcement</i> of the first speaker's description of accomplishing a change in behavior and positive stance	<i>Acknowledgement</i> of the first speaker's problem implication and <i>encouragement</i> of the plans for solution and positive stance	A counterclaim that <i>challenges</i> the presented claims and the negative stance
<b>Number of instances:</b>	3	4	5

Table 2. Categories of comparative time-framed experience telling

In the first category (1a and 1b), comparative time-framed experience telling aligned with the positive stance taken by the previous speaker and either a) *reinforced* the first speaker's description of accomplishing a change in behavior and of their positive stance, or b) *acknowledged* the first speaker's problem implication and *encouraged* their plans for a solution and their positive stance, often including a "word of warning." In the second category (2), the comparative time-framed experience telling differed from the negative stance initially taken and produced a counterclaim that *challenged* the presented claims and the negative stance. In the following, we illustrate with data excerpts first categories 1a and 1b, and then category 2. The original transcripts with interlinear gloss and English translations are provided as supplementary material. Here, we present the English translations. Transcript symbols are explained in the supplementary material. In all excerpts, the first speaker is

marked with A, and the second speaker – that is, the one that produces the comparative time-framed experience telling – is marked with B. All analyzed instances of comparative time-framed experience telling support positive stance towards change and suggested solutions.

### **Supporting Change by Aligning with the Previous Speaker's Positive Stance**

Comparative time-framed experience telling that aligns with a positive stance taken by the previous speaker occurs in two types of sequential contexts: a) following a previous speaker's description of an accomplished change in behavior, and b) following a previous speaker's implication of a problem and a suggestion for a potential solution (see Table 2). In both contexts, comparative time-framed experience telling similarly composes a story of change, but accomplishes different types of social actions. In the first case, the stories describe an experience that is similar to the first speaker's description and maintain a similar position in the story as the previous speaker described. We call these *reinforcing stories*. In the latter case, the stories describe an experience and a position similar to the first speaker's description at the first reference point in time, but then, at a second reference point in time, describe positive development, thus diverging from the position the first speaker took in the previous turn. We call these *acknowledging and encouraging stories*.

#### **Reinforcing stories**

Reinforcing stories unfold in sequences where a first speaker talks about their experience of a change in their behavior and the second speaker tells about a similar experience using a comparative time-framed experience telling. The second speaker shows independent access to a similar situation as the first speaker, thus displaying affiliation instead of merely claiming it (Heritage, 2013, 2002; Sacks, 1992, Vol. 2, pp. 252; Ruusuvuori, 2005; Lehtinen, 2006). Further, by describing their experience through a specific time-frame, the second speaker manages to provide evidence that their claims are formed independently

(Heritage, 2013, 2002), and also that the changes were successful, thus granting them authority. These aspects are illustrated by Excerpt 1.

In Excerpt 1, the first speaker, Diabetes group member A, tells the group that he has stopped adding salt to his food, and he claims that it is possible to get used to the taste of less salty food (lines 1–15). In response, the second speaker, group member B, tells about a similar experience: he has also stopped adding salt to his food. He elaborates the experience of a change in his taste preferences further by comparing the two points in time: *in the beginning*, the food without salt tasted bad, but *now* he feels the food does not need the salt anymore (lines 17–23). The story receives minimal acknowledgements from A and the group leader.

**Excerpt 1: Reinforcing story.(Diabetes group)**

01 A: salt t- one does not tend to add that.  
 02 I d- at least I have left it out that erm  
 03 .hh I don't add that salt.  
 ((9 lines omitted))  
 13 A: breakfast, breakfast porridge is one example=  
 14 =I eat porridge without salt.  
 15 one does get used to that.  
 16 Y: mcht yeah.  
 17 B: yeah, it is indeed erm, like,  
 18 **when my son was born.** (.)  
 19 **when he started to eat the same food as us,**  
 20 (0.2) .hh (0.4)  
 21 and, the salt was left out so **in the beginning** it felt  
 22 like it tastes bad indeed  
 23 but **now** one doesn't indeed miss the salt.  
 24 A: mm  
 25 GL: ↑mm-m  
 26 (.)

In his description of his experience (lines 1–15), A takes a positive stance towards reducing salt intake, despite implying that there may be some discomfort, in his remark “one gets used to that” (line 15). He does not specify how recent this change in behavior has been, whether it occurred during the intervention or had already happened before it, or for how long

he has succeeded in maintaining this behavior. Even his claim that “one gets used to that” leaves ambiguous whether he has gotten used to the taste already or is just hopeful that this might happen eventually. Nevertheless, he has successfully accomplished a change in his behavior.

In response, B picks up the aspect implied in A’s experience description, the potential problem of deterioration of taste, and provides evidence of the details of his own change process. Through the time references “when my son was born” and “when he started to eat the same food as us,” he locates the change in behavior in the past – the other participants know that his son is not a baby anymore, so this is not a recent change in behavior, but one that occurred before the intervention. Also, with the time reference “now,” B manages to show that this change in behavior has lasted over time, and furthermore, specifies exactly how much time has elapsed, assuming other members know about how old his son is, granting extra validity and authority. In terms of epistemic stance, B shows independent access to experiences comparable to that which A has described and epistemic independence regarding the claim of getting used to the taste of less salty food. B’s views follow along the lines of what A has said, but they are formed independently, showing that he can legitimately comment on this topic due to his personal experience.

Furthermore, the time references give an account for the change in behavior. The first time reference, “when my son was born,” refers to a point in time that represents a major change in life. The second time reference, “when he started to eat the same food as us,” refers to caring for his son’s wellbeing at a specific point in time, resulting in reducing the salt in his diet. He points out the challenge he experienced “in the beginning” and contrasts it with his non-problematic current situation by the last time reference, “now,” followed by a description of the permanence of the change. So, B reveals that he has also used more salt, reduced it due to a significant occurrence in his life, and suffered from the deterioration of taste that leaving

out salt entails – but, most importantly, that he got over it. In the design of the story, B alternates various linguistic means of emphasizing and fading the experiencing subject. In particular, the gist of his story, “in the beginning it felt like it tastes bad indeed, but now one doesn’t miss the salt,” is designed so that the experience is offered as shareable, not entirely confined to his personal domain (Laitinen, 2006). Suomalainen and Varjo (2018) argue that the alternation of the subject provides descriptions of the general state of affairs as the basis of the claims and of the unique, personal examples that reinforce the claims. By providing minute details, B produces a coherent, reliable story about behavior change and his experiences, which affiliates with what the previous speaker, A, has said. In terms of affective stance, it elaborates the potential trouble implied by A and shows understanding and sharing of it, as well as the possibility of overcoming that trouble.

Hence, B takes a stance towards the change process similar to the stance A took in his previous description of experience: in spite of some discomfort, his stance towards reducing salt intake is positive. B gains a position as experienced and successful: he has succeeded in reducing salt from his diet and managed to keep up the change, thus showing that regardless of some minor challenges, such a change is possible. This story aligns with and reinforces the positive stance of the previous speaker towards the change process and the suggested solutions for a healthier lifestyle.

### **Acknowledging and encouraging stories**

Acknowledging and encouraging stories refer to those cases in our data where the first speaker presents a problem and a possible solution to it, and then the second speaker tells a story about their experience of a similar problem and a similar solution that succeeded. In these cases, the second speakers again show understanding and affiliation with the previous speaker through demonstrating independent access to a similar experience. Nevertheless, at the same time, with comparative time-framed experience telling, they also differentiate their

own experience from the experience of the other: their experience of the problem has taken place in the past, and they have already overcome it and accomplished a change in their behavior, whereas the first speaker is currently facing the problem. Excerpt 2 is a case in point.

Excerpt 2 takes place during a Wellbeing group session where the group is working on an assignment in which they are supposed to come up with possible solutions to their problems. Group member A has described on several occasions that she is exhausted and feels that she is not able to handle all the work she has to do at her farm. Here, she returns to the problem of handling the workload and suggests a possible solution (lines 1–7). After a group leader’s minimal response (line 9), group member B tells an encouraging story of her own change process, acknowledging both the trouble implication and the suggested solution of A (lines 11-31).

**Excerpt 2: Acknowledging and encouraging story.(Wellbeing group)**

01 A: I at least think that one should like more,  
 02 (0.6) in one way or another, invest in oneself.  
 03 that one would find those means for one’s wellbeing andhh,  
 04 then probably for that, (.) work, (0.2) things related to work  
 05 one must hire that, or look for that,  
 06 (0.4) means that erm one copes with thathhh (0.6)  
 07 total amount of work or then to hire more temporary labor.  
 08 (2.2)  
 09 GL2: yeah. (1.2) Mm.  
 10 (0.6)  
 11 B: .hhh well for me it st- for me it went like that,  
 12 that e(h)r(h)m(h) ha ha, .mt .hh I was like,  
 13 **how long ago that would be then,** (0.2)  
 14 **maybe, over a year ago or something** so,  
 15 I had like reached that point in,  
 16 (0.8) the fatigue and, the health issues that,  
 17 (.) I had like two options that,  
 18 (.) like, I made it clear for myself  
 19 that it’s either up or down to go that,  
 20 it’s impossible to continue the same way. .hhh (.)  
 21 I had tried to talk to my family and hh,  
 22 and erm but, there wasn’t like that way  
 23 couldn’t find that kind of support for that and .mh resources so then,

24 (.) .hh then I started to talk, hh like,  
 25 to some of my closer friends and, .nff  
 26 that way some channels started to emerge that,  
 27 (0.2) that then I got my niece, (0.2) to our place,  
 28 (.) here, at home to accompany me and  
 29 by her means I have **now** got he-  
 30 =workforce to the cowshed as well, tha(h)t ha ha .hhh  
 31 that erm, really, really, it is really always worth to talk.

In her turn (lines 1–7), A takes a positive stance towards the need for change and the possible means to achieve that change: the current situation is problematic, so change is needed, and there are accessible and sensible ways to solve the problem. In her response, B, who is also a farmer, tells a story that indicates that she has had a similar experience of overwhelming exhaustion. The first reference point in B’s talk, “over a year ago” (line 14), indicates that these events have taken place in the past. Her story continues with a description of how she tried to solve the problem and finally succeeded with a similar solution to the one A suggested: sharing the workload with other people. The second reference point is again the present moment (line 29), which shows that the described problem is no longer current for B.

The way the story is designed, as a comparison of two phases in life, shows that B has independent access to similar problems in her past as A is facing right now, and she has experience in trying a solution similar to that which A is planning. Further, the story provides evidence that in her case, the solution has been a successful way to solve the problem. Hence, it legitimizes B to endorse the solution A suggested. Comparative time-framed experience telling, again, serves to establish the position of the speaker as “experienced.” The story of change works to differentiate the speaker’s current situation from their own past and, furthermore, from the other group member’s current situation. Compared to the previous excerpt, in which the previous speaker described an accomplished change, in this excerpt the previous speaker, A, is still facing the problems that B has already overcome. B has independently come to a solution, which she can now recommend, and encourages A to strive for it. In addition to an epistemic stance, the story takes up an affective stance in relation to

the previous speaker: by telling the story of her own experience, B displays an understanding of the burden A bears, and can affiliate to the experience even though she has already overcome the burdensome experience herself. B ends her turn with the advice that it is worth talking about one's problems. Thus, this story acknowledges the problem and the suggested solution, and furthermore is an encouraging story of hope that includes a word of warning: in the beginning of her story, B describes how she had reached a critical point, and thus she implies that it is wise to seek help before hitting rock bottom. It also demonstrates the authority that B has taken on. Again, the story aligns with the institutional goals of striving for wellbeing, and it aligns with and encourages the previous speaker's positive stance towards the change process and the solutions suggested.

### **Supporting Change by Challenging the Previous Speaker's Negative Stance**

In the second category, the comparative time-framed experience telling differs from the stance taken by the previous speaker. The first speaker's experience telling takes a negative stance towards change and suggested solutions: it criticizes or casts doubt over something that has been discussed before.

In these cases, the comparative time-framed experience telling in response to the negative stance-taking again builds a story about a successful change process, similar to what we have shown in the previous excerpts. They provide evidence for the second speaker's claims and differentiate the position of the speaker – “successful and experienced” – from the position of the first speaker as “having current problems,” similar to excerpt 2. Moreover, even while they differ from the previous speaker's stance, they show respect for the differences of current experience. The following example shows a case in point.

Excerpt 3 follows a discussion in Diabetes group between the group leader and group member A, who has a tendency of binge eating, especially candy. The group leader has given A advice on how mindful eating could help to control her bingeing habits. In the beginning of

this particular session, another group member, B, has announced that she has successfully refrained from eating candy. A responds to the group leader's advice by describing her shock at B's news, and she claims that for her, giving up candy would be very hard (lines 1–10). After the group leader's response (lines 14-29), B tells the story of her successful change process (lines 30-54).

### Excerpt 3: Challenging story. (Diabetes group)

1 A: because I was like, (.) so shocked when  
 2 B told about that in the beginning=she has in August,  
 3 (.) had candy for the last time? (.)  
 4 I find it such an inconceivable [issue  
 5 B: [hm hm hm  
 6 A: that someone can like bring herself.  
 7 GL: krhm yeah.=  
 8 A: =that it is such a big decision like,  
 9 I- I thought that it's almost like giving up smoking  
 10 [( ) be able to do that.  
 11 X :[(that, quite,)  
 12 (1.6)  
 13 A: mm  
 14 GL: yeah, isn't it interesting that,  
 ((14 lines omitted: Nutritionist talks about how everybody is different and has  
 their own strengths and challenges.))  
 29 GL: =°where's room for improvem[ent°  
 30 B: [it was indeed a big issue  
 31 for me too because I have been eager to eat [candy.  
 32 A: [yeah  
 33 B: **almost always when you go shopping so**  
 34 **you picked something from there and one was always thinking that**  
 35 **.hh @what would be good now@**  
 36 =but then after all when one started to think when eating that so,  
 37 (.) was it so good then.  
 38 (1.2)  
 39 B: because [then  
 40 A: [yeah  
 41 B: krh you see one, **(when) we,**  
 42 **had that trip to Helsinki** so then we  
 43 with my daughter we decided=we didn't tell anyone that  
 44 we bought candy in the train.  
 45 well for neither of us **it wasn't good anymore.**  
 46 (.) we didn't even necessarily eat [all of them  
 47 GL: [↑hmm  
 48 B: what we had then, we bough-  
 49 even though we didn't buy but chocolate bars

50 and then those little candy boxes.  
 51 Y: hm  
 52 B: so no- our ((Daughter's name)) said that this is not even good.  
 53 well that @well I don't think so eit(hh)her.@  
 54 A: ↑mm  
 55 B: that was [it.  
 56 GL: [isn't it interesting  
 ((Group leader continues by explaining that preference for sweet can be trained.))

A takes up a negative stance towards the process of change, claiming that she reckons giving up candy is an almost inconceivable challenge (lines 1–10). B begins her story (line 30 onwards) by showing her access to comparable experience, thus displaying an understanding of A's claim that giving up candy is difficult. She locates her own experience not only in time but also in place, with her description “almost always when you go to the store, you picked something from there and one always thought that ‘what would be good’” (lines 33–35), thus creating an illustration of habitual behavior that would likely be hard to change. Hence, B takes into account the views of A, that this kind of change process can be perceived as impossible – that is, she respects her views. Then B introduces another perspective to the topic: her contemplation about whether the candy was even enjoyable (lines 36–37), showing her access to evidence that suggests the change is easier to accomplish than what is presumed. This is met with a long silence (line 38), and B proceeds with another reference to time and place, her journey to Helsinki by train with her daughter, an event which the other participants are aware of (lines 41–44). This part of her story creates powerful evidence of the intrinsic and firm grounds of her changed preferences: even though she had the opportunity to have some candy, she did not find it delicious anymore (lines 45–52). She animates the discussion that took place in the train with her daughter (lines 52–53), thus providing the voice of an external witness to back up her claims (Holt, 1996), and, finally, she ends with a conclusion (line 55), indicating the permanent nature of her change. The story of change provides epistemic evidence to defend the speaker's perspective, and at the same time shows respect

for the current differences of experiences between the participants. This is achieved by elaborating on the change in the speaker's own stances, from a similarly negative stance in the past to a different, positive stance in the current moment. Again, the story is aligned with the institutional goals of healthier behavior. It challenges the previous speaker's negative stance towards these goals and the suggested solutions by questioning the grounds of the previous speaker's claims.

Excerpt 4 is another example of challenging stories. In the beginning of the excerpt, the Diabetes group leader prompts group member B to share his views about the benefits of regular meals. B suggests that it would be beneficial to eat something during the day, including breakfast. B's response aligns with the institutional aims of the group activity, and it implies that he may have personal experience with the beneficial habits in question. In lines 12–13, group member A claims that it is impossible to eat breakfast, thus resisting the activity B has just introduced as a good habit. Thereafter, B tells about his experience of how he himself, over a period of time, became accustomed to having breakfast (lines 18–35).

**Excerpt 4: Challenging story. (Diabetes group)**

01 GL: so, what are the benefits of that, t- that, (0.2)  
 02 you said that, that one should eat something during the day.  
 03 B: right. one wouldn't be so awfully hungry in the evening,  
 04 (then) one wouldn't need to binge (totally).  
 05 (0.4)  
 06 GL: mm  
 07 (0.8)  
 08 B: well day- to eat something during the day.  
 09 (0.2) in the morning. (1.0) during the day. (0.4)  
 10 then a little less in the evening.  
 11 (1.0)  
 12 A: well that's it when the system doesn't, accept food in the morn(h)ing.(.)  
 13 other than coffee.  
 14 (0.2)  
 15 B: hm (0.4) well that's, a matter of habituation  
 16 at least for me it was, [sometimes,  
 17 X: [yeah  
 18 B: **when I was younger** it was just, (.)  
 19 coffee and smoke in the morning and that was it.

20 =one could keep up until the evening with that.  
 21 (0.6)  
 22 B: >it's indeed when< one learns to eat every now and then.  
 23 (0.4)  
 24 X: °yeah°  
 25 (0.6)  
 26 B: it will indeed start to sink in  
 27 (2.0)  
 28 B: **nowadays** one just has no time.  
 29 A: mh hh, h h  
 30 (2.0)  
 31 B: but indeed one tends to eat **every morning**.  
 32 A: huh?  
 33 B: one tends to eat **every morning**.  
 34 A: mm yeah.  
 35 B: (I at least eat) [two- two slices of crisp bread **usually**.  
 36 A: [yeah, yeah  
 37 A: nyeah  
 38 (2.4)

A takes up a negative stance towards the suggested solution, implying that having breakfast is impossible. B does not merely disagree with A; he shows – by demonstrating independent access to a similar experience – that he can understand why A resists the suggestion. This is achieved by telling about his own experience at two reference points in time, the past and the present, thus giving evidence for change: the first reference point being “when I was younger” (lines 18–20), and the second point “nowadays” and “every morning” (31, 33, 35). B keeps adding these details one by one to support his claim and his differing stance and to challenge the negative stance taken by A. Further, by telling his own previous experience, B shows respect for A’s experience by taking into account the similarities and differences of their affective stances. The comparative time-framed experience telling shows that the second speaker has been in a similar situation as the first one; they have shared similar experiences and, likely, similar negative stances, but over time, the second speaker’s experience – alongside their stance – has changed. Hence, the second speaker also challenges the perception of something being “impossible” by showing that for them, it turned out not to

be impossible. With comparative time-framed experience telling, B challenges A's negative stance towards the institutional goals and the suggested solutions, aligning with them himself.

### **Discussion**

In this study, we have described how health promotion group members produce stories of successful change processes with comparative time-framed experience telling. In so doing, they first demonstrate epistemic access to experiences similar to those of the previous speaker, thus producing an interpretation of the experience and showing an understanding of and respect for the previous speaker's views. Second, they show epistemic independence of the argument made by the speaker and present evidence to support the argument. Third, they differentiate the speaker's past experiences from the current ones, and further, may differentiate the speaker's current experiences from those of the previous speaker.

We argue that comparative time-framed experience telling is one practice that solves the dilemma between the uniqueness and comparability of experiences. Locating the experience in time highlights its specific nature (Sacks, 1988; Raymond & White, 2017), but as we have shown, doing so by contrasting two different points in time highlights the comparability of experiences and the possibility of change. Thus, the speakers contemplate the similarities and differences of the experiences both to create generalizations and to challenge them.

The findings show that in group discussions, comparative time-framed experience telling serves several social purposes. Because they differentiate the speaker's position from the other's, they position the speaker as experienced regarding the topic of talk and thus as qualified to give advice and to interpret or challenge the other. Further, they contend with the dilemma of self-praise. Describing your own success is problematic (Speer, 2012; Wu, 2012), especially in a context where another participant has revealed having problems. With comparative time-framed experience telling, speakers produce evidence of change from a

problematic starting point to an unproblematic end, hence offering a description of a successful change process while avoiding direct self-praise. Finally, comparative time-framed experience telling is a one way to solve the problem of challenging the other without disrespecting them. If a speaker claims that, according to their own experiences, something is impossible, only they is entitled to the experience, and hence others have limited possibilities to redefine it. However, if the others can show evidence that they have independent access to a similar experience (Pino, 2017) and further, evidence of change in that experience, it enables them to also challenge the previous speaker's experience. As the analysis of the comparative time-framed experience telling that challenges the negative stance of the previous speaker shows, the second speakers take into account the perspective of the previous speaker that something can be understood as impossible – that is, they respected their views. At the same time, the speakers also showed that, regarding the evidence they presented, the particular issue that was claimed as impossible turned out to be possible. Hence, the results add to the knowledge concerning what kind of interactional work participants do in the sharing of experiences.

Earlier research has described how empathy is shown by telling similar stories in response to the previous speaker's stories (Arminen, 1998, 2004; Sacks, 1992, Vol. 2, pp. 249–260). In our data, the comparative time-framed experience telling was not always a “second” story, in that it did not follow some “first story”; it was produced in response to various types of experience descriptions, such as complaints and trouble implications. This study contributes to the understanding of stories in response to descriptions of experience, showing that they may not only endorse but also challenge the stance of the previous speaker. Moreover, the findings demonstrate how the speakers show empathy and understanding, while at the same time managing to disagree. Furthermore, as we have shown, the comparative time-framed experience telling oftentimes orients to and affiliates with the

trouble implication of the previous turn to which it refers, and thereafter introduces the possibility of change. In addition to showing affiliation with the problematic experience, comparative time-framed experience telling reconstructs the arguments and the shared understanding. Since this is a very explicit way to design a story, indicating a beginning and end, it is a powerful rhetorical device to display knowledge, support the presented arguments, explain reasons for conduct and attribute credibility (see Cranwell & Seymour-Smith, 2012; Veen et al., 2010; Locke, 2004). The analysis describes how the speakers position themselves as someone who is already “a step ahead” of the other, who has “been there, done that” with regard to the process of behavior change, and who therefore knows well what they are talking about. Therefore, this study illustrates the versatility of stories as a resource in peer groups to support change.

### **Strengths and Limitations of the Study**

In this article, we have described a specific practice of sharing experiences. Since it seems to occur rather infrequently, it has not been previously studied. As argued by Robinson (2007), the frequency of a practice is not an indicator of its significance. Specifically in the context of health promotion groups, which tend to primarily follow the agenda and initiations of the group leader, voluntary and independent sharing between group members, such as the practice we have described here, appear to be important with regard to the social processes occurring between group members. The rich, abundant, and multifaceted data has enabled us to identify and scrutinize this practice, and the findings may provide new insight into the ways in which the efficacy, process, and experiences of participating in group interventions can be evaluated.

A possible limitation may be that the original data is in Finnish. The analysis focuses on specific linguistic features, which may not operate similarly in other languages. Nevertheless, the analysis has described one way to explicitly compare one’s own experiences

in relation to the experiences of others, which, as a phenomenon, is most likely at least partly transferable to other languages and cultures.

### **Implications for Practice**

Recounting one's own experiences and reflecting upon them is a distinctive feature of the mechanisms that health promotion group discussions operate with (see for example Borek & Abraham, 2018; Kennedy et al., 2007). Comparative time-framed experience telling constitutes a specific practice to address the possibility of change, and therefore supports the activity of reflecting upon experiences. Further, by displaying a description of a successful change, in which the starting point for the change was an experience that was similar to the other group member's, this interactional practice provides social support by presenting a positive model. In the analyzed data, all instances of comparative time-framed experience telling were in line with the institutional task of improving wellbeing and enhancing healthier behavior. They supported group members' positive stance towards institutional goals and suggested solutions, and challenged the negative stance. Moreover, they were also one way to construct institutionally relevant morality regarding the institutional goals and the values that participants orient to as relevant in the current context. In sum, comparative time-framed experience telling contributes to co-constructing the identity of group members as striving for change and to showing them as responsible subjects in terms of maintaining and improving their wellbeing. Therefore, being able to recognize this interactional practice may help group leaders to distinguish when the discussion between group members may be especially beneficial with regard to the aims of the group.

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## Stories of Change: Comparative Time-Framed Experience Telling in Health Promotion Group Discussions

### Supplementary file

#### Transcription Symbols

[word]	Onset and offset of overlapping talk
=	Contiguous utterances: second is latched immediately onto the first
(0.2)	Timed interval within or between utterances, measured in seconds and tenths of seconds
(.)	Interval of less than 0.2 seconds
wo:rd	Extension of the sound or syllable
.	Falling intonation
,	Continuing intonation
?	Rising intonation
-	Abrupt cut-off
↑↓	Rising/falling pitch
<u>word</u>	Emphasis
WORD	Louder volume
°word°	Quieter volume
>word<	Faster-paced talk than the surrounding talk
<word>	Slower-paced talk than the surrounding talk
#word#	Creaky voice
fwordf	Smiley voice
@word@	Animated voice
hh	Audible aspiration
.hh	Audible inhalation
w(h)ord	Laughter
hah heh huh	Laughter
(word) ( )	Transcriber doubt
((word))	Transcriber's comments
→	Feature of interest

Excerpts with original transcript, interlinear gloss and English translation

Excerpt 1: Reinforcing story. (Diabetes group)

01 A: suolaa t- sitä ei tuu lisättyä.  
 salt that not 0+tend add+to  
*salt t- one does not tend to add that.*

02 >minä e- ainaki< mullon jääny se pois että tuota  
 I at+least I+have left it out that erm  
*I d- at least I have left it out that erm*

03 .hh minä en lissää sitä suolaa.  
 I don't add that salt  
*.hh I don't add that salt.*

((9 lines omitted))

13 A: aamu, aamupuuro o >esimerkiks< tämmöne=  
 morning, morning+porridge is example+for this+like  
*breakfast, breakfast porridge is one example=*

14 =mie syön suolattoman puuron.  
 I eat salt+less porridge  
*=I eat porridge without salt.*

15 kyl siihen tottuu.  
 indeed that+to 0+gets+used+to  
*one does get used to that.*

16 Y: .mt joo-o.  
*mcht yeah.*

17 B: joo, kyl se tota, nikö,  
 yeah indeed it erm like  
*yeah, it is indeed erm, like,*

18 poika ko synty ni. (.)  
 son when born+was so  
***when my son was born.** (.)*

19 sit kö se alko syä meän eväitä ni,  
 then when he started eat our meals so  
***when he started to eat the same food as us,***

20 (0.2) .hh (0.4)

21 ja >vähä<, jäi se suola pois ni kyl se ↑alussa tuntu  
and little left that salt out so yes it beginning+in felt  
*and, the salt was left out so **in the beginning** it felt*

22 että on se ↓pahanmakusta  
that is it bad+tasting  
*like it tastes bad indeed*

23 mut nyt sitä ei kyllä kaipaa sitä suolaa.  
but now that not indeed 0+miss that salt  
*but **now** one doesn't indeed miss the salt.*

24 A: mm

25 GL: ↑mm-m

26 (.)

**Excerpt 2: Encouraging story. (Wellbeing group)**

01 A: mää ainaki aattelen sillai että pitäs niinku enempi,  
I at+least think that+way that 0+should like more  
*I at least think that one should like more,*

02 (0.6) enempi tavalla tai toisella, panostaa ihteessä.  
more one+way or another invest one+self  
*(0.6) in one way or another, invest in oneself.*

03 että löytää niitä keinoja että itellä olis asiat hyvin jahh,  
that 0+finds those means that oneself have+would things well and+hh  
*that one would find those means for one's wellbeing andhh,*

04 sitte varmaan tuo, (.) #työ#, (0.2) kuviopuolelle  
then probably that work pattern+side+to  
*then probably for that, (.) work, (0.2) things related to work*

05 joutuu palakkaamaan sitä, tai kahtelemmaan sitä,  
0+must hire that or look+for that  
*one must hire that, or look for that,*

06 (0.4) keinoja että tuota seleviää tuostahhh (0.6)  
means that erm 0+copes that+with  
*(0.4) means that erm one copes with thathhh (0.6)*

07 kokonaistyömäärästä tai sitte palakata tilapäistyövoimaa lissee.  
total+work+amount or then hire temporary+work+force more  
*total amount of work or then to hire more temporary labor.*

- 08 (2.2)
- 09 GL2: joo. (1.2) Mm.  
yeah. (1.2) Mm.
- 10 (0.6)
- 11 B: .hhh no mulla se läh- mulla se meni sillä lailla,  
well I+for it st- I+for it went that way  
.hhh well for me it st- for me it went like that,
- 12 että t(h)ot(h)a ha ha, .mt .hh mä olin niinku,  
that erm I was like  
that e(h)r(h)m(h) ha ha, .mt .hh I was like,
- 13 mitähän tuosta nyt ois aikaa sitte, (0.2)  
what+CLI that now would+be time then  
**how long ago that would be then, (0.2)**
- 14 varmaan, toista vuotta tai jottain niis  
maybe second+of year or something so+s  
**maybe, over a year ago or something so,**
- 15 >mä olin niinku tullu< siihen pisteeseen #siinä#,  
I had like arrived that+to point that+in  
I had like reached that point in,
- 16 (0.8) väsymisessä ja, terveysasioissa #että#,  
fatigue and health+issues that  
(0.8) the fatigue and, the health issues that,
- 17 (.) mul oli niinku kaks mahdollisuutta #että#,  
I had like two possibilities that  
(.) I had like two options that,
- 18 (.) niinku, itelleni tein selväksi  
like me+for made clear  
(.) like, I made it clear for myself
- 19 #että joko ylös tai alas tästä lähetään että,#  
that either up or down here+from go+PASS that  
that it's either up or down to go that,
- 20 sama tie ei voi jatkua. .hhh (.)  
same way not can continue  
it's impossible to continue the same way. .hhh (.)

- 21 olin ↑yrittäny ↑puhua ↑kotijoukoille ja hh,  
had+I tried talk home+troops+to and  
*I had tried to talk to my family and hh,*
- 22 ja tuota mutta::#, ei sieltä niinku #sillä lailla#  
and erm but not there+from like that way  
*and erm but, there wasn't like that way*
- 23 löytyny sellasta tukea siihen sitte ja, .mh resursseja nin tuota,  
found that+kind support that+for then and resources so then  
*couldn't find that kind of support for that and .mh resources so then,*
- 24 (.) .hh sitte aloin puhua, hh niinku,  
then started+I talk like  
(.) .hh then I started to talk, hh like,
- 25 läheisemmille ystäville ja, .nff  
closer friends+to and  
*to some of my closer friends and, .nff*
- 26 sitä kautta rupes löytyy sitte kanavia että,  
that way started find then channels that  
*that way some channels started to emerge that,*
- 27 (0.2) että sain sitte sukulaistytön, (0.2) meille,  
that got+I then relative+girl us+for  
*(0.2) that then I got my niece, (0.2) to our place,*
- 28 (.) tänne, <↑kottiin kaveriksi> ja  
here home+at companion+as and  
(.) here, at home to accompany me and
- 29 hänen kautta oon nyt sitte saanu sitte tän-  
her through have+I now then got then he-  
*by her means I have **now** got he-*
- 30 =navettaanki ty(h)öv(h)oim(h)aa, ett(h)ä ha ha .hhh,  
cowshed+also work+force that  
*=workforce to the cowshed as well, tha(h)t ha ha .hhh*
- 31 että tuota #ihan#, ihan, kyllä se aina se puhuminen kannattaa.  
that erm really really yes it always that talking worth+be  
*that erm, really, really, it is really always worth to talk.*

**Excerpt 3: Challenging story. (Diabetes group)**

- 1 A: ku mää niinku, (.) olin nii: järkyttyny ku  
because I like was so shocked when  
*because I was like, (.) so shocked when*
- 2 B sitä alussa kerto=hän o elokuussa,  
B that beginning+in told she has August+in  
*B told about that in the beginning=she has in August,*
- 3 (.) viimeks syöny karkin? (.)  
last has+eaten a+candy  
*(.) had candy for the last time? (.)*
- 4 ↑MUST ↑se oli NII:N <<käsittämätön [asia]>>  
I+find it was so inconceivable issue  
*I find it such an inconceivable [issue*
- 5 B: [hm hm hm
- 6 A: et joku niinku kyke:nee.  
that someone like can+bring+herself  
*that someone can like bring herself.*
- 7 GL: krhm joo.=  
*yeah.=*
- 8 A: =että se on niin iso päätös niinkun,  
that it is so big decision like  
*=that it is such a big decision like,*
- 9 m- mää ajattelin et on melkeen kun tupakasta luopuminen  
I thought that is almost like smoking giving+up  
*I- I thought that it's almost like giving up smoking*
- 10 [( ) semmoseen pystys.  
that+thing able+do  
*[( ) be able to do that.*
- 11 X: [(että, ihan,)  
that quite  
*[(that, quite,)*
- 12 (1.6)
- 13 A: mm

14 GL: nii, eiks oo jännä et,  
 yeah, not+Q is odd that  
*yeah, isn't it interesting that,*

((14 lines omitted: Nutritionist talks about how everybody is different and has their own strengths and challenges.))

29 GL: =°mis on petraami[sta°  
 where is improvement  
 =°where's room for improvem[ent°

30 B: [ >kyllähän se oli< iso asia  
 yes+CLI it was big issue  
*it was indeed a big issue*

31 >mulleki ku mä oon< ollu kova syömään [karkkia.  
 me+for+also because I have been tough eat candy  
*for me too because I have been eager to eat [candy.*

32 A: [↑nii  
 [yeah

33 B: >meleki aina ko< käyt kaupassa ni  
 almost always when go+you shop+in so  
***almost always when you go shopping so***

34 jotaki #sieltä lähti mukkaa ja# mietti aina että  
 something there came along and 0+thought always that  
***you picked something from there and one was always thinking that***

35 .hh @.mikä .nyt .ois .hyvää@  
 what now would+be good  
***.hh @what would be good now@***

36 =mut >sitte ku loppujen lopuks rupes< miettii ku söi sitä nii,  
 but then when end+of after 0+started think when 0+ate that so  
 =*but then after all when one started to think when eating that so,*

37 (.) oliko se sitte nii hyvää.  
 was+Q it then so good  
 (.) *was it so good then.*

38 (1.2)

39 B: ku [sitte,  
 because [then

40 A: [↑nii  
 yeah

- 41 B: krh nimittäin yks, (ku) me,  
 you+see one when we  
 krh you see one, (**when**) we,
- 42 käytiin siellä Helsingin reissulla >ni me sitte<  
 went there Helsinki trip so we then  
**had that trip to Helsinki** so then we
- 43 tytön kanssa päätettii=e*i* kerrottu kenellekkää että  
 daughter with decided not told anyone that  
*with my daughter we decided=we didn't tell anyone that*
- 44 ostettii siellä <junassa karkkia>.  
 bought there train+in candy  
*we bought candy in the train.*
- 45 †ei se ollu kummastakkaa enää hyvää.  
 not it was neither+of+us anymore good  
*well for neither of us **it wasn't good anymore.***
- 46 (.) ei >me edes sitte< välttämättä syöty [niitä kaikkia  
 not we even then necessarily ate them all  
 (.) *we didn't even necessarily eat [all of them*
- 47 GL: [†hmm
- 48 B: mitkä meillä oli sit, me:, ostet-  
 what we had then we bough-  
*what we had then, we bough-*
- 49 =VAIKKA EI OSTETTU KU Kismetit  
 even+though not bought+we but Kismet((chocolate bar))  
*even though we didn't buy but chocolate bars*
- 50 ja sitte semmoset pikku, karkkirasiat.  
 and then those little candy+boxes  
*and then those little candy boxes.*
- 51 Y: hm
- 52 B: nii, ei- >meillä Anna sano et< ei tämä oo edes hyvää.  
 so not our Anna said that not this is even good  
*so no- our Anna said that this is not even good.*
- 53 >no että< @no ei minustak(hh)kaa.@  
 well that well not my+opinion+neither  
*well that @well I don't think so eit(hh)her.@"*

54 A: ↑mm

55 B: se oli [siinä.  
that was there  
that was [it.

56 GL: [eiks oo <jän[nä>  
no+Q is odd  
[isn't it interesting

((Group leader continues by explaining that preference for sweet can be trained.))

**Excerpt 4: Challenging story. (Diabetes group)**

01 GL: nii, mitä hyötyä on siitä e- et,(0.2)  
so what benefit is that+of t- that  
so, what are the benefits of that, t- that, (0.2)

02 sää sanoit että, että pitäs syyä jotaki päivällä.  
you said that that 0+should eat something day+at  
you said that, that one should eat something during the day.

03 B: niin. ei ois niin ↑illalla nii hirviä ↑nälkä,  
yes not be+COND so evening+at so awful hunger  
right. one wouldn't be so awfully hungry in the evening,

04 (si) tarvis ahmia sitte (vallan).  
then 0+need binge then totally  
(then) one wouldn't need to binge (totally).

05 (0.4)

06 GL: mm

07 (0.8)

08 B: no päi- päivällä jotakin syyä.  
well day- day+during something eat  
well day- to eat something during the day.

09 (0.2) aamulla. (1.0) päivällä. (0.4)  
morning+at day+at  
(0.2) in the morning. (1.0) during the day. (0.4)

10 illalla vähä vähemmän sitte.  
evening+at little less then  
then a little less in the evening.

- 11 (1.0)
- 12 A: no sehä o ku ei aamulla ota, kone vastaan ruok(h)aa. (.)  
 well that+CLI is when not morning+at take machine in food  
*well that's it when the system doesn't, accept food in the morn(h)ing.(.)*
- 13 >muuta ku< kahavee.  
*other than coffee.*
- 14 (0.2)
- 15 B: hm (0.4) sehän on, totuttamiskysymys  
 that+CLI is habituation+question  
*hm (0.4) well that's, a matter of habituation*
- 16 ainaki mulla oli, [joskus,  
 at+least I had sometimes  
*at least for me it was, [sometimes,*
- 17 X: [joo  
 [yeah
- 18 B: minä, nuorempana nii >ei muuta ku<, (.)  
 I younger+as so not other than  
***when I was younger*** it was just, (.)
- 19 kahavia ja nortti aamulla ja se oli sillä selevä.  
 coffee and North+Star morning+at and it was that+with clear  
*coffee and smoke in the morning and that was it.*
- 20 =sillä pärjäs iltaa asti.  
 that+with 0+coped evening untill  
*=one could keep up until the evening with that.*
- 21 (0.6)
- 22 B: >kyllä se ku< opettelee välillä syömää.  
 indeed it when 0+learns every+now+and+then eat+to  
*>it's indeed when< one learns to eat every now and then.*
- 23 (0.4)
- 24 X: °joo°  
 °yeah°
- 25 (0.6)

- 26 B: kyl se ruppee uppoomaa vaa.  
indeed it starts sink+to just  
*it will indeed start to sink in.*
- 27 (2.0)
- 28 B: nykysi ei kerkiä vaa.  
nowadays not 0+find+the+time just.  
**nowadays** one just has no time.
- 29 A: mh hh, h h
- 30 (2.0)
- 31 B: mutta tulee kyllä joka aamu syötyä.  
but 0+tends indeed every morning eat+to  
*but indeed one tends to eat **every morning**.*
- 32 A: hä?  
*huh?*
- 33 B: nii joka aamu tulee syötyä.  
*nii every morning 0+tends eat+to  
one tends to eat **every morning**.*
- 34 A: ↑mm ↓joo.  
*mm yeah.*
- 35 B: (mää ainaki syön) [ka- kaks näkkileipäpalasta yleensä.  
I at+least eat tw- two crisp+bread-pieces usually.  
(I at least eat) [two- two slices of crisp bread **usually**.
- 36 A: [joo, joo  
[yeah, yeah
- 37 A: njoo  
*nyeah*
- 38 (2.4)