A Conceptual and Empirical Exploration of the Concept of ‘Revoicing’

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OUTLINE OF THE SYMPOSIUM

It was only since the early ‘90s that revoicing became object of systematic study for a small group of scholars in the socio-cultural tradition. Rooted in Goffman’s (1981) notions of ‘reported speech’ and ‘participant framework’, revoicing is frequently defined as a particular kind of reuttering of a person’s initial contribution by another participant in the conversation (cf. Michaels & O’Connor, 1993; 1996). Although the concept of revoicing received a considerable amount of attention, the definitive qualities of the concept remain elusive. Therefore, in this symposium, researchers from the Netherlands and the USA will further explore the concept of revoicing in order to understand its value in studying human interaction.

In the first presentation, revoicing will be further conceptualized using cultural-historical theory. It will become clear that revoicing is not merely reuttering a person’s initial contribution, but foremost can be seen as a cultural tool that enables participants to value and position an initial contribution within the context of a specific conversation. Thereby, revoicing creates a space of negotiation, as it opens up a new slot for each person to participate.

The second presentation examines how teachers can use the ‘third turn’ in conversations to build a culture of listening. In this third turn, the teacher uses the ‘who-can repeat/rephrase’ talk move in order to open up space for another student to repeat or rephrase the initial contribution. In the empirical study, it was examined how the repeat/rephrase move was picked up by the teacher and children. The findings show how this talk move teaches young children to listen to each other as participants in a collaborative process of inquiry.

The final presentation focuses on revoicing in an unusual context, clinical interviewing. A one-hour clinical interview was systematically coded, which resulted in an elaborated view of the forms and functions of revoicing in that context. In terms of function, clinical revoicing serves different purposes than it appears to do in classrooms: centered, sensibly, on ‘making data appear’
relevant to understanding the interviewee’s ideas. With regard to form, clinical revoicing seems remarkably diverse, to the point where regarding it as a unitary structural form appears doubtful.

REFERENCES