

## AGENCY IN THE PSYCHOLOGIST-PATIENT RELATIONSHIP: ANALYSIS OF A NARRATIVE ABOUT HARASSMENT IN THE PSYCHOTHERAPEUTIC OFFICE



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### ABSTRACT

This work is an excerpt from an ongoing doctoral research whose objective is to investigate cases of harassment by men to female psychologists within the psychotherapeutic office. The research methodology is qualitative and interpretative in nature; data were generated through oral, individual and online interviews (synchronous remote modality), carried out through the Google Meet platform. The interview was recorded and later transcribed for analysis. The interview was co-constructed between the female researcher and a female psychologist who works in the area of clinical psychology and who understands that she has suffered harassment by a male patient in the office. The consent for the interview analyzed in this excerpt, as well as its recording and transcription, was given by the participant via the Informed Consent Form (ICF). The treatment and analysis of the data were done from narrative and discourse analysis. More specifically, in the data selected for this work, we sought to investigate the agency of the professional in the face of the situation experienced, in order to promote new intelligibility that concerns the theme of harassment in the specific context of this research, thus seeking to bring new pertinent reflections to professionals in this area.

**Keywords:** Narrative Studies. Harassment. Psychotherapeutic Clinic. Agency. Speech. Psychologist-Patient Relationship.

## INTRODUCTION

The theme of this study is the agency of a clinical psychologist in the office in the face of a case of harassment, and the discursive object of the study is parts of the psychologist's narrative about this event with a male patient. I consider that the construction of narratives is linked to the metapragmatic character of language, that is, reflective of everyday experiences. Thus, we agree with Bastos and Biar (2015) that narratives elaborate social meanings, which come from active construction, since the social world is imagined as people discuss it. Such discussions are the basis for understanding certain social functionings.

Language studies under a social approach are important to understand the analysis of narratives in interactional contexts (PEREIRA and CORTEZ, 2011; BASTOS, 2005, 2004). The proposals of INdisciplinary Applied Linguistics (MOITA LOPES, 2006) show themselves to be a way to reflect and apprehend specific social scenarios experienced in everyday practice. Thus, taking into account the conjuncture in which Applied Linguistics is proposed, the proposal of this study is relational, that is, it interconnects Clinical Psychology and Narrative Analysis in an interactional context, since Indisciplinary Applied Linguistics defends the "indispensability of a hybrid and mestizo AL" (MOITA LOPES, 2006, p. 97), which establishes a dialogue with other areas of knowledge.

Taking into account the fields of Language Studies and Psychology, some questions about the use of language in the context of psychotherapeutic care and narratives emerged as motivation for the present theme of this research, considering that the greatest foundation of the psychological treatment processes is the way patients use language to express themselves, as well as the way in which these uses are interpreted by the professional.

Thus, we set as an objective to be investigated in this study to observe and reflect on (i) how the psychologist evaluates and interprets the limits of the relationship with her patient and (ii) how she managed the situation of harassment experienced by her within the office. Therefore, we sought to observe, based on the psychologist's narrative, how language was used in the interaction between her and her patient within the psychotherapeutic office in this case of harassment.

## THE FINE LINE IN THE PSYCHOLOGIST-PATIENT RELATIONSHIP

The psychotherapeutic relationship needs to be understood by both the psychologist and the patient, as they are the ones who determine the practices of this relationship together. Thus, considering that interaction is the pillar for psychotherapeutic treatment, the delimitations of this relationship require the creation of "specific rules of linguistic etiquette" (POVINELLI, 2016, p. 211). In the psychotherapeutic context, there is a complexity in the threshold existing in the psychologist-patient relationship, as these specific rules cannot limit the way patients express themselves with regard to their psychological demands, since interaction is a basic element for the professional's performance. However, at the same time, it is necessary that the rules of this relationship are well defined so that there is a guarantee that it is being psychotherapeutic for the patient.

Leitner (1995) discusses considerations about the "ideal therapeutic distance". For the author, in the relationship between psychologist and patient, it is essential that there is a combination between the bond and, at the same time, the distance between them. This ideal distance "implies being close enough to the other to experience the other's feelings, while being distant enough to recognize them as the other's and not the therapist's" (LEITNER, 1995, p. 362). Although the focus given by Leitner (1995) is with regard to the balance of the psychotherapist's feelings, we can say that there is the same concern in relation to the patient. The distance aims to prevent this confusion of feelings from happening on the part of the patient and becoming another demand, since when feeling welcomed and/or observing an improvement in their clinical condition, it is common for the patient to develop feelings of affection towards the psychologist (FREEMAN and DATTILLIO, 1998).

The development of the relationship between patient and psychologist is susceptible to complications at the interactional level when the specific rules are not well defined by both, especially when there is an imbalance in the ideal therapeutic distance and the limits of this relationship are exceeded. On the other hand, one of the essential points for a psychotherapeutic intervention to be effective is the construction of the bond between the psychologist and the patient (ROGERS, 1951; YOUNG, 2008; FREUD, 1969), since it is necessary to develop a relationship of trust between both so that the patient feels comfortable to share his demands. However, the limits of this relationship present a fine line, which, if crossed, can generate negative results both for the treatment of the patient and for the professional who is working (KLEIN, 1952; HEIMANN, 1950, FREUD, 1996).

With regard to harassment, although its definition varies, in the health area it focuses on the repetition of annoying attitudes on the part of the harasser and the motivation of this subject's behavior (MULLEN *et al.*, 1999), which consists of an interaction in which there is no consensus between the parties, in addition to threats that result in fear on the part of the person being harassed/persecuted. Some international studies point to situations of harassment of psychologists/psychiatrists and/or health professionals by their patients (STEVEN *et al.*, 2002; KIVISTO *et al.*, 2015; TRYON, 1986; JONES and SHERIDAN, 2009).

Although there is research in the area in a broader way, the focus of this work is how a psychologist narrativizes reflections, that is, metapragmatic reflections on a case of harassment in a psychotherapeutic consultation, since studies point to a significant number of harassment of women in the workplace (MORANDI *et al.*, 2018; AGUIAR, 2005; Brazilian Institute of Geography and Research [IBGE], 2009-2012) and that the office is the labor institution of these professionals. Thus, investigating the relationship between psychologist and patient can create intelligibility about the limits of this relationship in the psychotherapeutic office when it comes to female professionals.

## **CONSTRUCTING NARRATIVES: LANGUAGE AS A WAY OF ACTING IN THE WORLD**

A narrative can be understood as a way of telling everyday stories<sup>1</sup>, that is, of exploring past experiences in order to construct them in the present (LABOV, 1972, SANTOS and BASTOS, 2009, 2013). Schiffrin (1987) points out that elaborating narratives can be understood as a way of symbolizing, transforming and reorganizing such experiences, which took place in specific contexts of interaction. Thus, we understand that every time we narrate we are constructing meanings about social life. Narrating promotes, metapragmatically, understandings that at all times reconstruct our experiences and our actions in the world.

In this way, narratives can be interpreted as a practice of social construction. And, in this context, they function as a possibility to think about the human experience and to study social life (BASTOS, 2004). The narratives elaborated in interviews, which are recorded and transcribed, provide a relational analysis between what the narrators of the stories tell and what the researchers interpret (RIESSMAN, 2008).

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<sup>1</sup> We clarify that we are considering history and narratives as synonyms in this work.

The narrative, therefore, starts from an interactional position. For this work, we considered the influence of the context in which the participant's narrative was constructed, as well as the interviewer-interviewee relationship in this process. Mishler (1999) proposes a perspective of narrative as a "situated performance", highlighting the importance of considering the contextualization in which narratives are constructed.

Labov (1972) was one of the pioneers in the studies of narrative analysis, in the field of sociolinguistics. The author proposes the existence of some elements for the construction of the narrative, namely: summary, orientation, complicating action, resolution, evaluation, coda (LABOV, 1972). However, the author himself elucidates that such elements are not mandatory for a narrative to be constructed, except for the complicating action, which works as the basis of the narrative.

In this research, the focus of analysis will be concentrated on the evaluation of narratives, understanding that this helps the narrator in the construction of his story, so that he tells the situation experienced at the same time that he makes an evaluation of it. Thus, according to Labov (1972), evaluations allow an analysis of some aspects that are present in the elaboration of a narrative, such as the narrator's positions, emotions and affections. In this way, we understand that the evaluation of the narrative is a tool that the narrator uses to determine the focus or meaning of the narrative, that is, to explain the motivation of why it is being told, as well as what one wants to demonstrate and/or prove when telling it.

Garcez (2001), as well as Labov (1972), but from the point of view of Conversation Analysis, also defends the idea that narrative would be a way of telling stories in a structured way that portrays the subjectivity, identity and social reality of the subjects who are part of the narrative process.

Naturally, when building a narrative and telling an experience, it is common for the narrator to have some objective. As Schegloff (1997) observed, people tell stories to complain, explain, warn, justify, etc. Thus, when a narrator elaborates his story, we can understand that he seeks to develop, during his narration, justifications for the events experienced.

The use of justifications can be triggered through *accounts*, which, according to Buttny and Morris (2010, p. 286), would be "how people tell their side of the story, that is, they interpret and rhetorically reconstruct events through speech".<sup>2</sup> De Fina (2009) also explains that, once a narrative is constructed by conjecturing an interpretation of an

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<sup>2</sup> (...) how people tell their side of the story, that is, interpret and rhetorically reconstruct events through talk.

interlocutor, such as in research interviews, it is common for it to be explanatory and performative. So, we infer that the subjects use *accounts* in situations in which they assume that they are being questioned and/or evaluated (SCOTT and LYMAN, 1968) in order to justify what, why or how the story being told happened.

Therefore, considering that this research proposal considers language as a social action (SCHIEFFELIN, 1990), in which people act through words and the language in use (AUSTIN, 1962, SEARLE, 1969, BUTLER, 1997; CAFFI, 2006), it is essential that we observe how they mediate socially experienced situations, in order to understand how a context of interaction develops and the motivations of the subjects involved that determine how they act.

## **AGENCY IN THE PROFESSIONAL SCOPE OF THE PSYCHOTHERAPEUTIC CLINIC**

Ahearn (2001, p. 112) defines agency, a priori, as "the capacity for socioculturally mediated action",<sup>3</sup> that is, the way an individual acts socially is related to the context in which he is culturally inserted. The concept of agency proposes to investigate how people think about their actions and those of others in specific interactional episodes (AHEARN, 1999) and is, therefore, essential for this research theme.

For Jorge (2012, p. 3) agency is related to the "capacity for action of a person, a mechanism, or anything else by which some force is exerted and, consequently, a change is produced" (JORGE, 2012, p. 3). Thus, in the construction of an agency, a change in the scenario of the situation in question is foreseen, which can be decisive in its outcome.

Starting from the point of view I mentioned earlier, about the use of language as a social action and/or as a way of acting in the world, we understand that its intertwining with agency is intrinsic. This idea is linked to the performative character of language, which, as Duranti (2004) argues, develops a chain in which a speech act is directly related to agency, since when a subject speaks it triggers an interactional reality that affects the interactor.

Block (2012) proposes the concept of agency and explains that it is situated in the "social structure and in everyday practices that, in turn, are made up of interactions" (p. 54). So, we can understand that there is a direct influence of socio-interactional aspects on the way we act in our daily lives, that is, the context in which we are inserted and the identities we assume, for example, imply the modes of agency developed.

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<sup>3</sup> Agency refers to the socioculturally mediated capacity to act. (texto original)

Rajagopalan (2013) addresses the issue of agency related to power in the sense of autonomy. According to the author, since the agent is the one who uses language, he can, in this way, enjoy his right to act. Thus, we understand that, through language, and how we make use of it in a given situation, we can perform it in such a way that the interacting subject is affected by understanding the limit of the one with whom it is spoken. This perspective seems to be essential for this research scenario, since we are talking about the limits of the psychologist-patient relationship, focusing, above all, on what concerns the rights of this professional and how she can conquer it through the way she performs and, consequently, manages a situation of harassment.

We understand agency and agency as intertwined processes. Agency refers to a collective agency that takes place by micro agencies, while agency, it is inserted more in the individual sphere. Therefore, we start from the perspective that there is no agency that is not given from a chain of utterances that precede action through language and, thus, we consider that every agency is also an assemblage.

## **METHODOLOGICAL STRATEGIES**

The research methodology of this work is qualitative and interpretative (DENZIN and LINCOLN, 2006; FLICK, 2009). The justification for this methodology is due to what Denzin and Lincoln (2005) propose about an interpretation based on the look that people themselves attribute in the construction of narratives. In the case of this research proposal, from the perspective of a woman and clinical psychologist explained in her narrative about a situation of harassment suffered within the psychotherapeutic office.

We used qualitative research for this work, as we consider the subjectivity, both of the researcher and of the participants, as part of the investigative process of the research (FLICK, 2009). In addition, we believe in what Flick (2009) also proposes about qualitative research not being a unified methodological process, but that, on the contrary, it is flexible and predicts the subjectivities that are manifested in interactions, reconstructions and the meanings related to their practices.

The interpretative character of this study is based on what Santos (2013) elucidates about the location, both of the researcher and the research participant, in the social world. Thus, the interpretivist researcher "seeks to confer intelligibility to discursive practices through the theoretical tools that help him in interpretative practice" (SANTOS, 2013, p. 28). In addition, as Velho (1978) points out, the processes of subjectivity are involved in the



production of knowledge and, therefore, they are also highly ideological productions, that is, there is no neutrality.

## DATA GENERATION, PROCEDURE AND ANALYSIS AND THE PARTICIPANT

The research methodology is qualitative and interpretative in nature; the data were generated through semi-structured oral interviews (Cf. BASTOS & SANTOS, 2013), individual and online (synchronous remote modality), carried out through the *Google Meet* platform. The interview was recorded and later transcribed for analysis. The interview was co-constructed between the female researcher and a female psychologist who works in the area of clinical psychology and who understands that she has suffered harassment by a male patient in the office. The consent for the interview analyzed in this excerpt, as well as its recording and transcription, was given by the participant via the Informed Consent Form (ICF). The interview in interpretive research is a relevant mechanism that helps to understand how the construction of narratives takes place. It also allows us to observe different perspectives of narrative performance, since by narrating "we not only convey the sense of who we are, but also build relationships with others and with the world around us" (BASTOS, 2005, p. 74).

In addition, "interviews, for Baker (2001), are understood as opportunities for those involved to establish and reestablish relationships of belonging to certain institutional, professional or family categories" (ROLLEMBERG, 2013, p.43), which means that through them it is possible to reflect on contexts of professional performance, as we intend in this work.

It is worth noting that in this research we considered the interview as an event and/or speech activity (MISHLER, 1986). By considering the interview from this angle, we understand that the statements are constructed in an interactional environment and that it influences the way interactions are developed. Therefore, in an interview whose analysis will be narrative and which has a theme of a psychologist's personal experience, we emphasize the importance that her narrative is not limited to answering only specific questions shaped by a script, but rather how this professional chose to tell her story.

The data were generated from the narrative constructed by the participant during the interview, from which we observed the questions present in the research objectives. After



the interview, the data were transcribed for further analysis following the transcription bases of Jefferson's conventions<sup>4</sup> (1983) with some adaptations.

We propose the development of an active interview, considering that this process is interactional and that the participants of this interaction play an active role (GUBRIUM and HOLSTEIN, 2003). In this process, there is a situated construction, involving other interaction scenarios, and the answers of the interviews would be a way of experiencing the narrated situations (ROLLEMBERG, 2013).

The participant is a professional graduated in Psychology, working in Clinical Psychology, in the Analytical-Behavioral area. He is 26 years old and has been working for two years, when he graduated from university. It works with online and face-to-face services and diverse audiences. For ethical reasons, the names of both the psychologist and the patient used in the analyses are fictitious, and therefore the true identities of those involved are not exposed.

### **"I'M LIKE YOUR PSYCHOLOGIST AND THAT'S HOW I'M GOING TO STAY WITH YOU"**

In order to find a psychologist who could collaborate with the research by telling her narrative of harassment suffered in the office, a short text explaining the research was disseminated in groups of psychologists. Therefore, the trigger question of the participant's narrative begins by asking her to tell her story about the case (lines 00 and 01). In view of this, too, the professional begins her narrative by creating an *account* (BUTTNY and MORRIS, 2010), that is, a justification of why she found it important to collaborate and tell her narrative.

The parts selected as an excerpt for this study focus on the psychologist's assemblages in situations in the context of a psychotherapeutic office and in which she had to manage interactions with her patient, in which he exceeds the ideal limits of a psychologist-patient relationship. In this way, Anna begins her narrative by metapragmatically constructing her agency as a psychologist by signaling that she "found it important to communicate about it" (line 1). Although she is not in the position of a psychologist working with a patient, when narrating her story, Anna builds the identity of a psychologist to tell experiences lived in this place.

<sup>4</sup> The symbols used in this study were: [,] continuity intonation, [ ] emphasis, [>word<] faster speech, [:][:] stretches, [ ( ) ] speech not understood, [ ( ( ) ) ] analyst's comment, description of non-verbal activity, [ " " ] reported speech.

Excerpt 1 - Harassment between the lines

Researcher	00 01	I want you to tell me a little bit about your story of harassment suffered in the office.
Anna	1 2 3 4 5 6 7 8 9 10 11	Ahem, yes:: I thought it was important to communicate about this, because:: sometimes there are some situations of harassment inside the clinic very much between the lines, right? Between the lines in what sense? We, I'm from the analytical-behavioral approach, so we do a lot of analysis, right? of why that behavior was emitted, within the session, what is the function of the customer is emitting here, if in a context in a generalized way, if he emits the same behaviors, anyway. So::o:, but it turned out that I didn't have time to do that with this specific case and that frustrated me much more, because I didn't realize what was happening.

We also see, at the beginning of her speech, that, when justifying, Anna problematizes situations of harassment experienced within the office, since "sometimes some situations of harassment are very really between the lines" (lines 2 and 3). Anna's statement expresses the difficulty found in clinical psychology with regard to the balance that must be found between the construction of the bond - essential for a relationship between psychologist and patient to be well constructed - (BURNS and AUERBACH, 2012) and the distance necessary for this relationship to result in a good therapeutic process, as Leitner (1995) says, about the "ideal therapeutic distance".

By highlighting the importance of communicating about harassment and problematizing this type of situation, Anna assumes a role as an agent of protagonism, demonstrating an agency through language from a perspective of what Ferreira (2017) proposes when she talks about the concept of "agency-resistance". According to the author, "it is in it that language demonstrates the power relations that are fought by such subjects-agent, who acquire a certain position of actor, if not protagonist" (FERREIRA, 2017, p. 631), as we can see that happens with Anna in the narrated situation; Anna, in this case, not only mobilizes meanings about her agency in the narrated event, but also in the narrative event itself as a form of action, of production of effects of meanings that act in the world.

Then, Anna already builds herself in a professional identity as a psychologist, fitting, more specifically, in the analytical-behavioral approach. In his speech "We, I'm from the analytical-behavioral approach, so we do a lot of analysis, right? of why that behavior was emitted, in the session, what is the client's function is emitting here, if in a context in a generalized way, if he emits the same behaviors, in short" (lines 4 to 8), Anna makes a

connection between the individual-collective dimensions, placing herself as part of this collective, as expressed in "*We, I am.*" In addition, we also see that it makes use of a process of describing codes about what the performance of this specific type of professional is and how it develops, referring to what Sarangi (2000) says about "types of activity", which would be how interactional dynamics start from specific patterns in medical consultations.

After making a brief contextualization of how her clinical practice develops, Anna makes an assessment of the situation she experienced with her patient, explaining that "it turned out that I didn't have time to do this with this specific case and that frustrated me much more, because I didn't realize what was happening" (lines 9 to 11). In this process of evaluating the psychologist, we observe what Charlotte Linde (1993) says about creating a self-observation about our actions when we narrate and, thus, a self-correction. The professional observes herself, now perceiving, in the narrated time, what was being experienced in the time of the narrative.

Excerpt 2 - The first session

Anna	12	In the first session, I signaled to him about the ethical secrecy, I signaled to him that there I am the psychologist of: yes: I will even repeat this hh for all the cases that I see the need really, not only with men, but with women as well, in relation to this of signaling that I am there as a psychologist, I'm like Anna psychologist. I'm not like an ami:ga, I'm not like:, anyway, any other label. Then I signaled this to e:le, I talked about the fees on cancellation Nanananana, okay.
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In excerpt 2, Anna clarifies to the patient some fundamental elements in the context of psychologist-patient so that "the specific rules of linguistic etiquette" (POVINELLI, 2016. p. 11) - and here, by "linguistics" we mean a broad concept that includes aspects of verbal, non-verbal, formal, informal language, etc. - are established jointly with her patient. We see that Anna elaborates her professional identity by clarifying the need to "signal that I am there as a psychologist, I am as Anna as a psychologist. I'm not like an ami:ga, I'm not like:, in short, any other label" (lines 16 to 18). The posture limited to her role as a psychologist is built from a performative agency through language. Ana, through language, differentiates the here-now from other interactional events. In this way, the narrator emphasizes how the relationship with that context impacts the ways she acts in that situation. Thus, at this moment, we realized the need to establish the interactional

framework: a clinical consultation. As the narrator points out, her ways of acting are highly dependent on where, when and with whom she interacts socially.

Excerpt 3 - The second session

Anna	20	
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	23	My chair is next to the door, right? And that day he came here, I said "look, today we
	24	go to a different room, okay? That's okay." Then he came in asking for my charger,
	25	right, for his phone, yes: he was out working all day and said "An, me for your
	26	charger?" and I said "I'll lend it, right", it's okay to lend the charger, okay, you can put
	27	it there and such, then he put the charger next to the socket: okay, ok. The way he
	28	sat on the couch, it was already strange to me. I always signal in the first sessions,
	29	make yourself comfortable, you can sit wherever you feel more comfortable, with
	30	some customers I even joke "if you want you can even sit on the floor, right, if you
	31	need to, right, if it's your comfort, no problem". [...] And then he was telling, you
	32	know, his demands, what happened on the day, I asked him how he was and so on
	33	and I was surprised by this because he had already sat down, he didn't ask,
	34	sometimes we have that, that social agreement "It's okay if I sit that way, it's okay if I
	35	do that", but he didn't do that. He took off his shoe and lay down straight. Since I
	36	signaled to him only in the first session, you know, how he could sit, anyway. He lay
	37	down and in the middle of his report "Anna, can I use the vaper?" then I said "The
	38	vaper?" "yes, little pod, right, from the electronic cigarette", I said "why?", "Oh I'm a
	39	little anxious, I'm feeling anxious, it's okay if I use it", "It's okay, okay. If it's to help
	40	with the anxiety you're feeling right now, that's fine, fine. But for me it was a big
	41	mistake to have done this, which appears to have released it for him, this I thought
	42	later, right, it is: it seems that it released for him issues of him to be at ease. The
	43	way he sits:u, he was using electronic cigarettes, it seems that he was very
	44	comfortable around me and that bothered me. And I've already been prepared for
	45	the third session.
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In excerpt 3, Anna narrates how the second session of the case in question went. From his narrative and some of his lines, such as: "The way he sat on the couch, it was already strange to me" (lines 26 and 27) and "And then he was telling, you know, his demands, what happened on the day, I asked him how he was and so on and I was surprised by this because he had already sat down, he didn't ask, sometimes we have that, that social agreement "It's okay if I sit that way, it's okay if I do that", but he didn't do that" (lines 31 to 36), we can notice that, in this case, even if the way John behaves is not related to the rules previously pre-established between them about their relationship, Anna clarifies that she understands that there is social agreement that is in common sense, in the "rituals of interaction". An example of this understanding on the part of the psychologist is when she herself says "make yourself comfortable" (line 28), because the social order built in various interactional contexts is that one must ask if it is okay to behave in that way,

because it is outside the standard, even if it has already been "released". These moments of exchange between Anna and João are related to what Linde says about "common sense", which according to the author, is "a system of beliefs assumed as shared by all members of a culture" (LINDE, 1993, p. 12) and that, when not adopted, can generate discomfort in the interaction and in its participants, as it does in Anna.

When Anna signals in her statements "a strangeness came to me" (line 27) and "I was surprised" (line 33), we see that the event goes beyond what she considers common compared to a chain of other social events, which can be a point that brings reportability to the story, since we usually tell things that are unexpected, that escape the canon (Bruner, 1997).

Then, still in excerpt 3, Anna makes an assessment of her own agency in the situations told. The psychologist says that "for me it was a big mistake to have done this, that it appears that it released it for him, this I thought later, right, it is: it seems that it released for him issues of him to be at ease. The way he sits::u, he was using electronic cigarettes, it seems that he was very comfortable around me and that bothered me" (lines 42 to 47). We see in this excerpt that she reflects on agency in situations that affect the limits of the relationship, since she feels uncomfortable with the way the patient behaves towards her in the situation. The semiotic effects produced by various elements such as the body and the electronic cigarette, for the narrator, caused discomfort. Thus, she attributes a negative charge to her patient's action.

#### Excerpt 4 - The third session

Anna	49	He said "Anna, I have a stop to talk to you today, yes::", then he took a breath like that and threw "I'll need to end the sessions". Then I said "why?" and questioning "what happened, is everything okay?". "Because I'm starting to like you a lot." It is: then he filled me with compliments, "you are a very badass woman, as much as you are young, you: you already have attitude, I don't know what and you started talking, talking, talking". I said "João, look, this is a therapy agenda, you know, right?". He "yes, I know", because he had just finished, it was one of his other demands, you know. I told you. As little as I know you, we are in our third session, we need to talk about it. Yes, we are going to end the consultations, I think it is necessary, but first I need to know, you know, why this is, even for me to refer you to another psychologist".
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Although the patient had already positioned himself in a way that bothered the psychologist previously, neither of them had yet brought this as an agenda for the session. However, in the third session (excerpt 4), the patient himself begins the session talking

about starting to like Anna very much. At this moment, João's behavior expresses the imbalance in the relationship between them in the places of patient and psychologist, since he does not understand Anna as his therapist, placing her in the position of "person he likes". In view of this, however, Anna continues to perform in the identity of a psychologist, clarifying "João, look, this is a therapy agenda" (lines 55 and 56). Anna uses many statements reported like this in her narrative, which act in an evaluative way, since, as De Fina (2003, p. 95) clarifies "(...) The reported discourse has the specific function of conveying the evaluation of when the narrators use their own voices or when they use the voices of others to, implicitly, highlight elements of the story". In this way, the reported speech creates a link between the narrative event and the narrated event, thus constructing evaluations about the speeches of the characters in the story. As we see, Anna includes a reported statement in her narrative and soon after amends that this was a question. Thus, she, when narrating, metapragmatically models the meanings and the story that is being told. This directly impacts the result not only of the agentive forces of his action in the narration, but also on those of others.

In excerpt 5, which narrates the continuity of the situation, Anna managed the situation in order to generate a change, as Jorge (2012) defends, in João's posture, in the sense of making him understand that she makes herself available to him as a psychologist, but nothing more. So, Anna's agency in the situation aims to make João go back to the specific rules previously determined by both, in which they are psychologist and patient, respectively. Anna's professional identity as a psychologist is emerging, that is, it emerges in the context (AGHA, 2007); the need to elucidate to João what are the roles of both in this situation and in the relationship between them, as when she says: "I am your psychologist and this is how I will remain with you" (lines 69 and 70). His agency indexes the necessary limits in the relationship between them so that it is healthy, positive, ethical and, above all, therapeutic for him. In addition, Anna's impossibility of being available to João under an identity other than the professional one limits the negotiable character of the identity (LINDE, 1993), because, in this case, both need to understand and place themselves in the specific places of patient and psychologist.

Excerpt 5 - Emerging identity

Anna	62 63 64	Then I said, "no, it's okay, João, let's go. First of all, yes, I will refer your case. Second, it's not because I'm here" this time I deepened my voice, it made me want to cry, a lot of desire to cry ((eyes closed, trembling voice)), but I deepened my voice
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65	and said "Look, it's not because I'm here, right, that I'm your psychologist, and you
66	opened up to me, that:: I'm into you:: ". Then I reinforced "I'm here as your
67	psychologist, even if someday ( ) something, I'm as your psychologist and that's
68	how I'm going to stay with you. I'm going to forward your case, there's a guy who
69	attends here I ate::go, and:: I'll forward your case to him, if it's okay for you". As
70	much as he told me this situation, which I felt very much: I don't know, I don't know
71	how to explain if I felt offended or uncomfortable, I don't know, but, as much as he
72	told me this ((gesture of inspiration and exhalation)), I stayed calm, I didn't punish
73	his report, I said that it was important for him to have said that, he communicated,
74	as much as I was super uncomfortable. yes, I told him "look, you need to signal this
75	to the other psychologist, because you just broke up, I'm a person who is here
76	giving you attention, yes, you're telling me your reports, so it's necessary for this to
77	happen, for you to communicate"
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Despite what we have analyzed about excerpt 5, we see, in excerpt 6, that João does not accept the negotiation of assuming the identity of a patient or that Anna assumes only the identity of a psychologist. Although Anna, at all times, tries to renegotiate with João, as in "Let's return? What were we talking about?" (lines 88 and 89) and "let's return to what we were talking about the referral?" (lines 89 and 90) he uses the interruption as a way to control (TANNEN, [1990] 2010) the situation and prevent the psychologist from being able to act in this role, as we see in: "He cut me off and said "Dude, you're very beautiful" (line 82), "He cut me off again, *but we didn't even go out I really wanted to go out with you, let's go out to dinner*" (lines 90 and 91).

Making a comparison between the way Anna reacts to João's statements in excerpts 5 and 6, which mark two moments of the narrative, we can notice that in excerpt 5 the psychologist, remaining in this position, tries to analyze the situation from this perspective as a therapist and is concerned with the impact that the way she acts can affect him, As we see in: "I was calm, I didn't punish his report, I said that it was important for him to have said that, for him to have communicated it, as much as I was super uncomfortable" (lines 75 to 77). At this moment, Anna shows that she already treats this issue as a demand for therapy, while João does not. However, in excerpt 6, the psychologist expresses that she understands that the limits of this relationship were being exceeded and acts by mediating the situation, from an agentive posture that is related to Ahearn's (2001) definition, as we see in the statements "Oh I said, man, you can't not punish this here" (line 88), "João, no. And I'll need to end your session now, okay?" (line 93), "I said "look, I'm going to send a



message to so-and-so from ta:l, saying your ca:so, he'll contact you:you" and I made a general closing (lines 95 to 97).

Excerpt 6 - Broken rules

Anna	82	He cut me and said "Dude, you're very beautiful" and when he cut me and said "dude you're very beautiful", he leaned his arm against the back of the sofa ((gesture with his arm supporting)) then he got closer to me and he put his hand on his chin like this ((hand gesture on chin))and when he did that he said "Dude, You are very beautiful". said "Are we going back? What were we talking about?" Then I said, man, you can't n punish this here, I said "let's go back to what we were talking about the referral?". He cut me off again "no, but we don't even go out? I really wanted to go out with you, let's go out to dinner." He cut me off "let's go out to dinner, we can do something". I said "João, no. And I'll need to end your session now, okay?" Then when I said "need to end the session", I went back to talking about referral and said "look, I'm going to send a message to so-and-so from ta:l, telling him your ca:so, he'll contact you:you" and I made a general closing.
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Even after the general end of the session, the psychologist accompanied the patient to the reception. During this episode, we see, as Anna describes the moment in excerpt 7, that the patient keeps going beyond the limits when he physically approaches (lines 98 to 116) and praises her again (lines 115 and 116), even though the limits have been established and clarified by the psychologist, such as the impossibility of not only not continuing the care but also of not having some kind of relationship beyond this. As defined by Mullen et al (1999), harassment can be understood as the repetition of annoying attitudes, thus, we can say that the psychologist felt harassed and/or harassed by her patient in the scenes of the narratives present in the excerpts analyzed, in which we see the repetition of her behavior that was, at all times, being questioned by the psychologist.

We clarify that, by saying that we understand that Anna felt harassed, just as she said, since this was the reason for her participation in this research, we are not making judgments or any kind of analysis about her patient. The research looks at the place of the psychologist participating in the research and we do not intend to analyze the patient's case.

Excerpt 7 - Crossed limits

Anna	98	When I got up, it was like those movie scenes, he got up with me, we did it like this ((gesture of paired hands, one facing the other)), right? As he was close to me, he was leaning against me, we got up, he did like one, he gets closer, I can't specify
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101	what the movement was, but he did it like this ((gesture of paired hands, one facing
102	the other)). Then when he did that, I walked away, walked to the door and opened
103	the door, then I stood outside the room, waiting, with my hand held on the door. I
104	don't know how I reacted at the time, but in my head, it feels like I ran away. But it
105	wasn't so noticeable, right. >Then I opened the door, waited outside<, I had the door
106	open. (...) I opened the door, I stayed next to the sliding door so we wouldn't have a
107	chance to bump into each other again, then he got out and went towards the water
108	cooler. Then I said "Look, João, we closed here now, right, I'm going to forward your
109	account:to, if you need any help for the referral you can send me a message, no
110112	problem". Then he raised his voice and said "Anna, you're very badass, you see".
113114	Then I ((gesture of an embarrassed smile)), I smiled, I didn't thank them, I smiled
115116	and said "Good morning". I closed it, when I closed the sliding door, I literally did it
117118	like this, I closed the sliding door, lowered my head, it made noise when I leaned my
119120	head, I had even had a headache, because, like, it was a relief, it was like a movie
121122	scene, I closed it and man.

From the analysis of the excerpts of Anna's narrative, we see that she uses narrative as a way to express herself, elaborate identities and reflect on such experiences (De FINNA and GEORGAKOPOULOU, 2012) lived by her. In addition, the evaluations made by the professional show how it is possible to use narratives as a tool to plan future actions (POLKINGHORNE, 1988). Finally, Anna's agency determined, in the time narrated, the necessary limits in the relationship between her and her patient and, in the time of the narrative, it can help us to reflect on the place and development of the clinical psychologist in situations like this.

## FINAL CONSIDERATIONS

Language as action and the possibilities of agency in situations of our daily lives show us the importance of reflecting on sociocultural issues from this perspective. The theme of harassment is an intrinsically complex theme that involves several complicating elements existing in the interactional sphere. The position occupied by the harasser and the harassed person may suggest different interpretations of the same situation.

Anna's narrative expresses the complications that exist in the thin line that exists in the relationship between psychologists and patients, since understanding, identifying, interpreting a situation of harassment experienced within the psychotherapeutic office, on the part of the professional, requires an alternation in her view of her patient, from the person who is cared for by her to the person who bothers her, which can sometimes be very difficult to determine or even accept.

Anna narrates, in her story, a growing situation, in which the moment of welcoming and building a bond seems to mean for the patient an extra limit that does not exist in the

relationship between them. It is interesting to highlight, as we are talking about harassment, that the moment in Anna ultimately imposes the limit of the relationship between them, clarifying that she is in the role of therapist, it is the same in which she feels harassed.

Therefore, although it is a very subjective process, understanding how a bond with a patient is developed, without the limits of the relationship being crossed, or even if they are, that can be overcome, is a crucial point for the clinical psychologist. For this, the professional's meta-reflective process about herself, her performance and her patients is necessary for the psychologist to be able to understand her limits and thus be able to determine to what extent she should welcome and when she feels bothered by a patient.

We clarify that this work is an excerpt from a doctoral thesis research and therefore it was limited, at this moment, to analyzing the aspects of agency by the psychologist in the situation suffered. This justifies the cuts made from the psychologist's narrative that were necessary. However, we emphasize that we recognize that there are several other aspects present in the narrative, but that due to the need for delimitation were not analyzed in this work.

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