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# Teaching of Clinical Sociology

## Habermas' Sociological Theory as a Basis for Clinical Practice with Small Groups

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### ABSTRACT

Jurgen Habermas' sociological analysis of "power-distorted" communication, of "instrumental action vs. symbolic interaction," and his theory of "universal pragmatics," involving an analysis of the "ideal speech situation" or "communicative competency," was used as a basis for clinical practice with 53 women students divided into five small groups.<sup>1</sup> Habermas' theory provided the basis for the assessment of the need for clinical intervention, as well as the model for structuring the communication processes in the groups to alleviate the effects of the distorted communication characteristic of life in post-capitalist society.

The groups of students were involved as participants in a self-reflective process which involved discussions that were videotaped on the second and fifteenth of 16 sessions. The women also submitted autobiographies, kept four-week-long time schedules and daily diaries, wrote narratives describing their experience of time, tape-recorded and transcribed family interactions and submitted several standardized scales. The analysis of Habermas' "communicative competency" as exhibited in these groups and in their at-home conversations is presented here based on the field observations of the researcher and on qualitative and quantitative analysis of the data.

### RESEARCH DESIGN

This paper presents an analysis of those aspects relevant to clinical practice with groups of a larger study of women students, especially those age 25 and over. The overall purpose of the study was to gain an in-depth understanding of life

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experiences of "older" female students, who typically have multiple role obligations such as wife, mother, and employee, as compared with students entering college directly after high school. Prior to the start of the semester, letters were written to a random sample of 250 women students age 25 and over who were enrolled at a state university, inviting them to participate in the research by enrolling in a course called Social Psychology of Women. In addition, participation was solicited by word of mouth and the use of bulletin boards. The result was 53 women enrolled in five sections of the course, 60% of whom were age 25 and over.

The women met in five small groups weekly for 16 weeks. These groups were structured to foster what Habermas called "communicative competency." They were to function as therapy/support groups and as a focal point for data collection. The women were told they could withdraw from the course at any time without grade penalty. They were told they would all get an A as long as they continued with the group. They were free not to provide any aspect of the data with which they were not comfortable without penalty. Participants signed consent forms and were assured that all data collected would be filed only by number, protecting their anonymity. They were aware that all papers and reports which may result would use disguised identifying information.

Multiple triangulation (Denzin, 1978), both theoretical and methodological, was employed since the purpose was an in-depth understanding of the women's life experiences. The primary theoretical perspectives used were those of George Herbert Mead, Alfred Schutz, and Jurgen Habermas. The data collection included the following: autobiographies, stressing relationships with significant others from early childhood to the present, daily journals, four-week-long time schedules, time-memory studies, videotapes of group process early and late in the term, audiotapes of dinner-time conversations in the home, Kuhn's "Who Am I" scale, and a household division of labor scale. Teams of researchers provided "communicative competency" ratings both early and late in the semester for each group member based on Habermas' criteria. The focus of this paper is limited to those aspects of the data which have a bearing on Habermas' concepts.

What is of particular relevance to clinical sociology is that Habermas' theoretical corpus was fruitful as applied to working with groups. His concepts are sensitizing to areas of life experience which proved to be of crucial importance to the participants. In addition, Habermas' insights about power and distorted communication provided a framework for conducting practice. Clinical sociology from a Habermasian perspective seeks to alleviate and overcome distorted communication and its effects. Habermas draws his key insights from critical theory and its Marxian/Freudian analysis of the effects of power on social relationships. He also integrates the important insights of other theoretical perspectives such as developmental theory (Piaget, Kohlberg), structural/functional/systems theory (Parsons, Luhmann), structural linguistics (Saussure, Chomsky), Weberian the-

ory, symbolic interaction (Mead, James, Pierce) and phenomenology (Husserl, Schutz, and Luckman). Since these theoretical frameworks also provide the basis for existing theories of psychotherapy, it should not be surprising if Habermasian clinical sociology resembles existing therapeutic frames of reference. Actual practices always are rich and multifaceted and can only be partially captured by any theoretical explanation.

Habermasian-based clinical sociology will resemble other practices which are sensitized to power issues as they affect clients. It is not at issue in this paper, however, to show what existing practices may interface with Habermasian practice. Rather, the paper will illustrate that Habermas' concepts lead in and of themselves to effective clinical practice (see Farris and Marsh, 1982). This paper will present a brief overview of some of the relevant concepts of Habermas. It will address how these concepts were applied in the clinical setting with the groups of women. Finally, data will be presented which assess the success of this attempt to base group practice on Habermas' concepts.

### **HABERMAS' THEORY AS RELATED TO CLINICAL PRACTICE: A BRIEF OVERVIEW**

A theme that runs throughout Habermas' work is that of power in relation to communication. To Habermas, the powers of the state, linked with the ideologically buttressed forces of modern science and technology (1970:81f) have greatly distorted communicative processes. Much of what passes for communication is really "pseudocommunication" or "power-distorted communication." In such interchanges, persons are involved in deliberating about means to attain predetermined ends ("instrumental action"). By contrast, in true discourse, or "symbolic interaction," persons discuss ends as well as means. Symbolic interaction or discourse allows for the social creation of meanings (1970:93, 1983:366f).

In communication freed from power distortions, persons can become aware of their true interests and concerns (Habermas, 1972). That one could be unaware of one's own interests is symptomatic in current mass society (see also Stivers, 1982). The forces of rationalization and bureaucratization have produced a "power-saturated" society characterized by instrumental or strategic communication. Increasingly, according to Habermas, society is divided into two groups, the administrators or "professionals" and their clients. Or, to borrow from Goffman (1961), institutions are becoming increasingly like "total institutions," whereby virtually all aspects of one's life come under bureaucratic control. Any communicative action which decreases instrumentalization and increases meaningful symbolic communication would be "therapeutic" given Habermas' analysis. Because of the medical model implicit in the term "therapeutic," however, Habermas would be more likely to use the term "emancipatory."

According to Habermas, the capitalist state has "colonized" the home. This happens as the media intrude upon every waking "free" moment. It occurs as one must account for everything one does in terms of how it will affect one's income tax reports. It increases as jobs demand more and more of the time, life, and energy of both marriage partners. As schools become more like prisons, and children attend caretaking institutions at younger ages, the "colonization" of the world of everyday life intensifies (see Denzin, 1977; Suransky, 1982). All relationships thus tend toward instrumental ones, secondary to career interests (Habermas, 1983; see also Rasmussen, 1982:25f).

Habermas is indebted to Freud for help in uncovering meanings of indirect or distorted communication. Socially engendered power, internalized, suppresses and distorts self-understanding. An unreflective self mirrors these distortions outward. Lack of reflection facilitates pseudocommunication, which further limits reflectivity. The trouble with Freud, according to Habermas, is that his conceptual framework, which was medical/physical, was too narrow to allow for an appropriate understanding of his own practice (1972:245f). The healing truths that emerge from psychoanalysis do so always *in dialogue*, in which all assumptions—cultural, historical, as well as those grounded in unique childhood experiences—can be questioned. To be upheld, statements must be defensible within the discourse—"discursively redeemable."

"Communicative competency," or the "ideal speech situation" in Habermas rests on certain social conditions and bears recognizable characteristics. The four characteristics of communicative competency are truth (the statements adequately portray realities), truthfulness (the speaker is forthrightly trying to express the way things are—not hiding or obscuring), comprehensibility (the speaker possesses adequate linguistic skills to be understood) and understandability (the statement is made in a normatively appropriate situation so that it can be assimilated by the listener) (Habermas, 1979:29). These characteristics of the "ideal speech situation" are part of the ontological structure of all human societies. Habermas contends that without making the assumption that speech acts are so characterized, social interaction will tend to disintegrate. The irony of existence in post-modern, post-capitalist societies is that most of the time one or more of these assumptions are violated in actual communication. At the same time, for talk to continue and tasks to be completed, we must all speak "as if" the assumptions are fulfilled.

Habermas outlines the social dimensions which allow for "ideal speech" situations to be approximated. These include "institutional unboundedness" and the absence of strategic motivations and power-based distortions. Within an institution or organization there will be pressures to continue discourse that maintains the existing power relationships. Private, voluntary interaction alleviates such effects. With institutional constraints diminished, only those internalized remain to be considered. Since adults were socialized within a given

institutional order, private interaction will tend to reflect institutional norms. Critical reflection can reveal these processes and expose them to change.

Communicative competency, or discourse, is an unrealizable ideal in current social situations. However, one can treat the "ideal speech situation" as a Weberian ideal type, a model which never actually exists in its full manifestations. The ideal speech situation is what the clinician attempts to realize. It becomes an exemplar which enables those participating to attempt to realize such communication in other spheres of their lives. In practice, such communicative situations will exhibit the following characteristics: 1) speakers will have symmetrical chances to speak; 2) assumptions and conceptual frameworks which govern the situation may be called into question by any speaker; and 3) attempts to dominate, or strategic motivations on the part of actors, must be cast aside (see McCarthy, 1978:310f).

The data presented here are illustrative of Habermas' diagnosis of the detrimental effects of "power-saturated" situations in modern life. In addition, data are presented which shed light on how relatively successful we were in establishing the "ideal speech situation" in the groups.

## **DATA: QUALITATIVE**

The time schedules, daily journals, and transcripts of tape-recorded conversations in the home indicated that Habermas' concepts of "power-distorted communication" and "colonization of the lifeworld" were in evidence in these women's lives. In the process of trying to expand their horizons and to earn requisite income, women must meet the demands of the university and corporate worlds. Women who previously spent full time maintaining a household and caring for children had to make changes in their schedules accordingly. The data from the time schedules (see Malhotra, 1984) indicate that household activities did not decrease when the women who were married and/or had children entered school. Rather, they reported spending less time in sleep, in leisure activities, and with children.

Nancy's experience of frustration and lack of satisfaction was typical of mothers in the study. Nancy is a divorced mother, age 47, with a daughter 16 and a son 12. Her daily life as reflected in her diary and time schedules is a whirlwind of carpools, cooking, working at a dull, low-paying job, filling out health insurance claims, balancing her checkbook, household chores, yard work, shopping, homework, dealing with dental bills and psychologist's bills for her children, keeping the car running, and feeding and clothing her family. She expresses frustration at the hassles and lack of satisfactions in daily life, and at seemingly never getting anything done to her satisfaction. The little time she has for social life she has found to be disappointing due to a shortage of single men in her age bracket. She was working 30 hours a week, taking 12 hours of

class work, and driving both children to and from school and to all of their activities. She seemed to blame herself for her failures, saying that perhaps if she were better organized she could get more done. Her time schedules actually reflect an extremely intense organization which allowed her to keep up with the multiple demands on her time and energy. With her schedule, a necessary car repair turned out to have a traumatic impact on her family's life for the week.

Some success in alleviating the effects of what Habermas calls "institutional boundedness" and "power distortions" in communication was evident in the groups. For each aspect of the data provided, some women decided they did not wish to provide it or they provided it only in limited form. Interestingly, in their evaluation of the effect of each aspect of the research on their self-understandings and/or behavior, the home taping, transcript and analysis had an effect on the largest percentage of those who complied (see Malhotra, 1984). About one-fourth of the women chose not to submit this aspect of the data, however. In discussion they said that they could not get their family members to participate, or that they could not get them to exhibit "normal" conversation on the tape. Two participants refused because they felt it invaded their privacy. The strongest negative response was to the home taping.

Another indication of a feeling of lack of pressure in regard to data provided was the varying length, frankness and intensity of the diaries. Some diaries are soliloquies about deeply personal and important conflicts. Although she said little in the group discussions, one woman used her diary to explore her feelings about her disintegrating marriage. Other diaries were written at a superficial level. This indicates that pressures upon participants in regard to level of disclosure were minimal. The depth of self-reflection was at each woman's discretion.

Participants were encouraged to be involved at all levels of the process, including involvement in data analysis and writing and presenting results. This was actualized by several of the participants who wrote and presented papers at a professional meeting based on aspects of the research (see Owens, 1981; Stabel, 1981; Stem, 1981). The norms surrounding the functioning of the small groups also facilitated communicative competency in Habermas' sense. Each group independently decided to maintain the norm of confidentiality, that is, not to reveal the content of group discussions outside of the group. Participants did directly effect the data-gathering process in other ways. For example, the suggested format for keeping the four weekly time schedules was found to be too cumbersome by the women. One of them suggested a revised format which was supported by the others and implemented.

The discussions were about everyday life experiences, but took place out of their usual context. This would serve to inhibit what Habermas calls "institutional boundedness" which tends to distort communication (1979: 40f). The discussions also involved self-reflection and dialogue bearing some similarity

to a psychoanalytic hermeneutical process. The small groups provided an occasion for a critical eye to be cast upon childhood and cultural influences upon the self. The effect of early primary relationships on current patterns of activities was a focus of the autobiographies and of the phenomenologically based time studies as well as the discussions surrounding them.

Communication in the groups was characteristically "constraint free." With few exceptions, the women did contribute to the ongoing discussions. An emphasis on concepts that elucidated the nature and the effect of power on one's own experiences facilitated this. For example, the group members read Marilyn French's *The Women's Room*, which is a devastating critique of the effect of male domination. In one part of the novel, Myra, the main character, uses the imagery of "diapers and green beans" to express the central foci of her life while she was the wife of a medical student. Later, she had become an efficient physician's wife, faithfully administering the consumption and maintenance of the upper-middle-class life. These experiences of Myra's served as a springboard for recounting and sharing understandings of similar experiences. One woman recalled her struggles to take care of two babies and her husband's needs while attending school. Another, who had been a homemaker for many years, spoke of her similar feeling of boredom and powerlessness during the time she raised the four children (now young adults) while her husband's career blossomed. He traveled to conferences in Hawaii and other exotic places while she stayed home with the children. In addition, she was required to make all the management decisions regarding the children and to carry them out including moving the family and getting them settled in new schools ten times. A third participant recounted her feeling of bitterness. At the beginning of the term she had helped her three children prepare for school and packed her husband's clothing for a business trip. Since these kinds of services were not reciprocated, she found herself starting the semester in college with her own wardrobe in disarray.

Two participants said little in the group discussions. It was evident through reading the narrative documents that their silence did not signify lack of involvement. They found that the disclosures in the group were distinctly related to the reflective processes. One woman informed the researcher that her silence was due to being in the process of divorce. She did not feel comfortable talking about it openly. However, she said that the readings and discussions were helping her to understand and to cope with her own experience.

Direct observation of the groups indicated that Habermas' four criteria of the ideal speech situation, or communicative competency, were fulfilled to a considerable extent. Comprehensibility was shown in the patience with which the women questioned a Nigerian woman, until they learned to decipher her broken English. Similarly, understandability, or speaking within appropriate norms, seemed to be high, which in part attests to the time spent in each group at the beginning to reach operative norms for the discussions. Little or no pressure

was brought to bear by a group member or leader for anyone to disclose information. One negative instance was observed when a woman brought up a sensitive subject of importance to her but was ignored by the group. This large, physically unattractive woman spoke of her difficulty in finding suitable male companions and resorting to masturbation. No one, not even the group leader, responded to the comment. Apparently, this topic at this time was not within the normative boundaries to be dealt with adequately by the group.

That the truth content was high in the groups was evident in the consistency between the content of the discussions and that found in the narrative documents. Consistent expression of deviant viewpoints took place and was encouraged. The group members seemed to feel comfortable in openly challenging the statements of each other which they did not agree with or find plausible. One woman's truth content was challenged by the group to the point that she took action to support her contention that her husband was ideally equalitarian in his relationship with her. To face the challenge, she brought her husband to the group for them to meet!

The sensitivity to "power" ironically caused the researcher to fail to curtail the exertion of power by a group member. In reviewing the videotapes, the researcher noted that her own hesitancy to influence the discussions caused her to allow one group member to take up an inordinate amount of group time in speaking of her own problems and concerns. This was corroborated by the diaries of several of the other group members who expressed boredom and anger with this participant's domination of the group.

The group process also in some ways exceeded the boundaries of Habermas' "ideal speech situation," for the Habermasian model stresses truth-seeking and the development of a rational process of decision-making. The communicative process as described by Habermas neither includes nor precludes the embodied expression of pains and joys, desires and wonders. Dallmayr (1981) refers to such experiences as "other voices." Intense emotions are evident in communicative acts which create meaning and coherency for the self and thus make possible an adequate expression of political interests (see Denzin, 1984). Such authentic self-formative speech acts relate desires to contexts and uncover the sources and transmissions of power in everyday life. Interests otherwise expressed may be only transmissions of unrecognized authorities or even of repressive desublimations" (Marcuse, 1964).

Such expressions may, perhaps even necessarily, be metaphors (McFague, 1975). They may mirror repressions and frames of which we are yet unaware as our needs search for linguistic form. They always have emotional content. They are always expressive of desires. Such kinds of motivations, which Habermas would label "strategic," cannot be eliminated; they can only be censored (Kristeva, 1980).

## QUANTITATIVE FINDINGS: A SUMMARY

Attempts were made to systematize and verify the qualitative results. Several instruments were constructed by groups of research assistants. The first of these was an assessment of each participant's "communicative competency" based on Habermasian criteria as observed on the videotapes of group interaction early and late in the process. Secondly, transcripts and analyses were completed of the audiotapes of family dinner-time conversations. The communicative competency and level of dominance of participants at home were based on these transcripts.

These data were factor analyzed. The first factor indicated that the judgments associated with communicative competency tended to be coherent and were positively associated with being supportive and stimulating. The items from the assessment of communicative competency in the home setting consistently loaded on a different factor from those in the group settings. This suggests that the group and home settings involved different sets of capabilities on the part of the participants. More tendency to be domineering was exhibited in the home setting. While this was to be expected in interactions with children in contrast with peer interaction, only a third of the conversations included children. This finding does confirm that the group processes were relatively domination free. Comprehensibility, normative appropriateness, and sincerity were judged to be higher in the group settings while objective truth content was judged to be slightly higher in the home.

In summary, there was a distinct difference between the communicative competency ratings demonstrated in the home and in the group setting. The participants, for the most part, demonstrated an ability to share and to communicate on a different level in the group setting, perhaps due to the approach taken in the setting which encouraged open discourse. The home setting is institutionally bounded. Also, pragmatically necessary tasks must be accomplished. Discourse oriented toward increased understanding is not an everyday dinner-time objective.

A detailed analysis of the interaction shown on the videotapes was also done by a team of research assistants who were unaware of Habermas' theories. They recorded such elements as open and closed body patterns, hesitant or confident speech, frequency of supportive comments and of origination of topics. What is of pertinence here is the changes that were evident in the patternings of these behaviors between the early and late tapings. These data seem to support the contention that Habermas' principles were in practice in the groups and that therapeutic results obtained from the processes. Minimal discomfort, as exhibited by closed body language and hesitant speech patterns, was in evidence.

### **Effect of Research on Participants**

Elsewhere, analysis has been presented of the effects of being involved in the research on the lives of the participants (Malhotra, 1984). Based on evaluations of their own involvement and on their diaries kept throughout the process, group involvement in the research had changed the understandings or behaviors of participants. Eighteen (34%) of the participants reported both changed behaviors and understandings; 24 (45%) reported changed understanding only. Those remaining reported no effect from some aspects of the research, and five did not complete the evaluation.

### **CONCLUSION: HABERMAS' PERSPECTIVE IN RELATION TO CLINICAL PRACTICE IN SOCIOLOGY**

Habermas has provided a basis not only for understanding, but also for alleviating the conditions of contemporary mass society. The clinical sociologist, both in the role of researcher and clinician, must transform these concepts into practice. The role of "clinical sociologist" already implies power—the power of the expert. To practice Habermasian clinical sociology thus requires that the clinician be aware of this and make efforts to alleviate these effects. In order to accomplish this, it is important that the clinician take the attitude of solicitous watchfulness. To borrow from Heidegger: the therapist would be seen as a cultivator, providing the soil and conditions for growth.

The Habermasian clinician must come to the situation with sufficient self-understanding to be aware of how his or her own past experiences may effect perceptions and emotional reactions. The capacity for constant self-reflection may be the product of having been psychoanalyzed or having experienced other sensitizing therapeutic or educational processes.

Ongoing supervision is one way this may occur, however that supervision itself should be Habermasian. The institutional constraints existing in the situations which bring the clinical sociologist and client into contact must be ameliorated to every extent possible. For example, clients must be free from reprisal for opinions, attitudes or feelings expressed. Codes of ethics that emphasize meeting the needs of the client as opposed to those of the sociologist in the clinical situation are important social reinforcements, as are professional associations.

Traditionally, therapy is divided into assessment or diagnosis and treatment. In the Habermasian framework, these are not really separable processes. However, it may be valuable to assess the extent of power-distorted communication (see Malhotra and Deneen, 1982) in the interaction of consultees. Also the extent to which the everyday life of clients has been fragmented and colonized by media, commercial and governmental powers would be important to note. A

Habermasian clinical sociologist would also assess tendencies for communication to be strategically oriented or oriented toward reaching meaningful understanding.

Applied to group practice, groups would be structured to allow for all assumptions to be questioned. The clinical sociologist would seek to facilitate self-reflection and provide support for the discovery of the effects of domination on interaction.

A major shortcoming of Habermas' "ideal speech situation" as a model for clinical sociological practice with groups is its cognitive-rational emphasis. Groups of persons engaged in in-depth reflection and mutual truth seeking speak in many voices and with vivid emotions. They speak as beings existing with bodies and the realities inflicted by bodies. These aspects were an evident part of the group processes discussed in this paper. Aspects of these processes were covered in the study through the use of the Meadian framework and Schutzian phenomenology. A discussion of the usefulness of these sociological theories for clinical practice as studied in this research must remain for a future paper.

This study has attempted to demonstrate that effective clinical sociology with small groups can be conducted from a Habermasian perspective. As such it is an example of the uniqueness, richness and conceptual independence of the field of clinical sociology.

If clinical sociology is to serve the interests of human emancipation, it must draw more intently upon the work of its great theorists in its charting of workable, nonexploitative practice. Habermas is one such theorist. As Habermas successfully points out in *Theory and Practice* (1974), a theory that allows for the constitution of a discourse that unmask power-distorted relationships cannot itself change those relationships. Those changes can only be brought about by those whose consciousness is thereby changed. Manipulative techniques must be discarded by clinical sociologists interested in human emancipation. In Habermas' words:

The vindicating superiority of those who do the enlightening over those who are to be enlightened is theoretically unavoidable, but at the same time it is fictive and requires self-correction. In a process of enlightenment there can only be participants. (1974:40)

## NOTES

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## REFERENCES

- Dallmayr, Fred  
1981 *Twilight of Subjectivity*. Amherst: University of Massachusetts Press.
- Denzin, Norman K.  
1977 *Childhood Socialization*. San Francisco: Jossey-Bass.  
1978 *The Research Act*. New York: McGraw-Hill.  
1984 *On Understanding Emotion*. San Francisco: Jossey-Bass.
- Farris, Buford and James Marsh  
1982 "Habermas' communicative ethics and social work practice." Paper presented at the Midwest Sociological Association Annual Meeting, Kansas City.
- Goffman, Erving  
1961 *Asylums*. New York: Doubleday.
- Habermas, Jurgen  
1970 *Toward A Rational Society*, trans. by Jeremy J. Shapiro London: Heinemann.  
1972 *Knowledge and Human Interests*. Boston: Beacon.  
1974 *Theory and Practice*, trans. by John Viertel, London: Heinemann.  
1979 *Communication and the Evolution of Society*. Boston: Beacon.  
1983 *Theory of Communicative Action*, vol. I. Boston: Beacon.
- Kristeva, Julia  
1980 *Desire in Language*. New York: Columbia University Press.
- Malhotra, Valerie  
1984 "Research as critical reflection: a study of self, time, and communicative competency," *Humanity and Society* 8, no. 4:468-477.
- Malhotra, Valerie and Jeffrey LaMar Deneen  
1982 "Power-saturated vs. appreciative conversations among children and between children and adults." Paper presented at the Xth World Congress of Sociology, Mexico City.
- Marcuse, Herbert  
1964 *One Dimensional Man*. Boston: Beacon Press.
- McCarthy, Thomas  
1978 *The Critical Theory of Jurgen Habermas*. Cambridge, MA: MIT Press.
- McFague, Sally  
1975 *Speaking in Parables*. Philadelphia: Fortran.
- Owens, Lorrie  
1981 "Doing nothing: the effects of keeping time schedules on research participants." Paper presented at the East Texas State University Fall Sociological Research Symposium.
- Rasmussen, David  
1982 "Communicative action and philosophy: reflections on Habermas' Theorie Des Kommunikativen Handelns," *Philosophy and Social Criticism* 9, no. 1:1-29.
- Stabel, Carol  
1981 "An analysis of the effects of writing daily journals." Paper presented at the East Texas State University Fall Sociological Research Symposium.
- Stem, Jerrian  
1981 "The effect of writing a Meadian autobiography." Paper presented at the East Texas State University Fall Sociological Research Symposium.
- Stivers, Richard A.  
1982 *Evil in Modern Myth and Ritual*. Athens: University of Georgia Press.
- Suransky, Valerie Polokow  
1982 *Erosion of Childhood*. Chicago: University of Chicago Press.