

SOCIO-PRAGMALINGUISTIC ANALYSIS OF INTERACTION IN HOUSE M.D.

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Abstrakt

Socio-pragmalingvistická analýza interakcie v televíznom seriáli House

Predmetom výskumu tohto príspevku je socio-pragmalingvistická analýza interakcie v seriáli House, ktorá zahŕňa pohľad na modely (ne)zdvorilosti v tomto seriáli. Cieľom tohto príspevku je stručne objasniť a skúmať zdvorilosť a hrubosť v televíznom seriáli House. Tieto pojmy sú najprv analyzované z teoretického hľadiska. Následne sú teoretické modely aplikované na vybrané časti seriálu za účelom zistenia, či je možné komunikovať slušnosť prostredníctvom hrubosti a ako je takéto správanie vnímané postavami seriálu a divákmi. Výsledky ukázali, že hlavná postava nemení svoje správanie, či už v interakcii s nadriadenými alebo podriadenými, pričom pre divákov, ako ratifikovaných počujúcich, je nezdvorilé správanie zdrojom humoru. Rovnako možno hovoriť o komunikácii prostredníctvom neslušnosti, avšak nie o komunikácii slušnosti prostredníctvom hrubosti.

1 Introduction

The TV drama House M.D. was chosen as an object for scrutiny in this study due to a number of reasons. Firstly, television drama dialogue, as a scripted language, constitutes a rich and complex corpus for interactional analysis. In comparison with realistic, i.e. unscripted language, it provides an opportunity for more targeted analysis, since it is devoid of unnecessary hesitation, hedges, false starts or any features that would result in redundant talk, such as repair sequences (Kozloff 2000, Bubl 2006). Secondly, although impoliteness has gained a great deal of attention in recent years, it is still not studied as much as its opposite phenomenon, politeness (Bousfield 2008). The show House M.D. accounts for a wide range of impoliteness strategies. Thirdly, the main character of the show, Dr. Gregory House, provides an excellent view on (im)politeness strategies in practice. Fourthly, the TV drama House M.D. constitutes, as a community of practice, a very specific network of characters creating their own norms of (im)politeness (Kádár & Haugh 2013). Finally, since House M.D. has been one of the most viewed TV shows worldwide, it is thus worth examining how (im)politeness is perceived not only by characters of the show, but also how it is perceived by the regular viewers (Eurodata, AFP 2009).

The present article focuses primarily on the representation of (im)politeness strategies in the TV drama House M.D. and its perception. Regarding the nature of the TV show and worldwide attention it has drawn, the article addresses two research questions. Firstly, is it possible to find “politeness in rudeness” relative to the norms of a specific community of practice represented by interactions among the characters of the TV series? Secondly, assuming that characters demonstrate the behaviour that

can be classified as (im)polite, how is this behaviour represented and how is this behaviour perceived by the characters and the viewers of the show?

2 Theoretical part: Major approaches to the concept of (im)politeness

A great number of theoretical, empirical works and articles have been written on the notion of politeness. It is a truly difficult task to determine how to interpret the concept of politeness.

(Im)politeness is a part of everyday interaction and therefore the attraction towards the understanding of this social phenomenon is understandable. Since the basis of (im)politeness research studies (Lakoff 1973, Brown & Levinson 1978, Leech 1983), an exhaustive overview and research have been presented on the notion of (im)politeness (Fraser 1990, Culpeper 1996, Eelen 2001, Watts 2003, Bargiela Chiappini 2003, Bousfield 2008, Kádár & Haugh 2013). As the number of studies grows, the view on the concept of (im)politeness changes as well. The first studies viewed (im)politeness as a culturally given feature, determined by people perceived as a homogeneous mass (Brown & Levinson 1978)). This highly criticised approach to (im)politeness as a universal model was followed by a social approach which presented (im)politeness as an evaluation of a hearer and not only the intention of a speaker (Watts 2003). The social approach also introduced two major views on (im)politeness, i.e. first-order (im)politeness (lay or folk understanding of (im)politeness) and second-order (im)politeness (scientific level of (im)politeness understanding). The next step in the research is a quite recent approach which understands (im)politeness as a social practice (Kádár & Haugh). It is proposed that (im)politeness should always be studied with reference to time and social space.

2.1 Penelope Brown and Stephen Levinson

Undoubtedly, the most significant theory of politeness is presented by Penelope Brown and Stephen Levinson. The theory is based on Goffman's concept of face¹. According to Brown & Levinson, "[face] is something that is emotionally invested, and that can be lost, maintained, or enhanced, and must be constantly attended to in interaction" (1978: 66).

In general, "people cooperate (and assume each other's cooperation) in maintaining face in interaction, such cooperation being based on the mutual vulnerability of face" (ibid). Brown & Levinson further divide the concept of face on the positive and the negative one. Positive face is characterized by desires to be liked, admired, ratified, and related to positively, noting that one would threaten positive face by ignoring someone. Negative face is defined as "the want of every 'competent adult member' that his actions be unimpeded by others", or "the basic claim to territories, personal preserves, rights to non-distraction, i.e. the freedom of action and freedom from imposition" (ibid.). Positive face refers to one's self-esteem, while negative face refers to one's freedom to act. These should not be viewed as oppositions but rather as complementing each other.

2.2 Theory of impoliteness

Culpeper (1996: 356) says: "Instead of enhancing or supporting face, impoliteness super-strategies are a means of attacking face." He describes the five super-strategies as follows:

Bald on record impoliteness - the FTA is performed in a direct, clear, unambiguous and concise way in circumstances where face is not irrelevant or minimised.

Comparing Culpeper's model to Brown & Levinson's model, it is noticeable that these models are, in fact, parallel to each other. In his model, he defines strategies for negative and positive impoliteness.

Positive impoliteness - the use of strategies designed to damage the addressee's positive face wants: Ignore, snub the other - fail to acknowledge the other's presence. Exclude the other from an activity. Disassociate from the other - for example, deny association or common ground with the other; avoid sitting together. Be disinterested, unconcerned, unsympathetic. Use inappropriate identity markers - for example, use title and surname when a close relationship pertains, or a nickname when a

¹ Goffman characterizes face as "the positive social value a person effectively claims for himself by the line others assume he has taken during a particular contact. Face is an image of self delineated in terms of approved social attributes" (1955:213).

distant relationship pertains. Use obscure or secretive language - for example, mystify the other with jargon, or use a code known to others in the group, but not the target. Seek disagreement - select a sensitive topic. Make the other feel uncomfortable - do not avoid silence, joke, or use small talk. Swear, or use abusive or profane language. Use derogatory nominations.

Negative impoliteness - the use of strategies designed to damage the addressee's negative face wants: Frighten - instil a belief that action detrimental to the other will occur. Condescend, scorn or ridicule - emphasize your relative power. Be contemptuous. Do not treat the other seriously. Belittle the other (e.g. use diminutives). Invade the other's space - literally (e.g. position yourself closer to the other than the relationship permits) or metaphorically (e.g. ask for or speak about information which is too intimate given the relationship). Explicitly associate the other with a negative aspect - personalize, use the pronouns 'I' and 'you'. Put the other's indebtedness on record.

Sarcasm or mock politeness - the FTA is performed with the use of politeness strategies that are obviously insincere, and thus remain surface realisations. The instances of sarcasm will be discussed in greater detail in separate subchapter.

Withhold politeness - the absence of politeness work where it would be expected. For example, failing to thank somebody for a present may be taken as deliberate impoliteness. (Culpeper 1996: 357)

3 Analytical part: House, power and (im)politeness

Brown and Oilman define power as following: “one person may be said to have power over another in the degree that he is able to control the behaviour of the other. Power is a relationship between at least two persons, and it is nonreciprocal in the sense that both cannot have power in the same area of behaviour” (1960/1972: 225, cited in Spencer-Oatey 2008: 34). Nevertheless, in the show *House M.D.*, Dr. Cuddy, House's boss, has an unconventional and, one could say, discriminative relationship with Dr. House and therefore, Cuddy has reward power (salary increase, less clinic hours), coercive power (extra clinic hours), legitimate power (extra medical cases) and to some extent also referent power (House falls in love with Cuddy) over Dr. House, but it is House who possesses the expert power over Dr. Cuddy, his colleagues, his trainees and patients, due to his status as a diagnostician and infectious disease specialist. Thus, the relationship between House and other participants in interaction is asymmetrical in terms of power.

3.1 Doing (im)politeness at work: House – Cuddy interaction

Dr. House and Dr. Cuddy have an asymmetrical power relationship within the institutional setting of the hospital. Typically, Dr. Cuddy, as House's boss, hence possessing legitimate, reward and coercive power over him, would normally have an advantage in an interaction. However, House has the advantage of expert power over Cuddy and therefore the power struggle is inevitable. The following extract indicates the struggle in which Cuddy tries to exert her authority to which House shows the defiance by virtue of his status of an expert.

Episode 6, season 5, “Joy”

{Cuddy and House explain the risks of kidney transplant to the patient's daughter who is the donor}

1. Cuddy: <doctor House explained to you that all surgeries carry risk? you could die >
2. House: and if you don't do it, daddy will die.

{Cuddy turns to House}

3. Cuddy: stop pressuring her.
4. House: sorry. daddy's perfectly healthy.
But we want you to give him a kidney anyway 'cause it'd be cool if he had three.

{Cuddy turns to House again}

5. Cuddy: shut up.

In this example, House is using negative impoliteness strategy – he tries to frighten patient's daughter to make her agree with the surgery (2) and uses his expert power to achieve his professional goals. Cuddy chooses bald on record order (3) and therefore attacking House's negative face to which he

responds with a sarcastic utterance (4) by which he dismisses Cuddy's attack. She takes advantage of her status and again uses bald on record order towards House. In this particular exchange, House's remark (4) may sound offensive to the addressee, the patient's daughter, but again, the audience is presented with an example of the scene in which impoliteness accounts for the humorous effect on viewers.

3.2 Doing (im)politeness at work: House – authorities interaction

With regard to community of practice House and Cuddy share social similarities as they are in daily contact. The length of acquaintance is not known, however, since Cuddy hired House it can be assumed that they knew each other for some time and during the show, it can be observed that they come to know each other quite well. Also, both of them share the inclination towards helping people and since they become lovers, the affect could be classified as positive. Nevertheless, the character of Vogler does not share many of the listed components with House. Vogler is a businessman, not a doctor, he and House do not know each other for a long time and do not know each other well. They have met only a few times and do not share similar goals in their activity. The affect of their relationship is openly negative. The clash between him and House in a struggle over power is demonstrated in the example.

Episode 17, season 1, "Role Model"

{House is leaving Vogler's office}

1. Vogler: oh, and by the way, I need you to give a speech at the National Cardiology Conference next week
2. House: I don't do speeches.
I'm shy.
3. Vogler: Eastbrook Pharmaceuticals has developed a new ACE inhibitor.
I would like you to extol the virtues of this breakthrough medication
4. House: <Eastbrook Pharmaceuticals>

...
wait a second, don't I own that company?
oh, no, that's right, you do

5. Vogler: viopril is a significant improvement over the old version all there in the study

{Vogler hands House an information booklet}

6. House: I know its price tag is significantly improved
7. Vogler: hhh

you can either give one ten minute talk and one three minute diagnosis or you can fire one of your pets

...

my understanding was that you believed in rationality above all else

{House grabs the Viopril information booklet}

8. House: <viopril>

Vogler uses bald on record request (1) towards House, attacking his negative face, to which he responds by a blatant lie (2). Vogler does not acknowledge his response and continues in explaining why he needs House to give a speech using a positive politeness strategy (3), prefacing a question (in this case, prefacing an utterance). House responds via sarcastic remark (4) and attacks Vogler's positive face by implicitly accusing him of a biased approach to the medication. Vogler chooses explanation as a response to the attack on his face (5), however, House continues in accusations and in the attack on Vogler's positive face (6). Consequently, Vogler chooses negative impoliteness strategy (7) and threatens House, trying to damage his negative face. During the entire exchange, Vogler ignores House's reactions, thus implicating positive impoliteness strategy. House-Vogler relationship is more distant than House-Cuddy relationship.

3.3 Doing (im)politeness at work: House – team members interaction

The most outstanding team member throughout the eight series of the show is Dr. Eric Foreman. His main concern is to become a genius doctor as House is and, at the same time, to gain as much independence as possible. During the show, he achieves his goals and even becomes House's boss. However, the power struggle between him and House is great since House always overrides Foreman by expert power, even when Foreman is his boss. Moreover, Foreman's desire to become a great doctor gives House also the advantage of referent power. The most significant feature presented in House – Foreman interaction relative to (im)politeness is based on racial comments towards Foreman who is an Afro-American. Given his past as a member of a gang and problems with law when he was sixteen, House bases his face attacks on American stereotypes about "black" people and Foreman's origin.

Episode 16, season 2, "Safe"

{during diagnostic session, Foreman snatches the whiteboard marker from House and starts writing}

1. Foreman: heart failure could be either infection,
.. coronary disease,
or [rejection]

{House, standing very close to Foreman, snatches the marker back from him}

2. House: [sssorry], there's a reason they call it the whiteboard
It's not my rule.
WHAT ties both of these conditions together?

{everybody looking at each other, saying nothing}

3. Foreman: (0.10)
OK, we can all stare at each other or we can investigate what caused the heart failure
just the heart failure

{he turns to House}

- ° you wanna give me that black marker? °

{House hands the marker over and goes to sit down, Foreman writes on the board and others offer explanations of the patient's condition}

House is permanently making racial comments towards Foreman and thus threatening his positive face. In the example above, Foreman tries to find out what causes patient's problems (1). By means of snatching the marker from Foreman, House is excluding him from the activity and attacking his positive face while at the same time standing very close to him and thus attacking his negative face. House is being condescending and emphasizing his relative power and dominance over Foreman (which is justifiable due to their employer – employee relationship). The non-verbal action in connection with the implicit remark about the whiteboard (2) allows House to avoid bald on record imperative (do not write on the whiteboard). By transmitting the responsibility to some higher authority that started calling the board white, he uses abrogation (I'm just a messenger, it's not my rule) as a response to Foreman's attempt to write on the board. By means of reminding Foreman his skin colour, House is indirectly excluding him from the society (since Foreman is the only "black" person in the team) and implicating positive impoliteness strategy. The word 'sorry', used at the beginning of the utterance, is probably not a sign of mitigation, but more likely the sign by which House tries to draw the attention of Foreman (used instead of his name). The inability of other colleagues to come up with correct diagnosis (3) helps Foreman to save his face and to get back at House by attacking his positive face. Foreman decides to use bald on record request towards House with an informal 'wanna' together with 'that black marker'. By using the distal term 'that' black marker, Foreman shows House that he is probably not aware of the fact that he is holding black marker. Since House previously, though not explicitly, stated that whiteboard can be used by white people only, therefore, by the same token, Foreman uses the same assumption about the 'black' people and black markers. Foreman does not perceive House's face attack at him (2) as offensive, since no further argument occurs. Even though, Foreman's reaction could be classified as offensive, too, there are no signs of further disagreement between

them. This exchange is, again, not supposed to be humorous for the addresses (House to Foreman, then, Foreman to House), but aimed at the audience and their amusement.

3.4 Doing (im)politeness at work: doctor – patient interaction

The doctor – patient interaction is imbalanced and asymmetrical in terms of power. Doctor has usually more expert and legitimate power. With respect to distance, a careful and sensitive approach from the part of the doctor is expected, since patient is not a familiar person and they share only a similarity relative to a common goal at a given moment. Participants' communicative styles are very different as well, since the doctor uses professional talk which is normally not completely understandable for a patient. With regard to community of practice, a thoughtful and professional behaviour is expected from both participants in the interaction; however, it is the doctor who is responsible due to power dominance.

Episode 3, season 2, “Humpty Dumpty”

{House is listening to the chest of the same paranoid African-American man Foreman has examined earlier}

1. House: snap, crackle, pop. got some Rice Crispies in there?
2. Patient: that bad, huh?
3. House: you were here yesterday.
I see from the chart that Dr. Foreman prescribed medicine
... not a miracle
got to give this stuff more than a day.
4. Patient: I didn't fill that Oreo's prescription
5. House: on the theory that you didn't trust him because he's black...
well, I'm going to prescribe the same medicine
see if you fill it this time
6. Patient: I'm not buying into no racist drug, okay?
7. House: ...pffff
it's racist because it helps black people more than white people?
well, on behalf of my peeps, let me say, thanks for dying on principle for us.
8. Patient: look
...
my heart's red, your heart's red.
and it don't make no sense to give us different drugs.
9. House: you know, I have found a difference.
admittedly, it's a limited sample, but it's my experience in the last ninety seconds that all black people are morons.
sorry, African-Americans.
10. Patient: I'll see another doctor.
11. House: hhh
fine. fine.

{House crumples the first prescription and writes another}

12. House: I'll give you the same medicine we give Republicans.

{House hands the prescription to the patient. Patient smiles and takes it}

House is choosing bald on record impoliteness strategy combined with a sarcastic tone (3), attacking patient's negative face by advising him to give it more time. Patient responds by explaining the situation (4). House chooses to attack patient's positive face by raising a sensitive topic of race (5, 7) and combines it with a sarcastic tone. Patient uses defensive strategies to respond to attacks by explanations (6, 8). House, however, continues in showing contempt and offending the paranoid patient by bald on record impoliteness strategy and insults the patient (9). Patient is offended and threatens House (10), to which he decides to reply by insincere agreement with patient request completed by a sar-

castic utterance attacking positive face of the patient by raising another sensitive topic of politics (11, 12).

3.5 Doing (im)politeness in friendship: House – Wilson interaction

While considering friendship in the TV drama House M.D., it is Dr. Wilson who is the closest friend to House throughout the eight series of the show. Even though, both of them are rather autonomous figures, it is Wilson who is searching for more connectedness in their relationship. Similarly, he is also more open about their friendship, however, by the end of the show, when Wilson is dying from cancer, House openly demonstrate his openness and connectedness to Wilson. It is Wilson who could be referred to as House's consciousness and following examples show their relationship from the point of view of (im)politeness.

With regard to power, House might have some referent power over Wilson, however, it is not relevant for the analysis of their interactions. Nevertheless, it is interesting to observe their interactions in terms of distance, since they are very close, but the exchanges might show otherwise.

Episode 4, season 2, "TB or Not TB"

{House talking about his patient who works as a humanitarian doctor in Africa}

1. House: every minute that we refuse to love one another
another puppy cries another tear
2. Wilson: you're just mad that he's closer to a Nobel Prize than you are
3. House: and yet I've nailed more Swedish babes
<crazy, crazy> world
4. Wilson: it's not just a trip to Stockholm, you know
it comes with a cash prize
5. House: seriously?
...
6. Wilson: no wonder everyone's going after that peace thing
he cures thousands of people every year
.. you cure what?
thirty?
7. House: McDonald's makes a better hamburger than your mother because they make
more?
8. Wilson: oh, I see ↑
so you hate him because the lives he saves aren't as good as the lives you save
9. House: >yup<
that's the reason
Nobel invented dynamite
I won't accept his blood money

House starts the interaction with a sarcastic remark, attacking positive face of the patient (1). Even though, it is not Wilson's face that is being attacked, he saves it by accusing House of envy (2) and returns the positive face attack back to House. He violates the maxim of relevance and responds, again, by sarcasm (3) (which is also expressed prosodically in the scene). Wilson understands the logic of House's seemingly irrelevant utterance (Nobel Prize is awarded in Stockholm, Sweden) and responds by explanation (4). House condescendingly and indirectly attacks positive face of Nobel Prize awardees (5). Wilson violates the maxim of relevance and attacks House's positive face by challenging him to comparison with the patient (6). House responds by a defensive sarcastic question (7) implying that Wilson compares incomparable. On the other hand, Wilson accuses House of hatred based on envy and arrogance (8), attacking his negative face. House expresses insincere agreement (9) and explains that his hatred is not based on envy but on a higher principle, trying to save his face.

3 Conclusion

The first research question was aimed at the possibility of expressing polite through impolite relative to the norms of a specific community of practice constituted by the show *House M.D.* The interaction between House and Cuddy, and similarly between House and authorities was based on power struggle, mostly between legitimate (boss and authorities) and expert power (House). In these cases, House challenged social superiors via impoliteness and undermined their legitimate power by virtue of his expert power. There was no difference in House's (im)politeness strategies used either in interaction with Cuddy, with whom he has very close relationship or in interaction with authorities within a distant relationship. In order to achieve his goals he employs sarcasm, negative impoliteness strategies, tries to attack back at his interlocutors when they attack him, and defends his face.

(Im)politeness strategies used in interaction with House's team and patients are based on the domination of legitimate and expert power. The most significant features in this category are sarcasm, banter and with regard to House's team, it can be seen that impoliteness triggers impoliteness. Explanations are often chosen as a reply to face attacks. Interestingly, there is no change in an attitude and linguistic choices employed by House in case of a situational power struggle with patient carrying a weapon. Nevertheless, in spite of recurrent impoliteness strategies and face attacks during interactions, the behaviour cannot be clearly defined as impolite.

The interactions of House and Wilson carry signs of directly impolite behaviour with many insults and bald on record strategies. They negotiate their friendship and solidarity through impoliteness and sarcasm and banter. Also, defensive responses are often used as replies to face attacks. In this particular category, impoliteness is used for delayed humorous effect which means that impoliteness can occur much sooner than a response to it which can be delayed for several scenes or even episodes. However, face attacks are not openly perceived as impolite by addressees and therefore it is not possible to draw a clear conclusion that would label it as impolite.

Through conversational analysis of the selected scenes between the main protagonist, Dr. House, and his team/bosses/patients/friends, it can be noted an extensive use of sarcasm which provokes similar responses from all the interlocutors. If banter and sarcasm, defined in Culpeper's terms as Leech's irony principle, is taken into consideration as the most outstanding feature of House's impoliteness strategies, then it can be assumed that his conversational style does not overtly conflict the Politeness Principle. While carefully considering the responses of House's interlocutors in terms of not only the second-order politeness but also the first-order politeness, it can be concluded that since no open arguments take place within the interactions even with attacks on interactants' faces, it is possible to communicate through impolite within this particular community of practice. However, the data does not account for the possibility of communicating politeness through rudeness.

The second research question addressed representation and perception of (im)polite behaviour by the characters (addressees) and the viewers (recipients) of the show.

(Im)politeness strategies used by House are often indirect (irony, sarcasm, banter, metaphors) and therefore cannot be defined as overtly impolite. In many cases, it is the addressee (another character of the show) who has to decipher the message and decide whether the utterance is used as a face attack. It can be concluded that from all House's interlocutors, it is the patients who are most often incapable of deciphering House's indirect face attacks. From the analysed scenes, none of them ends in a direct argument due to filming techniques, scripts or cuts of the scenes. Moreover, it can be assumed that due to the nature of the scripted language and time limitations of the show, (im)politeness strategies are dealt with as a source of humour for the recipients (viewers). Moreover, the viewers, as ratified overhearers, evaluate impoliteness in the show as humorous, not offensive.

If the sarcasm is assumed to represent the most pervasive feature within the characters' interactions, then the violation of maxims of the Cooperative Principle, leading to incongruity can explain the perception of the (im)polite behaviour by the viewers of the show. House's witty replies and sarcastic remarks might be (in)directly offensive to the addressees, i.e. other characters, but from the viewer's point of view, the effect of the (im)politeness strategies produce humorous effect in most cases.

Due to the enormous corpus which consists of 177 episodes of the show *House M.D.*, I have been able only to scratch the surface of issue of impoliteness in drama discourse and all the impoliteness

strategies that are used in the series. One of the difficulties in analysing the data is the fact that (im)politeness is a very peculiar phenomenon and due to the nature of qualitative analysis the accuracy of the present analysis might be questioned even though the methods used in the analysis may be precise.

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