

# The Violation of Cooperative Principles and Four Maxims in Iranian Psychological Consultation

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## Abstract

This paper aimed to investigate new ways of understanding non-cooperative attitudes of the speakers and the violation of Cooperative Principle maxims in real Iranian psychological consulting session. The data base consists of recorded conversations between a male psychotherapist and his patients during therapy sessions. After analysing their language by means of conversational implicature and the occurrences of the violation of Cooperative Principle, it is concluded that the recognition of conversational implicature is essential for the understanding of the non-cooperative attitudes of the speakers and their violation of one or more Cooperative Principle maxims. Moreover, it was clear that the message people intend to convey is not wholly contained within the words they use, but it is also dependent on how hearers interpreting the message taking into account context and implicated meaning. Finally, there were instances when the purpose was to intentionally miscommunicate within this sophisticated social context. The study has a contribution to the existing knowledge in the area of pragmatics and psychology development.

## Keywords

Cooperative Principle; Grice's Maxims; Conversational Implicature; Flouting; Violation; Psychological Consultation

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## 1. Introduction

Philosopher Paul Grice (1975), who proposed a theory of conversation which consists of a Cooperative Principle

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(hereafter called CP) declares: “Make your conversational contribution such as it is required, at the stage at which it occurs, by the accepted purpose or direction of the talk exchange in which you are engaged”. In other words, the CP attempts to make explicit certain rational principles observed by people when they converse (Hadi, 2013). It is so called because listeners and speakers generally speak cooperatively and mutually accept one another to be understood in a particular way, unless they have reasons for not doing so. The building blocks of CP are four conversational maxims that arise from the pragmatics of natural language. Pragmatics is the study of the context-dependent aspects of meaning which are systematically abstracted away from the construction of logical form (Horn & Ward, 2004).

## 2. Four Conversational Maxims (Gricean Maxims)

Maxim of Quality: Do not say what you believe to be false or that for which you lack evidence.

Maxim of Quantity: Say as much as but no more than is necessary.

Maxim of Relation: Be relevant.

Maxim of Manner: Be Clear. Avoid ambiguity. Be brief. Be orderly.

## 3. Flouting of a Maxim and Implicature

Gricean Maxims are not always obeyed and their violation or flouting bears more information than if they were obeyed (Darighgoftar & Ghaffari, 2012). The flouting of a maxim can be defined as occasions when one or several maxims are absent during communication processes (Jia, 2008). For instance, telling a joke, writing a book and making a movie are different situations in which CP can be flouted, to surprise people so they burst into laughter (Jia, 2008), to better develop the plot of the story (Mey, 2001), or to create a special effect (Jia, 2008). Implicature is what the speaker intends to communicate to the audience beyond or instead of what has been literally said (Robinson, 1989). This occurs when something is suggested in an utterance in a way that is neither expressed nor strictly implied, it “is derived from the verb ‘to imply’” (Mey, 2001). For example, the sentence “Bob had a stroke and retired” strongly suggests that Bob had the stroke before getting retired, but the sentence would still be strictly true if Bob had his stroke after he retired.

Leech (1983) proposed the Politeness Principle (PP) in order to account for violations of CP. Albeit, there may still be a clash between PP and CP (see Jia, 2008: p. 89). In most cases of maxim flouting interlocutors violate CP in favour of PP, not because they do not wish to cooperate, but because certain societal norms demand it. As an example, in the military environment the standardized reply of “Yes Sir!” is uttered by subordinates to meet the need to be polite to their super-ordinates regardless of their real willingness (Jia, 2008).

Traditional research on Grice CP is mainly dedicated to criticizing its practicality or pinpointing diverse cases of its violation. While a need is felt for a new way of perceiving CP; to investigate what are the implicatures to draw from violation of CP maxims in different contexts? Why do speakers violate it? It is true that people do not follow the conversational maxims all the time, but more important is that what can be inferred from it to enable teachers better understand their students, enlighten psychiatrists to help their patients more effectively, etc. The main argument concerning CP is that Grice’s principle does not explain why speakers often violate it. This study aimed to shed light on the above argument by analysing the reasons behind interlocutors’ violation of the maxims. Later on we interpreted the rationale behind their non-cooperative attitudes by referring to the fact that CP explains how utterances convey indirect messages (illocutionary goals: what is intended). The authors deliberately chose psychological consulting context where patients are often inclined to conceal or deny their behavioural problems due to cultural, mental and emotional barriers, fear of judicial consequences, etc. All of which are some (of many) different reasons why patients do not follow CP maxims in this sophisticated context more often than in ordinary talk. This is where pragmatics overlaps with disciplines like psychology. The present study is one of the first attempts to explore the reasons behind non-cooperative attitudes of the speakers and the violation of CP maxims in one such context, namely Iran. The study tackled this issue and provided a better understanding of the interpretations associated with Grice’s CP maxims and their violations.

## 4. Literature Review

Theoretical arguments have been advanced for CP. Jia (2008) argues that “... cooperation is essential for a conversation to take place. In order to make a conversation go on successfully and smoothly, the speakers on both

sides should hold a cooperative attitude” (p. 88). Hadi (2013) states, Grice’s CP has played a historically important role in pragmatics because this theory separated pragmatics from linguistics. She argues that although Grice’s work faces major limitations, it is still at the centre of the disciplines of pragmatics and the important role it plays in this field cannot be denied. She suggests “we should be careful interpreting what is meant by “cooperation” in Grice’s CP. His notion is different from the everyday notion of cooperation. Some authors make this difference clear to readers. To have a fair understanding of the Grice’ CP, it would be better to study it in isolation” (p. 71). Although there is a growing body of literature on Grice’s CP (see Mey, 2001; Jia, 2008; Ladegaard, 2009; Hadi, 2013) the research on CP has not yet been conclusive in regard to its application in psychological consulting, a context in which people use language differently (providing that a study is carefully designed, in particular primary data is collected first-hand from real psychological consulting, before one can make claims for their conclusiveness).

#### 4.1. Critical Challenges to Grice’s Theory

Since CP emergence, some researchers have disputed its universality by arguing that cooperative conversation, as with most social behaviour, is culturally determined, and therefore cannot be universally applied due to intercultural differences (see Taillard, 2004; Sarangi & Slembrouck, 1992). For example, Keenan (1976) claimed that, Malagasy speakers often appeared to flout the maxim of quantity, so they must lack the maxim of quantity. However, Prince (1982) noted, just because a maxim is flouted, this does not mean that it does not exist. Furthermore, it is the flouting of maxims that actually gives rise to implicature. He believed as long as it can be shown that when the maxim of quantity is flouted Malagasy speakers draw inferences from it, then the maxim is present. Also, Hadi (2013) declared that Grice never explicitly stated that his theory had universal application, so that is a wrong assumption among some scholars.

Sarangi & Slembrouck (1992) castigated the Gricean claim for the normality of cooperation. They suggested that Grice’s framework should be extended to include societal factors such as the social position of the communicators. They declared, to follow the Gricean notion of cooperation, the institution, in such circumstances, would be expected to adopt, at least from the client’s point of view the client’s goal as its own, or act towards negotiating a “mutually accepted goal”.

Leech (1983) criticized CP being neither practical nor applicable for “real language use”. Larkin & O’Malley (1973) claimed that the CP’s conversational restrictions do not work because the majority of declarative sentences do not have an information-bearing function. They said the Gricean Maxims can easily be misinterpreted to be a guideline for etiquette, instructing speakers on how to be moral, polite conversationalists.

According to Robinson (1989), Grice’s CP assumes that speakers must have a common goal or purpose to their conversations in order for them to understand what the other interlocutor means and implies. Yet there are abundant examples of conversations without any common purpose. He argues for a reformulation of the CP after exploring Grice’s notion of rationality, which Grice regarded as the basis of the CP. Robinson’s revised principle requires a weaker form of cooperation than previously required, namely cooperation with the communicative expectation of others. One interesting result of his reformulation is that we no longer need to require speakers’ utterances to be true, as Grice does, but rather to be plausible.

Ladegaard (2009) also offers a critical discussion of Gricean cooperation. He analyses examples of student-teacher dialogues which show that non-cooperation and non-accommodation may be employed as the preferred discourse strategy, and that the aim of communication may be to miscommunicate rather than to communicate successfully. The author suggested that “meaning” in language only makes sense in the light of the social and psychological conditions under which language is produced, and that the notion of cooperation should be analysed in terms of what people want to obtain by their communication. Finally he proposed Communication Accommodation Theory and the notion of resistance as more appropriate explanatory frameworks to achieve this end.

Reviewing the experimental studies that investigate CP is essential to avoid over-mining. Although CP has been widely studied by its proponents and opponents, its application in psychological consulting is, however, rarely mentioned. Jia (2008) explored the violation of CP in the Chinese environment of psychological Consulting. She analysed conversational implicature and the occurrences of the violation of CP in selected excerpts from a novel, “The female psychologist” by Bi Shumin. She concluded that the recognition of conversational implicature is crucial for the understanding of the non-cooperative attitudes of the speakers and the violation of one or more CP maxims. At best, it was an initiative effort to explore the domain of psychological consulting

from a pragmatic perspective. However the study was limited due to the applied data collection method, which was second hand data obtained via novel excerpts. As the author herself admits: “the novel reflects, to some extent, what happens in a real psychological consulting”. So further study is needed to probe the same issue based on first hand data obtained through real life consulting sessions, not via books or novels.

Darighoftar & Ghaffari (2012) designed a study to determine whether there is any difference between speakers’ ways of violating Gricean maxims according to homeopathy classifications. Their study is not exactly exploring the violation of Grice’s CP; it seeks some connections between language factors and other human issues. Data of the research is transcription of patients’ talk in consulting sessions, who are under homeopathic treatment. After they analysed patients’ language by means of the Gricean Maxims it was concluded that the differentiating element in violating the maxims is different homeopathic characteristics, not gender differences. The authors suggested there are many other linguistic issues to work on with such a homeolinguistic point of view, for example, studding intonation patterns, choice of alternate syntactic structures, use of hedges, and observing the body language of each character.

#### 4.2. The Gap in the Previous CP Research

Multiple studies on Grice (1975) CP and violation of CP conducted, and still concerns about rigorous methodologies and generalizability of results alongside theoretical problems have kept the outcomes in shadow. The previous studies would have benefited more if real data from actual psychological consulting sessions had been collected to further account for the variability in the results. The next phase of investigation should explore the reasons behind violation of CP in different contexts such as the sophisticated context of psychological consulting and its contribution to pragmatics development, or what type of inferences can be drawn from flouting CP maxims in different situational contexts. Still the thorny questions on the issue are unresolved. Will all violations go the same way? How can, for example, conversational implicature alongside violation of CP in an expanding circle country (as in the Iranian context of psychological consultation) be justified while judging CP and its potential interpretations? Perhaps what is needed is reframing the perception of CP since Grice’s maxims are still very informative even when they are not followed; knowing this can inform future studies.

#### 4.3. Objectives

The objective of this study is to shed new light on the violation of CP in the sophisticated situation of psychological consulting, and to investigate the reasons behind speakers’ non-cooperative attitudes in this particular context.

#### 4.4. Research Questions

1. What can be inferred from the non-cooperative attitudes of interlocutors’ and their violation of CP maxims in psychological consulting?
2. How is the violation of one or more CP maxims revealed by linguistic choices of interlocutors during the process of psychological consulting?

#### 4.5. Method and Data Collection

The data in the present study consists of three recorded conversations between a male psychotherapist and his patients collected from psychological consulting sessions, in Shiraz, Iran. The patients are from both genders and different age-range since the linguistic features generally differ based on age and gender. They are dealing with different behavioural problems because it was intended to analyse and interpret distinct cases of CP violation within the same context.

### 5. Data Analysis and Discussion

The analysis of the conversations will focus on the occasions where violations of CP maxims, non-cooperative attitudes or intentional miscommunication occur. The methodology of conversation analysis will be adopted to take a close look at certain lines of the conversations. In doing so, the authors concentrate to bring to light some of the linguistic choices of interlocutors used during psychological consulting from a pragmatic perspective.

## 5.1. Conversation One

In this conversation, the psychotherapist will conduct the consultation. The patient is a pretty middle-aged woman who seems depressed and worried. The following consultation takes place at her first psychotherapy session.

1. Hi ma'am.
2. Hi Doctor.
3. Please have a seat.
4. Thank you.
5. Do you want to tell me about your problem?
6. My problem is exactly what I have written in the form.  
(It's a requirement of the clinic that patients fill out a registration form when they make their appointments).
7. Well, it seems that you have some problems, maybe I can help you, but first I have to gain more information about you/know more about you. Then I'll see how I can help you.
8. (Silence). Honestly, I don't know myself what the hell is going on with me/I don't know what the hell is wrong with me. But I know that I'm having chest pain (near my heart). Though my cardiologist has told me it's not serious. I don't know if it's mental or physical problem... I don't know myself, I'm confused.
9. Do you believe your chest pain is serious?
10. No, I don't believe it's serious. You know what... generally I don't feel well (silence), it can be mental illness/weak nervous system.
11. Do you have any idea what is the cause of your illness?
12. What's YOUR idea about the cause of my problem Doctor?
13. It's better to tell me more about yourself. How old are you?
14. Forty-nine.
15. Married?
16. Yes... it has been twenty-three years.
17. Do you have children?
18. No.
19. Do you work?
20. It has been a year since I resigned.  
It has to be mentioned that, some parts of the conversation have been omitted since they observed CP thoroughly and in this paper the focus is on the violation of CP.
21. How's your relationship with your husband?
22. He is very nice to my mother and generally he is a good person.
23. Do you love him?
24. Yes doctor. I'm crazy for him. He's nice to me too, especially to my mother.
25. What kind of person is your mother?
26. Well... she's a woman and she's my mother...she's like other women.
27. Ok. I understand what you mean; it seems that it offends you.
28. You're absolutely right doctor.

From psychiatric point of view, question number 5 is one which is usually asked when the patient (P) herself is not willing to talk about her problem. What normally happens in other cases is that patients themselves start talking about their problems as soon as the psychotherapy session starts. Obviously, it is a part of a psychotherapist (Ps) job to ask about the patient's problem or the reason for visiting, irrespective of the P's willingness or unwillingness to speak. Although the Ps is partially aware of his P's problem and her present mood (since he has already read the P's registration form) he will not give in to her evasive answer, and insists on asking about what is already mentioned in her form (number 5). From a pragmatic point of view, the P's answer number 6, is a conversational implicature. The hidden meaning which the P implies in number 6 is that "I am reluctant to repeat my problem; the repetition brings back both bad memories and depressing feelings for me" (the overall attitude of P is non-cooperative). Furthermore, P's response number 6 violates the maxim of quantity and relation in that it is neither informative, nor relevant enough. This is in line with the results of the similar study done by Jia (2008). Moreover, the Ps chooses to deliberately ignore the conversational implicature of P's response number 6 because it is part of the treatment during psychological consulting to let patients themselves face their problems bravely. Therefore, the Ps proposes a further question number 7 with the same intention of the pre-

ceding one. In doing so, similar to the findings of Jia (2008), the Ps actually violates the maxim of manner to some extent because normally he is not supposed to ask what is almost already known as it is not being brief at all if he does so. Judging from the fact that he clearly understands what is implied by P's words; we may claim that the Ps is adopting a non-cooperative attitude when uttering number 7. However, this is inevitable as solving patients' problem is a meticulous process for a psychiatrist and in most cases is neither easy, nor simple. Besides, in a psychiatrist-patient conversation, the maintenance of CP is not always helpful to patients; confrontations may even be encouraged sometimes as a way of leading the patients to face reality and elicit patients' true feelings.

Later in the conversation, response number 12 is a violation of the maxim of quantity because it provides too little information to answer the question asked by the Ps. The implicature of number 12 is that, "if you as a psychiatrist do not know the answer how I can trust you, and by the way if I had known its reason what's the point of my coming to your clinic"?! She does not answer the question although she is more than able to answer it. Instead, she returns the Ps's question by asking what he thinks is wrong with her. The maxim of relation has also been violated in number 12 since while she is expected to explain her idea about the cause of her problem she asks a question instead. The overall attitude of the P is non-cooperative, and this leads to her violation of the two maxims. The hidden information she implies is that "I do not trust you as a professional psychiatrist". As the psychiatrist is well trained, when he takes the floor in number 13 he does not give in to the challenge from his visitor and once again throws the question back to the P, the Ps also violates the two aforementioned maxims but not for the same reason as his P. He is approaching the issue from two different perspectives; first, as a psychiatrist, he needs his visitor to explain her own problem thoroughly. Second, he will not give in by answering P's question because he is aware of P's intention of testing his expertise (the initial session is in fact an assessment interview for both sides). It does not make any sense for a psychiatrist to be fooled around by a visitor, thus the Ps is not supposed to answer his P's question; instead, what he has to do is to throw this question back to P and finds out what is wrong with her. Concerning number 21 and 22, following Grice's reasoning, the inference works out like this: although Ps has good reason to believe that P has sufficient information about her husband, the P has deliberately failed to observe (flouted) the maxim "Be informative". But the Ps has no reason to believe that the P has really opted out of the cooperative principle, so the P is only being apparently uninformative. If the Ps draws the inference that the P hasn't got a very good relationship with her husband, then the P is being cooperative. She knows that the Ps is capable of working this out. Therefore, P has implied that their relationship is not very good. From a pragmatic point of view, talking about her mother while the P has been asked about her husband and her relationship with him is both irrelevant and too informative in 22 and 24. Particularly in number 26, it appears that P provides redundant information since her mother is necessarily a woman given the meaning of mother. But is this kind of information always useless? Evidently the Ps gets the impression that P might not be particularly fond of her mother (with respect to the rest of conversation). From the perspective of psychology, these three responses (22, 24 and 26) are revealing deeper psychological symptoms, and are actually P's defence mechanisms against things that are too painful to her. That's how she tries to protect herself from the danger of confronting these troubling issues. In number 27 Ps is reflecting P's subconscious emotions. In summary, like Jia's (2008), we found interlocutors who deliberately flout the maxims usually intend for their listener to understand their underlying implication. So, cooperation is still taking place, but no longer on the literal level. We can assume that when interlocutors intentionally flout a maxim, they still do so with the aim of conveying some thought.

## 5.2. Conversation Two

The patient is a 21-year-old girl who had been brought up in a family where "love" and "romance" were regarded as forbidden sins. She seeks help for feelings of free-floating anxiety, irritability, and impaired concentration. While taking her background history, the therapist inquires about her current relationship status.

1. Are you currently involved with anyone?
2. Involved? How do you mean? Like what?
3. Like being in a romantic relationship.
4. I am a good girl.
5. You mean a good girl never falls in love?
6. Not like that.
7. Like what then?

8. There is this guy in my class. But he is like a brother to me.

9. You mean you have no sexual feelings towards him?

10. I am not one of those shameless girls. He is like my brother. In fact, he is now friends with one of my other classmates. They are planning to get married soon. I am worried for him though. She doesn't deserve him. I only want him to be happy... (She then goes on elaborating her reasons for her disapproval of their marriage for almost 20 minutes; while she has responded to all previous questions with brief answers).

From a pragmatics point of view, response number 2 violates the maxim of quality. The P is not truthful enough about her unreciprocated romantic feelings. It is later revealed she loves her classmate. The reason is that, because in her family "love" and "romance" were regarded as forbidden sins, she hides her true feelings, even maybe from herself. From the perspective of those opponents who dispute the CP's universality as being a culturally determined social behaviour like Keenan (1976), the origin of this violation is in her cultural limitations. From the psychiatric perspective, the diagnosis of personality disorders, as well as all other psychiatric disorders, are almost globally based on the universal criteria of DSM-IV-TR (American Psychiatric Association classification) and ICD-10 (World Health Organization classification) (Sadock & Sadock, 2007). It has to be mentioned that, the alleged lack of universality of CP stated by its opponents or globally based diagnosis of personality disorders claimed by the findings of psychology should not necessarily be taken as definitive and further well-designed research should be conducted to confirm the findings one way or the other. Moreover number 2 is a violation of the maxim of quantity in that it provides too little information to answer the question asked by the Ps. From psychiatric point of view, the implicature of P's non-cooperative attitude (number 2) is that "I don't know anything about being involved with anyone, I never have experienced it". Finally number 2 also violates the maxim of relation in that while she is expected to answer yes/no (I am/ am not involved in a relationship with someone), instead she asks a question. Psychiatrically, she was trying to imply "I am a different type of girl, a distinct one, please explain more for me, I don't know anything about these issues". Any other girl at her age fully knows about what being involved with someone and having a romantic relationship means. In response number 4 the P violates the maxim of manner. The implicature of her non-cooperative attitude is what the Ps asks her few seconds later in number 5. The psychiatrist needs to test his hypothesis based on what is said and what is implicated. To achieve this goal he needs to violate the maxim of manner by asking something which is almost known. In response number 8 the P violates the maxim of quality since she is not truthful about her romantic feelings about her classmate and tries to explain her inner feelings as a sisterly love. Finally in number 10 she violates the three maxims of quality, quantity and manner. The P is not truthful about her sexual feelings towards her classmate. She makes her contribution more informative than is required. She is not clear and brief, talking at length when all she was asked about was any erotic feelings she might have for him. In the present study similar to the findings of (Davies, 2000) we found if the overt surface meaning of a sentence does not appear to conform to the Gricean maxims, we do not assume that the utterance is nonsense; rather, we assume that an appropriate meaning is there to be inferred.

### 5.3. Conversation Three

The patient is a 26-year-old man who is a student in college. He has been treated for depression irregularly by different psychotherapist over a course of 5 years. The psychotherapist asks him about his previous medications.

1. What medications have been prescribed for you?

2. Nothing works on me. My condition is very serious.

3. Why do you say that?

4. My previous physicians have prescribed me all kinds of medications; but none have ever succeeded.

5. You still haven't told me the medications you have taken.

6. What does it matter? Medicine hasn't yet come up with a cure for my condition. And I really doubt if it ever can...

A more extensive history and mental status examination revealed what might have at first seemed to be hopelessness, to be in fact the exaggerated bragging of a patient with a narcissistic personality disorder. Persons with narcissistic personality disorder are characterized by a heightened sense of self-importance and grandiose feelings of uniqueness (Sadock & Sadock, 2007). He considered himself, and therefore his condition, to be unique and beyond the reach of medical treatment. He took joy in asking for help, only to reject it as being inadequate for his imagined high standing condition, or to humiliate the psychotherapist, like previous therapists before.

From a psychiatric point of view, response number 2 is a conversational implicature which implies; “I know better than physicians and there is no cure for my case” The P fantasizing and exaggerating unrealistically in his claim to have the worst incurable case. In addition, response number 2 reveals P’s personality disorder in that he expected the Ps to go along with his ideas demonstrating himself to have unwarranted feelings of self-importance. From a pragmatic point of view, the P’s response number 2 violates the maxim of quantity. Although fully aware of his earlier prescribed medication, the P apparently provided an irrelevant response and thus violates the maxim of relation as well. At another deeper level, this non-cooperative attitude elucidated the P’s personality disorder for the Ps through the inferences he drew from the sophisticated context. By elaborative command of managing the intentional miscommunication the Ps posed question number 3, in order to explore further, double checking his diagnosis of a narcissistic personality disorder. Later on in question number 5, although the Ps is fully aware of potential previously prescribed medications for the case, he again throws the same question to P, by doing so he attempts to draw P’s attention to his lack of cooperation. Here Ps violates the maxim of manner (to ask what is already known is not being brief) for two reasons. First, as a psychotherapist he needs his patient to list his prescribed medication though roughly. Second, the Ps will not give in to P by allowing the P to avoid answering his question, because he is aware of the P’s manipulative intention of testing his expertise and fooling around with him. Judging from the fact that the Ps is sure about what is implied by P’s response number 2 and 4, we may claim that the Ps is adopting a non-cooperative attitude when asking number 5. Nevertheless, this attitude is sometimes inevitable in the sophisticated context of psychological counselling, as solving the visitor’s problem is not always straightforward. The Ps is aware that due to the P’s narcissistic personality disorder he wants to exaggerate his own sense of self-importance and alienate others with his arrogance, self-centeredness. Therefore the psychotherapist is managing the conversation to lead the P into facing reality and understanding his own inner thoughts and feelings. By analysing this case in line with [Jia’s study \(2008\)](#) we found that in a psychologist-visitor conversation, the maintenance of CP is not always helpful to patients. Sometimes language confrontations with them may serve as the medication that can elicit their true feelings; and that will be the start of the healing process.

## 6. Conclusion

In summary, one of the most significant conclusions to emerge from the findings of the present study is that in order to gain accurate comprehension of the non-cooperative attitudes of interlocutors in a psychological consulting context, it is necessary to have prior knowledge of interwoven relationship between conversational implicature and the violation of CP. This is because understanding the nature of conversational implicature and its potential hidden meanings sheds a new light on the violation of one or more CP maxims.

Particularly, the results have elucidated that the violation of CP maxims often happens due to the delicately complex essence of the psychological consulting context. Psychiatrists professionally apply their specialized knowledge to the service of others, by having the ability to maintain effective physician-patient communication for the sake of accurate diagnosis and appropriate treatment, although they may face difficult challenges when dealing with patients’ assessment of their expertise. They must have the ability to prove their superior knowledge, capability and authority. It is at the heart of psychiatric practice to employ both cooperative and non-cooperative attitudes to win this battle.

Furthermore, in some cases, it is difficult for patients to share their own feelings, ideas, opinions, problems, or even objections regarding specific issues, usually reminders of nostalgic or sad memories. Therefore, patients manage to avoid telling the truth by telling irrelevant stories that do not have much to do with their real problems. Under such circumstances for a competent psychiatrist it is necessary to save time by controlling the ongoing conversation. Therefore, the psychiatrist needs to keep conversations on track by violating one or more CP maxims to have a successful case.

In conclusion, the reasons and the types of violation of the interlocutors make them depend on the sophisticated nature of each psychological consulting case. Moreover, by pondering over psychiatrist-patient conversations, it was revealed that there was a rationale behind human conversations and spoken exchange within the psychological context since even when interlocutors purposefully adopt a non-cooperative attitude and violate one or more maxims, they still imply pivotal points, vital reasons and important information, all of which are tremendously helpful for accurate diagnosis. Therefore, Grice’s maxims can make a great contribution to the field of pragmatics and psychology, when they are either followed or flouted.

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