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Introduction to the Special Issue

The present special issue of *Hermes* testifies to the proliferation of research in health communication, a subject which was hardly recognised, defined or researched a few decades ago. When clinicians and scientists first argued that this dimension of health care needed attention, it was widely believed that healthcare provider-patient communication was something that could neither be researched nor taught; in the realm of healthcare, communication was tied to the professionals' personality. This is no longer so. Health communication is today a field that aligns with a large number of disciplines (e.g. various medical specialities, rhetoric, semiotics, phenomenology, sociopsychology, etc.) that all make significant individual contributions to the body of knowledge that represents health communication. However, many of these disciplines focus on communication as a tool that may be used to address health-related issues rather than seeing it as a discipline in its own right guided by theory and practice. Characteristic of such disciplinary approaches to health communication, both medical and non-medical, is also that the disciplinary insights are presented with little awareness of other approaches and the insights and discoveries gained in other disciplines. This gives rise to a plethora of inconsistent vocabularies which makes it difficult, if not impossible, to synthesise these insights across disciplines. Rather than being purely disciplinary, research into health communication should strive also to be interdisciplinary to broaden the research agenda, reach deeper insights and enhance the likelihood that research findings affect the entire ecological model. The four papers in the present special issue represent an attempt not only to bring diverse disciplines together, but also to add to our understanding of how health communication may be studied from an ecological perspective that may bring benefit at multiple levels, individual, interpersonal, institutional, community and society. The two first papers explore how health communication is operationalised communicatively in oral encounters between doctors and elderly patients on the one hand (Pedro Sánchez-Escobedo and Luc M. Viera) and on-line between patients on the other hand (Matilde Nisbeth Jensen and Antoinette Mary Fage-Butler). Both papers show how health communication may incorporate experiential knowledge and foster relational bonds conducive to promotion of health and well-being.

The first contribution by **Pedro Sánchez-Escobedo & Luc M. Viera**, *Using the Language of Wellbeing in the Care of the Elderly in Mexico*, addresses the interaction between physicians and patients. The authors provide a broad context for understanding the role of language in medical interaction in shaping and reflecting not only the patient-physician relationship, but the broader socio-cultural approach to ageing. Discussing psychological, linguistic and practical aspects of the wellbeing language paradigm, the authors show how the language used by professionals derives from hidden assumptions about them and how it shapes expectations and outcomes. The paper proposes that the language of wellness be used instrumentally to change relationships and shape healthcare outcomes in a manner that enhances its quality-of-life orientation at the expense of its current, frequently rather medicalised focus on the natural process of ageing. This is believed to be particularly important in communication between healthcare providers and elderly patients/citizens whose meaning construction is heavily shaped by the healthcare provider.

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Keeping up-to-date on information relating to our health and well-being has become a pertinent issue, and research into health information-seeking and online contents associated with health information seeking, patient-to-patient communication and patient-doctor dialogue is rapidly gaining momentum. The second paper of this special issue by **Matilde Nisbeth Jensen & Antoinette Mary Fage-Butler**, *The Interpersonal Dimension of Online Patient Forums: How Patients Manage Informational and Relational Aspects in Response to Posted Questions* frames a particularly interesting technological innovation and theoretical issue in this area. The paper examines one such source of online information, namely the patient forum where patients communicate with one another about a particular medical condition. The paper explores this largely un-researched area by examining how relational and informational aspects of communication are managed by patients online. Interestingly, the paper finds that themes raised relate both to informational and relational aspects; and the authors suggest a new category which they call ‘info-relational’ because it subsumes both informational and relational elements. Using thematic analysis, Jensen and Fage-Butler investigate how support is operationalised communicatively, and they discuss the use of (expert) terminology and language in patient forums and find, surprisingly, that the expert tenor is often used among patients in such fora.

The paper by Jensen and Fage-Butler testifies to the growing level of health literacy within the context of virtual fora for people with chronic diseases. Today’s patient communities are generally becoming more vocal, self-confident and aware of their own rights. This trend is fuelled, among others, by the advances in information technology and increasing dialogue in most professional and patient communities. With this trend comes a need for research into knowledge mediation in general and how illness and its effects are explained to patients with lower health literacy levels. The vital role of understanding is emphasized in the contribution by **Isabel Garcia-Izquierdo & Vincent Montalt** entitled *Equigeneric and Intergeneric Translation in Patient-Centred Care*. Drawing on translation analysis, Garcia-Izquierdo and Montalt demonstrate how tightly woven health literacy is to attaining access, comprehension and assistance regarding one’s health. Their paper presents reflections on the demands that the paradigm of patient-centred care has for medical translators and writers, and it argues that translation from the expert tenor into the lay tenor may be instrumental in enhancing patients’ empowerment to the benefit of a more patient-centred healthcare in general and better communication between health professionals and patients in particular. In intra- and interlingual contexts, translation and true adaptation of texts to the nature of the audience and the specific context is required for texts to fulfil their *skopos*, i.e. their purpose. The article raises the important question of the extent to which translators are aware of the challenges and possibilities posed by the patient-centred approach, and how this may affect the concept of translation and the translator’s role. The authors argue that more attention should be paid to asymmetries in communication and knowledge that require heterofunctional or intergeneric translation and that the translator/writer needs to move beyond textual forms and established communicative practices to thereby respond to the need for a more patient-centred approach to health communication.

Not only the translators’ roles are changing. At present, it is also almost universally recognised that communication issues must be addressed in the course of educating health professionals in response to current developments. The contribution by **Sofija Mičić Kandijaš** represents an example of the rich landscape of health communication teaching and research. Her paper grows out of an increasing concern about the adverse effect of language barriers on patient care and international research collaboration and the need to respond to the growing cultural and ethnic diversity of both the physician workforce and the patient populations they serve. In her paper entitled *Developing an English Language Course for Serbian Doctors*, Sofija Mičić Kandijaš offers an interdisciplinary or even transdisciplinary approach to collaborating in health communication teaching in the context of teaching medical English to Serbian doctors. The paper argues that medical English must be taught to Serbian doctors to increase their proficiency in written and spoken communication in the context of both current medical practice and patient care and in the context

of international collaboration, and it offers very concrete suggestions for how to develop such an English course, taking into account common and context-specific features.

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