QUALITATIVE HEALTH COMMUNICATION VOLUME 1, ISSUE 1, 2022 ISSN: 2597-1417

# Book review: Gavin Brookes and Daniel Hunt (eds). Analysing Health Communication: Discourse Approaches. 2021, London: Palgrave Macmillan, 360 pp.

**Reviewed by: Xiang Huang<sup>1</sup>** 

NAME OF DEPARTMENTS AND INSTITUTIONS:

<sup>1</sup> Department of Translation and Language Sciences, Universitat Pompeu Fabra, Spain. Email: xiang.huang@upf.edu.



### BOOK REVIEW: ANALYSING HEALTH COMMUNICATION

Advancing Lupton's (1992) call to apply discourse analysis in health communication, there has been growing interest in understanding health issues from discourse perspectives (e.g., Harvey & Koteyko, 2013). However, two challenges emerge at the interface of health communication and discourse analysis, i.e., the interdisciplinary nature of health communication which covers various topics, modes and settings (Thompson et al., 2011), and the complex concepts of discourse with their own strands of discourse analysis (Tannen, et al., 2015). Different from previous studies which either focus on discursive strategies (e.g., metaphor) at a micro level (e.g., Demjén, et al., 2016) or socio-political discourse at a macro level (e.g., Raphael, 2011), the volume *Analysing Health Communication: Discourse Approaches* adds to existing scholarship by offering a comprehensive investigation of how health and illness can be analysed through discourse approaches both at micro and macro levels, demonstrating how a range of health topics and contexts can be approached from 'diverse but potentially complementary perspectives on discourse' (p.15).

The volume consists of thirteen chapters (one introductory chapter and twelve chapters explaining twelve ways of approaching health discourse). The introductory chapter written by its editors Gavin Brookes and Daniel Hunt lays out the aim of the book, i.e., 'to explore some of the ways in which discourse can be studied in contexts of communication about health and illness' (p.1). To achieve this aim, the chapter discusses the discursive nature of health communication in an increasingly medicalised society where daily life activities are justified based on whether they can help maintain health. It also discusses the concept of discourse at micro and macro levels, which leads to different notions of context and associations of extra-textual factors in discourse analysis. The remaining twelve chapters present different forms of discourse analysis which are applied to various health-related issues.

Chapters 2, 3, 4, 5 and 6 take more traditional discourse approaches. In chapter 2, conversation analysis (CA) is adopted by Barnes and van der Scheer to analyze doctors' questions about patients' prior self-treatment in primary care. The study shows that CA is useful in revealing the doctors' stance towards the legitimacy of the patients' visit. In chapter 3, Stubbe et al. take the broader approach of interactional sociolinguistics to explore patient-initiated questions in patient-professional communication. Their study suggests that patients negotiate their levels of involvement and construct their patient roles in their questions. In chapter 4, shifting the focus from patients' questions to their personal accounts, Arribas-Ayllon conducts narrative analysis on how patients with chronic fatigue syndrome represent their experiences of genetic testing in an online support group. The study finds that the patients use different discursive devices, e.g., problematisation, to achieve their communication purposes, e.g., building knowledge. Adding more non-linguistic cues to patients' language use, in chapter 5, Lamerichs employs discursive psychology to explore the illness experience of patients undergoing ostomy surgery. The study calls for combined methodological approaches to fit the complexities of illness talk. In chapter 6, Hunt demonstrates the application of corpus techniques in exploring the group discussion of depression by general practitioners outside the clinic context. The study shows a medicalised trend of depression which is constructed as a possession or attribute of patients.

Different from the aforementioned chapters which adopt a relatively micro-level, or textbased concept of discourse, chapters 7, 8 and 9 explore macro-aspects of discourse, seeing discourse as a form of social action embedded in a wider system of knowledge, value and power. In chapter 7, Fage-Butler adopts Foucauldian post-structuralism to explore the discursive construction of knowledge and knowledge-related subjectivities in online forum posts on HPV vaccination, revealing that the pro- and con-sides represent different forms of knowledge and subjects' positions. Similarly inspired by Foucault, in chapter 8, Ringer and Holen use a discursive ethnographic framework to analyze psychiatric wards in Denmark. Focusing on the discourse of persuasion around drug use, the study reveals drugs as a site of struggle between patients and professionals. In chapter 9, taking a similar ethnographic approach, Galasiński and Ziółkowska conduct critical discourse analysis on nurses' notes on detained patients in Poland, arguing that the notes put the patients in positions of subjugation and obedience.

QUALITATIVE HEALTH COMMUNICATION · VOLUME 1, ISSUE 1, 2022

151

## BOOK REVIEW: ANALYSING HEALTH COMMUNICATION

The last four chapters explore relatively novel approaches that used to explore health communication. In chapter 10, Brookes et al. take a multimodal approach to investigate the linguistic and visual choices of a dementia awareness campaign. The study finds the campaign resorts to a rhetoric of fear around dementia. In chapter 11, Atkins and Chałupnik adopt the pragmatic theory of speech acts to analyse the indirectness of requests among healthcare professionals in emergency medicine training, showing that trainee doctors who use more mitigated forms achieve higher efficiency in leading the teams. In chapter 12, Knapton et al. show that blending theory is useful to understand how people reason about disease transmission. In chapter 13, Demjén and Semino look into the 'inward focus' mind style of people diagnosed with schizophrenia through a stylistic approach assisted by corpus methods.

Throughout the chapters, the authors guide readers with initial introductions of their theoretical underpinnings followed by demonstrations of their approaches. In spite of the inevitably blurred boundaries among the approaches, the chapters complement each other and reveal the diverse and complex nature of health communication. Limitations of the volume, as the editors have noted, are mainly seen in the shortage of health communication theories due to the volume's orientation to empirical discourse analysis. Moreover, the case studies are mainly conducted in English-speaking countries, leaving health communication in developing countries less explored. Future studies can look into the contextual specialties of health discourse in non-European, for example, Asian contexts.

In conclusion, I believe that the volume, published in 2021 when the world was still experiencing the coronavirus disease of 2019 (Covid-19) and dealing with unresolved physical and mental issues left by the pandemic, is a valuable and timely contribution to health communication. It will be of value to students and scholars interested in health communication through discourse approaches and health professionals who would like to know more about the role of discourse in their medical practices.

152

# References

Demjén, Z., Semino, E., & Koller, V. (2016). Metaphors for 'good' and 'bad' deaths: A health professional view. *Metaphor and the Social World*, *6*(1), 1–19. <u>https://doi.org/10.1075/msw.6.1.01dem</u>

Harvey, K., & Koteyko, N. (2013). Exploring Health Communication: Language in Action. Routledge.

Lupton, D. (1992). Discourse analysis: a new methodology for understanding the ideologies of health and illness. *Australian Journal of Public Health*, *16*(2), 145–150. <u>https://doi.org/10.1111/j.1753-6405.1992.tb00043.x</u>

Raphael, D. (2011). A discourse analysis of the social determinants of health. *Critical Public Health*, 21(2), 221–236. <u>https://doi.org/10.1080/09581596.2010.485606</u>

Tannen, D., Hamilton, H. E., & Schiffrin, D. (Eds.). (2015). *The Handbook of Discourse Analysis* (2nd, ed.). Wiley Blackwell.

Thompson, T. L., Parrott, R., & Nussbaum, J. F. (Eds.). (2011). *The Routledge Handbook of Health Communication* (2nd, ed.). Routledge.

153

#### QUALITATIVE HEALTH COMMUNICATION

VOLUME 1, ISSUE 1, 2022