

Applying critical discourse analysis

Research and intervention in health communication

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Overview

- An emancipatory agenda in CDA
- Impact beyond academia
- An example from my own work
- Professional practice
- Discussion points

An emancipatory agenda

to help increase consciousness of how language contributes to the domination of some people by others, because consciousness is the first step towards emancipation

(Fairclough, 1989, p.1)

critical discourse scholars should ... be social and political scientists, as well as social critics and activists

(van Dijk, 1993, p.253)

CDA ... intervenes on the side of the dominated and oppressed groups and against dominating groups, and ... it openly declares the emancipatory interests that motivate it

(Fairclough & Wodak, 1997, p.259)

those who act as catalysts in the raising of consciousness ... must be people who have the theoretical background to enable them to act in this way, as well as sharing the experience of the oppressed to a sufficient extent for them to be accepted as catalysts

(Fairclough, 1989, p.234)

An emancipatory agenda

Their [critical discourse analysts'] hope, *if occasionally illusory*, is change through critical understanding. Their perspective, *if possible*, that of those who suffer most from dominance and inequality ... on of the criteria of their work is solidarity with those who need it most

(van Dijk, 1993, p.252; emphasis added)

Critical analysis aims to reproduce interpretations and explanations of areas of social life which both identify the causes of social wrongs and produce knowledge which *could (in the right circumstances)* contribute to righting or mitigating them.

(Fairclough, 2010, p.8; emphasis added)

30 years on

- CDA (or CDS) has been institutionalised: study programmes, journals, academic positions etc.
- CDA has been taken beyond Europe: China, Middle East, South America, South East Asia
- Theoretical approaches have been developed, e.g. cognitive CDA
- New methodologies have been suggested, e.g. corpus-based CDA

“CDA researchers are fundamentally interested in analysing opaque as well as transparent structural relationships of dominance, discrimination, power and control, as they are manifested in language ... to gain a proper understanding of how language functions in constituting and transmitting knowledge, in organizing social institutions or in exercising power in different domains/fields in our societies” (Baker et al., 2008, p.280)

“CDS is principally concerned with the communication and discursive construction of social ... knowledge, as well as with linguistic persuasion and manipulation ... to fully account for any links between language, legitimisation and knowledge, CDS needs to address the cognitive processes involved in text-production and text-interpretation” (Hart, 2011, p.1)

Applying CDA work beyond academia



Work by Ruth Wodak for federal and local government in Austria and Italy: e.g. comprehensibility of legal texts, guidelines on non-sexist language use, teachers' handbook on language and antisemitism

Work by Paul Chilton for National Health Service and NGOs: frames-and-values analysis of public discourse

"I recently posted a message to a number of lists regarding (critical) discourse studies; a call for examples of how such studies have been applied or how researchers have intervened in the environments under study.

There were only a few responses, although a number of people also expressed interest in any examples that were provided ... Clearly, CDA practitioners (if we want to use that term) have applied their research in a variety of ways, but these applications are rarely 'talked about' (at least in journal articles, monographs, conference papers and classes that introduce CDA)." (David Pask-Hughes)

A new emancipatory agenda

CDA seems to have failed to promote emancipatory-knowledge. The knowledge it achieves, though aspiring to become emancipatory, has transformed itself in regulative-knowledge ... By ... devaluating its [common sense's] positive aspects, CDA has failed to go beyond the dualisms that constrain modern reasoning.

Activist CDA ... must aim at transforming its emancipatory-knowledge into common sense ... that is, a prudent knowledge for a decent life ... based in principles of solidarity and the end of monopolies of interpretation, and in non-discriminatory practices that favour integration.

(Gouveia, 2003, pp.58-59)

The impact agenda

“Research Councils UK (RCUK) defines research impact as ‘the demonstrable contribution that excellent research makes to society and the economy’.

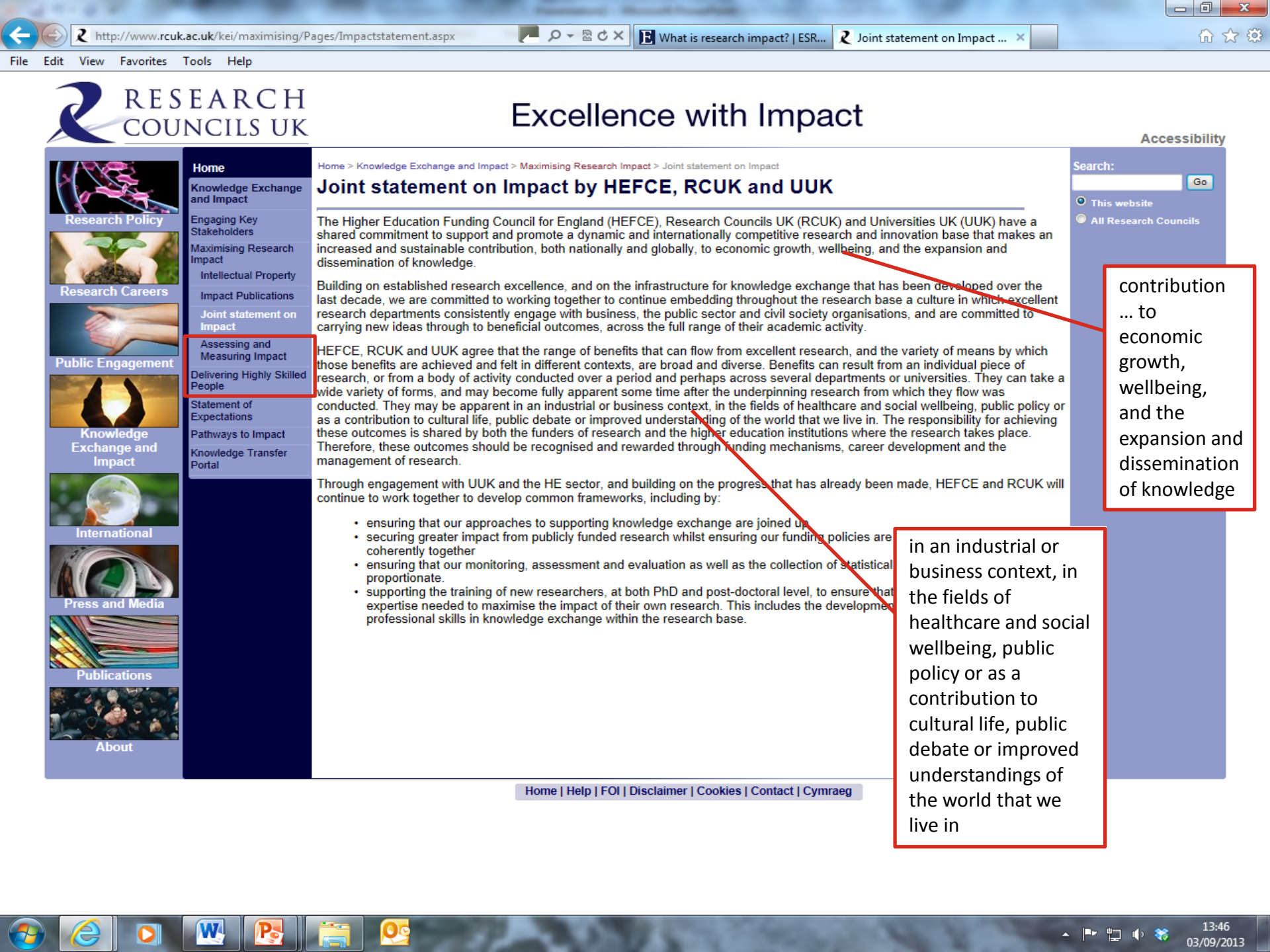
Research impact embraces all the diverse ways that research-related skills benefit individuals, organisations and nations. These include:

- fostering global economic performance, and specifically the economic competitiveness of the United Kingdom
- increasing the effectiveness of public services and policy
- enhancing quality of life, health and creative output.”

Impact statements, toolkits, prizes, measures etc.

“Why make an impact? In recent years, the government has placed increasing emphasis on the need for evidence of economic and social returns from its investment in research. ... Impact helps to demonstrate that social science is important – that it is worth investing in and worth using.”

<http://www.esrc.ac.uk/funding-and-guidance/impact-toolkit/what-how-and-why/what-is-research-impact.aspx>



Excellence with Impact

Home > Knowledge Exchange and Impact > Maximising Research Impact > Joint statement on Impact

Joint statement on Impact by HEFCE, RCUK and UUK

The Higher Education Funding Council for England (HEFCE), Research Councils UK (RCUK) and Universities UK (UUK) have a shared commitment to support and promote a dynamic and internationally competitive research and innovation base that makes an increased and sustainable contribution, both nationally and globally, to economic growth, wellbeing, and the expansion and dissemination of knowledge.

Building on established research excellence, and on the infrastructure for knowledge exchange that has been developed over the last decade, we are committed to working together to continue embedding throughout the research base a culture in which excellent research departments consistently engage with business, the public sector and civil society organisations, and are committed to carrying new ideas through to beneficial outcomes, across the full range of their academic activity.

HEFCE, RCUK and UUK agree that the range of benefits that can flow from excellent research, and the variety of means by which those benefits are achieved and felt in different contexts, are broad and diverse. Benefits can result from an individual piece of research, or from a body of activity conducted over a period and perhaps across several departments or universities. They can take a wide variety of forms, and may become fully apparent some time after the underpinning research from which they flow was conducted. They may be apparent in an industrial or business context, in the fields of healthcare and social wellbeing, public policy or as a contribution to cultural life, public debate or improved understanding of the world that we live in. The responsibility for achieving these outcomes is shared by both the funders of research and the higher education institutions where the research takes place. Therefore, these outcomes should be recognised and rewarded through funding mechanisms, career development and the management of research.

Through engagement with UUK and the HE sector, and building on the progress that has already been made, HEFCE and RCUK will continue to work together to develop common frameworks, including by:

- ensuring that our approaches to supporting knowledge exchange are joined up
- securing greater impact from publicly funded research whilst ensuring our funding policies are coherently together
- ensuring that our monitoring, assessment and evaluation as well as the collection of statistical data are proportionate.
- supporting the training of new researchers, at both PhD and post-doctoral level, to ensure that they have the expertise needed to maximise the impact of their own research. This includes the development of professional skills in knowledge exchange within the research base.

Accessibility

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contribution
... to
economic
growth,
wellbeing,
and the
expansion and
dissemination
of knowledge

in an industrial or
business context, in
the fields of
healthcare and social
wellbeing, public
policy or as a
contribution to
cultural life, public
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understandings of
the world that we
live in

Aim	Data and informants	Methods	Users	Beneficiaries
Bringing up MMR vaccination rates in London*	news reports, focus groups with parents, letters from primary care trusts	Qualitative conversation, text and semiotic analysis	London-based sub-company of the NHS	young children
Rebranding a cancer charity*	helpline calls, online forum posts, information material, meeetings, interior design	Qualitative conversation, text and semiotic analysis	Prostate Cancer UK (formerly Prostate Cancer Charity)	African Caribbean and working-class men 50+
Developing a new metaphor for a drug*	focus groups with research & development staff in a pharmaceutical company	Qualitative conversation analysis, metaphor analysis	company marketing the drug	company marketing the drug, health professionals, patients
Understanding the use of metaphor in end-of-life care	semi-structured interviews with, and online forum posts by, patients, family carers and health professionals	Qualitative text analysis, quantitative semantic corpus analysis	patients, family carers and health professionals	patients, family carers and health professionals
Identifying the construction of disabled people in British public discourse 2011-13*	Political discourse: manifestos, speeches, blog posts, press releases, parliamentary debates, policy papers	Qualitative text analysis, quantitative lexico-grammatical corpus analysis	UK charity for disabled people	disabled people
Identifying patterns in language use by Parkinson's patients and their spouses	semi-structured interviews with Parkinson's patients and their spouses	Qualitative conversation analysis, metaphor analysis	Medical and nursing staff at Klinikum Bad Segeberg/Germany	Parkinson's patients and their spouses

Projects listed with an asterisk (*) on the previous slide where carried out for consulting company Linguistic Landscapes.

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L I N G U I S T I C
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Understanding the use of metaphor in end-of-life care

- How do members of different stakeholders groups (health professionals, patients and unpaid family carers) use metaphor to talk about their experiences, attitudes and expectations of end-of-life care (e.g. palliative treatment, preparations for dying, etc)?
- What does the use of metaphor by these stakeholder groups suggest about (a) the experiences and needs of the members of these groups and their mutual relationships, and (b) the nature of metaphor as a linguistic and cognitive phenomenon?

Understanding the use of metaphor in end-of-life care

1.5 million words; 90,000 manual sample

	Patients	Carers	Healthcare Professionals	Total
Semi- structured Interviews	100,859	81,564	89,943	272,366
	90 000			
Online forum posts	500,134	500,256	253,168	1,253,558
Total	600,993	581,820	343,111	1,525,924

Understanding the use of metaphor in end-of-life care

- Manual intensive analysis of 90,000-word sample:
MIP + elements of MIPVU
- Annotation using eMargin
(<http://emargin.bcu.ac.uk/>)
- Automated analysis of 1.5 million words:
Wmatrix + Broad Sweep searching
(<http://ucrel.lancs.ac.uk/wmatrix3.html>)
~ a modification to Wmatrix especially developed to facilitate corpus-based metaphor analysis
~ allows us to see and explore all the semantic categories an expression can belong to, thereby capturing more metaphorical expressions



Quantitative

Qualitative

Understanding the use of metaphor in end-of-life care



We don't talk about... individuals 'battling' cancer
(Prostate Cancer Charity, Key Messages 2011)

from the Department of Health's End of Life Care Strategy
(2008):

'the patient journey', 'care pathway', 'steps', 'trajectories
of decline', 'Bridges support service'

Hospice managers' metaphors for a 'good death'

'being peaceful', 'being at peace'; 'having peace'
'being pain-free', 'being symptom-free'
(cf. Carpentier and van Brussel 2012)

Metaphors to do with movement and journeys
(cf. Lakoff and Turner 1989, Dempster 2012)

'having open discussions', 'talking openly with the family members about what was happening'

Hospice managers' metaphors for a 'good death': JOURNEY

"I think a good death is where the patient and the family have reached an understanding that the death is going to come and that they're where they want to be and that they're as comfortable as they can be erm and that that the death happens in a peaceful way.

[...]

she [the patient's daughter] was able to accept that it was the end so I think that's what you would call a good death. Where both the patient and the family have reached the stage of saying this is now where where it needs to end.



Hospice managers' metaphors for a 'bad death'

'where there is some tension or discord and it almost gets amplified'

'you can't quite reach into the scared place to support them'; things hidden or in the background

'they've landed up there'; emotions and situation out of control

'they haven't accepted yet that they're going to die'; help or support pushed away;

'for some people their life is a struggle or a battle or a series of conflicts that never quite resolve, and I suppose it's logical to say if their life's been like that, why would their death be any different?'; 'can't settle';

Hospice managers' metaphors for a 'bad death': BATTLE, HIDDEN, BACKGROUND



there's that phrase that people die as they've lived. And for some people their life is a struggle or a battle or a series of conflicts that never quite resolve, and I suppose it's logical to say if their life's been like that, why would their death be any different? Erm so they are the deaths that I think that are psychologically difficult where somebody where somebody not only doesn't want to address it, cos people can die OK not having addressed it and be OK. But it's where they've not addressed it but actually there's a lot of fear in the background or a lot of battling in the background. And so you'd get this kind of horrible overlay of pretending it's not going on, but actually they're really scared and you can't quite reach into the scared place to support them, because they won't let you, but you know it's there. So I find those deaths really ... difficult, where the conversations that needed to happen haven't happened where the support's been pushed away or where you couldn't work out how to provide the support and you see people very very afraid in ... in the act of dying.



Carers in online fora



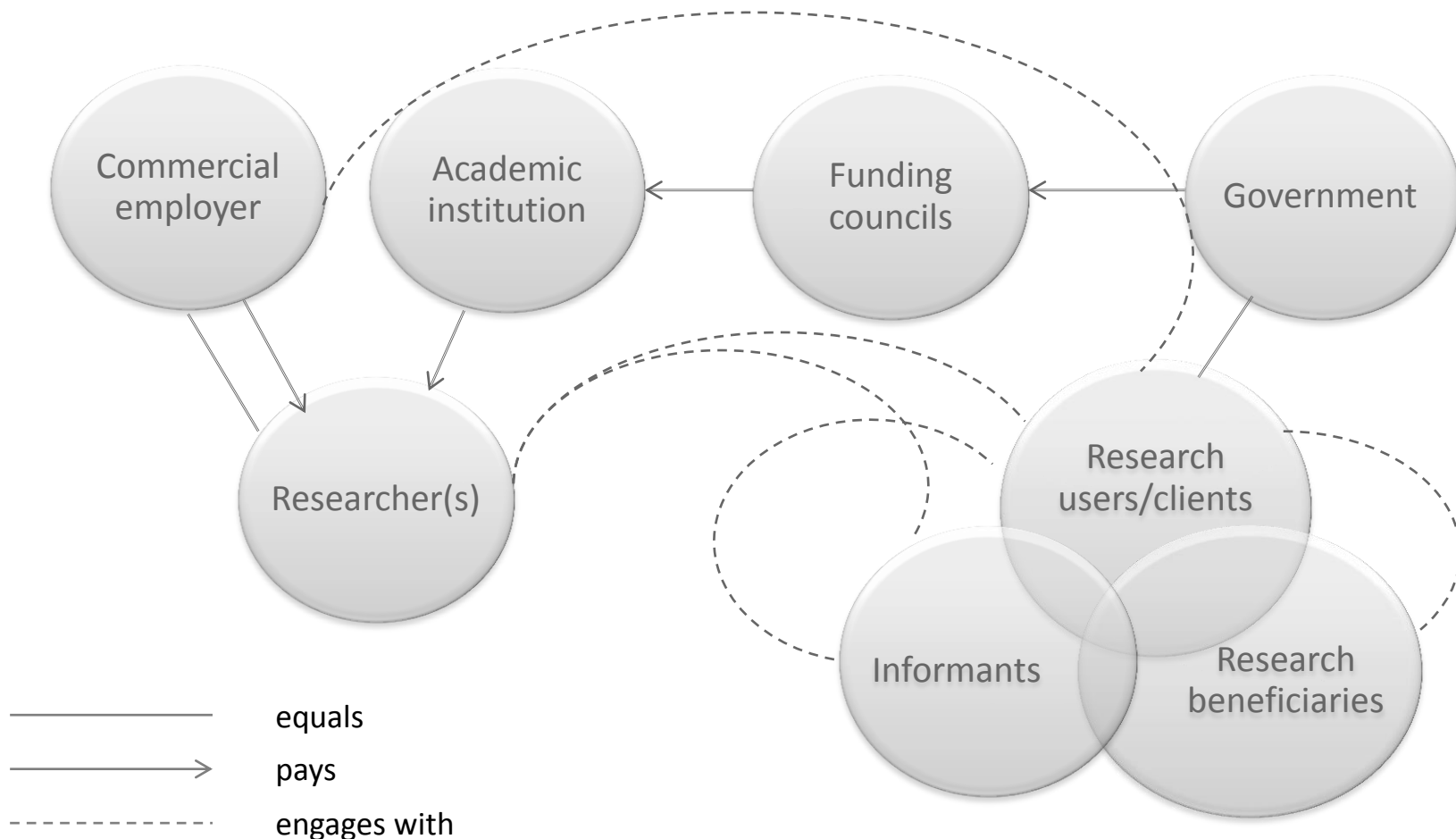
on government targets . I think sometimes if you go in armed with	ammunition	it strengthens your case . Even when he got the treatment though h
you seem to handle it and not be so frightened fore warned is for	armed	as they say . Just wish you and the girls did n't have to go throu
b - very glad to hear there may still be some weapons left in the	armoury	for you . Wishing you all the very , very best possible - Julie </
things work where you are but Jane has come home with an absolute	army	of carers and nurses in tow and if I wanted , I would not have to
n't sure what the consultant oncologist wanted . I went close to	ballistic	, and told her to find out . The next day she rang to say the cons
e day I can rationalize it 's not usually worth it (I do have my	ballistic	moments at them I assure you !) but Peter ca n't , he seems to en
ry and feel for her , what hell is it we have to endure , ticking	bombs	all round with no-one to diffuse . Makes me sad . I was or was sup
ss trip abroad somewhere , no phone with me to call for the light	brigade	(my family 's version is 'very grey brigade' due to life style -
iend who lives down the street , so much for if you need any help	brigade	, is it something they think they need to say ! I am sure it makes
Husband died on 28th November but I think I am going to bite the	bullet	and send card to my family and friends , those who know , cos if I
eir inability to cope with their mate gong down hill so i bit the	bullet	and dropped big hints like He is depressed no one visits ect maybe
d that your dad is doing well how does he feel not long know till	D Day	please let me know if you want to that is Take care speak soon Sue
th this nonsense ? I very much doubt it . You would have been all	guns	blazing at the total injustice , You would also have said life is
H ME LUCK XXXX HOPE YOUR DAD IS STILL FIGHTING THE FIGHT WITH ALL	GUNS	BLAZING LOVE TO YOU AND ALL XXXXXXXXXXXXXXXXXXXX SHIRLEY </post> <pos
another option taken away from me I am sorry that so many people	invaded	your personal space when you could n't tell them to go away you kn
owance but I think the process is similar . It still seems such a	minefield	trying to sort all these things out . I am getting very annoyed wi
, she can fly , the problem will be with travel insurance , its a	minefield	out there for anyone who has/had cancer . I had it , and have sinc
've done all the driving . Maybe just wishing out loud . I do n't	shoot him down	though , I just say Oh that would be lovely , I 'll look forward t
Margaret Yes I agree , but as Richard and our GP said he gets one	shot	at doing this 'right' so he opted for just capecitabine . Onc actu
ow I 'm the only one to care for her , dads nerves are completely	shot	, his hands shake he gets confused and mums on 18 lots of meds a d
sions ! Within three hours of being back in , his temperature had	shot	up to 40 , so that caused a bit of a panic . The doctor was concer
. Many do not do well under chemo , the principle of which is to	shotgun	the cancerous cells at the expense of damage to good cells as well
ven 12-15 month prognosis . Like you we lived every day with that	time bomb	. I too hoped he would prove the prognosis wrong as he was doing s
sorry to hear of Becky 's difficulties . It 's like living with a	time bomb	is n't it - not really sure when it will go off . how best to trea
ncle joe is back up again tom morn at 8.30am to carry on . What a	trooper	the old boy is bless him ! hahaha Well just wanted to say hello an
some more . He hopes to be finished by friday . He 's been such a	trooper	bless him . I had complementary therapy at the hospice today and h
en to disco divas bless him bloody hell i love him to bits what a	trooper	bet him and oo7 would be mates eh ! ! ! ! ! ! ! ! HOPE everyone
and wo n't get better and i know when the time come there will be	wars	but will deal with that then ca n't be worrying about that Kev had
7:00" words="28"> Bob - very glad to hear there may still be some	weapons	left in the armoury for you . Wishing you all the very , very best

From an interview with a terminally ill patient

I don't intend to give up; I don't intend to give in. No I want to fight it. I don't want it to beat me, I want to beat it. Because I don't think we should give up trying. It's a hard job but in the long run I hope to achieve [...] we'll achieve something.

Professional practice

Aims: do research, communicate with research users, provide the potential for change within institutions as well as between institutions and their clients



Professional practice

Emancipatory aim for researcher(s) and some clients: ethics and confidentiality

Pressures on researcher(s): to attract grant money, to acquire clients, to deliver to deadlines within often very short time spans

Data often collected and prepared by marketing research companies, not prepared for linguistic analysis, often very large amounts of data

Limited transfer between academic and consultancy contexts

So what's in it for the researcher(s)? Career and financial gains, honing analytical skills, learning to communicate research findings to different audiences, seeing direct impact of work, having contributed to a change for the better

Discussion points

1. Students pay, and academics are paid, for CDA work

Clients pay, and consultants are paid, for CDA work

Research funding bodies pay, and academic institutions are paid, for CDA work:

Is applied work for money a sell-out or a viable way to spread insights from, and principles of, CDA ? How else could research be remunerated?

2. Should critical analysis be harnessed for the aims of powerful institutions (government, companies)? Should it help commercial and profit interests?

3. Interesting projects - but is it CDA?

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