how the discussed theories and models can be applied to texts. The detailed analysis of a highly descriptive restaurant review (pp. 158–162) could equally be used as a demonstrative example of narrative analysis, or as a case study for teaching how to produce effective narratives.

Chapter 6 brings the topics of the book together by demonstrating how the various analytical approaches could be combined to provide a comprehensive analysis. Vásquez then discusses some of the wider, societal issues related to online reviews—the question of authenticity and the "democratization" of consumer expertise. The effects of review fraud—whether it means positive reviews written by hired reviewers or false negative reviews—can be detrimental to businesses, therefore ways to authenticate reviewers have become an imperative for many ventures. Apart from the various technologies for user identification, Vásquez suggests that the construction of identities in the texts themselves help the readers to filter out relevant reviews. The section on consumer empowerment raises ethical issues related to the effects of online reviews on small businesses that do not have the means and know-how to manage their online reputations, and are thus vulnerable to extortion, for instance, when customers threaten to leave negative reviews if business owners do not comply with their requests. The issues raised in this section could provide good basis for class discussions on ethical questions related to online identity, fraud and the effects of consumer-generated content.

The author concludes the book by highlighting the prevalence of online reviews in our lives—whether as consumers or as business professionals—and points out that it is in our own interest to better understand the unique discourse they represent. Perhaps it is not the first go-to choice for ESP, Business English and/or business communication educators, yet this book provides a unique insight into the world of these novel digital communication practices. The detailed analyses, case studies and examples enable future business and corporate communicators as well as their instructors to equip themselves with linguistic and discursive strategies that will help not only to survive but also to succeed in new business communication contexts.

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Understanding Patients' Voices: A Multi-method Approach to Health Discourse, M. Antón, E. Goering. John Benjamins, Philadelphia (2015). 185 pp., US \$ 135.00, ISBN: 978-9-0272-5662-1

Understanding Patients' Voices: A Multi-method Approach to Health Discourse provides an innovative examination of data gathered from interviews of patients from diverse cultural and linguistic backgrounds, all of whom have Type 2 diabetes. The book offers insights into how transdisciplinary teams can effectively work together to answer common research questions. It also provides examples of applying transdisciplinary research across culturally diverse workplace settings. Diabetes is a prevalent but manageable chronic disease. Lack of self-management, or non-adherence, is both costly and results in poor patient outcomes, leading to other complications such as cardiovascular issues. Unfortunately, adherence levels are low, and the reasons for this are not well-understood. In addition, Hispanics and Latinos, who represent the largest minority in the U.S., have disproportionate levels of diabetes.

The book is authored by Marta Antón and Elizabeth M. Goering, with contributions from Stephanie Balunda, Ulla Connor, Vivana Cortes, Kate Dobson, Liping Guo, Jordan Gusich, Kathryn Lauten, and William Rozycki. By analyzing the interview data from a variety of perspectives, including qualitative and quantitative linguistic analysis, probit modeling, metaphor analysis, and sociocultural/activity theory, the researchers ultimately yield a comprehensive picture of the experiences of patients and

the impact of those experiences on their adherence. The book is unique in prioritizing patients' voices, unmediated by interactions with providers. The interview protocol allows patients to describe their experiences and construct their own life stories about living with diabetes.

Chapter 1 outlines previous research on adherence for diabetes patients as well as providing an overview of the book. Chapter 2 offers a detailed description of the research design and the rigorously created and executed data collection process. The data comprise 43 interviews with English-speaking patients and 22 interviews with Spanish-speaking subjects. In fact, these interviews actually contain nine different components, and in addition to structured and semi-structured questions, a number of previously developed surveys and assessments offer a rich array of quantitative and qualitative information:

- 1) Diabetes and you: semi-structured questions focused on eliciting narratives but emphasizing particular aspects of patients' experience with the disease;
- 2) Outlook on life: semi-structured questions and the Life Orientation Scale (Scheier, Carver, & Bridges, 1994);
- 3) Medical treatment and adherence: structured questions about medications, knowledge of those medications, and adherence in terms of missing medication during a month; survey questions from TRIAD (Selby et al., 2007);
- 4) Health information sources: survey questions;
- 5) Literacy: general literacy skills from the National Assessment of Adult Literacy and health literacy gathered through structured questions;
- 6) Using medical information: an assessment of patients' ability to use a specific health source;
- 7) Quality of care: TRIAD survey and open-ended questions;
- 8) Knowledge about diabetes: "Brief Diabetes Knowledge Test" from the Michigan Diabetes Research and Training Center (Fitzgerald et al. 1998);
- 9) Demographic information: survey questions.

The interview was also translated into Spanish for the initial study, and later into Mandarin for a follow-up study. The authors developed a detailed protocol for administering the interview, which is helpfully provided. The interview offers a rich resource for understanding various factors that impact adherence. One limitation that could be addressed in future studies is that adherence itself was measured through patients' self-reports. In addition, researchers did not consistently operationalize 'adherence' in the same way when analyzing the data.

Chapters 3–7 present five different approaches to the analysis of the data, illustrating how the work of interdisciplinary teams affords greater insight into the same research questions. The authors' expertise in Sociology, Linguistics, Communication Studies, and Endocrinology provides multiple perspectives on the data. First, Chapter 3 introduces probit modeling as an approach to understand the relationship between reported adherence and the predictor variables of literacy, demographic background (e.g., age, socioeconomic status), and patient talk. The latter had been previously coded in terms of the level of agency expressed and whether patients expressed positive or negative affect in their interviews. While probit modeling may be new to readers outside the field of Communication, it is a statistical procedure almost identical to logistic regression and can be considered as a parallel procedure to linear regression for ordinal or categorical variables (instead of continuous variables). The results show important relationships between each of the identified areas and adherence.

Chapter 4 is an invited chapter by Viviana Cortes and introduces a corpus-based analysis, another innovative method presented in this book. Corpus linguistics allows for the quantitative analysis of linguistic features and is employed in this study to examine differences in the language used by adherent patients (operationalized as taking medication 93% or more of the time during the previous month) and non-adherent patients (all others). Interestingly, the adherent group showed greater use of *you*, indicating their group identification with others who have diabetes, while the non-adherent group used more first person pronouns, particularly *I*, perhaps indicating feelings of personalization and isolation. The adherent group also used more present progressive verbs (*I am taking pain medication for my hip*), while the non-adherent patients provided more explanations, resulting in higher use of *because* clauses. These findings show important differences in the ways adherent and non-adherent patients conceptualize their disease management. More explanation of the choices of the linguistic variables described would have been helpful.

Chapter 5 explores the metaphors used by patients in order to understand the ways in which patients conceptualize diabetes as a disease, living with diabetes, and the origins of the disease. Metaphor is a long-standing tradition in the analysis of health care communication, and diseases such as cancer have been explored in terms of the metaphors used to frame those illnesses. Few studies have discussed diabetes using this method of analysis. The authors compare the metaphors used by adherent and non-adherent patients to examine the ways in which the language they use reflects their management of diabetes. For example, patients identified as having 'good management' took their medications consistently, scored high on both the health literacy test and engaged in all of the activities recommended by the medical community (e.g., eye checks, feet checks, flu shot). The analysis reveals key differences in the two groups. Those with good management of diabetes emphasized the process or stages of managing the disease. Those with bad management emphasized unreal conditionals (what might have been or what should have been). While these findings are very helpful for understanding patients' approach to diabetes management, the low reliability for coding of the metaphors deserves further exploration.

In Chapter 6, sociocultural/activity theory is used to understand the patients' agency in managing their diabetes. The semistructured interviews are analyzed for both language and content to map agency through various factors including the patients' and family/friends' experience with disease and access to health care in their native language. Finally, the data from the Download English Version:

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