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Special issue:
**Healthcare Communication Discourses
and the Applied Linguist**

Guest Editors:
Stefania M. Maci, University of Bergamo, Italy
Roxanne H. Padley, Pegaso University, Italy

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Introduction: Applying linguistics to healthcare communication discourses

Stefania M. MACI, University of Bergamo, Italy¹

Roxanne H. PADLEY, Pegaso Digital University, Italy

The diversity of contexts in which healthcare communication unfolds also reflects wider societal developments, such as the digitalisation of healthcare information, the increasing importance of patient-centred care models and the growing recognition of linguistic and cultural diversity in clinical settings. For this reason, healthcare communication is a vast and multi-faceted area of linguistic research, broadly encompassing any form of communication that takes place in a medical or healthcare context or relates to the description of health and illness. Given this rich and complex landscape, this special issue offers an interdisciplinary study of the role of discourse analysis and applied linguistics in healthcare communication. It offers insights into (1) past and present professional discourses on health and the body, (2) discourse analysis and healthcare communication, (3) the role of the applied linguist in healthcare communication, (4) the application of corpus linguistics to healthcare communication, and (5) the impact of applied linguistics on communicative practices.

Keywords: Communicative Practices; Corpus Linguistics; Discourse Analysis; Discourses on Health; Discourses on Body Healthcare Communication

1. Introduction

Healthcare communication constitutes a vast and multifaceted domain of linguistic inquiry, broadly encompassing any form of communication (a) that occurs within a medical or healthcare context or (b) that refers to the description of health and illness. It is not restricted to formal or clinical interactions but extends across a wide communicative spectrum, ranging from casual conversations about wellbeing, to the dissemination of health information through digital media (cf., for instance, Ndlangamandla et al., 2024; Padley, 2022; Zollo, 2022. See also Creten & Heynderickx, 2023), to structured institutionalised exchanges (Donadio & Passariello, 2022) which also include doctor-patient consultation (Brookes & Collins, 2023). As a result, healthcare communication has increasingly drawn the attention of scholars

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working in various disciplines, including corpus linguistics, discourse analysis, conversation analysis, applied linguistics, cultural studies, and literary and narrative inquiry. Each of these perspectives offers distinct yet complementary insights into how health is talked about, represented, and experienced through language.

The diversity of contexts in which healthcare communication unfolds also reflects broader societal developments, such as the digitisation of health information, the increasing prominence of patient-centred care models, and the growing recognition of linguistic and cultural diversity in clinical settings (Gotti et al., 2015). These developments have opened up new avenues for research and critique, especially as healthcare professionals, patients, and institutions attempt to navigate complex communicative demands in high-stakes environments. Consequently, there is a growing imperative to understand not only the linguistic patterns that characterise healthcare communication, but also the ideological, cultural, and institutional forces that shape them.

Within this expanding field, discourse analysis has emerged as one of the most widely adopted and productive approaches (Padley, 2022). It provides researchers with the tools to examine language as social action, illuminating how meanings are constructed, identities negotiated, and power relations enacted through talk and text. Nonetheless, discourse analysis is by no means a unified field (Fairclough, 1989, 1995). As Gee (1999) has noted, the term 'discourse' itself is used in various ways, referring both to small-scale linguistic exchanges (sometimes denoted as 'discourse' with a lowercase 'd') and to broader sociocultural narratives and ideologies ('Discourse' with an uppercase 'D'). This distinction between micro and macro levels of analysis is echoed in Gwyn's (2002) work, which examines how individuals communicate about illness in narrative and conversational forms, but also how such communication is situated within prevailing cultural understandings of the body, disease, and authority.

The flexibility and adaptability of discourse analysis have contributed to its popularity within healthcare research, but they have also led to concerns about definitional vagueness and methodological inconsistency. Baker (2006), for example, highlights the diverse ways in which discourse can be studied, particularly through corpus-assisted approaches that aim to enhance the transparency and replicability of findings. Similarly, Brookes and Hunt (2021) argue that while discourse analysis has yielded important insights into health communication, the term 'discourse' is often deployed with inconsistent meanings, which can obscure rather than clarify the analytical focus. Such critiques suggest that, while discourse analysis remains a powerful lens for

examining healthcare communication, there is a need for greater conceptual precision and methodological rigour in its application.

In tandem with these methodological questions, there is also an ongoing debate about the role of the applied linguist within healthcare contexts. Applied linguistics, as a discipline concerned with real-world language problems, is uniquely positioned to contribute to the analysis, understanding, and improvement of healthcare communication. Yet the precise function of the applied linguist in this setting is far from settled. Sarangi (2005) raises important questions about whether applied linguists should be seen merely as observers and analysts, or whether they also have a more interventionist role to play—as educators, facilitators, or collaborators working alongside healthcare professionals. He suggests that applied linguists can occupy multiple roles simultaneously: mediating between disciplinary perspectives, solving communication problems in clinical contexts, and contributing to training and education initiatives aimed at improving professional discourse.

This ambiguity in professional identity reflects a broader issue in applied linguistics: the tension between description and prescription, between the analytic and the practical. While some researchers maintain that the applied linguist's primary task is to describe and analyse language use objectively, others advocate for a more engaged and participatory model, in which linguists work directly with stakeholders to implement communicative improvements. The healthcare context—where communication can have life-or-death consequences—intensifies this debate, as linguistic misunderstandings, misalignments in expectations, and failures of interpersonal rapport can significantly affect patient outcomes. In this respect, applied linguistics is not only relevant to healthcare communication—it is vital to its ethical and functional success.

Moreover, the methodological innovations within applied linguistics further enhance its relevance to healthcare research. The use of corpus linguistics, for instance, enables the systematic analysis of large bodies of health-related texts, revealing recurring patterns in the language of diagnosis, treatment, risk communication, and patient education. Brookes and Collins (2023) provide a detailed framework for applying corpus linguistic tools to healthcare data, demonstrating how frequency analysis, collocation, and concordancing can shed light on discursive trends that might otherwise remain invisible. Similarly, conversation analysis offers a fine-grained view of interactional dynamics in clinical encounters, allowing researchers to examine how turns-at-talk are managed, how empathy is expressed or withheld, and how authority is negotiated between medical professionals and patients.

Given this rich and complex landscape, this special issue seeks to generate interdisciplinary discussion on the role of discourse analysis and applied

linguistics within healthcare communication. It aims to offer insights into past and present professional discourses regarding health and the body, discourse analysis and healthcare communication, the role of the applied linguist in healthcare communication, the application of corpus linguistics to healthcare communication, and the impact of applied linguistics on communicative practices. Collectively, these themes offer an opportunity to reflect critically on how language functions within healthcare and how it shapes, and is shaped by, institutional practices, social ideologies, and interpersonal relationships. They also raise important questions about the ethical and professional responsibilities of researchers working at the intersection of language and health. Ultimately, this special issue aims to foster dialogue across disciplinary boundaries, encouraging more collaborative, reflective, and socially responsive approaches to the study of healthcare communication.

2. Outline of the special issue

This issue is opened by Paola Catenaccio's contribution which investigates the linguistic features of anorexia recovery narratives, comparing discourse from two distinct sources: (a) Reddit posts by individuals currently struggling with recovery, and (b) curated success stories from eating disorder support websites. Using a corpus-based approach complemented by discourse analysis, the study identifies lexical and syntactic patterns that reveal key differences in how recovery is articulated. Struggling recovery narratives often express ambivalence, uncertainty, and therapeutic jargon (e.g., 'weight restored', 'ED'), while successful recovery stories show greater epistemic certainty, a stronger sense of identity reconstruction, and distance from the illness. The findings suggest that linguistic markers can serve as diagnostic cues for clinicians and support more nuanced understanding in narrative therapy. This study contributes to applied linguistics and clinical practice by offering empirical evidence of how language reflects and shapes recovery trajectories in anorexia.

Stefania D'Avanzo explores how the UK's National Health Service (NHS) represents citizens in its digital health communication, with a focus on how digital transformation is changing the perceived role of 'patients'. Using a corpus-based approach, official NHS documents are investigated considering the terminology used to describe those receiving healthcare services—such as 'patients', 'individuals', 'citizens', and 'people'—and the linguistic patterns surrounding them. By applying Halliday's transitivity framework, the study finds that these terms function not just as neutral descriptors but as indicators of shifting power dynamics and expectations. 'Patients' and 'citizens' are increasingly portrayed as active participants and co-creators in healthcare processes, reflecting a more collaborative, digitally-enabled model of care. However, the analysis also reveals an institutional focus on services rather than on people, suggesting a tension between empowering language and actual

user engagement. Ultimately, the study underscores the discursive construction of agency in digital healthcare and calls for further attention to how language shapes evolving medical relationships.

Girolamo Tessuto investigates how authors in the field of Complementary and Alternative Medicine (CAM) use language to construct credibility, assert professional identity, and gain visibility within the competitive domain of academic publishing. Drawing on a corpus of 30 English-medium CAM research articles from reputable open-access journals, the study applies Hyland's stance framework and discourse analysis to identify evaluative markers that writers employ to promote their research. Findings show that CAM scholars strategically use promotional and persuasive language such as positive adjectives, epistemic boosters, and self-referential expressions to emphasise the importance, novelty, and reliability of their work. These rhetorical strategies serve not only to legitimise CAM within a biomedically dominated academic environment, but also to respond to pressures of the 'publish or perish' culture and the 'attention economy' of scholarly publishing. The paper highlights how CAM researchers must balance scientific rigour with promotional discourse to assert their place in the wider medical research community and to ensure their work is seen, cited, and valued.

Rosita Maglie and Francesca Filograsso explore how adolescent cancer patients and their healthy peers use metaphors to understand, express, and cope with cancer. Drawing on semi-structured interviews with eight Italian adolescents and using both thematic and discourse analysis, the study investigates metaphor preferences based on the 'Metaphor Menu for People with Cancer.' The analysis reveals that both patients and nonpatients most frequently selected the 'New Value' metaphor, indicating a shared recognition of cancer as a life-altering experience. However, patients tended to use metaphors in more empowering and resilient ways—especially the 'Fight' metaphor—while nonpatients often viewed cancer as overwhelming or permanent, sometimes adopting metaphors with disempowering implications. The study also examined coping strategies, finding that cancer patients employed a wider range, especially problem-focused and emotional support strategies, whereas healthy adolescents leaned more on acceptance and humour. The findings highlight how metaphorical framing impacts emotional processing, coping styles, and health beliefs, and suggest that carefully chosen metaphors can support adolescent well-being and improve communication in healthcare settings.

Finally, to close the issue, Roxanne H. Padley examines the effectiveness of corpus linguistic feedback in improving healthcare communication, with a focus on cosmetic surgery consultations. Using a mixed-methods approach that combines quantitative corpus analysis with qualitative feedback from

surgeons, the research explores how language shapes patient-provider interactions—particularly through the use of lay vs. medical terminology, stigmatising discourse, and conversational asymmetries such as interruptions. Data from recorded consultations across UK clinics revealed that, while surgeons often used lay terms to improve comprehension, medical terminology remained common and was frequently explained. Notably, patients interrupted more than surgeons, challenging traditional power dynamics. An executive report summarising these findings was shared with participating surgeons, whose responses, via questionnaires and debriefings, showed heightened awareness and a willingness to adjust communicative practices. The study demonstrates how corpus linguistics can yield actionable insights for clinicians, supporting patient-centred care and offering a model for future interdisciplinary collaboration in healthcare communication research.

Authors' Statement

This introduction to the special issue was written collectively by both authors.

The Authors

Stefania M. Maci (Email: stefania.maci@unibg.it) (PhD, Lancaster University, UK) is Full Professor of English Language, Translation and Linguistics at the University of Bergamo, where she is Coordinator of the MA in Digital Humanities, Director of the Research Centre on Specialised Languages, and Scientific Coordinator of the Research Group on Digital Humanities. She served on the executive board of AIA (Associazione Italiana di Anglistica 2019-2023) and she is now serving on the executive board of CADAAD (Critical Approaches to Discourse Analysis across Disciplines). Her research is focused on the study of the English language in academic and professional contexts, with particular regard to the analysis of medical and tourism discourses.

Roxanne H. Padley, PhD (Email: roxanneholly.padley@unipegaso.it) is currently tenure track assistant professor in English linguistics and translation at the Pegaso University and was previously research fellow at the University of Bergamo. She holds a PhD in English linguistics specialising in healthcare communication. She has taught extensively in the fields of English for Medical purposes as well as English for Professional, Technical and Communicative purposes at undergraduate and postgraduate level at the University of Salerno, the University of Sassari and the University of Bergamo. She is also visiting professor in English for Academic Purposes at the University of Oxford Language Centre. Her research interests include English for specific purposes (scientific-medical English), healthcare communication, corpus-based discourse

analysis and English language teaching with new technologies. She has published and presented widely on an international level on topics related to healthcare communication and English language teaching.

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