

Fluid boundaries of politeness in adolescent-doctor CMC encounters

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Linguistic politeness research can offer a great deal to the study of effective communication in health care settings, and in this panel session we aim to add empirical evidence to this emergent field of study. Whilst initial investigations of politeness in health care provider-patient exchanges have focused on Brown and Levinson's (1987) model, this paper also draws upon more recent developments in politeness theory, often termed *post-modern* (Terkourafi 2005) or *contestable* approaches (Harris 2007).

Locher and Hoffman (2006) highlight that giving and seeking advice in a medical context is a face-threatening practice, particularly due to the asymmetrical relationship between advice-giver and advice-seeker. We argue that this face threat is exacerbated in adolescent-health professional encounters. Research from a range of disciplines has highlighted how significant barriers exist in face-to-face communication between health professionals and adolescents, resulting in young people opting for silence, or at best minimal contributions due to feelings of marginalisation, embarrassment, or fear of confidentiality breaches (Jacobson et al. 2001; McPherson 2005).

However, the advent of new technologies has opened up a whole range of different arenas for health care advice to be communicated, and in this paper we focus on a website dedicated to advice-giving by medical professionals to young people. Our initial analysis was driven by corpus linguistics, and we interrogated a one million word corpus of messages. This examination highlighted the overall dominance of advice-seeking from adolescents on the topic of sexual health. We focus on examining how the disembodied nature of identities afforded by computer-mediated-communication acts as face saving and face preservation mechanisms for health professionals and adolescents. The boundaries of both power and politeness in this context are very fluid, and this enables the identities of the health professional and advice seeker to be performed in manner which enhances informality and solidarity when discussing sexual health topics. We illustrate this through an analysis of terms of address, euphemism v 'orthophemism' (Allen and Burrige 2006), the use of slang and directness.

We argue that the disembodied nature of identities offered by CMC and the medium of written discourse minimizes face threat and enables rapport to be built and advice to be given in a more effective manner than in traditional face-to-face GP encounters. Additionally, we also note that, despite the fluidity of the norms and conventions of politeness, the health professionals govern these norms and enact power as gatekeepers of medical knowledge by refusing to respond to messages that they judge to be impolite.

References

Allan, K. & K. Burrige (2006) *Forbidden Words: Taboo and the Censoring of Language*. Cambridge: Cambridge University Press.

- Brown, P. and S. Levinson (1987) *Politeness: Some Universals in Language Use*. Cambridge: Cambridge University Press.
- Jacobson, L. G. Richardson, N. Parry-Langdon & C. Donovan (2001) How do teenagers and primary healthcare providers view each other?: An overview of key themes. *British Journal of General Practice* 51: 811-816.
- Locher, M. & S. Hoffman (2006) The emergence of the identity of a fictional expert advice-giver in an American Internet advice column. *Text and Talk*. 26(1): 69-106.
- McPherson, A. (2005) Adolescence: Adolescents in primary care. *BMJ* 330: 465-467.
- Terkourafi, M. (2005) Beyond the micro-level in politeness research. *Journal of Politeness Research: Language, Behaviour, Culture*. 9(2): 237-262.