DOCTORAL THESIS

Affective-discursive practices in online medical consultations in China: emotional and empathic acts, identity positions, and power relations
Zhang, Yu

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Abstract

It is widely acknowledged that patients’ emotional expressions and doctors’ empathic responses play a key role in providing satisfactory healthcare services and improving doctor-patient relationships. While such affective aspect of medical consultation discourse has been studied in different fields of research with the focus of examining medical consultations that occur in face-to-face settings, this area is extremely under-researched in the field of linguistics, particularly in the non-western context and the online space. While online medical consultation (OMC) has ushered in the new era of e-communication around the beginning of this century, discourse-related research on OMC is still in its infancy and studies on the affective dimension of the OMC discourse in non-western sites are, to my best knowledge, apparently absent in the literature. As China has seen a significant increase in the use of OMC platforms, studying OMC discourse in the China context is not only important but vital. With the support of the Chinese government’s “Internet Plus Healthcare” policy issued in 2018, the reliance on the online mode of medical consultation will be further strengthened and the future of OMC service in China will remain promising. In order to have a better understanding of the affective aspect of OMC discourse, this thesis explores the online interaction between doctors and e-patients (including patients’ caregivers) from a poststructuralist discourse analysis perspective.

The data for this study consists of 300 text-based one-to-one instant messaging OMC cases collected from three popular OMC websites used in China. Each OMC case contains e-patients’ emotional expression and doctors’ empathic response. The data are analysed by the approach of computer-mediated discourse analysis in terms of two dimensions: the textual dimension and the social practice dimension. At the textual level, the study identifies indirect negative emotional acts by e-patients and empathic acts by doctors (which constitute the affective practice); it also examines the interactional discursive features involved in the affective practice. At the social practice level, it explores the discursive positions of e-patients and doctors within the affective practice context and the power relations that are reflected in the identity positionings.

This study finds that the text-based OMC affective practice is rich in various types of emotional expressions and different ways of manifesting empathy, some of which are not mentioned in studies on medial consultation discourse. The study also identifies positions that disrupt the traditional or stereotypical roles of doctor and patient. Besides, it presents dynamic power relations, which problematizes the idea that doctors are always the more powerful party and patients are always powerless in medical encounters. This study sheds light on the importance of examining the affective facet of medical consultation from a discourse analytic perspective, when it comes to identifying non-traditional positions and power relations in clinical communication. The study also provides the implication that e-healthcare platforms, especially those with an e-commercialised model for healthcare services, have potential to produce a type of neo-liberal discourse – the e-commercialised medical consultation discourse – in which patients and caregivers, who are acknowledged as the less powerful group in the traditional healthcare activities, are empowered and privileged.
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