

# Health Discourse in Media: the Language of Breast Cancer Prevention

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## Abstract

The paper focuses on social media discourse covering a major health-related issue - breast cancer prevention. Medical topics seem to have gone far beyond a professional domain and become part of a multimodal discourse which appears to comprise medical, educational and social purposes. The objective of the research is to identify certain discourse strategies and language means which social media involves for a stronger impact on the audience. The material has included verbal and visual data (texts, graphs, videos) collected from the official websites of British and American breast cancer foundations. In the framework of the pragmatic and discourse analysis the authors have indicated three discourse strategies: *to inform*, *to urge for action*, *to inform + to urge for action* involved in breast cancer discourse. Consequently, these strategies have been studied from the language perspective to identify their lexical and syntactical manifestation. The authors have made a conclusion that particular vocabulary, grammatical, pragmatic and stylistic means can produce a stronger communicative impact on the target audience and transform a conventional health discourse into a multimodal one.

**Keywords** multimodal health discourse, medical discourse, the language of breast cancer, communicative purpose, discourse strategies, linguistic manifestation

## Introduction

Medical discourse can take various shapes and occur in various domains. Doctor-patients encounters have been thoroughly investigated in a number of studies (Candlin, 2002, Atkinson, 1999, Roberts & Sarangi, 1999). Considerable research has been done in pharmaceutical settings regarding drug information as a linguistic challenge for patients (Askehave, 2002). There is an increasing trend indicating that medical discourse has been transforming into a multimodal one which uses linguistic instruments to promote health related issues outside professional discourse

community, namely medical practitioners and researchers. In order to effectively address society with crucial health topics, medical community has to possess a clear understanding of their target audience and consistent linguistic support (Fox, 2009, Moorhead, 2013). This paper focuses on breast cancer media campaign which appears to comprise medical, educational and social discourses to fight against one of the major public health concerns – breast cancer.

Nowadays we can observe a novel cultural phenomenon: a medical problem, e.g. breast cancer, has moved beyond its traditional medical domain and become a part of health education and even of mass media discourse. There are obvious medical and social reasons for such a turn. Breast Cancer UK, a big research and charity foundation in the United Kingdom, has defined breast cancer as an epidemiological disease and declared a “move beyond breast cancer awareness to preventative action” as their mission. This is common knowledge that prevention is more effective than treatment. Another important aspect concerning prevention is that it involves ordinary population who needs to be reasonably informed about the disease, its risk factors and possible actions for the risk reduction. Moreover, the population awareness level is to be high enough to act in cooperation with medical community in breast cancer prevention cause. Thus, there is a distinct correlation between professional efforts of medical practitioners and the communicative tools they use to inform, educate, and influence non-professional community. In other words, this is the point where medical discourse exceeds its boundaries and overlaps with advertising, propaganda, and any other types of social discourse commonly attributed to public campaigns. S. Anne Moorhead, Diane E. Hazlett, *et.al.* (Moorhead, 2013) argue that social media and healthcare community can be mutually beneficial to each other and, more importantly, to patients promoting better health outcomes.

The **objective** of this paper is to identify certain strategies which medical discourse involves attempting to achieve a stronger communicative impact on the audience. The paper also aims at presenting particular discourse markers in the medical discourse of breast cancer and their role in the medical discourse transformation into a multimodal one.

The **material** for the research is verbal and visual data (texts, graphs, videos) collected from the official websites of British and American breast cancer foundations. They are as follows:

<http://www.breastcanceruk.org.uk/>

<http://pinkribbon.org/>

<http://mainecancer.org/grants/breast-cancer-awareness-campaign>

<http://stop.breastcancercare.org.uk>

These websites represent most influential breast cancer care, research and prevention campaigns: Pink Ribbon, Maine Cancer Foundation, Breast Cancer Care, Breast Cancer UK. These foundations have been selected as they are “organized exclusively for charitable, educational and scientific purposes” (Pink Ribbon) and they “provide information, resources and support” (Pink Ribbon). In this research we have looked at their discourse from the target audience perspective having analyzed the strategies and linguistic means which were common readers’ oriented.

We have also studied health discourse in Russian social media with a specific focus on breast cancer prevention. These are as follows:

<https://nenaprasno.ru> - Фонд профилактики рака «Живу не напрасно» (*Cancer Prevention Foundation “Life Well-Spent”*)

<http://www.pror.ru> Противораковое общество России (*Russian Cancer Society*)

<http://www.help-patient.ru/> - education and information website on oncological diseases

<http://www.aif.ru/health/life> - digital version of a popular newspaper “Arguments and Facts”

<http://www.raka-grudi.net> – Центр помощи: лечение рака груди (*Breast Cancer Management Centre*)

The research procedure involved pragmatic, linguistic and stylistic analysis of the website contents.

### **Communicative Strategies in Breast Cancer Prevention Discourse**

Both British and American breast cancer prevention foundations devise their media and web campaigns on the basis of three communicative purposes:

1. To inform the audience about breast cancer.
2. To urge for action in terms of breast cancer prevention.
3. To inform about breast cancer + to urge for action.

It is necessary to note that in natural discourse practice these purposes are most commonly intertwined, however, we will discuss them separately for the analytical reasons.

**The first communicative purpose** can be also called educative because informing about the issues presupposes bringing new knowledge to the audience, i.e. educating it. *Pink Ribbon* and *BC UK* (Breast Cancer UK) inform their audience (mainly female) about breast cancer, its risk factors, ways of reducing the risks, breast cancer treatment and prevention. The discourse strategies used to achieve this purpose involve the following.

- *providing scientific facts* strategy

“In order to understand how breast cancer can develop, it is important to know what the female breast is made of. The mature female breast is made up of four essential structures: lobules (glands); (milk) ducts; fat; and connective tissue.” (*Pink Ribbon international*)

“Once breast cancer cells spread, the cancer cells are often found in lymph nodes near the breast. But, breast cancer can spread to almost any other part of the body. The most common places where breast cancer spreads to are the bones, liver, lungs, and brain.” (*Pink Ribbon international*)

“All women are at risk when it comes to breast cancer, but no one knows what exactly causes breast cancer. Doctors often cannot explain why one woman develops breast cancer and another does not. Research has shown that women with certain risk factors are more likely than others to develop breast cancer. Some examples of risk factors are:

Cancer is hereditary; if your sister, mother, or daughter developed breast cancer, then you have a higher risk of developing it yourself.” (*Pink Ribbon international*)

- *providing figures and statistics* strategy

“Breast cancer rates are rising rapidly. Today, 1 in 8 women will be diagnosed with the disease at some point in their lives. In England, incidence rates have increased amongst women by 90% and amongst men by as much as 60% in just one generation” (*Breast Cancer UK*)

“Could we do more to prevent cancers?

50% the lifetime risk of getting cancer for those of us born since 1960.

3.5% the percentage of cancer research funding spent on prevention in 2014” (*Breast Cancer UK*)

- *providing anecdotal evidence of cancer survivors* strategy

“There are many publications and sites that write about cancer. We want you to know we don't produce the news items you can read in this section, they belong to the MD Anderson Cancer Center. This section only intends to inform you about what is out there.” (*Pink Ribbon international*)

- *providing guidelines on personal prevention* strategy

“How many times have you heard of the importance of prevention related to breast cancer? It maybe not the only factor to take on account, but regular breast self exams (BSE) can help you to detect if something abnormal is happening to your breast” (*Pink Ribbon international*)

“Prevention starts at home. These simple tips will reduce your family's exposure to hazardous chemicals commonly found in the home” (*Breast Cancer UK*)

**The second communicative purposes** – urge for action – is most pragmatic as it is aimed at urging the audience to donate to breast cancer charities, to participate in particular campaigns and to take other practical steps. The most common communicative strategies here involve various rhetoric functions, such as persuasion, social appeal, etc. Below are the examples of their linguistic manifestation.

- direct urge to action

“Write to your local Member of Parliament today and ask them to pledge their support to prevent breast cancer” (*Breast Cancer UK*)

“We want action to:

Prioritise the primary prevention of breast cancer

Improve the regulation of chemicals

Protect the unborn child by offering advice to pregnant and breast feeding women

Ban the use of Bisphenol A in food and drinks packaging

Improve labelling laws and implement our ‘right to know’ about harmful chemicals” (*Breast Cancer UK*)

“Join us in the fight against breast cancer, and become a part of the cure. Your personal contribution will help in the ongoing effort to stomp out breast cancer for good. Giving has never been so rewarding!” (*Pink Ribbon international*)

- indirect urge to action or to reflection

“Our ‘You do the Maths’ campaign asks whether we could invest more to help prevent breast cancer and highlights the comparatively tiny amounts currently spent on preventing and understanding the causes of cancers” (*Breast Cancer UK*)

“We need your help to put pressure on policy makers to make the changes necessary to stop breast cancer before it starts.” (*Breast Cancer UK*)

“The more people that take action to raise political awareness of these issues, the more likely we are to make a difference.” (*Breast Cancer UK*)

“There are a number of actions that you can take to make your voice heard...” (*Breast Cancer UK*)

“We believe far more can be done to help prevent breast cancer. That's why we think it's time to move beyond breast cancer awareness to preventative action.” (*Breast Cancer UK*)

**The third communicative purpose** – to inform about breast cancer + to urge for action – is a more complicated one. It involves developing a particular public attitude to breast cancer which should naturally stimulate the audience to undertake particular actions in terms of breast cancer prevention. Until recently this disease was not in the focus of public attention, neither was it a conventional topic for a wide discussion or media coverage. Breast cancer patients and their doctors were to struggle with this life-affecting disorder supported by their families. The situation changed when in October 1997, American citizen Paul Davidson registered *pinkribbon.com* and launched a website directed to and available for all people in the world engaged with breast cancer. The website was dedicated to raising awareness and funding for breast cancer. Throughout the years this initiative has grown into the international platform covering more than 30 countries over 5 continents.

The discourse strategies used to achieve this purpose involve the following:

- breast cancer awareness promotion through *verbal symbol, images, logo*, associated with breast cancer campaign:

Pink ribbon

Think pink

Pink awareness

- breast cancer awareness promotion through popular *film or soap operas characters*.

Samantha, one of the characters of popular serial *Sex and the City*, was diagnosed with breast cancer, underwent lumpectomy and chemotherapy, and, finally, participated actively in breast cancer awareness campaign.

- breast cancer awareness promotion through '*diagnose coming out*'.

This is the case when public people or celebrities share their cancer struggle and survival stories with the public. A sensational case of Angelina Jolie's double mastectomy and its wide media coverage can be an illustration of this tendency.

All the examples above have clearly demonstrated that a large number of communicative strategies have been employed to influence the target audience. These strategies, in turn, are built on particular discourse markers which need to be enumerated.

### ***Language Means and Discourse Markers in Breast Cancer Prevention Discourse***

Once medical discourse has shown a distinctive shift towards public or social domains, there will be definite language signals to mark this shift. Below we will address the most typical discourse markers.

It is generally acknowledged that certain vocabulary choice might significantly influence the general style of the discourse. Breast cancer campaign discourse is characterized by

- dominant use of common (non-technical) vocabulary: *want to know, stop, chemicals, tiny amounts, rise rapidly*;
- wide use *verb+ noun* phrases as markers of colloquial language: *take action, make an change, put pressure, make a difference, do maths*;
- common use of emotionally marked words: *harmful chemicals, trustworthy institutions, fair use, pink abuse*
- limited use of terminology (technical vocabulary): *cancer cells, metastasis, lymph nodes*;
- dominant use of *you* and *your* pronouns for a direct appeal to the audience: we need *your* support... we want *you* to think....
- common use of *contractions* as a marker of colloquial language:  
*We couldn't* do our work without the generous support of members of the public...  
*We don't* receive funding from the Government...  
*We're* all exposed to synthetic chemicals on a daily basis
- use of direct rhetorical questions as a marker of a direct appeal to the audience:  
*Do you know what's in your cosmetics?*
- common use of imperative sentences as a marker of direct urge to take action or strong advice:

*Reduce* your family's exposure to some of the chemicals in your food and drink that are linked with breast cancer.

*Avoid* some of the hazardous chemicals commonly found in household cleaners.

### ***The Pragmatics of Breast Cancer Prevention in Russian Health Discourse***

Breast cancer prevention is a burning issue for Russian healthcare. According to the Russian Ministry of Health breast cancer is diagnosed in 54 000 women annually, which makes 19 % of all oncological diseases and the third cause of women deaths in Russia. We have searched various social media in ru.net to determine specific ones devoted to breast cancer prevention. It has been discovered that there are not many websites which specifically focus on breast cancer. Most of them cover all oncological diseases and their prevention.

It should also be pointed out that most Russian websites, raising cancer prevention topic, fall in two categories. The first category comprises information resources with either direct or indirect educative focus. The second category is represented by health centers and private clinics' websites performing overt marketing of their services. Although health discourse in Russian demonstrates the same communicative purposes as in British and America discourse, their discourse strategies differ significantly.

The **first communicative purpose** – to inform the audience about breast cancer – is mainly achieved by the following discourse strategies.

- *providing scientific facts and data*

Usually this strategy is implemented by a lengthy *narrative* which could be reposted from an international article or medical websites. Below is an authentic fragment of an article informing readers about the importance of breast cancer early detection, screening tests (mammography, ultrasound examination), breast cancer symptoms, etc. The vocabulary and the register sounds rather professional and formal.

“Ранняя диагностика рака молочной железы является залогом успешного лечения. Гарантированный результат выявления заболевания даёт ежегодный профилактический осмотр маммологом или онкологом, маммография (особенно для женщин старше 40 лет) и УЗИ молочных желез. Признаками ранних форм рака молочной железы можно считать следующие симптомы...” (Фонд профилактики рака «Живу не напрасно»)

- *appealing to authority*

This is a common strategy usually implemented in a form of an *interview* with an expert, a professor of a medical university, a well-known oncologist, etc. An interviewer generally asks questions about causes of the disease, its symptoms, treatment, and preventive measures. An essential part of the interview will be ‘myths and stereotypes’ about breast cancer, where the expert acts as an educator breaking the myths and raising their audience awareness about the issue.

**The second communicative purpose** – to urge for action – has been mostly detected in breast cancer treatment context and can be illustrated by the logo of Breast Cancer Management Centre – “Мы знаем, как вам помочь” (*We know how to help you*). Like in British and American discourse, two main discourse strategies are used here. They are a direct and an indirect urge for action. The difference, however, is rather significant. Direct imperative ‘do it’ in British and American discourse conveys the prevention appeal: the authors have the right to be categorical as they urge the audience to take preventive measures. The direct imperative in Russia discourse is mainly used to engage the audience into a closer search of the website which will stimulate them to use the clinic services:

“Узнайте больше об услугах нашего центра” (*Learn more about the services we provide*)

“Задайте вопрос нашим специалистам” (*Talk to our consultants*)

The indirect urge for action is implemented in the form of a *forum*. It may represent a patient-consultant interaction in which the ‘patient’ wants to know e.g. why exactly they should seek help in this private centre while the oncological services are guaranteed by the national law. ‘The consultant’s answer has all the markers of marketing discourse. First, the author describes a time- and effort-consuming procedure of applying for free hospital treatment (a long waiting list, limited insurance cover), then they stress the crucial importance of time in breast cancer treatment and individual approach to patients. Finally, the advantages of the centre are enumerated (high quality treatment, immediate hospitalization, economic expertise of treatment expenses). Below is an authentic fragment of such an interaction:

“**Вопрос:**

Почему мне нужно обращаться к вам за помощью, ведь медицинские услуги бесплатны в нашей стране и онкологическая помощь по закону бесплатна.

(Q: *Why should I seek help with you although medical services including oncological treatment are free in this country?*)

**Ответ:**

К сожалению, процедура получения бесплатного лечения отнимает много времени и сил. И даже при получении квоты, скорее всего, госпитализации придется ждать месяцами из-за имеющихся очередей. В таких вопросах как онкология время слишком дорого стоит. Мы можем организовать Вам лечение в кратчайшие сроки именно в том стационаре, который подходит именно Вам. Эксперты нашей службы проведут медико-экономическую экспертизу в случае, если Вы не будете согласны со счетом лечебного учреждения. Мы гарантируем Вам качество оказанных услуг, обращение в нашу службу – это уникальная возможность воспользоваться всеми преимуществами платной медицины.”  
(*Центр помощи: лечение рака груди*)

(A: *Unfortunately, access to free treatment is a time and effort-consuming process. Sometimes, hospital admission might take months because of the long waiting list. However time is too precious in oncological management. We can provide hospital admission within the shortest possible time in the most suitable clinic. Our experts can perform financial assessment in case you disagree with the hospital bill. We guarantee our medical services quality. Our center is a unique opportunity to take the advantages of private healthcare”*)

**The third communicative purpose** – to inform + to urge for action – is a complicated mixture of informing the audience, raising their awareness about their personal responsibility for their health and offering them particular actions in terms of breast cancer prevention. This could be illustrated by an on-line *Screen* test project designed by Cancer Prevention Foundation “Life Well-Spent”. The readers are introduced into some general facts about breast cancer and then are invited to learn whether they have any hereditary risk factors or other predisposition to the disease. The interactive *Screen* test gives food for thoughts and motivation to take preventive measures.

The language of Russian breast cancer prevention discourse is rather heterogeneous. It reflects stylistic markers of various genres and registers. There have been identified vocabulary and syntactic structures referring to **social essay** style:

- Внедрение инновационных технологий диагностики и лечения опухолей все дальше уводит нас от тех времён, когда онкологический диагноз воспринимался как приговор. (*Innovation technologies in cancer diagnostics and treatment have brought us far away from the time when cancer diagnosis was considered to be fatal*)
- Рак – это заболевание, которое поддается лечению, и Ваше желание бороться против рака является половиной той победы, к которой Вы придёте вместе с врачом. (*Cancer is a curable disease, your desire to fight it is half the victory which you and your oncologist will gain together*)

We have also been able to identify clear vocabulary and syntactic marker of **marketing** style: *a unique opportunity, benefits of private healthcare, no bureaucracy, hospital admission at short notice, we guarantee a patient-centered approach...*

There have also been distinctive vocabulary and syntactic markers of **colloquial** style:

Пожалуйста, не забывайте оставлять ваши контактные координаты, чтобы наши специалисты могли ответить вам персонально (*Please, don't forget to fill in you contact information so that our experts could contact you personally*).

## Conclusion

The research of breast cancer prevention discourse in English and Russian social media has proven that medical issues have become a significant part of social discourse as well as social

media, in turn, has started to play a significant role in health promotion. This situation clearly demonstrates that the boundaries between medical, social and even marketing discourses are becoming less obvious. The overlapping of communicative strategies, pragmatic functions and stylistic devices has shown that breast cancer prevention language is a multimodal discourse integrating medical, educative and marketing types of discourse. We have also indicated some universal pragmatic characteristics such as communicative purposes and similar discourse markers which British, American and Russian health discourse share. At the same time, a number of specific features showing difference in linguistic manifestation between English and Russian discourses have been discovered. While breast cancer prevention in English has demonstrated informal register, emotionally expressive vocabulary and colloquial style, the Russian discourse has tended towards social and marketing stylistics. These national specifics, however, do not contradict the heterogeneous nature of health discourse and fully correlate with the concept of a multimodal health discourse integrating medical, educational, social and marketing types of discourse.

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