CHAPTER 1

INTRODUCTION

1.1 BACKGROUND

Many studies have been carried out in the field of medical interactions, conversation and discourse analysis Odebunmi, (2006). One aspect covered by these studies is the communication between doctors and patients. However, in Sudan, doctors and patients have specific ways of communication, which may be due to the complex cultures and customs in Sudan.

This study will focus on people who live in Khartoum, in the Elhaj Yusuf area, which is located on the east of Khartoum, where inhabitants come from different regions of Sudan. This study aims to investigate the actual conversations between Sudanese doctors and patients in address terms used in the interactions during clinic treatment terms. There are two types of medical communication. (1) doctor-patient, where the conversation is only between doctors and patients and (2) doctor-other medical personnel, which takes place between doctors and other people who work with doctors, such as: nurses, front-disk officers and medical directors (Naerssen, 1985).

This study will focus only on the first type, Sudanese doctor-patient, because most of the address terms occur among doctors and patients, due to the social distance constructed among them. The whole study is conducted in one of Khartoum’s medical center called Alshhyda Nada. Doctors are specialists in their field and have long experience dealing with patients. Most of the patients who are involved in this study are in the middle age and regularly come to see the doctors. Therefore, most of the patients
are familiar with the doctors who work in the medical center. The data however, is analyzed in terms of address terms that are used among Sudanese doctor-patient which help to improve the communication between them.

This report is a pragmatics analysis of medical interviews involving patients who suffer from diabetic, blood pressure, and malaria during their conversation with their doctors in one of Khartoum’s public medical centers. In brief, the interaction between patients and their doctors are probably to produce “strategic interaction” (Goffman, 1969), where he examines the strategy of words and deeds; in which a participant’s situation is dependent on the move of other participant and in which both participants aware of there role. Therefore, the description and explanation of the linguistic nature of their verbal interaction in terms of address terms may help to improve the medical interview.

One of the reasons to study verbal interactions between patients and their doctors is to discover how patients discursively construct themselves during interactions as well as how patients are addressed by their doctors in terms of address terms.

There are many words used in Sudanese culture to show respect for people when calling or asking for them, for instance: “walid” which means (father), “walida” (mother), “akh” (brother), a”kht” (sister) “khal”, “am” (uncle), “istaz” (mister), “istaza” (madam), “haja” (old women), and “haj” (for old men). However, these address terms are used not only for relatives, but can be used for the people who they are familiar with. Also the way that people communicate with their close friends and close relatives is different from that of non-close friends and non-relatives, in terms of request, asking questions, gratitude and so on, which show solidarity.
1.2 RESEARCH PROBLEM

The researcher observed that there are many address terms and verbal behaviors used in Sudanese doctor-patient conversations. Doctors asking patients questions about their illness and patients in their turn provide answers. During these conversations doctor and patients address each other by some address terms. However, the use of address terms in asking and answering questions and other aspects of Sudanese doctor patient conversations is very important.

The address terms that are used in Sudanese doctor-patient conversation seem to be different than the other address terms that are found in other doctor-patient conversation in pragmatic studies due to the special status of doctors among Sudanese community. However, there are many studies in pragmatics that discussed Sudanese conversations of different fields such as “Cross cultural pragmatics: Apology strategies in Sudanese Arabic” by Abdurrahman (2008), Higgins (2007) Constructing Membership in the In-Group, Refuges council (2005), A Guide to Sudanese Cultural and Social norms and Handoussa (2010), Women and Youth in Arab Development. However, there are no studies in the field of medical conversation conducted in Sudan, especially in terms of address terms.

1.3 RESEARCH OBJECTIVES

The first objective of this research is to identify the address terms that is used in Sudanese doctor-patient’s medical interviews. However, medical interview of Sudanese doctor-patient is not studied yet especially in terms of address terms. There are many address terms used among Sudanese people. These address terms can be depended on age, fields and gender. Heritage (1997: 164) in his article describes that participants in some positions should be able to use different linguistic patterns in different situations.
they are faced with, according to the others’ cultural background and mentality. Hence, the way that participants communicate to each other shows the degree of social experience those participants have with each other (Hymes, 1962 & Saville-Troike, 1987). Therefore, the use of address terms and verbal behavior is very important in conversations.

The second objective is to describe how the address terms’ positions play a role in Sudanese doctor-patient communication, where there are some studies described the role of address terms’ position among speech to realize mitigation, acknowledgement, agreement, and solve overlapping. These position can be either in pre-position, mid-position or post-position.

However, there are many studies conducted in address terms in different genre, such as political news interviews, e.g. Rendle-Short (2010) “Address terms within the Australian political interview”, Xianghong (2006) “A Programmatic Analysis of Address form’s in Chinese family and non-family letters”, and Sam (1985) “the Use of Address Pronouns by Egyptian Adults” investigated the influence of social class and political views on changes in address terms. However, both participants use name, title or name plus title to address each other depending on the situation and the person they talk with. Moreover, in political news interview politicians and journalists use several address terms in different situations, for example to mitigate, overlapping, solidarity, power, refusing and request. Overlapping is when the politicians and journalists talk together at same time. Solidarity is when the politicians talk with the journalists without using address terms. Refusing is when journalists using address term to refuse politicians talk. Request is when journalists require something from politician using
address terms. Moreover, the political interview is different from medical interview where the journalist who initiate question is less powerful than politician.

1.4 THE RESEARCH QUESTIONS

What are the address terms that are used in Sudanese doctor-patient conversations? Where Sudanese culture is very rich in address terms that are used in different fields such as: “walid” which means (father), “walida” (mother), “akh” (brother), a”kht” (sister) and “ khal”, “am” (uncle), “istaz” (mister), “istaza” (madam), “ haja” (old women), and “haj ” (for old men). Also the question looks at either both patients or doctors use of all these address terms with each other or committed to certain institution roles. Therefore, the types of the address terms are very important to study which may add to the field of pragmatics.

How are the address terms are used in Sudanese doctor-patients conversations? The identification of Sudanese doctor-patient address terms can be useful to the medical field, which may help to improve the pragmatic conversations in general and Sudanese medical conversation in particular. The placement of address term seems to play a big role in Sudanese doctor-patient communication in terms of acknowledgement, request, mitigation, agreement and disagreement. Therefore, it is important to look for the position of address terms within the turn construction unit (TCU). This question is to find out the purposes of address terms in Sudanese doctor-patient conversation, which can be for the purposes of avoiding overlapping, acknowledgement, agreement or else. However, Rendle-Short (2009) in his paper ‘Mate’ as a term of address in ordinary interaction addressed the use of the terms “mate” among the Australian community to where ‘mate’ is interpreted positively, for example, when used in opening and closing environments, when attached to assessments, agreements, acknowledgements or
appreciations, or when mitigating a speech act. Moreover, Sacks, Schegloff and Jefferson (1974) in his work describes terms of Turn-Construction Unit, where placement of address terms play a big role in communication. Hence, one can say that the use of address term in the medical interview can help either to achieve smooth and successful diagnosis of the illness or vise versa.

1.5 THE SIGNIFICANCE OF THE STUDY

The main significance of this study is that, it will contribute pragmatically analyzed empirical data on Sudanese doctor patient based on data from formal speaking context. As previously mentioned there is a lack of research in this area, and thus this study will help to fill this gap and add to the knowledge on pragmatics of Sudanese doctor-patient. In addition, pragmatics study will enable comparisons with similar data from other varieties of doctor-patient conversations. These comparisons will add to knowledge on the development of pragmatics analysis of doctor-patient conversations. However, a study of doctor-patient interactions from the perspective of pragmatics of discourse will not only support existing studies on medical communication in Arabic, but will also explicate pragmatics analysis with data that contains conversation by non-native speakers of Arabic.

1.6 THE SCOPE OF THE RESEARCH

This study is limited to investigate diagnostic aspects of Sudanese doctor-patient, which means the normal interviews that occur between doctors and patients to find out the illness and medication. All conversations between doctors and patients are in Arabic language. Line by line analysis of the diagnosis between doctors and patients was recorded with 25 patients and 6 male doctors. As the sample of participants is
small, the findings cannot be generalized for all doctors and patients in all medical centers in Sudan.

The study includes six chapters. Chapter one is an introduction of the study, which includes background of the study, the objectives, research questions, the scope of the study, the significance of the study and the conclusion of the introduction. Chapter two is the framework of the study which includes address terms theories, the previous studies in address terms and other studies related to doctor-patient conversation. Chapter three is the methodology that the researcher conducted to collect the data, which includes the participants and data collection. Chapter four is the data analysis. Chapter five is the discussion and result and chapter six is the conclusion.

1.7 DEFINITIONS OF THE ADDRESS TERMS

The address terms can be defined as a word, phrase, name, or title (or some combination of these) used in addressing someone. Address terms may be friendly, unfriendly, or neutral; respectful, disrespectful, or comradely these depend on the nature of conversation and relationship between the participants. These variations in language and culture make it difficult for linguists to determine the possible universal pattern for the address terms systems.

1.8 SUMMARY

In summary, in this chapter, the researcher provides a general idea about the study which includes some idea about doctor-patient in general, background about Sudanese culture, and the objectives of the research, the significance of the study, the scope of the study and the definition of the address terms were also discussed.