

**THE LANGUAGE OF UNCERTAINTY IN A NEW ILLNESS:  
HEDGING AND MODALITY IN THE  
BIOMEDICAL DISCOURSE OF  
SEVERE ACUTE RESPIRATORY SYNDROME (SARS)**

**THOMAS DAVID F. CHAVEZ**

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THE LANGUAGE OF UNCERTAINTY IN A NEW ILLNESS: HEDGING AND MODALITY IN THE BIOMEDICAL DISCOURSE OF SEVERE ACUTE RESPIRATORY SYNDROME (SARS)

THOMAS DAVID F. CHAVEZ 4537982 SHHS/M

M.A. (HEALTH SOCIAL SCIENCE)

THESIS ADVISORS: LUECHAI SRINGERNYUANG, PH.D., ARAYAN TRANGARN, PH.D., LYNN THIESMEYER, PH.D., PHILIP GUEST, PH.D.

**ABSTRACT**

Located in the role of language in the social construction of health and disease, this study examined the discourse generated by medical journal authors at the start of a new infectious epidemic outbreak: Severe Acute Respiratory Syndrome (SARS). The research question asked how these authors maintained a balance between describing the uncertainties inherent in a new illness and their ascribed social role of expertise on such matters. Using micro-linguistic corpus-oriented social discourse analysis, the study focused on the “grammar of a new disease” by examining two linguistic resources of tentativity: hedging, which tones down communication to provide protection from potential recrimination or irrevocable commitment; and modality, where the lexico-semantic range of truth and certainty resides.

A list of 39 discrete lexical items (8 verbs, 8 adjectives, 8 modals, and 15 adverbs) of apparent semantic tentativity was processed into concordance software, which generates all instances of phrasal use in the 28 articles that composed the study corpus of 51,000 words. The corpus expostulated on the “lessons of SARS”. The concordances were then processed into qualitative coding software to yield themes of uncertainty and retrospective lessons or recommendations. The themes of uncertainty were laboratory diagnosis, transmission, symptomatology, origin, treatment, potential re-emergence, and possible vaccine development. The key putative lessons centered on the need for centralized state command, surveillance and information, preparedness planning, isolation and quarantine, management of travel-related risk, laboratory technology, public communication and education, research and infection control at the healthcare setting.

Key micro-linguistic findings indicated a pervasive use of tentative language, with nearly a thousand instances of phrasal use, the equivalent to one hedge or modalized expression in every third sentence. The most prevalent lexical item was the epistemic modal auxiliary *may*, signifying not only the hypothetical nature of experimental science but also of a communal social strategy to maintain politeness and to avoid brusque assertion of unwarranted scientific claims. This contextualizes the nature of scientific writing as a set of social practices. It is argued that the authors managed the uncertainty of SARS by orchestrating substance and form into an explanatory model (along Kleinmanesque lines) of the epidemic. By drawing on SARS as instructive (the learning of lessons), the authors were able to maintain their ascribed social role as technical experts. Behind this tension of uncertainty and expertise lay interesting undercurrents of medical ideology that revolved around themes of dominance – biomedical, bureaucratic, cultural, and (English) linguistic – in “documenting” and constructing a new illness geographically far removed from the Anglophone scientific and medical world. Implications for this discourse on how a new illness is conceptualized, on policy and on other areas that impact health social science are discussed.

**KEY WORDS:** SEVERE ACUTE RESPIRATORY SYNDROME (SARS) / SOCIAL DISCOURSE ANALYSIS / HEDGING / MODALITY / MEDICAL IDEOLOGY

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