NON-VIOLENT COMMUNICATION AS AN INTERPERSONAL,
MEDICAL-DISCOURSE GENRE: AN EDUCATIONAL
INTERVENTION AND DISCOURSE ANALYSIS
IN THAI MEDICAL COMMUNICATION

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DOCTORAL DISSERTATION

PRESENTED IN PARTIAL FULFILLMENT OF THE REQUIREMENTS FOR THE
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GRADUATE SCHOOL OF ENGLISH (GSE)
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I, William M. Richeson, am the author of this dissertation. This is my original study and was not plagiarized or copied from other sources.

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Dissertation Title   Non-Violent Communication as an interpersonal,
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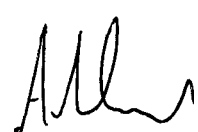Approval Committee:

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DEDICATION

I dedicate this dissertation to

my mother, Mary, R.N.

Her compassionate

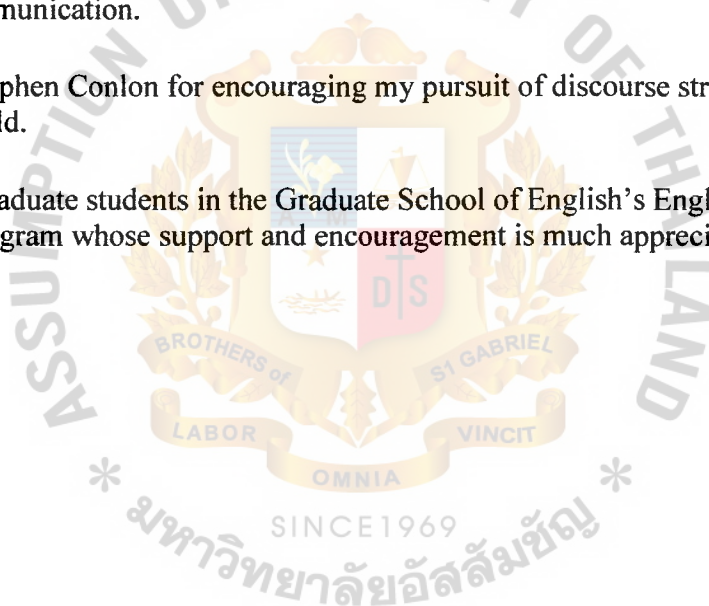work with patients and her pioneering work

in the Hospice care movement

remain inspiring.

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ABSTRACT

While low English language proficiencies create significant barriers to communication, cultural dimensions in Thai medical tourism make cross-cultural conflict resolution (CCCR) even more problematic. The objective of this research is to test a new educational intervention for medical tourism aimed at improving conflict resolution skills. Thirty, weekly, ninety-minute, in-service medical-English and interpersonal counseling lessons were conducted at Piyavate hospital, Bangkok. The counseling language selected, Non-violent Communication (NVC), also known as compassionate communication (Rosenberg 2003), is a well established and known negotiation-communication routine. This study proposes and tests NVC as a discourse genre for cross-cultural, medical encounters. Grammatical-semantic features of NVC are analyzed using functional linguistics (Halliday 1994) and Appraisal-Theory (Martin and Rose 2003). NVC and its discourse pragmatics provide the benchmarks for analyzing the Piyavate hospital recordings and the CCCR and NVC skills of the medical staff. To examine cross-cultural conflict resolution skills via NVC, this study differentiates NVC and culturally affected discourse. The NVC 'baseline study' of Marshal Rosenberg's works establishes the grammatical and semantic features of NVC. Five discourse features were selected for NVC and culturally affected discourse (CAD) analysis. The five features, focused on aspects of the negotiation process are: affect, evaluation, inter-textuality, appreciation and speech function. Descriptive of the thirty weeks of intervention, the framed analysis tracks the process of Thai staff acquiring new discourse skills and highlights the cross-cultural features which pose the most significant barriers to communication. The findings reveal that Thai doctors and nurses struggle most with specific cross-cultural communication barriers and that those habitual cultural features take longer to overcome with interpersonal counseling skill training. This integrative approach via combined medical English and conflict-resolution training suggests ways that interpersonal counseling may be integrated into Thai, medical English training and professional development.

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LIST OF COMMON ABBREVIATIONS

CAD: Culturally Affected Discourse

CCCR: Cross-cultural Conflict Resolution

CDA: Critical Discourse Analysis

ESP: English for Specific Purposes

MEE: Medical English Education

NVC: Non-violent Communication

SFG: Systemic Functional Grammar

L1: First or native language

L2: Second or, pedagogically, 'target' language

CHAPTER ONE: INTRODUCTION

Compassionate care in medical settings is a palpable aid to healing. From a care-provider's point of view, it meets a need to connect with patients authentically. As concerned professionals, their compassionate care helps them relate to the universal human need to feel safe and receive guidance, knowledge and treatment. It may help them tailor care to help patients live healthier lives or face the end of life with dignity and respect. Compassion enhances clear channels of communication, empathic understanding, and collaborative care. From the patient's view--standing barefoot on cold tile in a hospital gown--compassion received at a time of crisis, concern and vulnerability provides a basis for trust and cooperation. Without compassion, patients are less likely to follow medical advice, change unhealthy behaviors or continue seeking medical care.

Though few would take a stand against compassionate medical communication, the topic has been treated as an intangible, un-teachable skill while the need for efficiency, cost-effectiveness, and reduction of exposure to lawsuits has figured prominently in texts and medical curriculum. This study explores compassionate communication as a tangible genre of discourse. The study linguistically tracks participant acquisition and use of compassionate communication. In addition, research has revealed that many of the needs perceived in the modern medical community, needs for efficiency, cost-effectiveness, and 'exposure reduction' are compatible with compassionate communication skills. Recent studies (discussed in 1.4) indicate that compassionate care helps meet these needs, and hospitals where patients perceive a lack of compassionate care are less efficient, cost inefficient and put themselves at risk of law suits. There is compelling evidence that the omission of compassionate communication from medical curriculum has had many unforeseen consequences.

Medical schools preparing nurses, doctors and aids for posts in the health care industry in Thailand and elsewhere have focused on language proficiency and medical English. In medical tourism, higher TEOIC or other standardized test scores may result in higher pay for most medical professionals. Research shows that the focus on academic English has not helped medical professionals deal with live, on the job conflicts with foreign patients. Compassionate communication skills include spontaneous interpersonal communication routines for finding creative solutions for patient and care-giver needs.

As a study of an educational intervention in Thai medical tourism, this functional linguistics and appraisal analysis of participant language tracks the role-play performances of participants as they practice soft skills counseling. The discourse of compassionate communication features reveals features that mark it as a distinct genre. Genre is offered and emphasized because a compassionate, medical-communication routine like NVC, while meeting the criteria for genre (Fairclough 1994:216), is more importantly an interpersonal, spoken conversation routine. This sets it apart from the academic language genre the medical staff participants have experienced in their English educations in Thailand.

During the intervention, lessons in the interpersonal genre introduced new conversation routines adaptable to live conflict resolution. During the classes and in post study correspondence, medical staff members have reported the benefits and ease of transition to compassionate communication in their Thai medical tourism setting. My experience with NVC internationally didn't prepare me for how one doctor integrated the training into her own lifestyle. She said that she had never considered bringing her Buddhist teachings of mindfulness into her work with foreigners in the hospital before, but NVC gave her a way to experience, "mindfulness when talking" on the job.

Thai medical professionals received an integrative course of instruction in medical English and compassionate discourse routines derived from Marshal Rosenberg's Non-violent Communication (NVC 2003). This study presents a method and a measureable outcome for medical staff trained in the genre of compassionate communication. The discourse analysis describes and differentiates discourse processes, and semantic and lexical/grammatical features of NVC and culturally affected discourse (CAD) per interpersonal exchange move. These move by move descriptions are assigned token values in terms of tabulated semantic and lexical/grammatical features. From a broader view, then, each move becomes part of a set of moves for the cross-cultural conflict resolution (CCCR) agent for that phase of the intervention. When viewing this data over all three phases, the token assignments reveal aspects of compassionate discourse as exhibited by the CCCR agent over the phases of this longitudinal study. These features suggest ways that medical English courses in Thailand could adapt interpersonal, compassionate communication skills into an international, medical English curriculum.

Compassionate communication is an acquired not an innate skill. Taught to medical professionals, this study demonstrates how it helps them meet their own and their patients' needs. This dissertation, as it describes the intervention, data collection and linguistic analysis, examines the language of compassion as a unique medical discourse genre. During the longitudinal, thirty-week intervention, fifteen medical professionals at Piyavate hospital, Bangkok practiced interpersonal English skills designed to help them address cross-cultural conflicts with patients. The researcher hopes that this study may help in efforts to make compassionate communication a more tangible choice for medical professionals and medical schools.

Systematic research into compassionate language in medical settings is a very new area of research. This study will be the first to examine compassionate language in medicine from the view of Systemic Functional Linguistics and Appraisal Theory. Three areas of background may serve well for starters: (1) the origins and purposes of the language of compassion as described by practitioners of Non-violent Communication (NVC), (2) the researcher's previous experience with NVC and soft skills counseling, and (3) the educational intervention in the Thai medical tourism setting during which the data for this study was collected.

1.1   BACKGROUND OF THE STUDY

Non-violent Communication (NVC), also known as compassionate communication, originated in the nineteen sixties and seventies as an alternative to behavioral, Freudian, and other traditional approaches to psychoanalytical counseling. With Carl Rogers and Marshal Rosenberg, a 'soft counseling' method focusing on compassionate communication and empathic listening was initiated. Key to this study, Rosenberg's interpersonal counseling approach has had surprising versatility and applicability across disciplines since its inception. NVC, or compassionate communication, despite its very diverse legacy and wide application has retained at its core a single value or goal: to see each person as valuable and as having the same root values or needs. In NVC, needs are expressed in many different ways, culturally, socially, and interpersonally. Displays of *affect* and culturally coded expressions may provide sources of content or "text' of initial exchange. *Affect* is an aspect of attitude in the appraisal framework and concerns the emotional states of speakers and their expressions of emotional states in their spoken or written discourse. *Affective* barriers to communication across cultures occurs when the communication is hindered or ended due to misunderstandings of *cross-cultural affect*. NVC

training involves specific training in *affect engagement*. This means that NVC trained speakers have skills in engaging affect when in other settings communication would be hindered or ended.

Engagement when forceful *affect* is present is part of the process. *Engagement* is the process of interpersonal communication from a conversational exchange view. In an interpersonal exchange, engagement refers to any discourse which is responsive to a previous move or which anticipates or initiates another move. In NVC engagement is enhanced with inquiry into *affect* leading to understanding of the other speaker's needs and building communicative connectivity. As needs are shared, understood and met, compassionate communication reaches across interpersonal, cultural and social barriers. This ability to reach across barriers relates to its core values. The NVC, interpersonal discourse process is grounded in a value of shared human identity and universal needs.

This values system of shared universal needs plays a pivotal role in understanding how NVC made its way from a counseling language to a language of diplomacy and cross-cultural conflict resolution (CCCR). Incorporated in the discourse of NVC are ways that universal needs may be met. In other words, the discourse choices through which communication flows in NVC 'have honey on them'. The process itself is grounded in the experience of 'the meeting of needs'. Consider "say back" skills, for example, because they are so important to the NVC process. When a speaker uses interpersonal reflection and paraphrase to clarify and check understanding of what another has said, the other person has many needs met—for attention, understanding, and respect. In NVC, interrogatives and requests emphasize choices and collaboration rather than power and coercion. In speech function terms, choice offering and request making replace diagnoses, advice, demands, coercion and judgments. Offering choices meets autonomy needs as well as needs for creativity and collaboration. Each person is the center

and the person's needs and feelings emanate from the center—not an abstract cultural or societal expectation of norms. Here, we may get a glimpse at why NVC crossed over so easily from a personal counseling language to a language of cross-cultural negotiation. Focus is on the value of each person's needs, translating evaluation, judgment, criticism and blame into, as Rosenberg puts it, "a language of life". The whole discourse structure is one that is set upon the goal of understanding universal needs that are in active resonance with the speakers. The activity itself is a needs meeting experience, and parties involved in negotiation are often surprised how similar disputing parties' needs are when the veneer of hostile language is replaced with a needs-based communication process.

NVC's roots as a psychological counseling method for negotiating universal human needs rather than diagnosing text-book, psychological profiles has been met with increased acceptance as methods for research in social psychology have become adaptable to multidisciplinary research. The story of initial resistance to and eventual acceptance of NVC in the psychological community is an exemplar of NVC over the past five decades. The counseling origins of NVC began the movement toward patient centeredness and patient involvement in all aspects of treatment—rather than solely with diagnosis, theory, and prescription. It is a process that the patient takes home and continues on his or her own, continually working out or negotiating choices how needs might be negotiated, understood, and met.

For the purposes of this study, NVC as an alternative to traditional Freudian or behavioral psychological counseling demonstrates an important divergence in the ways that interpersonal discourse in professional settings may be perceived: as (1) an interpersonal and empathic process of needs negotiation whereby the expert offers choices for consideration (2) a treatment by an expert who bases evaluation of patients on norms among a human population

and a subsequent patient diagnosis based on these profiles.

Corollary to these approaches are the treatment choices: May the patient aid his or her own healing process and take an active role in treatment or should the social norms and diagnosis determine the plan for treatment? In the end, which is more effective? These are the questions Rosenberg was asking early in his career as a psychiatrist.

Rosenberg's research into traditional psychological diagnoses found that there was little, observable consistency in their application. Universities and psychologists interpreted the standards in a variety of contrasting ways and the results of the labels they promoted from multiple personality to neurosis did little to actually improve the lives or healing processes of individuals in their care. Rosenberg began to suspect that the labels themselves, in many cases, became self-fulfilling prophesies and patients became fixed in the roles proscribed for them. At that time, Rosenberg's research and findings were met with resistance. Recent medical and social psychological studies have been supportive (Piper 1997: 22). Popular theories about multiple personality disorders, for example, though interesting sources of plots for movies and television dramas have been discredited. Early childhood trauma from sexual abuse and the method of discourse used by counselors including their methods for eliciting the traumatic memories evidently has caused the narrative of multiple personality to form. The human imagination and the psychoanalytical process is a recipe for narrative attachment to avoid the direct confrontation with the trauma behind multiple personality.

By believing a patient might have the disorder and eliciting fictionalized roles for different aspects of personality, the psychologists and patients collaboratively and unintentionally may have created multiple personalities as a means for finding safe distance from the traumatic events (Piper 1997: 23).

Rosenberg's research revealed that many patients seeking counseling were being misdiagnosed and prescribed ineffectual and sometimes dangerous medications and treatments. 'Hard- skill' psychiatry can be used in combination with NVC, and Rosenberg has written many accounts of its effectiveness. However, for the most part, hard skills psychiatry treats individuals experiencing serious chemical/hormonal issues or serious mental disorders while NVC addresses day to day emotional and psychological issues that affect a much larger population. NVC counseling alone or in combination with other treatments has been growing in popularity since its inception. For a full discussion of the origins of compassionate communication in psychiatric counseling, a topic beyond the scope of this study, please refer to the works of Marshal Rosenberg and Carl Rogers cited in the reference section of this dissertation. In addition, I recommend Ernest Becker's *The Revolution in Psychiatry* (1964) for an early account of the genesis of NVC-like counseling. For our purposes, Rosenberg's development of a concrete method of counseling that we may term 'soft skills' counseling became the foundation not only for a transformation in his life as a therapist but also has led him into many different fields where NVC was found to be an effective discourse method.

Rosenberg turned away from labels, diagnoses, and evaluations in psychiatry that were themselves "outside" the patient treatment process and focused on the compassion based, interpersonal communication process. He assumed that patients experience their issues and healing processes from a variety of spiritual, cultural and individual dispositions. Interpersonal understanding is the key and may be enhanced when there is a sense of shared humanity. In NVC practice, the dignity of universal human needs, present and attended to during conversation, opens compassionate channels for understanding. Recent research in compassion studies have supported another of Rosenberg's original tenets—that authentic, compassionate communication

asks the NVC speaker to also care equally for his or her own needs. Representing those needs authentically, according to NVC practice, makes empathic connection to another possible. This practice sometimes called 'self care' in health care-giver circles in western countries is referred to by Thai/Buddhist health-care providers as "mindful communication". The practice of mindfulness of one's own needs and feelings has been shown to pre-dispose research participants to compassion for others (Neff, Rude and Kirkpatrick 2006: 1-13). In health care circles, the self-awareness of feelings and needs is often considered part of 'self-care' practices. In social psychological studies, self care 'priming' has been shown to increase compassionate awareness toward others (Neff 2003:5). Many doctors and nurses have practiced NVC's mindful communication and have written of their experiences. They agree that it stimulates creative, healing discourse between health-care providers and patients. Compassion studies also confirm that *affect*-based judgments pose great obstacles to communication when a process of mindfulness and needs negotiation is not actively engaged.

Relating across personal and cultural differences seems like an insurmountable challenge sometimes in our world. Often our leaders seem to give up and resort to violence. The language of authority and coercion is all around us in our societies. In this study, NVC/medical English workshop participants studied and practiced the discourse and communication options of NVC, ones based on grounding in self compassion and compassion for others' needs. In addition, they studied medical English and cross-cultural counseling skills geared for the Thai setting. Participants were 'primed' with training in listening and observation skills aimed at seeing and respecting universal human needs beneath 'the cloud of feelings'.

This study proposes to describe compassionate communication as a discourse genre using the published texts of Marshal Rosenberg. With that discourse genre described and invoked as

guide or benchmark, the texts of medical staff are analyzed 'in layers', that is to say, in such a way as to follow skill acquisition and discourse elements revealing the Thai doctors and nurses process of learning and applying NVC.

In NVC, the basis for understanding which bridges personal and cultural differences relates to NVC's core values. Within the language of NVC are language choices and language characteristics which illustrate or make tangible NVC values like the attention to universal human needs. Norman Fairclough says in *Language and Power* that when a language genre is present there will be a certain value set behind its discourse with certain corresponding discourse aspects present as well (2003:65). In NVC, these elements are related to particular interpersonal genre features with a noticeable set of discourse elements that speakers of NVC prefer. As such, it is "a genre" in "a way of acting in its discourse aspect" (Fairclough 2003:216). This study will describe the compassionate communication genre as taught in an interpersonal medical English setting. Its recognizable genre elements, discourse process, and language characteristics will be described and analyzed in chapters four through six.

NVC as a language *genre* emphasizes its central value: active acceptance of universal human needs. This acceptance is evident linguistically and meta-linguistically when a compassionate speaker asks for a clarification, shares an observation, inquires about another's feelings and needs, or makes choice-oriented requests. Respect for universal needs often alleviates painful feelings associated with needs not being addressed and/or being avoided due to cultural or personal stigma.

Sometimes the most volatile feelings are originating from very tender needs. NVC discourse allows participants to enter a creative process during which the intent is to try to find ways for everyone's needs to be identified, understood, respected and as often as possible--met.

The process itself supplies salve for human needs like the need for understanding, connection, compassion, and acceptance. Actively supporting personal needs creates a field of discourse in NVC whereby others' needs are also afforded acceptance, understanding, and a basis for deeper connection and collaboration in NVC.

In cross-cultural medical encounters the focus of clinical psychiatry is not appropriate or adaptive to the needs of most medical tourists. Traditional psychology skills Thai nurses and doctors have been exposed to do not address the kinds of needs and communication styles most patients present when they express themselves in international hospitals. Basic human needs like needs for security, humor and self-expression may set those who are seeking help at ease. Rosenberg based his humanistic communication strategy on mindfulness of universal human needs. An explicit purpose of interpersonal exchange in NVC is acceptance of differences. Feelings and needs are experienced in the moment, and respect is afforded feelings as sign posts to how needs may be identified and addressed. With its basis in universal needs, it is easy to see how NVC became a communication genre useful in diplomacy and other cross-cultural contexts.

Marshal Rosenberg has assisted in diplomatic missions in over sixty countries and is the recipient of five peace prizes (www. CNVC.org: Our Founder's Biography: May 10, 2011). He brokered one of the few lasting treaties between Palestine and Israel under extremely dangerous and challenging conditions. His first dialogue with an irate Palestinian man during this negotiation will be linguistically examined in detail in chapter four of this dissertation. In addition, he has introduced NVC to educators, business managers, mental health and health care professionals, lawyers, mediators, prisoners, clergy, government officials and many other groups and organizations. What began as a new kind of approach to soft-skills, counseling developed into a communication routine applicable in a wide variety of situations.

In medicine, care providers have submitted several accounts of NVC anecdotally. One physician writes:

> I use NVC more and more in my medical practice. Some patients ask me whether I am a psychologist, saying that usually their doctors are not interested in the way they live their lives or deal with their diseases. NVC helps me understand what the patients' needs are and what they are needing to hear at a given moment. I find this particularly helpful in relating to patients with hemophilia and AIDS because there is so much anger and pain that the patient/healthcare-provider relationship is often seriously impaired. Recently a woman with AIDS, whom I have been treating for the past five years, told me that what has helped her the most have been my attempts to find ways for her to enjoy her daily life. My use of NVC helps me a lot in this respect. Often in the past, when I knew that a patient had a fatal disease, I myself would get caught in the prognosis, and it was hard for me to sincerely encourage them to live their lives. With NVC, I have developed a new consciousness as well as a new language. I am amazed to see how much it fits in with my medical practice (Rosenberg 2003:12-13).

First language (L1) medical-care providers working with L1 patients in their medical practices report these kinds of beneficial changes in their practices when assisted by NVC's forms of compassionate communication. The issue that concerns this study is the extent to which NVC training in Thailand may improve cross-cultural communication. To what extent will Thai doctors and nurses acquire and apply a non-Thai discourse strategy in English, and will they be able to use it to address cultural differences and reduce communication errors and cross-cultural conflicts?

In Thailand, medical professionals who speak English as a global and second language (L2) encounter both native and non-native English speakers who present a wide variety of

cultural and social expectations. In addition, these patients often experience feelings of

uncertainty and vulnerability seeking care in a foreign country which often results in behaviors

unfamiliar or problematic to their Thai care-givers. Before examining some of these cross-

cultural communication challenges, I would like to briefly describe my NVC training and

previous experiences with NVC as background to the strategies employed in the intervention.

One unusual aspect of this dissertation is that it will be the first discourse analysis of NVC as a

medical discourse genre—and the first discourse analysis of NVC. As an NVC practitioner and

facilitator and as a counselor and music therapist with medical training, I may be the first English

language teacher and CDA researcher with sufficient exposure to NVC to do this research in

NVC discourse analysis and acquisition.

In **Figure 1**, NVC experiences and workshops appear in chronological order to provide

some background on previous adaptations of NVC to the needs of different groups and settings:

Figure   1 Timeline of NVC Experience Highlighting the NVC Intervention at

Piyavate Hospital, Bangkok, Thailand

1. *2004*: Non-violent Communication courses in Maui Hawaii and Tallahassee Florida

2. *2005*: Heal Our Warriors Decompression Camp Travers City Michigan, NVC with patients in military decompression camps with combat induced post-traumatic stress syndrome

3. *2005-2008*: NVC Lecturer, Nursing Leadership Class, Keiser University

4. *2005-2008*: Big Bend Hospice music therapist and NVC volunteer trainer, chronic and palliative care.

5. *2005-2009*: Tallahassee Florida NVC group facilitator/participant

6. *2009*: Cross-cultural, International NVC experience in Japan, "Aoyama Gakuin English Challenge."

7. *2010*: Tsu Chi University and Hospital Hua Lin, Taiwan; Taipei Chamber of Commerce, Taipei, Taiwan.

8. *2010*-2011: Piyavate Hospital—a ten-month intervention, with weekly, ninety- minute sessions.

9. *2011-present*: Nursing professional development BKK hospitals; NVC study groups.

The flexibility of NVC to assist in many challenging communication settings underpins and supports this research into Thai medical communication in medical tourism. The focus of discourse analysis using functional linguistic and appraisal theory examines the language of NVC practice and discourse acquisition. A first look at the NVC process is here provided to illustrate-- in a less formal way-- NVC discourse basics.

As a soft skills counseling approach, and as a cross-cultural and social discourse choice for resolving conflicts, NVC training is very attractive in international hospital settings. The following interpersonal conflict occurred in April 2011 in Hua Lien Taiwan on the third day of three NVC workshops in Taiwan. While conducting workshops at Tsu Chi hospital and university, a request came forward that a difficult communication situation be discussed. The two who came forward were just returning from the hospital where the incident had taken place, and were feeling a need to share with the group. The doctor and attending nurse recounted the incident which may be described as both an interpersonal conflict between patient, staff and family members and a conflict in interpretation and application of Taiwanese law.

The two summarized what had happened. A patient with whom they had worked in long-term oncology care for nearly a year was nearing death. It was not unexpected. The patient Mrs. Soe worked through a plan with her family. She had written long-term care and advance directives. The nurse was 'first on the scene' when a brother and his wife arrived from out of town. He and his wife become suddenly active in the patient's care. They had not been part of family meetings before the patient's health had changed, but now were energized and asking that they be allowed to intervene in the patient's care plan.

At my request, the group re-enacted the challenging moments in the conversation. First, the class reviewed NVC discourse options and values to apply to the delicate situation.

Pedagogical Review of NVC Pragmatics

a. Observational Discourse Types: Interrogative and declarative, reflecting, paraphrasing summarizing, giving the gist, tag questions.

b. Use language choices to keep the conversation alive opening doors for development of content, *affect* sharing, and understanding of and respect for needs.

c. Ask a variety of content clarifying questions about what people are currently saying or doing. For example tone and gesture may be the source for inquiries.

d. Observe and question: for example, about a possible interpretation of something observed: "When you say that you are tired of waiting for others to help, are you feeling frustrated?" In NVC, feelings and needs are grounded in personal experience of feelings and needs 'in the now'. Other references to rapport in observing as well as engaging with feelings and needs seek a cessation of blame and criticism and openness to what others express. It is neither agreeing nor disagreeing, it is certainly not giving advice; it is the attention we give to notice our own experience including feelings and needs and engaging the experience of another person's feelings and needs.

e. Share your observations, feelings and needs, and make requests for information and collaboration.

f. Make requests for actions to be taken. These actions may be related to observations of physical, social or individual needs. NVC requests replace coercive language and welcome 'no' answers. They offer a range of choices for the purpose of meeting needs. When the other speaker knows you are listening and involved it opens the door for freer, more open and authentic discourse.

The class wrote the following "brainstorming" dialogue to help the two doctors. The doctors who were in communication with the terminally ill mother's family, then, played the role of the 'out-of- town' family member who was fighting to change the mother's care plan (Relative One).

1. *Relative One:* We have decided to put Mother on a respirator and a feeding tube.

2. *NVC Doctor*: When you say you have decided to put your Mother on a respirator and feeding tube, are you feeling sad and wanting to do something more for her?

3. *Relative One*: I'm feeling angry because the staff here seems to have given up.

4. *NVC Doctor*: Would you be willing to tell me something the staff did that said to you they had given up on her?

5. *Relative One*: They give her all the pain meds she needs, but nothing to help her fight the cancer.

6. *NVC Doctor*: So she is getting the pain meds she needs and you wonder if there is something more they can do to stop the cancer?

7. *Relative One*: Yes I do.

8. *NVC Doctor*: Would you like to know about the meeting your mother had about that while she could still speak?

9. *Relative One*: Yes—I need to know what she wants.

10. *NVC Doctor*: [speaking to relative two, the eldest son's sister]Would you please get the minutes to the meeting with your Mom and the advance directives?

11. *Relative Two*: Yes I will. [She returns and they share the directives]

In understanding the process of the mother's disease, from beginning to advance directives, the eldest son was "brought up to speed" and was able to understand his mother's

need to die peacefully as the cancer could no longer be controlled. The discourse process demonstrates respect giving, "choice-oriented language" (1) when the doctor invites the eldest son to review the mother's directives, and (2) in the way it focuses on the son's need for understanding.

In discussing the above situation, the class brought out some key aspects of the NVC process. By showing respect for the needs of people who seem to be creating a "crisis", the needs can be negotiated more creatively. The cultural tendency in Taiwan, they shared, is to avoid talking with irritated individuals especially around a sensitive topic like death. The cultural solution is to resort to power relations. The eldest son, had his need for understanding not been met, may have culturally been deferred to and it would have been his decision alone to make – even against the wishes of his mother.

Participants shared other examples they were aware of during which an eldest relative out of cultural expectation permitted a relative to suffer through expensive and fruitless treatments which decreased the quality of life for the patient's remaining days. The doctors emphasized the relatively new legal status of advance directives and living wills in Taiwan. They shared their concerns. For example, participants discussed similar cases during which a patient has had an advance directive but an eldest son arrived and insisted on other treatment. Had the cultural practice of decision making and the legal one come into conflict, the hospital staff would have confronted a serious dilemma.

Perhaps there are few life experiences as challenging as the experience of a loved one's death. At such times our experienced health care providers may act in a variety of attitudes as care –givers. This study investigates and reveals the elements of compassionate language that make NVC a unique medical discourse choice for international medicine. Within the medical

tourism arena, Thailand experiences an acute need for better communication strategies for very specific cross-cultural and medical tourism related reasons. When these reasons meet their worst case scenarios in Thai, health-care facilities, some researchers describe resulting problems as critical impasses for many 'would be' medical tourists (Armbrecht 2008:2).

1.2   STATEMENT OF THE PROBLEM

Cross-cultural communication between foreign patients and their Thai care-givers remains problematic, often reported in conjunction with patient dissatisfaction and malpractice suits (Armbrecht 2008:1). Thai medical personnel struggle with their patients' varied styles of communication and cultural/medical backgrounds and beliefs. Research reveals that proficiency in English, the 'lingua Franca' of Thai medicine has not significantly mended cross-cultural, communication barriers. The unique relationships of medical staff and patients and the challenges of communication across cultures warrant intervention.

According to the Kasikorn Research Centre, between one and two million, foreign medical travelers visit Thailand each year, generating revenue of 30 to 40 billion baht (Fernquest 2005:3). Though ranked among the best worldwide in medical training, technology, and affordability, Thai hospitals and the Thai medical tourism industry struggle with communication with their foreign patients.

An important challenge that medical staff face is that patients come from hundreds of different countries, cultures, and subcultures and speak as many different "Englishes". From different cultures come different beliefs about medical treatment as well as different interpersonal communication styles. Non-verbal issues related to pronunciation, body language and tone have been reported to have caused serious misunderstandings—let alone the lexical and grammatical issues.

When communication issues do arise, they are further exacerbated by local issues as well—which is to say, the English language training, psychological/counseling instruction, and cultural awareness training for medical students, the next generation of care providers has not included "Global English" and cross-cultural English counseling to meet the challenges of working with foreign patients.

English language training at Mahidol, Sirirat and other top medical universities emphasizes academic, medical-English, a very different genre of English than interpersonal English. English is usually taught as a culturally 'western' language with western values and beliefs highlighted. Currently in Thai medical tourism, westerners account for less than eight percent of English speaking patients (Fernquest 2003:5). The majority of English speaking patients at Piyavate hospital where this study took place came from African, Middle Eastern, and Asian countries. The staff reported more than one hundred different countries were represented in their data for 2010 and 2011, the years of the study. Thai care-givers have received very little in the way of applicable training in communication to help them bridge the variety of cultural divides they will encounter. The training they receive in psychology is equally difficult for medical staff to apply in actual foreign patient encounters in Thailand.

The Thai medical curriculum includes mental illness studies and internships in Thai psychiatric hospitals. The focus on psychological behaviors of institutionalized individuals, people who have been judged to be non-functional in society and require special care , ensures that medical students are trained in and will be exposed to and perhaps choose work in psychiatric wards where their care is needed. Doctors and nurses do student training in these psychiatric facilities in partial fulfillment of their practicum requirements. They learn how to assist patients who suffer from a range of conditions and disorders from autistic children to

criminally sociopathic adults. The medical system needs care-givers in these facilities and exposure to "hard skills" psychiatric care may help Thailand keep these facilities staffed. As a result, however, time is not allocated in the curriculum for soft skills counseling suitable for medical tourism. One nursing director commented that another disincentive for instruction in other forms of counseling skills is that there exists a cultural stigma against counseling and consequently few employment opportunities for counselors. This gap in Thai medical education has had a very unfortunate result for both Thai and foreign patients in hospitals. The cries of patients in trauma, diagnosed with terminal illnesses or other life-changing conditions fall on untrained ears. Thai care-givers have little or no training or resources to draw on in these situations.

To compound an already challenging situation, Thai care-givers experience communication in Thai hospitals in culturally specific ways—as Thai people translating experience in culturally Thai ways. This may seem obvious enough, but when added to the lack of training in soft skills counseling and interpersonal English, certain aspects of Thai culture create and maintain cross-cultural misunderstandings and add unintended force to conflicts. In section 1.3 and elsewhere in the data analysis sections of chapter four, many instances of these culturally specific tendencies will be examined. For our purposes here, let's consider the case of a boisterous patient crying out for attention. In surveys administered during this study based on Hofstede's conflict avoidance (1980), Thai care givers indicated that they would most often choose to avoid such a patient. From a non-Thai perspective this would seem like a breech in hospital ethics and good care standards and might be expected to result in even more volatile behavior from the patient. But from a Thai point of view, the care-giver is affording the patient space to cool off and compose him or her-self. From the Thai medical staff perspective, the Thai

care-giver would not be "making the situation worse" by witnessing the patient's 'loss of face' during an emotional outbreak. Cultural differences from patients and from Thai care-givers create serious challenges to clear, compassionate communication in Thai medical tourism.

Armbrecht reports that medical staff and foreign patient communication errors and conflicts "sometimes hav[ing] tragic consequences" are the most frequently mentioned causal factors in malpractice suits (2008: 1). The need for cross-cultural conflict-resolution (CCC⁰) skills in the Thai medical tourism industry has been the focus of numerous studies over many decades.

Government and non-governmental agencies, accrediting bodies, (LT, (bnglish i anguage Teaching), b SP, (bnglish for Specific ᵐurposes), 0 (((Medical bnglish bducation) educators, researchers and numerous medical agencies, hossitals and staff have investigated and defined the sroblems. Cross-cultural barriers to communication and models for explaining communication processes across cultures, including context communication styles (d udykunst et al., 199S) and the importance of conversational constraints (h im et al., 199S) have helped identify the issues and problems medical staff and foreign patients face.

The intervention and this discourse analysis are informed from such research into cultural dimensions and variables that distinguish people who are Thai from non-Thai culturally. fntachakra (2004: 42), for example, identifies factors important to consider in Thai, cross-cultural communications in medical tourism. l ther research defines communication processes that inhibit communication between Thai medical staff and foreign patients. The surveys administered during the intervention queried attitudes and factors that might lead to communication break-down. These factors in the surveys were derived from ᵉ ofstede (1980): (1) assertiveness in a split survey of three factors provided significantly variable results over the

course of the study. Other factors included social communication staples (2) uncertainty avoidance; and (3) conflict avoidance.

3rob@ms re@ted to cross-cu@ura@conf@cts are we@documented but have rare@ resu@ed in interventions. ᴼ eliance on cross-cultural knowledge alone has not been shown to help Thai medical staff when it comes to addressing day-to-day communications and cross-cultural conflicts with foreign patients. fn summary, problems in communication have been noted in three areas: (1) differing Thai/foreign patient communication practices (2) the numerous cultural origins of medical tourism patients, and (3) the focus on academic bnglish rather than interpersonal soft skills counseling bnglish. The combination of these three factors results in communication problems in an otherwise very successful medical tourism industry in Thailand.

The educational intervention to which we will now turn took a new approach: to de-emphasize cultural differences and to focus on universal needs and the Nˢ C needs negotiation process for cross-cultural conflict resolution (CCCᴼ). The intervention provided educational strategies intended and designed to address cross-cultural communication issues. The study-defined cultural criteria are incorporated into lesson plans and methodology. By integrating counseling skills (Nˢ C) and cross-cultural conflict resolution skills (CCCᴼ) with interpersonal, Medical bnglish instruction, workshop participants received guided practice in lexical and functional features of cross-cultural, interpersonal bnglish.

1.3   INTERVENTION RATIONALE: NON-VIOLENT COMMUNICATION (NVC) TAUGHT AS A CROSS-CULTURAL DISCOURSE GENRE

fn culture and discourse studies, researchers report a growing sense of urgency to develop communication routines applicable to cross-cultural conflict resolution (CCCᴼ) (Belcher

2009:27). Better methods of communication and understanding in international communication may help relieve stress during critical communication events and help contribute to peaceful relations 'in the world'. In medical tourism hospitals, there are complex communication challenges and international implications when world cultures meet in a foreign medical context. The educational intervention began with consideration of these challenges and deliberation of a hospital venue for the intervention. The rationale for teaching NVC as a cross-cultural discourse genre at Piyavate hospital, Bangkok relates to these communication challenges. The purpose of this sub-section is to provide rationale for the intervention at Piyavate hospital and relate the pedagogical approach used in the intervention to the data gathering process, revealing the relationship between the intervention and subsequent discourse analysis.

At the outset of the intervention phases of this study, a genre-based pedagogy was researched and chosen. When NVC is considered as a CCCR genre, its uniqueness is brought into focus. Learners experience NVC as a unique discourse choice. In native-speaker NVC courses, participants also encounter NVC as a unique, non-culture specific discourse strategy. The NVC process of communication through which feelings lead to needs negotiation includes lexical, grammatical and semantic features unfamiliar to native and non-native English speakers. In English as in other languages direct inquiry into affect is determined by complex cultural codes. The universal needs negotiation process of NVC appears 'foreign' even to native speakers. NVC's directness regarding *affect engagement* provides a good example: "When you say that you are afraid in that way are you feeling vulnerable?" The integration of paraphrase and interrogative inquiry about feelings is uniquely NVC. It stands out in contrast to discourse elements of academic or of day to day conversation. 'Genre' differentiation, then, is not just the data analysis strategy used in this study but is also a pedagogical tool to help new learners of

NVC acquaint themselves with a new discourse choice and strategy.

Toward teaching NVC as a CCCR genre, workshop activities were designed to introduce NVC as an alternative communication genre, distinct from other culturally and socially specific genres. Rosenberg's focus on satisfying universal human needs relates pedagogically to students' need to have fun while learning. Playfully, in games, drills, interviews, role-plays and other activities, participants learned how and when NVC may be chosen as a discourse genre helpful in world-English, conflict and other situations. Experimentation, play and free play trial and error with NVC steps and processes were included in the weekly workshops.

The interpersonal counseling genre taught in this way introduced a new communicative strategy for conflict scenarios. The attention to interpersonal language choices relating to universal human needs creates a new context for English language usage. The counseling steps and the patients' words and actions are highlighted while traditional, academic 'English' concerns like grammar correctness slip into the background. The human needs in play and the communicative barriers to those needs are the focus.

The study of the medical staff speech samples relates to this genre aspect by relating to the movement participants made from academic and institutional English to the CCCR genre. During the intervention, participants were introduced to a wide variety of cross-cultural and interpersonal conflict scenarios. The ways they related to these scenarios in the early intervention relates to the participants' prior knowledge and expectations of English usage in these settings. In other words, the academic English and English language taught in Thailand as 'western' values. Then, as introduced to CCCR/NVC participants began to express themselves integrating more and more elements of NVC discourse genre into their interpersonal communication. Social and cultural contexts as well as other factors affect the choices in language that speakers make

and thus a multi-dimensional model for analysis was developed. In this study, participants' use

of NVC is analyzed with SFG and Appraisal Theory in four tiers:

Table 1: Genre Features Studied for Cross-cultural 'NVC' English.

Register	Metafunction	Discourse	Lexical-grammatical
Field	Ideational	Inter-textual dynamics Conjunctive relations	Genre features, Hypotactic projection,
Tenor	Interpersonal	Speech function Exchange structure, Appraisal	Mood and mood elements, modality, attitude, affect, inter-textual and dialogic positioning
Mode	Textual	Reference (participant tracking)	Information structure Nominalization

Before returning to the linguistic study of NVC and the process of genre acquisition,

here, the context of the medical tourism setting and intervention will be examined.

The study spanned thirty weeks at Piyavate Hospital, Bangkok. The pedagogical

rationale for choosing Piyavate was two-fold: (1) the fourteen staff members (RN's and ARN's)

and one doctor in the Piyavate study , were all young and just two or three years out of school

and (2) each had low to intermediate English language skills with 300-500 TOEIC scores, the

doctor's score being slightly higher at 550. The intervention sought to improve communicative

interpersonal English where low English proficiency in academic English was evident. With these factors and the hospital's medical tourism mission in mind, Piyavate was chosen because 'the most good' could be done and the level of the English proficiencies was low and fairly uniform. For these reasons, Piyavate was chosen rather than at a hospital with staff of various ages, experiences and proficiency levels.

The intervention 'singles out' interpersonal communication through intensive NVC training. Every lesson's objective concerns a part of NVC process, practice, and discussion. Medical English vocabulary and grammar review became a part of the practice through integrated lesson plans which aid in participants' medical English as well as NVC/CCCR skills.

NVC and conflict resolution served as the target of pedagogical activities. Spontaneous discussions of NVC use in the hospital blossomed into topics of role-plays and practice. A few of these topics have been selected for analysis in Chapter Four (audio reference Appendix Four). The variety of materials, approaches and methods for collecting speech samples are thoroughly explained as samples are brought forward in subsequent chapters. Note here, however, that during the intervention, the samples were recorded at three intervals and under the same conditions: (1) Participants were divided into groups, (2) given role-play topics, (3) ten minutes to prepare (4) and then they performed their role-plays for the recordings. In Phase 1, this combination of brainstorming time, writing down ideas and then performing was negotiated with the participants. They felt more comfortable having time to work together and prepare before performing. Although later in the course spontaneous NVC discussions did take place more and more, those discussions did not become part of the data for reasons of data consistency. The samples and data, then, come from participants at regular intervals and under the same four conditions throughout the intervention. The recordings are then transcribed using a well-known

transcription method --in this case Carter and McCarty's *Spoken English*, the service encounter model of transcription.

Across the three phases, 'scaffolding' of instruction built from where the proficiency level of participants was and built on that to expand to new skills. Here, this means building from the academic genre familiar to participants and gradually taking away the academic supports in interpersonal conversation. The 'academic English' prompts introduced role-play topics. Although they were creating English for conversation and a spoken genre, most of the participants relied on written 'lines' to refer to. Workshop participants were assigned topics and role-play descriptions and were given time to discuss the situation with the assigned partner and prepare a role-play response to perform for the group. Their preparing and performing of these role-play scenarios builds on their 'known' experience with English education, their comfort with written English versus spoken English, and lets them move toward the new, interpersonal English goal with the support of a familiar academic framework—collaborative student work leading to performance. The step by step movement from academic to interpersonal English relates to the participants' development of new skills building on known skills.

While participants were building their interpersonal English –particularly cross-cultural conflict resolution (CCCR) skills, the need for the academic supports decreased, but remained present to a lesser extent in the later phases of the intervention. As familiarity with NVC skills increased leading to longer role-plays which included more of the NVC discourse aspects, participants also reported an increased comfort level using NVC/ CCCR skills on the job in the hospital.

The data analysis section focuses on the tallying and analysis of these CCCR agent moves. When their skills improved, participants needed fewer and fewer written aids. The final

role-plays in Phase 3, for example, were drawn from a bowl and most participants were able to improvise spontaneously.

The texts of peer to peer role-plays show participants' habitual communication patterns in the Phase 1 samples. They begin exploring new CCCR strategies in Phases 2 and 3. In addition, post-study logs were kept by two nurses who then did post-study re-enactments of actual patient to nurse communications. The role-play topics vary widely, from general interpersonal conflict scenarios to hospital related, cross-cultural conflicts.

The rationale for the intervention pedagogy relates to the rationale for data analysis as well. The functional linguistics and appraisal analysis of data over the course of the study describes speech act choices of participants learning the new discourse genre. The articulations of speech acts in terms of compassionate conversation complements linguistically what recent studies in medicine and social psychology have shown physiologically—compassion, employed as a specific approach to communication, has measureable physical and linguistic characteristics and communicative features.

The wide range of interdisciplinary applications of NVC from counseling to business, diplomacy, and other fields, shows NVC's adaptable nature, founded on the idea of shared universal needs. From this value, NVC semantic process originates and selects from a known set of NVC discourse processes. The description of NVC linguistically provides a basis for comparison with culturally coded global 'Englishes' spoken in a Thai, international hospital. In this study, NVC genre provides a basis and means for comparing known NVC discourse in the publications of Marshal Rosenberg, to the Piyavate hospital, Bangkok workshop participants' NVC acquisition. The 'classic' samples of NVC analyzed set an analytical baseline. The subsequent linguistic analyses of Thai doctors and nurses in the process of NVC acquisition may

then be compared to the baseline analysis. From the perspective of workshop participants, NVC communication was a communication 'world unto itself' and as a discourse option was entered into as an integrated whole. NVC practice meant that participants applied NVC in spontaneous, interpersonal ways and in workshop-prescribed situations aimed at cultural and interpersonal conflict.

Workshop sessions began with warm-up exercises and media assisted drills that scaffolded lexical-grammatical features in familiar and new contexts. The intervention sessions integrated medical English and counseling English in interpersonal contexts. The four NVC genre elements progress and repeat discourse features: observations, *affect*/feelings, needs and requests. Sensitivity to close observation without judging or criticizing is key. Observing tone, gesture, mood, *affect* and need, as well as inquiring about information and experience related information are all over-lapping and reoccurring discourse processes. Lessons using media presentation and team inter-reactions including song, photos, graphs, video, and charts as elements of 'live' interpersonal communication. Lessons culminate in role-plays during which fictional or volunteered, personal conflict issues are considered and NVC skills practiced with. In NVC compassionate communication focus and attention on the live, interpersonal dynamics of communication has made it a successful discourse genre in diplomacy, culture-sharing, research, business and other areas, yet CCCR and conflict discourse pragmatics is a rather new area of study, cross-disciplinary in nature and until recently concerned mostly with contrastive pragmatics (Intachakra 2004: 36). This study in Thai medical tourism investigates cross-cultural challenges and applies an intervention aimed at addressing these challenges. The way the intervention sought to meet the cross-cultural communication needs of medical staff and patients was through an integrative approach, re-contextualizing familiar and medical English review

materials cast in terms of interpersonal communication needs. The course materials were aimed to help participants move from the academic medical English genre, to the interpersonal cross-cultural genre of NVC.

One aim of introducing the interpersonal/soft skills counseling genre of English to Thai medical staff is to differentiate academic English from interpersonal English. The research based hypothesis of the intervention concerned medical staff application of English language to cross-cultural medical encounters. Reportage of serious, medical communication errors, dissatisfaction letters, and malpractice suits have been reported in Thailand and in the international media (Armbrecht 2008: 3). Academic English skills and English educational interventions have been applied unsuccessfully. Thai medical personnel confess that they do struggle with their patients' varied styles of communication, and cultural and medical backgrounds and beliefs. Thai medical tourism patients, as often as not, come from a non-English speaking country but speak English as a common language.

The challenges of cross cultural communication add stress to the already challenging task of finding a mutually understandable communication repertoire in a medical setting where pain and health, life and safety needs may be very reactive. Prior to the intervention, health-care facilities in Thailand provided many examples and interesting anecdotal topics that informed role-play and game topics. 'Game' as a critical-thinking, skill building enterprise is well researched. The intervention applied a synthesis of critical thinking and compassion (NVC) language to interpersonal conflict. In the process, workshop participants practiced many critical thinking skills from informational summarizing and reacting, to inferencing, questioning, and application skills. When these lessons were still in their planning stages, the search for a suitable research site took place.

Both government and private hospitals were engaged and three hospitals, Mahidol, Sirirat, and Piyavate were chosen for the assessment phase. These hospitals showed high interest in the workshops and study. After three, pilot workshops with doctors and nurses in each, Piyavate's general medicine ward was selected for the study for its superior ranking per the stated criteria. (1) Its general, "check-up" ward, does a wide range of medical processes and procedures including physical exams, lab-work, radiology, gynecology, obstetrics, optometry, ophthalmology, the heart center, pediatrics and a new dentistry unit. Though patients with special needs or very serious conditions can be referred from the general ward to more specialized wards in the hospital, foreign, English speaking patients meet this ward's staff first, "on the front lines" of the medical tourism industry. (2) Medical staff in this ward , all in their twenties and having similarly low English proficiencies had low or intermediate level of proficiency in English as determined by their TOEIC test scores averaging from 300 to 500. The one doctor in the study had a TOEIC score of 550. (3) Hospital statistics show an average of 5 to 35 foreign, English speaking patients daily, a number that Mahidol and Sirirat wards did not approach. (4) The mission statement of Piyavate includes as a stated purpose to "encourage the trend of medical tourism to Thailand" (2004: Piyavate Hospital\medical tourism). **Figure 2** (page 32) shows a Piyavate nurse and one of her English speaking patients. Cultural diversity among English speaking patients is a desirable trait for CCCR research. At the end of the intervention and data collection, the author conducted exit interviews with Piyavate administrators. In the prior year, 2010-2011, the hospital had treated patients from one hundred and twelve different countries. While specially trained Arabic and Japanese speaking translators are on duty, the numbers of languages involved prohibit much direct translation. The hospital relies chiefly on English as its 'lingua franca'. The first point of contact for most foreigners in a medical tourism

hospital like Piyavate is the general check- up ward. This ward performs many functions and duties—one of which is triage to other hospital departments.

Figure 2: The Piyavate General Medicine Ward: Diverse Cultural backgrounds in CCCR research in Thailand includes people from many different cultures who speak English as a common language.

During the process of learning NVC and CCCR pragmatics, learners move from experiencing a culturally-centered and academically acquired discourse practice to having a universal, cross-cultural choice in discourse. It is the learners' transitioning from culturally-centered discourse pragmatics to universal-needs-oriented discourse pragmatics that this Systemic Functional Grammar (SFG) and Appraisal Theory (AT) aided portion of the study examines.

Neither we as individuals nor our groups thrive without the ability to change and adapt. We are not static. All six aspects of avoidance oriented, culturally exclusive language presented in this study relate directly to avoidance tendencies. Ironically, a desire to avoid conflict seems to be a major factor in an individual's choice to resort eventually to 'violent' choices of discourse like blaming, threats, or other coercive moves. This study tests and builds on the principle of

conflict avoidance as the pre-cursor to violent language by testing the conditions of avoidance and language usage offering participants instruction and practice in using an alternative approach, through conflict engagement and the principles of non-violent communication (NVC).

The intervention focused instruction on interpersonal CCCR skills to engage more deeply into the nature of conflict and to know how to use non-violent language choices to do so. The potential the program has to enhance interpersonal/cross-cultural language learning may be measured in terms of new linguistic and discourse choices evidenced where avoidance had been the trend. Avoidance, as reported in the pre-study and in the Thai medical tourism literature falls into categories that are linked to linguistic expression and may be quantified and analyzed.

Medical professionals in Thai international hospitals encounter new people, cultures and conflicts on a day to day basis. The first point of contact in interpersonal exchanges correlates closely with the speakers' reactions and attitudes toward *affect*. *Affect* as it relates to communication, social psychological and discourse studies is defined as an aspect of attitude and concerns the emotional states of speakers and their expressions of emotional states in their spoken or written discourse. *Affect* studies underscore the fact that a person's initial, *affect*-reaction in an interpersonal encounter play a leading role in avoidance behavior—and often an end to the exchange (Neff 2003:3).

Doctors and nurses working in Thai hospitals who study non-violent and violent language become aware of their own attitudes and language markers related to conflict, avoidance, and engagement. They observe how avoidance of conflict seems to give rise to an end of conversation or an escalation in violent forms of communication. Avoidance tendencies so closely relate to violent language that students quickly see that a perceived need to avoid conflict correlates with a tendency to use violent language. Six avoidance criteria were used to analyze

individual, student samples. Avoidance tendencies are measured through attitude surveys and the token assignment process in Chapter Four. The language choices that individuals make are compared to violent and non-violent language samples provided and described by NVC founder Marshal Rosenberg. In contrast to NVC model language used to establish discourse markers related to negotiation exchange processes, workshop participants' language samples are compared using the Rosenberg-NVC texts which provide a basis for comparative analysis.

The attitude surveys based on Hofstede (1980) present six selected categories : uncertainty avoidance, conflict avoidance, assertiveness avoidance, criticism avoidance, anger avoidance, and cross-cultural difference avoidance.

The final student performances for the workshop sessions covered these same six areas of avoidance as well. Participant teams drew from a bowl in which cross-cultural conflict situations were described. With a partner they performed the role plays they collaboratively created based on the written prompts. Over the course of the workshops, language samples show a decrease in culturally coded language and an increase in CCCR, NVC discourse. Early on, avoidance tendencies demonstrate an affirmative or negative correspondence to all six CCCR traits selected for the study. In addition, avoidance tendencies relate to processes directly to cultural and social context and expectations. For example, imperative mood is noticed in power language and modalized conditionals frequent the NVC request language. These grammatical choices which are discreet factors help define the threshold of what Marshal Rosenberg's definitions of "violent" and "non-violent" languages. Specific choices show that an individual has or has not chosen to engage *affect*. These instances show a range of avoidance and engagement per NVC discourse process or culturally affected discourse (CAD) process. The base sample NVC criteria invoked in token assignment make it possible to compare the study participants' language

choices and those described by Rosenberg as non-violent or "other". Each of these traits surveyed associated with avoidance, (1) uncertainty, (2) conflict, (3) assertiveness, (4) criticism, (5) anger, and (6) cross-cultural differences are approached this study directly through survey questions and implicitly via lessons which focus attention on how to overcome avoidance by engaging *affect*. The grammatical markers found in the live language samples used in tracking register traits with SFG and Appraisal Theory.

The relationship between register and genre may be thought of as the relationship between specific instances of choices of communication within the corresponding, larger communication environment. For example, a nurse's choice to greet a patient in Thai or English would be an instance of interpersonal register. In genre terms, both choices, Thai or English would be an interpersonal language choice. Within each choice of language comes a set of coded messages relevant to each language and culture. Communication environments give rise to different sub-genres characterized by grammatical and semantic features recognizable as desirable among speakers in that environment. Herein resides the challenge of cross-cultural communication. L2 English speakers like the Thai Doctors. and nurses who participated in this study--may (1) translate culturally coded discourse tendencies from L1 to L2 (2) may adapt strategies toward L2 –but may over-generalize etc (3) may master L2 or (4) may use an alternative interpersonal communication strategy like NVC. Choices one and two, transference and adaptation together may well describe many L2 learners' processes of language learning while perfect mastery remains illusive to most and may not be the goal of many L2 learners. This study focuses on choice four, specifically an interpersonal, compassion-based model for cross-cultural communication.

Genre analysis of single-culture discourse and comparative studies have outlined many

issues which develop. This is the first study to propose and analyze a cross-cultural discourse genre. As is often the case, it was undertaken because the need for a cross-cultural discourse genre in Thai medical tourism has been greatly needed and the problems in communication closely studied.

Pre-surveys, interviews and research during the earliest phases of the study showed a high frequency of the six traits that relate directly to communication avoidance tendencies noted in Thai medical settings. At this studies inception, it was noted that *affect* and culturally determined barriers to communication were acute in Thai medical tourism. The discourse process by which learners acquire a new, cross-cultural discourse approach is the focus of this research. The study analyzes and tracks NVC and CAD features as a means for measuring learner processes as they attempt to develop cross cultural conflict resolution (CCCR) skills.

1.4   SCOPE OF THE STUDY

The researcher focuses on cross-cultural conflict resolution (CCCR) in the Thai medical tourism setting. The study contains a pedagogical aspect (1) in the educational intervention and a discourse analysis aspect (2)in a Critical Discourse Analysis (CDA) of Non-violent Communication (NVC) and intervention participant recorded speech samples.

The educational intervention curriculum and methodology synthesized interpersonal English language skills with soft-skills counseling NVC adapted to a ten-month in-service program for fifteen, Piyavate-hospital, workshop participants. The CDA data gathered during the intervention via recordings of medical staff role-plays is the focus of this dissertation. These weekly role-plays over the phase of the study presented several different types of cross-cultural conflict scenarios.

The scope of NVC texts examined was limited to Marshal Rosenberg's *Non-violent Communication* (2003). Other NVC texts and developments were excluded in preference for the NVC classic text because it has endured and been translated and used internationally. Recent publication by the CNVC and Rosenberg do not have this same history of application and success in cross-cultural settings. From this text, the NVC discourse basics are described. The Critical Discourse Analysis (CDA) of the medical staff recordings, then, benefits from the NVC discourse analysis of this foundation NVC text. A linguistic and semantic analysis of NVC discourse in 4.1 of this study provides a standard for analysis of participant samples.

The research focus on participants' negotiation of cross-cultural conflict situations avails itself of linguistic and semantic systems described in Systemic Functional Grammar (SFG), Appraisal Theory, and the CDA analysis of NVC found in this study. CDA analysis focuses on the following:

The negotiation processes and linguistic and semantic features of NVC as practiced by Marshal Rosenberg or other NVC practitioners quoted by Rosenberg in his publications. The negotiation processes and linguistic and semantic features of NVC and culturally affected discourse (CAD) in texts of recorded speech samples over the phases of the study and post-study. Systemic Functional Grammar (SFG) and Appraisal Theory analysis of culturally encoded discourse features including: Mood and mood elements, modality, and speech functions. These features are key in relating grammar to semantic processes. Appraisal features studied include inter-textual positioning, appreciation, judgment and *affect*.

1.5 OBJECTIVE OF THE STUDY

The objective of this study is two-fold: (1) to develop and test a medical English curriculum which includes soft-skills counseling (NVC) and conflict resolution training and practice, and (2) to study and analyze the participants' genre-acquisition process via critical discourse analysis (CDA) of recorded role-plays.

These recordings over the phases of the study and post study form the data for analysis. The objective of analysis is to describe and analyze analyse changes in discourse skills in cross-cultural conflict resolution over the three phases of the intervention and post-study.

1.6 SIGNIFICANCE OF THE STUDY

There are three areas to consider when weighing the significance of this study. The significance may be measured in terms of potential value to Thai medical tourism, its growth potential via improved communication. Poor communication remains the number one source of mal-practice litigation in the Thai medical tourism industry (Armbrecht 22). Additionally, the need in Thailand for improved, cross-cultural, inter-personal, English-language skills in international hospitals is especially acute now as the ASEAN legislation mandates that all Thai hospitals and staff be bilingual and meet other English language requirements.

The importance of the study may also be valued for its contributions to the understanding of the language of non-violence (NVC). This educational intervention in Thai international medicine taught NVC as an interpersonal genre for second language learners in an international hospital—a new venue for NVC acquisition and application. It is also the first critical discourse analysis of NVC as an interpersonal, cross-cultural, conflict-negotiation form of discourse.

Finally, the significance of the study may be measured in terms of its unique position in critical discourse studies. The serendipity of an NVC practitioner (the researcher) pursuing

research in discourse analysis and English language teaching has resulted in the first critical discourse analysis of NVC as a medical discourse genre. A discourse study in NVC acquisition by non-native speakers of English—for whom English is a second language or L2 relates to L2 interpersonal communicative competencies. Problem solving CCCR and interpersonal negotiation were the focus of this research.

NVC, interpersonal negotiation is a known discourse model and, in this study, a model for cross-cultural conflict negotiation. There is a unique opportunity to view stages of NVC genre acquisition in specific linguistic and semantic terms. This will be the first study not only to use NVC as a template for analysis of learners of NVC, but also in cross-cultural, pragmatics-based discourse studies in terms of an analysis based on linguistic-semantic criteria evident in NVC negotiation process and not assumed or developed theoretically by the researcher. The analytical apparatus is grounded in years of NVC use and practice by Rosenberg and others, establishing it as an interpersonal genre of communication. Thus, NVC provides the negotiation exchange structure model for discourse analysis and genre differentiation. In chapter four, the Grammatically and Semantically Scaled Differential Analysis of Negotiation Exchange Structure In Cross-cultural Conflict Resolution (CCCR) model illustrates this point graphically. The discovery of NVC's capacity to provide a linguistic/semantic, differential model of CDA may comprise this study's most significant contribution in the field.

The discourses of L2 learners may now be viewed from both the culturally encoded discourse genres and from the NVC, educational target genre-- allowing the discourse of L2 learners to be critically evaluated along a continuum between these two known models.

Previously, there has not been an opportunity to have a known discourse genre provide a template for evaluation because sampling of an "ideal" had not been possible in previous

research contexts. In this context, whereby students are actually studying and acquiring the interpersonal discourse pragmatics of NVC provides a unique opportunity to do an objective, cross-disciplinarily-viable linguistic/semantic analysis of L2 genre acquisition. The methodology for differentiating NVC and Culturally Affected Discourse (CAD) takes advantage of a "known" NVC discourse. It provides a template and criteria for differentiating NVC negotiation exchange structure form a culturally affected discourse (CAD).

This critical analysis, for these reasons, is the first of its kind, differentiating NVC and CAD discourse genres in texts over the longitudinal course of study and post study texts. Although many researchers have hoped for and called for a study of pragmatics in genre acquisition through which a reliable base-sample would provide a fair and objective template for analysis, this research may be the first to have such a base sample to work from. The unique semantic and lexical dynamics of each genre studied is helpful in this study of CCCR acquisition. In this cross-cultural, medical tourism setting, and in the context of an educational intervention, the participant discourse moves between the new discourse, NVC, and habitual CAD discourses.

1.7   RESEARCH QUESTIONS

1. What kinds of *affect* avoidance are observable over the course of the intervention in recorded speech samples and in attitude surveys obtained from Thai medical staff members via Likert surveys and recorded role-play performances at three intervals of intervention (L2)?

2. What NVC discourse and CAD discourse features and processes are revealed when each CCCR agent move is analyzed and tallied per phase of the study?

1.8 DISSERTATION ORGANIZATIONAL PLAN

Chapter I: Introduction which consists of Background of the Study, Statement of the Problem, Non-violent Communication as a Medical Discourse Genre, Scope of the Study, Significance of the Study, and Thesis Organization. The comprehensive introduction included educational examples and discussion for readers who are unfamiliar with NVC.

Chapter II: Review of Related Literature which consists of the applicable theories about Systemic Functional Linguistics and Appraisal Theory as they apply to negotiation exchange structure. Aspects reviewed range from Grammar, Functional Grammar, Clause as an Exchange, Interpersonal Meaning, Mood, Mood Elements, Mood types, Context of Situation, to *affect* and use of evaluative discourse elements.

Chapter III: Research Method which consists of Research Design, Data Collection, Text Transcription Methodology, Unit of Analysis, Technique of Data Collection, and Technique of Data analysis, Linguistic Features of NVC as a Genre and Standard for Analysis, Methodology for Differentiating NVC and Culturally Affected Discourse, and Process Tests for Split Category Discourse Tokens.

Chapter IV: Data Analysis, which concerns CDA using SFG and Appraisal Theory include subchapters: (1) Differentiating NVC and Culturally Affected Discourse (2) Phase One (Pre) Intervention texts (3) Phase Three (Post) Intervention Texts (4) Chronological Analysis of NVC Genre Acquisition (all texts).

Chapter Five: Findings and Discussion will survey the analytical process and means for studying NVC and CAD research and the findings of the research. The chronological view of texts demonstrates changes which took place more gradually over the course of the study. Implications on future research and pedagogical applications are discussed.

Conclusion: restates findings and suggestions for further research and considers applications of the differential model of discourse analysis utilized in this research.

Addendum: The last part of this thesis contains appendices, glossary, and references. Appendices One through Three are the role-play transcriptions and token summaries for each text in the study. Appendix four is the audio index for the attached CD of recordings. The bibliography contains the list of the source of the data that the researcher uses in the research, while the appendices contain the additional texts from which data has been compiled. The CD of recorded texts is provided with corresponding indices on the CD as well.

CHAPTER TWO: REVIEW OF RELATED LITERATURE

What is it to use language? We may similarly ask: What is it to be human? Ralph Waldo Emerson, the nineteenth-century scholar, says language comes through humans 'naturally':

> Words are signs of natural facts. [E]very word
>
> which is used to express a moral or intellectual fact, if traced to its root, is
>
> found to be borrowed from some material appearance. We say the heart
>
> to express emotion, the head to denote thought; and thought and emotion
>
> are words borrowed from sensible things, and now appropriated to
>
> spiritual nature. Most of the process by which this transformation is made,
>
> is hidden from us in the remote time when language was framed; but the
>
> same tendency may be daily observed in children (*Nature*, Chapter III: 3).

In Emerson's view of a natural language, language *is* one way that humans *are natural*—as a tree grows leaves, humans adapt and connect to the world and each other using language. When I recall Emerson's connection of language and discourse to 'natural facts' I think about language in its infancy, in our infancies, as those transitional moments of child development, those first steps, talking and teething. That we are the animals who are born helpless and in need of care for survival relates to our basic nature and needs--including our need for language development.

Parents learn "pre-language" from newborns interpreting cries as needs for food, love, or diaper changes. This compassionate communication between parents and infants is of the same sort of discourse culture and intent as Non-violent Communication (NVC). Human parents in human cultures around the world may be witnessed caring for their young intuitively and compassionately. NVC is an interpersonal mode of the same impulse: to reach through the cloud

of *affect* and unknowing to 'get to the bottom" of the *affect* in terms of met and unmet needs. The choice to use NVC is also a choice to involve NVC values in conscious steps. In discourse terms, the choice to use NVC is a choice to reach across affective barriers, be they developmental (the case of the infant) cultural or eccentric. The NVC speaker chooses to engage with the unknown, like that parent would, listening to the needs of the infant.

This intimate communication witnessed between parent and child gives us an inkling of what the NVC process involves—a lot of skilled guessing. NVC training provides pragmatics to "unpack" the discourse contents which are usually left implied in a mono-cultural setting. Information in cross-cultural settings, therefore, is given a grounding or stance outside the specific cultures of individuals. By standing outside the cultures simply as humans with a known set of needs (part of the training), NVC participants make explicit those culturally coded messages, creating a basis for mutual understanding.

In this study, this sort of interpersonal discourse process in NVC discourse meets the culturally affected discourse of the social and cultural settings. Some of the revelations about language development may still be "hidden from us in the remote time when Language was formed" as Emerson says. Yet others may be observed in children and in second language learners. In this study, distinctions between genres of discourse used to adapt to different settings and needs will be examined and tested. Culturally encoded genres and sub-genres like institutional discourses are contrasted with the medical genre use of NVC—the target language of the educational intervention in Thai medical communication (see Chapter One).

In cross-cultural language studies, scholars examine ways language embodies human cultural traits and yet maintains a flexible, creative nature that is adaptable and able to describe new and imaginative experiences. Language, in this case, English, as it is used in contemporary

settings is both conservative/traditional and 'plastic' and changing. One way that it is changing is that it is 'global' and absorbing grammatical and lexical traits from exotic places.

In a world connected across cultures with technology, many in government, public, and private spheres are calling for cross-cultural communication help. Pragmatics for communicating cross-culturally has been a topic of great interest in recent discourse studies as well (Multi-cultural Discourses, March 2011: 1-35). Perhaps nowhere is the need more acutely felt than in Thailand's medical tourism hospitals.

This study's intervention responded to Thai medical tourism needs for cross-cultural conflict resolution (CCCR). The intervention adapted NVC to the Thai medical setting. This chapter continues in 2.1 with a review of Non-violent Communication and Marshal Rosenberg's adaptations of NVC to different needs and settings. Research questions one and two relating to engagement, NVC acquisition and the semantic processes of NVC are reviewed as well.

Subsections 2.2 to 2.4 review the literature which forms the basis of critical analysis for the dissertation: (1) Critical Discourse Analysis (CDA), (2) Systemic Functional Linguistics (SFG) and (3) Appraisal Theory (AT). These sections examine the fundamentals and poignant, recent developments in each of these literatures leading to appraisal analysis of negotiation exchange structure in 2.5 and 2.6. In these two sections the ways these methods and previous research suggest approaches and tools for answering research question two: the NVC discourse and CAD discourse features and processes researched depend on this combination of critical methodologies. When CCCR agent moves are analyzed and tallied per phase of the study, the scaled differentiation of NVC and CAD discourse uses a synthesis of CDA, SFG and AT methodologies in the token assignment process. The literatures applicable to negotiation

exchange analysis are reviewed to connect the literature to the methodology used in this research.

2.1   MARSHAL ROSENBERG AND NON-VIOLENT COMMUNICATION

From the educational aspects of NVC in the intervention to the NVC model of cross-cultural conflict resolution (CCCR) discourse analysis, this study relies most on the work of Doctor Marshal B. Rosenberg, founder and director of educational services for The Center for Nonviolent Communication (www.cnvc.org). In this current research which is focused on adapting NVC discourse to the Thai international medical setting, the purpose is to improve cross-cultural conflict resolution skills in the Thai medical tourism setting. As such this is a new application of NVC although NVC has been used widely in related fields. In the NVC literature, there are examples of medical staff sharing the benefits of NVC in mono-cultural medical communication. On the cross-cultural side, there are many examples of diplomatic, cross-cultural uses of NVC. The medical and cross-cultural aspects of NVC come together in a unique way in this study's NVC adaptation to the Thai medical tourism setting.

NVC has come a long way since its inception and has been applied worldwide in many unique ways. As a child, when Marshal Rosenberg first started asking questions about language and violence, Marshal law and race riots seemed 'a way of life'. Some of his youthful thoughts on the topic of non-violent language would later assist him and others in diplomatic missions in over sixty countries.

Rosenberg, growing up in an inner–city Detroit neighborhood, was confronted daily with racial violence. He came to the personal conclusion that humans by nature would prefer not to have violence—but would like to have their needs met. Wanting to explore the causes of violence and what could be done to reduce violence, he chose to study clinical psychology and

received his Ph.D. in Clinical Psychology from the University of Wisconsin in 1961. In 1966 he was awarded diplomat status in clinical psychology from the American Board of Examiners in Professional Psychology.

Nonviolent Communication training evolved from Rosenberg's desire to find a way of sharing the potential he saw in the peacemaking skills of NVC. The Center for Nonviolent Communication (CNVC) has been at work since its inception in negotiating conflicts—like the conflicts of the civil rights movement in the early 1960's and political conflicts in the Middle East and the Balkans. The social setting when Rosenberg was developing NVC was during the American civil rights era of the 1960's and 1970's. He expresses the social purpose of NVC as helping to meet the universal human need for making peace and ending violent conflicts. Rosenberg has applied NVC diversely mediating between countries with the same compassionate approach he uses with rioting students and college administrators and estranged spouses.

Since the inception of the CNVC, Rosenberg has provided Nonviolent Communication training in 60 countries; Afghanistan, Argentina, Australia, Austria, Azerbaijan, Belgium, Bosnia, Brazil, Burundi, Canada, Colombia, Congo, Croatia, Czech Republic, Denmark, Dominican Republic, the UK, Estonia, Finland, France, Georgia, Germany, Guyana, Hungary, India, Indonesia, Ireland, Israel, Italy, Jamaica, Jordan, Korea, Luxembourg, Malaysia, Malta, Mexico, Moldavia, New Zealand, Netherlands, Nigeria, Norway, Palestine, Poland, Portugal, Romania, Puerto Rico, Russia, Rwanda, Senegal, Sierra Leone, Singapore, Slovenia, South Africa, Sri Lanka, Sweden, Switzerland, Turkey, United States, and Yugoslavia (www. CNVC.org: Our Founder's Biography: May 10, 2011).

In many instances, Rosenberg has worked with educators and health care providers—and

those reports and their usefulness to this study have been referenced in the intervention curriculum. However, Rosenberg's main focus has been in areas of social and political negotiation--with lawyers, military officers, prisoners, police and prison officials, clergy, government officials, and individual families. He has also been active in war-torn areas and economically disadvantaged countries, offering NVC training to resolve of differences.

At the heart of Rosenberg's training process and literature is the needs negotiation process—a process that reaches semantically across interpersonal differences by relating affective and 'violent' discourse to universal human needs (see **Figure 3**, below).   In this study the focus is on the processes of negotiation in CCCR, so the process of needs negotiation in NVC is essential because it sets a clear benchmark for a scaled analysis whereby negotiation exchange in NVC and CAD can be differentiated. The needs negotiation process and its values and processes form the fundamental difference in negotiation exchange process that differentiates NVC from CAD discourse processes.

Figure 3: NVC Pragmatics: From CAD to Five Interpersonal Exchange Types

NVC Discourse Pragmatics Translate Culturally Affected Discourse Into the Needs Negotiation Process

ARGUMENTS/ADVICE/CRITICISMS/APOLOGIES / BLAME/DEMANDS/SARCASM/POWER DISTANCE/EVALUTIONS/ AFFECT...etc
Translate into
Compassionate Communication, a discourse-genre that "funnels" or reshapes speech from other discourse genres into five, interpersonal exchange types:

1. Observations	2. Feelings	3. Needs	4. Requests	5. Combinations
What have you eaten in the past 24 hours?	Would you describe your feelings when you heard the doctor's news?	When you say you feel unsure, do you need more understanding about the diagnosis, treatment...or	Would you repeat what I said so I am am sure you understood the instructions?	When you say "my family is going to be angry" are you feeling worried that they will react strongly to your news?

In **Figure 3**, the 'funnel' shape represents NVC discourse's scope of coverage with the four

discursive elements of NVC: Observations, Feelings (*Affect*), Needs and Requests. These basic

speech functions occur in many different combinations and sequences based on the speakers'

needs and feelings in the negotiation exchange. This 'funnel' shape points to the key process of

re-phrasing, paraphrasing and translating culturally affected discourse (CAD) into the NVC

process, a communication process that is founded on universal needs and on helping people to

exchange the information necessary to resolve conflicts and differences peacefully.

When a speaker chooses to use NVC, potential for conflict is reduced as culturally coded,

CAD discourse—blaming, power stances, demands—is all re-phrased in terms of NVC

negotiation exchange process. Rather than 'fighting back' or 'giving in' NVC allows a breathing

space for clarification of feelings and needs for both parties. A feature common to NVC

discourse is *hypotactic projection*, complex clauses which include intertextual features. The

NVC agent includes text from the other speaker's move and then adds to it using NVC process

as in "When you say that you feel frustrated with your employer's demands, are you needing

clarity about what he wants exactly?" When the NVC agent attends to 'unpacking' the meanings

involved in expressions of strong *affect*, judgment, and other CAD discourse, the second

speaker's discourse type and force often softens because the NVC process meets some needs

immediately— with respect for universal needs like attention, understanding, and

communication, ever present in the NVC process.

One international NVC trainer with much experience with cross-cultural NVC

applications in the Balkans and other war torn countries attests that "NVC training vastly

strengthens the ability to connect compassionately with oneself and others, as well as to resolve

differences peacefully" (www. CNVC.com\ Rosenberg in Diplomacy). Although this study

applies the NVC process in a new setting and is the first to looks at NVC from a critical discourse view, the flexibility of NVC to move across disciplines and settings is well established.

In critical discourse studies, scholars are interested in finding new, non-culture specific approaches to language study –especially in cross-cultural communication. In the March, 2011 publication of the *Journal of Multicultural Discourses*, Michelle Scollo and Jef Verschueren hotly debate the possibility of developing critical discourse approaches "avoiding culturally biased, unidirectional approaches to language" (Verschueren 2011: 33). Both scholars agree in principle that alternative approaches are possible but have not yet been fully realized in cross-cultural communication studies—largely due to problems of reliable sampling from any given culture's "point of view". NVC allows this study to apply this much sought after alternative approach to culturally biased discourse studies. NVC is an established interpersonal genre used already in a variety of settings for decades and overcomes concerns for fair sampling of a model discourse. Marshal Rosenberg's books and training materials explicitly describe the elements of NVC discourse, namely the four recursive discourse elements of NVC and the semantic grounding in a needs negotiation/universal needs stance. With NVC, negotiation exchange process is seen from an egalitarian stance. Universal human needs give rise to interpersonal discourse, and the CCCR/NVC agents, Thai nurses and doctors in this study can use NVC to inquire beyond judgment and culturally coded discourse into the needs of international patients seeking attention in a cross-culturally challenging medical setting.

The literature of discourse analysis describes the means for analysis of NVC and CAD discourse. Of the two discourse genres studied, (1) NVC comprises a relatively select set of semantic and grammatical choices and as such comprises a known genre, while (2) culturally encoded or affected discourse (CAD) contains mixed and "unknown" discourse features

distinguishable from NVC using SFG and Appraisal, Negotiation frameworks.

Much work has been done culturally and linguistically to describe Thai cultural values that might affect communication (Benedict 1946). Avoidance characteristics which end communication were examined in1.2 'Statement of the Problem'. This study concerns a complex arena for communication in an international setting. For example, the institutional English and the academic, western styled English education participants received also influence discourse choices. Rather than make claims about Thai cultural traits that might have alternative explanations, this study uses broader culturally affected discourse criteria which includes all cultural and institutional influences. From the analysis, culturally affected discourse including all these influences is clearly and definitively differentiated as CAD or NVC/CCCR. Therefore, in reviewing literature, the work done that aids in this process of genre differentiation is examined.

2.2 THAI CULTURE AND CONFLICT RESOLUTION: CULTURE IN CONTEXT

Thailand through its history and experience of things foreign has a unique position in South East Asia as it faces globalization and cross-cultural issues. Unlike neighboring Cambodia, Laos and Viet Nam, for example, Thailand has retained its sovereignty when faced with colonial and imperial ambitions from abroad. For the foreign language teacher, this means that the Thai language as the national language of Thailand maintains high status, and students rarely use other, 'global' languages like English or French in every- day life. As a result, there is a powerful influence of Thai culture and language on English language instruction in Thailand.

The immediate global need Thailand faces for English education is not as English as a language of western origins and values but as the chosen language of communication

for the ten *Asian,* ASEAN (Association of South East Asian Nations) member countries.
The international communication needs invoked in the ASEAN charter are between
Asian people using English as a common language of communication. Therefore, the
pedagogical focus in Thailand can be squarely on 'global English'. Negotiation in
English across cultures is of particular interest both in the target setting of this research,
international hospitals in Thailand and in Thai education in general as it reforms to meet
ASEAN requirements.

Cultural dynamics in the Thai or other foreign language classroom include the
ways learners and teachers negotiate verbal and non-verbal meanings. Over time, the
class 'has a story' and a shared experience. Through the formation of solidarity and
shared context, the class forms an identity of its own. This need for shared context is
often expressed by teachers in terms of the need for integration of cultural instruction
with language instruction, "[G]iven that we [teachers]want to teach language in such a
way that learners are initiated into its social and cultural meanings" (Kramsch: 2009:
19). However, Kramsch counters that while culture includes 'facts and meanings', it also
contains a dynamic process of feedback between the meanings, the facts, and the fields of
meaning 'being negotiated'. The dialectical process of creating 'a new culture' is a
dynamic element in the ELT teaching/learning context (2009:21). Cultural dimensions
include many views: of students, the teacher (and ostensibly the culture of the target
language of instruction), the educational institution, the host country, and individual
learners (Kramsch 2009: 10). All of these agents affect the ELT context. The combined
effort toward negotiating meaning in these contexts is a dynamic process beyond the facts
of cultures or even cultural meanings. Kramsch argues that these dynamic elements rather

than creating disorder combine and create a 'new' conglomerate culture which might remake or reinvent itself over time (2009: 9).

The explicit appearance of the class's new cultural identity appears dynamically in the ways meanings are negotiated. Kramsch says that the dialectic between culture and language creates 'a cross-cultural personality' (2009: 9). At the heart of Kramsch's argument is the goal that each learner develops 'a cross-cultural personality'. It is not actually the target language and culture which is the pedagogical goal of the language classroom, but it is the acquisition of a cross-cultural personality which helps students to acquire the skills they need to adapt to and contribute in numerous cross-cultural settings.

In this process whereby learners in a cross-cultural educational setting acquire 'a third culture', each class member including the instructor contributes and maintains a unique *and* shared cultural identity. This identity is negotiated in ways that include traditional Thai cultural values. To establish a foundation for this ELT context in Thailand, a review of some essential traditional Thai cultural/linguistic values follows. Then, reviews of two modern Thai issues will illustrate how Thai values are reacting in light of globalization. They are: (1) Thai values as Thailand negotiates ASEAN mandated education reform, and (2) Thai values as Thailand faces globalization in legal reforms.

Thai culture plays a significant role in the identity of the ELT class. Traditional Thai values within Thailand historically play a very strong role in modern Thailand, affecting the ways Thai people view themselves and others. Focus in this partial description of Thai culture is on *"khon thai"* or Thai people as reflected in the Thai language.

Mai-pen-rai' reflects Thai people's attitude towards themselves, the people they

come into contact with and the world around them. It can be approximately translated as 'It does not really matter.' or 'It is not a problem'. Almost everybody and everything is acceptable to the Thais. Objections and conflicts are to be avoided at all cost. Thai people are known for their tolerance and compromising nature. This cultural trait can perhaps be traced back to the linguistic experience of the Thai people.

Thai culturally is a sub group in the language community in which the various languages of the *Tai-Kadai* family are spoken (Mulder 1996:11). The Tai-Kadai speakers live in an area which stretches east-west from the Southern coast of China to Assam in the North of India and north-south from Yunnan and Kwangxi in the South of China to the Indonesian Archipelago. When Tai-kadai speakers from different groups meet and start to communicate in their own languages, they can reach a certain degree of mutual intelligibility, especially at the lexical level. It does not take long after that for these Tai-Kadai speakers to feel a sense of solidarity or even kinship. The linguistic difference does not seem to hinder their desire and willingness to communicate and relate to one another. The same linguistic diversity also exists at the dialectal level.

Thai people speak Thai, but they do not all speak the same dialect. The dialect of choice for mass media is the Bangkok dialect, considered the standard dialect. Four main dialects are recognized, the *'khammuang'* or Northern dialect, the *'lao'* or Northeastern dialect, the *'tai'* or Southern dialect, and the *'klang'* or Central dialect. Speakers of these regional dialects are usually bi- or multi-dialectal. The regional dialect serves communication needs in the home domain, which in many cases means an entire village or group of villages. The standard dialect serves as a means of keeping in touch and catching up with the mainstream of society for these regional dialect speakers. Peansiri

Vongvipanond, a Thai sociologist, says of the Bangkok dialect that it "is a well accepted social fact that one will speak only the Bangkok dialect if one is born in Bangkok and one will be bi- or multi- dialectal if one is born and raised outside of Bangkok. No social stigma is attached to any of these dialects" (1994:2).

Linguistic diversity in Thailand goes little beyond different dialects of Thai. Fewer and fewer foreign languages are spoken in Thai families. Chinese is spoken among some descendants of Chinese immigrants. Malay is spoken in Moslem communities in the Southern provinces adjoining Malaysia. Mono-lingualism is enforced through the mass media and the education system. Both Malay and Chinese are spoken less and less. This is also a consequence of intermarriage among the various ethnic groups, which has been practiced in Thailand since time immemorial (Vongvipanond 1994: 3).

Within the Thai language foreign words are sometimes assimilated. Foreigners of western origin are known as 'farang' a Thai rendering from French. Modern internet words like 'facebook' pronounced in Thai with an accent that collapses the 's' sound. Visitors, media and the internet have left a substantial number of traces in the Thai lexicon though some loanwords are more visible than others. Pali and Sanskrit loans are evidence of the impact of Buddhism and the teaching of Brahmin experts of the royal court in the old days (Klausner 1993: 8). Chinese loans are usually discernible only to trained eyes due to the very short linguistic distance between Thai and Chinese and inter-language borrowing. Among earlier loanwords, there are traces of words borrowed from Persian, Portuguese, and French, the languages spoken by merchants and mercenaries who came to the kingdom during the fourteenth and the eighteenth centuries. English loanwords present an interesting case of how the Thais manage differentiate spoken and

written discourse. It is quite acceptable for a Thai to use English words in speech, but it is "frowned upon in the written language, which can remain as a permanent record. It is a task which is not taken lightly by Thai academic and professional groups and in particular the Royal Institute to coin new Thai words for the new imported concepts" (Vongvipanond 1994: 3). Many words are proposed by different groups for the same concept. The conflict is resolved by allowing the words to compete in the linguistic market. The winner is awarded a permanent place in the lexicon (Vongvipanond 1994: 3).

The 'mai-pen-rai' value that makes the Thais easy- going and compromising is reflected in social interaction, religion and politics. Interpersonal conflicts do not lead to an open confrontation unless one is ready to take the risk of losing a relationship (Vongvipanond 1994: 6). Religious and ethnic conflicts are very difficult for the Thais to comprehend. It is very common to find a Buddhist family with Moslem and Christian in-laws as well as Chinese and American or European in-laws, the members of which are more than happy to attend all the various religious festivals celebrated by any of the members of the family. Family values are extremely strong and family connections in Thai are referred to as 'Yaat'. 'Yaat' is a word Thais use to refer to anybody who is, closely as well as remotely, related to them by blood, by marriage or just by association. A close English equivalent is the word 'relatives.'

Thai people are often seen as 'river people' living for generations on river plains. Land used to be common property of those who live in the same *'baan'* which used to mean "village" but has come to mean "house" in the present-day vocabulary (Vongvipanond 1994: 3). All who lived in the same *baan* shared the same resources for

their livelihood and all felt related whether or not they followed the common practice of marrying someone in the same village. Children were taught to regard all who were older as aunts, uncles or grandparents. When a newcomer joined the village, they became a new "yaat." Even visitors could be granted a *'yaat'* status if they wished to be assimilated into the group (Vongvipanond 1994: 4).

The time of common land came to an end with the establishment of kingdoms. The *'sakdina'* system of the Ayuthya kingdom, which started in the thirteenth century, granted land ownership to princes, noblemen and soldiers (Mulder 1996: 45). Common people were able to remain to farm the land but the male adults had to spend time every year working for noblemen or the soldiers.

The common land tradition has been lost and the word 'baan' has come to mean only a house instead of a village but the "yaat" system remains even today. Kinship terms are still used as terms of address as well as personal pronouns.

When strangers meet, they will use the title "khun" until a relationship develops, and then kinship terms can be used. Age or seniority determines the choice of kinship term (Mulder 1996:28). It is interesting to note; however, that kinship terms on the maternal side are more preferable, perhaps because people feel closer to their mother than their father. Once kinship terms are adopted, both parties know that the relationship has reached a satisfactory level. To keep a distance is to ignore, explicitly or implicitly, the other party's attempt to use kinship terms and to maintain the use of the title "khun".

This kinship system is extended also to include newcomers and strangers. It is still common in rural villages, though no longer in Bangkok and other big cities, to treat even a stranger like a visiting relative. A stranger who arrives in the village usually uses

kinship terms when he approaches the villagers for help (Vongvipanond 1994: 3). The use of the terms automatically makes him a relative of all the members of the family which takes care of him, which means almost everybody in that village.

The word for 'pupil, student, trainee, apprentice and disciple', is *'luuk sit'* (lit. learning child). A teacher is regarded as having the same status and obligation as a parent. This may be a vestige of a tradition in those days when schools were not in existence and those who sought education or training had to live in the home of the teachers. No tuition was asked for but the learners had to help around the house as if they had been one of the younger 'yaat'. The Thai expression 'thii tam thii soong' literally means 'high place and low place.' Almost everything in the Thais' perception is situated in a hierarchical system. People can be 'high' or 'low' according to their age, family background, occupation or professional rank and whether they are Buddhist monks or clergymen in other religions. A Buddhist monk is treated respectfully even by the king. Older people are usually honored and respected. People of the same age and social status also show respect for one another with the use of the title 'khun', as mentioned earlier. 'Khun' can be literally translated as 'Your goodness'. Among good friends the title becomes optional. The establishing of hierarchical relationships is highly articulated in Thai culture.

The social power structure concept of 'thii tam thii soong' has ample linguistic representaion in the Thai pronominal system (Vongvipanond: 1994: 5). The choice of pronoun reveals the sex of the speaker, where the speaker places himself and his addressee in the hierarchical social system, his opinion about the degree of distance or intimacy in their relationship, and his evaluation of the speech situation. The choice of

pronoun can also be manipulated to reflect the dynamism in interpersonal communication exchange. When a fifteen years old young lady meets a sixty years old man for the first time, she may use 'dichan' as first person pronoun and 'than' as second person pronoun. After an initial conversation during which both agents will try to establish a relationship:

one may switch to 'noo' (lit. mouse) for herself and 'khun lung' (lit. uncle) for her conversation partner. If the relationship should take an unwanted turn, she may switch to 'dichan' or even 'chan' for 'I' to indicate her desire to keep a distance. If she is angry, the choice can be 'chan' for her and 'kae' for him. If she decides that she needs to be rude to discontinue the relationship, she may even go further as to use 'koo' and 'myng', at which time the rift is almost irreparable (Vongvipanond 1994: 4).

This 'thii tam thii soong' concept also demonstrates itself in the honorific system of the Thai language (Mulder 1996: 23). Vocabulary used in relation to the royalty requires an extra effort and is learned only by those who have to work with the king and queen and the royal family. Other officials and common people have a pseudo honorific system also. A highly formal speech style requires vocabulary which is 'penthaangkaan' (lit. official) and 'phairoh' (lit. pleasant) and the absence of final particles for expressing politeness and courtesy on the part of the speaker (Vongvipanond 1994: 7). The hierarchies of society are represented carefully in the Thai expressions of 'thii tam thii soong'. References to the parts of the body also contain the idea of hierarchical values.

Body parts are also assigned "thii tam" (lit. low place) and "thii soong" (lit. high place). Head and face are considered higher than other parts of the body. A study of

metaphor in Thai reveals that there are more terms and more metaphorical expressions

for head and face than for other body parts (Vongvipanond: 1994: 5). This may perhaps

explain why Thai people do not like to their heads touched. Conversely, Thais feel

offended when a person points with the foot, because of the low status associated with

feet.

This concept of hierarchy is also expressed in nonverbal language. If one has to

walk past somebody older or higher in rank, one needs to lower one's head and bow

slightly, especially when that person is sitting or standing in a lower place. This is a

gestural expression of one's respect for others. Thai people seem to put more emphasis on

their heart than their head. There are more compound words with 'jai' than with 'hua'.

Three of these "jai" compounds tell a great deal about interpersonal relationships of

the Thais. These are

ow jai   = to please--lit. to take a person's heart into consideration

khat jai = to displease--lit. to block a person's heart

grengjai = to give high priority to how another person feels or thinks about

something--to respect a person's heart (Vongvipanond 1994: 7)

The Thais are taught from an early age to "greng jai" other people, which means they have

to be careful with what they say and what they do so that they will not offend, upset or displease

others. As a consequence, Thai people usually try their best not to "khat jai" others. The eventual

outcome is that most Thais seem to be very good at "ow jai" or pleasing others. What this means

is that conflicts are to be avoided at all cost so that harmony can be maintained and the way to do

it is to be attentive to those one comes into contact with (Mulder 1996:32). This confirms the

'mai pen rai' nature of the Thai as demonstrated in their linguistic experience as discussed earlier. An interpersonal conflict is resolved usually with an intervention of an arbitrator, usually more senior in age, social status or rank and respected by both parties (Vongvipanond 1994: 3).

Thais name an abstract or spiritual part of their body 'kwan'. 'Kwan' is where one's morale and psychological health resides. An age old practice which is still found in rural village is the 'suu kwan' or 'riak kwan' ritual (Vongvipanond 1994: 3) . This is performed to welcome visitors as well as returnees. A piece of cotton string will be tied around a person's wrist by the elders, regarded as parents or grandparents by all in the community, who will be calling his 'kwan', which wondered away during the trip, to come back to his body. When a person sleeps, his 'kwan', a wonderer by nature, will leave for a walk around the world outside. It will return when the person wakes up. Thais are then taught to wake a sleeping person up as gently as possible (Vongvipanond 1994: 3).

Originally, Thais were animists who believed that all the elements in nature are governed by supernatural beings called 'phii' and 'jao' (Mulder 1996: 28). The two terms were used interchangeably, which might suggest the different aspects of the supernatural beings in nature. "Jao" implies a control over natural phenomena while "phii" implies the human quality of these supernatural beings. 'Jao' needs to be paid respect or homage to. 'Phii'; however, seems to have a closer relationship with humans. 'Phii' can be offended or pleased by what people do. In the old days, a wrong doing was described as an offense against the supernatural beings, 'phit phii'. Success in one's attempt to do something or an unanticipated good fortune were considered a consequence of "wai dii plee thook", the correct pacification of the "phii". Animism is not an active component in the Thais' religious belief nowadays and the term "phii" has come to mean ghosts or bad spirits. 'Superstitions' may be headed by some individuals, but usually when terms

like 'phii baan' (lit. house 'phii') or 'phii paa' (lit. forest 'phii') are used, most people associate such references to 'remote village' or traditional practices (Mulder 1996: 32).

The belief in gods and goddesses provides a different explanation for the ups and downs in life. The word 'chata' and 'phromlikhit' are used, which imply fatalism and predestination. A person's life is pre-programmed by 'phrom' or Lord Brahman in Hinduism. The ups are considered 'choke' or good fortune (Mulder 1996: 28). The downs are 'khroe' or bad fortune. Both imply a human inability to manage life independently. As a consequence, the fortune-telling profession has developed and has become an important institution in Thai society. Consulting a psychiatrist is a stigma but visiting a fortune teller is considered normal if not wise by many Thais. The Thai word for a fortune teller is 'maw doo'. It means a doctor of fate and fortune.

Buddhism, imported from India shortly after Hinduism came pre-packaged with a rationale for integrating the two faiths. With an explanation that Lord Buddha is a reincarnation of one of the Three Holy Lords in Hinduism, an unusual and peaceful co-existence between the two faiths resulted in India and then was transported to Thailand also (Mulder 1996:54). According to Buddhism, there is also predestination. A person's life is predestined not by the Lord Brahman but by his own 'karma' or deed in the previous life. However, life is not all predestination because it is also subject to the 'karma' that a person performs in his life. There are two types of 'karma': the good karma or 'bun' and the bad 'karma' or 'baap'. 'Bun' can guarantee a happy and satisfactory life now and also in the next reincarnation. In many Thai people's thinking, 'bun' is equated with a wealth or an asset. It can be earned and accumulated like money in a bank account. 'Bun' is credit and 'baap' is debt. This perhaps explains a practice among Buddhists called 'tham bun', which means the making of good merit or 'bun'. A person can

'thambun' by offering food to monks, by making a donation of money for the use of a temple, by setting free caged birds, by giving to the poor or by meditating and reciting Buddhists chants. For many, 'bun' and 'baap' can cancel one other (Vongvipanond 1994: 3).

The three 'faiths' still function in Thai society. When a new business opens, the three faiths all play roles. With all of his capital ready, an investor first consults a fortune teller about the prospect of his new venture. If the response is positive, he will ask for advice on the site which would be guarded by a benevolent protector 'thep'. The opening ceremony will be scheduled on the luckiest day by his fortune teller. When all three rites are observed, "The investor can feel confident that he will have a successful business with all the auspicious calculation provided to him by his fortune tellers and the merit or 'bun' he makes" (Vongvipanond 1994: 3).

The seriousness of the fates and their roles in Thai world view is somewhat balanced by the role of fun one makes for him or herself in Thai life. The word 'sanuk' means to have a good time, to enjoy oneself and to derive pleasure and joy from something. A slang variant for the word is 'man', which describes the feeling one can get when munching one's favorite food.

It is almost a rule of living for Thai people that whatever they do have to be 'sanuk'. The concept of 'sanuk' goes beyond having of a good laugh or a good time. It is bringing a kind of playfulness into action. It is one of the chief tools the foreign language teacher can use to bring critical thinking skills to a rote learning environment. Games and play meet the Thai need for fun and may at the same time help introduce new skills. A similar concept of 'getting pleasure from whatever one does' is reflected also in the use of the word 'len', which goes beyond 'play'. The word indicates the extent of attention and concentration on an activity. It also implies enjoyment and satisfaction.

With the cultural and linguistic features discussed in this section, it would appear that the Thais are more inclined to play than to work or that they mix work with play. Thai words for concepts such as success, ambition, achievement, development or planning are new compounds, which might indicate that work and achievement are lower in the Thais' priority list (Vongvipanond 1994: 8). Perhaps it is because of their underlying belief that their life is not totally under their control so it is only wise to do good and be good to others. This belief system of Thai people toward the unknowns of life has had a significant impact on modern Thais facing the challenges of globalization in education and in law.

In education, the ASEAN (Association of South East Asian Nations) legislation and other educational reform acts mandating English language education in Thailand comprise an unprecedented challenge for the Thai educational system and a poignant example of how conflict is negotiated culturally. Philip Hallinger, the executive director of the college of management, Mahidol University, Thailand characterizes the impacts of globalization in Thailand this way, "A largely unforeseen consequence …has been a whirlwind of change that threatens to overwhelm social and political institutions (Hallinger 2001: 386). Hallinger notes that globalization challenges in education are especially acute in Thailand because of hierarchical power structures and emphasis on rote learning. He explains the social dynamics of change flowing from administrators saying "do it", and the staff who 'greng jai' their administrators, outwardly agree to the change. Subordinates are not to ask 'why' or other questions about the changes. Questions can help with practical matters of implementation, but are not encouraged. Hallinger says small administrative changes like an attendance paperwork change can be done efficiently in the 'do it' system, but "this approach is insufficient when the innovation involves learning to teach with technology, use cooperative learning, or teach English" (Hallinger 2001: 391).

These three challenging areas in education, technology, cooperative learning, and English education also happen to be aspects of current ASEAN education reform mandates due to be 'fully implemented' by 2015. These mandates, Hallinger argues, will be culturally difficult to implement in Thailand for three reasons: (1) reliance on 'rote learning' persists (2) Thai administrative culture does not foster creative thinking between administrators, teachers and students and (3) the hierarchical distance from ASEAN to actual teachers and students in school in Thailand is so great that many cultural norms and needs around negotiating with authority may not be easily met. For example, Hallinger says that 'kwarm jing jai' or 'sincerity' when it is not perceived may lessen cooperation (2001:395). When Thai administrators receive mandates from ASEAN and pass them on to their constituents, the chance for a lack of sincerity in tone exists. Lack of 'jing jai' is interpreted by Thai staff as a need to perform 'surface compliance' only (Hallinger 2001: 401). In the case of the stated needs for more creative and critical thinking skills, Hallinger adds that other cultural factors like a need for perfection when a task is performed create disincentive for experimentation with new skills. Subtle-seeming cultural factors are having large consequences for Thailand as it faces the challenges of the global marketplace (Bunnag 1997:2).

Thailand's incorporation of global legal values provides a context for discussion of Thai culture in light of globalization and conflict resolution. Globalization has brought to Thailand new tools for fairness and justice via an international-standard legal system with laws and courts comparable to those in western countries. However, in the Thai context, most legal issues are re-contextualized culturally by Thai people.

Research into Thai response to globalization in legal terms is surprising. Court records and subsequent studies and interviews concerning Thai legal issues, "reveal an adaptation to

globalization via legal issues but not in the direction one might have expected" (Engel 2005:5).

In fact, the legal issues are internalized in terms of Buddhist practice. "Buddhist precepts justify

the injured person's decision to refrain from the pursuit of compensation" (Engel 2005: 2010).

The over-whelming evidence shows that Thais do not seek legal compensation but rather

consider the wrong doing from a karma related stance providing a religious rationale for the acts

described in the legal proceedings. "Globalization has pushed legal consciousness in the

direction of religiosity in Thailand" (Engel 2005:200).   When Thai people respond to

globalization, sometimes a resurgence of traditional Thai cultural values occurs as the Thai legal

example shows. In other contexts like English Language Teaching, these cultural values may

play positive roles in forming the 'personality' of the ELT classroom in Thailand.

Academically, in Thailand, 'English' is a foreign language and so Thai students can meet

ELT teachers 'half-way' with their openness and curiosity about things foreign. The culturally

sensitive ELT instructor in Thailand can meet students 'half-way' by incorporating what is

known about Thai culture into lesson plans and teaching methods. For example, rote oriented

warm-ups, though not often used in western ELT classes may meet the Thai students' need for

'something familiar' at the beginning of a course. Drills and rote exercises can quickly review

a set of vocabulary or grammar points. These words and grammar points can foreground more

communicative language activities later in class.

Thai culture embraces the human need for fun and satisfying curiosity. These can be

powerful aids in the Thai ELT setting where 'sanuk' may draw students' attention to a task

otherwise very difficult 'to teach'. One obstacle to keep in mind is the avoidance of a task when

it cannot be done 'perfectly' from a formal, Thai point of view. A game allows for a more

informal atmosphere. Social interactions that are not characteristic of traditional Thai student-

teacher interactions can occur. The personality of the class develops as the teacher models tasks in games that require making mistakes and learning by trial and error. Game and play are bridging methodologies in the Thai setting. As students venture out to make errors with the teacher, together they create a third culture, neither 'Thai' nor 'foreign'. The formation of the solidarity of the group is a great asset in Thai ELT. The new group identity helps the students and teacher work together to explore communication options for cross-cultural understanding.

Thai culture and language play the largest socio-linguistic part of a Thai student's life. Thai culture carries over to the ELT setting in Thailand where English is truly a foreign language, not commonly spoken by Thais. With the choice to agree to the new ASEAN requirements, Thailand has pledged a deeper commitment to English education and the critical thinking skills that can accompany foreign language education. The need for English in Thailand as the chosen language of communication for the ten *Asian,* ASEAN member countries means the pedagogical focus can be on 'global English'. The need for English to be taught as a cross-cultural language for discussing matters multi-culturally is clear. The pedagogical direction for this cross-cultural setting can be the kind Kramsch describes. DShe defines the emerging personality of a class as "[a third direction]to see culture both as facts and meanings, but it sees it as a place to struggle between learners meanings and those of native speakers (Kramsch 1997: 24).

The process of struggling with interpersonal meanings is the focus of this Thai medical communication research. This study's intervention and research into cross-cultural conflict resolution skills proposes and tests elements of English communication that can be used cross-culturally. In this very specific, ASEAN ELT context, knowledge of Thai culture's presence and potential pedagogically was essential. In this study's intervention, for example, Thai cultural

features like the need for play and fun and familiarity with drills and rote learning helped shape

the lessons which included a combination of 'the new' through games and 'the known' through

drills. Classes began with the known and added features leading up to creative expression and

application. Consider the role-plays recorded for data in this study.

The participants performed role-plays after old and new material was reviewed and

addressed. Performances of role-plays themselves combined the 'new' with the 'known'. The

students were creating new dialogues but about new topics without the instructor's help and with

a limited amount of time. In this way, new skills were set in a familiar context, here, 'the class

presentation' format. This allows Thai students to relate new material and skills to known

contexts and procedures.

The recorded performances of participant role-plays from these cross-cultural classes

comprise the data for this research. The literature of Critical Discourse Analysis (CDA) provides

approaches and means for realizing descriptions and analyses of cultural and social factors

present in multi-cultural discourse like the data from this study.

CDA analysis was performed on the following groupings of texts: (a) the interpersonal

dialogues of Marshal Rosenberg and dialogues quoted by Marshal Rosenberg in his seminal

work *Non-violent Communication* (2003) (b) pre and post texts from Piyavate hospital medical

staff (c) longitudinal analysis of texts (d) CAD features from phases two and three. The

discourse of NVC is described in detail in chapter three, methodology, but the applicable

literatures in semantic and linguistic theories, principles and processes which have helped

construct the model for analysis in this study are described in the following sub-sections

2.3   CRITICAL DISCOURSE ANALYSIS (CDA)

Researchers using critical discourse analysis (CDA) have found within CDA a wealth of approaches and tools for addressing many text-analysis needs. In the history of CDA, the relationship between texts and social forces has been most pronounced. Authors like Fairclough in *Language and Power* (1989) use CDA to uncover deception and power-concentrating language in the media and society. To the purpose of this study, the roots of CDA --and SFG and Appraisal Theory for that matter—which lie in interpersonal communication and language acquisition will be the focus.

Tools for analyzing interpersonal communication processes and genre acquisition have been developed for different settings and purposes. In examining these three—in critical discourse analysis (CDA), in systemic functional grammar (SFG) and in Appraisal Theory, I emphasize points of relevance to this study's focus on cross-cultural conflict resolution (CCCR). While methodologies for analysis of interpersonal/conflict-negotiation texts are discussed in Chapter Three, here the theoretical and linguistic foundation for those methodologies places this study and its concerns within the larger critical context.

Culturally affected discourse (CAD) traits have been examined thoroughly in the literature of CDA. One thread of interest derives from institutional needs for better CCCR in business, medicine, hospitality, and other cross-cultural settings. Many scholars have identified culturally specific modes of discourse for particular settings within the target culture. Genre differences within social/linguistic interactions have been studied and analyzed semantically and linguistically as well. Such information is certainly useful for speakers within the target culture. Data on cultural differences in CCCR research provide cultural and social dimensions of the problems in conflict resolution. However, CCCR/ NVC discourse pragmatics have not been

studied. In the power-sharing values of NVC, power jointly held leads to negotiations based on universal needs. In NVC, cross-cultural pragmatics, NVC discourse mixes public and private discourse practices and has as its base a values system of shared universal needs and power. Its goal is to negotiate needs in a power sharing exchange or process. As such, this CDA study includes a wide range of social power dynamics per CDA's traditional concern with social power and this new element of NVC pragmatics which define an egalitarian, needs-negotiation process. Linguistically and semantically, NVC negotiation discourse fundamentally differs in its processes and values from culturally or socially coded discourse. That being said, the same analytical tools for studying CAD are applicable to NVC discourse. Although this literature review may not include NVC discourse because it has not been studied yet, the methods effective in describing NVC and other discourse processes, semantics and grammars are reviewed.

This following review of literature concerns methods for studying and describing code misunderstandings in cross-cultural communication settings as prelude to looking at codes and code shifts in the Thai medical tourism setting.

The cultural codes beneath discourse choices may be easily misread in the CCCR context. For example, some institutional and educational factors may produce false discourse analysis results because L2 learners are already exposed to some English language and cultural features from other contexts. The nature of these cultural codes and accurate means for describing them are necessary for analytical understanding of the differences between cultural pragmatics and expectations and the values and discourse pragmatics of NVC. In this study, for example, a text might deal with known social practices in the speaker's first language (L1) that do not share the same meaning in the new L2 context. However, the speaker may use a value he or she perceives to be a part of the target language culture. Therefore, in this study emphasis is

placed on the importance of these cultural and social codes in cross-cultural discourse and how they relate to mixed CAD categories in contrast with the target NVC discourse.

In CDA literature, several sources reveal helpful criteria for exploring the relationship between language and social codes evident in texts. These research approaches have within them similar terms that can be easily synthesized. They appear as the following: discourse, genre and text in Kress (1985); discourse, orders of discourse, discursive practice and genre in Fairclough 1989, 1992, 1995); and Discourse (with a capital D) discourse and text in Gee, (1996). In this chapter, we will examine the dynamics of these foundation works on discourse, genre and text— first from the point of view of CDA, then from the views of systemic functional grammar (SFG) and Appraisal Theory.

In CDA, the literature explores the complexities involved in stance and power relations. Power and how power is organized, maintained and shared is of great concern in CCCR. Unequal distribution of power and coercion lead to conflicts. In the following section, the essentials of CDA and its relevant tools for understanding dimensions of power and how those dimensions have been studied in CDA is examined. In addition, context's role in cross-cultural communication is reviewed.

In the literature of critical discourse analysis (CDA), the complex arena of CDA--the public sphere and the social practices of people engaged in dialogue in respective societies-- poses several research challenges for cross-cultural communication (Wodak et al. 1990, Chouliaraki & Fairclough 1999). The many layered public spheres in an international setting, a medical tourism hospital, for example, is not a simple public/ private dichotomy, but a mix of many culturally and socially encoded discourses.

These public spheres influence and reflect social practices, which means that while they

have elements of individual choice, they are also involved with public policy, discourse, social action, and institutional action 'getting things done' within the norms of that society or sector's social expectations in contrast to only talking about things (Chouliaraki & Fairclough 1999). The specific focus of NVC discourse in Thai hospitals is interpersonal, cross-cultural discourse and as such the CDA discourse sources for describing cultural and social points of view are of particular interest.

Central concerns of CDA are the relationship between language, power and ideology (Fairclough 1989), the relationship between discourse, social identity and social change (Fairclough 1992) and the role of discourse in producing and maintaining inequality (van Dijk 1993, 1996, Wodak 1996, 1997). Accordingly, text analysis is only one aspect of discourse analysis in addition to the analysis of discursive practice and social practice (Fairclough 1989, 1992). This study in Thai medical tourism and compassionate communication assimilates these goals of CDA: to analyze the grammatical and lexical choices, then to examine discursive and social practices evident in the samples. Some research in this area uses criteria based on 'the rightness or wrongness' or 'truthfulness' of how power is being communicated and shared in society. Some public texts demonstrate levels of deception and manipulation CDA has aided in exposing. The general parameters of CDA described in the next section have also been very helpful in setting up a study of interpersonal medical communication. Finally, the SFL and Appraisal models, their approaches and how they relate to the differential discourse analysis of this study will be discussed in section 2.6.

CDA historically takes a socio-political stance with a view towards intervention into certain social practices in order to achieve change. From Fairclough to the present, this stance of CDA toward interventions into social change has been a defining issue among CDA theorists—

in essence stratifying them in terms of the degree to which they agree or disagree with this stance. The call for an objective and cross-disciplinary CDA with an 'assumption free' methodology' has also been hotly debated (Van Dilk NIDA 2011). A new 'middle ground' is appearing in CDA whereby a critique of existing power structures in institutions and their misuses and abuses through means of "disorders of discourse" (Wodak 1996: 15) may be pursued but by means of new methodologies. For example, this study takes a genre view of the discourse rather than solely a semantic or grammatical view of discourse so that social and cultural context may be related to grammatical and semantic processes.

CDA, an evaluative, highly specialized academic discourse that grew from its roots in social evaluation is now being used in clinical studies and in analysis of phenomena from internet chat discourse to political campaign discourse. With its historically relevant focus on dominance relations by institutions and elite groups as they are enacted, legitimated and reproduced in texts, the question which CDA asks is this: "What structures, strategies or other properties of text, talk, verbal interaction or communicative events play a role in these modes of reproduction?" (Van Dijk NIDA 2011). Van Dijk's question points to a movement in CDA, based on a need for more diversely applicable modes of CDA like genre analysis which may include all the factors which Dijk outlines.

In the thick of this current mix of issues in CDA, this research investigates the traditional role of power in social discourse for which there is considerable research, *and* this new branch of CDA wherein researchers are constructing new CDA methodologies appropriate to their specific research/needs and settings. In this review of literature, we consider CDA research and resources for examining culturally affected discourses (CAD) as a means for differentiating it from NVC discourse which derives its engagement strategies from a non-hierarchical ideology

and stance. In essence NVC discourse is the inverse and opposite of Fairclough's 'power language' he describes in *Language and Power* (1989). NVC, for example, replaces imperative and coercive discourse with request language which focuses on available choices.

In culturally affected discourse (CAD), researchers have defined discourse markers which show a potential power producing and maintaining move along two major dimensions: the enactment of dominance in texts in specific contexts through control of access to communicative events and genres (for example through the restricted access of lay people to the oral and written genres of legal or medical discourses) and more indirectly through influence of discourse and dominant speakers on the minds of others (for example in the media) (van Dijk NIDA 2011). Power, in CDA, is related to discourse and access to discourse. The power and dominance of certain groups is measured by their control of discourse and access to discourse. Thus there is a parallelism between social power and discourse access: The more discourse genres, contexts, participants, audiences, scope and text characteristics they (may) actively control or influence, the more powerful social groups, institutions or elites are. Similarly, lack of power is also measured by its lack of active or controlled access to discourse (Van Dijk NIDA 2011).

Socially, power may be arranged in many ways, from unilateral exercise of power to delegation of power. In NVC, power derives from human needs and the drive to meet those needs personally and socially. In NVC, learners eventually look for correspondence between social and personal needs as a basis for negotiation. In CDA terms, power can be produced jointly and, as a consequence, be perceived as natural, an alternative to hierarchical power arrangements and practices.

CDA research into power in societies has described many culture laden, power dimensions of social hierarchies. Cultural/social research reveals a blending of ways that

grammars and vocabularies demonstrate cultural traits (and visa versa)— cornerstone issues of modern socio-linguistics . Consider the Sapir Whorf hypothesis itself and its the selation of lexical features to cultural values—the famous thirteen words Inuit have for kinds of snow being a prime example. The subsequent flood of research aimed at supporting or disproving aspects of it. Social discourses, laden with culturally 'packaged' choices, respond to the notion that discourse is more than language. Discourse includes background knowledge and assumptions made by participants during social interactions. As a consequence, the linguistic analysis of texts is part of discourse analysis, but discourse analysis is also concerned with the analysis of social practice (Fairclough 1989, 1992, 1995, Fairclough & Wodak 1997). In this sense, then, CDA takes a rather broad view, and the analysis of texts is one step to gain a better understanding of broader social processes. Gee (1996) argues that moving the focus away from language to other areas of society, values and attitudes not only gives us a better understanding of social processes but leads to a better understanding of language itself. An exchange between the social meanings outside texts and the texts themselves leads to better understanding of both.

The main themes that run through CDA are the interconnectedness of language and social practice, the interconnectedness of discourse and institutions, the construction of subject positions through discourse, and the inter-textual nature of discourse (Kress & Hodge 1979/1993; Kress 1985; Fairclough 1989, 1992, 1995; Gee 1996, Wodak 1996; Fairclough & Wodak 1997; van Dijk 2011; Chouliaraki & Fairclough 1999).

While offering us the "unifying idea" that text is in some ways inseparable from context and by extension, society and culture, these authors are at the same time pointing out a difficulty, therefore, in doing CDA. The text also deals with similarities in needs and connections across cultural divides. Separating what is shared and what is truly unique is a matter of critical

concern in CDA. In CDA, a myriad of discourse approaches aim to find precise tools for depiction of cultural differences but sometimes over-look the similarities—or how similarities give rise to interesting differences. For example, patients from most cultures would need understanding, respect, communication, choice, and many other universal needs. The problem arises when the ways cultures express these needs is so varied. Out of the medical tourism setting, negotiation in interpersonal, cross-cultural terms is of utmost concern and finding similarities in values across cultures--essential.

To look solely at the differences in cultures and values in these cross-culturally challenging situations would be to risk an end to engagement at the threshold of *affect*. Even if we could teach all the cross-cultural differences, what skills would staff have for dealing with differences among differences, or in dealing with emotional issues outside 'cultural knowledge' but part of our shared humanity? NVC is a known discourse model for negotiation in these settings and situations where normal 'insider' cultural conversation routines would be inadequate. NVC uses exchange engagement and response routines in cross-cultural settings. The combination of this CDA research into CAD and this study's new apparatus for parallel and contrastive analysis, the NVC values and CDA values may be clearly differentiated using the combined resources of CDA, SFG and Appraisal Theory.

To differentiate between discourses and even genres when the whole is immersed in the subtle intricacies of conscious and unconscious cultural and social coding is challenging. The research methodology of this study, described in chapter three, presents a method, for a specific discourse usage that may be differentiated in negotiation exchange structure as NVC or CAD.

In the following section, we will underscore the research that has identified and presented us with this key issue: to what extent is any text "individual expression" and to what extent is it

a product of social and cultural forces? Alternatively, is it possible to encounter a text from a view that is devoid of culture—for example—is pure personal expression? Or, will the individual's society and culture always shape and to some extent 'control' or influence the discourse? The key to concretely applying CDA to this question is in the accumulation of data relevant to known semantic and cultural processes in play for a given text. With NVC discourse itself the answer lies in two planes and appears paradoxical. NVC discourse can be pure personal expression at the same time that that expression is understood to relate to universal human needs. In this study we are contrasting interpersonal NVC and interpersonal CAD processes. The ways people inter-act socially differs greatly across cultures and conflicts are processed differently from culture to culture.

One key element and purpose of discourse analysis is to better understand social interaction. For purposes of this study, it is helpful to think in terms of one branch of interaction being interpersonal, the kind you begin to learn at home. The other branch concerns public discourses which might also have inter-personal aspects but are chiefly concerned with CAD expectations. It is in just such a mixed interpersonal and CAD environment that our study investigates--the medical tourism hospital. In such a context, we may define discourse as "the totality of interactions in a certain domain" (Wodak 1996: 13). Medical discourse, then, would be the totality of spoken and written interactions in the medical domain. The term "interaction" seems to imply "linguistic interactions" and this suggests that spoken and written texts together comprise the total discourse as the spoken and written texts in a certain domain (see also Kress 1985). In one text for this study, participants used standard check-up forms and documents in their role-plays (See Appendices 1-3). These documents, though in a secondary role to interpersonal interactions, were often referred to within the spoken texts. However, discourse

goes beyond text, written and spoken, and this broader nature of discourse has been stated

explicitly by Fairclough. He refers to discourse as "the whole process of social interaction of

which a text is just a part" (Fairclough 1989: 24). Two important aspects in Fairclough's model,

in addition to the text as a product, are the processes of text production and interpretation. He

concludes: "Discourse, then, involves social conditions, which can be specified as *social*

conditions of production, and *social conditions of interpretation*." (Fairclough 1989: 25, original

italics)

Fairclough (1992) uses the term "discourse" to emphasize language use as a social

practice rather than an individual practice and points to three important implications of this.

(1)Discourse is a mode of representing reality but also a mode of acting upon the world and

people acting upon each other. (2) Language use as a social practice implies a dialectic

relationship between discourse and social structure: Discourse is a mode of representing reality

but it is also constitutive of reality--that is it constructs reality in meaning. This constructive

nature of discourse, however, is constrained by the social structure at the most general level, and

by institutional structures and relations more specifically. (3) Discourse contributes to the

construction of social subjects as well as to the construction of knowledge and beliefs

(Fairclough 1982: 63-64).

An important point to remember is that the relationship between discourse and social

structure is dialectic not determinative. Language involves choice and is spontaneous and

surprising, so though discourse reflects social reality; it is also one feature in the setting and

should not be viewed myopically as the only source of social reality. Discourse works in

conjunction with other practices which are not discourse, for example economic and political

practices (Fairclough 1992: 65). Many have tried to define discourse in light of context and other

forces at play.

Some say that discourse includes language use, values, beliefs and social positions, and it encompasses group solidarity: how to speak and behave to take on a particular social role that others will recognize (Gee 1996). In other words, discourses are "ways of being in the world, or forms of life which integrate words, acts, values, beliefs, attitudes, and social identities, as well as gestures, glances, body positions and clothes" (Gee 1996: 127). However, while Gee stresses the idea of group membership, he, too rejects a view of discourse as solely deterministic at the expense of the individual playing an active role:

> Another way to look at Discourses is that they are always ways of displaying (through words, values, actions and beliefs) membership in a particular social group or social network, people who associate with each other around a common set of interests, goals and activities. A Discourse, then, is composed of ways of talking, listening (often, too, reading and writing), acting, interacting, believing, valuing, and using tools and objects, in particular settings at specific times, so as to display and recognize a particular social identity. Discourses create 'social positions' (perspectives) from which people are 'invited' ('summoned') to speak, listen, act, read and write, think, feel, believe and value in certain characteristic, historically recognizable ways, combined with their own individual styles and creativity (Gee 1996: 128).

Gee (1996: 132) says discourses involve statements about social relations and the distribution of social goods, who is an insider and what is "normal". This makes them inherently ideological. Because discourses themselves define what is "normal", they are very much resistant to internal criticism and any criticism from within can be rejected as "whistle-blowing". Distribution of power in society also plays a complex role. Not all discourses are associated with the same social status but only control over certain discourses is associated with social status and power (dominant discourses). Furthermore, any discourse puts forward certain values and beliefs at the expense of other discourses. As a result, less powerful discourses and their values and beliefs are marginalized and this can create considerable conflict for the members of less powerful

culturally affected discourses, who may find themselves in conflict with the various elitist discourses which dominate their power structures.

To summarize Fairclough's model: actual discourses are determined by types of discourse and these are determined by orders of discourse. Or, to say it the other way round, orders of discourse are constituted by a number of discourse types, and discourse types are constituted by actual discourses that may be texts derived from speech and/or writing. Moving from discourse to text, texts are the linguistic manifestations of discourses: "If being an instance of social (political, ideological etc.) practice is one dimension of a discursive event, being a text is another" (Fairclough 1992: 71; see also Kress 1985). And because texts as the linguistic manifestations of discourse arise in specific social situations and are constructed for specific purposes, these social situations lead to conventionalized forms of texts, or genres (Kress 1985:20).

However, there does not seem to be a clear dividing line between discourse and genre (Kress 1985, Fairclough 1992, Gee 1996). Kress (1985) argues that due to the social determination of both discourse and genre there are preferred conjunctions of discourses and genres, and conversely, some discourses and genres are incompatible. For example, medical, and media discourse make use of the interview genre. Media discourse also makes use of casual conversation in chat shows. Medical discourse does not allow casual conversation genres between doctor and patient to achieve institutional goals. The interview, (unless the medical staff and patients are friends already) would deal with institutional and medical needs rather than social 'chat'. Conversely, forms and meanings of texts are determined by discourse as well as genre. They are determined by the forms and meanings available to institutions (discourses) and by the forms and meanings arising out of conventionalized social interactions (genres)

(Fairclough 1995). For example, patient- interactions may be viewed as service encounters and at the same time cultural power roles may actually assume more power on the service provider's side than in most service encounters where the 'payer' assumes privilege with regard to power. Genres merge and over-lap with regard to CAD power relations.

In this study of interpersonal negotiation in international medicine, both discourse and genre are concerned with situation. Genre here includes the range of negotiation choices within the situation, and discourse is used to reference the system of semantic and grammatical/lexical choices as set forth in SFG and appraisal framework.

Discourse analysis entails a view of language as social practice, and this practice is associated with and determined by social and institutional structures. One important aspect of discourse, but not the only one, is language — ways of speaking and writing but also listening and reading, from the point of view of a social institution (Kress 1985). From a discourse perspective language use is the use of language to articulate the specific values of individuals and institutions. Meanings made by an individual and by social institutions merge and inter-relate. To what extent are language practices of an individual, not individual and idiosyncratic but linked to an individual's position in institutions? These positions influence what an individual may feel comfortable to say and how (Kress 1985). Discourse is influenced by institutions and institutional practice, but at the same time discourse can be seen as constitutive of institutions. That is, the system of speaking and writing in an institution determines institutional practices: "Institutional practices are inscribed in the system of speaking and writing in that institution" (Wodak 1996:12).

The institutional practices of western style medical systems have influenced the physical layouts of the hospitals in Thai medical tourism. Conversely, the physical layout of the hospital

has, at least to some extent, determined the mode of interaction between the various participants in the hospital (see also Goodrich 88 on the built environment and social organization). In other ways, these same hospitals reflect Thai culture and parts of the environmental and social organization are also distinctly Thai.

The problem arises when we consider that the intricacies of the mixed cultures and social discourses of the medical tourism hospitals in Thailand are closed systems culturally to many medical tourists. The need to reach across the 'in house' culture to those from so many other foreign cultures is a chief part of a medical tourism hospital's mission statement. Yet, a cross-cultural discourse applicable in this challenging setting is more illusive.

Discourse theory and CDA differ from classical rhetoric and interpretation in their views of meaning and the interpretation of meaning as a social process. CDA argues that meaning does not simply exist waiting to be discovered but meaning is socially constructed. If the construction of meaning is a social process, so is interpretation. Interpretation is a dialectic process between properties of the text itself and the interpretive resources people bring to the interpretation process (Fairclough 1995). Furthermore, meanings are not unambiguous but multiple and indeterminate, and texts and their associated subject positions are concerned, on one extreme, with the construction of solidarity, and on the other, with individual expression.

Subject and reading positions are closely interrelated in the sense that both are established through the operation of discourses in texts. They are constructed by discourses because of where readers are situated socially and institutionally. They are also constructed by discourses with respect to a subject's own discursive history. Texts construct ideal readers by providing a certain reading position from which the text appears unproblematic or "natural". This can be achieved, for example, through choice of language features such as inclusive "we" to

make the reader or listener identify with the writer or speaker (Kress 1985, Fairclough 1989, 1992).

There is no clear demarcation in the construction of reading positions between discourse and genre: in any text the two can be fused (Kress 1985). For example, the interview genre has similar features across a range of discourses — media, medical, legal. These similarities are due to genre. By the same token, there are similarities across a range of genres in a discourse. This study's focus on the discourse of NVC emphasizes how discourse-pragmatics search for connection and similarities in values. The use of these pragmatics provide examples of discourse features that negotiate across discourses and genres—and ultimately across cultures.

The views of a text include 'reading positions' that instruct a reader, in an indirect way, how to read a text, what stance to assume in relation to the text. However, there are more general, long term effects of this. The constantly reiterated demands of a discourse create "sets of statements which describe and prescribe a range of actions, modes of thinking and being, for an individual, compatible with the demands of a discourse" (Kress 1985: 37). As a result, a discourse, its texts, values and assumptions become unproblematic, naturalized. Well, this was certainly the hope in introducing a conflict resolution pragmatics into medical tourism. If traumatic outbursts from patients were received from a 'naturalized' NVC discourse position, the strong *affect* of the patient may be met with compassionate and communicative readiness.

It is important to note that the construction of reading positions and subject positions should not be seen as deterministic but probabilistic--with the reader playing with the pragmatics and language choices of the genre and context (Kress 1985, Fairclough 1989, 1992, Fowler 1996). Rather, scholars postulate a dialectic relationship between social determination on the one hand and creativity on the other hand. Social subjects are constrained to operate within the

subject positions set up in discourse. However, the reading positions constructed in a text can be rejected by a critical reader and alternative positions can be adopted. Furthermore, discourses can be a resource which can be combined in innovative ways and new texts can be assembled out of a person's experience with other texts to meet the demands of new social situations. Such is the medical tourism situation—dynamically changing as the diverse clientele present challenging needs requiring creative discourse options. When a patient cries out in pain demanding attention, the medical staff must try to meet the patient's needs as professionally as possible while at the same time adhering to institutional policy. The expressed goal of NVC discourse is to meet all parties' needs creatively. This 'middle ground' may be made inviting to all parties when solidarity is invoked.

Gee (1996) takes the argument of texts constructing a favored position from which they are to be read one step further and argues that in this sense all texts are about solidarity. Solidarity here is the construction of the right sort of reader, the reader who resembles sufficiently the social identity which a speaker or writer has adopted for a particular text. Gee argues that meaning cannot be determined by looking for a writer's intention because the meaning making process itself is dynamic and meaning making and interpretation are not separate processes but in a dialectical relationship with each other: "The speaker can often discover meaning while making it, and can on reflection, come to see that she meant more than she thought" (Gee 1996: 191).

This issue will be taken up again in Chapter Four where analysis of NVC shows NVC practitioners use "gisting and guessing" to negotiate understanding. An important point here is that social subjects cannot be constructed as having one single identity only but we can take on different social positions in different contexts. Compassionate communication can open possible

avenues of communication affording numerous social positions and identities. In addition, the same act can count as different things in different contexts, and language use must also express the values and beliefs that are right for any particular context (see the example of a job interview in Gee 1996: 124). "Discourses create, produce and reproduce opportunities for people to be and recognize certain *kinds of people*. We are all capable of being different kinds of people in different Discourses" Gee 1996:128, original italics). Gee's connection between opportunity, discourses, and 'kinds of people' reminds us of Emerson's assertion that language is a natural fact—for people. The way humans express themselves in different settings, according to Gee, makes us different kinds of people with our differing kinds of discourse. Gee's 'chameleon' addendum to Emerson's hypothesis on the human nature of language, emphasizes the importance of context and how discourse provides the semantic and lexical/grammatical means for humans to adapt language to context.

While recognizing the correlation, lexical/grammatical, between the models of context adopted in CDA and SFL, I will here also point to differences in how context is interpreted or realized. Fairclough's (1989: 147) description of situational context comprises four components: (1) what is going on, (2) who is involved, (3) what relationships are at stake, and (4) what is the role of language in what is going on. The first one of these corresponds to Halliday's (1985) Field of discourse, the second and third are conflated in the Tenor of discourse, and the last one corresponds to Mode. However, in addition to the context of situation, Fairclough's model includes another context variable: a text's intertextual context and how a discourse [is] connected to other discourses, and how these discourses are interdependent on each other, and how is a text synchronically and diachronically related to other texts (see section 2.2.6). This additional context is addressed in *Appraisal Theory* as intertextuality.

There is also a correlation between the nature of discourse as a social practice rather than an individual practice and meta-functional diversity in SFL. As mentioned above, there are three important implications of discourse as a social practice. To reiterate them here briefly: (1) Discourse represents but also construes reality. (2) There is a dialectic relationship between discourse and social structure. (3) Discourse is a force which contributes to the construction of knowledge and belief systems. These three aspects of discourse correspond to the three dimensions of meaning in language which Fairclough (1992) calls the *ideational* function, the identity function and the relational function.

The *ideational* function relates to ways in which a text construes the world, its entities, relations and processes. The identity function relates to the construction of social relations and the relational function relates to the enacting and negotiating of social relationships between participants. Again, there is some correlation between CDA and SFL: The *ideational* function as the function which construes (experiential) reality. The identity function and the relational function are conflated in SFL in the interpersonal metafunction, that is the function which construes social reality (Halliday 1978). What has not been made explicit in CDA is the relationship between the context of situation and the metafunctions in SFL.

The general relationship between discourse, context (register) and text has been described by Fowler (1996) as follows: A register is a variety of language. A discourse is a system of meanings within a culture. Thus, we can say that a text is "in" a certain register, but several discourses can be "in" a text.

The categories for formal text interpretation in CDA included in this study and described by Fairclough and others are vocabulary, grammar, cohesion and text organization, speech acts, coherence and intertextuality. Fairclough covers formal properties of texts as well as aspects of

text production and interpretation. With respect to vocabulary, Fairclough (1989) distinguishes between the experiential, relational and expressive value of words. Again, there is some correlation between CDA and meta-functional diversification in SFL: Relational and expressive values describe social relations and identities and seem to correspond to the interpersonal meta-function, and more specifically in those appraisal values grouped together by White (2002) under ' attitude'.

This study focuses CDA, SFG and Appraisal analysis on negotiation exchanges in CCCR role plays in which Thai medical staff learning to use NVC apply it to various scenarios in cross-cultural conflict. The areas where the three over-lap and are outlined here played a significant role in developing methodological tools. Firstly, there is some correlation between Fairclough's and Halliday's models of situational context but also some variation in that Halliday's Tenor has been split into two by Fairclough. There are some differences, though, in that the context plane in SFL has been stratified into a context of situation (register) and a context of culture (genre) and both context planes are realized through language. Thus, there is an explicit relationship between context and language. Secondly, Fairclough sets up a relationship between the nature of discourse as a social practice and the meta-functions of language. SFL sets up a relationship between the context variables Field, Mode and Tenor and the meta-functions. Fairclough also seems to relate meta-functional diversity to vocabulary only, not to grammatical structures.

One specific strength of CDA is the extension of context to include intertextuality. This makes it possible to show and follow the traces of other texts and discourses in a text, and this, it will be shown, is one aspect of importance in analyzing role-plays based on written prompts and how NVC practitioners incorporate written and spoken texts into the needs negotiation process

of NVC discourse.

CDA stresses the need to go beyond text analysis and to include the analysis of discursive practice, which consists of the processes of text production, distribution and consumption. The way of linking these processes and the text itself is through intertextuality. To that purpose, Fairclough has translated Bahktin's theoretical considerations of the nature of utterances (or texts) into a tool for text analysis to highlight the distinct nature of texts and the expression of this heterogeneity through linguistic structures. The following discussion will briefly set out Bakhtin's ideas on the dialogic nature of discourse and then Fairclough's model of intertextuality.

Bakhtin's starting point is the nature of utterances as a social phenomenon, which makes them inherently dialogic. That is, an utterance originates in a social dialogue and is part of a social dialogue. This involves understanding an utterance against the background of the language system itself as well as against the background of other utterances on the same topic, their opinions and value judgments (Bakhtin 1981: 281). The crucial point for Bakhtin is that utterances have no fixed meaning but that meaning really represents two dialogues. Meaning is a dialogue between speaker (or writer) and the addressee in that a response is expected. It is also a dialogue with previous texts to which a speaker responds. Thus, each utterance presupposes another utterance, past or future.

> Any speaker is himself a respondent to a greater or lesser degree. He is not, after all, the first speaker, the one who disturbs the eternal silence of the universe. And he presupposes not only the existence of the language system he is using, but also the existence of preceding utterances – his own and others' – with which his given utterance enters into one kind of relation or another (builds on them, polemicizes with them, or simply presumes that they are already known to the listener). Any utterance is a link in a very complexly organized chain of other utterances (Bakhtin 1986:99).

This dialogic nature of utterances has two important implications. Firstly, the addressee has an active role. As any utterance seeks a response, the listener becomes the speaker, even thought the response may not be immediate. Secondly, an utterance as a response to previous utterances cannot be fully understood without putting it into relation with other utterances, without understanding the utterance to which it responds and the speaker's or writer's attitude towards these other utterances.

Another crucial aspect of Bakhtin's theory is that not only utterances are dialogic, but also secondary (complex) speech genres such as drama, novel, research reports. They absorb primary (simple) speech genres and in the process the primary speech genres change (Bakhtin 1986: 61). Secondary speech genres are oriented towards the response of others: accepting, challenging, rejecting. Like dialogue, secondary speech genres form links in chains of texts responding to previous texts and expecting responses from future texts (Bakhtin 1986: 78).

In addition to utterances forming chains of texts, words and utterances from the utterances of others can enter our own, carrying with them the tones and shades of these utterances (Bakhtin 1986: 88). So, when we hear words they already carry with them a certain coloring and flavoring from that utterance.

> Our speech, that is, all our utterances (including creative works), is filled with others' words, varying degrees of otherness or varying degrees of "our-own-ness", varying degrees of awareness and detachment. These words of others carry with them their own expression, their own evaluative tone, which we assimilate, rework, and re-accentuate (Bakhtin 1986:89).

This tendency to assimilate the discourse of others into our own is particularly significant in authoritative and persuasive discourse (Bakhtin 1981: 342). Medical discourse is both. Authoritative discourse can demand acceptance because "its authority was already *acknowledged* in the past. It is a *prior* discourse" (Bakhtin 1981: 342, original italics). Bakhtin describes

authoritative discourse as diffused with its authority, as complete and static, as a discourse which does not merge with other discourses. Persuasive discourse, on the other hand, is a combination of own-ness and other-ness, and this makes it creative. It is developed and applied to new situations, and by entering into struggle with other discourses, it creates new ways to mean (Bakhtin 1981: 346).

It is important to point out that the dialogic nature of texts applies also to mono-logic texts. They, too, are a response to what has already been said about an issue even though this responsiveness may not have the same clear cut expression. Rather, it may be manifest in what Bakhtin calls "dialogic overtones" (1986: 92) and these are essential to understanding the text. This principle of the dialogic nature of texts has been re-conceptualized as the principle of intertextuality because it emphasizes the meaning of a particular utterance arising from relations between utterances and social viewpoints, not only from the minds of individuals. We make sense of utterances and texts in relation to similar and different utterances (Kristeva 1986, Lemke 1985). However, while all texts form inter-textual links, different texts and different communities form different inter-textual links: which texts are valued, why and how, and which ones are omitted (Lemke 1995).

Inter-textual analysis in Fairclough's model of CDA provides the means to go beyond the analysis of texts and to analyze the discursive practices of text production, distribution and consumption. An inter-textual perspective of a text as a link in a chain of prior and future texts emphasizes the historicity of texts (text production). It explores the paths along which texts move, become transformed and shift from one text type to others (text distribution). And it emphasizes that text interpretation is shaped by prior texts which a reader brings to the interpretation (Fairclough 1992: 84)

Intertextuality can operate at two levels. At one level, there can be the presence of specific words of others mixed with the words of a writer in his text. This can be marked by a clear, explicit boundary between a writer's own text and another text such as insertion and quotation marks. At another level, there can be a combination of different genres and different discourses. This is referred to as inter-discursivity (Fairclough 1992, Chouliaraki & Fairclough 1999).

Fairclough raises several issues related to intertextuality all of which will be relevant to medical discourse, although to varying degrees. The first is discourse representation. This refers to what is represented, how, when and why. More specifically, the relevant issues are: Are the boundaries between representing and represented discourse explicit and clear? Is the represented discourse translated into the voice of the representing discourse? What kind of reporting verbs are used for the writer's interpretation of the represented discourse?

The second issue is presupposition, where the other text is taken for granted but not specifically identified as other text. From an inter-textual perspective, a workshop participant responds to a prior text, making her own meaning about this prior text, but because the prior text is taken as given, it is difficult to challenge. The third issue is negation. Negation works inter-textiually because the negative presumes the positive. It incorporates the positive but then challenges and rejects it (see chapter 3 on *Engagement*).

The final issue is meta-discourse as "a peculiar form of manifest intertextuality where the text producer distinguishes different levels with her own text, and distances herself from some level of the text, treating the distanced level as if it were another, external text" (Fairclough 1992: 122). Meta-discourse can be marked lexically/grammatically through expressions such as "sort of", or "not sure yet" and can be marked as belonging to another discourse and implies that

a speaker or writer is positioned outside a discourse or that he wants to distance himself in stance

from the represented discourse. This strategy is used by medical staff, for example, when a

diagnosis or some information is decided to be controversial and some or all is withheld from a

patient or family member.

Fairclough has provided a theoretical framework which makes it possible to go beyond

the text and analyze broader social processes. However, the question arises: How are inter-

textual relations realized in the text? How do we read and write, how do we make meaning

against the background of other texts and against the background of competing discourses. This

happens in complex ways when we consider this study's role-play performances. The

participants write, produce and perform role-plays with several layers of inter-textuality present

from the role-play prompt provided in the class to the writing and performing of the task which

involves fellow student and teacher audiences.

Two concepts are relevant here for the relation between intertextuality, language and text.

The first is realization, which is about "looking at the semiotic space in terms of its internal

relations" (Chouliaraki & Fairclough 1999: 141). The second one is instantiation. Instantiation

is about the relation between system and text, which means, "looking at language in the long

terms or in its immediacy" (Chouliaraki & Fairclough 1999: 141). Thus the inter-textual (local)

relations in a text can tell us something about the (global) relations between a text, other texts

and other discourses, how these resources are articulated together in a text and how they unfold

within a text. Intertextuality does not just bring different texts and discourses together in another

text, it also combines them and orders them in particular ways (Chouliaraki & Fairclough 1999:

153). Or, put the other way round, we can say, the linguistic structures of a text can tell us

something about the intertextual relations which a text forms with other texts and other

discourses. In chapters three, four and five analysis reveals these contrastive features of the NVC and CAD discourses and how within the range of apparent texts and discourses, these two can be distinguished. One goal of this study is to explore stance and inter-textual positioning in these terms to recognize how culturally affected and NVC discourses of negotiation have fundamentally different cultures of stance. NVC cultivates a universal needs negotiation stance while CAD maintains degrees of cultural expectations like power relations.

2.4   SYSTEMIC FUNCTIONAL GRAMMAR (SFG)

Systemic Functional Grammar is different from other kinds of grammar in a number of ways. It is a grammar oriented towards meaning, and it is oriented towards language as a social phenomenon rather than an individual phenomenon. It has been constructed specifically for the purposes of text analysis to enable us to say useful things about spoken and written texts (Halliday 1994). To achieve this aim, systemic functional grammar rests on the following main theoretical orientations.

Language is functional, that is language is used by people to satisfy human needs and to achieve social goals. Thus, systemic functional grammar is semantically oriented. It is concerned with language in use: How do people use language to make meanings, and how is language structured to make meanings (Eggins 1994). In that sense systemic functional grammar represents a major contrast with the theory of language In systemic functional linguistics (SFL) language is a resource to make meanings, and the speaker's choices are emphasized.

The view in SFL of language as a resource for meaning entails a view of language as choice: what did a speaker say in relation to what could have been said. This means the focus is on paradigmatic relations. What is important is not simply the option chosen in itself but the

option chosen in relation to other available options (Halliday 1996). In this way , NVC

orientation toward choice as a universal human need and SFG recognition of choice as a

fundamental of discursive experience makes the two very compatible in this study.

Furthermore, SFL is not concerned with sentences but with texts. Three aspects are

important here. Firstly, text includes spoken and written texts. Secondly, texts are semantic

units, "instances of linguistic interaction in which people actually engage" (Halliday 1978: 108).

As a consequence, in this view texts are not composed of sentences but *encoded* in sentences.

And thirdly, text represents choice and is selected from the total set of options available to the

members of a culture. It can be defined as "actualizing meaning potential" (Halliday 1978: 109).

Another important feature of SFL is the text/context relationship. Following Malinowski,

SFL postulates a close relationship between context and text. It is argued that in order to

understand a text, we need to know something about the context in which it has been produced,

the "context of situation" and the "context of culture" (Martin 2000). SFL is concerned with the

"solidarity relations between text and social contexts", not with texts as structural units in

isolation from their context and from each other (Halliday & Martin 1993: 22).

In summary, "the approach leans towards the applied rather than the pure, the rhetorical

rather than the logical, the actual rather than the ideal, the functional rather than the formal, the

text rather than the sentence. The emphasis is on text analysis as a mode of action, a theory of

language as a means of getting things done" (Halliday 1994: xxvii).

Stratification is one method in SFG for "getting things done" that is in distinguishing

views or approaches to discourse. In SFL the content plane is further stratified into semantics

and lexico-grammar.

Semantics in this model is not only the meaning of words but the meaning of whole texts,

in fact the entire system of meanings of a language, hence *discourse* semantics (Martin 1992).

Lexico-grammar is defined as "the level of internal organization of language, the network of

relations of linguistic form" (Halliday 1978: 43). It encompasses structures as well as

vocabulary with "lexis as the most delicate grammar" (Hasan 1987:184). Phonology/graphology

is the resource for realizing words as sounds or letters (Matthiessen 1995).

Sounds are combined into sequences to form words and the grammar organizes these

into sequences of words. Thus,"any piece of interaction is simultaneously (1) meaning, (2)

wording, and (3) sounding" (Matthiessen 1995:2).

An important feature of this tri-stratal model of language is the relationship between the

strata. While the relationship between content and expression planes is relatively arbitrary, the

relationship between lexical-grammar and semantics within the content plane is not arbitrary but

natural or solitary (Martin 1992). The second fundamental aspect of the global organization of

language is the organization of meaning into three broad areas: experiential, interpersonal and

textual meaning. In any interaction, the participants construe experience; they make sense of the

world around them in terms of "what's going on" (*ideational* meaning). Within the *ideational*

meta-function we can distinguish the experiential and the logical. At the same time as inter-

actors construe experience, they enact social roles and relationships; they engage with one

another in exchanging information or goods and services (interpersonal meaning).

These two meanings are organized into chunks in a certain sequence so that they can be

shared between the participants as text (textual meta-function) (Halliday 1978, Matthiessen

1995). This relationship is a dynamic, two-way relationship: language construes and is

construed by its social context (Halliday & Martin 1993: 24). From context we can predict the

language that is likely to be used, and from the language that is used we can infer the context in

which an interaction is situated. Although in this medical English genre we are looking closely at interpersonal metafunction, the *ideational* and textual play important roles as well. The *ideational* includes the ways that experience is understood by parties from contrasting cultures. The textual enters into the research in terms of the role-play prompts and the degree to which participants use the language of the prompts in their role-plays. The three meta-functions and the kinds of reality they construe can be summarized as follows:

Table 2: Meta-functions (Martin: 1991:104)

META-FUNCTION	"Reality Construal"	"Work Done"
Ideational (experiential, logical)	reality	observer
Interpersonal	social reality	intruder
Textual	semiotic reality	relevance

The organization of language into these three meta-functions is reflected at clause rank in the lexical-grammar in systems of options, where the experiential function is construed by the system of transitivity, the interpersonal by mood and modality, and the textual by theme.

Table 3: Meta-functions and Lexico-grammar (Halliday 1978, Matthiessen 1995)

Metafunction	is construed	by Lexico-Grammar
Experiential		*Transitivity*
Interpersonal		*Mood and Modality*
Textual		*Theme*

Transitivity is the resource for construing our experience of the world in terms of processes, participants and circumstances. For example:

They *play* games.	"doing"	(material process)
They *like* games.	"feeling"	(mental process)
They *watch* games.	"behaving"	(behavioral process)

Mood is the resource for enacting roles and relationships; it allows participants to take on speech roles as givers or demanders of information, or as givers and demanders of goods and services. For example:

They play cards on Sundays.	giving information
Do they play cards on Sundays?	demanding information
Would you like a new deck of cards?	Offering goods
Give me those cards!	Demanding goods

In addition, comments on modality, polarity and attitude provide the "potential for creating and maintaining inter-subjectivity" (Matthiessen 1995: 17).Theme is the resource for presenting experiential and interpersonal meaning in sequences.

It is important to note that each clause makes these three meanings simultaneously. Each social interaction is at the same time a construal of experience, an enactment of social roles, and an ordering of meaning into text. In the following example (**Figure 4**), the social interactions, construal of experience, social roles and text relate and over-lap. The three metafunctions are graphically described in the following clause:

Figure 4: Theme and Rheme Example in SFG

	In winter time	*board games*	*are*	*the obsession of my family*
experiential	Circumstance: location:time	Carrier	Process	Attribute
interpersonal		Subject	Finite	
	RESI-................	MOOD		........................-DUE
textual	Theme [marked]	Rheme		

These two principles of the global organization of language in terms of strata and meta-functions can now be grouped and related. The meta-functional diversification of the content plane (Matthiessen 1995:19) relates in SFL to a close relationship between language and its social context. Similar to the organization of language into a content and an expression plane , the relationship between language and social context can be represented as a stratified model. The dialectic relationship between language and context is represented by a double-headed arrow in **Figure 5**.

Figure 5: Language and social context (Halliday & Martin 1993:25)

Social context

Language

Context in SFL is derived from Malinowski's context of situation and context of culture. Broadly speaking, the context of situation varies in three respects: What is going on, what is happening, what is the nature of the social action that is taking place: "what is it that the participants are engaged in, in which the language figures as some essential component?" (Halliday 1985: 12) This notion, field of discourse, has been developed by Martin. He defines fields as:

> [S]ets of activity sequences oriented to some global institutional purpose. Examples include: linguistics, tennis, cooking, wine making, gardening, dog breeding, film, architecture, sewing, car racing, philosophy, sailing, building, chess, war, politics and so on" (Martin 1992: 292).

Who is taking part, what is the nature of the relationship of the participants, what are their statuses and roles, including the speech roles they are taking on in dialogue and "the whole cluster of socially significant relationships in which they are involved" (Halliday 1985: 12). In CAD discourse these signature characteristics of the field of discourse relate to the range of norms socially and culturally for the communication. In NVC discourse as is developed in chapter three, methodology, the speech roles in the field are in one way or another related to respect for and negotiation based on universal human needs.

What part is the language playing, "what is it that the participants are expecting the

rhetorical mode or purpose of a text, what is being achieved by the text in terms of persuasion, exposition and so on. The NVC process has distinct purpose and meets Halliday's rhetorical mode criteria. It is an interpersonal channel of communication through which parties achieve a communicative purpose—to negotiate by entering into a needs respecting stance.

Martin (1992) has extended the notion of mode with respect to experiential and interpersonal meaning. Experientially, mode mediates the semiotic space between language as part of the action and language as reflection; to what extent is the text dependent upon its context (for an exemplification see Gerot & Wignell 1994: 159-161). Interpersonally, mode mediates the space between monologue and dialogue and the kind of visual and oral contact and feedback that is possible between participants (Martin 1992: 511).

These three variables have been identified by Halliday as register. He defines register as "a configuration of meanings that are typically associated with a particular situation configuration of field, mode, and tenor" (Halliday 1985: 38). The semantic components of the context of situation, field, tenor and mode, are systematically related to the three meta-functions. The *ideational* meta-function is related to field, the interpersonal meta-function is related to tenor, and the textual meta-function is related to mode (Halliday & Martin 1993: 30).

There is, however, some difference in Halliday's and Martin's models of register. For Halliday (1978, 1985), register is the realization of the context of situation in language. It is the result of different constellations of field, tenor and mode. In contrast, Martin (1985, 1991, 1992), treats register as a semiotic system in its own right. All things considered, the main objective in working through these varying models is the importance writers place on including a wide range of systems from field to mode. The location of language samples within multiple frameworks of discourse analysis allows for a clearer and more accurate description of the

broader processes and individual expressions or 'moves' in a discourse.

In Martin's model, register is a connotative semiotic with language as its expression plane: "Register is used in other words to refer to the semiotic system constituted by the contextual variables field, tenor and mode" (Martin 1992: 502).

Figure 6: Register as functional variation and as connotative semiotic (Matthiessen 1993:232)

There are two important relationships in SFL: the inter-stratal relationship between ranks and strata (realization) and the intra-stratal relationship between system and text (instantiation). Realization refers to the relationship between ranks and strata: between genre and register, register and language, semantics and lexico-grammar (Halliday 1992, 1996, Martin 1992, Matthiessen 1993). This relationship can be read in two directions. Each system realizes a higher system and is, in turn, realized by a lower system. From the perspective of context, for example, realization refers the ways in which different register variables condition *ideational*, interpersonal and textual meanings. Thus, register "is realized by" language. From the

perspective of language, realization refers to the way in which different *ideational*, interpersonal and textual choices construct different types of field, tenor and mode. The lower stratum "realizes" the higher one; language realizes register, which, in turn, realizes genre.

However, realization is also the relation between patterns and patterns realized in patterns: lexico-grammar is realized in phonology, and semantics is realized in the realization of lexico-grammar in phonology. In this interpretation, realization can be seen as "a chain of meta-redundancy – a redundancy on one level is redundant with part of a redundancy on another level, which is in term redundant with part of a redundancy on a further level and so on" (Halliday & Martin 1993: 41).

Two arguments have been put forward in favor the term meta-redundancy. One, the term is directional only as far as abstraction is concerned but it is not directional as far as cause and effect relationships are concerned. Secondly, meta-redundancy is probabilistic rather than categorical. Categorical realization is considered as having 100 per cent probability, which is the exception rather than the rule. This creates a space for one level of abstraction to re-construe another. Thus the system is able to evolve (Halliday & Martin 1993: 41-42). In the second relationship, instantiation, the intra-stratal relationship of a system is as meaning potential at any given stratum and the manifestation of the potential in actual text (Martin 1999). System and instance have been described by Halliday (1992: 26) as being really the same phenomenon seen by two different observers from two different distances: The system is the pattern formed by the instances, and each instance represents an incursion into the system in which every level of language is involved.

Relating the system to the instance is the process of instantiation. This refers to the continuum between the potential and the instance. Reflecting on NVC and discrete CAD

discourses, we see instantiation includes the choices of available discourse options for given fields of discourse. Meaning is instantiated in the unfolding of text, and typical patterns of instantiations that recur in particular situation types are located on this continuum somewhere between the potential and the instance. The continuum, following an NVC example, would move from *affect* engagement through a needs negotiation process. Meaning is construed in terms of universal human needs and negotiation of those needs.

Figure 7: System, instance and instantiation (adapted from Halliday & Matthiessen 1999:324)

semantic system

(meaning potential)

INSTANTIATION

semantic instance

(text)

The relationships of realization, meta-redundancy and instantiation are important in the dialogue between the SFL model of text and context and the concept of intertextuality in CDA. In CCCR speech acts the genre analysis, meta-redundancy relates texts to the systems which they directly instantiate like NVC or CAD as well as to all other systems in the model (Halliday & Martin 1993: 46). Instantiation relates process to system "and thus more or less directly to all other texts which have or could have been instantiated that system" (Halliday & Martin 1993: 45). This provides a powerful theory of intertextuality, firstly, because it models semiosis as an

inter-subjective resource and secondly, because it allows for degrees of intertextual proximity.

In the dynamics of intertextuality lie a text's duality to relate spontaneously and interpersonally while at the same time relating to the larger issues of context of situation and social processes. It is at this confluence of individual choice and social context that negotiation processes for CCCR are positioned.

2.5   GENRE AND REGISTER IN SFL AND APPRAISAL THEORY

In Halliday's model of register, purpose is subsumed under mode and genre is the result of particular register configurations: "The concept of generic structure can be brought within the general framework of the concept of register, the semantic patterning that is characteristically associated with the 'context of situation' of a text" (Halliday 1978:134). In contrast, Martin (1985, 1991, 1992, 1997, 1999) has stratified the content plane of social context into two levels: register and genre with genre as a super-ordinate to register. In this stratified model of context, genre is another connotative semiotic which "borrows" its expression from language through register.

Genre in SFL draws on Bakhtin's (1986) speech genres as "relative stable types" of interactive utterances but has been broadened to include spoken and written texts as well as literary and non-literary genres (Eggins & Martin 1996). In this model, genre is not associated with one particular register variable but is functionally defined in terms of social purpose, where all register variables work together to achieve a text's social goal (Martin 1992). In other words, different genres use language differently to achieve different purposes in a particular culture.

An important point is that genre, register and language work together in a probabilistic

manner, not in a deterministic one. The question here is: What language is most likely to achieve a social goal in a particular culture; what is the most likely way in which a text would unfold to achieve its goal (Eggins & Martin 1996: 236)? The working hypothesis in this research is that a model which includes CCCR interpersonal pragmatics based on universal human needs would help achieve this goal for Thai international medical contexts. Genre allows multiple analysis of CAD and NVC factors as they unfold in the texts.

Approaching genre from the perspective of a stratified context plane with genre as a connotative semiotic system like NVC as a medical CCCR genre in its own right with register as its expression plane rather than as a configuration of registers has several advantages (Martin 1999: 31-34):

a) Because genre as a staged, goal-oriented social process does no longer correlate with any one particular register variable or any one particular meta-function, genre can now be characterized as multi-functional, redounding simultanously with field, tenor and mode as well as with *ideational*, interpersonal and textual meaning.

b) By removing the means to account for a text's global organization and social purpose from register onto a higher, more abstract level, the probabilistic relations between register variables and meta-functions can be strengthened.

c) Genre as a connotative semiotic system at a higher level than register can account for combinations of field, tenor and mode variables which are possible in a culture in relation to those which are not possible. In a stratified context model, genre is responsible for specifying these possible combinations (see also Eggins 1994: 34-36).

d) A text does not have to have the same register variables throughout. Field, tenor and mode, *ideational, interpersonal and textual* meanings can change in different stages of a text. A stratified model of context with genre at a higher level can account for this variation.

e) The unfolding of a text in time does not necessarily match the chronological sequence of institutional activities in a text. In descriptive texts and reports, for example, it is not the institutional activity which is responsible for the unfolding of text but genre. With a stratified model of context it is possible to distinguish between field time (activity sequences) and text time (text sequencing).

f) Genre as a social semiotic system at a higher level than register makes it possible to look at genres intertextually – how is one genre (e.g. recipe) related to other procedural genres (Rose at al. 1992) and, more generally, to other regulating genres.

g) A text can represent a certain field, tenor, mode combination but at a higher level, one text type (e.g. narrative) can have a different social purpose, for example, to explain a scientific process, which could be achieved through the same register variables but different text organization.

Genre makes it possible to deal with this kind of contextual metaphor, where one text type can stand for another. The inter-changeability of different grammatical and lexical choices suited to different contexts has been studied as an issue of genre in academic language production.

In *The Language of Schooling: A Functional Linguistics Perspective*, Mary Schleppegrell uses SFL to show how students move from their home-learned, interpersonal discourse genre to the academic language used in the context of schooling. It demonstrates that the genre of English expected at school differs significantly from the interactional language that students use socially. Schleppegrell provides a linguistic analysis of the challenges of the academic genre. She demonstrates that several groups of students are at a particular disadvantage in acquiring the academic genre and these include: (1) non-native speakers of English (2) speakers of non-standard dialects, and (3) students who have little exposure to academic language outside of schools. Her SFG analysis of texts includes process and context analysis which shows how texts are constructed and how particular grammatical choices create

meanings relevant to the context and genres. In her study, the different kinds of texts students are asked to read and write at school provide data as to how they are acquiring a new genre while still demonstrating features from the social genre.

The significance of her study to the present one is two-fold. First, she uses process methodology for differentiating academic genres from the interpersonal genre as this study does. Mood and modality in academic process may, for example, appear in inter-textual process as a function of 'citation' or appeal to authority. This clearly marks it as academic genre by process test. Similar process tests were developed for this study and are discussed in Chapter Four. Second, Schleppegrell noted lexical-semantic movement from personal self expression in interpersonal, 'home' speech to evaluative discourse in academic speech.

To view this NVC study in terms of Schleppegrell's findings, we can say that NVC discourse is that self-expressive sort of discourse, like "home' discourse which was to some extent replaced by evaluative, academic language at some point in our socialization. Where Schleppegrell's study follows children from their interpersonal language to their academic language of school, this study follows the progress of workshop participants' re-processing of evaluative, academic language into NVC/CCCR pragmatics--an interpersonal language.

2.6   SYNTHESIZING AND APPLYING CDA, SFG, AND APPRAISAL THEORY

Recent studies underscore that register cannot sufficiently explain all the features of a text and similarities and differences between texts and genre provides a 'platform' for multidimensional models and scaling of relationships between texts. In addition, register and genre may be supplemented by a third semiotic plane. Add to the model of language, register and genre: ideology. Ideology was interpreted as a connotative semiotic system at the highest level

of abstraction, realized through genre (Martin 1992). In this model, ideology, following Bernstein, was conceived as a system of coding orientations and modeled along lines of class, gender, ethnicity and generation.

Recent ideology models have focused on the process by which meaning is created over time as development over three increasingly longer time frames: logogenesis – the unfolding of meaning in a text, ontogenesis – the development of meaning in the individual, and phylogenesis – the development of meaning in history (Martin 1997, 1999, Halliday & Matthiessen 1999).

In this model, language change is viewed as expansion of meaning potential. Each time frame "provides the material" for the next longer one: logogenesis "provides material for" ontogenesis and ontogenesis, in turn, "provides material for" phylogenesis. Or, read the other way, phylogenesis "provides the environment for" ontogenesis, which, in turn, "provides the environment for" logo-genesis (Martin 1999: 49, Halliday & Matthiessen 1999: 18). The process of analysis in Chapter Four of this dissertation follows this model in the ways in which subjects engage with texts across time. "In these terms, language, register and genre constitute the meaning potential that is imminent, from moment to moment as a text unfolds, for the social subject involved, at the point in the evolution of the culture where meanings are being made" (Martin 1997: 8).

In this sense this study has chosen Martin's model of genre as both sign of social situation in "the evolution of a culture" across time and as the individual's engagement with the moment—in this study's case-- the CCCR negotiation exchange moment.

In addition, the relationship between ideology, genre, register and language is no longer modeled as meta-redundancy but as projection. Projection is a phenomenon where verbal (*say*) and mental (*think*) processes project locutions and ideas (*"He said the nurses were*

professional"). In other words, the projecting clause provides a framework for the projected clause (Halliday 1994, Martin 1999; see also chapter 3.1). Using the analogy of projection, the relationship between genesis (ideology), context (register and genre) and language has been remodelled (Martin 1997, 1999). Genesis projects language, register and genre, it is argued, by framing values with respect to the unfolding of a text, with respect to interlocutors' subjectivities and with respect to the meanings at risk in the relevant discourse formations" (Martin 1999: 50). Read as projection, language, register and genre constitute the meaning potential immanent in a text as it unfolds, for the social subjects involved, at a certain time of evolution of a culture (Martin 1996: 8).

In cross-cultural NVC, the ideology can be described as realized in projection which operates at the meaning level: from the egalitarian ideology in universal human needs projects instances of compassionate inquiring, gisting, and repeating. Re-projecting intertextually is common in NVC discourse and relates to its core values. Modes of communication unavailable in most cross cultural settings can be bridged when affect, for example, is directly re-projected and engaged as in, "When you say that you don't have it and move your hands like that are you feeling frustrated? "

A model of *affect* and tenor along three dimensions has been proposed by Poynton (1985, 1990). The starting point for this model was Brown and Gilman's (1960) study on the choice of second person singular pronouns along two axes: a vertical axis of power and a horizontal axis of solidarity. In Poynton's tenor model, power is retained and solidarity is "split" (1985:76) into two dimensions: a dimension of social distance, termed contact, and a dimension of attitude (towards the addressee as well as the field of discourse), termed *affect*. The model Poynton bases on proxemics can be seen in terms of non-verbal, tonal and social dynamics in discourse.

In this model, *affect* is different from power and contact in two ways. While power and contact are always selected in social relations, *affect* can be absent. The initial choice for *affect* is between marked and unmarked, that is, an interlocutor has a choice between an overt display of *affect* or a "repression" or neutralization of *affect* (Poynton 1990: 95-96). The second difference is that *affect* choices are not made simultaneously with power and contact choices but are dependent on power and contact. In an unequal power relationship, the inter-actor with the lower status is less likely to choose overtly marked *affect*, and for example use the inclusive "we".

Relationships characterized by frequent contact are more likely to be associated with marked *affect*, especially marked positive *affect*, than relationships of infrequent contact (Poynton 1985, Eggins & Slade 1997). The interpersonal dimension in general and the notion of solidarity as acknowledging and negotiating socially divergent positions in particular is central to negotiation process (Chapters Four and Five). However, the foregrounding of the interpersonal does not equate with "being subjective" The interpersonal is fore-grounded in CAD or NVC in the sense that the speaker needs to negotiate a variety of different positions and has NVC in addition to other resources to address the situation. "Balancing", "give and take" and "choice" are construed through the interpersonal grammar.

In the mid-1990s, during the *Write-it-Right* project of the Disadvantaged Schools Program, work began on objectivity and subjectivity in media reports (Iedema 1994) and responses to verbal and non-verbal artefacts in English and Creative Arts (Rothery & Stenglin 2000). It seemed necessary to provide a better description of evaluative language. Thus, the research focus shifted from grammar to lexis and systems have been developed to provide a complementary perspective to the interpersonal systems of mood and modality at clause rank and

speech act and negotiation at the level of discourse semantics (Martin 1992, 1995, 1997, 2000, White 1998). These systems have been grouped together under the term 'Appraisal'.

The consequence of this for tenor has been a reworking of the three-dimensional model of tenor to a two-dimensional model with power (status) and solidarity (contact) as register variables and *affect* as an element of discourse semantics (Martin 1997, 2000; White 1998). The reason for this is given by White (1998). He argues that choices in relation to *affect* are dependent on power and contact. Therefore, *affect* is not a dimension of the context of situation simultaneously with power and contact but a discourse semantic resource for construing power and contact (White 1998: 46-47).

Table 4: Interpersonal resources across strata (Martin 1997: 20)

Register	Discourse Semantics	Lexico-grammar	Phonology
power (status)	appraisal	- 'evaluative lexis'	- loudness
	- engagement	- modal verbs	- pitch movement
	- *affect*	- modal adjuncts	- voice quality
	- judgment	- pre/numberation	- [formatting]
	- appreciation	- intensification	
	- amplification	- repetition- manner; extent	
solidarity (contact)	involvement	- vocation/names	- 'accent'
	- naming	- technical lexis	- whisper

	- technicality	- specialised lexis	- acronyms
	- anti-language	- slang	- 'pig latins'
	- swearing	- taboo lexis	- secret scripts

White's (1998) model of tenor is also novel in that it formulates a broader understanding

of solidarity. Poynton's model seemed to relate to participants who came into direct social

contact with each other. However, with written texts the contact between texts and their

audience is less direct. Therefore, White's formulation of solidarity is more abstract and less

individualized. In addition, there is a broadening of the notion of solidarity from agreement

between social subjectivities to negotiation of social subjectivities.

Solidarity under this formulation is not simply a measure of the extent of agreement

between social subjectivities, but is a more general measure of the degree of empathy, sympathy

or openness of one social position to another. Therefore when we speak of compassionate

communication discourse studies the empathy of engagement reflects solidarity in White's sense.

It is possible to gauge degrees of solidarity to operate between divergent social positions,

according to the degree that they remain open to interaction and negotiation. The NVC/CAD

matrix used to differentiate CAD and NVC discourse in this study gauges solidarity in terms of

avoidance and engagement. In this sense of solidarity, solidarity is reflected in various social

positions and their degree of acknowledgement of other positions or represents itself as open to

negotiation with those positions (White 1998:47).

White (1998) proposes a heteroglossic perspective. A heteroglossic orientation allows

for a reading where "even the most 'factual' utterances, those which are structured so as to

background interpersonal values, are nevertheless charged in that they enter into relationships of

tension with a set of alternative and contradictory utterances" (White 1998: 111). Utterance (1) ignores alternative positions whereas utterance (2) acknowledges and promotes alternative positions or heteroglossic diversity (White 1998: 112).

This position will also be adopted in this dissertation for the following reasons. Firstly, as mentioned above, there is the importance of the statement of facts for the argument and the potential persuasive force of cultural inter-actions between patients and medical staff. Sometimes, strictly factual statements or in NVC terms, observational discourse can be interpersonally charged. Secondly, it is the nature of cross-cultural conflict resolution to present all available sides of competing versions of the same reality. Where human needs and social forces come to bear on a situation, texts which present all positions meet a standard of fairness that may lead to deeper understanding of the text and context.

Each position taken implies a possible alternative position. Finally, there is the need to engage with and to negotiate potentially conflicting and contradictory cultural codes. Thus, a choice has to be made from the available possibilities.

2.7 SYSTEMIC FUNCTIONAL GRAMMAR (SFG) AND APPRAISAL THEORY: ANALYSIS OF NEGOTIATION EXCHANGE STRUCTURE

The range of mood and modal usage across texts in various genres and in various contexts sheds light on the way different cultures use power relations to negotiate communication (Intachakra 2004). In this study, mood and modals relates to the search for cross-cultural language pragmatics. In what ways do mood and modals as used in English represent the speaker's culture of identity translated into English?

In a medical- tourism CCCR setting, this study focuses on describing the negotiation exchange structures. The exchange structures of Non-violent Communication (NVC) and culturally affected discourse (CAD) of Thai medical staff in cross-cultural conflict resolution scenarios are described. In the NVC, medical-communication intervention, recordings of staff practicing a new discourse allows for views of their skills over time, from recordings taken at regular intervals. The analytical tools described in this section, from SFG and appraisal framework summarize the aspects of each that apply to negotiation. The system of appraisal constitutes the semantic resources for evaluating human behavior ethically, judgment, evaluating phenomena aesthetically, appreciation, and construing emotions, *affected*. Alongside these three categories there are resources for grading the evaluation, graduation and resources for negotiating modal responsibility engagement (Martin 1997, 2000). The first three have been grouped together under the super-ordinate term attitude as "a semantic space in which the language characterizes phenomena in either negative and *[sic]* positive terms" (White 1998:48). Thus the Appraisal system is now constituted of these three dimensions: attitude, graduation and engagement.

Judgment constitutes the semantic resource for construing evaluation of behavior in the context of institutional norms about how people should or should not behave. It has evolved out of the Write-it-Right research into media literacy and the problem of subjectivity and objectivity. The subcategory normality assesses behavior against expectations of what is usual or normal and the extent to which behavior complies with these norms. For example, a statement such as *The existence of some risk is an ordinary incident in life* measures behavior and the resulting risk it poses and the damage it causes against an (unstated) norm of what is normal and therefore must be expected and tolerated.

Capacity refers to the assessment of a person's ability to perform an action or achieve a result. For example, *To hit her* is a negative assessment of a boy's ability to hit a very close target with a dart. Tenacity is the assessment of a speaker's state of mind and commitment to perform an action. To be "brave", "heroic", "energetic" and so forth is associated with a positive disposition while "lazy", "unreliable", "apathetic" and so forth encode a negative evaluation. Veracity in the modal system of probability allows for degrees of possibility - probability - certainty between the polar absolutes of 'yes' and 'no'. Under the subsystem of veracity, what is at stake is not degrees of certainty but honesty, credibility, authenticity (that is whether behavior conforms with or deviates from expectations of adherence to the truth). For example, *medical staff were* <u>*candid*</u> evaluates behavior as conforming to the expectation that staff share information openly and truthfully, without hesitation. When the cultural setting changes, expectations about how sensitive medical information should be transmitted changes.

Differences in culture and protocol determine how medical information 'should be handled'. Take, on the one hand, legalistic HIPPA, hospital non-disclosure rules in the United States are so strict regarding patient confidentiality because of a legalistic culture. Thai deference to and respect for authority and the line of power running from the medical staff to the eldest male, in some Asian societies. These cultural settings shape the ways communication of sensitive medical communication takes place. The ways that speakers try to work with and around these lines of power may be measured in terms of semantic background for modals—or propriety.

Propriety is expressed in the modal system of obligation and allows for degrees of compliance between the polar absolutes of 'do' and 'don't'. The subsystem of propriety is concerned with the evaluation of compliance with or resistance to ethical norms. To be "right",

"moral", "caring" is positive, to defy these moral imperatives attracts negative evaluation: on both sides of this evaluation fall cultural criteria for right and wrong and are helpful CAD discourse markers: These five categories have been grouped together into two categories of Social Esteem and Social Sanction. Normality, capacity and tenacity have been grouped together under Social Esteem because their positive values result in increased social reputation and public esteem while their negative values result in decrease or loss of social esteem. To be "heroic" deserves praise or some form of public recognition, to be a "coward" attracts contempt.

Veracity and propriety also have been grouped together under Social Sanction. This is the domain of moral regulation --again-- of right and wrong. Positive values such as "right" and "ethical" are associated with compliance of moral and legal norms while negative values constitute a breach of the moral and legal order and may be punished. In other words, to be stupid, lazy, incompetent is bad but it is neither immoral nor illegal, whereas deceit, dishonesty and corruption are a breach of legal norms and may have harsher consequences.

White (1998) has devised the system of judgment in heteroglossic terms, that is, as a means to inscribe a heteroglossic position into a text. By judging behavior a writer takes an explicit stance towards that behavior thereby confronting alternative positions which might assess the same behavior differently. How behavior is assessed is highly culture specific and dependent on social positioning. For example, "eccentric" may be a value of negative normality when applied to an old man who lives alone with no other social contact. By contrast, when applied to a successful surgeon, it may be a judgment of positive capacity – reflecting a judgment that his solitary life might somehow aid in his medical pursuits.

The issue is further complicated by the fact that judgment is not always expressed explicitly (inscribed). Judgment can be evoked through implied norms and rules which may be

attached to some apparently neutral, objective statement (tokens of judgment) (Iedema et al. 1994:215). For example, a common neutralizing judgment involves objectifying an act using a passive construction rather than an active construction of blame: ' You misdated the letter' versus 'the letter was misdated'.

The value that is attached to a token of judgment is even more dependent on reader position than explicit judgment values. Tokens of judgment assume that writer and reader share the same values and therefore attach the same judgment value to the behavior. In heteroglossic terms, with tokens of judgment the writer does not take an overt position and does not acknowledge heteroglossic diversity.

Appreciation is the system of resources for evaluating objects, performances and phenomena aesthetically and can be thought of as the institutionalization of feelings in the context of propositions (Martin 1997, 2000). It has developed out of research into the language of the visual arts and research into the role of evaluation in high school English essays (Rothery & Stenglin 2000). In the Thai medical tourism context overt appreciation is much less frequent among Thais than with western speakers (Intachakra 2004). In terms of NVC discourse, appreciation is processed as affect and judgment are processed—through the needs negotiation process. In CAD discourse, appreciation is organized around the categories: reaction, composition and valuation. Each has a positive and a negative dimension. Reaction has two subcategories: impact - the extent to which the object under evaluation grabs our attention) and quality - an assessment of an object's likeability.

reaction: impact	arresting, captivating, engaging	dull, boring, tedious
'did it grab me?'	fascinating, exciting, moving	dry, ascetic, uninviting

| reaction: quality | lovely, beautiful, splendid | plain, ugly |
| 'did I like it?' | appealing, enchanting | repulsive, revolting |

Composition also has two subcategories: balance and complexity. Balance is an assessment of an object's proportionality ('did it hang together') and composition is an assessment of complexity ('was it hard to follow').

composition: balance	balanced, harmonious	unbalanced, discordant
'did it hang together?'	symmetrical, proportional	contorted, distorted
composition: complexity	simple, elegant	ornamental, extravagant
"was it hard to follow?"	intricate, rich, detailed	monolithic, simplistic

The third category, valuation, relates to the social significance of a product of phenomenon ('was it worthwhile').

| valuation | challenging, profound | shallow, insignificant |
| 'was it worthwhile?' | innovative, original | conservative, reactionary |

The analysis of appreciation is complicated by two issues: First, valuation is closely tied to field since the criteria what is worthwhile differ significantly between institutions. What is valued in the visual arts is very different from what is valued in science. In news reports, for example, criteria for valuation were social significance of phenomena (*important, noteworthy, significant, crucial etc.*) and harm caused (*damaging, dangerous, unhealthy etc.*) (White 1998:55)

Secondly, like judgment, appreciation does not necessarily have to be realized through explicitly evaluative lexis but can be evoked through *ideational* tokens. How these *ideational* tokens are read depends on the extent to which a reader has been apprenticed into institutional practices and the extent to which a reader is able and willing to align herself with these practices (Martin 1997, 2000). It seems that the implicit evaluation in scientific writing falls into this category, especially the evaluation of value (Hunston 1993). Explicit evaluative lexis is avoided and the ideational tokens can be read as positive or negative evaluation only by a reader who is a member of the discourse community. For example, *Our results do not support the prediction of the balancing hypothesis* (Hunston 1993: 63) is read by a scientist as negative evaluation. If a hypothesis is not supported, it is a "bad" hypothesis. However, this apparently factual statement can be read as a negative evaluation only by a reader who is familiar with the institutional practices and the discourse of science.

In contrast, in CCCR and NVC pragmatics, evaluative stances are themselves subsumed in *affect* as a mode of interpersonal expression. Positive and negative evaluations are treated the same: they form a basis for further inquiry into feelings about the evaluations and the needs they represent.

A further complication arises from the use of grammatical metaphor, that is the construction of processes as things. The question here is: Should appraisal be read congruently or metaphorically? Is appraisal directed towards the congruent, that is the implied actor and his/her doing, in which case it would be judgment which is at stake, or is appraisal directed towards the metaphorical, the product or phenomenon, in which case it would be appreciation which is at stake. For example, in *The surgery was quite <u>exceptional</u>* (the field is medical and the patient's condition was extreme--once thought to be inoperable). In other words, appreciation itself can be

read metaphorically within the social context and may not be correctly interpreted by non-speech community 'readers'.

To interpret we need to answer: (1) Is the reader positioned as a patient with the condition who admires the technical advance and hopes for similar treatment or as the neutral, objective, dispassionate discoverer of facts, like a medical student reading case studies? Can these two conflicting reading positions be separated from each other? Appreciation describes the potential patient's position while judgment describes the medical student's position.

Affect is the semantic resource to construe emotions. The role of *affect* in appellate judgments is only minimal. However, for completeness sake, a brief overview will be given. *Affect* is classified along five dimensions (Martin 1997, 2000; see also Martin 1992: 533-536):

(i)   The first distinction is between positive and negative feelings, positive feelings being enjoyable, negative feelings being unpleasant.

positive *affect*:   *happy*

negative *affect*:   *sad*

Emotions such as sadness and anger might be considered by a psychologist as positive in the sense that they are a positive step towards the resolution of some conflict or trauma but they are still not enjoyable, therefore classified as negative. In NVC they are described as arising from unmet needs.

(ii)   The second criterion distinguishes between emotions as a surge of feeling or as an ongoing mental state:

surge: the boy *laughed*

mental disposition: the boy *liked* the present/the boy felt *happy*

(iii)   Are the feelings an undirected mood or are they directed at an external agency or a reaction to some external agency or event:

undirected mood: the boy was *happy*

directed mood/reaction: the boy *liked* the present

the present *pleased* the boy

(iv)   Emotions can be graded according to their intensity along a cline:

low: the boy *liked* the present

median: the boy *loved* the present

high: the boy *adored* the present

(v)   Emotions are grouped into three major sets:

happiness/unhappiness	emotions relating to the pursuit of goals	ennui, displeasure, curious, absorbed
security/insecurity	emotions relating to one's well being	anxious, fearful, confident, trusting

| satisfaction/dissatisfaction | emotions relating to "affairs of the heart" | laugh, cry, cheerful, miserable |

In addition to these five categories, Martin distinguishes between realis and irrealis values. Realis values involve reactions to an event in the present or past while irrealis values relate to potential future events. Irrealis values to not distinguish between positive and negative values.

realis: the boy *loved* the present

irrealis: the boy *wants* a present

The scope of *affect* has been extended by White (1998: 145-148) to include the semantic categories of purpose and desire/inclination:

purpose: She studied hard in order to succeed.

desire/inclination: She tried to please her mother.

This is motivated on hetero-glossic grounds. By claiming to have an insight into another person's mental disposition and by reporting this insight, a writer expects agreement from the reader, hence negotiates reader solidarity. He argues that emotional responses, like other responses are heteroglossically charged. The emotional dimension of appraisal creates a space for the reader to share the writer's emotional evaluation of a situation even if other aspects of evaluation may not be shared. In this space, CCCR and NVC pragmatics operate. This move toward solidarity allows the construal of some commonality between writer and reader despite their operating from divergent social positions.

Because of their interaction and interconnectedness, the three systems of evaluation judgment, appreciation and *affect* have been grouped by White (1998: 153-154) together under the heading of attitude. White's argument is that to some extent all three are some kind of emotional response: judgment is the institutionalization of feeling with respect to human behaviour and appreciation the institutionalization of feeling with respect to products and processes. As a result, the boundaries between the systems which comprise attitude can be fuzzy. To evaluate an artefact as "interesting" involves an aesthetic evaluation (appreciation), an evaluation in terms of its creator's capacity (judgment) as well as an emotional response on the part of the speaker/writer (*affect*).

The system of graduation is, in general terms, the system for turning the volume of evaluation up and down. An extensive graduation system has been developed by White (1998) for the analysis of media news texts, which will be discussed below. Graduation plays a vital role in appellate judgments in the construction of the facts as well as in the reasoning because it allows for inter-subjective positioning without the use of explicit evaluative lexis.

In the first instance, White proposes a scaling of meanings along two clines: a cline of intensity with 'high' and 'low' as the extreme values, termed force, and a cline of category membership from 'core' to 'marginal', termed focus. Furthermore, White introduces a distinction between explicit and implicit scaling. Explicit scaling is realised through lexical items such as somewhat - quite - very - extremely, while implicit scaling fuses intensification values with a lexical item such as the intensifying scale: 'like, love and adore'. Grading and amplifying values are further distinguished along two axes: isolating versus infused and experimentalized versus interpersonalized. Implicit scaling for intensity can occur across all values of appraisal (White 1998: 155-156):

Table 5: Scaling of Intensity and *Affect* (White 1998)

	low	median	high
probabilisation:	possibly/may	probably/will	definitely/must
obligation:	allowed/may	supposed/will	required/must
extra-vocalize:	he suggests that	he says that	he insists that
appearance:	it seems		it's obvious
proclaim:	I'd say		I declare
affect:	like	Love	Adore
judgment:	she performed satisfactorily	she performed well	she performed brilliantly
appreciation:	attractive	beautiful	Exquisite

While implicit scaling operates on a cline between high and low, explicit scaling in White's model is further distinguished along three semantic dimensions:

i   grading versus amplification

ii   isolated versus infused

iii   experimentalized versus interpersonalised.

Grading versus amplification constitutes the distinction between terms which form sets to specify degrees of intensity between high and low values: *slightly - somewhat - rather - very - extremely* (graders) and terms which indicate only high values of intensity such as *god awful* and *skyrocket* (amplifiers). In NVC, gisting and needs negotiation often use grading and scaling resources to direct the discourse toward the needs negotiation process and CCCR. For example, high value

and intensity lexical choices can lead to inquiries about feelings: 'When you say the stock *skyrocketed* are you feeling disappointed that you didn't take your mother's advise?'

Grading in White's model also includes 'measure'. He distinguishes here between counting, typically in the nominal group, where the experiential is foregrounded, and measure, where the interpersonal is foregrounded: "Measure can be understood as the application of scales of intensity to various modes of counting, and hence as its interpersonalisation – to assess some quantity as large or small is to relativise the utterance and therefore to foreground the role of the speaker's subjectivity" (White 1998: 158). Isolating values are realised through lexical items whose sole function it is to encode high, median and low grades of intensity (White 1998: 159):

grade:	slightly, very
amplify: colour:	god awful
amplify: repetition:	he laughed and laughed

Infused values are realized through a single lexical item which codes degrees of intensity in addition to some experiential value. The following subcategories have been distinguished (White 1998: 159-162):

amplify: metaphor	prices skyrocketed
amplify: quality	the car veered
amplify: evaluatory	desperate attempt, dramatic bid, key figure
amplify: universalize	all day long, endless talks
grade: measure	small, medium, large
amplify: measure plus	huge, gargantuan, minuscule

In metaphorical amplifiers such as *skyrocket* and *plummet* amplification is fused with a material process. Thus, *skyrocket* can be unpacked as *rise very high very fast*. The same goes for the category quality, where the material process is fused with a circumstance of quality: *the car veered* is *moved very abruptly*.

The category evaluatory is typical to the register of journalism. White classifies expressions such as damning evidence and a desperate bid as amplifiers rather than values of judgment, appreciation and *affect* because they have become so formulaic in journalism that they no longer function as individual lexical items. Universal amplifiers intensify meanings through some kind of measure such as *all day, everybody*, with the difference that the expression of measure is not to be taken literally as an expression of measure. Measure-plus (*gargantuan, minuscule*) is distinguished by White from measure for the following reason: These values are already fused with a value of intensity, which is not the case with simple measure values. Thus, it is possible to say 'very large' but not 'very minuscule'.

Furthermore, measure is a grading value while measure-plus can only turn meaning up not down. We can say "somewhat large" (grader) but not "somewhat minuscule" (amplifier). The fused values have been grouped into two categories: experientialize and interpersonalize depending on which meaning is fore-grounded. Scaling is experientialized in the categories metaphor, quality and measure; scaling is interpersonalized in the categories evaluatory, universalize and measure plus (White 1998: 162).

'Focus' is the application of scales of intensity to categories which are ungraded and ungradable. It is the resource to scale meanings in terms of their valeur relationships, to 'sharpen' and 'soften' their valeur relationship. 'Sharpen' locates items as 'core' values of some category while 'soften' locates items as marginal values of some category. In other words, it is a

resource to broaden or narrow terms which determine category membership. Thus, in *a true friend,* category membership is scaled up, an item is located as a core member of the relevant category while in *sort'v a friend,* category membership has been scaled down or blurred; an item is located as a marginal member of the relevant category. 'Focus' will prove to be an extremely important category in medical communication.

Recent work in SFL has broken considerable new ground in this area (Fuller 1998, White 1998). In her work on discourse negotiation Fuller presents a semanticized theory of intertextuality, grounded in Bakhtin's (1986) notion of 'our-ownness' and 'otherness' and his argument that all texts contain a range of perspectives from other texts.

Fuller's (1998) theory of intertextuality privileges the negotiatory function of grammatical resources. The term 'negotiation' is used for semantic systems in which an 'other' is explicitly or implicitly involved. It highlights the fact that texts are inter-textiual constructs which consist, to varying degrees, of specific other texts and the fact that texts negotiate divergent inter-subjective positions. It is the space of 'our-ownness' and 'otherness' and degrees between the two that has motivated Fuller's (1998) identification of the interaction between *ideational* and interpersonal resources to construe this space of discourse negotiation.

The negotiatory function, Fuller argues, requires an interrelated perspective of the construal of experiential reality (*ideational* resources) and the construal of inter-subjective reality (interpersonal resources). This perspective of interrelation movese through a topological approach. A topological approach describes units according to their similarities rather than their differences. It is concerned with continuity rather than separateness. A topological approach enables us to explore the semantic commonalities of a wide array of lexical-grammatical resources thus allowing scaled relations between diverse lexical-grammatical categories which

occupy a similar semantic space.

A topology, in mathematical terms, is a set of criteria for establishing degrees of nearness or proximity among members of some category. It turns a 'collection' or a set of objects into a *space* defined by the relations of those objects. Objects which are more alike by the criteria are represented in this space as being closer together; those which are less alike are further apart. There can be multiple criteria, which may be more or less independent of one another, so that two texts, for instance, may be closer together in one dimension (say horizontal distance), but further apart in another (vertical distance). What is essential, obviously, is our choice of the criteria, the *parameters,* that define similarity and difference on each dimension (Lemke cited in Martin & Matthiessen 1991:370). In this descriptive study of genre features a topology based on known features of the NVC discourse genre is used to define parameters which differentiate the culturally affected discourse moves from the CCCR/NVC discourse features.

Fuller's (1995) topological approach suggests a semantic relationship between diverse grammatical categories such as projection, modality, comment adjuncts and circumstances. A semantic relationship between projection and modality has already been identified through grammatical metaphor (Halliday 1994: 354-363). In this type a speaker's opinion is coded not as an element of modality *(There is probably no argument)* but as a projecting clause *(I think there is no argument).* That the latter is semantically not a projection can be seen from the tag: it is the projected clause which is tagged *I think there is no argument - is there,* not the projecting clause *don't I.* The theory of grammatical metaphor as a resource for dialogue has been developed in two aspects. Firstly, Fuller (1995: 137) argues that all projections have an interpersonal orientation in the sense that experiential content is attributed to an 'other'. Secondly, included in the lexical-grammatical resources for dialogue is also experiential metaphor such as *argument* or

statement. This makes it possible for a writer to imply experiential content without stating explicitly what was projected.

In addition, a semantic relationship is suggested between projection, modality and circumstances of angle. Their semantic commonality is that all are concerned with sourcing a proposition as 'other' text or as a writer's 'own' text:

X said that Y had no argument

According to X, Y had no argument

I think that Y has no argument

Y has probably no argument

In my view, Y has no argument

Adversarial relationships are potentially filling these semiotic spaces. This tells us that diverse ideational and interpersonal resources cover a similar semantic space. However, it does not tell us how these diverse resources can be scaled in relation to each other.

Some of the issues here such as 'other' text, sourcing text, taking modal responsibility, representation versus assimilation and the interaction of ideational and interpersonal resources in construing these meanings are of vital importance for a linguistic account of legal reasoning. Like authority in academic and technocratic discourses (Lemke 1987) and administrative discourse (Iedema 1995), authority in legal discourse is a form of power which is not simply enacted through modals of certainty and obligation but where inter-subjective relations are recast as ideational ones.

To make the scaling of diverse grammatical resources possible, Fuller (1995) suggests several clines along which propositions can be located with respect to their negotiatory function. Two of them, representation and asssimilation will be discussed here because they are relevant to this study. A cline of re-contextualization allows for the gradual merging of items from the congruent realization and explicit marking of other text through projection, to the full assimilation and integration of the represented discourse into the representing discourse through nominalisation and downranking in the nominal group (**Figure 8**):

Figure 8: Cline from representation to assimilation (Fuller 1995:182)

Representation

Calder said "x is y"

Calder reported that x was y

Calder thought that x was y

Calder's claim that x is y is sound

Calder considers X, Y

Calder sees X as Y

According to Calder X is Y

In Calder's theory X is Y

X is Y

Assimilation

A further cline in this topological approach is the move from representation to probabilization. This cline concerns the possibilities and degrees of locating meanings as ideationally sourced (*Doctor Amber recorded time of death at 5:27 am)* or as interpersonally

sourced, where the writer takes modal responsibility (*I think, in my view, it is my opinion*). Thus, Fuller (1995: 187) argues, modality is not just concerned with a writer's commitment towards certainty but linked to the discursive practices of a text: who is the socially validated source of knowledge: the writer's *I* or an institutional authority.

In summary, the point of Fuller's (1995) argument is that diverse areas of the grammar such as projection, modality, circumstances and adjuncts occupy a similar semantic space and their semantic similarities can be mapped through a topological perspective—that is from different reader positions..

White's model of engagement as "those resources by which a text references, involves and negotiates with the various alternative positions put at risk by a text's meaning" (1998: 20) relies, like Fuller's, on Bakhtin's notion of intertextuality or heteroglossia as an alternative to approaches which interpret values of inter-subjective positioning as vagueness, hedging, face saving, truth value and in terms of subjectivity versus objectivity (for a detailed discussion see White 1998: 20-32). There are several reasons for this. Firstly, White argues, it is not the overriding purpose of communication to exchange truth functional values and to indicate commitment to these values or a lack thereof. White sees these approaches as giving undue weight to the experiential meta-function and not enough to the interpersonal. In SFL meta-functional theory, an utterance construes experiential and social reality simultaneously. Secondly, in these approaches speaker and listener are construed in individualized terms not in social terms. White prefers a heteroglossic approach also as a more suitable model for written texts, where there is no immediate, direct contact between participants and for the exchange of information rather than goods and services.

As an alternative, White (1998) proposes an inter-textual view to modal, evidential and

hedging values which construes meaning making in social rather than individualized terms and which emphasizes the interpersonal rather than the experiential. Furthermore, White's model is audience oriented rather than speaker oriented and emphasizes the negotiation of meaning with actual and potential audiences rather than the exchange of truth statements.

Under the heteroglossic perspective, rather than necessarily reflecting the speaker's state of knowledge:

it [a modal value] can additionally or alternatively be seen as signaling that the meanings at stake are subject to heteroglossic negotiation. It may have no connection at all with doubt or vagueness, being used, instead, to acknowledge the contentiousness of a particular position, the willingness of the speaker to negotiate with those who hold a different view, or the deference of the speaker for those alternative views (White 1998:29-30).

White acknowledges that modals can express genuine uncertainty, but he argues that they might also indicate the contentiousness of a particular position, the willingness to negotiate or deference for alternative view. Inferencing and gisting about these affect laden but uncertain views can be seen in the NVC needs negotiation process. White concludes, modals and other "hedging" values open up the semantic potential of a text: they might invite or foreclose the negotiation of alternative positions. For example, when NVC agents asks explicit questions into 'hedging' moves by their counterparts, NVC agents engage modals of uncertainty and bring the semantic fields behind them into play.

Building on Fuller's (1995) topology of discourse negotiation, White (1998) is able to integrate a very diverse range of lexical-grammatical resources such as modality, projection, concession, causality and negation into a system to negotiate heteroglossic diversity. Two

distinctions are fundamental here, the distinction between propositions and proposals, and the distinction between promoting and demoting heteroglossic diversity.

The distinction between the exchange of information (propositions) and the exchange of goods & services (proposals) is significant for the semantics of heteroglossic diversity. The negotiation of propositions involves the negotiation of agreement, while the negotiation of proposals involves the negotiation of compliance. On this basis White concludes that "strictly speaking, then, the choice between information and interaction is not an option within the ENGAGEMENT system itself, but an environmental variable "(1998: 116).

The issue is somewhat complicated by the semantics of proposals in written texts in general, where there is no immediate interaction between writer and audience, and the grammatical realization of proposals. In NVC discourse, the semantic values behind proposals are explicit and known choices for people choosing to use NVC. Some of the categories of heteroglossic diversity like distinctions between promoting or demoting are assimilated in the needs negotiation process. For example CCCR/NVC process includes pragmatics like empathic gisting as means for enabling clear communication of the patient's needs. The term "intra-vocalize" indicates that an author, from her own position, acknowledges or anticipates an alternative position to her own. This term accurately describes the stance in NVC. Flexibility and creative communication—skillful 'gisting and guessing' in a moment of turmoil can be very effective in acquiring life-saving information, for example. Here is a quick graph of additional heterpglossic positions. These can facilitate the negotiation of diverse heteroglossic positions in NVC/CCCR negotiation.

intra-vocalise:open: probabilise:

Perhaps the Doctor viewed the documents

The Doctor may have viewed the documents

intra-vocalise:open: appearance:

It seems the Doctor viewed the documents

Apparently the Doctor viewed the documents

intra-vocalise:open: hearsay:

It's said the Doctor viewed the documents

Reportedly, the Doctor viewed the document (adapted from White 1998: 129).

This category 'open' is realised through an array of grammatical resources which serve a similar rhetorical function, that is to make explicit alternative positions. The last category, 'hearsay' requires some explanation. White distinguishes between structures such as *it's said that* and *X said that* (extra-vocalisation) on the following grounds. 'Hearsay' may be realised through similar grammatical resources as 'probabilise' and 'appearance':

comment adjuncts: possibly - seemingly - reportedly

relationals: it's certain that - it's apparent that - it's said that

adjectives: a possible mistake - an apparent mistake - an alleged mistake.

In summary, within the intra-vocalisation category 'close', the subsystem 'disclaim' acknowledges the existence of an alternative but the alternative is rejected. By contrast, the subsystem 'proclaim' acknowledges the existence of an alternative and signals preference of one alternative over another.

One further distinction with the subsystem 'close' needs to be discussed, that is the distinction between inter-textual and intra-textual negotiation. All the systems and subsystems discussed above set up a dialogue between a text and other, external texts. They are therefore resources for inter-textiual negotiation. However, a text can also negotiate alternatives within its own utterances – intratextual negotiation. For example:

inter-textual denial: The nurse didn't see the documents.

intra-textual denial: Rather than destroying the controversial x-rays,

                         he kept them in a safe.

The last argument is that a cause/effect relationship is expected but then frustrated ('counter-expect'). The key point to White's argument here is the interpretation of logical relations in Bakhtinian terms of a dialogue – a text entering into a dialogue with its own propositions. The subsystems 'expect' ('proclaim') and 'counter-expect' ('disclaim') can be shown as follows:

Figure 9: Intra and Inter textual Samples (White 1998:137-143)

inter-textual expect:	The Doctor, of course, viewed the documents.
	Predictably, the Doctor viewed the documents.
intra-textual expect:	Because the documents were important, the Doctor read them.
inter-textual counter-expect:	Amazingly, the Doctor has resigned this morning.
intra-textual counter-expect:	Although the Doctor was busy, she read the documents.
	The Doctor was busy, yet she read the documents thoroughly.

So far we have considered the engagement options for information exchanges. The same options apply to proposals. Similar to the proposition (1) *The Doctor viewed the documents*, the proposal (2) *The Doctor must view the documents* is a monoglossic utterance in the sense that it ignores heteroglossic diversity and assumes a social solidarity with the reader. Translated into NVC process, (1) 'viewed' is observational discourse. Number (2) 'must view' shows judgement that indicates some CAD stance and content not being revealed to the listener directly. The NVC approach is to make that element the focus of inquiry. In conclusion, the engagement system presents a powerful tool to differentiate NVC/CCCR and culturally affected discourses (CAD).

The patterns of interpersonal positioning and negotiation in conflict situations can be described and related in terms of stance, solidarity, semantic process and heteroglossic diversity. In this medical discourse setting the diversity of features selected for analysis may include aspects from many views and processes.

Different fields of discourse and different genres make different selections from the appraisal system. In secondary school history texts different appraisal patterns have been found in explanations, arguments and chronicling genres (Coffin 1997). Explanations, which are concerned with assessing and weighing up the significance of events, seem to prefer appreciation values. In arguments, the dominant kind of appraisal is the engagement value modality – claims about the past become open to challenge and alternative interpretations. And in a third genre, the chronicling genres, the appraisal choices are made mainly from the judgment system. In these genres there is also a patterning of inscribed and evoked judgment through the generic stages of the text.

Intensity and force are key elements for CCCR agents in interpreting affect. Intensification can be consistent with use of high intensity values (White 1998: 165). Decrease of engagement can be related to high intensity values in cross-cultural avoidance factors.

In the next chapter describing research methodology, this literature of SFG and appraisal models of discourse analysis will be directed toward the description of Non-violent Communication as practiced by its originator, Marshal Rosenberg and recorded role-plays of doctors and nurses in the medical tourism industry. The movement of this literature review from CDA down to the specific synthesis of appraisal framework and SFG toward negotiation exchange feature analysis will be further exemplified in the study's methodological design.

CHAPTER THREE: RESEARCH METHODOLOGY

This chapter sets forth the methods of data collection and discourse analysis in six headings: Research Design, Data Collection, Text Transcription Methodology, Unit of Analysis for NVC and CAD Token Assignments, Technique of Data Analysis, and Process Tests for Split Category Discourse Tokens. The methodology derived from Appraisal Theory (AT) and Systemic Functional Grammar (SFG), tracks social and interpersonal communication processes through their semantic expressions to their lexical grammatical choices. The process for describing and inventorying the negotiation exchange moves is unique to this study and is a result of the availability of NVC discourse as a standard for interpersonal negotiation discourse.

The process by which the researcher developed this methodology for this CCCR study will begin in this introduction with a review of the chosen context in medical tourism, the three phases of intervention and the surveys conducted during each of the phases of the intervention. The intervention context provides a framework for understanding the data. How attitudes via attitude surveys and the ten-month, longitudinal workshop progress relate to the recordings of role-plays and participant practice with CCCR and NVC. During the phases of the intervention, scrambled surveys were administered as pre and post attitude measurements.

When Piyavate hospital was selected in March 2010 for the longitudinal study, pre-surveys of cross-cultural and conflict factors were conducted at three phases:Phase One, pre-assessment, Phase Two, progress assessment, and Phase Three, final assessment. The fifteen Piyavate respondents, fourteen women and one man, all under thirty years old answered a variety of questions related to communication avoidance factors. The ARN's, RN's and one physician answered the social factors surveys that were based on avoidance factors which have been used widely by social researchers since Hofstede's (1980). Here 'patient assertiveness', 'conflict', and

'uncertainty' were found both in the literature and in per-surveys of medical staff at Piyavate.

Each phase's assessment contains two tables, six items each, set A and set B. Below are the pre-assessment tables depicting results of respondents' responses to CCCR question items.

Figure 10: Highlighted CCCR Avoidance Tendencies, Piyavate Pre-Survey Set A

CCCR: Patient Assertiveness Pre-Assessment Items Set A: Piyavate Hospital, Bangkok Total Respondents: 15	Strongly Agree	Agree	Neither Agree nor Disagree	Disagree	Strongly Disagree	Split half For Avoidance
I ask my supervisor for help with assertive foreign patients.	26.6% (4)	40% (6)	26.6% (4)	6.6 %(1)	0% (0)	66.6%
I feel uncomfortable when foreign patients speak in a loud voice.	20% (3)	33.3% (5)	26.6% (4)	13.3% (2)	6.6% (1)	53.3%
I feel surprised when foreign patients make many challenging requests.	26.6% (4)	33.3% (5)	20% % (3)	13.3% (2)	6.6% (1)	59.9%
I feel that foreign patients should try to respect and follow instructions of Thai medical staff	33.3% (4)	40% (6)	33.3% (4)	6.6% (1)	0% (0)	73.3%

I don't have enough confidence in my English language skills when foreign patients ask questions about their care.	46.6% (7)	40% (6)	13.3% (4)	0% (0)	0% (0)	86.6%
I am more comfortable with gentler foreign patients.	26.6% (4)	33.3% (5)	26.6% (4)	13.3% (2)	0% (0)	59.9%

In avoidance studies, factors like assertiveness mixed in the survey items may relate to cross-cultural and interpersonal avoidance. Factors like patient assertiveness were less of a factor as recorded in the post-survey results.

Figure 11: Highlighted Avoidance Tendencies Set B

CCCR: Conflict Avoidance Pre-Assessment Items Set B: Piyavate Hospital, Bangkok March, 2010 Total Respondents: 15	Strongly Agree	Agree	Neither Agree nor Disagree	Disagree	Strongly Disagree	Split half For Avoidance
I feel that conflict is a negative experience.	13.3% (2)	46.6% (7)	20% (3)	20 % (3)	0% (0)	59.9%
When someone thinks they have a good idea, I cooperate with them.	40% (6)	40% (6)	20% (3)	6.6% (1)	0% (0)	80%

I am afraid to enter into conflict with foreign patients.	26.6% (4)	59.9% (9)	13.3 % (2)	0% (0)	0%(0)	86.6%
When a conflict occurs, I tend to back out of the situation and do something else.	26.6% (4)	46.6 (7)	6.6% (1)	13.3% (2)	6.6% (1)	73.3%
I try to avoid people who have very strong opinions.	20% (3)	40% (6)	13.3% (4)	13.3(2)	0% (0)	60%
Differences of opinion are usually not worth worrying about so I try to avoid them.	20% (3)	33.3% (5)	26.6% (4)	13.3% (2)	6.6% (1)	53.3%

Following are mid-term results from August. Design of a measurement instrument for CCCR avoidance factors (1) patient assertiveness, (2) uncertainty avoidance and (3) conflict avoidance also owes a debt to consultations with medical staff who shared their concerns and experiences. Phase Two, progress assessments, conducted during the fifth-month of instruction

Figure 12: Combined Avoidance Results, Piyavate, Progress-Surveys Sets A and B

CCCR: Uncertainty Avoidance Progress Assessment Items Set A: Piyavate Hospital, Bangkok August 26, 2010 Total Respondents: 15	Strongly Agree	Agree	Neither Agree nor Disagree	Disagree	Strongly Disagree	Split half For Avoidance

I am more likely to avoid a foreign patient who speaks with a very difficult accent.	13.3% (2)	33.3% (5)	40% (6)	13.3 %(2)	0% (0)	46.6 from 59.9
I ask for help from other medical staff when I don't understand a foreign patient.	0% (0)	33.3% (5)	53.3 (8)	13.3% (2)	0% (0)	33.3 from 53.3%
I sometimes smile and nod my head when I don't understand a foreign patient.	20% (3)	40% (6)	20% % (3)	20% (3)	0% (0)	60 from 80%
I don't feel confident that I can speak clearly to foreign patients so I say just the minimum.	13.3% (2)	40% (6)	40% (6)	6.6 (1)	0% (0)	53.3 from 80%
Asking questions correctly in English is difficult for me.	13.3% (2)	33.3% (5)	13.3% (4)	26.6 (4)	0% (0)	46.6 from 66.6%
I don't know what to say when I feel confused by something a patient says in English.	6.6% (1)	33.3% (5)	13.3% (2)	40% (6)	6.6 (1)	66.6%
Set B						
When someone thinks they have a good idea, I cooperate with them.	6.6 (1)	40% (6)	40% (6)	13.3% (2)	0% (0)	46.6 from 80%
I am afraid to enter into conflict with foreign patients.	26.6% (4)	33.3% (5)	20% % (3)	20% (3)	0% (0)	59.9% from 86.6
When a conflict occurs, I tend to back out of the situation and do something else.	20% (3)	40% (6)	33.3% (4)	13.3% (2)	0% (0)	60% from 73.3%

I try to avoid people who have very strong opinions.						26.6 from
	6.6 (1)	20% (3)	40% (6)	26.6% (4)	6.6% (1)	60%
Differences of opinion are usually not worth worrying about so I try to avoid them.	13.3% (2)	40% (6)	26.6% (4)	20% (3)	0% (0)	No change from 53.3%

At the end of the intervention final Likert Attitude surveys were administered. Changes in three CCCR avoidance factors (below) are depicted. Participants felt less communicatively unwilling to engage foreign patients at the end of the study.

The tracking of the target language as the NVC cross-cultural genre relies on a baseline set by analysis of NVC discourse as expressed by NVC founder, Marshal Rosenberg. The interval tapings reveal the workshop participants' discourse strategies and NVC 'languages' from the beginning to the end of the workshops (Halliday 1994). Comparisons of the SFG markers reveal the extent to which participants absorbed the communication strategies.

The first phase of this three- phase study defines the cross-cultural communication needs of the Thai, medical tourism setting and then designed an educational intervention targeting those needs. On the research side of the intervention, a new medical English and counseling program and approach was tested. The combined intervention and study may be viewed in three phases: (1) research and development, (2) workshops and concurrent data collection, and (3) data analysis and findings. This study explores the issue of cross-cultural conflict resolution in terms of communication avoidance and engagement and the kinds of language markers present when we choose to "engage". Of available counseling and international "languages" to base this approach on, the researcher found that NVC provided a stable, field tested communication practice flexible enough for a variety of contexts including international medicine.

Figure 13: The Three Research Phases of Developing, Implementing and Studying CCCR

Research Phase One:	• Research and Design • Pre-assessment • Curriculum and lesson prep
Research Phase Two:	• Med. English/NVC workshops • CCCR Data collection • Progress and Final Assessments
Research Phase Three:	• Discourse Analysis of NVC and CAD • Avoidance in CCCR surveys analyzed • CCCR agent role-play, move analysis

The intervention's organizational plan, depicted in **Figure14**, differs in several ways from previous interventions in Thai medical settings and directly relates to methodology because the pedagogy teaches the elements of NVC which are being described and analyzed. The pedagogical context for CCCR interpersonal training took place in a professional development context at the work site. To better understand this context, a survey of the hospital setting, the pedagogical methods and procedures used there and the participant attitude questionnaires administered at intervals during the intervention follow.

Figure 14: Model for CCCR Intervention

Medical English Curriculum and Context	NVC Counseling	NVC Counseling Applied to CCCR Content and Curriculum
• Scaffolding of learning objectives • In-hospital lessons	• Language and Counseling Skills • Weekly practice • Spontaneous topics in role-plays	• BRT • CCCR • Avoidance factors • Engagement factors

The intervention was designed to provide: 1) an integrated medical English curriculum via skills scaffolding techniques to medical professionals at their facility; 2) weekly lessons in counseling skills and application of skills for the duration of a ten-month program; and 3) reinforced language and NVC counseling, learning objectives through a complete curricular application of NVC contents and interpersonal communication. To organize the sequences of activities, Bloom's revised learning-skills taxonomy (BRT) to cross-cultural conflict resolution (CCCR) (Forehand 2005). For example, review of previous vocabulary and 'known' skills was over-lapped with the introduction of new skills. The role plays and free discussions were opportunities to show current iapplications of NVC/CCCR.

In Phase 2, the curriculum and design phase, three design objectives were selected to create a week to week pattern of instruction for the medical English and counseling lessons integrating four English language skills including reading and writing but emphasizing listening and speaking communication skills particularly suited to communication with foreign patients. Participants would ideally be able to contextualize new information and communication strategies in a predictable and efficient way. Scaffolding instruction was therefore researched and then included in the instructional design.

Scaffolding instruction, originating from Lev Vygotsky's socio-cultural theory and his concept of the zone of proximal development (ZPD) creates a framed pattern participants benefit from through individualized instruction (Jaramillo 1996). For example, the zone of proximal development, defined as the distance between what learners can do themselves and the next learning that they can be helped to achieve with competent assistance" (Raymond, 2000), was determined initially by Phase 1 assessment. ZPD of learners was determined by pre-assessment writing samples and interviews with the fifteen workshop participants. The ZPD base-line for

each learner was adjusted per their week to week performance and instructor/ learner interactions. The key to the scaffolding teaching strategy is to provide individualized support based on the learner's ZPD (Chang, Sung, & Chen, 2002), so close attention was paid to each staff members' language, medical English and counseling skills.

Scaffolding instruction in the Thai medical tourism setting provides a pattern of interpersonal health-care and counseling pragmatics and grammatical/lexical development. For example, classes began with vocabulary games reviewing known medical and communication lexis then introducing a few beyond the participants' expertise. I modeled the words and phrases and appropriate grammatical structures for manipulating them in conjunction with power-point diagrams, photos, charts handouts, work sheets and other aids. Weekly, scaffolding pattern supports and facilitated learner development, building on prior knowledge and helping to internalize new information. At the same time, NVC/CCCR stances toward medical instruction and interaction in class scaffolded NVC/CCCR skills from the broad categories of observations, feelings/affect, needs, and requests to the more specific speech functions within these categories like appreciations, instructions, requests for repetition, 'gisting', guessing, paraphrasing and others.

After the completion of the workshops, a final progress report survey was administered. In this ten-month, thirty-lesson, six-phase longitudinal study, CCCR learning outcomes are studied and assessed in several ways. Over the entire period of study, learner language and cultural and linguistic performance via written and recorded English samples are studied using systemic functional grammar (SFG) (Halliday 1994). At the conclusion of the coursework and survey administration phase begins the post analysis phase. Analysis of student recorded role-play samples which is the focus of this dissertation's research analysis, describes communication

protocols and behaviors related most closely with CCCR.

The combined analysis of data samples derived from recorded speech samples and the attitude surveys can shed light on how medical staff attitudes toward international conflicts in medical encounters changed over the course of the intervention. The *affect* findings of medical staff in conjunction with their actual performance in role-plays will be discussed in Chapter Five, Findings. The relevant objective is to discover how--as medical staff acquired more pragmatics for dealing with *affect* in an international medical setting—did their attitudes change as well.

The final survey administered after ten months of medical English and counseling workshops records a significant decrease in three CCCR avoidance factors: patient assertiveness, conflict avoidance, and uncertainty avoidance. The factors were mixed in the second and third survey administration to reduce test/re-test reliability. Complete tallied results of the surveys may be found in Chapter Five, Findings.

This research conducts this type of intervention in cross- cultural conflict resolution through participant practice in engagement in the face of intense *affect* via role-plays, games and other interpersonal communications. The attitude surveys track parallel to role-play performance the attitudes of medical-staff participants. Over the course of the intervention, a relative drop in aversion to *affect* is observable in participant attitude surveys. In brief, **Figure 15** shows how all eighteen avoidance items tallied show a decrease in avoidance and an increase in willingness to engage.

Figure 15: Results of pre-workshop, progress and post workshop, Likert-scale surveys, Piyavate Hospital, Bangkok, 2010-2011.

Patient Assertiveness	Conflict	Uncertainty
Avoidance drops from 66.6% to 12.2 %	Avoidance drops from 68.8% to 15.5%	Avoidance drops from 67.7 to 15.5
Engagement overtakes avoidance with 62.7%	Engagement overtakes avoidance with 61%	Engagement overtakes avoidance with 65.5 %

The intervention progress surveys relate to the analysis in Chapter Four and are reported in the same intervals as the data report the pre-intervention survey results and post-survey results. The post surveys show a drop in avoidance attitudes reported in the lower boxes, per phase of the study. Avoidance can be analyzed in light of the participants' discourse samples.

The CCCR skills analyzed in Chapter Four will examine and test the discourse of participants in a free form group presentation conducted without aid from the teacher. The participants were given CCCR topics and roles on slips of paper, time to brainstorm both roles in the conflict scenario and perform their role-plays to the group. The rationale for performed role plays was that it allows for new skills to be applied in the familiar 'class presentation'.

3.1 RESEARCH DESIGN

Developing methodology for Non-violent Communication (NVC) and Culturally Affected Discourse (CAD) analysis, the researcher has focused on differentiating the genres of NVC and CAD. The matrix described below reveals a method for measuring moves in real time

that may later be compared to moves over the course of the intervention. The pedagogical value of this approach is that specific semantic and grammatical choices made during the process of NVC genre acquisition are captured and described choice by choice in real time and may point to issues relevant to language acquisition.

In addition, three communicative goals are set forth for research design. These research accessibility objectives are: (1) to ensure the methods are easy to duplicate and apply in other research venues or settings; (2) the methods are descriptive, simple and accurate; (3) the methods are accessible across disciplines. On the last point, disciplines from CDA to medical communication and counseling can benefit from understanding how this CDA analysis meets a need for deeper understanding of communication in critical medical encounters as this this work in cross-cultural conflict resolution (CCCR) pragmatics documents.

The research design comprises a matrix of values related to NVC genre discourse and CAD discourses. Differentiation and scaling the matrix involved careful linguistic analysis and practice with NVC negotiation processes. The researcher has ten years of experience with NVC. In addition, the works of Marshal Rosenberg and the NVC discourse examples in his texts have been closely analyzed. As a result, the following scaled matrix was developed.

On the left of the genre differentiating matrix, the NVC discourse values for *affect*, need (judgment), appreciation, inter-textual positioning and other NVC moves is weighted with a negative value. On the right, the values for CAD moves are given a positive value. The result (please see below, **Table 6**) is a research design for analysis of negotiation exchange structure: NVC and Appraisal Tokens for CCCR agents in Recorded Role-plays: Tokens Assigned Numerically per Exchange. For example, -1NVC as a token assignment when located in the *affect* slot of the matrix indicates that the CCCR agent has engaged *affect* in that move. -2NVC, a

rare but possible designation means the move included an additional, viable step in NVC process. The allocation of the token usually would assign to the main clause and not the residue. In interpersonal exchanges, the main clause whether in a head or secondary position (preceded by a modifier) will normally assign the move designation that is, the move will respond or initiate response in the following exchanges.

The completion of the second step in one move is assigned a double move token (2CAD or -2NVC) when the moves generate responsive exchanges to both process steps. For example, in an NVC exchange, if *affect* is addressed and then need, the following responses would need to incorporate both steps to receive the -2NVC indicating exchange density.

Other studies by Martin and Rose, 2003, for example and others have designated token values for appraisal subcategories as this study does. What is unique about this approach, is that it employs a known, second discourse system for a scaled, contrastive analysis. With respect to these appraisal categories, NVC does exhibit responsive communication in each category. However, the processes, semantics, and lexical/grammatical choices vary in each instance from CAD discourse. For example, power relations are related to CAD and discourse as egalitarian, needs negotiation characterizes NVC process. In CAD choice is influenced and sometimes governed by context and social processes foreign to NVC's interpersonal exchange processes. Appraisal framework and the token assignment process track these process differences to reveal characteristics of a distinct, compassionate medical discourse system of choices. Linguistically, semantically and meta-linguistically, the 'Negotiation Exchange Structure Matrix' used in this study synthesizes field, process, semantic and lexical-grammatical views of CCCR moves, creating a map of the NVC process of discourse within the Appraisal/ Framework:

Table 6: Negotiation Exchange Tokens for CCCR Agent in Recorded Role-plays

NVC Discourse Genre	2 or more NVC tokens - 2	1 NVC token -1	No tokens 0	1 CAD token 1	2 or more CAD tokens 2	Appraisal Analysis of Culturally Affected Discourse (CAD)
Affect						Affect
Needs						Judgment
Intertextuality						Intertextuality
Appreciation:						Appreciation
Other NVC moves ('gisting', guessing, requesting repetition, observational 'fact queries' and others)						Other CAD moves including service encounter, institutional procedural and culturally specific moves.

In this research design, negotiation exchange structure (Martin and Rose 2003 221-234) is applied to CCCR data from professional development workshops in an international, medical tourism hospital. In addition, the appraisal token systems were researched and selected. NVC and Appraisal Tokens for CCCR agents in recorded role-plays represent the application of the research. Tokens assigned numerically per NVC-agent move indicate the frequency of discourse elements of either NVC discourse or CAD. Exchanges are classified as 1 move for the CCCR agent unless a double move density is assigned. **Table 7** below shows an example token exchange matrix when a –1NVC token assignment is made for *affect*. Sections 3.4 and 3.5 describe in detail move density assignments and the assignment process of tokens to each of the token categories on the matrix. For global discussion of design features, the matrix may be viewed as a 'genre dial'. From left to right the features of NVC and CAD are differentiated by five categories of genre token assignments.

Table 7: Appraisal/SFG Tokens for Negotiation Exchange Structures in CCCR Discourse

Analysis

NVC Discourse Genre	2 or more NVC tokens -2	1 NVC token -1	No tokens 0	1 CAD token 1	2 or more CAD tokens 2	Appraisal Analysis of Culturally Affected Discourse (CAD)
Affect		-1				Affect
Needs						Judgment
Intertextuality						Intertextuality
Appreciation:						Appreciation
Other NVC moves						Other CAD moves

When a move is process-tested semantically, lexically and grammatically, an NVC token was assigned to its corresponding NVC appraisal category. It receives a negative numerical distinction. The CAD tokens which involve different, culturally coded processes on the same appraisal frame category, receive a positive value. For example, a move like, "When you feel frustrated, are you needing more time to finish your job?" invokes NVC needs negotiation process. It contains the interrogative mood and inquires directly about the need beneath the feeling of frustration. It would score a negative 1, according to the matrix assignments. It would appear in the need category because the main clause of the interrogative invokes need. Conversely, "You have a bad attitude about your work" belongs to judgment –the corresponding, CAD move. In this way, the matrix serves as a quick graph of a very specific process of differentiation between CAD and NVC genres.

From another design view, I may here point you ahead to the analysis design of chapter four. The use of the matrix to describe data chronologically as described here is just one view in the design of this research. In chapter four, the matrix will serve to show characteristics of Thai

medical staff English prior to intervention and post intervention. The study also looks at 'turning point' matrix examples. During certain weeks, thresholds regarding certain CAD and NVC genre elements were crossed, and close analysis of these texts has lead to some interesting findings regarding Thai communication styles, English usage in Thailand, and interpersonal communication.

This grammatically and semantically scaled differential analysis of negotiation exchange structure in cross cultural-conflict resolution (CCCR) is the first of its kind, so this simple descriptive design was selected. Behind this design, in the process of token assignment, grammatical features of CCCR communication are defined and referenced during token assignment using functional linguistics and appraisal theory. **Figure 16** highlights within these fields of study, the features most directly apparent in CCCR, medical discourse.

Figure 16: The Register Features of Cross-cultural Conflict Exchanges in Thai Medical Tourism

Within the range of register features, interpersonal negotiation exchange structure features and corresponding examples of lexical/grammatical markers are highlighted.	_Metafunction_	_Discourse_	_Lexical-grammatical_
Field	Ideational	Inter-textual dynamics	Genre features Genre shifting Hypotactic projections

Tenor	Interpersonal	Negotiation Exchange Structure Observational and Evaluative Stances	Mood and mood elements, modality Speech functions, attitude, affect judgment, appreciation inter-textual and dialogic positioning
Mode	Textual	Reference (participant tracking)	Information structure

Within the register components, interpersonal register features describe Thai medical staff/foreign patient communication. Most contact between staff and patients is oral. Although reports and other documents come into play, the conversational routines and spoken communication provide an interpersonal focus for this research. Tenor of exchange is highlighted methodologically in two ways: (1) analysis of discourse process and context relate to semantic patterns and choices (2) analysis of lexical-grammatical patterns, relate back to process and semantic patterns—and therefore context and process as well. Of particular pedagogical interest are any changes in patterns noted at intervals during the study. The study's analysis matrix designations derive from the appraisal framework and NVC discourse features. Analysis of data takes place first at the process level and then is related to communicative functions in CCCR discourse.

3.2   DATA COLLECTION

Data is based on 100 CCCR agent moves per phase of the study drawn from fifty-nine total texts. The context and methods of data collection were responsive to a hospital setting where confidentiality and professional modes of conduct prescribed by the hospital play roles in what kind of data may be collected. Although role-play prompts were cast in terms of hypothetical scenarios, the medical staff discussions of

issues that arise between foreign patients and staff soon began to shape and influence role-plays. In other words, a list of common conflicts began to emerge through discussions and by phase three, the role-play prompts included many scenarios suggested by the staff. The calendar of the Wednesday workshops shown below lists the nine months of intervention. In January, post intervention interviews and recreations of patient /staff encounters were recorded. Ten months, weekly meetings and post course update meetings during which patient medical staff examples from the hospital were discussed, recreated, and recorded. The intervention was divided into three, three month phases: April, May and June, Phase One; July, August and September, Phase Two; October, November and December, Phase Three. In January of 2011, the researcher gathered e-mail data from participants who agreed to make logs of their NVC use at work. The medical staff who agreed to participate recreated and recorded these actual CCCR encounters included in the analysis and discussion of the results of this study.

Figure 17: Intervention Calendar:

April 22, 2010 to January 16, 2011

April	22, 28
May	06, 13, 20, 27
June	03, 10, 17, 24
July	01, 18, 15, 22 29
August	05, 12, 19, 26
September	02, 09, 16, 23, 30
October	07, [14-21 no workshops] 28
November	04, 11, 18, 25
December	02, 09, 16, 23, 30
January	06, 13, 15, 16 [post-workshop interviews]

During each of the phases of the study, data was gathered via recordings of role-plays.

Some sample role-play prompts for different categories of CCCR are shown below:

Table 8: CCCR Prompts for Data Collection

Topic One: Dealing with **Uncertainty**: An elderly Korean man who prefers to be called "Mr. "Kim comes in with a specific problem, but he is not able to communicate it. He looks at the floor or out the window and changes the topic. He asks a lot of questions about the staff's credentials, education, etc. He can speak English fairly well, but he does not understand written English. He feels embarrassed about this. He likes to speak out and express himself; however, he has come in today with an embarrassing problem of a personal nature. He keeps asking for a male nurse or doctor, but none are available. You will try to gather the information needed for his treatment.

Topic Two: Dealing with **Conflict**: A patient's mother feels she needs to be told her daughter's diagnosis. Earlier, the daughter (18 years old, American) has asked you to keep the information confidential. In your exam room, the daughter and mother argue and you try to negotiate a way that everyone's needs may be met.

Topic Three: Dealing with **Assertiveness**: A British patient who had recently had a stroke, insists that he be discharged. He must catch a flight back to Europe for a job interview. Your hospital staff told him:"it is the hospital's rule that you may not be discharged." He ignores the "order" and begins packing to go. Air-travel may kill him, and you want to try to help him see the danger he is in.

Topic Four: Subtopics for Translating **Blame, Judgment, Criticism:**

1. A doctor overhears two nurses talking about him, "He is the slowest to respond to emergency calls." He walks to them and asks, "So you think I am lazy, don't you?

2. A friend is worried about her relationship and tells you, "My boyfriend never expresses affection to me."

3. A friend is having a difficult time at work and says "My boss can never make a decision on time and then we have to hurry too much and do a bad job."

4. You are helping a new nurse learn the computerized report system. The new nurse says, ""Wow, you think you are the smartest person in the world, don't you?"

5. Your mother tells you, "The doctor refuses to explain anything to me" as you join her in the waiting room before the doctor returns.

Topic Five: Dealing with **Anger:** A patient with rheumatoid arthritis, Mrs. Brown, is very sensitive to needles and it really hurts her when you draw blood. Today, it was especially painful. When you take the vial of blood you realize you used the wrong vial. You must draw blood again. It is your mistake, but Mrs Brown must give you some more blood for an important test. She becomes very angry and refuses to cooperate.

Topic Six: Dealing with **Cultural Differences:** A middle-Eastern man and his daughter are fasting for the religious holidays, but their employers have scheduled physical exams. They feel frustrated. They become aggressive when the nurse says "The Doctor. does not advise doing the blood tests for annual physical exams during long fasts."

The categories of prompts from assertiveness to conflict avoidance correspond to cultural and interpersonal barriers to communication surveyed in the intervention. These avoidance factors are derived from Hofstede (1980). By directing prompts and practice at these specific areas participants revealed they were most repelled or averse to, the NVC moves and CAD moves show their cultural and newly learned communication strategies in high relief. The data collected over the course of the study show moves in variance with early phase choices. These are indicators of changing levels move awareness for CCCR.

The method for data collection was audio recording via an H2 field recorder. At each recording session, participants considered hypothetical roles they would play and act out—one partner using values and behaviors associated with a non-CCCR/NVC stance while the other partner was the designated CCCR/NVC agent. Sometimes genders described in the role-play prompts were not available in the groups, so some creative role-plays took place during which, for example, two nurses played the roles of boyfriend and girlfriend during an interpersonal conflict. The data collected show the participants applying CCCR/NVC in a controlled workshop setting where the familiar 'presentation' mode for hypothetical role-plays was well accepted by the group. From time to time personal issues were discussed confidentially in the sessions with various participants and the instructor using CCCR/NVC. However, the data for analysis here includes the controlled prompts and exercises via hypothetical role-play scenarios and performances.

The H2 field recorder was chosen for this study for its surround, 4 microphone head which allows each participant's voice regardless of location in the room to be recorded. In addition, the H2 can record dense, WAVE or MP3 file recordings for high quality digital reference. **Figure 18** shows the H2 recorder and its relative size next to a coffee mug. After the

first sessions during which samples were recorded and listened to, the participants became more and more comfortable with the field recorder.

Figure 18: The H2 Field Recorder

Recordings during the first phase of workshops tended to be short. Twenty-eight role-plays were required to meet the 100 CCCR data threshold while in Phase 2, 17 role-plays and in Phase 3, 15 role-plays respectively. The lower numbers of role-plays in Phases 2 and 3 are indicative that CCCR agents are engaging in longer interpersonal exchanges.

3.3   TEXT TRANSCRIPTION METHODOLOGY

The recordings of texts from the H2 field recordings were collected and catalogued. Quality recordings of more than one hundred exchanges from each phase of the study were transcribed. Carter and McCarthy's *Spoken English* (1996) was consulted for transcription methodologies. A variety of conventions in transcription format from lexical/phonetic transcription to transcriptions for specific purposes were considered.

To meet this study's research needs in 'global' English and in cross-cultural conflict resolution (CCCR), a non-phonetic, non- dialectical transcription methodology was chosen. A standard, international-English translation methodology was selected. Here follows the rationale for the selection of a non-phonetic or dialectical transcription.

The multi-disciplinary and cross-cultural nature of the research figures foremost in

standard transcription code selection. Where the content is clear and communicative in English, standard spelling usage based on international English dictionaries instead of some system of dialectical or phonetic code is preferable. Standard spellings allow for concordance creation, quick tallying and search functions to relate different usage and occurrence of lexical choices. Features may be easily searched and tallied using standard Word features. Consider the flowing example from this study illustrating Carter and McCarthy format for transcription. Please note how in **Figure 19** below lexical features are in standard dictionary format, but grammatical features remain as spoken in the recordings. For this sample transcription, the CCCR agent and counter-part in the role-play were instructed to play the medical staff member and the patient in the following scenario. When each felt the exchange had finished the communication topic, or began speaking in Thai, the recording was stopped. This tendency may be interpreted as a way the participants were indicating that they had finished in some cases and perhaps felt that they had met a challenge they could not overcome.

Figure 19: Transcription Methodology: Sample from Phase Three

Phase: 3   Text: 3   Moves: 8

Transcript [even numbers: CCCR/NVC agent]

[a woman with arthritis resents being asked to give blood multiple times in a short time period]

1.   <S 01> You better not be in here again to get blood!

2.   <S 02> Are you feeling angry because I have come again to get more blood?

3. <S 01> Yes I am. It is so painful and you know it. Why couldn't you get all of it at the same time?

4. <S 02> I am sorry for your pain and I understand your frustration that we couldn't get it all before. I wish that too. This blood test requires a different vial and laboratory. Would you like to choose where I draw the blood? We did this arm last time—how about the other arm?

5. <S 01> Yeah, this one please.

6. <S 02> Is there anything else you would like now?

7. <S 01> Well, what are my choices?

8. <S 02> How about something from the kitchen?

9. <S 01> I would like some poached eggs with my dinner.

10. <S 02> What kind of eggs?

11. <S 01> Poached, like steamed…

12. <S 02> Poached eggs…

13. <S 01> Is that it?

14. <S 02> Yes, All done with the blood.

　　　　　Poached eggs?

15. <S 01> Yes please

16. <S 02> I'll go speak to the cook.

17. <S 01> Thank you.

Transcription methodology here relates to finding common, easily understandable conventions geared toward discourse analysis of needs negotiation processes and lexical analysis. In the sample above, the nurse charged with re-collecting blood from an arthritic woman comes ready to negotiate needs—and even though the need to avoid the blood collection is not really possible for the woman's health depends on these blood tests, the nurse knows to offer some relief by meeting other needs, like needs for choice, respect, understanding, sympathy, fairness and others. The eggs she gets are symbolic of the greater needs negotiation processes at work. If this study's purpose were not 'global' communication and needs negotiation centered, it might employ other conventions for pointing out phonetic or other features.

The easy to read transcription format of Carter and McCarthy chapter eleven which is concerned with service encounters was selected for this study. The service encounter as a CAD interpersonal exchange type is the most common CAD exchange type in this study. The format simplifies line, move, and exchange referencing (Carter and MacCarthy 1997: 91-96). For these reasons and the convenience of dictionary referenced lexical features, the following service-encounter appropriate, transcription conventions were selected:

(1) line numbers,

(2) agent designations by first and second moves in the role-play <S 01> and <S 02> respectively,

(3) standard dictionary rather than dialectical spellings

(4) standard punctuation from ellipses to exclamation marks and question marks

(5) standardized setting, sequence, topic and CCCR agent move duration designations, **Phase: 3**

Text: 3   Moves: 8, Transcript [even numbers: CCCR/NVC agent][a woman with

arthritis resents being asked to give blood multiple times in a short time period]for example

(6) general commentary and

(7) highlighting of moves or exchanges which contain the focal features of critical discourse

analysis and discussion.

These standard features reported in the transcript titling, **Phase 3** and **Text 3**, are reflected

in the audio index labelling (APPENDIX FOUR): **Phase 3 Text 3** appears '**3-3**' in both the

audio index, and in the attached electronic index of the CD recording.

3.4   UNIT OF ANALYSIS FOR CAD AND NVC TOKEN ASSIGNMENTS

Appraisal Theory token assignment methodologies were selected for genre analysis

because it allows for synthesizing multiple levels of semantic relationships and relating them to

semantic processes and grammatical/lexical choices.   Token assignments in the appraisal

framework enable the relation of complex linguistic analyses using a variety of linguistic models

in relatively easy-to-relate terms that lend themselves to graphic representation. For this CAD

and NVC differentiating discourse analysis of multi-layered linguistic events boundaries

between linguistic genres parsed using a well-defined token system. In this study, the appraisal,

token assignment methodology differentiates culturally affected discourse from NVC discourse

in CCCR negotiation texts transcribed from role-plays.

The two layers of methodologies are described in terms of implicit or "back-grounded"

functionality and explicit functionality. The unit of analysis, or token, is assigned per move and

per exchange, that is to say, each time the designated NVC speaker speaks in the conversation a

token is assigned along a differentiated scale, based on the appraisal framework. Relevant to our discussion of tokens as units of differentiation of CAD or NVC discourse, the relationship between semantic-grammatical choices and the token units is important to underscore here.

Semantic-grammatical resources relate to a number of processes that are culturally encoded and encoded in NVC discourse. The cultural and NVC discourses include very different processes and thus wide variance in CCCR content and expression. A move in the texts can exhibit many features: stance, engagement, mood, *affect*, force, modality, speech function etc. as critical considerations in token evaluation. These features, though key in relating semantic processes to lexical-grammatical choice, do not stand alone in token assignment considerations. The appraisal framework and this study relate these choices or instances of mood or modality, for example, to one or more of the appraisal sub-categories: *affect*, judgment, appreciation, and inter-textual positioning. Thus analysis begins in grammatical semantic classification and relation to process, and then is further described in terms of appraisal framework terms and the negotiation exchange process described by Martin and Rose (2003: 219-251). On the scale of CCCR features, the token assignments of text exchanges are assigned as either CAD or NVC as they are occuring in the context of these implicit boundaries and possibilities and explicit negotiation exchange processes. For example, "What is your name?" is process tested as either observational NVC discourse or service encounter CAD discourse. Here, we will over-view implicit factors like dialogism and stance, and mood and modality before turning our attention to explicit, appraisal factors in section 3.5's Technique of Data Analysis: *Affect*, Judgment, Appreciation, and Inter-textual Positioning.

An implicit factor in one token assignment relates to a speaker's potential to express a variety of meanings within lexical-grammatically available choices. A choice, in say-- mood,

may indicate a number of contrasting semantic intentions. Appraisal framework contextualizes the lexical-grammatical choices under higher level headings like dialogic positioning. Bakhtin's now widely influential notion of dialogism and heteroglossia holds that all communication, whether written or spoken, is 'dialogic' in that to speak or write is always to refer to, or to take up in some way, what has been said/written before, and simultaneously to anticipate the responses of actual, potential or imagined readers/listeners.

The performed role-play scenarios under analysis benefit from such a framework in that CCCR research concerns itself with the pliability of discourse and the discourse means for resolving conflicts that occur spontaneously. The dialogic positioning of speakers is paramount if solutions to conflicts are to appear in live conversation. For example, concrete steps for incorporating other speaker's texts into the discourse via paraphrasing and gisting is a key element of NVC texts and processes. The explicit referencing relates to semantic process well known and practiced in NVC. In contrast, varieties of authoritarian stances or other cross-culturally exclusive affective barriers are often impediments to cross-cultural engagement and are more characteristic of CAD discourse.

Elements here described as 'implicit' would include those specific grammatical/lexical markers which potentially may be assigned in either direction—toward or away from CAD or NVC discourse. The implicit element's relevance is realized during process analysis when the grammatical/lexical features are mapped according to appraisal framework's explicit, higher level subcategories like *affect* and judgement. The way that this study synthesizes elements like mood and modality into token assignments flows the course of some studies that have related grammatical/lexical features to work with 'stance'—among others.

These studies which have examined stance, for example, have been concerned with stance formulations which have traditionally been analysed under such headings as modality (see for example Palmer 1986), polarity (see for example Pagano 1994), evidentiality (Chafe &Nichols 1986), hedging/boosting (Markkanen & Schröder 1997, Hyland 1996, Myers 1989, Meyer 1997), vague language (Channell 1994), intensification (Labov 1984), and meta-discourse (Crismore 1989). In the appraisal framework, these lexico-grammatically diverse wordings come together on the grounds that they are all resources which vary "the terms of the speaker's engagement with propositions and proposals, which vary what is at stake interpersonally both in individual utterances and as the texts unfolds cumulatively " (Martin and White 2009). The situation embodies values of stance which implicitly relate to lexico-grammatical choices. From another view, the lexical-grammatical markers in analysis remain undetermined in themselves but attach to a variety of possible processes during token assignment tests. The layers of appraisal framework applied during data analysis not only define elements of interpersonal meaning, but also reveal important values and processes in play socially and semantically.

The approach here, applicable to interpersonal communication analysis accounts for the inter-subjective functionality of these values of engagement during token assignment. The live, role-play scenarios under analysis benefit from such a framework in that CCCR research concerns itself with the pliability of discourse and the discourse means for resolving conflicts occur 'on the fly". The dialogic positioning of speakers is paramount if solutions to conflicts are to appear in live conversation. For example, concrete steps for incorporating other speaker's texts into the discourse via paraphrasing and gisting is a key element of NVC texts and processes, while affective barriers are often impediments to cross-cultural engagement and are more characteristic of CAD discourse.

The approach adopted by the appraisal framework holds that the functionality of these resources can only be adequately explained when such dialogistic effects are taken into account. In terms of CCCR research, research inquiries into how cultural and interpersonal processes shed light on individual texts are paramount. Factors that relate to conflict resolution, engagement and dialogistic effects help identify exchanges that align themselves with respect to positions which are in some way alternatives to that being advanced by the conflict scenario itself. Speakers are engaged in addressing CCCR from a compassionate communication stance where values differ from cultural norms. The speaker stances diverge from norms in grammatically and semantically significant ways—including in how mood and modality elements occur in CCCR.

The appraisal framework represents both a continuation and a departure from much of the mood and modality literature (see for example, Lyons 1977, Palmer 1986 or Chafe &Nichols 1986). Mood and modality are semantic-grammatical choices indicative of a wide range of choices in exchanges. In a single mood element, for example, a variety of separate semantic possibilities arise: from an imperative command, "Listen closely students" indicating stance and authority, or "Cut along the dotted lines" indicating instructions as in steps in a process. Thus, this study takes advantage of the appraisal framework, token-assignment system which allows semantic and social processes to guide and systematize assignments of grammatical markers like mood and modality elements within broader semantic processes. Exchanges move dynamically among possibilities. Utterances are responsive to a variety of responsive positions which are held and opposed as in the following schema proposed by Martin and Rose (2007).

Figure 20: Dialogic Alternatives Adapted from Martin and Rose (2010).

Disclaim – the textual voice positions itself as at odds with, or rejecting, some contrary position:

1. (deny) negation
2. (counter) concession/counter expectation

Proclaim – by representing the proposition as highly warrantable (compelling, valid, plausible, well-founded, generally agreed, reliable etc), the textual voice sets itself against, suppresses or rules out alternative positions:

3. (concur) *naturally..., of course..., obviously..., admittedly...etc;* some types of 'rhetorical' question
4. (pronounce) *I contend..., the truth of the matter is..., there can be no doubt that...etc*
5. (endorse) *X has demonstrated that...; X as compellingly argued...etc*

Entertain – by representing the proposition as grounded in a contingent, individual subjecthood, the textual voice represents the proposition as but one of a range of possible positions – it thereby **entertains** or invokes these dialogic alternatives

6. *it seems, the evidence suggests, apparently, I hear*
7. *perhaps, probably, maybe, it's possible, may/will/must;* some types of 'rhetorical' question

Attribute – by representing proposition as grounded in the subject-hood of an external voice, the textual voice represents the proposition as but one of a range of possible positions – it thereby entertains or invokes these dialogic alternatives:
8. (acknowledge) *X said.., X believes..., according to X, in X's vie* 9.
9. (distance) *X claims that, the myth that...., it's rumoured that*

Martin and Rose describe dialogic contraction and expansion as opposing processes underlying the degree to which speakers include and exclude alternative viewpoints. "These various options, then, are seen as enabling variations in stance - they all provide for a different orientation to the heteroglossic diversity in which the text operates. They are further seen as falling into two wider categories according to a broader-scale axis of variation in

rhetorical functionality" (Martin and Rose 2007).

The categories they propose and that are also used in this study are characterized as either 'dialogically expansive' or 'dialogically contractive', with the distinction turning on "the degree to which an utterance, by dint of one or more of these wordings, entertains dialogically alternative positions and voices (dialogic expansion), or alternatively, acts to challenge, fend off or restrict the scope of such (dialogic contraction)" (Martin and Rose 2007).

From the appraisal framework's dialogistic perspective, negation is a resource for introducing the alternative positive position into the dialog, and acknowledging it and engaging with it, and then rejecting it. Thus in these interpersonal/dialogistic terms, the negative is not the simple logical opposite of the positive, since the negative carries with it the positive, while the positive does not reciprocally carry the negative. This aspect of the negative, though perhaps at odds with common-sense understandings, has been quite widely noted in the literature – see for example, Leech 1983: 101, Pagano 1994 or Fairclough 1992: 121.

Figure 21: Summary of Dialogic Alternatives (Martin and Rose 2007).

Dialogic contraction:

Disclaim:
Deny: e.g. *It is a review which <u>doesn't</u> consider the feelings of the Chinese community.*
Counter: e.g. *<u>What is surprising is</u> to find such offensive opinions in the Post.*

Proclaim:
Concur: e.g. *The Premier, <u>of course,</u> wants us to think what a fine anti-racist fellow he is.*
Pronounce: e.g. *<u>It is absolutely clear to me that</u> what Charlotte was arguing was that Crouching Tiger was a bad film.*

Endorse: *Doctor Ruffman's work has <u>shown</u> that parents or carers who talk to their children about mental states -thoughts, beliefs, desires and feelings*

> *end up with children who know much earlier in life what another person is thinking.*
>
> **Dialogic expansion** Entertain: e.g. *Perhaps the most telling thing about Charlotte Raven's review of Crouching Tiger isn't in the review itself but in the one line preamble on the Guardian website.*
>
> **Attribute**
> Attribute/Acknowledge: e.g. *It states: "Crashing bore, wooden drama: Charlotte Raven dares to differ from the unanimous acclaim for Ang Lee's Crouching Tiger, Hidden Dragon".*
> Attribute/Distance: e.g. *and someone went as far as to suggest that by using the phrase "it seemed to contain multitudes" to describe the performance of the cast, Charlotte was alluding to Western images of "Chinese masses".*

This study examines the speech samples of nurses and doctors learning NVC as a tool for CCCR. In the role-plays under examination, the inter-textual and dialogic processes identified relate to specific lexical-grammatical choices in an NVC and CAD genre choices. Here, the different choices the participants have made are analyzed using the appraisal framework: *Affect*, Judgement, Appreciation, Inter-textual Positioning. The particular research focus and assignment of tokens is based on negotiation exchange features (Martin and Rose 2007) as they are expressed in CAD or NVC discourse.

3.5 TECHNIQUE OF DATA ANALYSIS

In CCCR role-plays, participants addressed a variety of conflict scenarios, and the recorded and transcribed texts are grouped chronologically, from pre-texts to texts from each of the phases of the study—and post study work-site role-plays. The topic, date recorded, and data convey the periodicity of recordings along the ten-months of intervention and data collection.

The technique in this study follows discourse analysis process described in Halliday and Webster's 2009 *Continuum Companion to Systemic Functional Linguistics*. The process entails analysis from broad to particular, from use of language, to situation, semantics, functional components, formal expressions and choices (grammar). The interpersonal and cross-cultural situation is complex and benefits from previous work in negotiation (Martin and Rose 2007).

The technique of data analysis as it moves through these levels draws heavily on negotiation exchange features in the appraisal framework (Martin and Rose 2007) relating them to genre features of NVC and CAD discourses. Because the specific focus of analytical study concerns negotiation exchange process, and how those processes differ in NVC and CAD discourse, this study's appraisal categories not only include standard appraisal categories of *affect*, judgment, appreciation and inter-textual positioning, but also contain a special category for other NVC and CAD features related to negotiation exchange.

The data analysis integrates negotiation exchange features in all four categories of appraisal framework by relating each move in an exchange to a value or values on a differentiated scale. It is the availability of a known discourse genre like NVC that has enabled the research design to incorporate this framed and differentiated token assignment. The values and processes of NVC as a known discourse genre and appraisal framework's scope for analyzing culturally affected discourse make a differentiated and scaled view of L2 interpersonal language study of this kind possible.

An appraisal analysis allows a wide enough view of semantic and grammatical choices and features to relate them to processes and values characteristic of either CAD or NVC discourse genres. To see how systematically semantic and social processes may be related to either NVC or culturally affected discourse (CAD), we may describe this study's technique of

data analysis within the appraisal, negotiation exchange framework.

A quick look at the matrix of appraisal and NVC features reveals striking similarities in each of the major subcategories of appraisal as each applies to its inverse and opposite value in NVC/ CAD token assignment. On the left side of table NVC assigned tokens receive a value of less than zero.

Table 9:   Exchange Tokens for CCCR agent in Recorded Role-plays

NVC Discourse Genre	2 or more NVC tokens -2	1 NVC token -1	No tokens 0	1 CAD token 1	2 or more CAD tokens 2	Appraisal Analysis of Culturally Affected Discourse (CAD)
Affect						Affect
Needs						Judgment
Intertextuality						Intertextuality
Appreciation:						Appreciation
Other NVC moves						Other CAD moves

CAD tokens receive a positive value and NVC tokens a negative value. In the table above, The technique of data analysis: each move is assigned a scaled and differentiated   token based on NVC discourse processes and values, and the contrasting CAD values and processes.

Under **Affect (1),** Appraisal framework (website 2012) "we are concerned with emotions, with positive and negative emotional responses and dispositions. Affectual positioning may be indicated through:

1.   verbs of emotion (Mental Processes) such as *to love/to hate, to frighten/to reassure, to interest/to bore, to enrage/to placate - (Your offer pleases me, I hate chocolate.)*

2. adverbs (typically Circumstances of Manner) such as *happily/sadly (Sadly the government has decided to abandon its commitment to the comprehensive school system.)*

3. adjectives of emotion *happy/sad, worried/confident, angry/pleased, keen/uninterested - (I'm sad you've decided to do that, I'm happy she's joining the group, She's proud of her achievements, he's frightened of spiders, etc)*,

4. nominalisation (the turning of verbs and adjectives into nouns) *joy/despair, confidence/insecurity (His fear was obvious to all, I was overcome with joy)* "

Affect moves implicitly and explicitly. Token assignments include attention to potential process links to implicitly revealed functions through social context, behavioral queues, tone, non-verbal and indirect verbal expressions of emotional states. In NVC process when *affect* informs a conversation, it is linked to NVC needs negotiation processes. On the other hand, a nurse or doctor may request directly about a patient's *affect* in day to day interactions with patients—without any NVC discourse process. How may we distinguish the difference? *Affect* mentioned directly does not meet the threshold for token assignment for NVC or CAD. Consider the following example.

"Would you please tell me if you feel discomfort, and we can adjust the straps?"

What informs this move? Is it an obligatory step a nurse has memorized for her work station? Is it a compassionate person, who considers her patient's comfort as a need we all have—and in hospitals—may appear to be at risk for most patients. Does that nurse use a communication process sensitive to feelings and needs of patients and with the ability to help patients to express themselves fully?

This is the sort of distinction that the technique of token assignment here employs to link the move as a token to broader processes—in this case, the needs negotiation process of NVC.

In NVC needs-negotiation process, *affect* arises and creates 'a cloud' of feelings. In many studies on affective barriers, initial *affect* reactions tend to end engagement. In NVC this *affect* becomes the source of inquiry and site of action. The first aid in NVC is to aid communication of needs. Culturally and personally, people react differently to different feelings. Sorting through the feelings and discovering and understanding needs is what compassionate negotiation is focused on attaining.

So negotiation processes of staff with training in NVC focus on feelings arising around needs, and while treating the patients, staff with NVC training keep present and 'alive with the patients' feelings and needs, moment by moment exchange to exchange.

When in NVC process an explicit instance of *affect* then arises, it becomes the focus of negotiation. In NVC discourse these encounters are considered part of a larger needs negotiation process.

Doctors and nurses also use scales of feeling or pain intensity as in: "Please describe the level of pain in this arm on a scale from one to ten, ten being the most painful". In this study, interpersonal conflicts in hospital settings were the focus, so doctors and nurses were exploring other connections between feelings and needs as well. When patients were reacting strongly and were seen by staff to be "in conflict" in some way with hospital staff, NVC negotiation might inquire directly about *affect* by asking, "Are you feeling angry because your need to be understood isn't being met?"

Affect assignments of tokens away from or toward NVC may be seen most often in terms of linkage to larger NVC process in play in the moves of participants. If NVC process is

excluded, then CAD tests on the moves explore the nature of the potential cultural/social factors present in the expressions of *affect* and in the ways *affect* is perceived and dealt with in institutional settings. Features of cultural *affect* highlighted in the introduction to this dissertation showed certain affective barriers studied were perceived as problems in communication by both patients and medical staff. In the Thai medical tourism setting, these include power distance, anger avoidance, and conflict avoidance. Practice with role-plays in these categories of affective barriers was carried out for the duration of a ten month, weekly, ninety-minute session.

Over the course of the study, some affective barriers to communication remained more persistent than others and suggest that for some medical staff, some cultural/social affective values pose the biggest problems for them in cross-cultural communication. The token differentiation system applied to the data has made the larger view of student progress in acquiring NVC discourse obtainable.

The appraisal framework applied to NVC reveals distinct, non-CAD values and processes around expressions of *affect*. Where appraisal theory then classifies a separate category for judgement, NVC would link *affect* to judgment more directly.

In NVC, judgment and evaluation are considered as part of the cloud of affective information. The important information in a judgment in NVC is contained in the attitude of the speaker. The judgment itself would be rephrased by an NVC speaker and then incorporated into the needs negotiation process. For example, a patient may say, "That is a terrible nurse. I never got my meds last night!" The NVC trained staff member might ask, "Are you feeling angry because you feel a lot of pain and didn't sleep well knowing you should get meds?" The judgment is moved into the needs negotiation process. When a move is examined for token assignment, and NVC process is excluded, Appraisal framework analysis of CAD is invoked for

clarification of token assignments. When several move features compete for attention in CCCR, the system of attitude in appraisal is responsive in four major and one minor category. *Affect* and next category, judgment relate to needs negotiation process and engagement in NVC discourse pragmatics.

Judgment (2), in appraisal framework is a system of attitudinal positioning, and is, by appraisal definition, shaped by the particular cultural and ideological situation in which it operates (Martin and Rose 1994: 63). The way people make Judgments about morality, legality, capacity, normality etc will always be determined by the culture in which they live and by their own individual experiences, expectations, assumptions and beliefs. So there's always the possibility that the same event will receive different evaluative judgments, according to the ideological position of the person making those claims. When a move contains evaluative or 'judgment language' and that is not then in turn involved in a needs negotiation process, the CAD token is investigated, described and assigned.

Appreciation (3), in the appraisal framework, associates closely with judgment in that CAD appreciations "attach to the phenomenon under evaluation rather than the human subject doing the evaluation". Thus is precisely the token differentiating point with NVC discourse. Appreciation in NVC is explicitly focused in needs negotiation process and attention in NVC is paid to making appreciations that meet speaker and listener needs. Judgment in appraisal framework, on the other hand, helps us distinguish characteristics of culturally encoded appreciation processes: `a beautiful sunset' is represented as residing in the `sunset' rather than in the person doing the evaluation. Such values involve a move "by which the subjective, individual, contingent evaluative response by the appraiser is transferred from that appraiser and represented as a property which is possessed of the evaluated entity" (Martin and Rose 1994:

69). The evaluation is thus to some degree `objectified' and values of appreciation share with judgment the property of being less directly personal in nature, at least relative to values of direct *affect* as appreciations would be expressed in NVC.

As with *affect*, judgment and now appreciation, opposite values apply to CAD and NVC processes in light of each of the appraisal subcategories. In NVC discourse, *affect*, judgment and appreciation become explicit in conversation and are directly engaged as part of the NVC needs-negotiation process. In token assignment for NVC discourse tokens indicate scores of less than zero.

The negative and positive designations for NVC and CAD discourse allow the scores to be tallied in the data discreetly without risk of assignment of a similar token category to the incorrect pole of the matrix. The arbitrary assignment of a negative and positive descriptor for each NVC and CAD token assignment differentiates all data graphically.

Double tokens are assigned in moves which incorporate more than one active element of NVC or CAD discourse *and* the move elements are responded to by the other speaker in subsequent moves. Move density helps us notice in communication process where more complex or dense communication results in communication on more than one move element. In interpersonal communication in general and in this study move densities of more than one are rare, in this study accounting for less than eight percent of the data. In these cases, in the data analysis moves in which multiple communicative engagements are invoked in terms of **move density** are depicted as -2NVC or 2CAD. For reliability of data, a conservative value assignment to move density has been applied. Each move which is valued at two or more is assigned the -2 value for NVC and the + 2 value for CAD. The following example illustrates a double NVC token, assigned a value of -2: "When you say you must leave tomorrow, are you

feeling frustrated because you have a need to return to your normal routine and yet —also—are

you feeling a need to address this health issue?"

During this sort of exchange, the NVC speaker may use non-verbal response queues to

verify the paraphrased information in the beginning of the move, and then the NVC speaker is

able to continue with a second move—in this case, an inquiry into a second need.

In CAD, cultural and social assumptions—like about power and affective barriers—play

roles in communication processes. These processes, say, of power dimensions, may seem to

streamline life culturally so that order may be maintained, however the intricacies of one

culture's power dimensions are rarely understood much less followed by foreigners.

Nonetheless, in many token assignments of hospital staff conversations with patients, uni-

cultural CAD discourse has been noted as persistent and a serious dimension of cross cultural

mis-understanding in Thai hospitals. How *affect*, judgment and appreciation appear in discourse

enables a process analysis to confirm or refute characteristics of either CAD or NVC discourse.

In the appraisal framework, subjective involvement may be implied rather than directly

represented. In a grammatical or even lexical analysis some of the implied, subjective text may

surface. The categories of the appraisal framework allow for larger issues that reflect subjective

text to come to light in analysis and differentiate NVC process and CAD process

The ways that the endorsement system opens up possible positions in subjective moves

has been elaborated by theorists. Different levels and kinds of subjective factors and inter-textual

positioning may be analyzed or even 'mapped' in appraisal theory. This study also can utilize

exchange moves using the Endorsement System of *Inter-textual Positioning* (Martin and Rose

website 2012). The features of NVC and CAD that are under investigation include direct

endorsement with intertextual positioning and other features which relate to endorsement like

affect, judgment and other features which sometimes relate to endorsement of people ideas or things. The ability to label the subjective appraisals is expanded to include dis-endorsements and neutral endorsements as well. Endorsements might relate to assessments of processes, things or people and opinions. The ways that endorsement are made when they are made subjectively in appraisal judgment relates to CAD process in this study.

In identifying and assigning tokens to moves, the kinds of endorsements observed aid in identifying the exchange which is most often related to inter-textual dynamics:

Figure 22: The Appraisal Framework Endorsement System (Martin and Rose 2012)

The endorsement system deals equally with inter-textual positioning and helps researchers examine the linguistic resources by which speakers/writers include, and adopt a stance towards, what they represent as the words, observations, beliefs and viewpoints of other speakers/writers. This is an area which has been widely covered in the literature under such headings as "attribution", "direct and indirect speech", "intertextuality" and, following Bakhtin, "heteroglossia". At its most basic, this attribution or intertextual positioning is brought into play

when a writer/speaker chooses to quote or reference the words or thoughts of another. By referencing the words of another, the writer, at the very least, indicates that these words are in some way relevant to his/her current communicative purposes. Thus the most basic inter-textual evaluation is one of implied 'relevance'. Once an attributed proposition has been included (and hence evaluated as 'relevant') it can be further evaluated as 'endorsed' or 'dis-endorsed'. The endorsed utterance is one which the writer either directly in indirectly indicates support for, or agreement with. The endorsed utterance is represented as true or reliable or convincing.

In the CCCR context, endorsement process is one key process that differentiates kinds of endorsement relating them to positions on attributed material. Therefore, in this study, endorsement features can be key in token assignments. They extend potentially where endorsement away from or toward NVC processes of endorsement or away from or toward known CAD processes of endorsement (example—face lowering and avoidance in Thai culture) are observed in the CCCR-agents' move-data.

NVC takes a 'neither endorsing nor dis-endorsing' stance. It is distinct as an interpersonal genre in this regard and does not contain these endorsement variations or rhetorical and persuasive elements as does CAD discourse. Observational language, paraphrasing, interrogative *affect* and choice oriented request language maintain a neutral stance toward attributed material. The 'endorsement' in NVC is oriented toward the agent and relates to endorsement of underlying human needs. The NVC needs negotiation process relates endorsement toward respect for needs. Therefore, in overt exchanges, endorsement itself indicates a CAD move, and would be assigned an inter-textual positioning token.

A choice in NVC to engage in endorsement neutral interpersonal speech relates to the NVC semantic system of shared, universal human needs. Focus is on how needs from food and

water and comfort, to communication and respect are shared. This egalitarian and compassionate

stance enables a choice of communication where needs are paramount. A speaker's

'endorsements' or dis-endorsement would be treated by the CCCR agent with a neutral stance on

the endorsement issue and a needs based inquiry into what the person feels and what they might

be needing. Instances of endorsement are not a part of needs negotiation in NVC but would be

assigned an inter-textual positioning token in CAD. with its appraisal framework is invoked for

further examination of the token assignment.

In summary, the technique of data analysis is an assignment of a token, a value to each

move in the data. The moves are either CAD or NVC and they may also be assigned a move

density value based on 'double move' criteria (see 4.1). The over-all processes inherent in the

communication, as we have discussed, relate to the type and density of each token assignment.

Eccentric moves were rare in this study but did occur. These are discussed in 3.6, "Process Tests

for Split Category Discourse Tokens". The Other CAD move classification includes CAD

negotiation exchange speech functions described in appraisal framework literature (Martin and

Rose 219-251).

3.6 PROCESS TESTS FOR SPLIT CATEGORY DISCOURSE TOKENS

The token matrix contains five categories: *Affect*, Judgment, Appreciation, Inter-textual

Positioning and "Other CAD or NVC Moves". In the course of live conversation, some moves

are in themselves non-verbal or in some other way obscure so that definitive token assignment

would be problematic. This fifth category in the matrix is reserved for eccentric NVC or CAD

moves and also serves as a 'holding area' for data that require further examination.

For example, a move may contain possibilities of containing both CAD and NVC move elements. The center column in the matrix is reserved for such combination moves. The moves then "cancel each other out". The center column is set with a zero value and is reserved for split category or other eccentric moves which are not clearly CAD or NVC moves. In this way, with an assignment of a zero value for these eccentric moves, data is gathered on these moves, and at the same time, the move value of zero does not affect the total, genre-differentiation data which categorizes moves that scored clearly as either NVC or CAD tokens.

That being said, process tests in appraisal framework provide a means for categorizing most eccentric move instances. Only a handful of moves in this entire study fell into the center category and zeroed out (See Chapter Four, Data analysis). One common example of a potential split category move involves observational interrogatives. Identifying an observational interrogative grammatically, we then turn to our semantic system to test whether a given observational question may be scored as NVC, neutral (0), or CAD.

Note: NVC scores, (1) if grammatical extensions link observations to feelings and needs in exchange complexes. "When you say your pain is a 9 that way, are you feeling scared?"

(2) If the observational interrogative is clearly in a process of need-oriented exchange.

CAD scores if the staff worker is "doing her job" reading off a form, not authentically engaged in interpersonal exchange. If a determination may not be made, the exchange move receives a zero token.

CHAPTER FOUR: DATA ANALYSIS

The over-arching purpose of this analytical research is to describe the discourse routines of compassionate language as practiced and acquired by NVC learners. Part of that process involves differentiating NVC discourse from culturally affected discourse (CAD). More specifically, the intervention introduced NVC discourse to medical staff at Piyavate hospital, Bangkok and has tracked the acquisition of the NVC skills that the fifteen doctors and nurses demonstrated via recordings taken at regular intervals. NVC discourse features and CAD features analyzed in the texts gives us important data as to how medical staff acquired the new discourse, and data as to which CAD discourse features were factors in NVC acquisition.

In section 4.1, a discourse analysis is applied to NVC discourse in general, as a base-line for analytical comparison of discourse samples from Thai doctors and nurses. Here we focus on the process of how negotiation exchange structures in CCCR role-plays are catalogued, described and analyzed. In the appraisal/SFG token-assignment systems, we are normally looking at a single discourse genre. Here we see a cross-section of the NVC genre and other culturally affected genres.

Negotiation Exchange Structures in CCCR discourse samples are differentiated using a token assignment system. In this chapter, the matrix for differentiating NVC and culturally affected discourse and the token assignment system is described and applied to data. In 4.1, the description of the matrix and the token assignment system is taken up regarding the background genre analysis work in NVC discourse. The matrix is calibrated with contrasting values along a continuum of semantic features described in SFG and appraisal theory.

Recently, cross-cultural discourse scholars have been both calling for and arguing about the potential use of a base-line discourse genre for comparative analysis of cultural discourses.

One objection to using a base discourse sample has been that it would be difficult to reach

consensus about the 'ideal' discourse sample (Verschueren 2010). What genre sample would all

parties agree on? Would all chefs endorse a local cookbook in its *discourse* for directions and

methods for cooking? Regional and ideological differences have been pointed to as obstacles as

well (Scollo 2011).

In this study, the base study of NVC does not run aground on these concerns. NVC

already is a well accepted form of discourse internationally—so it doesn't really require approval

as a sample discourse genre because it already is a well-known and useful discourse genre in its

own right. NVC is also an appropriate discourse genre for use with this data analysis for the

following three reasons: (1) the narrow focus on negotiation exchange moves in CCCR does not

make a claim to greater 'cultural' communicative significance, (2) the study takes place in an

occupational setting where procedures in a second language, English, culturally create multiple

influence genres already--the NVC genre is transferable into many languages and discourse

systems (and has been since its inception in the 1970's) (3) and finally, NVC discourse is the

target language of an educational intervention and the base study of NVC for comparison has a

pedagogical purpose.

In 4.2 and subsequent sections, the focus will turn to the analysis of NVC genre

acquisition during the course of NVC studies. The analysis of recorded role-plays depends on

this base-line NVC discourse analysis. From it, we can determine the processes, semantic and

grammatical which characterize NVC. Then, kin the post study analysis we turn our attention to

the examination of discourse use from day to day usage of NVC at Piyavate hospital. The study

hopes both to be a discourse guide to the language of NVC and to provide concrete

documentation of NVC acquisition over three phases of instruction and the subsequent reportage

of day to day use.

In its focus on Negotiation Exchange Structure in CCCR, the NVC discourse analysis in this chapter utilizes that much sought after sampled, base-line NVC discourse. The views of texts under analysis reveal how appraisal/SFG tokens for negotiation exchange structures in CCCR discourse differentiate NVC based on its values, processes, semantics, and lexical features.

4.1 DIFFERENTIATING NVC AND CULTURALLY AFFECTED DISCOURSE (CAD)

A discourse analysis is applied to NVC discourse in general, as a base-line for analytical comparison of discourse samples from Thai doctors and nurses. In this section and its subsections, a systematic appraisal of NVC genre is conducted referencing the works of Marshal Rosenberg and texts in the NVC books. The process of data analysis is described. The analysis proceeds, as does the analytical matrix in 4.2, down the categories of appraisal applied to the data in this study: *affect*, judgment, appreciation, inter-textual positioning and other NVC or CAD moves. This base-line in NVC discourse here informs the analysis of the texts under analysis from the Piyavate doctor and nurse discourse via their role-play, recordings taken at regular intervals. The processes and values of NVC negotiation exchange described here, sets the standard for analysis of NVC acquisition in subsequent chapters. **Table 10** shows the negotiation Exchange structure matrix used for data analysis:

Table 10:   Exchange Tokens for NVC Agent in Recorded Role-plays

NVC Discourse Genre	2 or more NVC tokens -2	1 NVC token -1	No tokens 0	1 CAD token 1	2 or more CAD tokens 2	Appraisal Analysis of Culturally Affected Discourse (CAD)
Affect						Affect
Needs						Judgment

Intertextuality						Intertextuality
Appreciation:						Appreciation
Other NVC moves						Other CAD moves

On the left side of the token assignment matrix, *affect*, needs, intertextuality appreciation and other NVC moves relate to a scaled token assignment with culturally affected discourse (CAD) at the opposite end of the scale. In this chapter, the values assigned to tokens will be addressed in terms of the left side of the table—NVC features. In the matrix, appraisal categories applied to NVC have set the scale to NVC discourse features on the left and CAD discourse on the right. The goal in differentiating the NVC and CAD processes and discourses is to allow for cross-section analysis of Thai medical staff discourse over the course of the study. In other words, the acquisition of NVC discourse features may be highlighted when CAD and NVC are analyzed over the course of the ten-month intervention.

Description of the four recursive and overlapping discourse elements of Non-violent Communication will serve as background to our first sample and analysis which follows. Practitioners of NVC view the four recursive and overlapping discourse routines as a complete set of discourse options capable of addressing any interpersonal communication event. A person who chooses to use NVC may speak with people who have no familiarity with NVC. This is largely possible because NVC is based on the premise that all humans across cultural and other divides share the same basic human needs, and that feelings (*affect*) arise from our met or unmet needs. Four key needs that NVC discourse typically addresses are the need for choice, communication, understanding and compassion though in any given discourse many other needs may be addressed --from the need for safety and rest (physical) to social needs like connection and play.

The process of NVC discourse locates *affect* within the speaker. That is to say, NVC

flows through statements of feeling that arise within people based on met or unmet needs. In

NVC, the speaker "translates" statements of blame, criticism and judgment into one or more of

the four discourse types described below. For example, a statement like, "You make me so mad

when you forget to lock the door," would be phrased as "I feel angry when you don't lock the

door because I feel scared in this neighborhood and have a need for safety." This statement

includes several recursive and overlapping NVC discourse elements. Halliday (1994) describes

feeling statements of this order as affection processes [I feel angry]. This is followed

observation, experiential metafunction [when you don't lock the door], a second affection

process [I feel scared], a second observation [in this neighborhood] and a need, a mental

affection process in SFG [have a need for safety]. The speaker acknowledges having feelings

and needs and clarifies them with observations rather than projecting blame. In this sample

analysis, interpersonal meaning is realized and in turn analyzed from the systems of mood and

modality. To understand how mood and modality function as mood elements, we identify

subject, finite and residue. In the residue element, there are predicator, complement and adjunct.

The flow of process and semantic elements into lexical grammatical expressions in NVC may be

understood as a four-step, recursive process: Observations, Feelings, Needs, and Requests.

Observations in NVC are aimed at clarifying *affect* and experiential phenomena.

Observation discourse focuses on what is spoken in conversation (interpersonal meta-function)

and on what is physically observed (experiential meta-function). "Getting the facts" and

reflecting them are the first goal in making observations and therefore interrogatives and

intertextuality, reported speech, quoting and paraphrasing are frequently observed. In addition,

the interpersonal connection with the speaker is supported when the speaker is provided with

reflection and questions focused specifically on immediate, spoken language, tone, gesture and demeanor.

Feelings arise from met and unmet, universal human needs. NVC focuses attention inward toward mindfulness of one's own feelings and needs as a requisite to engagement with others in NVC- based, interpersonal dialogue. Self-awareness and acceptance of feelings and needs may make possible an empathic NVC conversation with others who may be expressing and experiencing a variety of strong feelings and needs. In modern social psychology new research bears out the important of this process. In recent compassion studies, for instance, Mikulincer et al "Attachment Security, Compassion, and Altruism," compassion was engaged at significantly higher rates in participants who were primed with self- awareness and acceptance of their own feelings and needs first. Compassion was observed less frequently in control group participants who were not primed. Decety et al in "A Social-Neuroscience Perspective on Empathy" supplements earlier work with neuroscience documentation of higher empathic responses as observed in MRI imaging in care-givers primed with awareness and acceptance of their own feelings and needs. They conclude with the remarkable claim that "[These] studies and the theoretical ideas that generated them provide guidelines for enhancing compassion in the real world". In order for an NVC speaker to authentically engage in helping others name feelings and discover needs, self- awareness is an important first step. From a Buddhist perspective, NVC may be called mindfulness in conversation, and this analogy was well received by the 15 Thai doctors and nurses in the study who were practicing Buddhists.

Needs as described in NVC are universal and form the basis for NVC as a cross-cultural discourse routine. Needs are emblematic of feelings which are expressed in a variety of ways. NVC practitioners learn how to ask questions about feelings and observations which lead to

discovery of needs. Creative collaboration in meeting needs is then engaged. Needs are also met in terms of the process of NVC discourse itself. In NVC speakers want to create and maintain social relations with the listener. During conversation, the desire to express individual meanings at the same time that connection and collaboration frame the encounter.

NVC adheres to no social conventions and is strictly interpersonal—and therefore—cross-cultural. In other words, interpersonal meanings and feelings usually hover near our every day conversations and have an influence on them in ways that *affect* and other dimensions are handled. In NVC, discourse brings these feelings and intuitions about needs into focus. These express, on the one hand, a speaker's individual feelings and underlying needs, as well as affective attitudes and judgments. In NVC, for example, those behaviors associated with socially proscribed roles and communicative competencies for acting upon and with others will be set aside.

When conversational routines are socially encoded, there is an understood, underlying premise of speech roles as contextualized by social roles. In Thai medical tourism, serious communication problems have been reported when Thai medical staff interact with foreign English speaking patients. The socially learned and expected speech roles of a Thai person create affective barriers to communication with foreign patients. A common example is that of the value of "face" in Thai society. When a foreign patient expresses strong emotions, Thais may react by avoiding or turning away in order, as they see it, to help the patient not lose face. The foreign patients' emotions may escalate as they feel that they are being ignored. In this study, we look for a cross-cultural conversational routine that may make help these doctors and nurses communicate across cultural and social divides and meet their hospital's needs at the same time they meet the needs of the foreign patients.

There are two types of fundamental speech roles: giving, Halliday (1994) explains means 'imitating to receive' and 'demanding' means 'imitating to give'. It means that we are not only asking or receiving something of the listener, but are also interacting with the listener to build social relationships. In this case we turn to Non-violent Communication as a cross-cultural communication approach so that socially and culturally defined speech roles may be "translated" into a cross-cultural conversation routine. Mood and modality play key roles in how culture and language collide. The *way* questions and statements are made is critical. The fourth and most recursive aspect of NVC is request making, and in it we find a needs oriented mood choice.

Requests: Requesting in NVC involves the conditional mood-finite, the modal verb 'would' which semantically offers the receiver choice. NVC process involves needs meeting 'along the way', and one key way needs are met is by recognizing people's options and choices. "Would you like to....? Would you consider....? Would you be willing to....." are all mood choices based on recognition of the universal human need for autonomy and choice. In CAD discourse samples, we often see power dimensions, and people in authority resorting to coercive methods to see that their own, power elite's needs are met. Imperative mood and negative *affect* related to retaliation and bullying are common in most institutional settings. NVC offers choices so that when choices are made they may be made willingly and cooperation may be continued. NVC teaches that coercive methods are not sustainable in the long run.

These four semantic/grammatical features of NVC process describe NVC as a discrete discourse process, separate in values and processes from other culturally derived discourse practices. This NVC genre and its characteristics allow for scoring of tokens to be assigned per these elements as they appear in texts.

4.1.2   DATA ANALYSIS: AFFECT ENGAGEMENT AND AVOIDANCE

After formatting the texts in transcription format (see 3.3 Text Transcription Methodology), the NVC base-line texts which are used as samples of NVC process later are carefully studied. In this step of the analysis, the base-line NVC discourse features are described.

The CCCR/NVC moves on the left side of the matrix establish genre features of NVC on the exchange matrix.

Table 11: Highlighted NVC Features in the CCCR Exchange Matrix

NVC Discourse Genre	2 or more NVC tokens -2	1 NVC token -1	No tokens 0	1 CAD token 1	2 or more CAD tokens 2	Appraisal Analysis of Culturally Affected Discourse (CAD)
Affect						Affect
Needs						Judgment
Inter-textuality						Inter-textuality
Appreciation:						Appreciation
Other NVC moves						Other CAD moves

The following NVC text illustrates the basic values and approach of NVC's chief values, processes and discourse features. The text appearing below, Rosenberg (2003: 13-14) illustrates features of NVC in the context of cross-cultural conflict resolution (CCCR). The hypptactic projections which assimilate content from the Palestinian man. These complex clauses deliver a coherent and focused message set in the needs negotiation process and illustrate NVC process semantically and linguistically.

In the text, Marshal Rosenberg while on a diplomatic mission to Bethlehem, Palestine notices there are tear gas canisters with 'USA' markings on them littering the street (Rosenberg

2003: 12). His guide tells him they are from an Israeli attack the day before. Someone in the crowd learned that Rosenberg was an American and began screaming at him:

Figure 23: Rosenberg in Palestine

1. He: Assasin! Child-killer! Murderer!

2. MRB: Are you angry because you would like my government to use its resources differently? (I didn't know whether my guess was correct, but what is critical is my sincere effort to connect with his feeling and need.)

3. He: Damn right I'm angry! You think we need tear gas? We need sewers, not your tear gas! We need housing! We need to have our own country!

4. MRB: So you're furious and would appreciate some support in improving your living conditions and gaining political independence?

5. He: Do you know what it's like to live here for twenty-seven years the way I have with my family—children and all? Have you got the faintest idea what that's been like for us?

6. MRB   Sounds like you're feeling very desperate and you're wondering whether I or anybody else can really understand what it's like to be living under these conditions.

In this excerpt, several lexical and grammatical features related to both NVC and CAD discourse may be examined. The mood elements relate well to the active engagement of the parties using interrogative and conditional mood choices. In the token assignment process of this

study, how mood relates to *affect* underscores the process of discourse. Rosenberg directly inquires about his counter-part's *affect*, "Are you angry?" in the first exchange, line two. The Palestinian man answers in the next exchange that he is angry.

Engagement in the face of negative *affect* and in this case, anger is remarkable. The bulk of research of Thai medical staff and *affect* cited in chapter one (1.2) shows the opposite. Negative *affect* leads to avoidance. The surveys of the doctors and nurses who participated in this study bear concrete witness to this aspect of Thai culture. Angry patients will be avoided because the medical staff would not want to "make things worse by witnessing the patient's loss of face." Ironically, in NVC process, direct engagement with affect which might be culturally discouraged in some cultural settings like Thailand, the direct approach to affect locates the affect as arising from a speaker's needs. This ideology in practice re-locates the affect from being construed as objective experience to the process of needs communication and negotiation. It is an important part of NVC engagement that the NVC speaker directly brings out into the field of discourse 'the cloud of feelings". The feelings are brought out and accepted and considered. As an 'extra' cultural discourse routine, NVC offers Thai medical staff a concrete alternative for working with their '*affect*- challenging' foreign patients.

In the Rosenberg in Palestine text, we can see NVC *affect* engagement. In Rosenberg's guessing, 'gisting' and paraphrasing, he links his observations and relates them to what the man says and does, and how he says and does them-- to his feelings. The encouragement that Rosenberg gives the man to express *affect* and continue to express, results in the man's impassioned speech about feelings and needs and his family's struggles living in Palestine. When Rosenberg replies, he adjusts his appraisal of the man's feelings from angry to 'furious" and later to 'desperate'. He 'stays with' the man in his emotional states. And he tries to understand the

needs beneath the strong feelings as they appear.

In NVC process, the cultivation of empathy around feelings is related to a values-informed stance. The authentic acceptance of all parties' needs informs the field of negotiation in NVC beyond considerations of rightness and wrongness. The universal human needs stance leads to a special kind of interpersonal discourse where 'normal' judgments are set aside. In NVC human needs are universal, and the value of empathic discourse is related to awareness of shared universal human needs. Rosenberg in the Palestine example relates to his counterparts needs for good schools for his children and safety and helps him bring out and communicate these needs. Relating feelings to these needs is one specific discourse process of NVC. That all people need the same essential things including understanding, acceptance, choice, food and drink—means the cultural differences in NVC are related to how needs are expressed and that 'cloud of feelings'. Good guessing is essential to NVC. 'Wrong guesses' about feelings are never really wrong because they open the door to further engagement. This makes guessing a critical part of NVC process because it is what breaks down affective barriers.

Cultural expressions of *affect* are so various and unpredictable, guessing is really the only way to move into the realm of *affect* directly and begin relating feelings to needs. Where in much of our world *affect* is often received with avoidance or even violence, in NVC we witness a compassionate 'guessing game'.

In the next subsection, the grammatical and lexical features related to engagement or avoidance processes are described. The needs negotiation system in NVC is on one end of a scale opposite the judgment system, its antithetical counter-part in culturally affected discourse (CAD).

4.1.3   THE NEEDS NEGOTIATION AND JUDGMENT EVALUATION SYSTEMS

In second position, under *affect* on the genre differentiating matrix (4.1), 'Needs' appear on the left for NVC discourse and 'Judgment' for CAD. In this section, we will look at how the NVC token assignments are applied in a role-play during which the CCCR agent sometimes uses CAD discourse elements and sometimes NVC.

In NVC, needs-negotiation is an essential part of the discourse process. The over-arching purpose of this study is to describe the discourse routines of compassionate language as practiced in NVC. More specifically, it introduced NVC discourse to medical staff at Piyavate hospital, Bangkok and tracked the acquisition of the NVC skills that the fifteen doctors and nurses demonstrated via recordings taken at regular intervals. The discourse analysis here applied to NVC discourse in general, and as a base-line for analytical comparison of discourse samples from Thai doctors and nurses depends on the needs negotiation process.

This sample which comes from the middle of the intervention requires some back-grounding in its position in the study and its relation to instruction in NVC discourse skills. The sample was recorded during Phase Two of the Medical English and counseling intervention, Piyavate hospital. Participnts were given this topis on a slip of paper and time to prepare a role-play response to the topic. They performed the role-plays for the group and were recorded.

Role-Play: An employer of a website design company sets a deadline for an urgent job, "by Friday at 4 o'clock." It is late Thursday afternoon. The employee feels that the deadline may not be met for several reasons including the fact that the customer did not answer some of the design-specification questions in full. The employee uses NVC to discuss these issues with the employer.

The transcript conventions in this text are augmented with **bold** text indicating a focal

appraisal feature in the given text. For example, inter-textual positioning which outscores other tokens with three of the six token assignments. This text and bold text serve here to illustrate text format and data summary used in APPENDICES ONE through THREE. **Table 13** shows the inter-textual positioning scale on the matrix.

Table 12: NVC/CAD Matrix of Intertextuality Token Assignment

NVC Discourse Genre	2 or more NVC tokens -2	1 NVC token -1	No tokens 0	1 CAD token 1	2 or more CAD tokens 2	Appraisal Analysis of Culturally Affected Discourse (CAD)
Intertextuality	-2NVC	-1NVC				Intertextuality

In this text, there are two inter-textual positioning moves, **in bold** in the transcript below and in the tally of tokens for this Phase 2, text three, **Figure 24** below. In this text, the density of the second move is recorded as a double density move. Two or more process steps are succinctly and successfully exchanged in the role-play dialogue when this double assignment accrues. In addition to the inter-textual positioning moves, this text contains needs negotiation, NVC process mixed with judgment CAD process.

Figure 24: Needs Negotiation and Judgment in NVC and CAD Discourse

Phase: 2   Text: 3   Moves: 6

[even numbered NVC Agent this recording]

Token Assignment Report   Score:

1. Judgment   -1NVC, 1CAD

2. Affect   0

3. Appreciation   0

4. Inter-textual Positioning   -1NVC, -2NVC

5. Other CAD/NVC Moves   1CAD , -1NVC

Total Token Score: -5   NVC;   2   CAD

Transcript 11 lines

1. \<S 01\> Manager : This work must to be done Friday by 4 o'clock.

2. \<S 02\> Employee : **So, you want me to finish the work on Friday at 4 o'clock , right?**

3. \<S 01\> Manager : Yes, these data on the website have to be posted before this weekend.

4. \<S 02\> Employee: I'm sorry we don't have enough time.

5. \<S 01\> Manager : No, it has to be submitted this Friday.

6. \<S 02\> Employee 1: OK , do we need to make the project colorful with full requirement?

7. \<S 01\> Manager : Yes, it has to be perfect, with all the requirement of the customer. You can provide all the additional services.

8. \<S 02\> Employee: I spoke to the customer. Are you curious if they gave the information we required?

9. \<S 01\>: Manager: Yes.

10.   <S 01> Employee: **Yesterday I had to talk to customer and he couldn't give me all the information. Is it ok if we contact our customer for more information? We could ask for a delay.**

11. <S 02> Manager : OK, you can call him and if he permit you for the delay then you can finish on Monday.

In this role-play, we have a conversation based on an imagined conflict scenario invoked with a role-play prompt. Textually, it is a conversation that is based on a written prompt. In a few cases, speakers express extracts of the contents from the written text. For example, in the first line of the role-play, speaker one references the prompt and initiates conversation by iterating the conflict, "This work must be done by four o'clock Friday". Here and subsequently, however, the speaker shapes the message from the text with choices of imperative mood and the obligatory modal 'must'. In total, she uses obligatory modals and the imperative mood (combined) ten times. It is noteworthy that she continues to use power-relations of this kind throughout—even when she is softening her stance toward the deadline in light of the new information provided by the employee. She has revealed an underlying assumption about the interpersonal power relations between an employer and employee.   .

The first speaker-- playing the part of an employer with a deadline-- seems inflexible while the second speaker tries to use NVC in negotiations with the employer. In essence, the first speaker bases her communication on personal/social perceptions of the working world environment and the second speaker tries to employ her first lessons in NVC to the scenario. While in a few cases as we shall see later, she strays into personal/social discourse, she begins applying NVC discourse in the second exchange. The stern tenor of obligation and command,

elements of CAD power dimensions are conveyed by speaker one, but are softened by speaker two's introduction of a recursive conversation routine in which she repeats the employer's demand that the deadline be met. This routine is part of a needs negotiation process, in this case, meeting the boss's need for attention and understanding.

To address her employer's demands, the CCCR agent uses a verbal, hypotactic report strategy and then adds a tag interrogative, "So you want me to finish the work by 4 o'clock Friday, right?" This projection of the employer's proposal and addition of a tag question is called observational questioning. It attaches identification of the content and feelings expressed by the employer to the employer in the theme and finite, "you want". The CCCR/NVC agent uses inter-textual positioning by reflecting the employer's words back to him. The skill with translating the boss's *affect* from command and judgment to an inter-textual positioning— interrogative is note-worthy as an important aspect of NVC process. The explicit goal of NVC in these kinds of interpersonal, conflict scenarios is to allow each party's feelings and needs to be grounded in self identification, thereby preventing escalation of the conflict into blame and criticism. The *affect* process of judging something as good or bad is translated into an affection process whereby participants lay claim to personal feelings about people, places, objects, processes and all experiential phenomena and link those feelings either to observations or internal needs. When each party's feelings and needs are expressed, attempts are made to find creative ways for everyone's needs to be met.

Although it is a moderate softening in tenor, in the third exchange the employer agrees with the employee and says, "Yes, these data on the website have to be posted before this weekend". She has referenced the website, the data and the deadline rather than herself as the agent of authority as was previously noted in exchange one.

In exchange four, the speaker as employee responds, "I'm sorry, we don't have enough time." Here is a key instance where the NVC speaker uses CAD discourse. The ground that was gained in exchange two is at risk. She departs from NVC and offers an apology, a personally and socially convenient conversation routine which attempts to appease the employer by "lowering her face" (Intachakra 2004). In the embedded clause, the inclusive pronoun "we" presents an issue too as it is unclear if she is referring to other staff or is in fact including the employer. In many cross-cultural conflicts this pronoun use could cause cross-cultural conflict or misunderstanding because it often is associated with power and is reserved for the ranking member of the hierarchy (Fairclough 2003). In this study, culturally derived routines like these apologies were the last, most persistent "hangers-on" and seemed difficult for Thai medical staff to "translate" into a non-culturally specific routine like NVC.

Here they serve as clear demarcations in the needs negotiation process of NVC on the one hand, and the CAD judgement process on the other. Note that each has been assigned an exchange density of -1 in NVC and 1 in CAD, indicating that two or more identifiable NVC or CAD features were identified in the **Negotiation Exchange Structure Matrix**:

Table 13: Exchange Tokens for CCCR agent in Need and Judgment

NVC Discourse Genre	2 or more NVC tokens -2	1 NVC token -1	No tokens 0	1 CAD token 1	2 or more CAD tokens 2	Appraisal Analysis of Culturally Affected Discourse (CAD)
Affect						Affect
Needs		-1 NVC		1 CAD		Judgment
Intertextuality						Intertextuality
Appreciation:						Appreciation
Other NVC moves						Other CAD moves

In NVC move one, exchange one, the employee says, "So you want me to finish the work by 4 o'clock, right?" Here the employee is involved in NVC process, referencing the employer's words, repeating and connecting to the employer's need. When CAD discourse is translated into NVC discourse and re-shaped using NVC features, the result is that the needs negotiation process replaces the judgment evaluation process. The interrogative mood in this NVC exchange is an engagement move and qualifies the exchange for a token assignment of negative two.

The apology in exchange two in itself qualifies the move for a CAD token assignment. "I'm sorry we don't have enough time." In addition, in the embedded clause, the inclusive pronoun "we" presents a CAD issue too. In NVC, stance is a constant. Interpersonal exchange is based on needs negotiation in an egalitarian, "separate but equal" sense. Empathy is based on the equality of needs, while individual boundaries are needs related and accepted too. But here a move is made which is not NVC process oriented and must invoke social and cultural norms for interpretation. How can the word choice of 'we' be interpreted? It is unclear if the CCCR agent is referring to other staff or is in fact including the employer too. Either way, the CCCR agent has lapsed from NVC into CAD discourse patterns. Thus this move with its two CAD features in separate grammatical clauses qualifies it as a double CAD move and a 2 CAD token.

In this sampling of data and analysis illustration we have seen how the token assignments attach to the appraisal framework categories per their scaled relationship to NVC or CAD discourse processes in needs negotiation. In addition, we have seen how exchange density attaches an additional value to the moves with 'double' exchange features. In this study, when a move qualifies for density distinction, two and negative 2 are the maximum density scores. Moves with more than two in density were moderated to the double token category. In other words, all dense features score at a -2 for NVC or 2 for CAD.

4.1.4 INTERTEXTUALITY: EGALITARIAN AND HIERARCHICAL POWER DIMENSIONS

While defining and applying the token assignment system to data, this chapter and this subsection in particular focus on ways that texts themselves react and interact in interpersonal discourse. The ways that people react to *affect* and judgment, for example, may lead to avoidance and conflict or alternatively--engagement. In this next text from the foundation work of Marshal Rosenberg, the interpersonal inter-textual dimensions illustrate both the semantic and lexical /grammatical features of NVC's egalitarian, universal-needs values and processes and hierarchical power dimensions.

The analysis of token assignment here follows the same process of token assignment in the other appraisal sections. When an exchange primarily assigns value to intertextuality it means that an active text has been mentioned in two or more moves. At the beginnings and ends of sections, for summary and preview purposes, the complete five category matrix is shown. In **Table 13,** the mini-matrix is shown. This abbreviated matrix is used within analysis sections to display specific exchange token assignments, in this case, -1 NVC *affect.*

Table 13: NVC/CAD Abbreviated Matrix Example

NVC Discourse Genre	2 or more NVC tokens -2	1 NVC token -1	No tokens 0	1 CAD token 1	2 or more CAD tokens 2	Appraisal Analysis of Culturally Affected Discourse (CAD)
Affect		-1 NVC				Affect

The moves may be evaluated for move density as well to see if more than one clause and engagement factor was completed in either CAD or NVC discourse designations as described in

Chapter Three. These are the mechanics or assigning this class of token, but we should not lose

sight of the semantic processes and values of CAD and NVC discourse which make these

distinctions clear. A discourse analysis of inter-textually assignable tokens follows.

For contextual background, in this text, Marshal Rosenberg has been asked to mediate a

school dispute (Rosenberg 2003: 166-168) He meets with students that teachers have 'not been

able to manage'. Egalitarian and hierarchical power dimensions stand out as students resort to

violence and violent language and Rosenberg, using NVC, works toward collaboration and the

meeting of his and their needs.

The CCCR agent's tokens for inter-textual features will appear shown below the NVC

move of each exchange, and the reader may see how tokens are assigned exchange per exchange

by the CCCR agent. Rosenberg's intertextuality tokens are the highlighted, assigned tokens

demonstrating how NVC assimilates texts from hierarchical and/or power dimensions. Here, as

in the token summaries in Appendices One through Three, each subcategory of appraisal

framework is found to the right, while the corresponding CCCR/NVC discourse subcategories

are found to the left.

In the opening of this Rosenberg text, the principle in NVC of authenticity and self-care

is evident. Rosenberg rather than assuming an authoritarian stance around a school discipline

issue takes the approach of sharing his feeling and needs and enters into a needs negotiation

process with students.

MBR: I'm very upset about the teachers' reports that things are getting out of hand in many of the classes. I want

very much for this school to be successful. I'm hopeful that you can help me understand what the problems are and

what can be done about them.

Table 14: Rosenberg School Conflict Move One

NVC Discourse Genre	2 or more NVC tokens -2	1 NVC token -1	No tokens 0	1 CAD token 1	2 or more CAD tokens 2	Appraisal Analysis of Culturally Affected Discourse (CAD)
Affect	-2 NVC					Affect
Needs						Judgment
Intertextuality						Intertextuality
Appreciation:						Appreciation
Other NVC moves						Other CAD moves

The opening of the negotiation process with Rosenberg's short speech contains many engagement choices for the students to choose from in their responses. Rosenberg uses no blame or judgment. He links his discourse choices to his own feelings and needs. The feelings in the *affect* clauses like, "I'm upset" "I want" and I'm hopeful" make the token assignment for *affect* at a two move density an easy one. Will, the most vocal student speaks out using hierarchical, judgmental language—name calling. Here, Rosenberg addresses force of *affect* and judgment with the same interrogative, discovery process of NVC whereby the CCCR/NVC agent treats judgment and *affect* equally—as discourse ripe with clues helpful to the needs negotiation process.

1. Will: The teachers in this school-they fools, man!

2. MBR: Are you saying, Will, that you are disgusted with the teachers and you want them to change some things they do?

Table 15: Rosenberg School Conflict Move Two

NVC Discourse Genre	2 or more NVC tokens -2	1 NVC token -1	No tokens 0	1 CAD token 1	2 or more CAD tokens 2	Appraisal Analysis of Culturally Affected Discourse (CAD)
Intertextuality		-1NVC				Intertextuality

In the whole of the move, there are NVC features like inquiring about *affect* 'disgusted' and an inquiry about need, 'want them to change things they do?' However, this move is inter-textual in token assignment because its main clause and interrogative mood specifically request the other speaker to amplify or verify the speaker's understanding of what follows. Therefore, the whole move is governed by the inter-textual request. From a negotiation stance, an inter-textual move in NVC like this one is meeting immediate interpersonal needs for 'say-back', respect and understanding while the actual content of the interrogative reaches forward, in this case, to the larger needs negotiation process which is giving rise to the forceful *affect*. In the preceding exchange, the student expresses feelings through judgment. In the next exchange, he amplifies this judgment in response to the CCCR/NVC agent's request providing additional observational information.

3. Will: No, man, they is fools because they just stand around and don't do nothin'.

4. MBR: You mean you're disgusted because you want them to do more when problems happen?

Table 16: Rosenberg School Conflict Move Three

NVC Discourse Genre	2 or more NVC tokens -2	1 NVC token -1	No tokens 0	1 CAD token 1	2 or more CAD tokens 2	Appraisal Analysis of Culturally Affected Discourse (CAD)
Inter-textual positioning		-1 NVC				Inter-textual positioning

This Rosenberg move results in the same coding as Move 2--an inter-textual token. The guiding, main clause's subject and finite invokes the other's inter-action about his own text when Rosenberg asks, 'You mean…" One interesting exchange characteristic of NVC is that often, a few exchanges in, direct referencing of texts as Rosenberg has done thus far is no longer necessary. The needs negotiation processes of NVC may create a collaborative s which have participants 'on the same side' in the sense of wanting to express feelings and have needs met. The Rosenberg school sample will be taken up again in 4.1.6, where the collaborative needs negotiation language is explored.

4.1.5 APPRECIATION IN CULTURALLY AFFECTED DISCOURSE AND NEEDS-BASED EXCHANGES

Appreciation in Thai and western countries works in very different ways. Intachakra (2004) compares Thai and Western thanking and apologizing styles and choices. In his concluding remarks he says westerners have, "several direct strategies to choose from when it comes to expressing thanks, however Thai people have less explicit strategies, each with minute socio-cultural overtones" (59).

In examining inter-personal appreciation in terms of NVC process, I can appreciate Intachakra's remarks when he describes CAD process, how different cultures have such varied ways of dealing with the need to express thanks or appreciation. His discussion is particularly apropos in the CCCR, medical-tourism context. In medical tourism, the cultural orientations and variations of the clientele are diverse and unparallel other communicative contexts both in need for in-depth communication and geared for urgent and cross-cultural understanding. On the hospital floor the reality is that cross-cultural, academic studies, though helpful with large

hospital populations of a single foreign-language group, is not really appropriate or feasible with the multi-cultural diversity of the medical tourist population. Intachakra, responding with practical applications from his findings urges teachers to teach cross-cultural pragmatics as alternatives to adaptive "native speaker" oriented studies

Appreciation in NVC process is included in the needs negotiating process of compassionate discourse. When many in Thai culture would let opportunities for thanks or appreciation pass while westerners would explicitly express thanks or appreciation, the issue is still this, however. Do we have to limit our choices to choosing 'a dominant ' discourse position, have conflict, or avoid further communication? NVC offers a way to translate the CAD ways, western or Thai, into the needs negotiation process. The rationale for assimilating appreciation and processing it in this way relates to appreciation's 'judgment' or objectifying stance which in NVC process means that feelings and needs are needing to be addressed. For example, "you did a great job" may be intended to compliment but it actually is a judgment. In NVC process, the appreciated person can ask, 'Would you consider sharing specifically what I did that made you feel that way?' This modalized interrogative request asks for observation and feelings for clarification of the appreciation.

In the following Rosenberg sample text, he 'coaches' a workshop participant in NVC appreciation choices, encouraging her to make it part of needs understanding and appreciation observations. Otherwise, as Rosenberg and appraisal theory agree, appreciation may actually in specific instances be forms of judgments.

In this NVC text (Rosenberg 2003 186-187), the workshop participant approaches him at end of the workshop and says "you're brilliant!" What follows is Rosenberg's NVC process

relating his lack of feeling of the expressed appreciation because he doesn't understand the need beneath 'names', 'you're brilliant".....

1. MBR: I'm not able to get as much out of your appreciation as I would like.

Table 17: Rosenberg Appreciation Move One

NVC Discourse Genre	2 or more NVC tokens - 2	1 NVC token -1	No tokens 0	1 CAD token 1	2 or more CAD tokens 2	Appraisal Analysis of Culturally Affected Discourse (CAD)
Appreciation		-1 NVC				Appreciation

In this NVC move, Rosenberg invokes NVC process in his response to the CAD appreciation token, "you're brilliant", which as nice as that might sound, it is a socio-cultural judgment and lacks concrete observational grounds. Rosenberg expresses his desre to know more....

1. Participant: Why, what do you mean?

2. MBR: In my lifetime I've been called a multitude of names yet I can't recall seriously learning anything by being told what I am. I'd like to learn from and enjoy your appreciation, but I would need more information.

In his explanation, Rosenberg invokes again a different need around appreciations than is culturally usual but might be more personally satisfying. That NVC has the elasticity to actively translate apologies, appreciations, blame, judgment and other culturally specific and coded discourse features into its negotiation exchange process surprises many people who are learning NVC—like the woman in this appreciation encounter.

When assigning the token for this exchange, NVC appreciation process is a clear choice, when Rosenberg refers to the appreciation process directly. NVC process with appreciation, as with other

excerpts we have seen, will inquire beneath the appreciation expression, and will be related to the needs and feelings negotiation processes.

Table 18: Rosenberg Appreciation Move Two

NVC Discourse Genre	2 or more NVC tokens - 2	1 NVC token -1	No tokens 0	1 CAD token 1	2 or more CAD tokens 2	Appraisal Analysis of Culturally Affected Discourse (CAD)
Appreciation		-1 NVC				Appreciation

3. Participant: Like what?

4. MBR: First, I'd like to know what I said or did that made life more wonderful for you.

Table 19: Rosenberg Appreciation Move Three

NVC Discourse Genre	2 or more NVC tokens - 2	1 NVC token -1	No tokens 0	1 CAD token 1	2 or more CAD tokens 2	Appraisal Analysis of Culturally Affected Discourse (CAD)
Appreciation		-1 NVC				Appreciation

5. Participant: Well, you're so intelligent.

6. MRB: I'm afraid you've given me another judgment that still leaves me wondering what I did to make life more wonderful for you.

In line seven, Rosenberg assigns the second kind of appreciation offered, 'so intelligent' a CAD description, naming it as 'judgment'. At this point in the exchange the guessing game and observational focus of NVC is fully engaged and the participant points to notes and says, "these two things here."

7. MBR: So it is my saying those two things that you appreciate.

8. Participant: Yes.

9. MBR: Next I'd like to know how you feel in conjunction with my having said those two things.

10. Participant: Hopeful and relieved.

11. MRB: Next I would like to know what needs of yours were fulfilled by my saying those two things.

12. Participant: I have this 18 year old son whom I haven't been able to communicate with. I'd been desperately searching for some direction that might help me to relate with him in a more loving manner, and those two things you said provide the direction I was looking for.

In line twelve, Rosenberg relates the appreciation needs through the needs-negotiation process, requesting directly what needs were fulfilled. I total, the seven exchange text contained seven -1 appreciation tokens for NVC, and serves not only as a good sample for appreciation process, but also for the NVC 'translation' process in general, whereby CAD forms of discourse are involved in the NVC discourse process and then transformed into the language of compassionate observations, feelings, needs, and requests. Pedagogically, the NVC text teaches these categories of pragmatics for translating CAD into NVC discourse (Rosenberg 2003: 6).

4.1.6 OTHER NVC AND CAD TOKENS

In this section, I will describe several designations in NVC process that would result in this fifth category of token assignment. Some common examples include cases of interrogative/conditional mood requests, very common in NVC process. However, in this section focus is on how token assignments, now that we have visited each category separately would make their appearance in a text.

Interrogative conditionals as an alternative to power language, for example, are common in NVC process because they connect the universal needs negotiation to the need for choice. We may return to the Rosenberg school conflict text to see an example. Here, Will engages in Rosenberg's questions for more information (observational requests). He makes observations and then judges the teachers again as 'fools' and explains:

1. Will: That's right, man. No matter what anybody do they just stand there smilin' like fools.

2. MBR: Would you be willing to give me an example of how the teachers do nothing?

This request for more information, an observational request conveys features of the NVC process, the observational and request making steps of NVC are invoked.

Table 20: Rosenberg Other NVC Feature Move One

NVC Discourse Genre	2 or more NVC tokens - 2	1 NVC token -1	No tokens 0	1 CAD token 1	2 or more CAD tokens 2	Appraisal Analysis of Culturally Affected Discourse (CAD)
Other NVC Moves		-1 NVC				Other CAD Moves

3. Will: Easy. Just this morning a dude walks in wearin' a bottle of Wild Turkey on his hip pocket plain as day. Everybody seen it; the teacher, she lookin' the other way.

4. MBR: It sounds to me, then, that you don't have respect for the teachers when they stand around doing nothing. You'd like them to do something.

Table 21: Rosenberg School Conflict, Need Negotiation

NVC Discourse Genre	2 or more NVC tokens - 2	1 NVC token -1	No tokens 0	1 CAD token 1	2 or more CAD tokens 2	Appraisal Analysis of Culturally Affected Discourse (CAD)
Need		-1 NVC				Judgment

Rosenberg here engages in some 'gisting', 'It sounds to me, then.' He guesses what need or needs might rest beneath Will's judgments. The token assignment, therefore, will be assigned to the second category, needs. In this case, we may make a need category contrast the 'other NVC 'category with this token assignment. The process and focus of the move is in need identification when the compliment 'respect,' a universal human need, appears.

Following are the token assignments for the remaining Rosenberg school conflict exchanges. Now that we have seen each of the appraisal categories separately-- *affect*, needs/judgment, inter-textual positioning, appreciation, other CAD and NVC moves, we can now see how they relate, step by step to a classic NVC text. This will give the reader some practice in seeing which tokens fall into which categories on the matrix, depending on process type, speech functions, move and exchange features for either CAD or NVC discourse genre features.

From exchange three on, a variety of NVC tokens appear for assignment.

5. Will: Yeah.

6. MBR: I feel disappointed because I want them to be able to work things out with students but it sounds like I wasn't able to show them what I meant.

Table 22: Rosenberg School Conflict, *Affect*

NVC Discourse Genre	2 or more NVC tokens -2	1 NVC token -1	No tokens 0	1 CAD token 1	2 or more CAD tokens 2	Appraisal Analysis of Culturally Affected Discourse (CAD)
Affect		-1 NVC				Affect

7. Joe: The teacher got to get a rattan.

8. MBR: So you're saying, Joe, that you want the teachers to hit students when they bother others.

Table 23: Rosenberg School Conflict, Inter-textual Positioning

NVC Discourse Genre	2 or more NVC tokens - 2	1 NVC token -1	No tokens 0	1 CAD token 1	2 or more CAD tokens 2	Appraisal Analysis of Culturally Affected Discourse (CAD)
Inter-textual Positioning		-1 NVC				Inter-textual Positioning

9. Joe: That's the only way students gonna stop playing the fool.

10. MBR: So you doubt that any other way would work?

Table 24: Rosenberg School Conflict, *Affect*

NVC Discourse Genre	2 or more NVC tokens - 2	1 NVC token -1	No tokens 0	1 CAD token 1	2 or more CAD tokens 2	Appraisal Analysis of Culturally Affected Discourse (CAD)
Affect		-1 NVC				Affect

11. Joe: [Nods agreement]

12. MBR: I'm discouraged if that's the only way. I hate that way of settling things and want to learn other ways.

Table 25: Rosenberg School Conflict *Affect*

NVC Discourse Genre	2 or more NVC tokens - 2	1 NVC token -1	No tokens 0	1 CAD token 1	2 or more CAD tokens 2	Appraisal Analysis of Culturally Affected Discourse (CAD)
Affect	-2 NVC					Affect

13. Ed: Why?

14. MBR: Several reasons. Like if I get you to stop horsing around in school by using the rattan. I'd like to tell me what happens if three or four of you that I've hit in class are out by my car when I go home.

Table 26: Rosenberg School Conflict   Inter-textual Positioning

NVC Discourse Genre	2 or more NVC tokens - 2	1 NVC token -1	No tokens 0	1 CAD token 1	2 or more CAD tokens 2	Appraisal Analysis of Culturally Affected Discourse (CAD)
Inter-textual Positioning	-2 NVC					Inter-textual Positioning

In this exchange Rosenberg is placing humor and connection needs forward while he continues engaging the students with the issue. The focus of the first clause and the controlling process for the move involves Rosenberg's connection to Ed's interrogative, "Why?" and Rosenberg relates his response in explicit terms "of reasons." This 'call and response,' during which text structure and choice is connected overtly to the other speaker's text results in this move token assignment to 'inter-textual positioning.' It ranks in move density because it provides multiple moves related to the inter-textual proposition of providing reasons. In terms of NVC move density it also meets needs for understanding, humor and connection with the students.

15. (Smiling) Then you better have a big stick, man!

16. MBR: That's what I mean. .I'd like you to see I'm bothered about that way of settling things. I'm too absent-minded to always remember to carry a big stick, and even if I remembered, I would hate to hit someone with it.

Table 27: Rosenberg School Conflict, Inter-textual Positioning

NVC Discourse Genre	2 or more NVC tokens -2	1 NVC token -1	No tokens 0	1 CAD token 1	2 or more CAD tokens 2	Appraisal Analysis of Culturally Discourse (CAD)
Inter-textual positioning		-1 NVC				Inter-textual positioning

In this exchange, Rosenberg is following affect engagement in this exchange referring to his own affective states three times. But this is beside the point. His honest sharing of his feelings in this setting and his sense of poetic understatement, his confessed absent-mindedness about remembering to bring a big stick—indeed! He is creating *affect* and connection as he meets the students' needs to have fun.

17. Ed: You could kick the cat out of school.

18. MBR: You're suggesting. Ed that you would like us to suspend or expel kids from the school.

Table28: Rosenberg School Conflict Inter-textual Positioning

NVC Discourse Genre	2 or more NVC tokens -2	1 NVC token -1	No tokens 0	1 CAD token 1	2 or more CAD tokens 2	Appraisal Analysis of Culturally Affected Discourse (CAD)
Inter-textual Positioning		-1 NVC				Inter-textual Positioning

19. He: Yeah.

20. MBR: I'm discouraged with that idea too. I want to show that there are other ways of solving differences in school without kicking people out. I'd feel like a failure if that was the best we could do.

Table 29: Rosenberg School Conflict: *Affect*

NVC Discourse Genre	2 or more NVC tokens -2	1 NVC token -1	No tokens 0	1 CAD token 1	2 or more CAD tokens 2	Appraisal Analysis of Culturally Affected Discourse (CAD)
Affect		-1 NVC				Affect

21. Will : If a dude ain't doin' nothing, how come you can't put him in a do-nothin' room?

22. MBR: **Are you suggesting, Will, that you would like to have a room to send people to if they bother other students?**

Table 30: Rosenberg School Conflict Inter-textual Positioning

NVC Discourse Genre	2 or more NVC tokens -2	1 NVC token -1	No tokens 0	1 CAD token 1	2 or more CAD tokens 2	Appraisal Analysis of Culturally Affected Discourse (CAD)
Inter-textual Positioning		-1 NVC				Inter-textual Positioning

4.2   DATA ANALYSIS PHASE ONE, PRE-INTERVENTION DISCOURSE TEXTS

The first role-plays of the Piyavate staff members prior to their training in NVC reflect their pre-intervention discourse features, from their own Thai cultural preferences as those preferences get expressed in English. The complete one-hundred exchanges of data and their tallies are provided in **APPENDIX ONE**. Thai staff members express their perceptions as to what kinds of lexical/grammatical choices international patients might understand. They also respond to different levels of affective intensity.

These samples reflect the CAD side of the Genre Differentiating Matrix. NVC tokens and processes are not invoked, and we get a pre-workshop sampling of role-play discourse prior to the participants practice with NVC during the professional development intervention. The table below shows total token assignments in Phase 1.

Table 33: Phase 1 Token Assignments

CCCR Agent, Move Tabulations	Judgment	Affect	Appreciation	Inter-textual Positioning	Other NVC and CAD Moves
Phase 1 Tally	18	9	0	35	38
NVC	0	0	0	0	0
CAD	18	9	0	35	38

The process of data analysis here will move through samples of pre-intervention texts that relate to the spectrum of CAD designations—from *affect* to intertextuality. The

representative texts are analyzed and related to the results for this text grouping. Following are the same results in the scaled matrix format.

Table 34: Exchange Token Matrix for CCCR agent in Recorded Role-plays

NVC Discourse Genre	2 or more NVC tokens -2	1 NVC token -1	No tokens 0	1 CAD token 1	2 or more CAD tokens 2	Appraisal Analysis of Culturally Affected Discourse (CAD)
Affect	0	0	0	9	0	Affect
Needs	0	0	0	18	0	Judgment
Intertextuality	0	0	0	35	0	Intertextuality
Appreciation:	0	0	0	0	0	Appreciation
Other NVC moves	0	0	0	36	2	Other CAD moves

In this view of the data, the scaling toward the CAD side of the matrix in the Phase 1 texts is more apparent. Significantly, this research shows that compassionate communication pragmatics were devoid from early data. NVC pragmatics, it seems fair to conclude, do not appear in normal conversation nor do they come from academic English and other ESL courses the medical staff could have taken in Thailand. The lack of NVC and the CAD scale dominance in Phase 1 data give a clear, contrastive outline of NVC compared to international medical English as spoken in Thailand.

4.2.1   AFFECT ENGAGEMENT AND AVOIDANCE

The following texts analysed were transcribed from recordings made at Piyavate hospital, on the first two consecutive workshop days, April 15 and April 22, 2010. These pre-intervention recordings from the first two workshop meetings are responsive to inter-personal role-play scenarios including service encounter conflicts and conflicts in inter-personal

relationships. In Phase 1 transcripts, these are texts one to seventeen. The April 22 role-play topics were employer employee related and also included a few inter-personal conflict scenarios. These texts are indexed in APPENDIX ONE, transcripts 18-28.

The token assignment reports include genre, phase, text, move and token assignment data. When a category receives multiple tokens, the tokens per move appear separated by a comma.

In the first text, a wide range of CAD discourse tokens are assigned. The only category without an assignment was category 3, appreciation. The most notable feature of this text is the level of *affect* avoidance evident. In Phase 1, *affect* was addressed by CCCR agents the least among all phases (9 tokens total). When *affect* received a CAD *affect*, it was so designated for physical *affect* of pain presented by patients. Staff members sometimes use this sort of *affect* as a measure of service encounter protocol. Non-pain expressions of *affect* were common in Phase 1 by non-CCCR agents. However, patient/other agent *affect* expressed in Phase 1, lead to avoidance behavior by the CCCR agent. The CCCR agents did not reflect, address or inquire (much less mention) the affective states of patients/ others in role-plays. When initial contact meets affective barriers in CAD CCCR, limited connection and communication are related to avoidance. In the first text, the CCCR agent and counter-part in the role-play were instructed to play the medical staff member and the patient in the following scenario.

PHASE One: Assessment Transcript One: 7 lines [A nurse or doctor speaks with a patient about her stomach pain]

1.   <S 01> Nurse : **Welcome! What wrong with you?**

Table 35: Pre-Intervention Texts, NVC- Agent Move One

NVC Discourse Genre	2 or more NVC tokens -2	1 NVC token -1	No tokens 0	1 CAD token 1	2 or more CAD tokens 2	Appraisal Analysis of Culturally Affected Discourse (CAD)
Need				1		Judgment

The initial judgment token is on the CAD side of the matrix, the key lexical feature "wrong with you" illustrating socially shaped judgment discourse, CAD. Both dialogic elements in the move are assigned a CAD token. The greeting on the one hand and the inquiry about a perceived physical ailment on the other are disjointed and not steps in a process. The question is 'triage' evaluative about a medical condition and not directed toward the patient's moment by moment *affect* during the medical encounter. This instance of CAD judgment or evaluation word choice 'wrong with you' is exclusionary. In intent, it is an instance of CAD stance toward service encounters, diagnosis of illness or ailment. The last three exchanges show avoidance process and are quoted in their entirety:

2. <S 02> Pt   : I ... oooeee

3. <S 01> Nurse : Where did you pain ?

4. <S 02> Pt   Oooee

5. <S 01> Nurse : OK ! just take a rest on a bed and I will call a doctor for you.

6. <S 02> Pt   : I want to see a doctor now. Can I?

7. <S 01> Nurse : Call to ward manager to help and she can't help too. Then call for translator to communicate with patient.

The interrogative mood, "Where did you pain?" is a service encounter instance of *affect*, "triage". The imperative, 'take a rest' modalization when the patient is expressing pain is the first

instance of *affect* avoidance. Avoidance is followed by a more urgent request, "…a doctor now. Can I?" Then in turn, the avoidance is accelerated by the medical staff/CCCR agent who ignores the patient's request and begins closing down the communication. The CCCR agent plans to pass off the patient to a translator. The final lines sound like internal monologue or 'do list': "Call to ward manager to help and she can't help too. Then call for translator to communicate with patient." The truncated process imperatives relating to tasks that the agent perceives might be done are markedly not interpersonal. The process of interpersonal communication ceases in line six when the patient's *affect* reaches a high tone. The medical staff participant verbally passes the patient off to others. The genre used when avoidance is present is CAD institutional and academic English oriented. "Call ward manager to help and she can't help too" might be argument/persuasive writing oriented—consideration of a contingent possibility. Piyavate medical staff in the 2010 workshops had had academic English training and little or no interpersonal English training. The following tally of moves for the first text shows a wide distribution of CAD features. After the initial judgment move, the agent's process is institutional, and avoidance via non-interpersonal processes end the communication.

Phase: 1   Text: 1   Moves: 4

Token Assignment Report	Score:	Genre:
1. Judgment	1	CAD
2. Affect	1	CAD
3. Appreciation	0	
4. Inter-textual Positioning	1	CAD
5. Other CAD/NVC Moves	1	CAD

Total Token Score: 4   CAD

The first text is a service encounter and reflects institutional process. This text is a

representative sample of text one data in its institutional, discourse-process aspect. The CCCR

agent of the text shows difficulty in communicative choice when strong *affect* is present.   In

Phase 1, *affect* received 9 CAD tokens total out of one hundred total CCCR agent moves. These

include pain references for an institutional stance as in, "on a scale of 1 to 10 how great is your

pain?"During Phase 1, the CCCR, designated agent used *affect* references as service encounter

'triage' and other forms of *affect* were usually not addressed—but were avoided, as in this role-

play.

4.2.2   THE NEEDS NEGOTIATION AND JUDGMENT/EVALUATION SYSTEMS

Needs negotiation processes were not found in Phase 1 texts. Analysis here focuses

exclusively on the CAD processes that were found.

In the appraisal subcategory of judgment a total token score for **judgment** in Phase 1

tabulated to 18 CAD tokens out of one-hundred, total CCCR-agent moves. CAD judgment

moves were at their highest level in Phase 1 compared to 14 in Phase 2 and 4 in Phase 3. NVC

agents have different processes for interpreting judgment in interpersonal exchange. As we saw

in NVC discourse (4.1) and will see in Phase 3 texts later (4.5), strong *affect* with force and

judgment is often met by the CCCR/NVC agent with needs negotiation language—the same as if

the other speaker had shared a feeling. In fact, judgment and *affect* are processed the same way

in NVC—with needs negotiation processes. In these pre-intervention, Phase 1 texts, judgment

and evaluative language is processed in culturally coded, institutional ways. Here are texts

illustrative of key features of the CAD discourse choices of the Thai medical staff over all the

Phase 1 texts.

In the following text, text 3 Phase 1, twice, moves are assigned judgment tokens in a text where there is a total of just 5 total CCCR agent moves. The text's total token assignments are shown below:

Phase: 1   Text: 3   Moves: 5

Token Assignment Report	Score:	Genre:
1. Judgment	1,1	CAD
2. Affect	0	CAD
3. Appreciation	0	
4. Inter-textual Positioning	1	CAD
5. Other CAD Moves	1, 2	CAD
Total Token Score:	6	CAD; 1 double-density CAD move

The text here has several interesting features for CAD discourse designations and judgment in particular. Text three is quoted in its entirety below:

Transcript : 10 lines

1. <S 01> Nurse : Good morning . Can I help you?

2. <S 02> Pt   : I appointment with Doctor today.

3. <S 01> Nurse : Please wait a minute. Did you have a breakfast? How long?

4. <S 02> Pt   : I already drinking smoothie and eating donut just 2 hours before come to hospital.

5. <S 01> Nurse : Sorry Ms t his laboratory you shouldn't eat anything before taking this lab 6 – 8 hrs.

6. <S 02> Pt   : Why nobody tell me?

7. <S 01> Nurse : Actually, the suggestion will in the back of appointment ' s paper. It's my wrong that I didn't explain to you.

8. <S 02> Pt   : But I can't make a new appointment because my boss not allow me to off job.

9.   <S 01> Nurse : I will consult the doctor. You should wait around 6 hours and shouldn't eat anything during this time.

10. <S 02> Pt   : OK.

While beginning with our main task, judgment token assignments, in lines five and seven there are assignments of judgment tokens which meet the appraisal judgment delineation, "by which the person judged will be lower or raised in esteem by the community" (Martin and Rose 1994: 67). In the lexical and grammatical choices in line two, the CCCR agent chooses the modal 'should' with reference to a past action—not eating prior to the exam. When the patient registers the judgment, the complaint of the patient, "Why nobody tell me?" is followed by the CCCR agent then trying to lower her face in response—judging herself, "It's my wrong that I didn't explain it to you". These two judgment tokens span three exchanges of text and comprise the majority of exchange features. Twice here, negotiation of judgment and esteem via face-lowering and raising moves has been observed.

The text contains a significant double move density assignment in relation to judgment process. In line five the CCCR agent apologizes, a fifth category token designation, followed by the agent's first judgment move, discussed above. This too appears to involve a face-lowering and raising negotiation whereby the agent who judges first softens the judgment with an apology. This correlation is significant because apologies and face-lowering and raising discourse, as we will see in 4.4 and 4.5, remained one the most persistent features of CAD discourse in this study.

4.2.3   INTERTEXTUAL POSITIONING AND OTHER CAD MOVES

Ranking high like judgment, inter-textual positioning scored the highest for its CAD category among all three phases. Inter-textual positioning has 35 CAD tokens in Phase 1, compared to 18 in Phase 2 and 12 in Phase 3. The most common examples of this exchange type include information exchanges during which patients ask for or about content and the CCCR

agent responds to the texts. These are commonly service encounter exchanges. Many times in Phase 1, the force of the inter-textually positioned text was stronger when the move referenced a policy or written document. Inter-textual dimensions in CAD often involve power stance positioning, and medical settings are no exception. Institutional authority informs the texts. The medical staff playing 'employer' roles, for example demonstrate their understanding of power relations in the workplace. Though the NVC agent doesn't attempt to eradicate these CAD features, an altenative negotiation process invites the speaker's participation. In the following three exchanges, a common hospital routine unfolds in a role-play scenario initiated by a patient's request for a lab report.

Transcript Two: 6 lines

[A nurse or doctor speaks with a patient about her blood work results]

1. <S 01> Pt   : When can I get my result ?

2. <S 02> Nurse : It will come out at least 5 days.

3. <S 01> Pt   : No. I want to know the result now. I can't wait !

4. <S 02> Nurse : This result must take long time to investigate and make sure for the lab exam accuracy .

5. <S 01> Pt   : I don't want to waste my time!

6. <S 02> Nurse : Can you leave your address and I will send you the result later, So you don't to come here again and again ?

Of the three CCCR agent moves, two are inter-textual positioning moves, and one is a fifth category CAD move. This last category relates to culturally coded exchanges like apologies or (like here) The CCCR agent in the first move references the patient's question about the medical results. When the patient argues and raises the level of *affect* in the second exchange the CCCR agent references the medical result time period again and argues back "to investigate and make sure the lab exam accuracy." 'Policy and justification' are aspects of insider--institutional

speech. That is to say, people within an institution would share many discourse routines related to their community in the institution. In dealing with outsiders, the degree to which 'office speak' is used varies.

In these texts, authority-related, institutional discourse occurs more frequently when strong *affect* is present. When the CCCR agent in this text outwardly relates 'quality assurance' reasons for the lab report time-frame, she related the reasons via policy and justification and left no doubt as to the authority of the institution--'who the boss is'. From a CAD stance it may not be surprising when strong *affect* is present that an agent in an institution would appeal to institutional authority.

The only variance in this text from inter-textual positioning was in the CAD action request in the final move. This action request that the CCCR agent makes is in response to an exclamatory remark. The patient says with negative *affect* "I don't want to waste my time!" The modal, action request of the CCCR agent is this response: "Can you leave your address and I will send you the result later, so you don't to come here again and again?" As the CCCR agent initiates closing the exchange by obtaining the address, the action request language of the CCCR agent occurs in the response frame to strong, negative *affect*. Avoidance when *affect* is present is sometimes implied. Here the agent says out loud, "So you don't to come here again and again?"

The total category designations below show the CCCR agent's token assignments for this text:

Phase: 1   Text: 2   Moves: 3

Token Assignment Report	Score:	Genre:
1. Judgment	0	CAD

2. Affect	0	CAD
3. Appreciation	0	
4. Inter-textual Positioning	2	CAD
5. Other CAD/NVC Moves	1	CAD
Total Token Score:	3	CAD

The complete texts and analysis results in these categories are provided in Appendix One. A quick glance at the features and categories covered in subsection 4.2 follows: Data is based on 100 moves. 101 total score indicates a double-move density assignment in text three. All CAD tokens were assigned to texts in these pre-intervention role-plays.

1. Total token score for **judgment** Phase One: 18

2. Total token score for **affect** Phase One: 9

3. Total token score for **appreciation** Phase One: 0

4. Total token score for **inter-textual positioning** Phase One: 36

5. Total token score for **other CAD/NVC moves** Phase One: 38

Total moves: 100 Total Moves; Total Score 101; 1 double-density CAD move.

4.3   DATA ANALYSIS: PHASE TWO INTERVENTION TEXTS

During Phase 2, the workshop participants in role-plays used newly learned NVC moves as well as culturally affected discourse CAD moves. The recording dates for the Phase 2 samples

were July 22 and 29, 2010 There are eighteen texts receiving token assignments and more than one hundred moves. Data is based on the first one-hundred, NVC agent tokens. Because this set of data includes mixed NVC CAD discourse examples, split genres appear with positive numbers for CAD and negative numbers for NVC as well as the NVC and CAD tags. Odd numbered agents are the NVC agents unless otherwise noted.

Phase two of this longitudinal study showed a mixture of CCCR and CAD tokens. When these texts are analysed in each of the appraisal categories, some uneven distributions show where participants felt free to vnture into CCCR discourse and where they used social or CAD discourse. The categories analysed are outlined below:

		(Chapter subsection)
1.	Total token score for **judgment** Phase Two: 21	4.3.2
2.	Total token score for **affect** Phase Two: 24 (1 density)	4.3.3
3.	Total token score for **appreciation** Phase Two: 2	4.3.4
4.	Total token score for **inter-textual positioning** Phase Two: 29	4.3.5
5.	Total token score for **other CAD/NVC moves** Phase Two: 24	4.3.6

Totals: 100 moves: 102 score including move density. Data is based on 100 moves. 102 is the final score here due to 2 double-move density assignments, one in text five and the other in text nine.

From these totals, a distribution across features in general is shown. Although the appreciation examples were CAD only these 2 in this phase were the only seen in the entire study. The increase in *Affect* moves is the most noticeable difference between Phase 1 and Phase 2 general tallies. These total numbers for exchange features may be further broken down now by genre distinctions. These genre distinctions show in these texts how the CCCR agents began to

incorporate some NVC features in their discourses while continuing to use CAD features as well. In the table below, the top figures reflect the total per category and the lower numbers are subtotals for CAD and NVC discourse.

Engagement of strong *affect* was the most pronounced NVC/CCCR trait per the Phase 2 data. No other category showed equal or greater NVC/CCCR moves than this one. The complete data are shown on page 215, **Table 36**.

Table 36: Phase 2 NVC and CAD Token Assignment Totals

NVC Agent, Move Tabulations:	Judgment	Affect	Appreciation	Inter-textual Positioning	Other NVC and CAD Moves
Phase 2 Totals	21	24	2	29	24
NVC	7	17	0	11	13
CAD	14	7	2	18	11

Reference is made here to these total CAD and NVC scores by way of introduction to the analysis of Phase 2 texts. Significant features highlighted here like the increase in *affect* engagement and the decrease in judgment from Phase 1 will be examined in more detail in the following subsections.

4.3.1   AFFECT ENGAGEMENT AND AVOIDANCE

In Phase 2, workshop participants are seen engaging more with the *affect* presented by their role-play counter-parts. In Phase 1 avoidance was shown to be a major factor in the CCCR agent ending a conversation. Here, there is a mixture of NVC and CAD *affect* moves but the majority, 17 of 24 total *affect* moves were NVC *affect* engagement moves.

In the following role-play, text 10, Phase 2, there are 4NVC *affect* moves and yet all but one of the other moves, 4 in all, were CAD moves. Many of the Phase 2 samples show an exhuberant embrace of *affect* engagement in NVC while other NVC engagement features lagged behind. The following text is a good example of NVC *affect* engagement in an otherwise, mostly CAD discourse. The playful engagement with the interpersonal conflict a young person has expressing his feelings honestly to a person of romantic interest. The internal conflict and expression of feelings and inquiries about feelings show the beginnings of affect engagement through a less serious conflict scenario. This text is also note-able in that it includes a rare instance of CAD appreciation in which the speaker says the other 'is beautiful'.

Affect is in **bold** in the transcript below.

Phase: 3   Text: 10   Moves: 9

Token Assignment Report   Score:

1. Judgment   1CAD

2. **Affect**   **-1NVC, -1NVC, -1NVC, -1NVC**

3. Appreciation   1CAD

4. Inter-textual Positioning   1CAD

5. Other CAD/NVC Moves   1CAD, -1NVC

Total Token Score: 4   CAD;   -5   NVC

The scenario that the role-play prompt initiated concerns 'an interpersonal conflict with a boyfriend or girlfriend'.

Transcript : 19 lines

1. <S 01> A : Hi B, long time no see.

2. <S 02> B : Hi A, long time no see.

3. <S 01> A : **Are you look better?**

4. <S 02> B : Y…Yes. Why you think like that.

5. <S 01> A : Because you are so beautiful

6. <S 01> B : Yes . How are you ?

7. <S 02> A : **Before I met you , I was fine , Now I feel different.**

8. <S 01> B : Why ?

9. <S 02> A : **When I see you ,my heart beat faster. My hand are wet and my legs start shaking. Do you know what it is ?**

10. <S 01> B : I see that you are excited. Are you surprised to see me today.

11. <S 02> A : Yes, and you know why ?

12. <S 01> B : I don't know. Can you tell me ?

13. <S 02> A : **I think I fall in love with you.**

17. <S 01> B wow!

18. <S 02> A : Would you like to have dinner with me tonight ?

19. <S 01> B : Yes.

Over-all, it may seem that the NVC attention to *affect* in the absence of other NVC process was meant, "to get a date." Well, that is a difference from the service encounter moves of Phase 1. The intervention participants applied NVC at will and some of the first attempts, like this one, focused attention on 'courtship conflicts'. A wide range of choices of interpersonal topics were provided for role-plays. In the interpersonal conflict choices category, the relationship topic was selected. Engagement of *affect* in a 'falling in love' role-play was the participants' idea. When they used NVC *affect* in this text, the NVC *affect* moves may be what carry the engagement forward. The opening was a CAD greeting, scoring in the Other CAD/NVC Moves category: 1CAD.

Then, in the second, CCCR-agent move 'Are you look better?' (line 3) begins a sequence of *affect* oriented moves. This sequence is romantic in process and invokes no other need negotiation or need exchange process. The invitation to dinner in the end could have been accepted or declined. The needs and feelings of the beloved were not probed. In this excerpt the sharing of the lover's feelings is the whole of the text process-wise. The other agent has inspired the CCCR agent to share his feelings. And that is an aspect of NVC. In total there are four *affect* sharing tokens.

Amid the feelings shared, the CCCR/NVC agent declares, "Because you are so beautiful," one of the rare instances of appreciation in the study data. It is an instantiation of CAD genre appreciation because it follows the discourse choices of the discourse of judgment. CAD appreciation does not relate internal *affect* and needs, but

applies a value externally. Rarely do people object to these sorts of compliments or appreciations, but it does relay a 'judge' agency factor to the agent who uses CAD appreciation. The CCCR agent goes on to use an NVC strategy to express his feelings—to amplify his appreciation: "When I see you , my heart beat faster. My hand are wet and my legs start shaking. Do you know what it is ?" This direct sharing of *affect* worked for him. He got the date in the playful role-play. Pedagogically, practice with less serious, more playful topics in Phase 2 resulted in longer exchanges and experimentation with aspects of NVC—here with appreciation and *affect* engagement.

4.3.2   PHASE TWO TEXTS: NEEDS NEGOTIATION AND THE JUDGMENT -- EVALUATION SYSTEMS

A text which illustrates the Needs Negotiation and the Judgment/ Evaluation Systems may seem familiar. It was used to illustrate methodology for distinguishing CAD and NVC genre features in the methodology chapter (3.6). Here we are looking at a text from the token assignment view of the needs and judgment systems. These systems operate in similar contexts and positions but entail differing processes. A judgment from the NVC view is an aspect of feelings and *affect* and is processed the same way *affect* is processed --through the NVC needs negotiation system.

In CAD genres, a variety of judgment systems are possible. Ones present in this study and discussed in text analysis so far include face lowering or raising CAD judgment processes, institutional CAD judgment processes, and CAD judgment as an aspect of *affect* avoidance processes.

In text 3, this mid-phase example shows the CCCR agent both in a CAD judgment move and an NVC need/judgment token assignment, highlighted below. The scenario invokes an imagined work conflict that is not hospital related though the same conflict about deadlines occurs often in hospitals—regarding report writing and test results as has been seen from other role-play scenarios. Pedagogically including some prompts related to non-medical settings was selected to enhance creative and playful experimentation with the NVC skills.

Phase: 2   Text: 3

Token Assignment Report   Score:

   6. Judgment   **-1NVC, 1CAD**

   7. Affect   0

   8. Appreciation   0

   9. Inter-textual Positioning   -1NVC, -2NVC

   10. Other CAD/NVC Moves   1CAD , -1NVC

     Total Token Score: -5   NVC; 2 CAD

Moves: 6 [even numbered NVC Agent this recording]

Role-Play: An employer of a website design company sets a deadline for an urgent job, "by Friday at 4 o'clock." It is late Thursday afternoon. The employee feels that the deadline may not be met for several reasons including the fact that the customer did not answer some of the design-specification questions in full. The employee uses NVC to discuss these issues with the employer.

Transcript   11 lines

1. <S 01> Manager : This work must to be done Friday by 4 o'clock.

2. <S 02> Employee : So, you want me to finish the work on Friday at 4 o'clock , right?

3. <S 01> Manager : Yes, these data on the website have to be posted before this weekend.

4. <S 02> Employee: I'm sorry we don't have enough time.

5. <S 01> Manager : No, it has to be submitted this Friday.

6. <S 02> Employee 1: OK , do we need to make the project colorful with full requirement?

7.   <S 01> Manager : Yes, it has to be perfect, with all the requirement of the customer. You can provide all the additional services.

8.   <S 02> Employee: I spoke to the customer. Are you curious if they gave the information we required?

9. <S 01>: Manager: Yes.

10.   <S 01> Employee: Yesterday I had to talk to customer and he couldn't give me all the information. Is it ok if we contact our customer for more information? We could ask for a delay.

11. <S 02> Manager : OK, you can call him and if he permit you for the delay then you can finish on Monday.

In this role-play, we have a conversation based on an imagined conflict scenario invoked with a role-play prompt. Textually, it is a conversation that is based on a written prompt. In a few cases, speakers express extracts of the contents from the written text. For example, in the first line of the role-play, speaker one references the prompt and initiates conversation by iterating the conflict, "This work must be done by four o'clock Friday". Here and subsequently, however, the speaker shapes the message from the text with choices of imperative mood and the obligatory modal 'must'. In total, she uses obligatory modals and the imperative mood (combined) ten times. It is noteworthy that she continues to use power-relations of this kind throughout—even when she is softening her stance toward the deadline in light of the new information provided by the employee. She has revealed an underlying assumption about the interpersonal power relations between an employer and employee. As the speakers continue the role-play, they depart from issues conveyed in the prompt and enliven the situation spontaneously.

The first speaker-- playing the part of an employer with a deadline-- seems inflexible while the second speaker tries to use NVC in negotiations with the employer. In essence, the first speaker bases her communication on personal/social perceptions of the working world environment and the second speaker tries to employ her first lessons in NVC to the scenario. While in a few cases as we shall see later, she strays into personal/social discourse, she begins applying NVC discourse in the second exchange. The stern tenor of obligation and command, elements of CAD power dimensions are conveyed by speaker one, but are softened by speaker two's introduction of a recursive conversation routine in which she repeats the employer's demand that the deadline be met. This routine is part of a needs negotiation process, in this case, meeting the boss's need for attention and understanding.   To address her employer's demands, the NVC agent uses a verbal, hypotactic report strategy and then adds a tag interrogative, "So you want me to finish the work by 4 o'clock Friday, right?" This projection of the employer's proposal and addition of a tag question is called observational questioning. It attaches identification of the content and feelings expressed by the employer to the employer in the theme and finite, "you want".   The explicit goal of NVC in these kinds of interpersonal, conflict scenarios is to allow each party's feelings and needs to be grounded in self identification, thereby preventing escalation of the conflict into blame and criticism. The *affect* process of judging something as good or bad is translated into an affection process whereby participants lay claim to personal feelings about people, places, objects, processes and all experiential phenomena and link those feelings either to observations or internal needs. When each party's feelings and needs are expressed, attempts are made to find creative ways for everyone's needs to be met.

Although it is a moderate softening in tenor, in the third exchange the employer agrees with the employee and says, "Yes, these data on the website have to be posted before this

weekend". She has referenced the website, the data and the deadline rather than herself as the agent of authority as was previously noted in exchange one.

In exchange four, the speaker as employee responds, "I'm sorry, we don't have enough time." Here is a key instance where the NVC speaker uses CAD discourse and apologizes—a Cad move determined by cultural setting and social expectation. The ground that was gained in exchange two is at risk. She departs from NVC and offers an apology, a personally and socially convenient conversation routine which attempts to appease the employer by "lowering her face" (Intachakra 2004). In the embedded clause, the inclusive pronoun "we" presents an issue too as it is unclear if she is referring to other staff or is in fact including the employer. In many cross-cultural conflicts this pronoun use could cause cross-cultural conflict or misunderstanding because it often is associated with power and is reserved for the ranking member of the hierarchy (Fairclough 2003).

Judgment and need systems associate with moves within hierarchies in many texts. Linguistic choices of most moves for praising and rewarding within organizations are CAD 'judgment' oriented as are reprimands. In this text, subtler forms of judgment language appear—and not just in the judgment category. As we have seen with the apology that the CCCR agent makes in exchange four, face-lowering CAD has an adverse effect on the exchange reception when the second half of the move was a strong judgment in terms of a counter-endorsement to the boss's stance that the work must be finished: "We don't have enough time." The scale of tokens from this case's -2 CAD judgment to NVC needs processing of judgment are depicted below.

Table 37: Tokens for NVC Agent in Need and Judgment

NVC Discourse Genre	2 or more NVC tokens -2	1 NVC token -1	No tokens 0	1 CAD token 1	2 or more CAD tokens 2	Appraisal Analysis of Culturally Affected Discourse (CAD)
Needs					-2	Judgment

In this study, culturally derived routines like these apologies were the last, most persistent "hangers-on" and seemed difficult for Thai medical staff to "translate" into a non-culturally specific routine like NVC. Here they serve as clear demarcations in the needs negotiation process of NVC on the one hand, and the CAD judgement process on the other. Note that each has been assigned an exchange density of -2 in NVC and 2 in CAD, indicating that two or more identifiable NVC or CAD features were identified in the negotiation exchange structure matrix.

4.3.3   PHASE 2, CAD AND NVC INTER-TEXTUAL POSITIONING

From the total data for Phase 2 and inter-textual positioning, a score of 29 total tokens appears for this feature with 11 NVC moves and 18 CAD moves. This is down from 35 CAD moves in Phase 1. The representative text below reflects a tendency in the Phase 2 texts to present with NVC *affect* but contain CAD token features elsewhere. Such is the case with text five. An NVC *affect* dexterity is not met with the same dexterity in other exchange features.

Phase: 3   Text: 5   Moves: 6

Token Assignment Report   Score:

1. Judgment   0

2. Affect   1CAD, -1NVC, -1NVC

3. Appreciation   0

4. **Inter-textual Positioning**   **1CAD, 1CAD, 1CAD**

5. Other CAD/NVC Moves   0

Total Token Score: -2   NVC,   4   CAD

The text makes an interesting contrast with the way *affect* in all but one move is inquired about in a thoughtful, NVC way, and then the inter-textual positions maintain CAD genre-token features. The two processes of NVC and CAD are working in tandem at some points. The role play concerns dealing with a troublesome judgment type—gossip. The CCCR agent, Nurse 2, in a three way dialogue between two gossiping nurses and the doctor whom they are gossiping about-- when the doctor in question walks in on them. The six moves of the CCCR agent divide equally between *affect* and inter-textual positioning token assignments. As such they demonstrate the mix of processes often found in these Phase 2 role-play texts.

Transcript :   15 lines   **[N 02 is the CCCR/NVC agent: 6 moves]**

1.   <S 01> N1 : What do you think about doctor A ?

2.   <S 02> N2 : I think he always come late when I call him.

3.   <S 01> N1 : I think so.

4.   <S 02> Doctor A : Never call me lazy again

5.   <S 01> N2 : Do you say that we called you lazy doctor ?

6.   <S 02> Doctor A : Yes , I think that.

7.   <S 01> N2 : How do you feel when you hear that ? When I say your respond time so late

8. <S 02> Well….

9.   <S 02> N2 : Do you feel angry ?

10.   <S 01> Doctor A : Yes , I feel angry on you and I don't think I am lazy as you said.

11. <S 02> N1 : I don't mean like that and I'm sorry to make you misunderstand.

12. <S 01> N2 : Do you need us to respect you ?

13. <S 02> Doctor A : Yes , of course

14. <S 01> N2 : So, would you be willing to come on time when you have case ?

15. <S 02> Doctor A : Yes , I will try.

The role-play, 'gossip' prompt initiates an interrogative judgment move, when nurse one opens the exchange. When the CCCR agent replies with a dis-endorsement of the doctor, our first CAD inter-textual positioning move is located and assigned. In her direct response to the interrogative opening move, nurse two, the CCCR agent, responds for the first of three times with CAD inter-textual positioning moves. None may be NVC moves because the process is not a needs negotiation related process. In each instance here, a complaint or as figured in appraisal framework's endorsement system—an aspect of inter-textual stance (see Methodology 3.6), a dis-endorsement relates the stance of the agent toward the previously stated interrogative, "What do you think about doctor A?"

Process-wise, the rest of the dialogue concerns clarification and recovery form this opening instance of dramatic irony—when the doctor overhears the gossip. The next steps are sometimes NVC *affect* inquiry, "Do you feel angry?" (CCCR/NVC agent move three) and the CAD face-lowering and raising routines, in move five (CCCR agent): "Do you need us to respect you?" This direct inquiry into the doctor's need is unusual and can seem confrontational . The NVC training and Marshal Rosenberg's method is based on bringing the need out –even guess it incorrectly—as a means for beginning needs negotiation. Here, when one medical staff member was engaged in gossip (judgment) the CCCR agent appears to be a 'collaborator'. This latter CAD move, the interrogative about respect does look and sound a lot like NVC discourse—but it is not. *Affect* and need in needs negotiation are held in sole proprietorship by each agent. In

other words, an NVC agent would relate the needs of the inquiry to feelings of the same agent and not to other parties (Rosenberg 2003:80). This is an essential distinction in NVC discourse and makes a clear demarcation from CAD discourse with respect to inter-textual positioning. Feelings and in turn needs lead to a needs negotiation process based on realization of each party's needs and not judgment of what the other party needs. Pedagogically, the text shows a beginner's engagement with *affect*.

4.3.4 Phase 2 Texts: Other CAD and NVC Moves

The designation of texts in these appraisal framework categories reflects a process of analysis from very broad context concerns down to specific grammatical and lexical choices. In addition, the importance of negotiation exchange itself, the discourse analysis focus of this study required the creation of an additional category for token designations in the CCCR context. Already in these analysis pages of Phase 1 and Phase 2 texts, CAD tokens in this category have been noted in relation to both CAD and NVC processes. Here a representative sample which splits a CAD NVC token assignment will be viewed for comparative analysis. In Phase 2 texts, this token assignment shared with *affect* the distinction of having greater NVC token numbers than for CAD. There were 11 CAD assignments and 13 NVC moves in this category. From the token report below, assignments of two tokens each CAD and NVC are displayed in bold text, in the summary report and in the transcript.

Phase: 2   Text: 18   Moves: 12

Token Assignment Report   Score:

  1. Judgment   1CAD

  2. Affect   -NVC, -NVC, -NVC, 1CAD

3. Appreciation   0

4. Inter-textual Positioning   -1NVC,-1NVC, -1NVC

5. **Other CAD/NVC Moves**   **-1NVC, -1NVC, 1CAD, 1CAD**

    Total Token Score: 8 NVC;   4   CAD

Transcript : 24 lines [Fifth category designates the 'Other CAD/NVC moves' token category]

1. <S 01> P1 : So, you don't like to play football ,right ?

2. <S 02> P2 : No—not really.

3. <S 01> P1 : **Which sports do you like to play** ? [Choice oriented interrogative: NVC **Fifth category**]

4. <S 02> P2 : I like swimming.

5. <S 01> P1 : **Why you like to swimming?**

[choice oriented interrogative with reflection language: NVC **Fifth category**]

6. <S 02> P2 : It's good exercise and not hot.

7. <S 01> P1 : Do you have friend to swimming with you ?

8. <S 02> P2 : Few people to swimming with me.

9. <S 01> P1 : How do you feel when you swimming ?

10. <S 02> P2 : I feel happy and enjoy.

11. <S 01> P1 : You want more friend to swimming with you ?

12. <S 02> P2 : Yes , It's may be more funny

13. <S 01> P1 : **May be I will go with you sometime.** [modal/ declarative CAD **Fifth category**]

14. <S 02> P2 : That sound good

15. <S 01> P1 : **Would you mine to play football with us, we have a lot of people, it very fun.** [modal/ interrogative: CAD **Fifth category**]

16. <S 02> P2 : Really , but I still scare to play it.

17. <S 01> P1 : Why ?

18. <S 02> P2 : I think it dangerous and violent game.

19. <S 01> P1 : No, It's not dangerous as you think, we just play for fun not serious game.

20. <S 02> P2 : Umm. I see.

21. <S 01> P1 : Today evening you free ?

22. <S 02> P2 : What time ?

23. <S 01> P1 : About 4 to 6 , 2 hour, come on let try.

24. <S 02> P2 : Alright , see you

In the earlier exchanges, the CCCR agent uses NVC negotiation exchange process when asking the other speaker, "Which sports do you like to play?" [Choice oriented interrogative: NVC Fifth category], and when the other speaker says, "I like swimming", and the CCCR agent replies, "**Why you like to swimming**?"[choice oriented interrogative with reflection language: NVC **Fifth category**]. However, the negotiation exchange process shifts to a CAD mode in line thirteen, "May be I will go with you sometime", [modalized declarative CAD Fifth category]. In the next move, line fifteen, the CCCR agent asks, "Would you mine to play football with us, we have a lot of people, it very fun [modalized interrogative: CAD **Fifth category**]. These CAD moves fall into this move category.

The invitation to play football is part of an implied agreement that they would go swimming together sometime too. The invitation for football began and ended in discourse elements of CAD rhetorical argument. The invitation is built on a somewhat coercive invitation that has a former 'hazy' agreement behind it. In terms of face, the second speaker may sense obligation. Culturally coded moves like this one and the NVC fifth category moves point to two separate negotiation processes in this Phase 2 text. This kind of multiple process and code shifting during the intervention were most pronounced in Phase 2, perhaps because the students were becoming more comfortable experimenting with NVC and CAD in the scenarios. In the

next text grouping, some Phase 3 texts show multiple processes. However, the NVC processes are more fully utilized.

4.4   PHASE THREE TEXTS (INTERVENTION)

During Phase 3, the workshop participants in role-plays used NVC moves as well as culturally affected discourse CAD moves. The recording dates for the Phase 3 samples were December 23 and 30, 2010. January 15-16, 2011 additional role-plays were recorded based on logs of patient medical staff communication. There are fifteen texts receiving token assignments and more than one hundred moves. The reaching of the one-hundred move threshold in just fifteen texts in Phase 3 shows that the medical staff are performing and creating longer role-plays which show more engagement and and NVC/CCCR moves. Data is based on the first one-hundred, CCCR/NVC agent tokens. Because this set of data includes mixed NVC/ CAD discourse examples, split genres appear with positive numbers for CAD and negative numbers for NVC as well as the NVC and CAD tags.

The Phase 3 data show participants' NVC exchanges increasing to the level of ranking highest in each of the appraisal categories. Of those categories, NVC was used most in the affect exchange category scoring 100 percent. Each time an *affect* was engaged in this Phase, the participants rather than avoiding *affect*, engaged it. On the other end, for inter-textual positioning, there were 13 tokens or 52 percent to 12 CAD tokens, 48 percent. There is a single token difference in the CAD and NVC assignments here. In some of these representative texts, some participants select CAD discourse moves above alternative NVC moves. Others were able to apply NVC in all areas. While participants engaged in these lengthy conversations, they produced texts considerably longer than in earlier Phases.

In these transcripts, odd numbered agents are the NVC agents unless otherwise noted. During Phase 3, participants engaged in lengthy conversations. Within these longer conversations, the focal appraisal category features will be highlighted for easy viewing. The Phase 3 texts were analysed in five appraisal framework categories, the fifth relating to negotiation exchange features and other NVC and CAD special features. The following table shows the genre differentiation, CAD or NVC, per CCCR/NVC agent. Key factors for analysis in Phase 3 are the high number of NVC *affect* tokens and the split results for two categories: inter-textual positioning and the fifth category relating to negotiation exchange tokens.

Table 38: Phase 3 Appraisal Framework Token Data

Move Tabulations:	Judgment	Affect	Appreciation	Inter-textual Positioning	Other NVC and CAD Moves
Phase 3 Tally	13	24	0	25	38
NVC	9	24	0	13	21
CAD	4	0	0	12	17

The focal appraisal category features in subsections 4.4.1, 4.4.2 and 4.4.3 will be highlighted in the transcript texts. Beginning with *affect*, the analysis moves then to judgment, inter-textual positioning, and other NVC/CAD moves. There were no instances of appreciation in these Phase 3 texts so that category is excluded from analysis.

4.4.1   AFFECT ENGAGEMENT AND AVOIDANCE

The role play topics for the final role-plays covered a variety of CCCR scenarios, the first

Five dealing with a variety of strong *affect* scenarios the second half with a variety of other

CCCR factors derived from Hofstede (1980) **Figure 27** displays the topics for Phase 3 role-

plays.

Figure 27: Final Role-play topics, Phase 3, Piyavate hospital Bangkok, December 2010 and

January 2011.

[Affect Topics: Blame, Judgment, Criticism]

1. A doctor overhears two nurses talking about him, "He is the slowest to respond to emergency calls." He walks to them and asks, "So you think I am lazy, don't you?
2. A friend is worried about her relationship and tells you, "My boyfriend never expresses affection to me."
3. A friend is having a difficult time at work and says "My boss can never make a decision on time and then we have to hurry too much and do a bad job."
4. You are helping a new nurse learn the computerized report system. The new nurse says, ""Wow, you think you are the smartest person in the world, don't you?"
5. Your mother tells you, "The doctor refuses to explain anything to me" as you join her in the waiting room before the doctor returns.

[Other CCCR Factor Topics]
6. Dealing with **Uncertainty**: An elderly Korean man who prefers to be called "Mr. "Kim comes in with a specific problem, but he is not able to communicate it. He looks at the floor or out the window and changes the topic. He asks a lot of questions about the staff's credentials, education, etc. He can speak English fairly well, but he does not understand written English. He feels embarrassed about this. He likes to speak out and express himself; however, he has come in today with an embarrassing sexual problem. He is asking for a male nurse or doctor, but none are available. You gather the information needed for his treatment.
7. Dealing with **Conflict**: A patient's mother feels she needs to be told her daughter's diagnosis. Earlier, the daughter (18 years old, American) has asked you to keep the information confidential. In your exam room, the daughter and mother argue and you try to negotiate a way that everyone's needs may be met.
8. Dealing with **Assertiveness**: A British patient who had recently had a stroke, insists that he be discharged. He must catch a flight back to Europe for a job interview. Your hospital staff tells him:"it is the hospital's rule that you may not be discharged." He ignores the "order" and begins packing to go. Air-travel may kill him, and you want to try to help him see the danger he is in.
9. Dealing with **Anger**: A patient with rheumatoid arthritis, Mrs. Brown, is very sensitive to needles and it really hurts her when you draw blood. Today, it was especially painful. When you take the vial of blood you realize you used the wrong vial. You must draw blood again. It is your mistake, but Mrs Brown must give you some more blood for an important test. She becomes very angry and refuses to cooperate.
10. Dealing with **Cultural Differences**: A middle Eastern man and his daughter are fasting for the religious holidays, but their employers have scheduled physical exams. They feel frustrated. They become aggressive when the nurse says "The Doctor. does not advise doing the blood tests for annual physical exams during long fasts."

Prior to final role-play recordings, participants drew role-play topics from a bowl. Some of the topics related to issues and contents of hospital encounters with foreign patients that occurred during the ten months of workshops. In this first role-play, we have an example of a scenario that had occurred in a different form in the hospital. For these topics which originated in hospital encounters, nurses and doctors were re-visiting scenarios with a colleague and sometimes the researcher or an actor played the foreign patient role since the two nurses who continued to provide data from hospital experiences wished to contribute role-plays based on their hospital encounters.

This first text is just such a scenario. As with two other Phase 3 texts, it addresses a hospital encounter shared and discussed during the workshops. Some of these topics were reformatted and used as topics for the final role-plays. The first text is based on role-play topic 7: "a patient's mother feels she needs to be told her daughter's diagnosis. Earlier, the daughter (18 years old, American) has asked you to keep the information confidential. In your exam room, the daughter and mother argue and you try to negotiate a way that everyone's needs may be met".

From the token report below, we see this text is high in NVC *affect*, as were all these Phase 3 texts, and we see CAD inter-textual positioning. Inter-textual positioning is a split category for Phase 3. Sometimes the participants used NVC and other times they used CAD when relating to issues of stance, endorsements, and other CAD attributes for inter-textual positioning.

Phase: 3   Text: 1   Moves: 11

Token Assignment Report   Score:

1. Judgment   -1NVC,-1NVC,-1NVC

2. Affect   -1NVC,-1NVC,-1NVC, -1NVC, -1NVC

3. Appreciation   0

4. Inter-textual Positioning   1CAD, 1CAD

5. Other CAD/NVC Moves   -1NVC, -2NVC

Total Token Score: -11 NVC; 2   CAD; one instance of a double: -2NVC

In the transcript below, NVC *affect* moves are highlighted. In non-*affect* moves, we also see the agent managing *affect* rather dexterously. For example, in the opening lines when the mother and daughter are arguing about the test results, the CCCR agent requests to meet each of them separately. The move used was a request, a fifth category NVC negotiation exchange move, but the result was that engagement rather than avoidance was pursuant to the strong *affect* of the mother and daughter's opening exchanges.

Transcript 28 lines [<S 03 is the NVC agent]

<S 01> mother ; <S 02> daughter; <S 03> nurse

1.   <S 01> [mother].... and please, tell me the results of Tina's exam [to a nurse].

2.   <S 02> [daughter] .... [to the nurse] you promised [confidentiality].

3.   <S 01> I am your mother. I have a right to know.

4.   <S 02> No you don't. Not at my age.

5.   <S 03> [nurse with daughter] Would you be willing to speak to me privately over here? Are you saying that you don't want your mom to know your diagnosis?

6.   <S 02> I am not sure about her reactions.

7.   **<S 03> Are you worried about your mothers feelings when she learns your diagnosis?**

8.   <S 02> No, she wants to know everything.

In the opening exchanges the nurse is trying to become acquainted with the situation. After she is alone with the daughter she asks a clarification question and uses a progressive finite

and predicator, "Are you saying…" focusing the discussion, in NVC terms, on what is being said and done. The daughter's response is vague, "not sure" the first-person subjective complement. The CCCR agent engages the vague wording by issuing a guess, "Are you worried about your mother's feelings…?" "No", the daughter replies. In NVC moves, 'wrong' guesses are the ways CCCR agents may engage *affect* and judgment for clarification--before relating them to the needs negotiation system. The negotiation process that the CCCR agent engages in here extends for several more moves including observational and *affect* interrogatives and requests.

9. <S 03> So are you needing privacy?

10. <S 02> Yes

11. <S 03> Would you say it is true that your mother wants to know about your health condition?

12. <S 02> Yes.

13. <S 03> Would you be willing to let me tell your mom in a general way—you are ok?

14. <S 02> ok [nurse goes to adjoining room where mother is waiting]

15. <S 01> I can't believe you are taking her side!

16. <S 03> Are you feeling angry because your daughter requested her tests results be confidential?

17. <S 01> yes I am.

18. <S 03> Are you feeling curious about your daughter's choice?

19. <S 01> Yes… I think something must be wrong. Is she pregnant?

20. <S 02> No she is fine. If you have more questions about your daughter's health you can ask her. Is she eighteen this year?

21. <S 01> yes she is

22. <S 03> Is she wanting more independence about her life now?

23. <S 01> Yes

24. <S 03> How do you feel about her growing up and wanting more independence?

25. <S 01> I feel sad because I miss her…..

26. <S 03> So you are having a family need to be close to her and she is needing more independence?

27. <S 01> Mothers and daughters.

28. <S 03> Yes. Mothers and daughters! [laughing]

Each time the CCCR agent addresses strong *affect* with a guess and a question, and chance to continue the exchange to needs negotiation is afforded. The agent is seen to negotiate needs with both her patient and the patient's mother. The CCCR agent asks the daughter a needs identifying question, "are you needing more privacy?" In so doing, she is building solidarity with the patient through meeting respect, understanding, and communication needs—whether or not the focal need for privacy is met or not. This 'added value' needs management in NVC process is integral to the needs negotiation process. The egalitarian stance to needs is evident here. The CCCR agent is able to bridge solidarity with both daughter and mother. In the needs-negotiation exchanges for each—beginning with the *affect* engagement, line 16 to line 26, the CCCR agent brings the conversational attention to the needs of the individuals present, shows respect and compassion for those needs by rephrasing and formulation needs discovery interrogatives around the needs. The need of the mother identified at the end, "a family need" arises in the mother's awareness more 'philosophically' in a much less serious way, "Mothers and daughters!"

Affect engagement in this text is representative of Phase 3 texts in that *affect* was engaged each time it was presented. In five CCCR moves, the agent directly inquired about the other agent's affective state. In other moves, other NVC engagement processes were used to address *affect*. Choice oriented requests for information were the most common in this category with instances in line 11 and in line 13.

Although the focus of this subsection has been on *affect* engagement, the negotiation process in this text addresses 'need' as an aspect of negotiation as well. The judgment/needs

scale in the NVC and CAD appraisal framework, the focus of the next section, extends from a single, needs-negotiation process in NVC to a variety of culturally coded processes in CAD.

4.4.2   NEEDS NEGOTIATION AND JUDGMENT/EVALUATION SYSTEMS

The majority of CCCR moves in Phase 3 texts were NVC moves, but there were some persistent judgment/evaluation CAD moves as well. Of 13 total moves in this category, 9 were NVC and 4 were CAD. Before we look at a text with a persistent CAD feature, text five below provides a good example of two aspects of the need- negotiation and judgment evaluation systems as they are dealt with in NVC needs negotiation process.

From one view, the NVC process is a respondent to judgment language. As NVC reacts to judgment it applies the same process as if the judgment were a feeling being expressed. Judgments are directed outward to external phenomena but NVC process integrates the affective and observational elements of the judgment. The following text is a good example of judgment processing because the CCCR agent must really follow through in several exchanges to discover the affective elements and make them clear beside the actual observational information. An interesting side-effect in NVC discourse in its processing of judgment is that *affect* questions often lead to more credible, authentic observational information. On face-value, an observer might expect the opposite, but in fact, in NVC needs negotiation, inquiries into *affect* clarify not only *affect* but lead to more credible information in other regards.

Phase: 3   Text: 5   Moves: 8

Token Assignment Report	Score:
1. Judgment	-1NVC
2. Affect	-1NVC, -1NVC, -1NVC

3. Appreciation   0

4. Inter-textual Positioning   -2NVC, -1NVC

5. Other CAD/NVC Moves   -1NVC, -1NVC

Total Token Score: -9   NVC   ; One double move density

Transcript   **15 lines**

1. <S 01> When you finish the reports, save the files here and here…

2. <S 02> You think you are the smartest person in the world don't you?

3. <S 01> Yes I am! No …just kidding. **When you say I am the smartest person in the world, are you feeling frustrated with me? [response to sarcastic judgment]**

4. <S 02>   No.

5. <S 01>   Would you be willing to tell me how you feel?

6. <S 02>   How I feel?

7. <S 01>   When you say joking that I am smart, you say it not serious way. How are you feeling?

8. <S 02>   I am feeling stress a little bit. You go quickly and I need time to practice.

9. <S 01> **So you need more time to practice?**

10. <S 02> Yes.

11. <S 01> Would you like to practice for twenty minutes, and then I will come back?

12. <S 02> Ok. How much more is there to learn about this system?

13. <S 01> Not too much….maybe thirty minutes.

14. <S 02> So you will come back and then we finish?

15. <S 01> Sure.

When the CCCR agent asks, "When you say I am the smartest person in the world, are you feeling frustrated with me?" we see a direct inquiry into *affect* behind a judgment. As an NVC token it scores as an *affect* engagement token because the main clause contains a finite, predicate and complement all focused on *affect* inquiry. The hypotactic extension relates

secondarily to inter-textual positioning via the paraphrased 'say back introduction to the move, 'when you say...'

4. <S 02> No.

5. <S 01> Would you be willing to tell me how you feel?

6. <S 02> How I feel?

7. <S 01> When you say joking that I am smart, you say it not serious way. How are you feeling?

8. <S 02> I am feeling stress a little bit. You go quickly and I need time to practice.

9. <S 01> **So you need more time to practice?**

The actual needs negotiation token assignment in this reading occurs in line nine when the need behind the other speaker's frustration and stress is identified as "need for more time".

As identified in the token assignment totals cited earlier, not all needs negotiation attempts resulted in NVC tokens. Four of nine assignments were CAD assignments. A representative excerpt from the data will illustrate this aspect of the analysis.

In text ten, the CCCR agent has only five moves and three are CAD assigned moves including the judgment designation. The complete report below shows the distribution, and this uncharacteristically short, Phase 3 text is cited beneath it.

This scenario concerns the common anxiety of a patient about late lab results. The doctor who in this case is the CCCR agent is charged with the task of helping the patient understand the delay. In the NVC process framework, to help the patient to express feelings and needs would be the communication exchange process. In this case, the CAD judgment token is highlighted below. In the aftermath of subsequent exchanges, this text shows that the CAD judgment was not

responsive to the patient's needs and may have initiated a closing move which the rest of the test is trying to recover from. When the process shifted from inquiry to imperative and CAD judgment, content came into risk. The main content of the patient's inquiry is offered by the patient after the doctor's closing move below (highlighted).

Phase: 3   Text: 10   Moves: 5

Token Assignment Report	Score:
1. Judgment	1CAD
2. Affect	-1NVC
3. Appreciation	0
4. Inter-textual Positioning	-1NVC, 1CAD
5. Other CAD/NVC Moves	1CAD

Total Token Score: -2   NVC; 3   CAD

Transcript :   11 lines   [even numbers: NVC agent]

1.   <S 01> P : Hey ! Doc............

2.   <S 02> Doc : I understand that you worry about your result and you want to know it right now ,right ?

3.   <S 01> P : Hell yeah. It's about my life and my health.

4.   <S 02> Doc : I understand that this is about your life and I also concern about that too. So it's better for you to calm down and I need you to wait until I sure about your result and solution.

5.   <S 01> P : Ok, I will calm down and wait for result but can you tell me for some information ?

6.   <S 02> Doc : **Ok, about your health it is ok not worry about that.**

The effect of the judgment here is almost as a closing effect, an avoidance factor when present this early in the text. In addition, the CCCR agent uses the imperative mood to tell the patient "not to worry". CAD avoidance of *affect* is consistent with imperative *affect* denial here.

7. <S 01> P : I don't take drugs anymore right ?

8. <S 02> Doc : Yes , you can go home and take a rest.

In fact, the doctor in line six judges the health condition with a general "ok" hoping that would "calm down' the patient. However, by the end of the role-play it comes out that the patient was concerned about the medication regimen. This disconnect in communication may be seen line by line in the way NVC process is succumbed in CAD doctor 'bedside manner'. In so doing, solidarity and trust may not have been strengthened by the interchange.

One element not fully utilized in this text but which is the focus of the next subsection is the observational interrogative when there is strong *affect* and uncertainty or assertiveness present. Had the doctor repeated key words and asked more questions, the solidarity in the conversation may have lead to more connection and understanding. Here the connection was lost when the doctor began avoiding engagement with the patient's *affect* but chose the imperative "calm down". In alternative scenarios we have seen how an *affect* interrogative in this position often was followed by information exchange. The key information exchanged later by the patient referencing the medication regimen was not part of the communication process with the doctor. It was volunteered as an afterthought, as a 'quality assurance' check. Affective barriers in some Phase 3texts like this one still lead to avoidance. The *affect* presented by the patient precedes the role-play doctor's initiation of CAD 'closing' routines before all the key information is shared.

One of the less tangible process dynamics evident in these texts is that of the role the NVC, universal needs sharing stance makes in communication process. Other cultural stances for medical staff as 'authority' may culturally carry a lot of weight within an institution, but data from this study suggests that authority/power moves in medical encounters form blocks in cross-cultural communication. Power language and stance remain CAD cultural factors in CAD token assignment in Phase 3 texts—and will be discussed further in chapter five, findings.

4.4.3   INTERTEXTUALITY AND OTHER CAD MOVES

In this last, representative text, the CCCR agent engages the patient's needs in both a linguistic and a culinary way. Offering to get the patient food is an example of needs compensation when the main need cannot be met. In this scenario the patient has painful arthritis and the staff already caused her great pain during her blood exam an hour earlier. Another test must be done. The CCCR agent has a challenging situation when the needs of the patient—for comfort and the patient's need for proper health care (blood tests) are at risk and in conflict. In this negotiation, the CCCR agent demonstrates NVC genre process in inter-textual positioning and in the fifth category, negotiation exchange and other NVC/CAD. Seven of eight moves are in these two categories. Because this text is illustrative of two features, the inter-textual positioning moves are rendered in bold while the fifth category moves are underlined.

Phase: 3   Text: 3   Moves: 8

Token Assignment Report   Score:

1. Judgment   0

2. Affect   -1NVC

3. Appreciation   0

4. Inter-textual Positioning -1NVC, -1NVC, -1NVC , -1NVC

5. Other CAD/NVC Moves   1CAD, 1CAD, -1NVC, -1NVC

            Total Token Score: -6 NVC; 2   CAD

Transcript [even numbers: NVC agent]

[a woman with arthritis resents being asked to give blood multiple times in a short time period]

\<S 01\> patient   **\<S 02\> nurse or doctor**

1.   \<S 01\> You better not be in here again to get blood!

2.   \<S 02\> Are you feeling angry because I have come again to get more blood?

3.   \<S 01\> Yes I am. It is so painful and you know it. Why couldn't you get all of it at the same time?

4.   \<S 02\> <u>I am sorry for your pain and I understand your frustration that we couldn't get it all before. I wish that too. This blood test requires a different vial and laboratory.</u> **Would you like to choose where I draw the blood? We did this arm last time—how about the other arm?**

[CAD apology token with an NVC request tag. Tags do not rank in token status]

5.   \<S 01\> Yeah, this one please.

6.   \<S 02\> <u>Is there anything else you would like now?</u>

7.   \<S 01\> Well, what are my choices?

8.   **\<S 02\> How about something from the kitchen?**

9. \<S 01\> I would like some poached eggs with my dinner.

10.   **\<S 02\> What kind of eggs?**

11.   \<S 01\> Poached, like steamed…

12. **\<S 02\> Poached eggs…**

13. \<S 01\> Is that it?

14. **\<S 02\> Yes, All done with the blood.**

         Poached eggs?

15. \<S 01\> Yes please

16. \<S 02\> <u>I'll go speak to the cook.</u>

17. \<S 01\> Thank you.

The inter-textual positioning is compassionate and the reflection language about the kind of eggs and the responsiveness to the patient's moment by moment comments show a concerned attention to someone in pain. The negotiation with the food is both a subsidiary needs addressing strategy and a means for getting the patient's attention off the painful blood work.

The fifth category tokens range from NVC requests as part of NVC needs negotiation process to a CAD apology. In NVC, an apology much like an appreciations is cast in terms of met and unmet needs—not as is rendered here, with a standard apology, "I'm sorry". It is important to note that in NVC is there is no judgment and the use of any kind of language is a choice each speaker makes. However, NVC as a genre and as exemplified by NVC practice is a distinct genre and may be differentiated for CAD even in intricate situations like this one. After the apology, (line 4, CCCR move 2 the CCCR agent needs to say she is sorry for culturally significant reasons, and does not wish to use NVC apology. She returns to NVC process with a fifth category NVC request in the tag contents of the move.

Over the three phases of the study culminating in Phase 3, recordings were made of role-plays by Thai medical staff. These chapters have illustrated the process of analysis applied to the transcriptions of these role-plays to distinguish cross-cultural conflict resolution skills. These skills include factors present in NVC genre, and each appraisal category has been applied to analysis of NVC. The Thai doctors and nurses in this study acquired a new discourse strategy in their second language, English, and their process for doing it was partially shaped by L1 cultural factors identified in the study. Another factor concerns L2 academic English and its impact on Thai medical staff speaking English inter-personally with foreigners in a Thai hospital setting. By now taking a broader view of the data in the next chapter, findings, we see CAD persistent features and NVC new features emerging in the data. The individual analysis of each phase and each appraisal category has resulted in these findings.

CHAPTER FIVE: FINDINGS AND DISCUSSION

Two areas of inquiry have been the focus of this research: (1) *affect* engagement and avoidance relative to NVC instruction, (2) the discourse pragmatics of NVC relative to culturally affected discourse (CAD). The findings of this longitudinal study relate to these inquiries in two ways: *affect*, by means of the attitude surveys and role-play samples, and discourse features by means of the discourse analysis of the speech samples and tallied findings based on those role-play recordings.

The question of *affect* relates to avoidance and engagement as they are observable in recorded speech samples and in attitude surveys. The periodic attitude surveys obtained from Thai medical staff members and described in Chapter Three, Research Methodology, were conducted in the same three Phase intervals as the role-plays. The respondents who speak English as a second language (L2) show some changing attitudes toward *affect* over the course of the study. In conjunction with the speech samples, we can make some observations about *affect* and engagement/avoidance.

5.1 LIKERT SURVEY FINDINGS RELATIVE TO THE THREE INTERVENTION PHASES

The final survey administered after ten months of medical English and counseling workshops records a significant decrease in three CCCR avoidance factors: patient assertiveness, conflict avoidance, and uncertainty avoidance.

(1) Patient Assertiveness: According to the pre-workshop surveys, participants avoided assertive patients more than half the time in the situations depicted in the 6 items. The progress results showed a lessening of avoidance. A split-half description of the responses in which the neutral answers are not included and the sum of the two CCCR avoidance answers, "agree and

results for six, assertiveness avoidance items describe the lessening of avoidance from 66.6 to 0 from 53.3 to 13.3, from 66.6 to 13.3 from 73.3 to 0, from 86.6 to 20, and from 59.9 to 6.6. The total decrease in avoidance is described in Figure 4. Item five showed the largest decrease in avoidance from 86.6 to 53.3 and may reflect participants' increasing confidence in their English communication skills with patients. All eighteen avoidance items tallied show a decrease in avoidance and an increase in willingness to engage.

2) Conflict Avoidance: The pre-workshop and progress surveys showed a significant decrease in conflict avoidance from and over-all decrease of 53.3 percent. NVC counseling encourages learners to welcome conflict and provides concrete steps for understanding conflict scenarios and how conflicts may be addressed and learned from. Though this preliminary progress report gives a general description of changes in avoidance tendencies, this factor was encouraging. The following set of results for five, conflict avoidance items describe the lessening of avoidance from 59.9 to 6.6, from 80 percent to 6.6, from 86.6 to 33.3, from 73.3 to 13.3 and from 60 to 13.3. The final item, "Differences of opinion are usually not worth worrying about so I try to avoid them" decreased to 20 percent, though fewer respondents chose "strongly agree" and more chose "agree" on progress surveys. Over-all, participants after the class described themselves as 53.3 % less likely to use avoidance strategies when confronting on-the-job conflicts.

3) Uncertainty Avoidance: The uncertainty avoidance factor compared to the other two CCCR avoidance factors decreased 52.2 %. Uncertainty avoidance fell significantly, perhaps indicating conversational competencies and confidence compensating for avoidance of the unknown. The following set of results for six, uncertainty avoidance items describe the decreased avoidance from 59.9 to 33.3, from 53.3 percent to 26.6, from 80 to 13.3 from 80 to 0,

66.6 to 13.3 and from 66.6 to 20.   By integrating the NVC counseling protocols into medical English instruction, a new kind of intervention into CCCR avoidance in Thai medical tourism was initiated. This study focuses on three CCCR avoidance factors to follow the pedagogical focus on engagement strategies via NVC practice. The data was collected in the form of recordings of 'performances' of the workshop participants throughout their medical English and counseling workshops. NVC defines communication skills that may be described using SFG and appraisal framework.

5.2 Pedagogical Findings for NVC/CCCR Acquisition

The medical English curriculum and lessons presented and participants studied NVC medical counseling, medical communication pragmatics (1) observations, (2) feelings, (3) universal needs, and (4) requests. Participants practiced these pragmatics and began translating observed, *affect* laden language into the counseling pragmatics. The moment of contact—the *affect* engagement moment absorbed participant attention in Phase 2. Their CCCR discourse began to change—step by step--in this particular way.

The data from role-play recordings and the attitude surveys show participants beginning to engage *affect* although other aspects of NVC discourse lagged behind. During Phase 2, participants engaged *affect* 24 times, 17 with NVC pragmatics, 7 times with CAD pragmatics compared to Phase 1 when no instances of NVC *affect* were recorded and 9 CAD *affect* tokens recorded. The engagement of *affect* with NVC pragmatics out-performs all other categories in Phase 2. By Phase 3, participants were able to engage *affect* 100% using NVC pragmatics, but *affect* scored in third position in Phase 3, 'Need/Judgment' being the only category with a lower score. Once *affect* pragmatics were mastered, other negotiation exchange elements received attention. This study's data indicates that *affect* engagement is a 'gateway' or pre-cursor skill for

CCCR pragmatics. The participants remained in *affect* engagement and practice for two to three months before regularly addressing other CCCR/NVC pragmatics in the needs negotiation process. The second research concern of this study involves the extent to which the NVC pragmatics and CAD pragmatics may be tracked over the course of the study and what that data may teach us about the L2 CCCR acquisition process for Thai medical participants. Here we can note that medical participants used these skills in situations with highly charged cross-cultural scenarios. In workshops, discussion and practice led to live student- instructor interaction translating what has been seen or heard into the cross-cultural communication protocols taught in the class. These strategies were aimed at meeting their expressed care-provider needs and the needs of their patients. Specific markers of discourse types studied suggest patterns of language and communication associated with international or cross-cultural English.

Certain grammar and lexical items associated with NVC discourse correspond to increased CCCR performance criteria. The poles of avoidance and engagement from the CCCR surveys help define the arena for the study of "violent and non-violent language" (Rosenberg 2003:5). The definitions of non-violent language so useful in determining SFG markers came from the books of Marshal Rosenberg and examples of violent and non-violent language. The Medical English and NVC communication program administered targeted these avoidance factors with "counseling pragmatics". The multi-cultural, multi-disciplinary implications of this approach are promising. From April 15, 2010 to January 15, 2011, medical professionals approached counseling English and NVC as a new language for expressing universal human needs and feelings. The Piyavate hospital medical staff entered into an international English context and had their own "displaced horizons" to confront while practicing. Learning an

international/cross-cultural form of medical English is not easy. According to this research, avoidance is the key factor in this CCCR intervention and may be a threshold marker beyond which violent language and conflict escalate, and conversely is a 'gateway' discourse skill for the participants in this study. *Affect* engagement preceded other CCCR/NVC discourse skills.

Potential conflict and force of *affect*, on the one hand and non-violent language on the other, come with processes and lexical/grammatical markers which can help identify and cross-reference communication tendencies toward and way from avoidance.

When conflicts occur in medical care, the patients and medical staff may have English in common, but may not speak the same English at all. The unique relationships of medical staff and patients and the challenges of communication across cultures warrant further intervention and study. This study finds that many cross-cultural conflicts and severe communication barriers may be overcome by degrees and often, serious conflicts averted. Communication avoidance and SFG violent/nonviolent language markers describe specific NVC language choices medical staff began to use when they reported avoidance in the past. The ten-month intervention showed that compassionate language may be learned and more instruction in CCCR would be beneficial.

The study had a limited scope in that it took a broad descriptive view of NVC and CAD discourse processes. Future studies with more participants may go deeper into the discourse subcategories like *affect* and judgment to examine if other pedagogical methods have other outcomes or influences on CCCR/NVC skill acquisition. In addition, the role-plays were hypothetical leading to data on 'performance' of practiced role-plays rather than live, on the job interactions with foreign patients. Confidentiality requirements and participant requests that role-plays be performance related means that this study's data tracks the *student* acquisition of CCCR skills in a workshop setting rather than actual hospital settings. A future study could include

skills in a workshop setting rather than actual hospital settings. A future study could include more spontaneous samples of live CCCR skills if the above mentioned needs could be addressed as well.

Thai study participants have reported through several venues that there are a variety of variables conducive to communication avoidance in medical encounters. Avoidance tendencies included cultural and situational conversation constraints. They report wishing to avoid patients as a way of expressing cultural deference as in "not looking at them while they are losing face." They also report avoiding as a means to decrease the potential for escalating strong feelings and emotions. Sometimes medical staff report feeling a sense of shame on behalf of patients who use aggressive actions or words, tones of voice/volume, culturally or linguistically prompted confusion or uncertainty, and powerful emotions demonstrated verbally or with body language. With these areas of cross-cultural conflict and avoidance tendencies toward them in focus, it follows that a targeted intervention and research plan would attempt to engage communication where communication has been reported to break down. The process of the development of these discourse skills like gisting and engagement with *affect*, the study found, was essential in the participant's willingness to use a counseling protocol rather than a cultural/habitual one. Analysis of Thai staff communication attitudes was studied and analyzed and the findings incorporated in the curriculum of the intervention. In the beginning, participants were focused on fear and aversion to cultural differences. Later, after sharing a rewarding experience that occurred after a negotiation of strong *affect* with a foreign patient, one nurse said, "I'm *international* nurse now!" Perception among the medical staff was that the CCCR strategies were applicable to day to day encounters with patients.

5.3 DISCOURSE ANALYSIS FINDINGS

The discourse analysis data from a broad view shows an increase from zero NVC discourse tokens in Phase 1 to nearly half the tokens assigned in Phase 2 to a clear majority of the tokens for Phase 3. The concise data analysis, **Table 39** shows total move tallies per phase using the negative and positive designations for NVC (marked 'negative') or CAD discourse genre tokens.

Table 39: Concise Total Token Assignments

NVC Discourse Genre	Phase1	Phase 2	Phase 3	Appraisal Analysis of (CAD) Genres
-100 to -200				100 to 200
Totals:	100	-49/51	-67/33	

Phase 1, the samples all coded for CAD discourse. This is a significant finding in that NVC negotiation processes were not present prior to the intervention suggesting that NVC 'does not come naturally' but must be chosen as a discourse option-- and practiced.

In Phase two, samples were gathered late in Phase 2, July 22 and 29, 2010, after three months of initial practice with NVC. Compared to the initial samples, there is a significant

features was *affect* engagement.

Medical staff began to engage in NVC discourse with role-plays that often contained affective barriers and force. *Affect* avoidance is one of the main causal factors cited in the literature for CCCR avoidance, so these texts suggest that after three months training these medical staff agents were able to use CCCR/NVC to break down affective barriers in communication. Other NVC features were uneven in performance in Phase 2.

Phase 3, the highest use of NVC genre features is observed. Data is based on the first one hundred 100 moves of this phase of data. Including move density, 102 is the final score here due to a double-move density assignments in text one, and one in text two. Totals: 100 moves; 102 score including move density. There were 69 total NVC and 33 total CAD token assignments. Those are broken down further below into appraisal subcategories:

1. Total token score for **judgment** Phase Three: 13:   9 NVC; 4 CAD

2. Total token score for **affect** Phase Three: 25:   25 NVC; 0 CAD

3. Total token score for **appreciation** Phase Three: 0:   0   0

4. Total token score for **inter-textual positioning** Phase Three: 25: 13 NVC; 12 CAD

5. Total token score for **other CAD/NVC moves** Phase Three: 39: 22 NVC; 17 CAD

. By Phase 3, CCCR agents express all features of NVC genre, and in some cases, still resort to CAD choices in certain contexts. These features will be reviewed in detail in the conclusion. The token assignments per feature category are totaled below. The token analysis findings shown were calculated based on 100 moves per CCCR agent per Phase. The tabulated results and the analysis concur that the processes of interpersonal communication in this CCCR setting changed over the course of the intervention. In phase 1, appraisal framework and SFG

combined with appraisal analysis revealed that there were no instances of NVC features in the data. Rather, CAD features only are shown.

Table 40: All Phase Comparative CCCR Agent Moves Excluding Move Density

NVC Agent, Move Tabulations: All Three Phases for Comparative Analysis	Judgment	Affect	Appreciation	Inter-textual Positioning	Other NVC and CAD Moves
Phase 1 Tally	18	9	0	35	38
NVC	0	0	0	0	0
CAD	18	9	0	35	38
Phase 2 Tally	21	4	2	29	24
NVC	7	17	0	11	13
CAD	14	7	2	18	11
Phase 3 Tally	13	24	0	25	38
NVC	9	24	0	13	21
CAD	4	0	0	12	17

These identified CAD token-features show power stance inter-personal positioning and face-lowering and raising CAD tokens in greater frequency than other CAD features and this trend remained into Phase 2 and Phase 3 to a lesser extent. From a pedagogical standpoint, these features of habitual CAD avoidance factors observed with such frequency in the data indicate specific cultural factors which would serve well as research foci for this ongoing research into CCCR training. In other words, trends in CAD cultural communication as revealed in this study for Thai doctors and nurses should be duplicated in this setting and others as a means to aid in the development of pedagogical tools for CCCR training across a variety of cultural settings.

With the need for communication across cultures in ASEAN countries including Thailand, research like this into cross-cultural communication strategies can lead to interventions in medicine and other settings where English is being used as the language of global communication.

CHAPTER SIX: CONCLUSION

As the first NVC discourse research in Thai medical communication, this study took a broad view and employed a simple, descriptive methodology. The negotiation matrix is particularly useful and focused when applied to interpersonal exchange, the medical tourism point of CCCR interest. The five appraisal framework categories scaled between CAD and NVC create a platform for describing the processes, semantics, and lexical/grammatical features of NVC and CAD over the course of the ten-month intervention.

The key conclusions per the research questions of the study relate to (1) *affect* engagement/ avoidance and (2) NVC discourse acquisition. We have already seen that the participants were much more engaged in *affect* and force of *affect* scenarios—beginning in Phase 2. Many texts were analyzed that contained moves of CAD discourse with the exception of NVC-*affect* discourse. 'Breaking the ice' on NVC/CCCR skills, *affect* engagement remained a viable CCCR/NVC skill of engagement from the middle months of the intervention of this longitudinal study to the end. NVC *affect* engagement preceded other CCCR/NVC features. *Affect* engagement was the first skill that the participants exhibited before moving on to incorporate other CCCR/ NVC skills and resulted in texts averaging one-third longer in Phase 2 than in Phase 1. Phase 1 texts averaged 4 moves and Phase 2 texts averaging 6 moves.

Affect engagement in this study was observed to precede and strengthen willingness to engage in other NVC processes. It is as if participants needed to feel proficient in turning strong *affect* into NVC discourse before they would attempt other NVC skills. In this study, NVC *affect* as an NVC/CCCR engagement skill is an essential part of the NVC needs negotiation process. Both judgment and *affect* are processed with the same pragmatics in this process, so *affect* engagement opens the door for other skills. Lexically and grammatically the *affect* engagement

process contains many pieces of the needs negotiation process—pieces that are repeated in other

forms in the other CCCR/NVC moves. For example, when a CCCR agent engages *affect*, and

says, "Are you feeling frustrated?" the agent has focused the attention on phenomena present

with the other speaker and is not responding in a CAD manner which might be misunderstood.

For example, power dimensions by way of a demand or citation of a rule in an institutional

setting can result in adverse and unexpected reactions among foreign patients among whom

many different power dimension codes apply(Armbrecht 2008: 3). *Affect* engagement in this

semantic sense has much the same purpose as CCCR/NVC inter-textual positioning or

judgment/needs because paraphrasing what the other speaker says and does might include all of

these topical concerns. "Are you feeling frustrated?" is a step toward full expression of

NVC/CCCR negotiation exchange process, linking observations, feelings and needs in complex,

hypotactic projections: "Are you feeling frustrated and need more respect from the staff when

they change your bed? "

In terms of NVC discourse acquisition, the data analysis has rendered findings per tallied

results in all categories of the discourse matrix for NVC and CAD.   On the surface, the tallies

show the NVC token assignments increasing as the participants became more adept at

CCCR/NVC pragmatics. In addition, the long-lasting CAD tokens which 'hang on' reveal

important findings as well. Just as *affect* engagement was a threshold skill for NVC acquisition,

certain persistent CAD traits show barriers for Thai medical staff as they try to acquire NVC.

The threshold speech function tallies in this descriptive study lead one to ask if such

habitual CAD functions might be targeted more specifically in future studies and interventions.

This study's focus was on NVC acquisition, but looking back in hindsight, there are ways the

CAD data may be useful in further research. This data shows threshold CAD moves documented

during these phases of this study for Thai medical staff at Piyavate hospital. These factors numbered:

100 (100 percent) CAD Phase 1

51 CAD moves in Phase 2

33 CAD Moves in Phase 3

Of the 84 persistent CAD moves, ones which continued into Phase 2 and Phase 3, 29 service encounter and information exchange moves were tallied. These are institutionally mandated and procedurally oriented moves. As such, they are not true indicators of cultural factors. When these institutional moves are excluded from the data, there is a remainder of 55 CAD moves. These are the most persistent CAD features which some participants over-came and others didn't. The CAD discourse features observed are organized from most to least frequent.

1. Apologies: 19 in Phase two and 4 in Phase 3 (23 total)

2. Judgments: 14 in Phase 2 and 4 in Phase 3 (18 total)

3. Advice, speech function/stance: 5 in Phase 2 and 3 in Phase 3 (8 total)

4. Power-relation language: 4 in Phase 2 and 2 in Phase 3 (6 total)

As noted in the analysis sections, CAD moves like apologies situated inside other processes including NVC processes often result in face-lowering or raising moves and/or avoidance discourse effectively ending the communicative moment. The power and usefulness perceived in these overt CAD choices by staff in these role-plays indicate that persistent social

/cultural tokens like these may be identified as CCCR barriers for Thai learners of cross-cultural English. A ten-month intervention resulted in seven NVC texts which contained no CAD tokens. The persistent CAD tokens indicate challenging but not insurmountable obstacles to CCCR communication.

This study shows that needs negotiation exchange processes of NVC may be learned. Indeed, the study concretely shows that compassionate communication may provide a semantic and linguistic basis for better medical communication. The pragmatics applied by Thai doctors and nurses in CCCR scenarios in workshops demonstrate their new found interpersonal communication skills with each other. In addition, two nurses, nurse Nok and nurse Noy agreed to keep journals of their use of NVC on the job. Text 2 of Appendix Three, in the collection of token reports and transcripts for Phase 3, the Italian Patient text shows how the lessons in NVC have helped staff and patients in the hospital.

In CCCR medical studies an interdisciplinary approach is necessary. Here, there was also the serendipity that an English teacher envoy into a medical tourism setting also had background in soft skills counseling and CCCR/NVC. Thai medical tourism, its growth potential via improved communication can build on this model and provide funding for CCCR research and training.

Poor communication remains the number one source of mal-practice litigation in the Thai medical tourism industry (Armbrecht 22). Additionally, the need in Thailand for improved, cross-cultural, inter-personal English language skills in international hospitals is especially acute now as the ASEAN legislation mandates that all Thai international hospitals and staff be bilingual and meet other English language requirements.

NVC as an interpersonal genre for second language learners in international hospitals is a

new approach to an old problem. To improve communication, do we focus on cultural differences solely or can we include needs negotiation process and a universal-needs stance? This study was the first to sample and analyze Thai medical staff applying the latter to CCCR role-play scenarios. The new negotiation form of discourse and all the materials from the workshop, the Piyavate first petitioned me then informed me, has been translated into Thai— both for easy understanding and for use with Thai patients as well.

NVC, interpersonal negotiation is a known discourse model and, in this study, a model for cross-cultural conflict negotiation. There is a unique opportunity to view stages of NVC genre acquisition in specific linguistic and semantic terms. This will be the first study not only to use NVC as a template for analysis of learners of NVC, but also in cross-cultural, pragmatics-based discourse studies in terms of an analysis based on linguistic-semantic criteria evident in NVC negotiation process and not assumed or developed theoretically by the researcher.

The analytical apparatus is grounded in years of NVC use and practice by Rosenberg and others, establishing it as an interpersonal genre of communication. Thus, NVC provides the negotiation exchange structure model for discourse analysis and genre differentiation. In chapter four, the grammatically and semantically scaled differential analysis of negotiation exchange structure model illustrated this point graphically. The discovery of NVC's capacity to provide a linguistic/semantic, differential model of CDA can be easily replicated and used for similar purposes in CDA research.

Pedagogically, the discourses of L2 learners can be viewed from both the culturally encoded discourse genres and from the NVC, educational target genre, allowing the discourse of L2 learners to be critically evaluated along a continuum between these two known models.

Previously, there has not been an opportunity to have a known discourse genre provide a

template for evaluation because sampling of an "ideal" had not been possible in previous research contexts. In this context, whereby students are actually studying and acquiring the interpersonal discourse pragmatics of NVC provides a unique opportunity to do an objective, cross-disciplinarily-viable linguistic/semantic analysis of L2 genre acquisition. The methodology for differentiating NVC and Culturally Affected Discourse (CAD) takes advantage of a "known" NVC discourse. It provides a template and criteria for differentiating NVC negotiation exchange structure form a culturally affected discourse (CAD).

This critical analysis, for these reasons, is the first of its kind, differentiating NVC and CAD discourse genres in texts over the longitudinal course of study and post study texts. Although many researchers have hoped for and called for a study of pragmatics in genre acquisition through which a reliable base-sample would provide a fair and objective template for analysis, this research may be the first to have such a base sample to work from. The unique semantic and lexical dynamics of each genre studied is helpful in this study of CCCR acquisition.

In this cross-cultural, medical tourism setting, and in the context of an educational intervention, the participant discourse moved between the new discourse, NVC, and habitual CAD discourses. These shifting discourses were tracked with the focus on negotiation exchange features of each genre studied. This process of differentiating (1) negotiation exchange structure of NVC and (2) negotiation exchange structure of culturally affected discourse (CAD) allows for CCCR participant discourse tracking and data for critical evaluation by which participant genre acquisition features may be measured over time. These CCCR/NVC pragmatics can be used in similar ways in future studies to track participants in a variety of settings.

In conclusion, the researcher would like to urge more medical training in NVC and or

other CCCR pragmatics for the international medical setting. I hope that the choice and the possibility of compassionate communication in hospitals will be re-visited by hospital administration, staff and patients. The choice to respect universal human needs enlivens the communication choices when cross-cultural conflicts occur, and the CCCR/NVC trained staff can use CCCR/NVC needs-negotiation pragmatics to alleviate suffering and make communication process more compassionate in practical ways for themselves and their patients.

GLOSSARY

Affect: is an aspect of attitude in the appraisal framework and concerns the emotional states of speakers and their expressions of emotional states in their spoken or written discourse.

Affective Barriers: are blocks to communication related to feelings, displays of feelings, and reactions to feelings. Affective barriers in this study are often cross-cultural, affective barriers related to words or actions which lead to a cessation of engagement because the cultural codes of one speaker are unknown to the other.

Agent: is the term describing a speaker of a text when that speaker has a designated role in an exchange. For example, the moves of the nurses and doctors in this study are the focus of the research. When a participant spoke from a cross-cultural conflict resolution CCCR) / NVC agent role, the CCCR/NVC 'agent' refers to the speaker in that role. The target discourse genre of CCCR/NVC which the workshop participants were learning describes the role of the agent.

Appreciation: is an attribute of the appraisal system's judgment/ evaluation system within appraisal framework, but in this study, in the NVC genre, we also see appreciation can fall inside the needs negotiation process of NVC. Appreciation can be shaped by cultural context. Culturally coded appreciations, for example, can be face lowering or raising moves.

Avoidance: is the reversal of communication process away from engagement. Discourse analysis features that are commonly studied in conjunction with avoidance include affective barriers, power dimensions, and uncertainty (Hofstede 1980).

Discourse: refers to 'talk', the ways in which people account for their experience. Discourse analysis is an interdisciplinary perspective of relatively recent origin (from about the 1960s) but having its roots in the ancient studies of rhetoric. The term discourse can be applied not only to talk but also to texts.

Engagement: is the process of interpersonal communication from an exchange view. In an interpersonal exchange, engagement refers to any discourse which is responsice to a previous move or which anticipates or initiates another move.

Evaluation: (see also 'judgment') is a subcategory of the appraisal framework which, in interpersonal research, refers to an agent's measure, judgment or categorization of something said or done.

Exchange: is a measure of discourse composed of an initial move and a response.

Force: is amplification of attitude in interpersonal discourse.

Genre: "is a way of acting in its discourse aspect" (Fairclough2003:216). Genre refers to the discourse elements observable for a given context or application. Mixed genres and subgenres show close adaptation to demands of context.

Intertextuality: is the relationship between texts or when examining one text, the echoing or presence of other texts felt within that text

Interpersonal: is the metafunction defined in SFG as "enacting social relationships" (Halliday 1994:36).

Judgment/evaluation: in Appraisal Theory (AT) Martin and Rose define the judgment/evaluation systems as the 'institutionalization of feelings in the context of proposals". In NVC, similarly there is a link with *affect*. In NVC judgment is an expression of feelings and observations mixed.

Move: a move is one agent's initiation or response in one exchange—half of an exchange.

Need: in Non-violent Communication (NVC) refers to the universal human desires from physical needs to social and autonomy needs. In NVC these needs give rise to *affect*.

Negotiation: is a process of social exchange which "provides resources for taking up speech roles in conversation: making statements, asking questions, offering services and demanding goods" (Martin and Rose 2003: 221).

Pragmatics: is thought of as "the science of language use" in Europe (Fairclough 1991: 9) but also includes recent developments like Critical Discourse Analysis (CDA).

Token Assignment: is a process of naming, or categorizing discourse features. Tokens can accumulate value and meaning from several levels of analysis.

Role: this refers to the position that an individual occupies within a given social structure or system. Individuals can play many different roles according to context, some of these may be formally set up in an institution, or they may be informally ascribed or embraced.

Stigma: a negative association or judgment against someone's 'identity'. It is as a result of the labeling process. The problem for the individual stigmatized is how to construct a sense of identity in a situation where he or she is labeled as inferior in some way.

Semiotics: is the study of signs and the processes of making meaning and in producing and interpreting meaning in experience.

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APPENDIX ONE

Phase One Texts and Token-Assignment Reports

The following texts and text-by-text results for token assignments were transcribed from recordings made at Piyavate hospital, on the first two consecutive workshop days, April 22 and April 28, 2010. The April 22 workshop role-play topics, texts one to seventeen, included service encounter conflicts and conflicts in inter-personal relationships. The April 28 role-play topics were employer/ employee related and also included a few inter-personal conflict scenarios as well. The token assignment reports include genre, phase, text, move and token assignment data. When a category receives multiple tokens the tokens per move appear separated by a comma (see text and token report 3 for an example). All token assignments fell in the CAD category for genre assignment.

Phase: 1   Text: 1   Moves: 4

Token Assignment Report	Score:	Genre:
1. Judgment	1	CAD
2. Affect	1	CAD
3. Appreciation	0	
4. Inter-textual Positioning	1	CAD
5. Other CAD/NVC Moves	1	CAD
Total Token Score:	4	CAD

Transcript : 7 lines

1. \<S 01\> Nurse : Well come ! What wrong with you ?

2. \<S 02\> Pt   : I … oooeee

3. \<S 01\> Nurse : Where did you pain ?

4. \<S 02\> Pt   : oooeeee

5. \<S 01\> Nurse : OK ! just take a rest on bed and I will call a doctor for you.

6. \<S 02\> Pt   : I want to see a doctor now. Can I ?

7. \<S 01\> Nurse : I Call to ward manager to help and she cannot help too. Then call for

translator to communicate with patient.

Phase: 1   Text: 2   Moves: 3

Token Assignment Report	Score:	Genre:
6. Judgment	0	CAD
7. Affect	0	CAD
8. Appreciation	0	
9. Inter-textual Positioning	2	CAD
10. Other CAD/NVC Moves	1	CAD
Total Token Score:	3	CAD

Transcript : 6 lines

1. \<S 01\> Pt   : When can I get my result ?

2. \<S 02\> Nurse : It come out at least 5 days.

3. \<S 01\> Pt   : No. I want to know the result now. I can't wait !

4. <S 02> Nurse : This result must take long time to investigate and make sure for the lab exam accuracy .

5. <S 01> Pt　　 : I don't want to waste my time.

6. <S 02> Nurse : Can you leave your address and I will send you the result later, so you don't to come here again and again ?

Phase: 1　　Text: 3　　Moves: 5

Token Assignment Report	Score:	Genre:
6. Judgment	1,1	CAD
7. Affect	0	CAD
8. Appreciation	0	
9. Inter-textual Positioning	1	CAD
10. Other CAD Moves	1,2	CAD
Total Token Score:	6	CAD

Transcript : 10 lines

1. <S 01> Nurse : Good morning . Can I help you?

2. <S 02> Pt　　 : I appointment with Doctor. today.

3. <S 01> Nurse : Please wait a minute. Did you have a breakfast ? How long ?

4. <S 02> Pt　　 : I already drinking smoothie and eating donut just 2 hrs. before come to hospital.

5. <S 01> Nurse : Sorry Ms…………… This laboratory you shouldn't eat anything before taking this lab 6 – 8 hrs.

6. <S 02> Pt   : Why nobody tell me?

7. <S 01> Nurse : Actually , the suggestion will in the back of appointment ' s paper.It's my wrong that I didn't explain to you.

8. <S 02> Pt   : But I can't make a new appointment because my boss not allow me to off job.

9. <S 01> Nurse : I will consult the doctor. You should wait around 6 hrs. and shouldn't eat anything during this time.

10. <S 02> Pt   : OK.

Phase: 1   Text: 4   Moves: 4

Token Assignment Report   Score: Genre:

1. Judgment	0	CAD
2. Affect	1	CAD
3. Appreciation	0	
4. Inter-textual Positioning	1	CAD
5. Other CAD/NVC Moves	2	CAD
Total Token Score:	4	CAD

Transcript : 7 lines

1. <S 01> Nurse : What happen Madam ?

2. <S 02> Pt   : I don't know yesterday evening, I can 't eat well may be something wrong

in the stomach, that why I come to hospital.

3. <S 01> Nurse : Have you ever feel like this ?

4. <S 02> Pt   : Yes, just sometime. Finally disappearance. Now I feel so pain.

5. <S 01> Nurse: Did you eat last night?

6. <S 02> Pt   : No, just water.

7. <S 01> Nurse : OK, please wait a moment. I will inform doctor.

Phase: 1   Text: 5   Moves: 3

Token Assignment Report	Score:	Genre:
1. Judgment	1	CAD
2. Affect	0	CAD
3. Appreciation	0	
4. Inter-textual Positioning	1	CAD
5. Other CAD/NVC Moves	1	CAD
Total Token Score:	3	CAD

Transcript : 5 lines

1. <S 01> Nurse : Hello ! Mactan what happen with you?

2. <S 02> Pt : I finished physical examination lab result, so I want to know result now.

3. <S 01> Nurse : Please calm down. I will check for you.

4. <S 02> Pt : You know ? I had to pay a lot of money but not affective for me. I want to know today.

5. <S 01> Nurse : OK. Sir , your result not come out yet. You have to wait at least five days. We will try to finish early as much as possible.

Phase: 1   Text: 6   Moves: 3

Token Assignment Report	Score:	Genre:
1. Judgment	1	CAD
2. Affect	1	CAD
3. Appreciation	0	
4. Inter-textual Positioning	1	CAD
5. Other CAD/NVC Moves	1	CAD
Total Token Score:	3	CAD

Transcript : 7 lines

1. <S 01> Pt : Hello.

2. <S 02> Nurse : Hello, can I help you ?

3. <S 01> Pt   : I want to do physical exam today for endoscopy. See in to the stomach.

4. <S 02> Nurse : Did you eat last night ? When is the last eating time ?

5. <S 01> Pt   : Yes , I just finished lunch.

6. <S 02> Nurse : So , You can't do now because for endoscopy can't eat , so if you want to do endoscopy , I will give you appointment another day.

7. <S 01> Pt   : I can't come because my boss give me leave only one day from work , no body tell me on NPO

Phase: 1   Text: 7   Moves: 8

Token Assignment Report	Score:	Genre:
1. Judgment	1	CAD
2. Affect	1	CAD
3. Appreciation	0	
4. Inter-textual Positioning	1,1	CAD
5. Other CAD/NVC Moves	1,1,1,1,	CAD
Total Token Score:	8	CAD

Transcript : 15 lines

1. <S 01> HC : How are you , What is your problem ?

2. <S 02> Pt : Hold stomach : Stomach ache

3. <S 01> HC : Liver ,/ Spleen ? / abdominal ?

4. \<S 02\> Pt : feel angry.

5. \<S 01\> HC : What did you say ?

6. \<S 02\> Pt : I feel .....?

7. \<S 01\> HC : OK. I will take you at examination room. If I touch in the area this you pain, you shout out .

8. \<S 02\> Pt : Yes.

9. \<S 01\> HC : Point at liver

10. \<S 02\> Pt : oooee

11. \<S 01\> HC : (Point at appendix)

12. \<S 02\> Pt : Oh ! Yes.

13. \<S 01\> HC : Ok. I will send you to see doctor to confirm it.

Phase: 1   Text: 8   Moves: 4

Token Assignment Report	Score:	Genre:
1. Judgment	1	CAD
2. Affect	1	CAD
3. Appreciation	0	
4. Inter-textual Positioning	1	CAD
5. Other CAD/NVC Moves	1	CAD

Total Token Score: 4 CAD

Transcript : 8 lines

1. \<S 01\> Pt : Why the lab examination is very expensive.

2. \<S 02\> HC : Calm down first . I have to tell you first that the lab you test is the high

technology , it can tell you in 100 % about your disease.

3. \<S 01\> Pt : Why you don't tell me before , if I know, I will not take it.

4. \<S 02\> HC : Because you in emergency case and doctor want to know it surely.

5. \<S 01\> Pt : OK. But why I have to wait a long time?

6. \<S 02\> HC : Because the process to show the result it have to confirm many time to prevent

the error result.

7. \<S 01\> Pt : OK.

8. \<S 02\> HC : OK , if the result come out I will call you.

Phase: 1   Text: 9   Moves: 7

Token Assignment Report	Score:	Genre:
1. Judgment	1,1	CAD
2. Affect	1	CAD
3. Appreciation	0	
4. Inter-textual Positioning	1,1	CAD

5. Other CAD/NVC Moves	1,1	CAD
Total Token Score:	7	CAD

Transcript : 15 lines

1. <S 01> Pt : Why cannot test lab today ?

2. <S 02> HC: Because you already take breakfast.

3. <S 01> Pt : Why ? can not test it I already ate ?

4. <S 02> HC: The lab result will change , it is not correct.

5. <S 01> Pt : No one tells me before.

6. <S 02> HC: You have to know by yourself.

7. <S 01> Pt : You are healthcare provider, you have to tell me when I make an appointment.

8. <S 02> HC : I am sorry , Can you come another day ?

9. <S 01> Pt : No!!! my boss not allow me to come out.

10. <S 02> HC : How about this evening but all day, you can not take anything?

11. <S 01> Pt : I have another appointment at 3 pm.

12. <S 02> HC: How about 6 pm.

13. <S 01> Pt : It waste my time.

14. \<S 02\>HC : OK ! Let go to see the doctor and discuss with him

15. \<S 01\> Pt : OK !

Phase: 1   Text: 10   Moves: 5

Token Assignment Report	Score:	Genre:
1. Judgment	1,1,	CAD
2. Affect	0	CAD
3. Appreciation	0	
4. Inter-textual Positioning	1, 1,1	CAD
5. Other CAD/NVC Moves	0	CAD
Total Token Score:	5	CAD

Transcript : 11 lines

1. \<S 01\> Pt : I want to go home today.

2. \<S 02\> Nrs : You will go home today but your condition is not well.

3. \<S 01\> Pt : But I can't wait more.

4. \<S 02\> Nrs : Can I call to doctor and consult him first.

5. \<S 01\> Pt : Ok.

6. \<S 02\> Nrs : The doctor didn't order you to go home today because he worried about your condition.

7. <S 01> Pt   : But I have job interview. I will loss job.

8. <S 02> Nrs : Doctor is worried you may got worse symptom.

9. <S 01> Pt   : But my job.

10. <S 02> Nrs : You should consider that if you go now and have interview tomorrow you may

postprone for next day. It's will better way.

11. <S 01> Pt   : May be. I will try.

Phase: 1   Text: 11   Moves: 2

Token Assignment Report	Score:	Genre:
1. Judgment	1	CAD
2. Affect	0	CAD
3. Appreciation	0	
4. Inter-textual Positioning	1	CAD
5. Other CAD/NVC Moves	0	CAD
Total Token Score:	2	CAD

Transcript : 4 lines

1. <S 01> B : I would like to apologize with my wrong and I had punish that employee already.

2. <S 02> C : No , it was not enough you must find out her. I had never seen employee like that

before.

3.   <S 01> B : Please Madame. Please calm down I really sorry about that . Please give a chance to my employee because she was crazy sometime when she had work hard.

4.   <S 02> C : No , If you don't find out her. I will do something with your company. Do you want ?

Phase: 1   Text: 12   Moves: 3

Token Assignment Report	Score:	Genre:
1. Judgment	1	CAD
2. Affect	1	CAD
3. Appreciation	0	
4. Inter-textual Positioning	1	CAD
5. Other CAD/NVC Moves	0	CAD
Total Token Score:	3	CAD

Transcript :   6 lines

1.   <S 01> B: On the phone the customer blame me like a hell. Why didn't you make a reservation very bad ?

2.   <S 02> E: I have a lot of work to take care demanding customer but this person is rude.

3. <S 01> B: Oh ! well. It's that your job. Why you didn't take care him very well. If you do like this again I will fire you.

4. <S 02> E: I have some reason to support my false!

5. <S 01> B: What ' s your reason ?

6. <S 02> E: I did it because at that time I ' m stomachache and the weather is hot.

Phase: 1   Text: 13   Moves: 3

Token Assignment Report	Score:	Genre:
1. Judgment	0	
2. Affect	0	
3. Appreciation	0	
4. Inter-textual Positioning	1	CAD
5. Other CAD/NVC Moves	1,1	CAD
Total Token Score:	3	CAD

Transcript : 5 lines

1.   <S 01> B : What your problem ?

2.   <S 02> C : I have some problem about your service.

3.   <S 01> B : What going on ?

4.   <S 02> C : I need to blame the reception because she is not polite.

5.   <S 01> B : Oh! I would to say sorry about that situation. It wouldn't have that again , so I will give you a gift for two days reservation deluxe room.

Phase: 1   Text: 14   Moves: 1

Token Assignment Report	Score:	Genre:
1. Judgment	0	CAD
2. Affect	0	
3. Appreciation	0	
4. Inter-textual Positioning	1	CAD
5. Other CAD/NVC Moves	0	CAD
Total Token Score:	1	CAD

Transcript 2 lines

1.   <S 01> E : I ' m sorry , I have the problem about the searching system about the customer to wait for a long time.

2.   <S 02> B : That's a situation

Phase: 1   Text: 15   Moves: 2

Token Assignment Report	Score:	Genre:
1. Judgment	0	
2. Affect	0	
3. Appreciation	0	
4. Inter-textual Positioning	0	CAD
5. Other CAD/NVC Moves	1,1	CAD
Total Token Score:	2	CAD

Transcript : 5 lines   Topic:

1. <S 01> B : Hello sir Can I help you ?

2. <S 02> E : You service is very bad and impolite. You employee took me 30 mins waiting on hold. What 's your responsibilty for this problem ?

3. <S 01> B : We are sorry for an inconvenient service and I'm sure that their must be some misunderstanding with you and our employee. But anyway , our company will take this responsibility by giving you a travel ticket for your holiday and I will go to talk to that employee.

Phase: 1   Text: 16   Moves: 5

Token Assignment Report	Score:	Genre:
1. Judgment	0	
2. Affect	1	CAD
3. Appreciation	0	
4. Inter-textual Positioning	1, 1	CAD
5. Other CAD/NVC Moves	1, 1	CAD
Total Token Score:	5	CAD

Transcript : 9 lines

1. <S 01> C : Hey! Your service was very bad and impolite ?

2. <S 02> B : Excuse me , What ' s happened ?

3. <S 01> C : I have been waiting the service on hold for over 30 minutes. I had to pay more money on telephone 's expense. Who are going to take this responsibility ?

4. <S 02> B : OK madam , I will take this responsibility . I'm so sorry for those impolite service would you mind if I offer you a gift voucher to you.

5. <S 01> C : OK , but make sure that this will not happen again.

6. <S 02> B : I got the customer complain about service. Do you have any excuse or something to explain to me ?

7. <S 01> B: Sorry , but on that day ,we have some problem about searching system.

8. <S 02> C : Thank you for your responsibility on this problem. Now I'm ok with this and hope this is the last time.

9. <S 01> B : Thank you for understanding. I'm sure that there won't be this kind of problem happen again.

Phase: 1   Text: 17   Moves: 7

Token Assignment Report	Score:	Genre:
1. Judgment	1,1	CAD
2. Affect	1	CAD
3. Appreciation	0	
4. Inter-textual Positioning	1,1	CAD
5. Other CAD/NVC Moves	1,1	CAD

Total Token Score: 7   CAD

Transcript : 13 lines Topic

1. <S 01> B : How long have you been talking with customer ?

2. <S 02>E : 4 minutes.

3. <S 01> B : Why the customer complain that she wait on hold for 30 minutes ?

4. <S 02> E : Manager told me to make coffee

5. <S 01> B : Why you not finished take care to the customer first before making a coffee ?

6. <S 02> B : Do you think the customer are important to our company -- luckily I am a kind person I will give you a second chance.

7. <S 01> B : Can I help you ?

8. <S 02>C : Yes , How you company let customer wait for 30 minutes.

9. <S 01>B : Do you know who speaking with you.

10. <S 02> C : I doesn't ,but anything I just to solve the problem

11. <S 01> B : Can you remember the voice ?

12. <S 02>C : I talking to Nophon and he really rude to me.

13. <S 01> B : I am sorry Nophon has alreadyquit.

Phase: 1   Text: 18   Moves: 3

Token Assignment Report	Score:	Genre:
1. Judgment	0	
2. Affect	0	
3. Appreciation	0	
4. Inter-textual Positioning	1	CAD
5. Other CAD/NVC Moves	1,1	CAD
Total Token Score:	3	CAD

Transcript : 6 lines   Topic:

1. <S 01> B : May I help you ?

2. <S 02> C : Yeah , you can help me. I ' ve been 30 minutes.

3. <S 01> B : I am very sorry for putting you on hold for so long.

4. <S 02> C : What ' s wrong with this hotel. How could you put me waiting for 30 minutes and the employee who put me on hold was very rude.

5. <S 01> B : I 'm sorry we don't have enough employee at the moment because this long holiday we have many work. All employee are dealing with the reception at the moment.

6. <S 02> C : What that who employee.

Phase: 1   Text: 19   Moves: 4

Token Assignment Report	Score:	Genre:
1. Judgment	0	
2. Affect	0	
3. Appreciation	0	
4. Inter-textual Positioning	1, 1	CAD
5. Other CAD/NVC Moves	1, 1	CAD
Total Token Score:	4	CAD

Transcript : 7 lines Topic:

1. \<S 01\> B : I 'am sorry for putting you on hold . May I help you ?

2. \<S 02\> C : What are you doing ! I 've been waiting for 30 minutes.

3. \<S 01\> B : We're very sorry. Right now we are short on the employees.

4. \<S 02\>C : What made your employees so busy ?

5. \<S 01\> B : There had been a car accident in front of our hotel and the victim was one of our employees.

6. \<S 02\> C : What about your employee ? Is he OK ?

7. \<S 01\> He is currently in the hospital but some of our employees had to take him there. That's why we are short on the employees.

Phase: 1   Text: 20   Moves: 4

Token Assignment Report	Score:	Genre:
1. Judgment	0	
2. Affect	0	
3. Appreciation	0	
4. Inter-textual Positioning	1,1	CAD
5. Other CAD/NVC Moves	1,1	CAD
Total Token Score:	4	CAD

Transcript : 8 lines

1.   \<S 01\> Boss : What happen ? Why the customer wait too long ?

2.   \<S 02\> Worker : Today ,we have many customer. It's very busy.

3.   \<S 01\> B : Really , but you talk rudely right ? The customer very angry. Do you know ?

4.   \<S 02\>W : Yes , I talk rudly . But the customer make me crazy.

5.   \<S 01\> B : I know but , you make customer waiting for long time. The customer make
angry but you should not crazy , You should take to customer policely.

6.   \<S 02\> W : I know that I'm not police but I can do not thing Today , have many customer ,
not only her , So I'm sorry about that I will not happen again.

7. <S 01> B : You would link to stop working. I don't dismiss you but I think you should stop working about 1 week.

8. <S 02> W : OK ! sir . You is my boss.

Phase: 1   Text: 21   Moves: 4

Token Assignment Report	Score:	Genre:
1. Judgment	1	CAD
2. Affect	0	
3. Appreciation	0	
4. Inter-textual Positioning	1	CAD
5. Other CAD/NVC Moves	1, 1	CAD
Total Token Score:	4	CAD

Transcript : 8 lines

1. <S 01> Customer: Hello. I want to talk with manager.

2. <S 02> Boss   : It's me . Can I help you ?

3. <S 01> Customer : Sure , I have a problem with you worker.

4. <S 02> Boss   : Oh , What is the problem ?

5. <S 01> Customer: At the morning , I call to your restaurant to order some food. Because , I am so angry but I have to wait your operator 30 minutes. When you worker greeting , hr said to me rudely . What does it mean manager.

6. <S 02> Boss : Oh , I 'm so sorry . I will warn my employee. And for this lunch , I will give you for free.

7. <S 01> Customer: Do you know boss ? I am angry and I should your restaurant I imagine that your service and your food is good . It depend on a free food for today ,and I will happy.

8. <S 02> Boss : Thank you sir . That is my job . I give a free food to you for loss to me.

Phase: 1   Text: 22   Moves: 3

Token Assignment Report	Score:	Genre:
1. Judgment	0	
2. Affect	0	
3. Appreciation	0	
4. Inter-textual Positioning	1	CAD
5. Other CAD/NVC Moves	1, 1	CAD
Total Token Score:	3	CAD

Transcript : 6 lines

1. <S 01> Cus : Hello , Is it the supermarket 's head office ?

2. \<S 02\> Boss : Yes, How can I help you ?

3. \<S 01\> Cus : Are you manager ?

4. \<S 02\> Boss : Yes .

5. \<S 01\> Cus : Yesterday I called your office and waiting on hold over 30 minutes and your employee had a rude behavior . Could you tell me what going on ?

6. \<S 02\> Boss : I'm really sorry about this problem. I will give some punishment to that employee . I am very sorry to you.

Phase: 1   Text: 23   Moves: 3

Token Assignment Report	Score:	Genre:
1. Judgment	1	CAD
2. Affect	0	
3. Appreciation	0	
4. Inter-textual Positioning	1	CAD
5. Other CAD/NVC Moves	1	CAD
Total Token Score:	3	CAD

Transcript :   6 lines

1. \<S 01\> Cus : Hello Is it Adidas's company ?

2. \<S 02\> Boss : Yes , How can I help you ?

3. <S 01> Cus : Yesterday , I called you office for the service but your employee is very rude and I had to wait on hold for long time.

4. <S 02> Boss : Could you tell me when ?

5. <S 01> Cus : Yesterday around 9.30 am.

6. <S 02> Boss : We had a busy moment yesterday and our CEO visited our branch. I will give them punishment. Customer service is very important and I will take care of it.

Phase: 1   Text: 24   Moves: 3

Token Assignment Report	Score:	Genre:
1. Judgment	0	
2. Affect	0	
3. Appreciation	0	
4. Inter-textual Positioning	1	CAD
5. Other CAD/NVC Moves	1, 1	CAD
Total Token Score:	3	CAD

Transcript : 5 lines

1. <S 01> B : I receive the letter from you that my employee say rudely to you.

2. <S 02> C : Your employee got me wait about 30 mins that make me waist my time.

3. <S 01> B : First ,I would like to say sorry to you that I am let this situation happened.

4. <S 02> C : At this time, I might go to airport fo C : At this time, I might go to airport for send my friend went to China.And this situation make me didn't send my friend at there. What do you do to improve this situation.

5. <S 01> B : I'm sorry again for this. I will practice and train my employee about company's service.

Phase: 1   Text: 25   Moves: 4

Token Assignment Report	Score:	Genre:
1. Judgment	1	CAD
2. Affect	0	
3. Appreciation	0	
4. Inter-textual Positioning	1, 1, 1	CAD
5. Other CAD/NVC Moves	0	
Total Token Score:	4	CAD

Transcript : 7 lines

1. <S 01> B : What was happen ?

2. <S 02> E : I let customer to wait for 30 minutes.

3. <S 01> B : Why you did like that ?

4. <S 02> E : At that time I had many other customer at the some time.

5.   <S 01> B : Why did you talk rudely to the customer ?

6.   <S 02> E : There was many customers and I was hurry ,So I was very upset.

7.   <S 01> B : Next time when you have many customer you should calm down and have a conscious, you should respect your work and your customers.

Phase: 1   Text: 26   Moves: 3

Token Assignment Report	Score:	Genre:
1. Judgment	1	CAD
2. Affect	0	
3. Appreciation	0	
4. Inter-textual Positioning	1	CAD
5. Other CAD/NVC Moves	1	CAD
Total Token Score:	3	CAD

Transcript :   5 lines

1.   <S 01> B : A customer write a letter to me and say that our sport equiptment don't work after using 6 months. How do --How do you think you can solve it?

2.   <S 02> E : May be the customer are doing it incorrectly. We should have an exploration for them.

3.   <S 01> B : Why did you not do in the first place ?

4.   <S 02> E : People can improve from their mistake. Forget the past and look at the future.

5. <S 01> B : That's a good quote. I have a future for you now. I think you should find a future in your new company.

Phase: 1   Text: 27   Moves: 3

Token Assignment Report	Score:	Genre:
1. Judgment	0	
2. Affect	0	
3. Appreciation	0	
4. Inter-textual Positioning	1,1	CAD
5. Other CAD/NVC Moves	1	CAD
Total Token Score:	3	CAD

Transcript : 6 lines

1. <S 02> B : We have received many complaints from our customers that they still get pregnant still using our product.

2. <S 01> E : How can it be ? I check every box. Every product is strong and perfect!

3. <S 02> B : Show me one.

4. <S 01> E : here--it is perfect.

5. <S 02> B : Did you ask the customer why it doesn't work ?

6. <S 01> E : He said that his wife used it.

Phase: 1   Text: 28   Moves: 5

Token Assignment Report	Score:	Genre:
1. Judgment	0	
2. Affect	1	CAD
3. Appreciation	0	
4. Inter-textual Positioning	1, 1	CAD
5. Other CAD/NVC Moves	1, 1	CAD
Total Token Score:	5	CAD

Transcript :   9 lines

1.   <S 01> Boss : Hey , I got the latter from a customer that she has to hold for 30 minutes without any answer. What 's happen ?

2.   <S 02> Employee : Today, a lot employee absent, so we can not do everything in time.

3.   <S 01> Boss : Do you know she is a very important person and she's very angry, what should you do ?

4.   <S 02> Employee : I can say sorry to her about this situation.

5.   <S 01> Boss : Ok, I will call by myself. Hello, yesterday you ordered the pizza.

6.   <S 02> Customer : Yes , I did.

7.   <S 01> Boss : I got your letter that you wait on hold 30 minutes. We are sorry for inconvenience.

8. \<S 02\> Customer : Do you know , I waste the time ?

9. \<S 01\> Boss : So sorry ,we will give the gift voucher for you, because you are the very important customer for the Pizza Hut Company. I hope you will love this special service. Thank you for your understanding.

APPENDIX TWO

Phase Two Texts and Token-Assignment Reports

During Phase 2, the workshop participants in role-plays used newly learned NVC moves as well as culturally affected discourse CAD moves. The recording dates for the Phase 2 samples were July 22 and 29, 2010. There are seventeen texts receiving token assignments and more than one hundred moves. Data is based on the first one-hundred, NVC agent tokens. Because this set of data includes mixed NVC CAD discourse examples, split genres appear with positive numbers for CAD and negative numbers for NVC as well as the NVC and CAD tags. Odd numbered agents are the NVC agents unless otherwise noted.

Phase: 2   Text: 1   Moves: 7

Token Assignment Report	Score:
1. Judgment	1CAD
2. Affect	-1NVC,-1NVC, 1CAD,
3. Appreciation	0
4. Inter-textual Positioning	1CAD
5. Other CAD/NVC Moves	-1NVC, -1NVC
Total Token Score:	3 CAD; -4 NVC

Transcript : 14 lines Topic:

1.   <S 01> G : You know somebody text to you last night

2.   <S 02> B : Somebody text to me.

3.   <S 01> G : Would you be willing to tell me who is the sender ?

4. <S 02> B : Yes I am willing to tell you but actually I don't know who

5. <S 01> G : Would you mind to show me that message ?

6. <S 02> B : Yes sure, so what is your feeling when you saw the massage ?

7. <S 01> G : I was so confuse and jealous.

8. <S 02> B : But actually I don't know who is the sender because It's an unknown number.

9. <S 01> B : What can I do for you to make you trust and feel Better.

10. <S 02> G : Can you explain to me ?

11. <S 01> B : You know you are very important to me and I will never let you down with this trial and I will do whatever to make you feel better , how about going to watch the movie tonight , is it can make you feel better?

12. I don't know.

13. Do you feel angry with me?

14. Yes. Now I do.

Phase: 2   Text: 2   Moves: 6

Token Assignment Report   Score:

   1. Judgment   1CAD

   2. Affect   1CAD, 1CAD

3. Appreciation   0

4. Inter-textual Positioning   1CAD, 1CAD

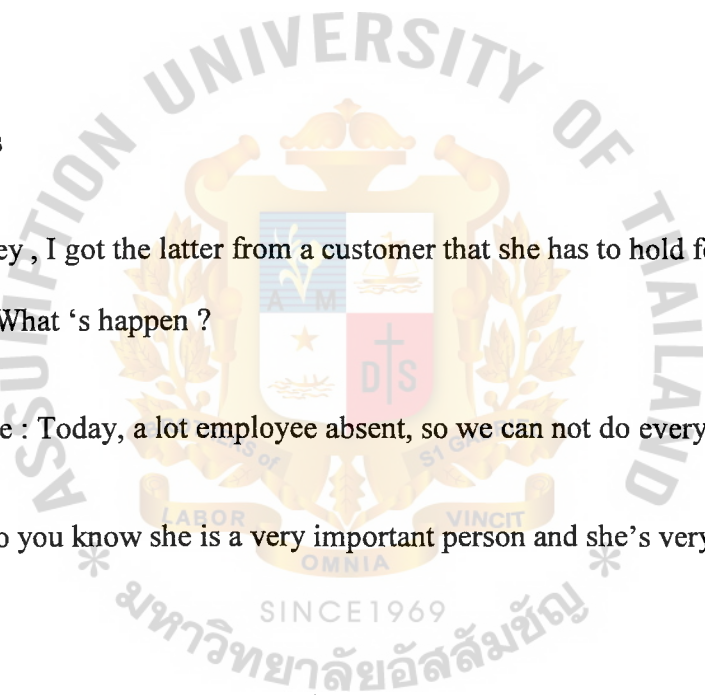5. Other CAD/NVC Moves   1CAD

Total Token Score: 6   CAD

Transcript : 11 lines

1. <S 01> Boss : I have receive the letter from customer service about you.

2. <S 02> E : Customer are mess when talking to me and ask many question.

3. <S 01> B : Did you answer polite.

4. <S 02> E : I try to answer but some can not.

5. <S 01> B : Ask something about ?

6. <S 02> E : Who is the manager ?

7. <S 01> B : Did you get angry ?

8. <S 02> E : No, but later she ask many question

9. <S 01> B : You should speak polite.

10. <S 02> E : I will try my best.

11. <S 01> B : OK , you should try to best to the goal.

Phase: 2   Text: 3   Moves: 6

[even numbered NVC Agent this recording]

Token Assignment Report	Score:
1. Judgment	-1NVC, 1CAD
2. Affect	0
3. Appreciation	0
4. Inter-textual Positioning	-1NVC, -2NVC
5. Other CAD/NVC Moves	1CAD , -1NVC

Total Token Score: -5   NVC; 2   CAD

Transcript 11 lines

1.   <S 01> Manager : This work must to be done Friday by 4 o'clock.

2.   <S 02> Employee : So, you want me to finish the work on Friday at 4 o'clock , right?

3.   <S 01> Manager : Yes, these data on the website have to be posted before this weekend.

4.   <S 02> Employee: I'm sorry we don't have enough time.

5.   <S 01> Manager : No, it has to be submitted this Friday.

6.   <S 02> Employee 1: OK , do we need to make the project colorful with full requirement?

7.   <S 01> Manager : Yes, it has to be perfect, with all the requirement of the customer. You can provide all the additional services.

8. <S 02> Employee: I spoke to the customer. Are you curious if they gave the information we required?

9. <S 01>: Manager: Yes.

10. <S 01> Employee: Yesterday I had to talk to customer and he couldn't give me all the information. Is it ok if we contact our customer for more information? We could ask for a delay.

11. <S 02> Manager : OK, you can call him and if he permit you for the delay then you can finish on Monday.

Phase: 2   Text: 4   Moves: 4

Token Assignment Report	Score:
1. Judgment	0
2. Affect	1CAD
3. Appreciation	0
4. Inter-textual Positioning	1CAD, 1CAD
5. Other CAD/NVC Moves	1CAD

Total Token Score: 4   CAD

Transcript :   8 lines

1. <S 01> B : When did you call my company ?

2. <S 02> C : Last week.

3. <S 01> B : How long did you hold the phone ?

4. <S 02> C : 15 minutes but had to wait for 30 minutes.

5. <S 01> B : Who did you talk to ?

6. <S 02> C : Boat .

7. <S 01> B : How did he talk to you ?

8. <S 02> C : He did not answer my question and spoke impolitely.

Phase: 2   Text: 5   Moves: 6

Token Assignment Report   Score:

    1. Judgment   0

    2. Affect   1CAD, -1NVC, -1NVC

    3   Appreciation   0

    4. Inter-textual Positioning   1CAD, 1CAD, 1CAD

    5. Other CAD/NVC Moves   0

Total Token Score: -2   NVC,   -4   CAD

Transcript :   14 lines

1. <S 01> N1 : What do you think about doctor A ?

2. <S 02> N2 : I think he always come late when I call him.

3. <S 01> N1 : I think so.

4. <S 02> Doctor A : (He walk pass and hear 2 nurse gossip him and then he say)

Never call me lazy again

5. <S 01> N1 : Do you say that we called you lazy doctor ?

6. <S 02> Doctor A : Yes , I think that.

7. <S 01> N2 : How do you feel when you hear that ? When I say your respond time so late

8. <S 02> Well….

9. <S 02> N1 : Do you feel angry ?

10. <S 01> Doctor A : Yes , I feel angry on you and I don't think I am lazy as you said.

11. <S 02> N1 : I don't mean like that and I'm sorry to make you misunderstand.

12. <S 01> N2 : Do you need us to respect you ?

13. <S 02> Doctor A : Yes , of course

14. <S 01> N1 : So, would you be willing to come on time when you have case ?

15. <S 02> Doctor A : Yes , I will try.

Phase: 2   Text: 6   Moves: 4

[the even numbered agent is the NVC agent in this recording]

Token Assignment Report   Score:

   1. Judgment

2. Affect   -1NVC

3. Appreciation   0

4. Inter-textual Positioning   -1NVC

5. Other CAD/NVC Moves   -1NVC, -1NVC

Total Token Score: -4   NVC

Transcript : 8 lines

1. \<S 01\> A : You think you are the smartest person in the world, don't you ?

2. \<S 02\> B : Do you think I'm thinking like that now ?

3. \<S 01\> A : Yes . I do.

4. \<S 02\> B : Would you be willing to tell me what does it make you to think like that ?

5. \<S 01\> A : Because of your action and your confidence.

6. \<S 02\> B : I think you don't like my action and confidence, right ?

7. \<S 01\> A : No, I like, but I don't like the way you present it .

8. \<S 02\> B : Actually I've learned about this system before. That why I can teach you very well.

Phase: 2   Text: 7   Moves: 6

Token Assignment Report   Score:

    1. Judgment   -1NVC, 1CAD

    2. Affect   -1NVC

    3. Appreciation   0

    4. Inter-textual Positioning   -1NVC

    5. Other CAD/NVC Moves   -1NVC,-1NVC

Total Token Score: -5   NVC;   1   CAD

Transcript :   12 lines

1.   <S 01> Ging : Pong !!! Are you ok ? You look so sad.

2.   <S 02> Pong : I'm not really ok. I have some problem with my boyfriend.

3.   <S 01> Ging : Oh ! I see, Would you willing to tell me? What is it about?

4.   <S 02> Pong : You know , he never expression affection to me .

5.   <S 01> Ging : Really !! He never show any feeling about you.

6.   <S 02> Pong : Yes !! you know when I go with a guy to have some party, He never show that he is jealous or anything.

7. <S 01> Ging Are you wanting him to show some feelings—even jealousy?

8.   <S 02> Pong : Not really !! I just want him to express some feeling that he love me.

9. <S 01> Ging : You not mad at him. You want him to understand you.

10. <S 02> Pong : Yes, That 's right !

11. <S01> Ging: Would you willing to ask him why he doesn't feel jealous to you?

12. <S02> Pong: ok I will try.

Phase: 2   Text: 8   Moves: 3

Token Assignment Report   Score:

1.	Judgment	-1NVC
2.	Affect	-1NVC
3.	Appreciation	0
4.	Inter-textual Positioning	-2NVC
5.	Other CAD/NVC Moves	0

Total Token Score: -4   NVC

Transcript :   5 lines

1. <S 02> B : So you want to go to paradise park with me right ?

2. <S 01> G : Yes , In last 2 weeks we not have time to stay together.

3. <S 02> B : Really ? we don't stay together for 2 weeks ?

4. <S 01> G :Yes ! I'm your girlfriend and we don't have time together. I feel very lonely. I need you!

5. <S 02> B : I feel lonely like you but tomorrow I have a important meeting with president of the company. So would you mind if I will take you to paradise park after the meeting and we will have dinner together?

Phase: 2   Text: 9   Moves: 3

Token Assignment Report   Score:

    1. Judgment   1CAD

    2. Affect

    3. Appreciation   0

    4. Inter-textual Positioning   1CAD

    5. Other CAD/NVC Moves   -1NVC

Total Token Score: 2   CAD;   -1   NVC

Transcript : 6 lines

1. <S 01> Parent : You lied to me about your marks !! I saw that your G.P.A is quite low.

2. <S 02> Child : Why you think that I lied you , mam?

3. <S 01> Parent : 6 weeks ago, you told me that you did very well in midterm exam.

4. <S 02> Child : Yes, I did. But in final exam, I did so bad.

5. <S 01> Parent : Yes, Would you like to improve your GPA in next semester.

6. <S 02> Child : Yes ; I would like to study harder and I will meet the tutor before exam.

Phase: 2   Text: 10   Moves: 9

Token Assignment Report   Score:

      1. Judgment   1CAD

      2. Affect   -1NVC, -1NVC, -1NVC, -1NVC

      3. Appreciation   1CAD

      4. Inter-textual Positioning   1CAD

      5. Other CAD/NVC Moves   1CAD, -1NVC

Total Token Score: 4   CAD;   -5   NVC

Transcript :   19 lines

1.   <S 01> A : Hi B, long time no see.

2.   <S 02> B : Hi A, long time no see.

3.   <S 01> A : Are you look better.

4.   <S 02> B : Y…Yes. Why you think like that.

5.   <S 01> A : Because you are so beautiful

6.   <S 01> B : Yes . How are you ?

7. <S 02> A : Before I met you , I was fine , Now I feel different.

8. <S 01> B : Why ?

9. <S 02> A : When I see you ,my heart beat faster. My hand are wet and my legs start shaking.

Do you know what it is?

10. <S 01> B : I see that you are excited.Are you surprised to see me today.

11. <S 02> A : Yes, and you know why ?

12. <S 01> B : I don't know. Can you tell me ?

13. <S 02> A : I think I fall in love with you.

17. <S 01> B wow!

18. <S 02> A : Would you like to have dinner with me tonight ?

19. <S 01> B : Yes.

Phase: 2   Text: 11   Moves: 6

Token Assignment Report   Score:

    1. Judgment   1CAD

    2. Affect   1CAD

    3. Appreciation   0

    4. Inter-textual Positioning   1CAD, 1CAD, 1CAD,1CAD

    5. Other CAD/NVC Moves   0

Total Token Score: 6   CAD

Transcript :17 lines

[line 5 'Lucky' is the NVC agent]

1. <S 01> Pim ; Hey ! my favorite film will be coming.

2. <S 02> Max : I'm watching an important feature.

3. <S 01> Pim : Sport is boring, there is nothing interesting in sport.

4. <S 02> Max : You can watch film another time. You always argue with me about sports.

5. <S 01> Lucky : Hey ! stop fighting , give me the remote control. Can you let me know your problem. Why are you fighting?

6. <S 02> Max : She want to change the channel. I watching the important match.

7. <S 01> Pim : My film is more important.

8. <S 02> Lucky : So both of you want to occupied the TV?

9. <S 01> Both : Yes ……….

10. <S 02> Lucky : Is it important for you to watch this match?

11. <S 01> Max : Yes, It is my favorite team and it final match.

12. <S 02> Lucky : So do you feel exited to watch this match ?

13. <S 01> Max : Yes , I love this team.

14. <S 02> Lucky : You also feel exited to watch this film, right?

15. <S 01> Pim : Yes , absolutely

16. <S 02> Lucky : Are you willing to watch online on the internet ?

17. <S 01> Max : Okay !! at last Lady first.

Phase: 2   Text: 12   Moves: 5

Token Assignment Report   Score:

    1. Judgment   -1NVC

    2. Affect   -1NVC

    3. Appreciation   0

    4. Inter-textual Positioning   -1NVC

    5. Other CAD/NVC Moves   -1NVC, -1NVC

Total Token Score: -5   NVC

Transcript : 10 lines

1.   <S 01> Boss : Hey !! Would you be able to bring this to the other office after work?

2.   <S 02> Worker : I have a dentist appointment otherwise you know I would.

3.   <S 01> Boss : No problem. I will take it myself after the office cleaners leave.

4.   <S 02> Worker: I'm sorry Boss—I can see you look really tired

5. <S 01> Boss : I feel tired when you say that!

6. <S 02> Worker : I did it again!

7. <S 01> Boss : Would you be willing to leave 30 minutes early to take that to the other office for me?

8. <S 02> Worker: My dentist is on the other side of town. I would still be late. Is an hour ok?

9. <S 01> Boss: I think so. If you need help today to finish up before 4pm please call up front, ok?

10. <S 02> Worker : OK—if we don't get a lot of afternoon orders I will be ok.

Phase: 2   Text: 13   Moves: 2

Token Assignment Report   Score:

   1. Judgment   1CAD, 1CAD

   2. Affect   0

   3. Appreciation   0

   4. Inter-textual Positioning   0

   5. Other CAD/NVC Moves   0

Total Token Score: 2   CAD

Transcript : 4 lines

1. <S 01> Patient : Hey ! Doc. Why don't you tell what exactly happen to me?

2. <S 02> Doctor : I can't explain anything right now.

3. <S 01> Patent : Why not you are doctor right ? Why can't tell me are you really a doctor?

4. <S 02> Doctor : Of course I'm but this is not the appropriate time.

Phase: 2   Text: 14   Moves: 6

Token Assignment Report   Score:

   1. Judgment   1CAD, 1CAD

   2. Affect   -1NVC

   3. Appreciation   0

   4. Inter-textual Positioning   -1NVC

   5. Other CAD/NVC Moves   1CAD

Total Token Score: -2   NVC; 3   CAD

Transcript :   11 lines

[even-numbered NVC agent]

1. <S 01> P : Hey ! Doc………….

2. <S 02> Doc : I understand that you worry about your result and you want to know it right now ,right ?

3. <S 01> P : Hell yeah. It's about my life and my health.

4. <S 02> Doc : I understand that this is about your life and I also concern about that too. So it's better for you to calm down and I need you to wait until I sure about your result and solution.

5. <S 01> P : Ok, I will calm down and wait for result but can you tell me for some information ?

6. <S 02> Doc : Ok, about your health it is ok not worry about that.

7. <S 01> P : I don't take drugs anymore right ?

8. <S 02> Doc : Yes , you can go home and take a rest.

9. <S 01> P : Oh! Great, I feel better right now , thank you doctor.

10. <S 02> Doc : You're welcome , if the result. I will inform you when the result is finish.

11. <S 01> P : Thank you very much doctor nice to meet you.

Phase: 2   Text: 15   Moves: 12

Token Assignment Report   Score:

1. Judgment   1 CAD, 1 CAD , -1NVC

2. Affect   -1NVC, -1NVC

3. Appreciation   0

4. Inter-textual Positioning   -1NVC, -1NVC

5. Other CAD/NVC Moves -1NVC , -1NVC, 1 CAD, 1 CAD, 1CAD

Total Token Score: 5   CAD;   7   NVC

Transcript : 24 lines   Moves: 12

[Friends discuss a relationship problem]

1.   <S 01> My boyfriend never express affection to me.

2.   <S 02> Uh, you like your boyfriend?

3.   <S 01> Of course I do.

4.   <S 02> What do you think? What's wrong? Why he's not doing it?

5.   <S 01> I don't know why. That's why I am worried.

6.   <S 02> So you are worried when he does not show affection to you?

7.   <S 01> Yes I do. What can I do?

8.   <S 02> When did you meet your boyfriend?

9.   <S 01> Last October

10. <S 02> How long have you been together?

11. <S 01> Four months

12. <S 02> So what time does it happen?

13. <S 01> At first he expressed affection a lot—make me feel happy. Made me laugh all the time. But since last month he changed. Something…

14. <S 02> Did you do something wrong or upset him?

15. <S 01> No I don't think so. I didn't do anything.

16. <S 02> How long has this been going on?

17. <S 01> One month.

18. <S 02> Have you tried talking to him and working it out? And talking about the problem, and maybe take some time to talk to him. How do you feel like that?

19. <S 01> I am so sad and tired and worry about that.

20. <S 02> You feel sad and pain?

21. <S 01> Pain

22. <S 02> What do you need when you feel like that?

23. <S 01> I need to talk to my friends—makes me feel better.

24. <S 02> Anytime

Phase: 2   Text: 16   Moves: 6

Token Assignment Report   Score:

    1. Judgment   -1NVC

    2. Affect   -1NVC

    3. Appreciation   1CAD

    4. Inter-textual Positioning   1CAD

5. Other CAD/NVC Moves   1CAD,CAD

Total Token Score: -2   NVC;   4   CAD

Transcript : 11 lines

1. <S 01> A : You said I'm lazy . Are you worry about the project ?

2. <S 02> B : Yes , I'm..

3. <S 01> A : Why this project is so important to you ?

4. <S 02> B : My promotion depend on it.

5. <S 01> A : Oh I see . I can guarantee that I will show you the project before present to the owner. So, you can check it first that all the project are 100% correct.

6. <S 02> B : Okay ,sound great. I'm looking for to see your project.

7. <S 01> A : I appropriate that thank you very much.

8. <S 02> B : One more thing. Show me the whole project on Tuesday 12.30 pm at my office okay ?

9. <S 01> A :Ok

10. <S 02> B : And I would like to know the budget allocation for this project too.

11. <S 01> A : Fine

Phase: 2   Text: 17   Moves: 12

Token Assignment Report   Score:

   1. Judgment   1CAD

   2. Affect   -NVC, -NVC, -NVC, 1CAD

   3. Appreciation   0

   4. Inter-textual Positioning   -1NVC,-1NVC, -1NVC

   5. Other CAD/NVC Moves   -1NVC, -1NVC, 1CAD, 1CAD

Total Token Score: 8 NVC;   4 CAD

[100 move threshold met at line 17, CCCR agent move nine]

Transcript : 24 lines

1.   <S 01> P1 : So, you don't like to play football ,right ?

2.   <S 02> P2 : Yes.

3.   <S 01> P1 : Which sports do you like to play ?

4.   <S 02> P2 : I like swimming.

5.   <S 01> P1 : Why you like to swimming ?

6.   <S 02> P2 : It's good exercise and not hot.

7.   <S 01> P1 : Do you have friend to swimming with you ?

8.   <S 02> P2 : Few people to swimming with me.

9. <S 01> P1 : How do you feel when you swimming ?

10. <S 02> P2 : I feel happy and enjoy.

11. <S 01> P1 : You want more friend to swimming with you ?

12. <S 02> P2 : Yes , It's may be more funny

13. <S 01> P1 : May be I will go with you sometime.

14. <S 02> P2 : That sound good

15. <S 01> P1 : Would you mine to play football with us , we have a lot of people, it very fun.

16. <S 02> P2 : Really , but I still scare to play it.

17. <S 01> P1 : Why ?

18. <S 02> P2 : I think it dangerous and violent game.

19. <S 01> P1 : No, It's not dangerous as you think, we just play for fun not serious game.

20. <S 02> P2 : Umm. I see.

21. <S 01> P1 : Today evening you free ?

22. <S 02> P2 : What time ?

23. <S 01> P1 : About 4 to 6 , 2 hour, come on let try.

24. <S 02> P2 : Alright ,see you there.

APPENDIX THREE

Phase Three Texts and Token-Assignment Reports

During Phase 3, the workshop participants in role-plays used NVC moves as well as culturally affected discourse CAD moves. The recording dates for the Phase 3 samples were December 23 and 30, 2010. January 15-16, 2011, additional role-plays were recorded based on logs of patient medical staff communication. There are fifteen texts receiving token assignments and more than one hundred moves. Quantitative data is based on the first one-hundred, NVC agent tokens. Because this set of data includes mixed NVC CAD discourse examples, split genres appear with positive numbers for CAD and negative numbers for NVC as well as the NVC and CAD tags. Odd numbered agents are the NVC agents unless otherwise noted.

Phase: 3   Text: 1   Moves: 11

Token Assignment Report   Score:

1. Judgment   -1NVC,-1NVC,-1NVC

2. Affect   -1NVC,-1NVC,-1NVC, -1NVC, -1NVC

3. Appreciation   0

4. Inter-textual Positioning   -1CAD

5. Other CAD/NVC Moves   -1NVC, -2NVC

    Total Token Score: -11   NVC; 1   CAD; one instance of a double: -2NVC

Transcript 28 lines [<S 03 is the NVC agent]

<S 01> mother ; <S 02> daughter; <S 03> nurse

1.   <S 01> [mother].... and please, tell me the results of Tina's exam [to a nurse].

2. <S 02> [daughter] …. [to the nurse] you promised [confidentiality].

3. <S 01> I am your mother. I have a right to know.

4. <S 02> No you don't. Not at my age.

5. <S 03> [nurse with daughter] Would you be willing to speak to me privately over here? Are you saying that you don't want your mom to know your diagnosis?

6. <S 02> I am not sure about her reactions.

7. <S 03> Are you worried about your mothers feelings when she learns your diagnosis?

8. <S 02> No, she wants to know everything.

9. <S 03> So are you needing privacy?

10. <S 02> Yes

11. <S 03> Would you say it is true that your mother wants to know about your health condition?

12. <S 02> Yes.

13. <S 03> Would you be willing to let me tell your mom in a general way—you are ok?

14. <S 02> ok [nurse goes to adjoining room where mother is waiting]

15. <S 01> I can't believe you are taking her side!

16. <S 03> Are you feeling angry because your daughter requested her tests results be confidential?

17. <S 01> yes I am.

18. <S 03> Are you feeling curious about your daughter's choice?

19. <S 01> Yes… I think something must be wrong. Is she pregnant?

20. <S 02> No she is fine. If you have more questions about your daughter's health you can ask her. Is she eighteen this year?

21. <S 01> yes she is

22. <S 03> Is she wanting more independence about her life now?

23. <S 01> Yes

24. <S 03> How do you feel about her growing up and wanting more independence?

25. <S 01> I feel sad because I miss her…..

26. <S 03> So you are having a family need to be close to her and she is needing more independence?

27. <S 01> Mothers and daughters.

28. <S 03> Yes. Mothers and daughters! [laughing]

Phase: 3   Text: 2   Moves: 8

Token Assignment Report	Score:
1. Judgment	-1NVC
2. Affect	-1NVC, -1NVC
3. Appreciation	0
4. Inter-textual Positioning	-1NVC, -1NVC
5. Other CAD/NVC Moves	-2NVC, -1NVC, 1NVC

Total Token Score: -9NVC

Transcript   [even numbers: NVC agent]

Job / stroke recovery conflict

<S 01> patient

<S 02> nurse or doctor

1.   <S 01> I have lost so much time already, I need to get back to Italy and… and my job!

2.   <S 02> Will you like to fly back to Italy for your job **today**?

3.   <S 01> Well—I will need to start leaving today to make it there in time.

4.   <S 02> Are you also feeling worried about your health?

5.   <S 01> Yes I am. I didn't plan to spend the last of my holiday in hospital.

6.   <S 02> Are you feeling frustrated because your health needs come first now?

7.   <S 01> When I heard the Doctor. refused to sign my release I feel trapped—panicked.

8. <S 02> So the Doctor. release news, yes ...then what is "panick"?

9. <S 01> Hopeless—I don't know what to do.

10. <S 02> Would you like to hear details of the Doctor. decision, not releasing you?

11. <S 01> I sure would.

12. <S 02>   The kind of stroke you had was blood clot type. It could be very dangerous for you to travel now. You could die. Would you repeat what I said so I am sure you understand me?

13. <S 01> I might die if I fly.

14. <S 02> Yes, we can't use blood drugs now because of the location of the clot. If you leave, we feel that you could have a stroke again on that long plane flight and there will be nobody there to help you. So would you be willing to say what you're feeling now about your decision staying or going?

15. <S 01> Could we call my company and explain the situation?

16. <S 02> Of course. Would you be willing to meet with me in one hour to prepare a message for your company?

17. <S 01> Ok. sounds like a plan

Phase: 3   Text: 3   Moves: 8

 Token Assignment Report   Score:

 1. Judgment   0

2. Affect   -1NVC

3. Appreciation   0

4. Inter-textual Positioning   -1NVC, -1NVC, -1NVC

5. Other CAD/NVC Moves   1CAD, 1CAD, -1NVC, -1NVC

Total Token Score: -6   NVC; 2 CAD

Phase: 3   Text: 3   Moves: 8

Transcript [even numbers: CCCR/NVC agent]

[a woman with arthritis resents being asked to give blood multiple times in a short time period]

1.   <S 01> You better not be in here again to get blood!

2.   <S 02> Are you feeling angry because I have come again to get more blood?

3.   <S 01> Yes I am. It is so painful and you know it. Why couldn't you get all of it at the same time?

4.   <S 02> I am sorry for your pain and I understand your frustration that we couldn't get it all before. I wish that too. This blood test requires a different vial and laboratory. Would you like to choose where I draw the blood? We did this arm last time—how about the other arm?

5.   <S 01> Yeah, this one please.

6.   <S 02> Is there anything else you would like now?

7.   <S 01> Well, what are my choices?

8. <S 02> How about something from the kitchen?

9. <S 01> I would like some poached eggs with my dinner.

10. <S 02> What kind of eggs?

11. <S 01> Poached, like steamed…

12. <S 02> Poached eggs…

13. <S 01> Is that it?

14. <S 02> Yes, All done with the blood.

 Poached eggs?

15. <S 01> Yes please

16. <S 02> I'll go speak to the cook.

17. <S 01> Thank you.

Phase: 3   Text: 4   Moves: 8

Token Assignment Report	Score:
1. Judgment	-1NVC
2. Affect	-1NVC, -1NVC, -1NVC,-1NVC
3. Appreciation	0
4. Inter-textual Positioning	-1NVC,-1NVC
5. Other CAD/NVC Moves	-1NVC

Total Token Score: **-8   NVC**

Transcript   17 lines

<S 01> Worker who has problem with boss

<S 02> friend [nurse or doctor]

1.   <S 01> Everyday, I am late getting home. At work, we do a bad job because we are in such

a hurry. My boss does everything at the last minute.

2.   <S 02> When you say that you are in a hurry, are you feeling frustrated because you want to

do a good job?

3.   <S 01> Yes, and getting angry that my boss doesn't see that we can't do our jobs if he's

late and last minute about everything.

4.   <S 02> I'm curious if anyone has talked to him about the time issue?

5.   <S 01> Every day! We joke a lot with him. He laughs too, but then nothing changes.

6.   <S 02> Is there too much work to do or a scheduling problem?

7.   <S 01> It is not too much work—we are bored and doing nothing most of the morning, then

suddenly, we have 3 jobs to do near closing time.

8.   <S 02> Are you feeling uncertain about your schedule time and job now?

9.   <S 01> Yes. I have the children to get from school after work and I can't be late for pick up.

The afternoons are too stressful.

10. <S 02> Do you need the job very much?

11. <S 01> I need some job for paying the rent and buying food.

12. <S 02> How do you feel about looking for a new job or talking to your boss?

13. <S 01> I feel a change of job is stressful too right now. Maybe talking to the boss is best.

14. <S 02> Would you be willing to practice what you will say to him with me?

15. <S 01> ok…

16. <S 02> From what you said, the mornings are easy and the afternoons too busy, right?

17. <S 01> yes. I can ask him why it is so busy in the afternoons and easy in the mornings. Maybe there is something we can do to change the schedule.

Phase: 3   Text: 5   Moves: 8

 Token Assignment Report   Score:

 1. Judgment   -1NVC

 2. Affect   -1NVC, -1NVC, -1NVC

 3. Appreciation   0

 4. Inter-textual Positioning   -2NVC, -1NVC

 5. Other CAD/NVC Moves   -1NVC, -1NVC

 Total Token Score: -9   NVC ; One double move density

Transcript   15 lines

1. <S 01> When you finish the reports, save the files here and here…

2. <S 02> You think you are the smartest person in the world don't you?

3. <S 01> Yes I am! No …just kidding. When you say I am the smartest person in the world, are you feeling frustrated with me?

4. <S 02>   No.

5. <S 01>   Would you be willing to tell me how you feel?

6. <S 02>   How I feel?

7. <S 01>   When you say joking that I am smart, you say it not serious way. How are you feeling?

8. <S 02>   I am feeling stress a little bit. You go quickly and I need time to practice.

9. <S 01> So you need more time to practice?

10. <S 02> Yes.

11. <S 01> Would you like to practice for twenty minutes, and then I will come back?

12. <S 02> Ok. How much more is there to learn about this system?

13. <S 01> Not too much….maybe thirty minutes.

14. <S 02> So you will come back and then we finish?

15. <S 01> Sure.

Phase: 3   Text: 6   Moves: 7

Token Assignment Report	Score:
1. Judgment	0
2. Affect	-1NVC, -1NVC
3. Appreciation	0
4. Inter-textual Positioning	1CAD, 1CAD, -1NVC
5. Other CAD/NVC Moves	1CAD, -1NVC

Total Token Score: -4   NVC;   3   CAD

Transcript : 14   lines

[You think you are the smartest person in the world , don't you ?]

1. <S 01> K : Are you jealous me ?

2. <S 02> O :May be but too much just a little.

3. <S 01> K : Yes , its mean you are jealous me . Why you are jealous me ?

4. <S 02> O : How was your last performance eval? Did you do well ?

5. <S 01> K : Yes, It's was pretty good. I think I did well.

6. <S 02> O : I don't understand why you always get high evals even you are not working a lot. But on the other hand, I don't get good raises like you even I try a lot.

7.   <S 01> K : Why you think that I spend only a few time in my work? May be. I also study

English and then I get a bigger raise too. That's why you think I work a little for my raise, right?

8.   <S 02> O : How much did you get in raise this year?

9.   <S 01> K : I got 15 percent

10. <S 02> O : Really ? but I got only 7.

11. <S 01> K : I think the way to go is to get high English marks.

12. <S 02> O : Oh I see. I don't study much.

13. <S 01> K : Would you like to study together tomorrow after work?

14. <S 02> O: Sure—sounds great!

Phase: 3   Text: 7   Moves: 4

Token Assignment Report   Score:

1. Judgment   -1NVC

2. Affect   -1NVC, -1NVC

3. Appreciation   0

4. Inter-textual Positioning   0

5. Other CAD/NVC Moves   -1NVC

Total Token Score: -4   NVC

Transcript : 7 lines Topic:

1. <S 01> A : Do you feel uncomfortable , Don't you ?

2. <S 02> B : Yes , I have some problem to work on.

3. <S 01> A : Would you be willing to talk a serious problem with me ?

4. <S 02> B : Now my wife and I are fighting together because she always angry at me.

5. <S 01> A : How do you feel when you fight with your wife ?

Would you be willing to ask her what she needs ?

6. <S 02> Scared because I don't understand her

7. <S 01> Do you know what she wants?

Phase: 3   Text: 8   Moves: 4

Token Assignment Report   Score:

1. Judgment   -1NVC

2. Affect   -1NVC

3. Appreciation   0

4. Inter-textual Positioning   0

5. Other CAD/NVC Moves   -2NVC, 1CAD

Total Token Score: **-4   NVC;   1   CAD;** one double density NVC move

Transcript :   8 lines Topic:

1. <S 01> A : Are you feeling bad ?

2. <S 02> B : Yes , I am I am so angry with my boss .

3. <S 01> A : Would you be willing to tell me your problem ?

4. <S 02> B : Sure !I am so angry with my boss because he couldn't make a decision on time and I have to hurry. It happens many times and I am bored.

5. <S 01> A : You want your boss to make a decision on time ,right ?

6. <S 02> B : of course.

7. <S 01> A : Are you thinking a new job ?

8. <S 02> B : I am thinking about it and I look forward to hear a good news from the new company.

Phase: 3   Text: 9   Moves: 2

Token Assignment Report   Score:

1. Judgment   0
2. Affect   0
3. Appreciation   0
4. Inter-textual Positioning   1CAD
5. Other CAD/NVC Moves   1CAD

Total Token Score: **2   CAD**

Transcript :   4 lines [even numbers: NVC agent]

1. <S 01> B : My boss can never make a decision on time and then we have to hurry too much.

2. <S 02> A : Why don't you complain at your boss ? I can't help you to manage your boss.

3. <S 01> B : Oh! I'm so sorry. I shouldn't talk to you.

4. <S 02> A : Come on I didn't mean that but I don't know how to solve your problem.

Phase: 3   Text: 10   Moves: 5

Token Assignment Report	Score:
1. Judgment	1CAD
2. Affect	-1NVC
3. Appreciation	0
4. Inter-textual Positioning	-1NVC, 1CAD
5. Other CAD/NVC Moves	1CAD

Total Token Score: -2   NVC; 3   CAD

Transcript : 11 lines   [even numbers: NVC agent]

1. <S 01> P : Hey ! Doc………….

2. <S 02> Doc : I understand that you worry about your result and you want to know it right now ,right ?

3. <S 01> P : Hell yeah. It's about my life and my health.

4. <S 02> Doc : I understand that this is about your life and I also concern about that too. So it's better for you to calm down and I need you to wait until I sure about your result and solution.

5. <S 01> P : Ok, I will calm down and wait for result but can you tell me for some information ?

6. <S 02> Doc : Ok,about your health it is ok not worry about that.

7. <S 01> P : I don't take drugs anymore right ?

8. <S 02> Doc : Yes , you can go home and take a rest.

9. <S 01> P : Oh! Great, I feel better right now, thank you doctor.

10. <S 02> Doc : Your welcome , if the result. I will inform you when the result is finish.

11. <S 01> P : Thank you very much doctor nice to meet you.

Phase: 3   Text: 11   Moves: 10

Token Assignment Report   Score: 69

1. Judgment   1CAD

2. Affect   -1NVC

3. Appreciation   0

4. Inter-textual Positioning   1CAD, 1CAD, 1CAD, 1CAD

5. Other CAD/NVC Moves   1CAD, 1CAD, 1CAD, 1CAD

Total Token Score: 9   CAD; -1   NVC

Transcript : 20 lines [even numbers: NVC agent]

1. <S 01> P : Doctor , I'm feeling so bad, I very stomach ache.

2. <S 02> D : Are you very stomach ache right? Let's me check.

3. <S 01> P : What happened to me ?

4. <S 02> D : It has something wrong about your stomachage . Don't worry about it. I will find the way to help you.

5. <S 01> P : It not too bad right ?

6. <S 02> D : Ummm.. it not too bad if you follow the way that I assign to you. Can you follow that ?

7. <S 01> P : What the way you want me to follow ?

8. <S 02> D : The way can help you better are take medicine, exercise, eat many vegetable and don't be serious about anything.

9. <S 01> P : OH.it too much. So I think I have the big problem with my health right?

10. <S 02> D : Don't be serious. Believe me , I will help as I can.

11. <S 01> P : Please tell me, I want to know my problem. I 'm ready to hear my problem from you.

12. <S 02> D: It hard to explain to you to understand it please follow the way I assign to you.

13. <S 01> P : Doctor ,my problem is cancer right ? If the true, how long can I leave ?

14. <S 02> D : Why you think you got cancer problem?

15. <S 01> P : My grandfather got a problem like me and he die.

16. <S 02> D : Sorry about your grandfather. Don't worry you just begin the cancer. I can treat you.

17. <S 01> P : Really ! I believe you. If I follow for assign, I will be better right?

18. <S 02> D : Absolutely !

19. <S 01> P : Thank you for your helping.

20. <S 02> D : Welcome. Take care yourself, it will better soon.

Phase: 3   Text: 12   Moves: 7

Token Assignment Report   Score:

1. Judgment   -1NVC

2. Affect   -1NVC, -1NVC

3. Appreciation   0

4. Inter-textual Positioning   1CAD, 1CAD, -1NVC

5. Other CAD/NVC Moves   1CAD

Total Token Score: **-4   NVC; 3   CAD**

Transcript : 14   lines   [even numbered: NVC agent]

1. <S 01> M : Hey darling ! What happen to you ? Why don't you talk with me ?

2. <S 02> W : Nothing.

3. <S 01> M : There must be something. If you don't tell me, how can I know what you want.

4. <S 02> W : Ok, you really want to know my need right ? I want you express affection to me

5. <S 01> M : What ? This is not enough for you. I think I did my best

6. <S 02> W : You said you did your best but I didn't feel I'm loved.

7. <S 01> M : You're angry on me, aren't you.

8. <S 02> W : Quiet!

9. <S 01> M : I'm sorry. I have something for you. (Give flower)

10. <S 02> W : Aha. At least you remembered the flower I liked.

11. <S 01> M : I can remember what you liked but sometimes I may not express much of my feeling. I'm just the man I didn't express my feelings but it doesn't mean I didn't love you. How do you feel when I didn't express my love.

12. <S 02> W : I fell many feelings ; lonely ,sad,miserable and anxious. I thought that you may not love me.

13. <S 01> M : What do you need me to do ?

14. <S 02> W : I need you to express more feeling. Show me that you care of me. Don't be like before but I didn't force you to do. You just do your best. That's it.

Phase: 3   Text: 13   Moves: 8

Token Assignment Report   Score:

1. Judgment   1CAD, 1CAD

2. Affect   -1NVC

3. Appreciation   0

4. Inter-textual Positioning   1CAD, 1CAD

5. Other CAD/NVC Moves   1CADS, 1CAD, 1CAD

Total Token Score: 7   CAD; -1   NVC

Transcript : 14 lines

The doctor refuse to explain anything to me

1.   <S 01> A :, please tell me what happened with my husband's eyes.

2.   <S 02> B : Sorry mam, we cannot explain to you now, we are trying to diagnose your husband.

3.   <S 01> A : No! you must tell me now. What is wrong with him ?

4.   <S 02> B : Calm down mam, we try to do it best Don't worry about him. We will take care him well. I promise.

5.   <S 01> A : OK ! Please take care him properly.

6. <S 02> A : Doctor, Please tell me what happened with my husband's eyes?

7. <S 01> B : You're really want to know what happened with your husband right?

8. <S 02> A : Yes, I'm very worried. Will he be blind ?

9. <S 01> B : Your husband need come more test to know exactly what happened with that eye.

10. <S 02> A : It's means my husband need to do some more test ,right ?

11. <S 01> B : Yes, we 're trying to diagnose for your husband, and we will have the result soon.

12. <S 02> A : When will I know the result ?

13. <S 01> B : You look tired. While you're waiting for the result. Would you like to come to my office and have a cup of tea ?

14. <S 02> A : Yes ,please. It sounds better. Thank you doctor.

Phase: 3   Text: 14   Moves: 3

Token Assignment Report	Score:
1. Judgment	0
2. Affect	0
3. Appreciation	0
4. Inter-textual Positioning	1CAD

5. Other CAD/NVC Moves   1CAD, 1CAD

Total Token Score: **3   CAD**

Transcript: 7 lines   [even numbered: NVC agent]

1.   <S 01> Patient : Sorry, where is my result ?

2.   <S 02> The staff : Sorry, about your result you will get within 5 days.

3.   <S 01> Patient : I need it right now.

4.   <S 02> The staff :Sorry sir. But for the exam you are done and you need sometimes to analyze and ensure your result.

5.   <S 01> Patient : That's your problem but the point is I need the result right here, right now. And you don't need to know the reason.

6.   <S 02> The staff : What kind of result that you really want to know right now. I gonna find it for you as fast as I can. And when your result is complete , I will send it to you by letters or e-mail if you want. Can it's possible ?

7.   <S 01> Patient : I will give you 5 days. That is my limit.

Phase: 3   Text: 15   Moves: 6

   Token Assignment Report   Score:

   1. Judgment   0

   2. Affect   0

3. Appreciation   0

4. Inter-textual Positioning   1CAD, -1NVC

5. Other CAD/NVC Moves   -1NVC, -1NVC,-1NVC, 1CAD

Total Token Score: -4   NVC;   2   CAD

Transcript : 11 lines

[Patient complaint about the ID card].

1.   <S 01> Doc : What happen with the patient ?

2.   <S 02> Rec : The patient didn't give ID card. She said forget it at home.

3.   <S 01> Doc : It doesn't need. Had you asked before ?

4.   <S 02> Rec : Yes , according to the hospital rule. They need to show ID card for any appointment.

5.   <S 01> Doc : Patient already had her profile and appointment card.

6.   <S 02> Rec : It needs to show every time when they come to hospital.

7.   <S 01> Doc : How many times have you come to this hospital ? Had you got a problem like this ?

8.   <S 02> Pat : Yes , many times, but why I have to show my ID card in every time ?

9. <S 01> Doc : Yes you need to show the ID card. But some patient had their profile as a record for this hospital.

10. <S 02> Pat : They didn't tell me about this. Where can I get this information?

11. <S 01> Doc : You need to go to the head-office of this hospital. I'm so sorry about your problem.

APPENDIX FOUR

Audio reference for CD of recorded role-plays (CD attached)
[the track reference number ' x-y ' refers to the phase, x, and the role-play number, y; for
example: phase three, text thirteen is indexed here as 3-13]

Phase One Recordings

1-1
1-2
1-3
1-4
1-5
1-6
1-7
1-8
1-9
1-10
1-11
1-12
1-13
1-14
1-15
1-16
1-17
1-18
1-19
1-20
1-21
1-22
1-23
1-24
1-25
1-26
1-27
1-28

Phase Two Recordings

2-1
2-2
2-3
2-4
2-5
2-6
2-7

2-8
2-9
2-10
2-11
2-12
2-13
2-14
2-15
2-16
2-17

Phase Three Recordings

3-1
3-2
3-3
3-4
3-5
3-6
3-7
3-8
3-9
3-10
3-11
3-12
3-13
3-14
3-15