

Blending Disciplines: A Journey from Medicine to Applied Linguistics

By Peter Roger, Featured Speaker at the 2019 KOTESOL Intl. Conference

I am genuinely energized by the theme of this year's KOTESOL International Conference: "Advancing ELT: Blending Disciplines, Approaches, and Technologies." As a medical practitioner turned language teacher and applied linguist, the blending of disciplines has been – and continues to be – the defining theme of my working life. Reflecting on my own experiences, I have come to realize how important it is for all of us engaged in the spheres of applied linguistics and language teaching to value the unique blend of skills and experiences that we each bring to the table.

A number of years ago, I read an interview with a member of my university community in which he responded to questions about his life and his role in the organization. The final question put to him was "If you could have any job in the world, whose job would it be?" His answer? "My own." When I thought about this, I realized that if I were asked the same question, I would give exactly the same answer. But it wasn't always this way...

My original career choice was medicine, and I enjoyed many aspects of my medical studies. It was only when I began working as an intern and resident that I started to question seriously whether I'd made the right choice. I considered various medical career paths but couldn't find anything that I felt enthusiastic about. Most of my friends were busy in the early stages of building a career, yet all I could think about was how I wanted to do something different.

A gap year took me on a working holiday to Japan, where I taught (with no training!) at an English conversation school. Here I discovered – quite by accident – a job that gave me energy and left me

(and they were too polite to remind me). How could I turn this working holiday job into a career, I wondered? And what about my medical studies? Would they just go to waste if I took a new direction?

Speech Pathology and Linguistic Diversity

Back in Australia, I began specialist training in rehabilitation medicine. Here I worked as part of multidisciplinary healthcare teams and became particularly interested in the work of the speech



pathologists in assessing and providing therapy for people who had developed aphasia following a stroke. I stayed with rehab medicine for nearly three years but, once again, felt the need to pursue a career outside clinical medicine. I enrolled in a PhD program in communication sciences and disorders, having no idea what I would do with the degree once I finished it. I did know, however, that the research I would be doing on the assessment of language disorders in linguistically diverse patients was of real interest to me. This was a way to bridge my love of language and my medical background. It was my first attempt at blending disciplines.

English for Medicine

Having enjoyed my initial English language teaching experiences in Japan, I had completed an RSA Certificate in Teaching English as a Foreign Language to Adults (the precursor to the

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feeling happy and fulfilled. I enjoyed teaching so much that I didn't realize that I was supposed to give the students a break in the middle of our two-hour classes

CELTA) when I returned to Australia. This additional (albeit basic) qualification led to the opportunity to work with a group of medical students from diverse language backgrounds at the University of New South Wales while completing my PhD studies. Here I found that my own experiences in medicine, together with my preliminary training in language teaching, allowed me to provide practice and feedback that was grounded in the activities (such as taking histories and presenting cases to their clinical tutors) that these students needed to perform as apprentice medical doctors. It was at this time that I realized that ELT was not simply about the nuts and bolts of language. It was a means of empowering individuals to enact the range of social and professional identities that they wanted to claim for

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themselves and helping them to achieve their life goals. With these experiences came the gradual realization that what I really wanted to be was an applied linguist: a person who uses the study of language to help tackle real-world problems.

Researching Clinical Communication

In my academic work in the Department of Linguistics at Macquarie University, I have had opportunities to pursue the blending of disciplines in more ways than I could ever have imagined. I’ve been able to continue my work with colleagues in speech pathology to carry out research that aims to improve the ways in which speech pathologists and interpreters work together in the assessment and rehabilitation of language disorders in multilingual speakers (Roger & Code, in press). I’ve also been able to collaborate with colleagues in linguistics and medicine on a range of research projects to advance our understanding of communication in medical contexts. One of these projects looked at the ways in which the development of trust in clinical consultations can be traced by examining the communicative choices made by the specialist throughout the encounter (O’Grady, Dahm, Yates, & Roger, 2014). Other projects have focused on international and local medical graduates and their approaches to communicating with colleagues in “clinical handover” situations (Roger, Dahm, Yates, & Cartmill, 2016).

Some of my closest collaborators are also discipline-blenders. Tonia Crawford (a registered nurse and

applied linguist) has led a fascinating study to understand how rapport is “discursively constructed” in nurse–patient clinical encounters (Crawford, Roger, & Candlin, 2018). My colleague Sally Candlin (also a registered nurse and applied linguist) and I published a book entitled *Communication and Professional Relationship in Healthcare Practice* (Candlin & Roger, 2013). Targeting healthcare professionals, we use the analytical tools of applied linguistics to show how communicative choices in healthcare encounters can have profound effects on clinical outcomes.

Final Thoughts

For me, the opportunity to blend disciplines and engage in interdisciplinary work is very satisfying, as it provides insights that can inform both clinical practice and the teaching of language for specific purposes. Not long ago, I exchanged some emails with a friend with whom I’d studied medicine. He noticed the email signature that gave my current role as Director of Postgraduate Programs in Applied Linguistics and TESOL. He commented, “That must be a nice gig to have.” He’s absolutely right. For me, it is the best job in the world.

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The Author

Peter Roger is Associate Professor and Director of Programs in Applied Linguistics and TESOL at Macquarie University in Sydney, Australia. His research interests lie in the field of health communication, with a particular focus on topics relating to linguistic diversity. He also publishes and supervises in the areas of language learning, motivation, and identity.

