Chapter 2
Word Power and Linguistic Constructs in Nursing

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ABSTRACT

Language is central to thought and of course informatics. This chapter outlines the nature of language and the Sociosemiotic of nursing. How nurses use language is critically reviewed in the context of nursing thought and hence practice. Implications for nursing curriculum, nursing research and informatics are discussed.

Nurses as people are immersed in the culture of their time. They are conditioned by the point in time and place in which they participate as human and practice nursing. Culture refers to the sociosemiotic. Each person has learnt the culture through the process of the acquisition and practice of language. Language is not merely a representational or interactive system built on verbal and non verbal signs. Language, or semiotics, is the meaning potential of the culture or system. In the language ideas are not only facilitated but social roles are regulated. As both research and informatics involves and are expressed through language there is no outsider objective observer position. As human's we are always insiders making

choices and decisions. There is a degree of subjectivity, creativity and freedom. To realise these elements the power of words and the importance of clarity in definition needs surfacing.

All reading is an active process as the reader brings the text within their thinking and interprets the ideas presented within their current structure of knowing. The role of author is to create a reading position to allow the reader to approach the authors presented ideas in a manner as close as possible to the authors intent and to follow these ideas to understand the position presented (Kress 1985). The reader is a person who is socially and historically situated and brings to bear the meaning structures of their time on the text. Thinking is stable in structure but not content and the creative act of the merger between the horizon

of reader and text leads potentially to the evolution of thought (Gadamer 2003). Semiosis is the term that describes this merger between word as sign/referent and the user of the sign or referent. "Semiosis is a truly ubiquitous phenomenon and we need to understand our engagement with it directly so that we can transform our worlds to suit our own interests"(Sless 1986, p155.). This understanding needs to be persistently pursued and won by all, even by those without what Max Weber referred to as an elective affinity for this type of thinking (Crotty 1996). That is those who are drawn naturally to it. This is theory of the most practical kind and especially so when considering the gathering and interpretation of evidence and informatics.

Each sentence evokes an experiential gestalt as the reader or hearer relates to the content (Lakoff 1980). To understand a sign, which is in effect what words are, that is signs which point or refer to a concept or thing, the person reaches into their unified base of knowledge about the world. This unified base of knowledge is the experiential gestalt. Thinking is not based on a conglomeration of individual signs/words but is holonomic (Wade 1996). The notion of Gestalt and holonomic is a principle of wholeness. This is very familiar to nurses as holism is a concept central to nursing. Words constitute each individual's knowing universe as it is by words that people can label and articulate what it is that they know. This leads to the question of can people think without words. Heidegger is famous for his assertion that language is the house of being, and the explicit belief that language is central to thought (Heidegger 1962). He espoused that as thought is linguistically mediated thought could not occur if it could not be articulated. The logical conclusion follows that people with different languages may have different thinking capacity based on the concepts for which they have words. This corresponds to the strong Linguistic Relativity Hypothesis (Whorfian Hypothesis). This was a hypothesis generated by linguists as opposed

to philosophers. A milder form of this assertion is the weak Linguistic Relativity Hypothesis. In this hypothesis it was seen that language whilst not determining thought strongly influences the possibilities. Thought still requires words to allow it be bought forward, or unveiled, so in the weak version of the hypothesis the cost of not having words is a computational cost expressed in mental effort (Lund 2003). The fact that linguists and philosophers approach the same questions with such similar thinking emerging demonstrates the artificial divide between linguistics and questions of epistemology. Semiotics is thought.

Talking about language is in effect talking about meaning and learning language is learning how to mean (Halliday 1975). Semiotics is the study of communication and understanding, or language and meaning. Semiosis is the process through which communication and understanding occur (Sless 1986). This is a social process rather than something governed by objective laws (Halliday 1975). We are all insiders in the study of language and thought as there is no way to take an observer stance removed from either language or thought. Language, communication, meaning making, and hence thought are bought into being and shaped socially in a continual and creative process. To learn nursing is to understand the language of nursing and the experiential or conceptual gestalt of nursing. To truly grasp the language knowledge of the context of the origins of the language and meaning making of nursing empowers each nurse to have the freedom through the social process of semiosis to create new language or new ways to apply the existing language. Just like language and thought in general, nursing thinking is not fixed. Learning nursing is not about learning dogma and fixed facts and solutions, it is learning to think as a nurse. Nursing thinking is an entity to be created and shaped continuously. Understanding semiotics empowers each nurse, at all levels of development, to engage in this endeavour. Considering the origin of thoughts and thinking and

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