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The Reflection of Modality use on Doctor-Patient Power Relation in Vietnamese Patient Information Leaflets (PILS), A Systemic Functional Linguistic Perspective

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Abstract

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Keywords— modality, power relation, patient Information leaflets (PILs), Systemic Functional Linguistics (SFL) Modality as a linguistic property of judgement that language users generally exploit in their proposition. The use of this key linguistic feature can reflect ideology, power, cultural/social background, region, or social status that the speakers/writers want to put in their proposition. On the basis of the theoretical framework of modality from perspective of Systemic Functional Linguistics by Halliday (1994), the paper aims at identifying the linguistic manifestation of modality to investigate how the potential reflection of modality is on the doctorpatient power distribution in the texts as a discourse of Vietnamese patient information leaflets (PILs). PILs, to be the data of the research, is of special importance in the field of healthcare in which Vietnamese PILs writers (regarded as a doctor) tend to make use of this property to establish a persuasive and equal power throughout the texts to manipulate opinion of their reader (regarded as laymen or the patient).

1. Introduction

Modality is believed to be one of the major and indispensable linguistic tools in driving person-to-person interactions, sharing attitudes and ideologies, expressing commitments and establishing human relationships. Modality, as stated by Halliday (1994), means the judgment made by the writer/speaker toward a proposition and proposal in what he is saying. Referring to Halliday's metafunctions of language, modality which is a linguistic element to realize the interpersonal function of language may be used as a linguistic tool to direct and control the behavior or ideologies of the listener/reader reflecting on power relation in texts.

Modality can be seen as "criticism", "expression of attitude" explicitly or implicitly in the language from a linguistic point of view (Halliday, 1998: 85-97).

According to Halliday (1994), the use of modality in helps reader/listener understand speaker's position, feelings, attitudes and assertions about the issue the speaker wants to ask, suggest or advise the listener. Modality also allows language users to express what is, what would be, what may be, and what should be or the attitude representing uncertainty of the speaker to the discourse. In this sense, modality is a means of indicating a writer's ideological point of view. In this paper, an attempt is made to explore how the doctor-patient power relation is performed and reflected through modality use in Vietnamese Patient information leaflets (PILs) from Systemic Functional Linguistics perspective.

There are various reasons for choosing this topic, but the followings seem to be prominent. First, a patient

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information leaflet is considered one of the most important medical texts to lay people addressed by medical experts, and owns a number of influential characteristics by informing patients what the medicines are for and how to use them safely and efficiently. Second, the analyzing of PILs is of growing importance and it has been a subject for many studies from differerent points of view. And third, modality as an aspect of interpersonal metafunction in Systemic Functional Linguistics has mainly focused on research on a variety of discourse such as: conservative, legal, media, literary, academic, and political discourse (e.g. see Langton (2002), Pique-Angordans et al (2002), Gotti (2003), Smith (2003), Gabrielatos and McEnery (2005), etc.) leaving a gap of studies examining modality use in Patient Information Leaflets.

Aim of the study and research question

As stated, the overarching aim of this study is to investigate how the linguistic manifestation of modality reveals power relation between doctor and patient in the Vietnamese text genre of patient information leaflets (PILs). To fulfil this aim, the paper will focus on two potential meanings of modality, *modalization* and *modulation*, reflecting on the power relation between the participants, the writer (regarded as the doctor) and the reader (regarded as laymen or the patient) in Vietnamese PILS.

The following question is raised for exploration:

- How is the doctor-patient power relation established and maintained in the discourse of Vietnamese PILS through modality choices?

2. Literature Review

The theoretical framework adopted in this study is systemic functional linguistics (SFL), a model of language in context developed by Halliday in the early 1960s. However, each scholar approaches the SF model from a different perspective for the purpose of their own study. As this paper is to investigate the linguistic modality use and its reflection on doctorpatient power relation in the Vietnamese text genre of patient information leaflets, I will try to be selective, relating my review of the SF model to those contents that appear to be relevant to its concern.

2.1. Patient information leaflets (PILs)

A patient information leaflet is a document attached in every medicine package to offer written information about the medication in terms of product characteristics, a description of a medicine's properties and the conditions attached to its use. Patient information leaflets (PILs) are provided by the manufacturer following a standard template consisting of the same types of information for every medication. They aim to tell patients what the medicines are for and how to use them safely and efficiently.

Patient information leaflets are the second source of information for patients and their families after the first source of information directly from the doctor. These publications are especially important for two reasons: not only as a way to publish mass information about drugs and drug use, but as the only way for patients to consider their options and share information with their beloved ones as many times as they want in order that they are able to make their own decisions which are well-thought, well-informed and knowledgeable.

A Patient information leaflet (PILS), therefore, is considered one of the most important medical texts to laypersons addressed by medical experts, and owns a number of influential characteristics.

2,2. Modality

The term modality is understood differently by different grammarians. However, as this study employs systemic functional linguistics as the theoretical framework, it follows Halliday's conceptualization of modality.

Modality in Hallidayan sense contains modalization modulation. Modalization which is the proposition modality typically realized in clauses of declarative mood exploring information comprises two subtypes of meaning of *Probability*: possibly/ probably/ certainly, and Usuality: sometimes/ usually/ always. Meanwhile, modulation is the proposal modality typically represented imperative mood giving command or offer. In a command, the intermediates points indicate degrees of Obligation: allowed to/supposed to/required to and in an offer, they relate to the degree of Inclination: willing to/ anxious to/ determined to (Halliday & Matthiessen, 2004:147).

Both *Probability* and *Usuality* can be expressed in the same three ways: (i) by a finite modal operator in the verbal group, e.g. that will be John, he'll sit there all day, (ii) by a modal Adjunct of probability or usuality, e.g. that's probably John, he usually sits there all day, (iii) by both together, e.g. that'll probably be John, he 'll usually sit there all day. Meanwhile, both *Obligation* and *Inclination* can be expressed in either of two ways, or by both together: (i) by a finite modal operator, e.g. you should know that, I'll help them, (ii) by an expansion of the

Predicator: (a) typically by a passive verb, e.g. *you 're supposed to know that,* (b) typically by an adjective, e.g. *I'm anxious to help them.* Following is the semantic realization of modality adapted from Martin, Matthiessen & Painter (1997) (Table 1).

Table 1. Semantic realization of Modality

Kind of Modality		Congruent	Incongruent realizations			
	Subjective: implicit	C	licit ıct	Subjective: explicit	Objective: explicit	
	Finite	Modal Adverb	Passive verb	Adjective	Mental clause	Projecting clause
Probability	can can't could couldn't may	possibly, probably, certainly		Possible probable	I think I know	- It is possible/ probable that - It is certain that
Usuality	might will would should	sometimes, usually, always		Usual		It is unusual (for him to leave)
Obligation	shouldn't ought to must mustn't have to	necessarily	be allowed, be supposed	Necessary	I'm willing I expect	- It is permitted - It is expected - It is necessary to
Inclination				be willing, be keen to, determined, be able to	I'd like to I want to	- It'd be lovely to - It is possible for him to leave

Adapted from Martin, Matthiessen & Painter (1997: 70)

All modal expressions are able to convey different degrees of modality meaning. Base on the classification of modality, modality is given three values: high, median and low, which is shown in the following Table 2.

Table 2. Values of modality (Halliday, 2000:358)

	Probability	Usuality	Obligation	Inclination
High	Certain	Always	Required	Determined
Median	Probable	Usually	Supposed	Keen
Low	Possible	Sometimes	Allowed	willing

In terms of values of finite modal operator, it is much clearer to observe in the Table 3.

Table 3. Values of finite modal operators (Halliday, 2000:76)

	Low	median	High
Positive	can, may, could,	Will, would,	Must, ought to, need,
rositive	might, (dare)	should, is/was to	has/had to
	Needn't,	Won't, wouldn't,	Mustn't, oughtn't to, can't,
Negative	doesn't/didn't + need	shouldn't,	couldn't, mayn't, mightn't,
	to, have to	isn't/wasn't to	hasn't/hadn't to

In the following, we carried out statistical analysis of modal operators, modal adverbs and interpersonal metaphor used in the research data so as to examine 'How the doctor-patient power relation is established and maintained through modality resources in the texts of PILS'.

In terms of values of finite modal operator, it is much clearer to observe in the Table 4.

Table 4. Values of finite modal operators (Halliday, 2000:76)

	Low	median	High				
Positive	can, may, could, might, (dare)	Will, would, should, is/was to	Must, ought to, need, has/had to				
Negative	Needn't, doesn't/didn't + need to, have to	Won't, wouldn't, shouldn't, isn't/wasn't to	Mustn't, oughtn't to, can't, couldn't, mayn't, mightn't, hasn't/hadn't to				

From a comprehensive perspective on the category of Modality in Vietnamese, most Vietnamese linguistic authors have approached Modality from traditional grammar by such as Hoang Phe, Dinh Van Duc, Le Dong, and Nguyen Van Hiep in their studies about Vietnamese (Nguyen, 2002). In terms of functional grammar, there are works by Cao Xuan Hao and Diep Quang Ban. Regarding systemic functional grammar, Modality has been approached by Hoang Van Van in his study about interpersonal analysis of a Vietnamese middle school science textbook (Hoang, 2020). Up to now, most Vietnamese linguists seem to recognize the division of modality in Vietnamese in two ways: Epistemic modality (corresponding to the name of Modalization in SFL) and deontic modality (corresponding to the name Modulation in SFL). Studies on Modality in Vietnamese by Cao Xuan Hao (1991, 1999, 2000), Diep Quang Ban (2000, 2004), Nguyen Van Hiep (2001, 2008, 2009), Ngu Thien Hung (2003), Bui Trong Ngoan (2004) v.v have shown a variety of linguistic means expressing Modality in Vietnamese, including modal verbs, cognitive verbs, modal adverbs, modal adjectives, modal adverbs, and modal particles. Applying these means of state representation to systems functional linguistics (SFL), they can be described as follows:

- (1) Finite modal operators in the verbal group (known as modal verbs in traditional grammar):
- Probability: (also known as a verb expressing appreciation about possibility): có thể, không thể/chua thể (can, can't).
- Obligation (also known as a verb expressing an assessment of necessity): nên, câ`n, phải, câ`n phải (should, need, must/have to)
- (2) modal Adjuncts (including modal adverbs, modal adjectives, modal adverbs, and modal particles in traditional grammar)
- Modal adverbs (or idioms expressing modality in traditional grammar: có lễ (possibility), có thể (probably), hình như (apparently), thường (usually), chắc chắn (certainly), thỉnh thoảng (sometimes)...
 - Passive verbs (known as evaluation verbs in

traditional grammar): *bi*, *được*, *phai* (be allowed, be supposed)

- Adjectives (also known as modal adjectives in traditional grammar): thì phải, chấ c chấ n, đúng, thạ t, hế t sư c, hay nhấ t, tố t hơn hế t, tệ nhấ t, đáng tiế c nhấ t, ít nhấ t, quả thạ t, hiển nhiên, rõ ràng; (Possible, Probable, certain, better, willing, ...)
 (3) Mental clauses (also known as the construct using cognitive verbs as a means of barrier towards the speaker in traditional grammar): Tôi cho ră ng, chúng tôi cho ră ng, chúng tôi nghĩ ră ng, tôi nghĩ ră ng, chúng (tôi) tin ră ng, theo chúng tôi, theo tôi; (We (I) think, we (I) suppose, we (I) believe, according to us, according to me);
- (4) Projecting clauses ((also known as language/structure expressing modality): nghe/bảo/nói/kêu/thấy nói là..., Có thể là..., Có khả năng (là) ..., Rất có thể là..., Điều quan trọng là(It seems that/ It sounds that..., It is possible/probable that/ It is certain that..., It's likely/unlikely that..., It's impoortant that...)

Regarding the type of expression, the Vietnamese language also has implicitly and explicitly objective/ subjective types made by Bui Thi Dao (2014) and Ngu Hung (2003).Expressive subjective assessment of the speaker/writer can be expressed by attitude verbs in mental sentences such as: Tôi nghĩ/cho/tin là; Theo tôi/ ý kiến của tôi; Về phía tôi/ cá nhân mà nói; Tôi thấy/trông/chắc chắn/cho là... (I think/give/believe is; In my opinion/my opinion; For me/personally speaking; I see/look/surely/assume...) (Bui Thi Dao, 2014: 43; Ngu Thien Hung, 2003: 97-103). The obvious objective assessment of the speaker/writer is expressed through the verbs that indicate perception in the projection: nghe/bảo/nói/kêu/thấy nói là... Có thể là..., Có khả năng (là) ..., Rất có thể là....., (It seems that/ It sounds that ..., It is possible/ probable that/ It is certain that..., It's likely/unlikely that...) (Ngu Thien Hung, 2003: 103-105).

As mentioned in a theoretical framework, the paper applied SFL as the basis for describing Vietnamese grammar. According to SFL, Modality is realized congruently through finite modal operators, modal adverbs, predicate expansion (passive verbs), modal adjectives and incongruently through mental clauses and attributive clauses or interpersonal metaphor. Thus, in this paper, the Modality realization in Vietnamese PILs has been investigated and described through these linguistic manifestations.

2.3. Modality and its reflection on power relation

Modality, as stated by Halliday (1994), means the judgment made by the writer/speaker toward a proposition and proposal in what he is saying. According to Halliday & Matthiessen, modality is conceptualized as "intermediate degrees between the positive and negative poles" and modality's function is "to construe the region of uncertainty that lies between 'yes' and 'no" (2004:147). This indicates modality as the value attached on utterances of supporting, denying or standing, etc.... Referring to Halliday's metafunctions of language including ideational, interpersonal and textual, modality operates within the interpersonal function of the language. Interpersonal function is the one through which we represent ours to others (Halliday, 2002, p. 200). This means that modality which is a linguistic element to realize the interpersonal function of language may be used as a linguistic tool to direct and the behavior or ideologies listeners/readers reflecting on power relation in texts. Considering texts as pieces of discourse, within discourse analysis, modality concerns writers/speakers' attitude toward the proposition being presented, and "represent values embedded in ideology, attitudes or power relation outside of the text" (Sulkunen & Tõrrõnen, 1997, p.45).

In the simplest understanding, modality indicates a speaker's/writer's special way of conceptualizing a worldview or ideology. Badran (2002:128) has seen Halliday's idea on modality to be subjectivity and suggested that "modality is concerned with subjective characteristics of an utterance" and modality can be defined as "the grammaticalization of speakers' subjective attitudes and opinions". He also believed that subjectivity means to represent a certain point of view. It, therefore, is "the essential feature of ideology" in this case.

Basing on the modality's subjectivity nature, it can be inferred that the use of modality evokes the meaning in uncertainty. This is what Halliday mentions in his book that putting an expression of certainty in a clause will only result in a doubt to the reader. Thus, modality is used to create the things in between the negative or positive fact. To put it simply, modality is one of the linguistic elements to reflect the belief, comment or attitude of the speakers/writers toward their proposition and to constitute and encode the listeners'/readers' ideologies. The belief can be considered as the doubtfulness. It is not only about how much a person knows the subject matter, but it

may also do with the power or the authority to participants involved in the discourse.

Modality has a position as the keystone representing the ideology of a discourse. Badran explains that text writer's point of view is the filter as means to organize and to present ideology. He emphasized "modality can potentially represent one fundamental linguistic feature through which the speaker's point of view can be detected in an utterance" (Badran, 2002:128). In other words, modality is linguistic evidence which can be used to judge the ideology in a discourse or text.

3. Methodology

This research employed the combination of descriptive and qualitative. Descriptive method refers to the process of collecting data, classifying data, analyzing data, interpreting data and reaching the conclusion (Sutrisno Hadi, 1983:3). According to Adar Ben (2014), the qualitative approach to gathering information focuses on describing a phenomenon in a deep comprehensive manner. In this paper, I have made effort to explore, describe and produce some assessment on Modality resource in 60 selected texts of Vietnamese patient information leaflets

3.1. Data collection

For the data resource, 60 Vietnamese PILS among different disease groups (namely, cardiovascular (10 texts), digestive (10 texts), respiratory (6 texts), allergies (10 texts), pain relief, antipyretics (10 texts), antibiotics (10 texts), and other medicines for disease treatment (4 texts)) have been selected. For the convenience of data analysis, we code for each text and for each clause within each text in the whole research data. For example, the text of Acemuc is coded as PILS1. We define the boundary and division in this document to include 312 clauses, the order of the clause in this text is numbered from 1 to 312, then each stroke will be coded. Specifically, the first clause in the PILS of Acemuc is coded as: PILS1.1, number 2 is PILS1.2, number 312 is PILS1.312... Each clause is analysed in terms of modality elements of modal verbs, modal adverbs and interpersonal metaphor.

3.2. Data analysis

The analysis of the data will follow the following steps:

i. Collecting the data in types of modality: modalization (probability and usuality) and modulation (obligation and inclination) in the form of modal verbs, modal adverbs and modality metaphor used in clauses.

ii. Analysing *Modality* uses in clauses to uncover their reflection on power relation between participants

iii. Drawing the conclusion from the findings obtained from the analysis

4. Finding and discussion

Among 9.660 clauses in the whole research data, 730 clauses employ modalities of modalization and modulation, accounting for 7.55% the number of clauses. Table 5 shows the distribution of types of modality in the Vietnamese PILS surveyed and calculated the frequency and percentage on three sub-systems of mood, which are: (i) types of modality (probability, usuality, obligation and inclination), (ii) values (high, medium and low), and (iii) semantic realization of Modality.

Table 5. Distribution of types of Modalities in Vietnamese PILS

Types of Modality			Co	Congruent realizations			Incongruent realizations				
				Subjective: implicit		Objective: implicit		Subjective: explicit		Objective: explicit	
			Finite		Modal adverb, passive verb		Mental clause		Projecting Clause		Total
			No	%	No	%	No	%	No	%	%
7		High	60	8.2	0	0	0	0	0	0	36.99
Modalization	Probability	Median	24	3.29	0	0	0	0	0	0	
aliz		Low	60	8.2	126	17.3	0	0	0	0	
ati		High	0	0	36	4.9	0	0	0	0	25.4
9	Usuality	Median	0	0	0	0	0	0	0	0	
	36.3	Low	0	0	150	20.54	0	0	0	0	
2		High	156	21.4	0	0	0	0	0	0	
lod	Obligation	Median	24	3.3	0	0	0	0	2	0.27	31.47
Modulation	2028	Low	48	6.5	0	0	0	0	0	0	
		High	18	2.4	0	0	0	0	2	0.27	6.14
2	Inclination	Median	0	0	0	0	0	0	0	0	
		Low	12	1.7	0	0	0	0	12	1.7	
	Total		402	55	312	42.76	0	0	16	2.24	100

From Table 5, all kinds of modality (modalization and modulation) in Vietnamese PILs are congruently and incongruently realized through Finite, Adjunts, and Projecting clause with quite small rate. No Mental clause can be found in the whole data. The small percentage of modality used in the Vietnamese texts of PILs indicates that the writers are fairly confident with the written information and are willing to present judgments as scientific knowledge which is absolutely correct, no need to argue. This makes it less likely to create a gap between 'yes' and 'no'. The gap forcing the patient as a reader to doubt the certainty of the information given and to argue against it helps the text readers to fully believe in the knowledge, recommendations, advice instructions contained in the PILs. According to Hoang Van Van (2020), the use of a too small proportion of modality in the text represents a tendency to construct scientific knowledge as confirmed facts, forcing the presented knowledge to be accepted, and thereby separating the reader from the ability to critically participate in the text.

4.1. Doctor-patient power relation through Modal operators

Many clauses did not use modalization and modulation in the propositions and proposals that they made. In addition, it was also revealed that most patient information leaflets using modality in congruent ways, only few cases of modality metaphor were found in the data.

The small number of modalization used in the PILs indicates that the text producers want to present their propositions as reality that has absolute truth. Most of mood types in the PILs are declaratives which were used dominantly to make statements - most of which are not modulated. Such strategy bears some consequences to the interpersonal meaning created in the texts; namely, the propositions are presented as facts. According to Khalid's (2013) when proposition is realized in declaratives (to make statements) without modality, text writers create propositions that cannot be challenged by their readers. The difference between the modulated propositions and unmodulated ones from the PILS are presented in Excerpts 1- 4 below.

 Exl. *Phải* định kỳ kiểm tra chỉ số huyế t học, chư c năng gan, thạ n trong suố t quá trình điệ u trị dài ngày. (PILS 11. 75)

(**Must** periodically check hematology, liver and kidney function during long-term treatment)

- *Ex2*. Thuố c chố ng co giạ t (Phenytoin, Barbiturat, Carbamazepin) **có thể** làm tăng tính đọ c gan của Paracetamol (PILS5.34.)

(Anticonvulsants (Phenytoin, Barbiturates, Carbamazepine) **may** increase the hepatotoxicity of Paracetamol)

- Ex3. Bảo quản ở noi khô, nhiệ t đọ không quá 30°C, tránh ánh sáng. (PILS 6.41)

(Store in a dry place, at a temperature not exceeding 30°C, protected from light)

- Ex4. Hoi ý kiế n bác sĩ (PILS7. 36) (Ask your doctor)

There is a difference in the way propositions in Exl-Ex4 are made. The modality of probability *phải* (must) and *có thể* (*may*) in El and E2 respectively marks each of the text producers' judgment about the probability of the proposition that is made. In Exl, the text producer writes about his belief regarding the strong advice from the writer (as a doctor) to the

readers (as a patient); while in Ex2, the text producer states the effect of the medicine on some of body organs of the medicine takers. According to Khalid (2013), the use of modality in propositions like these allows the writers to create an interpersonal dimension acknowledging that the readers may have different ideas from the proposition. In contrast, the absence of modality in Ex3 and Ex4 make the propositions in these two clauses as facts and not likely to be challenged.

Despite its small occurence, the use of modulation in the PILs in our research data shows the tendency of the text producers of this group to soften down their proposal, as can be seen in Ex5 as opposed to Ex6 below.

- Ex5. Xin lưu ý rằng // tất cả các nội dung **sẽ phải** tìm hiểu kỹ trước khi sử dụng thuốc (PILS 37.9) (Please note that// all the contents will have to carefully read before using the drug)
- Ex6. Tham khảo ý kiến bác sĩ của bạn thường xuyên trong quá trình điều trị (PILS 23.91)

(Consult your doctor regularly during treatment)

By the use of the modulation *have to* in Ex5, the proposal is softened as opposed to the unmodulated imperative in Ex6 which results in a stronger proposal. In addition, the use of medium-modality of certainty *will* in Ex5 further softens down the proposal.

According to statistics, the numbers of each type of modal operators and adverbs serving as mood adjuncts of modality, including low, median and high are counted. The Table 6 below shows the statistics of modal operators in the whole PILs in our research data.

Table 6. Statistics of modal operators in Vietnamese PILs

Value	Modal adverbs	Number	Total number	Percentage
High	Phải (Must)	26	89	22.1%
	Cần (Need)	28	-	
	Phải (Have to)	10		
	Không được (Mustn't)	15		
	Không thế (Can't)	10		
Median	Is to	0	58	14.43%
	Nên (Should)	26		
	Sẽ (Will)	22		
	Không nên (Shouldn't)	10		
Low	Có lẽ (May)	90	255	63.47%
	Có lẽ (Might)	10		50.000
	Có thể (Can)	155	7	
	Có thể (Could)		-	

From the statistics, it is found that modal operators at low value are used most frequently (accounting for 63.47%), while modal auxiliaries at outer value (22.1%) are obviously less compared with those with low value and the modal operators of median value modality appear the least (14.43%). The dominantly less use of high value modal verbs like *must*, *need* and *have to* is not for the purpose of degenerating the status and power of the text writer (regarded as the doctor), expressing hesitation or uncertainty, but instead, to declare, to demand and to take responsibilities. In fact, it is a revealing of the writer's overwhelming ideology.

"Will" reveals the willingness, and the certainty of the writer about the matter mentioned in the PILs. They are both subjectively and implicitly representing the feelings, knowledge and ideas of the implied writer. Meanwhile, "should" or "should not" expresses the advice from the writer/doctor. Followings are some examples for analysis:

- Ex7. Bác sỹ **sẽ** quyết định cho việc sử dụng thuốc hay không (PILS56.72)

(Doctors **will** give the final decision of using the medicine or not)

- Ex8. Trẻ **sẽ** bắt đầu cảm thấy bớt đau hoặc hạ sốt sau khoảng 30 phút sau khi uống (PILS 39.21)

(Your child **will** start to feel less pain or fever about 30 minutes after taking the medicine)

- Ex9. Nếu sử dụng thuốc nhiều lần trong ngày,// bệnh nhân **sẽ** có thể xuất hiện hiện tượng dị ứng trên da (PILS 51.27)

(If you apply the medicine more often than once daily,// you **will** be more likely to experience skin reactions)

- Ex10. Không nên rửa/ thải thuốc qua đường nước thải (PILS 22.38)

(Medicines should not be disposed of via wastewater or household waste.)

We can see from the above examples that verbs after modal auxiliary will are give the final decision, start to feel, and be more likely to experience. Therefore, what will expresses is the commitment of responsibility about medical knowledge towards his people. When will is used, the encoded medical situations as subjects for emphasis, revealing clearly that what is mentioned is significantly true.

Through the use of *will*, the PILs writer as a doctor shows his power and responsibility to his chosen people, and also shows his own nature. Morover, the doctor wins more support from his people with their advice from medical specilality/knowledge. *Will* and *should* act as a close tie between the doctor and his

people, bridging the gap between them. This surely helps to build a closer doctor-laymen interpersonal relationship.

On the other hand, the use of modal auxiliaries of high value *must*, *must not*, *need*, *have to and can't* is a sign showing the doctor's authority and supremacy to force the medicine takers to follow the recommendation or forbid doing something.

- Ex11. Nếu trẻ nôn hết hoàn toàn lượng thuốc ngay sau khi uống, //**phải** cho trẻ uống lại liều tương tự (PILS 39. 49)

(If the child vomits all the medicine right after taking it, // must give the child the same dose again)

- Ex12. Bệnh nhân **không được** sử dụng đèn chiếu nắng hoặc giường tắm nắng (PILS2.56)

(Patient must not use a sunlamp or sun bed. (EPILS2.56)

- Ex13. **Phải** ngừng cho con bú trước và trong khi điều trị bằng Methofill (PILS5.116)

(Breast-feeding **has to** be stopped prior to and during treatment with Methofill)

- Ex14. Hỏi bác sĩ hoặc dược sĩ // nếu bạn **cần** thêm thông tin hoặc tư vấn (PILS3.6)

(Ask your doctor or pharmacist // if you need more information or advice.

However, these modal auxiliaries of high value are used the least in comparision with the others. Followings are some of the excerps in the analysis:

- Ex15. Sản phẩm này **có thể** sử dụng được trong khi mang thai và trong khi cho con bú (PILS3.57)

(This product **can** be used during pregnancy and while breast-feeding)

- Ex16. Ånh hưởng của quá liều Paracetamol **có thể không** rõ ràng (PILS 22.87)

(Effects of Paracetamol overdose **may not** be obvious)

- Ex17. khi sử dụng Paracetamol có thể gây một số phản ứng dị ứng nghiêm trọng như: phát ban, nổi mần da, sưng mặt, sưng môi, sưng lưỡi, sưng họng, khó thở (PILS 29.14)

(When using Paracetamol can cause some serious allergic reactions such as: rash, skin rash, swelling of the face, swelling of the lips, swelling of the tongue, swelling of the throat, difficulty breathing)

The purpose of combining a small number of high value modal auxiliaries with a superior in number of modal auxiliaries of low value such as *may*, *might*,

can and could in the PILs is to emphasise the importance but to offer laymen more information as facts and medical knowledge so that patients will have their own right choices and freedom in their decisions. Thanks to this combination, the positions and proposals seem to be softened and easy to be accepted by the listener.

What the doctor provides is only regulations, criteria, facts and scientific knowledge but whether laymen will obey or violate it sounds to depend on people themselves but strong enough to lead people to give informed decisions basing on their awareness to take the medicine or not. Thus, we can find that the doctor is indeed trying to respect patients, to offer choices for them to decide either to take the medicine or not based on the provided knowledge.

4.2. Doctor-patient power relation through Modal Adverbs

The Table 7 below shows the statistics of modal adverbs empolyed in the whole research data.

Table 7. Statistics of modal adverbs in Vietnamese PILS

Value	Modal adverbs	Modality adverbs found in Vietnamese PILS	Frequency	Percentage	
High	Always	Luôn luôn	34	19.23%	
-	Never	Không bao giờ	22		
	Required	Được yêu cầu	2		
	Determined	mined Kiên quyết			
Median	Probably	Có lẽ	15	4.8%	
	Usually	Thường thường	0		
Low	Possible	Có thể	114	75.97%	
	supposed	Được cho là	12		
	Sometimes	Thinh thoảng	91		
	Rarely	Hiếm khi	20		

According to the statistics in Table 7 above, the modal adverbs of probability, usuality, obligation and inclination are found in the text genre of Vietnamese PILS. However, in terms of value of selected modality expressions, low-valued modal factors are used the most (75.97%), the percentage of high-valued modal factors are selected with a lower rate (19.23%), and the number of median-valued modal factors is the lowest, accounting for 4.8%. This proves that the writers makes use of a patient-centered strategy when focusing on guiding, explaining, persuading and advising patients more than to impose. The clauses in the 'goods-&-service' exchange are often associated with modal elements as a tool to help build trust in the patient. The below excerpts are examples of modal adverbs exploitation.

Ex18. Trong trường hợp ngộ độc tổn thương gan nặng, **có thể** tiến triển thành bệnh não hôn mê và tử vong (Source: PILs5.51)

(In the case of poisoning, severe liver damage **possibly** progresses to encephalopathy, coma and death)

Ex19. *Hiếm gặp* tim đập nhanh, buồn nôn (Source: PILs 5.28)

(Rarely, tachycardia and nausea occur)

The use of high-value modal adverbs demonstrates the author's authority over the reader. The text writer creates space for the reader to negotiate in his or her judgments. However, the PILS writers use low-value modal adverbs with the preponderance of all, which seems to have undermined their authority as a medical expert in informing knowledge about drugs, instructing patients to use drugs, requiring patients to adhere to the use of drugs. By using mainly lowvalue status factors to shorten the distance between the doctor and the patient, the text writers have changed the strategy from asking and forcing to explaining, advising, persuading, and urging the patient to follow. Thus, the fact that the writers of PILS have selected high-value modal adverbs such as luôn luôn (always), không bao giờ (never), được yêu cầu (required) and buộc phải (determined) in Vietnamese PILs with a lower frequency and rate is not for the purpose of degrading the position and power of the PILs writer as a medical professional or physician, or expressing hesitation or uncertainty about their expertise, but instead demonstrating their dominance by implicitly expressing their authority through the form of explanations, advising. persuading and calling the patient to follow while maintaining a close and friendly relationship with the patient, making the patient voluntarily follow the doctor's orders through understanding the knowledge has been imparted. Only those who are in a higher position in terms of social status, professional field, participant role... can explain, advise, call and persuade others to follow them. So the author's authority is still valid but still exists in harmony and in an equal relationship between the participants.

Thus, the linguistic evidences above have revealed the power relation between the participants known as doctor-patient power relation involved in the PILs. This is proved from the reflection of the status of power of equality and persuasion. This can be seen from the superior use in number of low-value modality compared with less use of medium or high value of probability and obligation addressed to the laymen. The high modality represents the belief of

writers that the fact mentioned in the proposition is just true. The high modality is also seen in the form of strong obligation the writer directed to the public. This does not mean the laymen have a weaker power, but reflects an equal power to them. The writers with their full authority could obligate the public to follow their instructions and suggestions by applying more high value modality. However, the writers do not do that. They choose a more softened way by using low and median value modality resources to persuade the readers to realize the matter and then give their informed decisions by themselves.

4.3. Doctor-patient power relation through Modality metaphor

Another finding related to modality is the way it was realized in the PILS. Data analysis showed that most text producers using modality in their PILS did so congruently as the excerpts in this section have exemplified so far. A few cases of modality metaphor were found in the data which were with the most occurrences of the metaphor. One is exemplified below.

- Ex20. Điều quan trọng là phải tuân thủ đúng theo các hướng dẫn của bác sĩ hoặc hướng dẫn sử dụng sản phẩm. (PILS 22.101)

(It is important that you strictly follow your doctor's instructions or product instructions.)

- Ex21. **Điều cần thiết là** bạn làm theo các hướng dẫn được đưa ra (PILS29.79)

(It is essential that you follow the instructions given.)

The underlined part of Ex20 and Ex21 above Dieu quan trọng là (It is important) and Điều cần thiết là (It is essential) is a projecting clause that explicitly expresses the certainty of the writer in the proposition presented in the projected clauses you strictly follow your doctor's instructions or product instructions and you follow the instructions given. The projecting clause is a pseudo-clause that metaphorically means I require you to do what I have mentioned in the projected clause. A way of saying this kind of certainty in such a metaphorical way is what Martin (1985), Halliday (1994), Lipsone (2004) and Emilia (2005) refer as modality metaphor. The pseudo-clause underlined in excerpt Ex20 and Ex21 above is a compulsory element in this metaphorical realization of certainty. Such construction makes the judgment explicit, creating stronger impact on the evaluation. In addition, the use of It is...that in the appended clauses above objectifies the writer's judgment, as argued by Eggins (2004, p. 175) that such construction of modality metaphor allows the text producer "to hide behind an ostensibly objective formulation." This impersonal touch to the evaluation is proper for the context of the PILs considering the degree of distance between the text writer and its target readers which is not close and intimate. The effect created would be different if the text writer used the subjective explicit construction for realizing his judgment or certainty using. For example, *I think* or *I believe* for a more detailed discussion on factors affecting interpersonal distance and their consequences on interpersonal meaning realization (Eggins, 2004).

5. Conclusion

This study has shown how the doctor-patient power relation is perform and reflected in the texts of Vietnamese PILs via modality use. As shown in the section of findings and discussion above, many clauses in the PILs did not use modalization and modulation. This trend suggests that the text writers prefer to present their propositions as facts to create stronger propositions and proposals that cannot be challenged by their readers. The study showed that modal verbs characterized the PILs under study, adding a colour of subjectivity in terms of judgment and assessment into the supposedly-objective written texts

In addition, the use of modality can also create more persuasive texts, as indicated in Pertiwi's study (2015). Thus, the use of varied modality in the research data creates successful texts, and suggests a persuasive power relation between the doctor and the laymen in the PILs, meeting the social purpose of the texts. The text writers use the combination of medium and low modality (obligation) as they address the scientific facts. Meanwhile, they also use high obligation to address the public, reflecting that they regarding as the doctors have more powerful than the public. The text writers did not have any risk to dictate the readers and even to betray the facts/ truth in the field. This also gives an equal writerreader relationship which enables the latter to make an informed decision on following the instructions given. This study confirms Eggins' argument (2004) on how interpersonal resources can be used to maintain social relationship and influence others. Based on the evidences above it can be concluded that the modality reflects the doctor-patient power relation in the Vietnamese PILs discourse.

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