

Variants and/in/of the Rhetoric of Health and Medicine

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As we prepare to publish the first issue of volume five, we (Cathryn and Kim) are also moving from roles as “transitioning-in co-editors” to simply “co-editors” of this journal. Among the many contributions that founding emeritus co-editors Lisa Melonçon and Blake Scott have made to the field of RHM have been the thoughtfully written editors’ introductions they’ve composed for many of the issues in the first four volumes of *RHM*—a journal that their visionary leadership has made award-winning and widely read. During our own terms as co-editors, we hope to continue that tradition of editors’ introductions that double as intellectual offerings that are centered on amplifying the excellent contributions of RHM authors across venues while also serving to introduce readers to the fine contributions of the authors published in each issue. As such, we are continuing the discussion of hybridity that started in the introduction to Issue 4.1 by resuming the rumination on where the field is at present and where, therefore, we might encourage writers and researchers to take things next.

We are very much, at present, living in the land of the variant. Early summer 2021 presented a sort of flash of what a turn to the proverbial “new normal” might look like. We got a glimmer of what it might feel like to emerge post-pandemic—a world admittedly still bursting with continued terror and dismay at what the virus and other horrors continued to inflict on the globe and laden with permanent changes in the fabric of day-to-day

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life, yet these things were nonetheless tempered by the tentative promises of easing restrictions and the hopefulness of sporadic re-openings. Families and friends were visited, long awaited events were held, shows were attended. The Delta variant's rapid spread, though, brought the world, once more, fully to its proverbial knees; at present, the Omicron variant is raging around the globe. Variants of this virus and others are everywhere. It seems clear that we can't ever fully escape them, and the already foggy way out of the pandemic is becoming more and more opaque as the weeks and months stretch on. Nonetheless, RHM scholarship continues to be produced just as health and medical realities continue to deepen in complexity and as the field continues to mature. In some ways, we see the characteristics of RHM's "long haul" identified in the introduction to Issue 4.1—marked by hybridity, *poised to invite in new voices and perspectives*—punctuated by hints at strong variants that may push the field further into the territories that promise to deliver on RHM's most ardent goals, which we see as linked to producing scholarship that might lead to the amelioration of mental, physical, and social suffering in a variety of forms. Maybe variants' virulence, that is, presents a metaphor for promising new strains of scholarship.

It's unsavory, we know, to think of pesky, potentially deadly viral variants as presenting a fitting metaphor for specific new strains of work in the field, yet what we want to do is what many of us are learning to do in everyday life—we want to learn to live with the discomfort of the present and to work with what we have in any way that we can. In describing this desire, we echo Jessica Restaino's exhortation in her 2019 book, *Surrender*: "Instead of abandoning place, situation, or location, the task [. . . is] to work from the space and moment in which we find ourselves" (141); our current space and moment is rife with the challenge—and potential—variants (re)present.

While the Delta and Omicron variants and their brethren are massively unpleasant and even devastating, variants as a metaphor work for us because they are also adaptations that are working around limitations in original iterations. Just as variants dominate at present, we see assertive variants of RHM that promise to continue to take the field in new and more potent directions. Variants push beyond the field's original purview to extend its boundaries and strategically blend disciplinary vantage points toward hybrid scholarly productions. One such direction is linked to technical and professional communication, most notably through scholarship that blends affordances borrowed from the wider field of technical communication with

the explicit goals of collaborating or consulting with in-the-trenches health and medical and public health professionals.

When we think of variants of RHM that have the potential to redraw the boundaries of the field and to bring the work closer to its goal of ameliorating mental, physical, and social suffering, too, this variant of technical and professional communication-inflected RHM scholarship does such work by providing very clear ways to move beyond a scholarly audience—an explicit ambition of much RHM work, but one that sometimes proves to be more aspirational than actual. Just as RHM scholars from a wide variety of specialties use public-facing/non-academic publication venues to convey the new knowledge they produce, those working in collaboration with health and medical and public health professionals and community organizers find additional ways to demonstrate the value of RHM as a field of study and the strength of the new knowledges it can create and circulate.

As Barbara Heifferon (2020) explained in a blog post on *medicalrhetoric.com*, the connection between the rhetoric of health and medicine and technical communication is not new, and it happened somewhat organically. Scholars with positions in which they taught technical and professional communication courses or conducted community-based TPC research brought their scholarly interest in medical rhetoric to those experiences, which led to rich, community-engaged projects that used the vantage points of rhetoric to, for example, produce technical and professional documents with and for community partners (Del Hierro et al., 2019; Green, 2021; Hill & Griswold, 2013; Novotny, 2015; Opel & Sackey, 2019; Ponce, 2021; Scott, 2008). Likewise, while expanding work in RHM could not always reliably barter for space on the Conference on College Composition and Communication (CCCC) program, explained Heifferon, such work *could* find a natural home in conferences such as the Association for Teachers of Technical Writing (ATTW), which made sense, noted Heifferon, with the “continued development of Western bio-medicine’s ever more technical and scientific endeavors.” Heifferon argued that RHM and technical communication had a serendipitous path to blending, and, once blended, the practical ways that the fields enhanced each other when it came to work related to health, medicine, and technical and professional communication design were clear.

Similarly, Elizabeth Angeli and Richard Johnson-Sheehan (2018) argued that, in contrast to RHM’s relationship to other adjacent fields such

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as the medical humanities, there is a natural alignment between RHM and technical communication due to the shared allegiance to application:

Researchers in RHM are often looking for ways to strengthen and streamline communication practices in healthcare and medical workplaces, while developing curricula and training to improve those practices. As a result, RHM has been more closely aligned with technical communication because these two fields are application oriented and therefore share many common goals and motivations. (p. 2)

Additionally, the imperative that technical communication work should often be applied and practical helps to answer the “so what?” question that inevitably emerges when the field of RHM is explained to outside stakeholders. The field does not want to produce scholarship that merely points out issues and problems in health and medical care and/or in how health and medical knowledges are created without ever offering any mechanisms through which such problems might be addressed. Indeed, more pressingly, RHM does not want to create scholarship that lacks the potential to reach those for whom the research would matter—beyond the inherent scholarly value of consuming, synthesizing, and adding to academic bodies of knowledge. Such action-oriented work requires the foundational, theoretically oriented scholarship that precedes it.

Blake Scott’s ongoing study, for example, aims to reduce HIV stigma among healthcare providers (see Cook et al., 2021). This work builds on his earlier rhetorical engagement with HIV discourses toward a project specifically designed to develop comic-based training materials to combat HIV stigma within healthcare settings. This collaborative effort with nursing professionals uses field-based methods and rhetorical vantage points to develop innovative provider training and professional development materials to directly address specific strains of stigma HIV patients experience.

Likewise, Wilfredo Flores’ work as founding member and organizer with *Queering Medicine*, “a grassroots advocacy organization made up of queer people working to improve health outcomes for LGBTQ+ people in the Greater Lansing area using science-informed knowledge and practice,” is another example of how rhetoric of health and medicine scholars are working to expand the reach of their work such that those most vulnerable to the issues and problems in health and medical care delivery benefit from the

new knowledge the field creates (<https://www.queeringmedicine.com/>). Readers can also find fine examples of this kind of scholarship in the work of Lisa Melonçon (see Melonçon & Molloy, 2022), Kirk St.Amant (2021), and in the special issue of *Technical Communication Quarterly* Volume 30, Issue 3: *Unruly Bodies, Intersectionality, and Marginalization in Health and Medical Discourse* (Frost et al., 2021).

Variants such as technical communication-inflected RHM promise to challenge, extend, reanimate and energize our work. We see RHM leaning into issues related to a variety of health and medical-adjacent issues and topics moving forward, such as clean water, clean air, police violence, animal rhetorics, etc.

Our 4.1 editors' introduction discussed the importance of embracing hybridity as we invite new voices into RHM conversations and expand the scope and reach of our work into underexplored areas, issues, and topics. Implicit in this call was more work that could ultimately fulfill the ameliorative aims that have been a hallmark of RHM scholarships' goals.

As technical communication-inflected RHM work continues to be produced, we see a variant of the field emerging that does the work of answering the "so what" question that comes up when RHM is introduced to new audiences. With these projects as examples and sources of inspiration, we believe other RHM scholars can learn to make more explicit ties between their own work and the communities they hope to serve beyond academic audiences.

Welcoming New Editorial Board Members

Implicit in this discussion of impactful projects, of course, is a continuation of the moves Lisa and Blake have been making to bring issues of racial justice and gender equity thoughtfully and strategically to the fore in RHM scholarship. We are continuing to do this important work in a variety of ways, including via inviting new editorial board members. We issued invitations to several new members who are doing strong work and deserve recognition. We chose scholars whose strengths were not already well represented on the editorial board. In our efforts to create a more diverse and inclusive field, we followed Lisa and Blake's lead by looking for thematic diversity in these scholars' work as well as for rich diversity in types of institutions and positionalities. We are humbled and encouraged that these fine scholars were willing to join us. A hearty, grateful welcome to

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our newest editorial board members: Kristin Marie Bivens; Mono Brown; Darlene K. Drummond; Lucía Durá; Avery Edenfield; Raquel M. Robvais; and Rebecca de Souza.

Explicitly Incorporating Gender Identities through Pronouns

Beginning with this issue, readers will notice not only authors' names, but also their pronouns listed with their work whenever they have agreed to include this information. As one component of the evolution our editorship will expand beyond the solid foundation Blake and Lisa have provided, we are excited to offer this explicit recognition of authors' pronouns. We hope this small but significant shift in labeling practices will continue the important work of normalizing various gender identities, ensure that authors have the opportunity to seamlessly clarify their gender identities if they so choose, and remove the guesswork involved in determining whether we in the field are using the right pronouns when we discuss authors and their work in our conferences, classrooms, and publications.

Overview of the Issue

In the lead article of this issue, readers will find an excellent example of the promises of technical and professional communication-inflected RHM work. Candice Welhausen and Kristin Marie Bivens offer an excellent study of the civilian emergency response mHealth apps PulsePoint and OD Help—apps that are meant to allow more expedient assistance for those suffering from sudden cardiac arrest and opioid overdose. Their case study explores how these apps do not, at present, fully account for users' degree(s) of able-bodiedness or mode of transport, and such oversights limit the agential practices the apps make possible in ways that might exacerbate health inequities for some users. Making specific recommendations as to how these apps might be improved using existing technologies, their essay demonstrates the promise of technical communication-inflected RHM work for helping the field to reach its ameliorative aims.

Next, readers will find Mariah Wellman's "Social media influencer rhetoric and the domestication of Health at Every Size on Instagram." Drawing on domestication theory from technology studies, Wellman analyzes how social media influencers rely on domesticating scientific information as they communicate with their followers. She demonstrates how

the Health at Every Size (HAES®) movement, specifically, has been adopted or co-opted by influencers through various domestication strategies, such as personalization, anecdotes, and social justice connections.

This issue also contains Craig Stewart and Amanda Young's astute examination of how journalists' discursive practices must account for marginalized audiences who have the most at stake when they translate new research on conditions like sickle cell disease. Failing to do so, their work shows, can leave such audiences fearful and more skeptical of the medical community rather than optimistic about the potential of a new treatment option.

Likewise, we are very pleased to include Tristin Brynn Hooker's study of the online discursive practices of "zebras," or rare-disease activists who use strategic genre moves and the affordances of social networking to leverage personal experiences as advocacy. Through their advocacy work, argues Hooker, they gain legitimacy for their sometimes-contested diagnoses through networking with one another and showing and sharing the relationships between their conditions.

Finally, this issue offers up Warren Bareiss' review of Rachel Bloom-Pojar's *Translanguaging outside the academy: Negotiating Rhetoric and Healthcare in the Spanish Caribbean*—a text that Bareiss reassures readers is "a resource through which we can learn to share, build trust, and communicate *better*." This book review can be found online at <http://medicalrhetoric.com/journal/5-1/bareiss/>.

Ode to Lisa and Blake

What a privilege and an honor it is to be writing this editors' introduction as we embark on our terms as co-editors. This journal has become a touchstone for the field and a place for writers to work together toward more just and equitable health and medical futures via RHM scholarship and beyond. We take our places at the helm of a journal we have admired very much with great enthusiasm, but we would be remiss to do so without first explaining how and why the *RHM* journal exists as such a formidable entity in the field or, indeed, *why the journal exists at all*.

The work we do on this journal would not be possible without the visionary brilliance and tenacity of spirit of two RHM powerhouses—Lisa Melonçon and Blake Scott. They have handed off a high-quality venue with hundreds of stunningly efficient back-end procedures documented in highly readable formats. Having worked to launch this journal a mere five years ago,

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it runs like a much longer-established publication. It is no exaggeration, therefore, to say that the work we will be able to do in our new roles would never have been possible without their tireless work to make this journal a reality and their even more impressive work to make this journal exactly what J. Fred Reynolds (2018) predicted they would—a preferred place for RHM scholarship to be published. With stunningly sharp intellectual insight, strong organizational leadership acumen, and the ability to constantly pivot and compromise, the founding emeritus editors of this journal have gifted the field with a solid home base for the future of its work. Aside from the journal, of course, each has contributed brilliant scholarship to RHM and has worked tirelessly, often behind-the-scenes and without much recognition—alongside others in the community on a wide variety of community-building initiatives that have helped make RHM a cohesive and consequential field of inquiry via, for example, symposia, the *medicalrhetoric.com* website, and the CCCC Medical Rhetoric Standing Group. We hope the ever-expanding RHM community will join us in offering Lisa and Blake a huge thank you.

On the Horizon

RHM variants, as we argue above, take the hybridity of RHM to their advantage as they blend disciplinary vantage points and create new apertures for generative and provocative work that cross and blur disciplinary boundaries. They are also poised to draw in powerful new voices that will shape the future of the field. That is, strong variants of RHM promise to move the field into new and impactful directions.

Along these lines, we are extremely fortunate to be working with two groups of exceptionally talented and passionate guest editors on two special issues. In one of these, titled “Queer and Trans Health Justice: Interventions, Perspectives, and Questions,” McKinley Green and Wilfredo Flores will work with *RHM* assistant editor Fernando Sánchez to shape an issue that will take up, as their call for papers puts it, the goal of increasing “the focus on queer and trans healthcare needs as a means of enacting better healthcare experiences for such communities.”

In the other upcoming special issue, titled “In Living Color: Amplifying Racial Justice Work in RHM,” Kimberly Harper, Veronica Joyner, and Maria Novotny will work with *RHM* co-editor Kim Hensley Owens to shape an issue that responds to, as their call puts it, “the growing awareness that

racism and its interwoven structures have a direct correlation with health equity.” This special issue will help to “situate the rhetoric of health and medicine within a racial justice framework,” a timely and much-needed perspectival addition to extant RHM work.

These two issues promise to enhance work we already see in the various variants of RHM emerging, and we see potential for them to introduce new pathways for RHM scholars to make real and lasting contributions to improving health and medical realities.

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