**Health Semiotics - Week 2-3**

**Exercises on Hasan’s Semantic Networks (ROLE ALLOCATION)**

**Data from EOL discussion in palliative care (Moore 2016)**

1. In text 1 (Text 101 from the published study), are end-of-life issues as you understand them:

a) not raised

b) raised but not discussed

c) raised and discussed?

2. What evidence from the text can you give to support your choice in (1). Consider the ‘semiotic address’ of your evidence – is it lexical, grammatical, semantic, contextual; experiential, logical, interpersonal, textual...; where does instantiation come in ?

3. In this excerpt, what is the significance of the ROLE ALLOCATION selection?

a) Identify the selection expressions in Turn 135 Message 1 (ie whole turn), without checking with the published article.

b) Describe the interactional/logogenetic effect that this choice of ROLE ALLOCATION appears to have on the dialogue and explain why you think it works that way.

c) Identify the selection expressions for the remaining Doctor questions.

d) Comment on how the sequence of ROLE ALLOCATION selections construes the Tenor of this interaction overall and whether/how it helps to construe stages/phases in the structure of the text.

4. Turning to Text 2, are end-of-life issues as you understand them:

a) not raised

b) raised but not discussed

c) raised and discussed?

5. What are the selection expressions for the Doctor’s questions and their significance in Text 2?

6. Turning to text 3, are end-of-life issues as you understand them:

a) not raised

b) raised but not discussed

c) raised and discussed?

7. What are the selection expressions for the Doctor’s questions and their significance in Text 3?

8. What about the Patient’s questions in Text 3?

9. Do you think that this way of considering questions is useful? Compare for example considering questions as simply Open or Closed?

10. Are there any challenges/issues in mapping the network, the SEs and realisation criteria to the data?