



The Application of Critical Discourse Analysis in the Dissemination of Zhuang Medicine

Insights from a Zhuang Medical Case Database

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Abstract. In the context of the digitalization and international dissemination of traditional medicine, Zhuang medicine case databases have increasingly emerged as important vehicles for knowledge transmission. Adopting a critical discourse analysis (CDA) perspective, this study examines textual materials from a Zhuang medicine case database and analyzes the construction of medical knowledge, professional authority, and cultural identity across three analytical dimensions: linguistic features, discursive practices, and sociocultural contexts. The findings indicate that, through standardized textual formulations, case narratives become more aligned with the discursive conventions of contemporary traditional medicine, and that processes of discursive de-localization of Zhuang medical culture contribute to enhanced cross-contextual communicability. At the same time, the texts implicitly embody tensions between traditional experiential knowledge and the discourse of modern medicine. This study aims to broaden methodological approaches to research on the dissemination of Zhuang medicine and to provide a theoretical reference for the digital communication and cross-cultural understanding of ethnic minority medical systems.

Keywords: Critical Discourse Analysis; Zhuang Medicine; Medical Case Database; Dissemination

1 Introduction

Zhuang medicine, as a distinctive traditional medical system transmitted across generations by the Zhuang ethnic group in China, encompasses a rich body of experiential knowledge, diagnostic reasoning, and cultural practices. However, compared with mainstream modern medicine, ethnic medical systems represented by Zhuang medicine continue to face multiple challenges in contemporary processes of digitalization and dissemination.

First, within the context of medical information digitization and communication, medical texts function not merely as neutral carriers of information but also as sites for the construction of cultural and power discourses. Critical discourse analysis (CDA) foregrounds the relationship between language and social structures, emphasizing how

discourse constructs meaning, authority, and ideology. In the fields of medical and health communication, CDA has been employed to examine the underlying value orientations and power dynamics embedded in policy documents and health-related texts [1].

Second, as an important medium for the digitization and standardization of traditional medical resources, the Zhuang medical case database not only preserves clinical experience but also serves as a bridge for cultural dissemination and knowledge representation in contemporary contexts. In this process, linguistic choices, narrative structures, and semantic strategies within case texts may directly shape readers' understanding and reception of Zhuang medical knowledge.

2 Literature Review

Existing studies on the application of Critical Discourse Analysis (hereafter referred to as CDA) in medical texts have primarily focused on policy documents and health-related texts. For instance, prior research has employed discourse-analytical approaches to examine the implicit cultural and ideological constructions embedded in medical professional ethics texts, revealing how medical discourse contributes to the construction of professional identity and subject positioning[1]. Other studies have applied CDA to health policy documents issued by the World Health Organization (WHO), demonstrating that discursive choices can shape the attribution of responsibility for health issues as well as influence policy orientations[2].

These findings indicate that discourse-analytical approaches possess strong analytical capacity for systematically examining linguistic strategies, communicative patterns, power relations, and socio-cultural contexts within health communication and medical settings. This aligns closely with the overarching objective of CDA to uncover the relationships between discourse and power at the macro level. Nevertheless, within the contexts of Zhuang Medicine dissemination and the digital representation of ethnic medical texts, CDA has yet to be systematically applied, particularly in studies focusing on Zhuang medical texts.

Against this backdrop, the present study addresses the following core research questions: How does the textual discourse of the Zhuang medicine case database embody linguistic strategies and structural features in the process of knowledge dissemination? In what ways does this discourse participate in the construction of medical authority and cultural identity? To what extent can critical discourse analysis serve as an effective analytical tool for understanding the digital dissemination of Zhuang medicine?

3 Theoretical Framework and Research Methodology

3.1 Critical Discourse Analysis

Critical Discourse Analysis (CDA) is an interdisciplinary approach to discourse studies that emphasizes the interaction between language and social practice, as well as the

construction of power relations. CDA not only examines the formal features of language but also conceptualizes discourse as a mechanism for the reproduction of social structures and power relations[3]. Its core theoretical foundations draw on the work of scholars such as Teun A. van Dijk, who argue that discourse not only reflects social reality but also actively constructs and sustains social power structures. From a CDA perspective, researchers pay particular attention to the ways in which ideology, power asymmetries, and social inequalities are reproduced or contested through discourse[4].

3.2 Research Object and Data Sources

This study takes Therapeutic Protocols for Advantageous Diseases in Zhuang and Yao Medicine, published in 2022[5], as its primary research material and constructs a small-scale corpus of Zhuang medical case texts based on this source. Medical case texts typically include patients' basic information, descriptions of etiology and pathogenesis, diagnostic reasoning, treatment regimens, and records of therapeutic outcomes. Such texts function not only as records of clinical practice but also as important textual carriers for the systematization and dissemination of Zhuang medical knowledge. Their linguistic forms, narrative structures, and terminological systems play a crucial role in shaping the understanding and transmission of medical knowledge.

3.3 Discourse Analytical Methods

In terms of the analytical model, this study draws on the three-dimensional framework of discourse analysis proposed by Fairclough[6], which examines discourse across three interrelated levels: text, discursive practice, and social practice. Based on this model, a systematic analysis is conducted on the medical case texts in the corpus.

At the textual level, the analysis focuses on the following linguistic features in Zhuang medical case texts: (1) the use of specialized medical terminology and experiential expressions; (2) narrative structures employed in descriptions of etiology, syndromes, and treatment; and (3) the deployment of descriptive, evaluative, and normative language.

At the level of discursive practice, attention is given to the production, organization, and presentation of medical case texts, including: (1) the processes through which medical cases are standardized, structured, and incorporated into the database; (2) whether the texts are oriented toward intra-professional communication or outward dissemination; and (3) the selection and combination of different discursive resources within the texts.

At the level of social practice, this study situates Zhuang medical discourse within its ethnic cultural context and the contemporary medical landscape, examining how medical case discourse: (1) constructs the legitimacy and professional status of Zhuang medical knowledge; (2) reflects tensions between traditional medicine and modern medical discourse systems; and (3) participates in shaping the cultural identity of Zhuang Medicine as an ethnic medical tradition.

4 Discourse Feature Analysis of the Zhuang Medical Case Database

4.1 Linguistic and Narrative Features of Zhuang Medical Case Texts

At the textual level, the medical case writing in Therapeutic Protocols for Advantageous Diseases in Zhuang and Yao Medicine demonstrates linguistic and narrative features that differ markedly from those of modern medical case records. The case descriptions are typically organized around a core structure of “etiology and pathogenesis—syndrome characteristics—therapeutic principles—medication rationale,” rather than following an anatomical framework or a disease-centered classification system. For example, in the clinical descriptions of certain advantageous diseases, the texts often begin by addressing overall functional disorders or states of internal imbalance before introducing specific symptoms and corresponding treatment strategies[5].

This narrative pattern reflects the discursive logic of traditional medicine, which emphasizes holism, functional interpretation, and experiential knowledge, rather than the linear causal model of “pathogen–pathology–indicator” characteristic of modern medicine. This suggests that textual structure itself constitutes a form of discursive choice that shapes how medical knowledge is understood and disseminated.

4.2 The Construction of Medical Authority and Knowledge Legitimacy

At the discursive level, Therapeutic Protocols for Advantageous Diseases in Zhuang and Yao Medicine employs a range of linguistic strategies to construct the authority of Zhuang medical diagnostic and therapeutic knowledge. First, the text makes extensive use of standardized and declarative statements to clearly define diagnostic reasoning, including determinate formulations of therapeutic principles and medication orientations. This depersonalized mode of expression presents experiential knowledge in an institutionalized and normalized form, thereby enhancing its professional legitimacy.

Second, descriptions of therapeutic efficacy and indications are often articulated through summarizing and generalized language, with relatively few expressions of uncertainty or conditionality. This discursive pattern closely aligns with strategies commonly observed in medical discourse, where authoritative expertise is reinforced through claims of certainty. Such linguistic strategies not only convey medical information but also implicitly establish “who has the authority to interpret disease” [7].

4.3 The Representation of Cultural Identity and Communicative Orientation

At the socio-cultural level, Therapeutic Protocols for Advantageous Diseases in Zhuang and Yao Medicine both reflects the cultural specificity of Zhuang Medicine and demonstrates a clear tendency toward discursive adaptation to modern medical paradigms. On the one hand, the text preserves diagnostic concepts and experiential modes of expression distinctive to Zhuang Medicine, thereby highlighting the cultural uniqueness of

ethnic medical knowledge. On the other hand, through standardized structures and normative language, the text attenuates features associated with oral transmission and localized narrative practices, rendering the content more readily incorporable into modern medical and academic communication systems.

4.4 Summary of Main Features

A critical discourse analysis of the Diagnostic and Treatment Protocols for Predominant Zhuang and Yao Medical Conditions reveals several key findings. First, Zhuang medical case texts demonstrate a knowledge-expression logic centered on holistic and experiential understanding, as reflected in their linguistic features and narrative structures. Second, through standardized and authoritative modes of articulation, the texts construct medical authority and legitimize medical knowledge. Third, case discourse exhibits a pronounced process of negotiation and tension between ethnic cultural expression and the communicative conventions of modern medicine.

These findings suggest that the Zhuang medical case database functions not merely as a repository of medical information, but also as a significant discursive arena in which cultural meanings and power relations are articulated and contested.

5 Conclusions

This study introduces Critical Discourse Analysis as an analytical framework to systematically examine the discursive characteristics of Zhuang medical case texts as communicative media. (1) The findings indicate that, in the dissemination of Zhuang medical culture, experiential knowledge is reorganized through the standardized structures and determinate expressions of medical case texts, making it more compatible with the conventions of modern medical and academic communication. Moreover, in the process of institutionalization, Zhuang medical culture often undergoes discursive transformations characterized by “de-localization” and “re-contextualization,” which ultimately enhance its capacity for cross-contextual dissemination. (2) Critical discourse analysis (CDA) demonstrates strong methodological applicability in the examination of Zhuang medicine dissemination texts, as it enables the systematic exploration of the power structures and cultural construction mechanisms underlying the articulation of medical knowledge. Its strength in the fields of medical and health communication lies in its capacity to move beyond surface-level content analysis and to critically investigate how medical discourse shapes professional authority and audience cognition. Although Zhuang medical case texts ostensibly function as clinical records, their linguistic structures, narrative patterns, and standardized forms of expression also participate, at the level of dissemination, in the construction of the legitimacy of medical knowledge.

Nevertheless, this study is subject to certain limitations. Owing to constraints in data sources, the analysis focuses primarily on standardized diagnostic and therapeutic case texts and does not encompass a wider range of discursive forms, such as clinical oral

narratives or doctor–patient interactions. Future research incorporating larger-scale corpora and more diverse communicative contexts would contribute to a deeper understanding of the mechanisms underlying the dissemination of ethnic medical knowledge.

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