

Mitigation strategies to manage rapport in the interaction between Iraqi veterinary students and their clients

Wasan Khalid Ahmed^{1*}, Hussein Walid Alkhwaja², Vahid Nimehchisalem³, and Tamara Krishan⁴

¹*Alshariah Department, Faculty of Islamic Sciences, University of Fallujah, Iraq*

²*Department of English Language and Literature, Faculty of Arts, Zarqa University, Jordan*

³*Department of English, Faculty of Modern Languages and Communication, Universiti Putra Malaysia, Malaysia*

⁴*Department of English, Zarqa University College, Al-Balqa Applied University, Jordan*

ABSTRACT

Soliciting accurate information about animals' medical cases and maintaining harmonious relationships with clients require vets to use several mitigation strategies. This study analysed hedges, bushes, and shields proposed as mitigation strategies by Caffi (2007). In light of the Rapport Management Theory conceptualized by Spencer-Oatey (2008), the analysis was extended to include defining the roles of these strategies in expressing the relational work in terms of the interactional goals, sociality rights and obligations, and face sensitivities. For this purpose, the data were collected using a mixed-mode approach through audio-recordings and a client-satisfaction questionnaire, and then analysed using a discourse analysis (DA) following Dörnyei (2007). The findings showed that Iraqi veterinary students in this study employed bushes, hedges, and shields to mitigate their speech with bushes being the most frequently used. The use of these mitigators enabled the veterinary students to shield themselves against any future risks, solicit accurate information about the medical case of the animal, express politeness, maintain solidarity, and build good rapport with the clients. For clients, using these devices by the veterinary students enhanced clients' face sensitivities, equity rights and identity, so they felt appreciated and valued. The findings about clients' satisfaction revealed that Iraqi veterinary students need to increase their clients' satisfaction by sharing the medical decision with clients and engaging clients regarding their animals during the medical visit. The findings would inform better veterinary students' practices at the personal and interpersonal levels. The findings had also some pedagogical implications for veterinary stakeholders to improve veterinary students' knowledge of the mitigation strategies through giving training courses that aim at improving the delivery of the communication skills within veterinary practice.

Keywords: Client-satisfaction; mitigation; rapport management; speech acts; vet-client relationship

Received:

30 April 2024

Accepted:

6 September 2024

Revised:

16 August 2024

Published:

30 September 2024

How to cite (in APA style):

Ahmed, W. K., Alkhwaja, H. W., Nimehchisalem, V., & Krishan, T. (2024). Mitigation strategies to manage rapport in the interaction between Iraqi veterinary students and their clients. *Indonesian Journal of Applied Linguistics*, 14(2), 287-300.
<https://doi.org/10.17509/ijal.v14i2.74901>

INTRODUCTION

In a human medical discourse, physicians use several linguistic and nonlinguistic strategies to achieve their personal goals of providing accurate diagnosis and efficient treatment to their patients (Caffi, 2007; Roter & Hall, 2006). Other

interpersonal goals, such as providing supportive stance to maintain successful and appropriate relationships with the patients or caregivers are also to be achieved. Kurtz (2006) stressed that both types of strategies work together to eliminate conflict, reduce complaints, and avoid malpractice claims. In

*Corresponding author

Email: Wisan_nono@yahoo.com

the veterinary discourse, the content of talk is mainly about a sick animal (Shanan, 2011). This requires the vet to deal with two parties, the animal and the client (Shaw et al., 2004, 2008). Since the animal cannot speak about itself, both the vet and the client share the responsibility for taking the medical decisions regarding the sick animal (Tates & Meeuwesen, 2001). Besides, the purpose of the vet's talk is not only to take care of the animal, but also to maintain a good relationship with the client. To accomplish these purposes effectively, vets usually employ several communication strategies. Based on previous studies (e.g., Cornell & Kopcha, 2007; Gray & Moffett, 2013; Hackett & Mazzaferro, 2012; Shaw et al., 2004, 2008; Shaw et al., 2012; Shaw et al., 2006; Shaw et al., 2012), these strategies can include displaying empathy with the client's emotional state, keeping eye contact with the client, empowering clients in taking treatment decisions, and listening to client's remarks and suggestions.

These non-linguistic strategies can help obtain clients' satisfaction which is necessary for raising their adherence to the future follow-up treatment for the animal. However, other strategies that are based on the use of language, such as the use of mitigation, still need to be investigated in this discourse. Schiavo (2013) noted that the use of appropriate and effective language would establish effective relationships, successful health interventions and a total adherence to the medical recommendations. By mitigating their speech acts, for example, physicians can empower caregivers (Murray et al., 2006), manage patients effectively (Odebunmi, 2006), and express politeness (Caffi, 2007). Ha and Longnecker (2010) found that using these strategies can maintain good rapport with caregivers, empower them in the medical decision, show empathy towards their patients' medical cases, and achieve smooth transition of physicians' talk. For example, when physicians mitigate their speech by showing levels of (un)certainly towards their propositions, they, in fact, pave the way for their clients to become part of the decision making process regarding the diagnosis and treatment of their sick animals (Mao & Zhao, 2020).

Mitigating speech by using any of the mitigation devices can reinforce rapport management. Spencer-Oatey (2008) maintained that the use of the mitigation strategies can be a sign of respect that establishes rapport by creating a rapport-enhancing effect on the interactants' relationship. The possible outcome might not only strengthen vet-client relationship, but also it may increase the clients' loyalty and dedication towards their animals' treatment and recovery (Schiavo, 2013). Although mitigation strategies have been studied widely in the human medical context, little attention was paid to explore the use of these

strategies in the veterinary medicine, especially in the Iraqi students' veterinary setting. Although these students might feel competent in animals examination, infection diagnosis, or surgery performance, they still feel uncomfortable and incompetent in other communicative strategies with clients, such as delivering news, sharing treatment decisions, and maintaining rapport (Tinga et al., 2001). The significance of this study resides in understanding the current practices of these students in dealing with their clients in order to help propose better future communicative behaviors that not only help these students feel more competent and comfortable and avoid malpractice, but also help their clients feel more satisfied. Therefore, the aim of this study is to explore how the Iraqi veterinary students interact with their clients focusing on the types, frequencies, and pragmatic functions of mitigation strategies employed by these students and the role of these devices in maintaining rapport between the veterinary students and their clients. The following research questions are asked:

1. What are the types and frequencies of the mitigation strategies employed by the veterinary students?
2. What are the pragmatic functions of the mitigation strategies in the vet-client discourse?
3. From the clients' perspectives, what are the veterinary students' communicative behaviors that help manage the interpersonal relations between them and their clients and increase the client's satisfaction?

Literature Review

This study is based on the mitigation strategies as proposed by Caffi (2007) and Rapport Management Theory as proposed by Spencer-Oatey (2008) which provide the theoretical framework that explains the role of language in building and maintaining social and harmonious relationships between the veterinary students and their clients.

Rapport management theory

Brown and Levinson (1987) focused in their politeness theory on speaker's face without considering the linguistic and nonlinguistic behavior of the hearer (Izadi & Jalilifar, 2022). In their rapport management model, Spencer-Oatey (2008) emphasized that building social relationships goes beyond the self-concept of face to include a full account of relational face between self and others. Accordingly, Spencer-Oatey (2008) proposed three bases of rapport, namely the face sensitivities, sociality rights and obligations, and interactional goals (Figure 1). These bases are interrelated and can impact the view of rapport.

Figure 1
Rapport bases (Spencer-Oatey, 2008, p. 14)



In managing face sensitivities, Spencer-Oatey (2008) emphasized that the interactants' social sense of quality or identity are met. While the quality face is concerned with the sense of the self-esteem people preserve to themselves obtained through their personal traits and qualities, such as respect, honor, reputation and competence, the identity face is concerned with people's need in having their attributes and qualities, such as their personality traits, physical features, beliefs, or language affiliations are well acknowledged (Kershaw et al., 2021). In veterinary practice, vets' use of the mitigation strategies might enhance clients' equity rights and identity as clients might feel appreciated and valued, thus the base of face sensitivities is managed. In managing sociality rights and obligations, Spencer-Oatey (2008) stressed that interactants have a series of sociality rights and obligations to be treated fairly in terms of addressing their rights with consideration, being not controlled, imposed upon, or forced to act against their wishes, and having the chance to share their concerns, feelings, and interests (Sunday & Akinrinlola, 2021). Any violation of the expected rights and obligations would damage the rapport. When clients attend with their sick animals, they expect that their social rights in having appropriate social involvement and equity during the interaction and decision making regarding their sick animals are met by the vet. The third base of rapport is relevant to interactional goals (Spencer-Oatey, 2008). These goals can be relational or transactional (task-based). While the relational goal is concerned with building a relationship with others, the transactional goal is concerned with the task performed. Reaching these goals can help interactants maintain rapport while failing to accomplish these goals might lead to annoyance or frustration during the interactional event, thus damaging rapport.

Mitigation strategies

Spencer-Oatey (2008) emphasized that rapport management operates mainly around creating and maintaining harmonious relations among interlocutors at the illocutionary domain in which the performance of speech acts can be either rapport threatening or rapport enhancing. One way to reinforce rapport is through mitigating the illocutionary act in the speech acts. The analysis of mitigation would show how the use of these linguistic strategies affects the social relationship and rapport management between the veterinary students and clients. For example, mitigating the speech act of request by the prior supportive modal verb 'could' and the post supportive appeler 'please' in the request 'could you help me, please?' can reduce the harshness and negative impact of the speech act on the social relationship between the vet and his client.

Mitigation strategies according to Caffi (2007) can be three types: bushes, hedges, and shields. Bushes target the propositional content of the speech act by making it less precise or even vague, thus reducing the speaker's commitment towards his or her proposition. Mitigators like diminutives, downgraders, approximators, minimizers, or understatements are examples of bushes that might reduce the harshness of the imposition of medical instructions on the client or downgrade the burden for the client in complying with them. They also reinforce the "in-group membership", "familiarity, intimacy" and, at the same time "decrease the psychological distance" and build a "co-operative climate" (Caffi, 2007, p. 891). The scope of hedges is on the pragmatic force of the illocution element of the speech act. Hedges' main role is to attenuate the harshness of the pragmatic force by reducing the speaker's commitment. Examples of hedges can be the hedged performatives (I propose), conditional mood (if...), a routine formula (if you like), a supportive postponed move (to see if I can ...), among others. These hedges can mainly function as expressions of uncertainty, lack of commitment, and downgraders of the illocutionary force. In the context of veterinary students-client interaction, these hedges might be used as strategies to achieve several functions, such as assigning a minor value to the veterinary students' knowledge, downgrade veterinary students' power, and, meanwhile, upgrading clients' active role and increasing their involvement in taking decision and sharing responsibility (Caffi, 2007, p. 891).

"Shields" are mitigators used as a distancing technique strategy that helps ascribe the responsibility to someone else other than the speaker. This is achieved by weakening the speaker's personal commitment to the proposition (Caffi, 2007, p. 892). The use of shields can yield five types of mitigation strategies:

- (1) distancing (shifting from 'I' and 'you' to impersonal source / shifting from 'I' to 'we'),
- (2) displacement (objectivization 'there's', there're' / passive constructions),
- (3) normalization (impersonal third-person subject 'one'),
- (4) dislocation (pseudo-inclusive/solidarity 'we' / deontic modal 'must'), and
- (5) mitigating the speech act of supposition ('what's more' / conditional 'if' / uncertainty marker 'I don't know' / evaluative adverb 'paradoxically').

These strategies aim at shifting the responsibility from the speaker to other authoritative or unquestionable sources, avoid self-ascription, delete the expert's opinion, signal shared obligation, and maintain solidarity (Caffi, 2007).

Role of mitigation in veterinary student-client relationship

In the veterinary student-client interaction, mitigating speech through upgraders or downgraders to modify the illocutionary force of the speech acts can play a pivotal role in managing and creating a rapport-enhancing effect on the vet-client relationship (Allison & Hardin, 2020). These modifiers can reinforce the positive impact of the illocutionary act and, consequently, enhance the social relationships between the interactants. The use of the intensifiers, such as 'so much', 'really', or 'extremely' in thanking utterances, for instance, might create a positive atmosphere during the history taking stage in which the veterinary student can easily elicit more cooperation from the clients. The mitigation strategies can also be a sign of respect for the clients which establishes rapport with them with the possibility not only to strengthen vet-client relationship, but also to increase the clients' loyalty and dedication towards their animals' treatment and recovery (Mao & Zhao, 2019). Entitling clients to engage emotionally with the management of their animal medical case might emphasize their role as caregiver which leads them to feel valued during the interaction in the medical encounter. However, infringing these rights would result in the feeling of irritation and annoyance, thus damaging rapport. In the current study, the veterinary students' talk with their clients is analyzed in terms of the rapport threatening/enhancing implications focusing on the components of illocutionary acts, degree of directness-indirectness, and types and amount of mitigators used by the veterinary students to modify the pragmatic force of their speech acts (Blum-Kulka et al., 1989). Based on Spencer-Oatey (2008), considering these aspects would be helpful in the analysis of rapport management because the selection of the degree of directness affects the force

of speech act, and thus having a major impact on social relations and rapport management.

Review of past studies

Mitigation strategies have been investigated in several studies from different scopes and in various contexts. In veterinary context, Shaw et al. (2012) investigated the vet-client relationship and communication focusing on gender differences and other demographic factors. A random sample of 50 companion animal practitioners and a convenience sample of 300 clients were recruited in the study. The data were collected in the form of video recordings and analyzed using RIAS. The findings of the linear regression tests showed that there was an impact of gender on the vet-client relationship and communication. However, there was a similarity between the communicative style adopted by the vets and physicians as they use almost the same patterns of talk and rapport building statements.

Kanji et al. (2012) investigated the relationship between client's satisfaction and their self-reported adherence. This relationship was examined through analyzing 14 video tapes obtained through telephone interviews in addition to patient's medical records. The researchers used RIAS to code and analyze the self-reporting of adherence. The findings showed that there was a close relationship between the clients' adherence and cooperation and vets' satisfaction. Establishing and emphasizing a collaborative relationship between vets and their clients in which the client is the center of this relationship with the clients was reflected on the clients' compliance with the vets' recommendations.

Possessing effective communication skills is an essential component that each veterinary student has to possess. The perceptions of these students regarding six communicative skills in comparison to the perceptions of professional veterinarians were elicited by Haldane et al. (2017). The data were collected through surveys administered to the students who were asked to rate the importance of these skills to their veterinary practice. The skills were relevant to practical medical, technical, and surgical knowledge and skills in addition to other verbal, interpersonal and critical thinking and problem-solving skills. The findings showed that the students ranked verbal and interpersonal skills as the most important skills for them, which were lacking in the part of these students from the qualified veterinarians' point of view. Although the study highlighted the role of these skills in the life journey of veterinary students, the language skill was totally ignored.

Veterinary discourse was also investigated from the vet's satisfaction perspective. In this regard, Kipperman et al. (2017) attempted to determine the roles of vets' opinions about the costs of care and the economic limitations on patient care

and vets' outcome. The data were collected in the form of online survey and then analyzed for frequencies and percentages. The findings revealed that client economic limitations impacted their capability to provide the desired care for their patients. The researchers recommended increasing client's awareness of the care cost through receiving proper training.

In terms of client's satisfaction, Janke et al. (2021) attempted to determine the clients' expectations and barriers regarding the vets' methods of information exchange and decision-making during vet-client-patient visits. The data were collected in the form of semi-structured interviews obtained from 27 clients and 24 vets. The collected data were then analyzed using thematic analysis approach. The findings showed that clients' expectations can include support provided by the vets in order for them to make informed decisions. Understanding client's knowledge, fitting information to suit the clients, and informing clients about the available options can increase the clients' satisfaction and increase their cooperation.

In spite of the importance of the previously reviewed studies, the use of the language in general and the use of mitigation to build rapport were not given enough attention, a gap that was filled in the present paper. Filling this gap in the body knowledge of veterinary medicine would have important implications for veterinary stakeholders in terms of improving the students' needs in order to improve the delivery of communication skills courses within veterinary practice.

METHOD

Research design

This study adopts a discourse analysis (DA) approach (Creswell, 2012; Dörnyei, 2007) to investigate the interaction between a group of Iraqi veterinary students and their clients. Based on this approach, the data were collected in a mixed-mode design (qualitative and quantitative). The qualitative data were obtained in the form of audio-recordings of the naturally occurring interaction between the veterinary students and their clients while the quantitative data were collected through a client-satisfaction questionnaire. The qualitative data were analyzed qualitatively based on Spencer-Oatey's (2008) model of rapport management and Caffi's (2007) mitigation strategies. The responses in the questionnaire were analyzed quantitatively using descriptive statistics in SPSS to determine the clients' satisfaction level.

Participants and sampling method

The participants in this study were two groups. The first group consisted of a purposive sample of nine (n=9) Iraqi veterinary students. They were selected purposively to have a homogeneous sample with shared qualities. At the time of data collection, all of

them were practicing in a clinic belong to the Faculty of Veterinary Medicine in Iraq. They were also in the last semester of the fifth year of their undergraduate studies during the academic year 2023-2024. The students speak Arabic as their first language and their ages ranged from 22-24 years old. During their practice period, they received several medical cases of sick small animals, such as dogs and cats, and they were responsible for giving proper treatment to these animals under the supervision of their professors. The second group of participants consisted of a random sample of fifteen (n=15) pet caregivers who were attending the veterinary clinic for their clinical appointments. The caretakers speak Arabic as the first language. After obtaining proper verbal consent from the management, students, and caregivers, each appointment was audio recorded. Upon completion of each appointment, the 15 clients were asked to respond to a questionnaire.

Instruments and procedures for data collection

The data were collected in a mixed-mode approach using qualitative and quantitative methods. The qualitative data came from audio-recording of 15 veterinary appointments. After obtaining the consent from all the parties, an audio recorder application on a smartphone was used to record the talk between the vets and their clients. The role of the researchers was limited to collecting demographic information about the veterinary students and their clients. They also collected information about the animals, such as their types, gender, and type of sickness. Each audio-recording lasted for 10-15 minutes. These data were transcribed verbatim later to prepare for the analysis. Since the talk between the veterinary students and their clients was in the non-standard Arabic language with an Iraqi accent, two accredited translators were asked to translate the talk into English. To ensure higher levels of accuracy, their translation was then verified by a university professor who specializes in translation.

The quantitative data, on the other hand, came from a client-satisfaction questionnaire. The questionnaire was adapted from Hall (2012) to suit the purpose of the present study. The purpose of this questionnaire was to (1) identify the common communication behaviors in which the veterinary students engage during medical interviews, and (2) determine the relationship factors that are most predictive of client's satisfaction. The questionnaire consisted of two parts. The first part consisted of 7 items that elicited the clients' agreement on the aspects of interpersonal relations during the medical interview. The second part consisted of 7 items that determined the client's satisfaction with the veterinary students' communicative behaviors during the medical interview. The questionnaire items were written on a five-point Likert-scale that ranged from strongly agree to strongly disagree. To

determine the clients' agreement scale, a criteria proposed by Hanson et al. (2005) was adopted. Based on these criteria, clients' agreement was classified on a scale ranging from low to high.

Data analysis procedures

The audio-recorded scripts were coded based on the main themes in the present study (Saldana, 2015). To achieve this, priori coding based on Caffi's (2007) mitigation strategies and Spencer-Oatey's (2008) model of rapport management was made. To ensure the reliability of the coding and the analysis, inter-rater agreement was calculated (Campbell et al., 2013). For this purpose, a transcript of a vet-client medical session was selected randomly and analyzed by the present researchers. The next step was to ask two experts, who are specialized in discourse studies and have published papers in similar discourse studies, to provide their level of agreement upon the principal analysis. Based on a formula proposed by Miles and Huberman (1984), the percentage of inter-rater agreement about the identification of the three mitigation strategies and their related rapport management manifestation indicated an acceptable to exceptional agreement

level that ranges from 85% to 100% with an average overall agreement of 91%. This estimated agreement indicated with confidence that if the coding and analysis used in another research, they would yield the same results (Fahy, 2001). After ensuring the reliability of the coding, the 15 transcripts were analyzed manually for the occurrences and pragmatic functions of mitigation strategies and then interpreted based on the rapport management model.

Prior to the analysis of the questionnaire, the questionnaire items were piloted for items validity and reliability. To ensure items validity, two professors who are expert in discourse studies were invited to read through the items, check the validity of the statements in terms of the constructs, sequence of items, wording, and typing mistakes. For reliability, the 14 items were piloted on a sample of 5 clients who did not participate in the study. The clients' responses in the questionnaire were uploaded to SPSS V. 22 to calculate Cronbach's alpha for each questionnaire item. As it is shown in table 1, the questionnaire items were reliable as $p = .809$ which is bigger than alpha (.05), indicating that the items are reliable and can yield consistent results.

Table 1
Reliability of Clients' Questionnaire

Cronbach's Alpha	N of Items
.809	14

After ensuring the reliability of the questionnaire, the clients' responses in the main study were uploaded to SPSS (V.29). In SPSS, a descriptive test was run to determine the means and frequencies of the clients' perceptions and level of satisfaction.

order to avoid imposing their opinion on the positive face of their clients. Such behavior by the veterinary students gives support to Spencer-Oatey (2008) who emphasized that mitigating speech is one way that can enhance addresses' equity rights and identity and might let clients feel appreciated and valued.

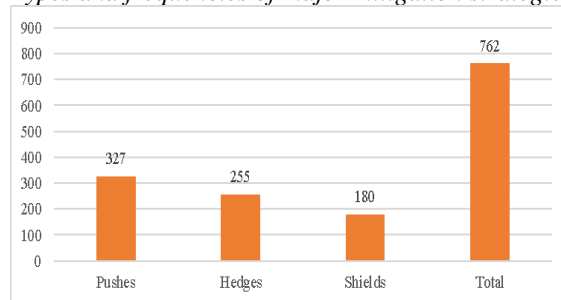
FINDINGS AND DISSCUSION

In this section, the findings about the types and frequencies of the mitigation strategies used by the veterinary students during their interaction with their clients and sick animals are reported quantitatively and supported and discussed qualitatively through examples taken from the actual talk of the clients.

Types and frequencies of the mitigation strategies

The analysis of the types and frequencies of the mitigation strategies (Figure 2) showed that the Iraqi veterinary students employed a total of 762 mitigation devices under three major types: bushes, hedges, and shields. Out of this total, bushes were the most frequently used devices (327) followed by the hedges (255) and the shields (180). Using bushes more frequently than other categories of mitigation reflected the Iraqi veterinary students' preference to mitigate their assertive and verdictive speech acts in

Figure 2
Types and frequencies of major mitigation strategies



Types and frequencies of the bushes

Based on Caffi's (2007) mitigation framework, the extended analysis (Table 2) showed that 19 types of bushes were employed by the Iraqi veterinary students. Requesting agreement using the consultative devices 'ok?' and 'right?' was the most frequently used bush (55). Signaling hesitation using the mitigation devices 'well', 'yeah', 'now', 'so', 'okay', and 'actually' and showing uncertainty using

the parenthetical devices ‘I think/believe’ in turn-initial position were in the second and third places

of frequency at 46 and 42 respectively.

Table 2
Bushes as Mitigation Strategies

#	Bushes	Mitigation means	Example	f
1	requesting agreement	consultative device	ok? right?	55
2	signaling hesitation	hesitation markers	well/yeah/now/so/okay/actually/alright	46
3	showing uncertainty	parenthetical verb	I think/believe (turn-initial position)	42
4	creating presupposition	consultative device	you know	39
5	subjectivizing opinion	Subjectivizers	in my opinion	32
7	impersonalizing opinion	impersonal construction	It looks like	19
8	weakening negative assessment	quantifier	a little bit + adj	16
9	indicating possibility	uncertainty marker	maybe	12
10	reinforcing mitigation	parenthetical verb	I think/believe (turn-final position)	12
11	normalizing information	approximator	usually	11
12	expressing doubt	content disjunct	probably / most probably	8
13	pre-noticing of violation	pre-moves cautionary	I'm sorry but	8
14	limiting frequency	Adverb of time	sometimes	7
15	creating semantic fuzziness	approximator	, something like that	6
16	showing less commitment	conditional form	should	6
17	showing understanding	understanding marker	I see	5
19	suggesting shared responsibility	approximator	let's say	3
Total				327

In Example 1, the veterinary student discussed the possible reason for a dog having been infected by bacteria. The veterinary student attempted to propose that the main possible cause of the infection

was dust mites. To mitigate this proposition, the veterinary student used two bushes to avoid imposing his opinion on the client’s positive face (Spencer-Oatey, 2008).

Example 1

- 1 V: **I think** the solution will filter all the dust mites. Because dust mites are the most common mite that cause allergy in your cotton bed sheets. It will keep scratching, non-stop, **right?**
أعتقد أن المحلول رح يقوم بتصفية جميع عث الغبار لأن عث الغبار هو العث الأكثر شيوعاً والتي يسبب الحساسية في غطيان السرير القطنية. ورح يستمر في الخدش، بدون توقف، مو هيجي؟
- 2 C: Yes. You’re right.
أى كلامك سليم.

The first bush used by the veterinary student to mitigate his opinion by means of showing lack of certainty towards the effectiveness of the solution in filtering the dust mites was the parenthetical verb ‘I think’ (Alkhwaja et al., 2023). The second bush used by the veterinary student to elicit agreement upon his opinion was the consultative ‘right?’. Displaying epistemic modality and seeking agreement from the client helped the veterinary student maintain rapport though displaying a sense of sharing and solidarity (Spencer-Oatey, 2008). This pragmatic behavior was received positively by the client in the next turn who accepted the vet’s opinion.

This example demonstrated that the Iraqi veterinary student used bushes to show uncertainty towards what they said not only to reduce imposition of their opinions or judgments on the positive face of the clients, but also to make their clients believe in their diagnosis and treatment and, consequently, to comply with it (Spencer-Oatey, 2008). In fact, the use of the bushes was a method by the veterinary students to influence the clients’ decisions of cooperation and compliance which is the main concern in veterinary medicine (Kanji et

al., 2012). Mitigating the assertive speech act using bushes helped the veterinary students downgrade the burden for the client to comply with medical decisions (Marco & Arguedas, 2021). At the interpersonal level, the use of the bushes was to maintain rapport by reinforcing solidarity and intimacy between the two parties and to decrease the “psychological distance” and create cooperative and shared environment (Caffi, 2007, p. 891). In spite of the importance of bushes in building rapport with clients in veterinary practice, the findings showed that the Iraqi veterinary students in this study used a number of bushes, such as the approximators, the content disjuncts, the pre-moves cautionary devices, the adverbs of time, the conditionals, and the understanding markers at lower frequencies. This has a pedagogical implication for these students to attend training courses on the use of these devices in order to promote better communication in veterinary practice.

Types and frequencies of the hedges

Further analysis of hedges (Table 3) showed that the Iraqi veterinary students used a total of 255 hedges. These hedges were under 12 strategies with the

strategy of questioning the ‘clients’ will’ using the conditional form (if-clause) was the most frequent (75). This was followed by the use of the modal

verb *should* (38) to reduce imposition and using *as* or *because* as grounders (36).

Table 3
Hedges as Mitigation Strategies

#	Hedges	Mitigation means	Example	f
1	Questioning the addressee's will	conditional 'if'	If you get ready...	75
2	reducing imposition	modal verb 'should'	You should (advice)	38
3	grounding with justification	grounder 'reason'	As/Because...	36
4	displaying uncertainty	uncertainty marker	Maybe	32
5	minimizing imposition	minimizer	a bit/ a little	18
6	reducing the intensity of request	dubitative particles	I would suggest	12
7	questioning the readiness of addressee	grounder 'if'	If you wouldn't mind, ...	11
8	introducing the possibility of alternative hypothetical negative consequences	elliptical clause	(because) otherwise	9
9	questioning addressee's preparatory condition	interrogative device + appealer	can/could/would you (please)?	9
10	weakening the obligation on the addressee	minimizer	the only thing I'd like you to do	8
11	prefacing with caution or hesitation	Cautionary marker	I don't know if	7
12	giving vague alternative	approximator	something like that	7
Total				255

In example 2, the veterinary student prescribed a medication based on the diagnosis of the animal problem. In fact, the ultimate purpose of the veterinary student was not only to mitigate his

assertive or verdictive speech acts, but also to justify performing several late directives to be performed by the client.

Example 2

- 1 V: تمام، اذن مع الدوا المفروض إنك تلاحظ تحسن خلال ثلاثة أيام بالنسبة للمضادات الحيوية وتستمر في العمل خلال أسبوع. مش لازم تكون منتفخة لهالحد، تمام؟ لازم العين شوي شوي تقدر تفتح بحرية، تمام؟ وبعدين، مش لازم تكون هواي حمرا. إذا ما صار تحسن خلال هذا الأسبوع، اعطيها دوا، وإذا ساء الوضع ممكن ترجعلي. الحالة مو قوية بس تحتاج تعليمات ثانية، تمام؟ إذا ممكن، حاول فصل القطط، اعزلهم عن بعض
- Alright, with the medication, you are supposed to notice improvement within three days as for the antibiotics, and they continue to work within a week. It shouldn't be that swollen, the eye should be able to open freely, okay? Then, it shouldn't be that red. If there is no improvement during this week, give her medicine, and if the situation worsens, you can come back to me. The condition is not that serious, but it requires further instructions, **okay? If possible**, try to separate the cats, isolate them from each other
- 2 C: تمام رح أحاول لا تقلق
Ok, I will. Don't worry

To communicate the requestive head acts *giving medication* and *coming back for a second visit*, the veterinary student used the conditional form (if-structure) as a hedge. The requestive head act *separating cats* was mitigated using the *zero-type of the conditional structure (if-clause)* combined with the adverb *possible* to mitigate the pragmatic force of this request. The use of these two hedges was received positively by the client who displayed his readiness to comply with the vet's instructions. According to Spencer-Oatey (2008), the use of hedges not only mitigated the pragmatic force of the directives, but also maintained rapport and solidarity among the two interactants. Communicating directives in such a mitigated manner helped these veterinary students avoid placing much imposition on their clients, so that their clients feel part of the treatment decision provided to their pets (Thaler, 2012). This might have its consequences on these clients' future

compliance to follow up with their sick animals (Mao & Zhao, 2019).

Types and frequencies of the shields

The analysis of the shields (Table 4) showed that the Iraqi veterinary students used a total of 180 shields. These shields came under 7 types with the strategy of substituting 'I' with 'we' or 'us' with the utterance feature of 'non-I' and 'not-you' but first-person plural 'we' or 'us' was the most frequently type of shielding strategy (65).

In example 3, the Iraqi vet discussed with his client an eye problem of a kitten. Based on the medical inspection made by the vet, he arrived at the conclusion that an e-collar is a solution to prevent the cat from reaching and itching its eye. However, the e-collar available in the market is either commercial or does not fit the cat's size. A hard decision needed to be taken regarding cutting the current e-collar and doing ex-ray. To protect himself against any undesired consequences of this decision, the

veterinary student used several shielding strategies. In the first turn, the veterinary student used the suggestive formula 'let's' instead of using the personal suggestion 'I will double check'. The

veterinary student meant to say that it was non-I' and 'not-you but 'us' who can arrive at the right decision regarding the animal patient.

Table 4
Shields as Mitigation Strategies

#	Type of shielding strategy	Utterance feature	Devices/Structures	f
1	Substituting I with 'we', 'us'	non-I' and 'not-you but first-person plural 'we' or 'us'	we'll have to do ... / let's have	65
2	Replacing 'you' with impersonal third person subject	not-you' but a generic impersonal third person (objectivization)	when one gets nervous one acts that way / this happens occasionally / it happens often	38
3	Deleting 'I' and ascribing action to (1) impersonal source or (2) agentless passive	not-I' but the unknown source	it has been said... / someone says/said..	29
4	Deleting I and ascribing action to another impersonal source 'there's'	non-I' (non-ego) and 'not-you' but impersonal source '	- there's an estrogenic hyperplasia - it is written here	19
5	shifting from reality to hypothesis as a distancing technique of mitigation	shifting from what 'I-now' actually believe/want to what the situation is supposed to be	if it is necessary / I don't know if / one never knows	19
6	Deleting I and using impersonal source 'there're	'non-I'(non-ego) but impersonal source	- 'there're no thoughts	7
7	Shifting from present state to past state	shifting from 'I-'here-now' to 'I-not here-not now'	- let's say I felt bad but not so bad as I feel now	3
Total				180

Example 3

- 1 V: بالنسبة لهاي القطه الصغيرة، العين اليمنى، خلينا نشيك مرة ثانية، العين اليسرى زين، بإمكانها تباع زين، سطح القرنية نظيف، ماكو تغيير، العين اليمنى
For this little kitten the right eye, let's double check, the left eye is ok, she can see clearly, the cornea surface is clear, no alteration, right eye
- 2 C: هو دائما يخرمش عينه اليمنى
He is always scratching on the right eye
- 3 V: والعين اليمنى كلش متأدية. طيب إذا باوعنا على الجفن العلوي وحتى الجفن السفلي كلهم وضعهم سيء للغاية. سيحتاج هذا أيضاً إلى طوق إلكتروني
And the right eye is very bad ok if we look at the upper eye lid and even the low eye lid, it is so bad. This one will also need e-collar
- 4 C: هذا دائما يخرمش
It keeps on scratching.
- 5 V: رح يأذي عينه، لكن ماكو عدنا طوق إلكتروني تجاري، ماكو عدنا حجم مناسب لهاي القطه، علمود هيح شو نسوي نأخذ لها فيلم أشعة سينية ونقصه لها
It is going to damage the eye, but we do not have a commercial e-collar, we do not have a suitable size for this kitten, so what we do is to get the x-ray films and then cut it for him
- 6 C: تمام
ok

In the third turn, the vet again used the collective first-person pronoun 'we'. Again, the use of this solidarity marker was a method by the veterinary student to take a shared decision with the client regarding the case of the animal's health condition as if he wanted to say 'it is not me neither you, but we are responsible for the decision'. Similarly, in the fifth turn, the veterinary student used the collective first-person plural pronoun 'we' three times. The use of these pronouns by the veterinary student was to avoid carrying full responsibility about the final decision of cutting the current e-collar (Flores-Ferrán, 2010). The use of this shielding strategy was successful, as it obtained unnegotiable agreement by the client in the final turn.

Using these shields as mitigation strategies not only maintained rapport and solidarity among the two interactants, but also helped the veterinary student obtain full compliance from the client (Flores-Ferrán, 2010). Spencer-Oatey (2008) emphasized that the ultimate purpose of people in communication is to have an appropriate amount of social involvement with others. In this example, the client attended with the expectation that his social rights of equity and association are enhanced by the veterinary student through providing appropriate social involvement in the decision making regarding his animal patient. This is in agreement with Ha and Longnecker (2010) who found the use of the mitigation strategies can maintain good rapport with caregivers, empower them in the medical decision,

show empathy towards their patients' medical cases, and achieve a smooth transition of physicians' talk. The use of these hedges was found in this study necessary to communicate directives in a mitigated manner, so less imposition is placed on clients, and clients feel part of the treatment decision provided to their pets (Czerwionka, 2012). This might have its consequences on these clients' future compliance to follow up with their sick animals.

Bushes, hedges, and shields identified as mitigation strategies in the present study contributed highly to the success of rapport management. They helped the veterinary students to provide the medical service to the clients and their animal-patients more explicitly and effectively. They also helped the clients to adhere willingly to follow-up the treatment for their sick animal. This implies giving these language elements a priority when training veterinary students on the use of communication techniques. This is in agreement with previous studies that emphasized the importance of building rapport during medical encounters. For example, Tian et al. (2023) emphasized building trust and cooperation to achieve a high therapeutic effect in the physician's treatment. Allison and Hardin (2020) also reached to the conclusion that managing rapport through the use of linguistic devices is possibly more important than providing health-related information to patients in order to adhere to medical treatment. Pun et al. (2019) found that the use of certain linguistic resources, such as the sentence-final particles, discourse markers, and interrogatives by physicians can help patients to better understand their illnesses and have good compliance with the suggested treatment.

Clients' perceptions and level of satisfaction

The purpose of the questionnaire was to elicit the clients' perceptions towards the interpersonal relations managed by the veterinary students as well as their satisfaction level towards the

communicative behaviors the veterinary student adopted during the medical interview. In response to the first part of the questionnaire, the findings (Table 5) showed that the clients, overall, perceived the interpersonal relations managed by the veterinary students moderately (M= 3.36). More specifically, the clients perceived highly the veterinary students' attempt to share the medical decision with them regarding their animal-patient (M= 4.27) and building rapport through working together to manage the animal-patient's health (M=4.16). At a moderate level, the clients expressed their agreement on their clients paying them full attention (M=3.36), encouraging them to ask questions (M= 3.34), being able to ask specific questions (M= 3.33), and providing them with full explanation once needed regarding the procedures or examination process (M=2.71). At a low level, the clients perceived using medical jargon by the veterinary students during the animal-patient examination the least desire behavior.

These findings indicate that sharing decisions and building rapport are the main concerns of the clients. The clients, in fact, prefer the veterinary students to involve them more in the decision making and the treatment processes because the sick animal will be their responsibility in the future. These findings are in agreement with Ha and Longnecker (2010) who maintained that maintaining good rapport with the clients as well as empowering them through sharing the medical decisions with them can help reinforce the clients' role as caregivers and increase their satisfaction level of the medical treatment. Since the participants are veterinary students, the findings imply that these students still need to receive specialized courses on how to improve their interpersonal communication focusing on how to share the medical decision with clients, build rapport through working with clients, pay attention to clients' concerns, encourage clients to ask questions, provide clients with full explanation, and avoid using a lot of medical jargon.

Table 5
Clients' Perceptions of the Interpersonal Relations Managed by the Veterinary students

#	Questionnaire Items	Mean Score	Rate
5	I discuss all possible treatment options for my pet with my vet before deciding which treatment to choose	4.27	High
4	My vet and I worked together to manage my pet's health.	4.16	High
1	During the visit, I felt I had my vet's full attention	3.36	Moderate
2	I was encouraged to ask my vet questions about my pet's health	3.34	Moderate
3	I frequently ask my vet specific questions about my pet's health	3.33	Moderate
6	My vet explained the procedures/ examination so that I fully understood	2.71	Moderate
7	My vet used medical jargon during my pet's examination.	2.36	Low
Grand Mean Score		3.36	Moderate

The clients' satisfaction level towards the communicative behaviors adopted by the veterinary students ranged from high to moderate with an overall moderate satisfaction level (M = 3.48). As shown in Table 5, spending the satisfactory amount

of time in examining the clients' animal-patient was the highest satisfaction area reported by the clients (M=4.27). The vet's engagement in communication with the clients during the medical visit was the second highest satisfaction area (M = 4.16). This

was followed by an overall moderate satisfaction with their experiences during the visit (M=3.36), thinking that the veterinary students were moderately knowledgeable in veterinary medicine (M=3.34), providing the clients with moderate

practical information about their sick animal's health (M=3.33), finding the office-staff helpful (M=3.23), and moderately recommending the veterinary students to other clients (M=2.71).

Table 6
Clients' Satisfaction Level of the Communicative Behaviors Adopted by the Veterinary students

#	Questionnaire Items	Mean Score	Rate
1	I feel that my vet spent an adequate amount of time examining my pet.	4.27	High
5	My vet engaged in good communication with me during our visit.	4.16	High
7	Overall, I am satisfied with my experience during this visit.	3.36	Moderate
2	My vet is knowledgeable in veterinary medicine.	3.34	Moderate
3	My vet provides me with practical information about my pet's health	3.33	Moderate
4	I found the office staff to be helpful.	3.23	Moderate
6	I would recommend my vet to someone else.	2.71	Moderate
Grand Mean Score		3.48	Moderate

The findings in this section give support to Schiavo (2013) who stressed that these communicative behaviors can reduce conflict, complaints and malpractice claims. Paying more consideration to the role of clients in the treatment of the animal through allowing more space for these clients to engage in the treatment, share some of the medical decisions, and ask questions would raise their confidence and satisfaction rates towards the treatment of their animals. Gray and Moffett (2013) noted that the employment of the communicative behaviors through maintaining good relationships with the caretakers would help successfully achieve the medical goals which are reflected on the animal recovery and the satisfaction of the clients. The success of achieving medical goals and client satisfaction in veterinary practice, especially for veterinary students can be achieved through giving these students some professional training on how to improve their communicative behaviors. This implies that these veterinary students are in urgent need for training courses that can help them elevate their communicative behaviors to obtain more clients' satisfaction which can be reflected on their clients' future compliance to follow up with their sick animals (Mao & Zhao, 2019).

CONCLUSION

This study attempted to explore the utilization of the mitigation strategies by a group of Iraqi veterinary students. The focus of the study was on identifying the mitigation strategies in terms of their types, frequencies and pragmatic functions as well as eliciting the clients' perceptions towards the interpersonal relations managed by the veterinary students as well as their satisfaction level towards the communicative behaviors the veterinary students adopted during the medical interview. The findings showed that the Iraqi veterinary students used an adequate number of the mitigation strategies under three major types, namely bushes, hedges, and shields. The findings also revealed that these

mitigators have achieved several pragmatic functions in medical encounters. At the interpersonal level, the veterinary students avoided placing imposition on the clients' positive and negative face, which in return, expressed politeness, maintained solidarity, and built good rapport with the clients (Spencer-Oatey, 2008). By managing clients' face sensitivities, enhancing their equity rights and identity, clients felt appreciated and valued. This would be reflected on increasing their compliance and encourage them to provide better follow up care for the animals (Spencer-Oatey, 2008). At the personal level, the use of these strategies helped the veterinary students shield themselves against any future risks, solicit accurate information about the medical case of the animal, and maintain maintaining rapport, solidarity, and harmony with the clients (Spencer-Oatey, 2008). The findings about the clients' satisfaction revealed that there were several procedures that can be adopted by the veterinary students to increase the clients' satisfaction. To name but a few, sharing the medical decision, building rapport, and engaging clients in the communication regarding the animal-patient's during the medical visit. Although this study focused the investigation on the Iraqi veterinary students' talk with their clients which was carried out using the Arabic language, the identified mitigation strategies and their effectiveness in building rapport and enhancing client satisfaction by these students are similar to those identified in other cultural and professional contexts regardless of the language used in the communication. This finding implies that these communication behaviors are universal as they form the essence of any proper communication whether be in Iraq or anywhere else. The findings also had some pedagogical implications for veterinary stakeholders to improve veterinary students' knowledge of the mitigation strategies through giving training courses that aims at improving the delivery of the communication skills within veterinary practice.

The findings in this study provided guidance and recommendations to the best language and communication strategies to improve the veterinary students' practices in the veterinary-client discourse, thus adds to the body knowledge of pragmatic research in medical encounter. Incorporation of subjects' voices into the analysis of the data is necessary to obtain more accurate interpretation of talk (Haugh & Bargiela-Chiappini, 2010; Hosseini, 2022; Izadi & Jalilifar, 2022). Although the study obtained the clients' feedback and level of satisfaction regarding the veterinary students' communicative behaviors, it is recommended that future research consider veterinary students' feedback about their needs or the barriers that might hinder their practice or the relationship with the clients in order to obtain more representative findings. Other factors, such as veterinary students' gender and age that might affect the production of the mitigation strategies can be also investigated. This is hoped to establish a base for future research that is interested in exploring the relationship between the veterinaries and their client realized by using the language, thus contributing more to the discourse analysis studies.

REFERENCES

- Alkhawaja, H., Paramasivam, S., Nimehchisalem, V., & Kasim, Z. M. (2023). Pragmatic markers used by Arab postgraduate students in classroom oral presentations. *Journal of Research in Applied Linguistics, 14*(1), 144-155. <https://doi.org/10.22055/rals.2023.18073>
- Allison, A., & Hardin, K. (2020). Missed opportunities to build rapport: A pragmalinguistic analysis of interpreted medical conversations with Spanish-speaking patients. *Health Communication, 35*(4), 494-501. <https://doi.org/10.1080/10410236.2019.1567446>
- Blum-Kulka, S., House, J., & Kasper, G. (Eds.) (1989). *Cross-cultural pragmatics: Requests and apologies*. Ablex Publishing Corporation.
- Brown, P., & Levinson, S. (1987). *Politeness: Some universals in language usage*. Cambridge University Press.
- Caffi, C. (2007). *Mitigation* (1st ed.). Elsevier.
- Campbell, J. L., Quincy, C., Osserman, J., & Pedersen, O. K. (2013). Coding in-depth semistructured interviews: Problems of unitization and intercoder reliability and agreement. *Sociological Methods & Research, 42*(3), 294-320. <https://doi.org/10.1177/0049124113500475>
- Cornell, K. K., & Kopcha, M. (2007). Client-veterinarian communication: Skills for client centered dialogue and shared decision making. *Veterinary Clinics of North America: Small Animal Practice, 37*(1), 37-47. [https://www.vetsmall.theclinics.com/article/S0195-5616\(06\)00135-5/abstract](https://www.vetsmall.theclinics.com/article/S0195-5616(06)00135-5/abstract)
- Creswell, J. (2012). *Educational research: Planning, conducting, and evaluating quantitative and qualitative research* (4th ed.). Pearson Education.
- Czerwionka, L. (2012). Mitigation: The combined effects of imposition and certitude. *Journal of Pragmatics, 44*(10), 1163-1182. <https://doi.org/10.1016/j.pragma.2012.05.002>
- Dörnyei, Z. (2007). *Research methods in applied linguistics: Quantitative, qualitative, and mixed methodologies*. Oxford University Press.
- Fahy, P. J. (2001). Addressing some common problems in transcript analysis. *The International Review of Research in Open and Distributed Learning, 1*(2), 1-6. <https://doi.org/10.19173/irrodl.v1i2.321>
- Flores-Ferrán, N. (2010). An examination of mitigation strategies used in Spanish psychotherapeutic discourse. *Journal of Pragmatics, 42*(7), 1964-1981. <https://doi.org/10.1016/j.pragma.2009.12.005>
- Gray, C., & Moffett, J. (Eds.). (2013). *Handbook of veterinary communication skills*. Wiley-Blackwell.
- Ha, J. F., & Longnecker, N. (2010). Doctor-Patient communication: A review. *The Ochsner Journal, 10*(1), 38-43. <https://pubmed.ncbi.nlm.nih.gov/21603354/>
- Hackett, T. B., & Mazzaferro, E. M. (2012). *Veterinary emergency and critical care procedures* (2nd ed.). Wiley-Blackwell.
- Haldane, S., Hinchcliff, K., Mansell, P., & Baik, C. (2017). Expectations of graduate communication skills in professional veterinary practice. *Journal of veterinary medical education, 44*(2), 268-279. <https://doi.org/10.3138/jvme.1215-193R>
- Hall, K. A. (2012). *Communication in veterinary medicine: An examination of the veterinary medical encounter* [Unpublished master's thesis]. Auburn University.
- Hanson, W. E., Creswell, J. W., Clark, V. L. P., Petska, K. S., & Creswell, J. D. (2005). Mixed methods research designs in counseling psychology. *Journal of Counseling Psychology, 52*(2), 224-235. <https://doi.org/10.1037/0022-0167.52.2.224>
- Haugh, M., & Bargiela-Chiappini, F. (2010). Face in interaction. *Journal of Pragmatics, 42*(8), 2073-2077. <https://doi.org/10.1016/j.pragma.2009.12.013>
- Hosseini, S. M. (2022). Self, face, and identity in the Iranian culture: A study on three lexemes. *Journal of Research in Applied Linguistics, 13*(2), 53-68. <https://doi.org/10.22055/rals.2022.17803>

- Izadi, A., & Jalilifar, A. (2022). Introduction: Politeness and impoliteness research. *Journal of Research in Applied Linguistics, 13*(2), 3-5. <https://doi.org/10.22055/ral.2022.17798>
- Janke, N., Coe, J. B., Bernardo, T. M., Dewey, C. E., & Stone, E. A. (2021). Pet owners' and veterinarians' perceptions of information exchange and clinical decision-making in companion animal practice. *PLoS ONE, 16*(2), 245-632. <https://doi.org/10.1371/journal.pone.0245632>
- Kanji, N., Coe, J. B., Adams, C. L., & Shaw, J. R. (2012). Effect of veterinarian-client-patient interactions on client adherence to dentistry and surgery recommendations in companion-animal practice. *Journal of the American Veterinary Medical Association, 240*(4), 427-436. <https://doi.org/10.2460/javma.240.4.427>
- Kershaw, C., Rast III, D. E., Hogg, M. A., & van Knippenberg, D. (2021). Divided groups need leadership: A study of the effectiveness of collective identity, dual identity, and intergroup relational identity rhetoric. *Journal of Applied Social Psychology, 51*(1), 53-62. <https://doi.org/10.1111/jasp.12715>
- Kipperman, B. S., Kass, P. H., & Rishniw, M. (2017). Factors that influence small animal veterinarians' opinions and actions regarding cost of care and effects of economic limitations on patient care and outcome and professional career satisfaction and burnout. *Journal of the American Veterinary Medical Association, 250*(7), 785-794. <https://doi.org/10.2460/javma.250.7.785>
- Kurtz, S. (2006). Teaching and learning communication in veterinary medicine. *Journal of Veterinary Medical Education, 33*(1), 11-19. <https://doi.org/10.3138/jvme.33.1.11>
- Mao, Y., & Zhao, X. (2019). By the mitigation one knows the doctor: Mitigation strategies by Chinese doctors in online medical consultation. *Health communication, 35*(6), 667-674. <https://doi.org/10.1080/10410236.2019.1582312>
- Marco, M. A., & Arguedas, M. E. (2021). Mitigation revisited. An operative and integrated definition of the pragmatic concept, its strategic values, and its linguistic expression. *Journal of pragmatics, 183*, 71-86. <https://doi.org/10.1016/j.pragma.2021.07.002>
- Miles, M. B., & Huberman, A. M. (1984). *Qualitative data analysis: A sourcebook of new methods*. SAGE Publications.
- Murray, J., Bradley, H., Craigie, W., & Onions, C. (2006). Medical discourse: Doctor-patient communication. In K. Brown (Ed.), *Encyclopaedia of language and linguistics* (2nd ed., pp. 681-688). Elsevier Science.
- Odebunmi, A. (2006). Locutions in medical discourse in Southwestern Nigeria. *Pragmatics, 16*(1), 25-41. <https://doi.org/10.1075/prag.16.1.04ode>
- Pun, J., Chor, W., & Zhong, L. (2019). Delivery of patient-centered care in complementary medicine: Insights and evidence from the Chinese medical practitioners and patients in primary care consultations in Hong Kong. *Complementary Therapies in Medicine, 45*, 198-204. <https://doi.org/10.1016/j.ctim.2019.06.013>
- Roter, D., & Hall, J. A. (2006). *Doctors talking with patients/patients talking with doctors: Improving communication in medical visits* (2nd ed.). Praeger Publishers.
- Saldana, J. (2015). *The coding manual for qualitative researchers* (3rd ed.). SAGE Publications.
- Schiavo, R. (2013). *Health communication from theory to practice* (2nd ed.). Jossey-Bass.
- Shanan, A. (2011). A veterinarian's role in helping pet owners with decision making. *Veterinary Clinics: Small Animal Practice, 41*(3), 635-646. <https://doi.org/10.1016/j.cvsm.2011.03.006>
- Shaw, J. R., Adams, C. L., Bonnett, B. N., Larson, S., & Roter, D. L. (2004). Use of the Roter interaction analysis system to analyze veterinarian-client-patient communication in companion animal practice. *Journal of the American Veterinary Medical Association, 225*(2), 222-229. <https://doi.org/10.2460/javma.2004.225.222>
- Shaw, J. R., Adams, C. L., Bonnett, B. N., Larson, S., & Roter, D. L. (2008). Veterinarian-Client-Patient communication during wellness appointments versus appointments related to a health problem in companion animal practice. *Journal of the American Veterinary Medical Association, 233*(10), 1576-1586. <https://doi.org/10.2460/javma.233.10.1576>
- Shaw, J. R., Adams, C. L., Bonnett, B. N., Larson, S., & Roter, D. L. (2012). Veterinarian satisfaction with companion animal visits. *Journal of the American Veterinary Medical Association, 240*(7), 832-841. <https://doi.org/10.2460/javma.240.7.832>
- Shaw, J. R., Bonnett, B. N., Adams, C. L., & Roter, D. L. (2006). Veterinarian-client-patient communication patterns used during clinical appointments in companion animal practice. *Journal of the American Veterinary Medical Association, 228*(5), 714-721. <https://doi.org/10.2460/javma.228.5.714>
- Shaw, J. R., Bonnett, B. N., Roter, D. L., Adams, C. L., & Larson, S. (2012). Gender differences in veterinarian-client-patient communication in companion animal practice. *Journal of the American Veterinary Medical Association,*

- 241(1), 81-88.
<https://doi.org/10.2460/javma.241.1.81>
- Spencer-Oatey, H. (2008). *Culturally speaking: Culture, communication and politeness theory* (2nd ed.). Continuum International Publishing Group.
<https://doi.org/10.1017/S0047404509990716>
- Sunday, A. B., & Akinrinlola, T. (2021). Discourse strategies of handling denials in police–suspect interaction in Ibadan, Nigeria. *Studies in African Languages and Cultures*, (55), 87-109.
<https://salc.uw.edu.pl/index.php/SALC/article/view/297>
- Tates, K., & Meeuwesen, L. (2001). Doctor–parent–child communication. A (re)view of the literature. *Social Science & Medicine*, 52(6), 839-851. [https://doi.org/10.1016/S0277-9536\(00\)00193-3](https://doi.org/10.1016/S0277-9536(00)00193-3)
- Thaler, V. (2012). Mitigation as modification of illocutionary force. *Journal of Pragmatics*, 44(6–7), 907-919.
<https://doi.org/10.1016/j.pragma.2012.04.001>
- Tian, Y., Zhang, J., Che, H., & Su, Y. (2023). Weaving rapport: Doctors' strategies towards patients' noncompliance. *BMC Health Serv Res*, 23(1), 1-15.
<https://doi.org/10.1186/s12913-022-08947-7>
- Tinga, C. E., Adams, C. L., Bonnett, B. N., & Ribble, C. S. (2001). Survey of veterinary technical and professional skills in students and recent graduates of a veterinary college. *Journal of the American Veterinary Medical Association*, 219(7), 924-931.
<https://doi.org/10.2460/javma.2001.219.924>