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Defining and understanding risk communication and intercultural rhetoric proved to be a difficult task during week 1. When trying to define risk communication and intercultural rhetoric my classmates all had different definitions. Intercultural rhetoric and communication were terms we felt comfortable with, whether we had a complete definition or not, but it was the word risk that gave us trouble. For me I wasn’t sure how to use risk, because I did not know what was meant by its use. Did it refer to the danger involved in not communicating effectively, or did address the potential slippery slope of communicating and addressing intercultural rhetoric? Through class discussion and assigned readings it became clear to me that it would be easier to recognize instances of this type of communication and rhetoric in action, than it would be to define it. This certainly was the case with the “Naming Migraine and Those Who Have It” article.

In the Segal et al article it is clear that careful and deliberate consideration must be given when naming and categorizing a migraine, and those that encounter them. The trouble I had writing that sentence is a result of reading the article. I didn’t want to write people suffering from, or with migraines. I, as a writer of this journal didn’t feel I had the power to describe that event in such a way. Even then I hesitated to use event, when I could have used condition, but after reading the article I find myself more concerned with what is in a name, and what each word may or may not imply. As someone studying rhetoric, this is not new, but the arena of risk communication and intercultural rhetoric is a different from what I’m accustomed. There was a lot of discussion, and a bit of tension in the Segal et al piece. The comfort of those in the group trying to name and correctly categorize migraines would change depending on the term they discussed. This isn’t something I know first hand, but their responses indicate the seriousness behind their task. If something, like disorder for example, sounded “psychiatric” then it would lose favor amongst the group. This gives insight as to how one term can be perceived to be associated with other medical terms and diagnoses that are not viewed in a positive light. In class we discussed the continued stigma of mental illness. The reasons for accepting and denying certain terms are based on the terms and their understandings/perceptions of them. Disease was deemed too serious, or that a migraine might not be credible enough as a disease. The issue of accurately describing an event, or medical condition comes up again in The Aggressive Egg.

In The Aggressive Egg readers understand that point of view when describing an event matters. This is not new, but seeing it in science, which tends to be believed as objective and based on fact is quite different. In fact in this piece we see the ways a point of view can uphold gender roles/stereotypes, and/or be influenced by them. I’ve read this many times before, and always in different classes for different purposes, but the message of the point of view shaping our understanding, and what is acceptable as a description of the same, or similar, events remains. These readings help me to understand that the definitions of risk communication and intercultural rhetoric will not be easy to pin down, but that isn’t as important as recognizing it in action.