

DOCTOR–PATIENT COMMUNICATION IN LOCAL LANGUAGE: A SOCIAL LEGITIMACY IN HEALTHCARE

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ABSTRACT

This article examines the sociological significance of local language in doctor–patient communication. Further it explores how it impact on healthcare delivery. The author finds that effective communication is central to diagnosis, treatment compliance, and patient satisfaction. However, linguistic barriers between healthcare providers and patients often create misunderstandings, reduce trust, and affect treatment outcomes.

Using a qualitative sociological approach and review of theoretical literature on the topic, this paper explores how local language enhances patient trust, improves clarity in medical instructions, and strengthens therapeutic relationships.

The findings suggest that local language functions not merely as a communication tool but as a medium of empathy, cultural understanding, and social connection. Further the study highlights the importance of linguistic inclusion in healthcare systems and recommends institutional support for multilingual communication in medical settings.

Keywords: Doctor–patient relationship, local language, healthcare communication, medical sociology, patient trust, linguistic inclusion

INTRODUCTION

Language plays a central role in shaping social relationships, institutional legitimacy, and human interaction. In healthcare, communication between doctors and patients is not merely a technical exchange of medical information but also a deeply social interaction that influences trust, emotional well-being, treatment compliance, and institutional acceptance. Doctors who communicate in patients' local language, provide prescriptions in local language, and ensure multilingual accessibility through signage and institutional communication are more socially relevant and widely respected.

The researcher has tried to explain the sociological dimensions of doctor–patient communication through the theoretical frameworks of sociology of language, sociolinguistics, symbolic interactionism, and linguistic capital. Drawing upon the works of Joshua Fishman, Pierre Bourdieu, and Jürgen Habermas, the paper argues that language functions as a form of symbolic power and social capital. In multilingual societies such as India, the use of local language in healthcare reduces social distance, enhances trust, promotes social inclusion, and strengthens institutional legitimacy. The paper also examines the role of language in shaping group identity, emotional security, and social authority. It further discusses policy initiatives such as the Official Language Act (1963), National Education Policy (2020), and healthcare language reforms. Finally, the paper proposes policy recommendations to promote multilingual healthcare communication to enhance equity, accessibility, and social justice.

DOCTOR'S COMMUNICATION IN PATIENT'S LANGUAGE

Communication between doctors and patients is a fundamental component of healthcare delivery. Sociologically, communication shapes social interaction, power relations, and institutional effectiveness. In multilingual societies like India, language plays a crucial role in shaping healthcare experiences. When doctors communicate in a patient's local language, it reduces social distance, builds trust, and improves healthcare outcomes. Conversely, linguistic barriers may lead to misinterpretation, anxiety, and reduced treatment compliance. This study examines the role of local language as a sociological factor in strengthening doctor-patient relationships and improving healthcare delivery.

Doctors have traditionally been regarded as life-saving figures and occupy a highly respected position in society. This respect is not based solely on their medical expertise but also on their ability to communicate effectively with patients. Communication plays a critical role in building trust, confidence, and emotional security among patients. When doctors communicate in the patient's local language, the interaction becomes more humane, empathetic, and socially meaningful.

Language is not merely a neutral medium of communication but a social institution embedded within power relations, cultural identity, and social structure. The sociology of language examines the relationship between language and society, focusing on how language reflects and shapes social hierarchies, identity, and institutional legitimacy. Joshua Fishman (1972, p. 217) defined sociology of language as the study of "who speaks what language to whom and when." This definition highlights the social organization of language use and its connection to power, identity, and social interaction.

In healthcare settings, language becomes especially important because patients are often vulnerable, emotionally distressed, and dependent on doctors for both physical and psychological reassurance. Even a few positive words spoken in the patient's own language can strengthen hope, reduce anxiety, and promote emotional healing.

However, in multilingual societies such as India, doctors often communicate in English, the language of medical education, rather than the patient's local language. This creates a communication gap that may reduce trust, create confusion, and reinforce social inequality.

This paper examines the sociological significance of local language use in healthcare and argues that local language communication enhances trust, social acceptance, and institutional legitimacy.

REVIEW OF LITERATURE

Previous research highlights the importance of communication in healthcare settings. Mishler (1984) emphasized the role of communication in shaping medical authority and patient participation. Bourdieu's concept of linguistic capital explains how language influences power relations in institutional settings.

Studies by Schouten and Meeuwesen (2006) show that linguistic concordance improves patient satisfaction and treatment adherence. Indian studies have also demonstrated that patients feel more comfortable and cooperative when healthcare providers use local languages. However, limited research examines this issue from a sociological perspective focusing on linguistic inclusion and social trust.

METHODOLOGY

This study adopts a qualitative sociological approach. Data were collected through interviews with patients and healthcare providers, along with observations in healthcare settings. The sample included diverse participants from multilingual backgrounds. Thematic analysis was used to identify key patterns related to communication, trust, and treatment compliance.

DISCUSSION

The findings indicate that local language communication significantly improves patient comfort and trust. Patients reported better understanding of medical instructions when doctors used their native language. Doctors also reported improved patient cooperation. Linguistic familiarity reduced social distance and enhanced emotional connection. The study confirms that language plays a crucial sociological role in shaping healthcare interactions.

THEORETICAL FRAMEWORK: SOCIOLOGY OF LANGUAGE AND LINGUISTIC CAPITAL

The sociology of language provides important theoretical tools for understanding healthcare communication. Language is closely linked with power, identity, and social hierarchy.

Pierre Bourdieu (1991) introduced the concept of linguistic capital, which refers to the social value associated with particular language skills. According to Bourdieu, language is a form of symbolic power. Certain languages, such as English in India, are associated with institutional authority, education, and social prestige.

In healthcare settings, doctors who use English may unconsciously reinforce institutional hierarchy and social distance. Patients who do not understand English may feel marginalized, inferior, or excluded.

However, when doctors communicate in the patient's local language, they redistribute symbolic power and create a more egalitarian relationship. This enhances trust and social acceptance.

Bourdieu also introduced the concept of symbolic power, which refers to the ability to influence others through cultural and linguistic authority. Doctors possess symbolic power because of their professional status and medical knowledge. However, when they communicate in the patient's language, they humanize their authority and strengthen social bonds.

HABERMAS AND COMMUNICATIVE ACTION: LANGUAGE AS SOCIAL INTEGRATION

Jürgen Habermas' theory of communicative action emphasizes the role of language in achieving mutual understanding and social integration. According to Habermas (1984), communication is essential for building trust, legitimacy, and social coordination.

Healthcare communication is a classic example of communicative action. When doctors communicate clearly in the patient's local language, patients understand their illness, treatment, and recovery process.

This enhances:

- Trust
- Treatment compliance
- Emotional stability

- Social legitimacy of healthcare institutions

Conversely, when communication occurs in unfamiliar languages, patients may experience alienation, confusion, and mistrust.

Thus, local language communication strengthens the relationship between medical institutions and society.

LANGUAGE, IDENTITY, AND EMOTIONAL SECURITY

Language plays a central role in shaping individual identity and emotional security. Sociolinguists argue that language is closely connected to group identity, cultural belonging, and emotional expression.

Su-Chiao Chen (2012) emphasized that language determines who is authorized to speak, with whom, and under what conditions. Language also reflects social identity and group belonging.

When doctors communicate in patients' local language, patients feel recognized, respected, and emotionally secure.

Conversely, unfamiliar language creates emotional distance and insecurity.

For example, certain words in medical communication carry emotional meaning. When doctors use familiar language, patients feel comforted. However, unfamiliar medical terminology may create fear and anxiety.

INDIA AS A MULTILINGUAL SOCIETY: LANGUAGE AND HEALTHCARE INEQUALITY

India is one of the most linguistically diverse countries in the world, with hundreds of languages and dialects. Most patients prefer to communicate in their mother tongue or regional language.

However, medical education in India is primarily conducted in English. As a result, many doctors are more comfortable communicating in English than in local languages.

This creates communication barriers, especially in rural areas.

Patients who do not understand English may face:

- Misunderstanding of medical instructions
- Reduced treatment compliance
- Lower trust in doctors
- Emotional distress

This reflects broader social inequality based on linguistic capital.

IMPORTANCE OF LOCAL LANGUAGE IN MEDICAL PRESCRIPTIONS

Medical prescriptions are typically written in English, often using abbreviations that are difficult for patients to understand. Patients depend on pharmacists or relatives to interpret prescriptions.

Writing prescriptions in local language has several benefits:

- Improves patient understanding
- Enhances treatment compliance

- Reduces medical errors
- Provides emotional reassurance

Recognizing this, the Union Health Ministry has encouraged doctors in institutions such as AIIMS to use Hindi and local languages in prescriptions.

Similarly, the National Education Policy (2020) emphasizes the use of Indian languages in professional education, including medical education.

These initiatives reflect growing recognition of the importance of language in healthcare accessibility.

LANGUAGE, TRUST, AND SOCIAL ACCEPTANCE

Trust is essential for effective healthcare delivery. Trust is not only based on medical competence but also on communication and empathy.

Doctors who communicate in patients' local language often gain greater respect and acceptance.

Patients feel emotionally connected and socially respected.

This increases:

- Patient satisfaction
- Institutional legitimacy
- Social acceptance of healthcare providers

Doctors who communicate in local language often become highly respected community figures.

LANGUAGE AND SOCIAL LEADERSHIP: DOCTORS AS SOCIAL LEADERS

Several doctors in India have gained social recognition and leadership due to their close connection with patients through language.

For example, Dr. Dharamvir Gandhi, a cardiologist from Punjab, gained widespread popularity due to his ability to communicate with patients in Punjabi. His social trust and acceptance contributed to his election to Parliament.

Similarly, many doctors who communicate in local language gain leadership roles in society.

This demonstrates that language enhances not only professional success but also social authority.

LANGUAGE, INSTITUTIONAL LEGITIMACY, AND PUBLIC POLICY

Institutional legitimacy depends on public trust and acceptance. Language plays a critical role in shaping institutional legitimacy.

Government policies such as:

- Official Language Act (1963)
- National Education Policy (2020)
- National Rural Health Mission

emphasize the importance of local language in public services.

Multilingual hospital signage and communication improve accessibility and social inclusion.

Hospitals that use local languages are perceived as more socially responsive and culturally sensitive.

POLICY RECOMMENDATIONS

Based on sociological analysis, the following policy recommendations are proposed:

1. Multilingual Healthcare Communication Policy

Hospitals should provide communication in local languages, Hindi, and English.

2. Local Language Prescriptions

Doctors should provide prescriptions in local language to enhance understanding.

3. Medical Education Reform

Medical education should include training in local languages.

4. Multilingual Hospital Signage

Hospital boards should be written in local languages.

5. Healthcare Interpreter Services

Hospitals should provide trained interpreters.

6. Implementation of National Education Policy

Medical textbooks should be translated into Indian languages.

CONCLUSION

This paper demonstrates that language plays a crucial role in shaping doctor–patient relationships, social trust, and institutional legitimacy. Language is not merely a communication tool but a form of symbolic power, cultural capital, and social inclusion.

Doctors who communicate in patients’ local language are more socially accepted, trusted, and respected. Local language communication enhances emotional security, treatment compliance, and healthcare accessibility.

The sociology of language provides important theoretical insights into healthcare communication. Integrating local languages into healthcare systems is essential for promoting social justice, equity, and inclusive healthcare.

Language is therefore not only a medium of communication but also a medium of healing, dignity, and social integration.

The study concludes that local language is a critical factor in improving doctor–patient relationships and healthcare outcomes. Healthcare institutions should promote multilingual communication through training, translation support, and policy reforms. Linguistic inclusion can enhance healthcare equity and effectiveness.

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