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Discursive Representations of Controversial Issues
in Medicine and Health

La rappresentazione discorsiva di questioni controverse
in ambito medico e sanitario

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“Facts” and “Feelings” in the Discursive Construction of the “Best Interests of a Child”: The Charlie Gard Case

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ABSTRACT

The study investigates how the ethical issues of the “best interests” of a child, end-of-life care and parental responsibility were presented and discursively constructed in the case of Charlie Gard, a young baby suffering from a rare degenerative disease with no known cure. The story of his parents’ legal battle against doctors’ decisions to withdraw treatment hit the headlines, arousing strong, emotional reactions among the public. The paper investigates the linguistic resources adopted in the presentation of the various arguments of the parties involved. The corpus is therefore made up of two subcorpora, one covering the institutional, specialist discourse of the hospitals and law courts, the other composed of articles published in British quality and popular newspapers. Bearing in mind the heterogeneous nature of the sources, the study primarily adopts a qualitative discourse analysis approach, and in particular Appraisal Theory which offers a wide and flexible range of instruments to find the key to the reading of a text.

Keywords: Appraisal Theory; Charlie Gard; child’s best interests; court decisions; editorials; ethics; hospital statements; legal dispute; news reports; public opinion.

1. INTRODUCTION

In 2017, the case of Charlie Gard, a very young baby affected by a rare degenerative disease with no known cure, hit the headlines in Britain

and reverberated across the world. Charlie's parents were fighting a legal battle against doctors' decisions to withdraw life support, because they wanted to take their son to the US where they had been offered experimental therapy, arguing that it was their right to decide for their own child. The legal dispute raised a number of very challenging and highly sensitive medical and legal ethical questions concerning the best interests of a child, parental responsibility, experimental therapy and end-of-life care, the understanding and interpretation of which depend strongly on individual personal beliefs.

The public response to the case was overwhelming. Charlie's parents had launched an appeal on the crowdfunding website "Go fund me" (<http://www.gofundme.com>)¹ at the end of January 2017. It was understandably a very emotional appeal, emphasising Charlie's desperate situation and the treatment as his only possible chance, but giving little background information about his illness, its cause and the highly experimental therapy. By the end of April, the appeal had collected over £1 million. The case was commented and twittered throughout the world by political and religious leaders as well as the general public, exploiting to the full the affordances available on the Internet. However, public opinion was split, people expressed their opinions with increasing vehemence and the crescendo in the intensity of public reaction culminated in protests outside the hospital, and even death threats to the medical staff on the one hand and insults to Charlie's parents on the other.

Emotionality in discourse has received much attention, both in evaluation (Thompson and Hunston 2000) and argumentation studies (Walton 1992; Micheli 2010). Indeed, the relevance and legitimacy of appeals to feelings and emotions have been acknowledged, though they are also viewed negatively as they can be used fallaciously. However, this study is purely descriptive, not normative, in its approach and does not intend to judge the reasonableness of the arguments. The aim of this paper is, in fact, to investigate how the case was discursively constructed and the facts conveyed to the public. People form their opinions based on their knowledge of a topic, which is the result of facts and raw data being transferred into a conceptual framework. This framework is a composite of what they know, together with their beliefs and expectations. Once the information has been elaborated, the knowledge can be used for other cognitive uses, such as forming opinions. In cases like

¹ Unless differently indicated, all websites were last visited on February 4, 2019.

Charlie Gard, opinions are also influenced by ethics, the moral principles that govern a person’s behaviour. Ethics are forged by a combination of elements drawn from a variety of sources, such as childhood upbringing, life experiences, religious beliefs, discussions with family, friends and colleagues. Therefore, knowledge and ethics both depend on an individual’s awareness, understanding and past experience. The title of this paper, referring to “facts and feelings”, reflects these two elements – facts which we can gather from a number of sources, and feelings, our attitudes and emotions about that information. In drawing this distinction, which it may be argued is questionable, I rely on the widespread assumption, in many discursive representations of the case, that “facts” and “feelings” played crucial roles in the debate, as they could skew opinion one way or another. As Mr Justice Francis, the judge presiding over the dispute, pointed out in his judgment of July 24, 2017, “A lot of things have been said, particularly in recent days, by those who know almost nothing about this case but who feel entitled to express opinions. Many opinions have been expressed based on feelings rather than facts”².

The study will, therefore, look behind the ostentatious expressions of opinions of the social media and tweets to find out how the facts, which should have been the basis for the forming of opinions, were presented firstly by those involved in the dispute, namely the Great Ormond Street Hospital (GOSH) and the courts that heard the case, and secondly, by the press whose role it is to collect and relay information to the public. By putting forward the facts from their points of view, they will of course express opinions and, as Hunston and Thompson point out, “evaluation can be used to manipulate the reader, to persuade him or her to see things in a particular way” (2000, 8).

2. CORPUS

The corpus consists of texts representing the institutional discourse of the medical and legal experts and articles from newspapers published during the period from April 2017, when the High Court made its first decision, to August 2017, shortly after Charlie’s life support was finally withdrawn (see *Table 1*). The institutional medical and legal specialist

² [2017] EWHC 1909 (Fam).

subcorpus is made up of texts posted on the hospital website (<https://gosh.nhs.uk>), that is official statements, Frequently Asked Questions, statements presented during court proceedings, as well as the decisions of the three levels of English courts which heard the case, the High Court, the Court of Appeal and the Supreme Court. The other subcorpus is comprised of newspaper articles that have been taken from the *Daily Telegraph*, the *Guardian*, the *Daily Mail* and the *Daily Mirror*, two broadsheets and two tabloids, in each case one has a more right-wing and the other a more left-wing, or at least less conservative, alignment. Thirteen articles were collected from each newspaper; most of them are of the subgenre newspaper reports, though they also include some Comments (one from the *Daily Mail*, *Daily Mirror* and *Telegraph* and six from the *Guardian*, respectively). Their length varies greatly from 239 words to 6015 words, though the tabloid texts were generally longer.

Table 1. – Corpus.

SUBCORPUS	NUMBER OF WORDS
Institutional:	53,876
<i>Medical</i>	8,918
<i>Legal</i>	44,958
Press	60,792
TOTAL	114,668

The corpus taken as a whole has a total of 114,668 words, but it has an uneven distribution. Indeed, the medical texts account for only 8,918 words, as a hospital is obliged to protect the privacy and confidentiality of their patients and therefore could not discuss the case at length.

3. THEORETICAL FRAMEWORK

Given the heterogeneous nature of the sources, a qualitative discourse analysis approach is adopted, and in particular Martin and White's Appraisal Theory (2005) which offers a wide and flexible range of instruments to find the key to the reading of a text.

The theory has three main subsystems (*see Table 2*):

- *Attitude* encompasses different options for expressing positive or negative evaluation and is divided into three areas of feelings, each of which

is subdivided further: AFFECT refers to assessments that are based on emotional responses (happiness, security, satisfaction), JUDGEMENT refers to assessments of human behaviour (social esteem, social sanction) and APPRECIATION relates to assessments of aesthetic and social value of things (reaction, composition, valuation).

- *Engagement* concerns the resources used by speakers and writers to adjust and negotiate the arguability of their propositions and proposals. It allows for alternative positions and voices to be expressed in the text (entertain and attribute) – what Martin and White call ‘dialogic expansion’ – but also the opposite, ‘dialogic contraction’, in which positions may be challenged, dismissed or concurred with (disclaim and proclaim).
- *Graduation* refers to the adjustments of attitude and engagement in terms of strength, the up-scaling and down-scaling of expressions. It works across two clines, force (assessments of intensity and amount) and focus (prototypicality or preciseness, the degree by which category boundaries are drawn) and can be applied both to attitudinal meanings and the expressions of engagement. It is an essential aspect of Appraisal Theory because it interacts with the other two systems. Indeed, as Martin and White explain, “Appraisal meanings do not operate as isolated values, but rather as integrated complexes of meaning” (2005, 159).

Table 2. – Appraisal Theory.

ATTITUDE	ENGAGEMENT	GRADUATION
AFFECT happiness security satisfaction	Monogloss	FORCE INTENSIFICATION QUANTIFICATION
JUDGEMENT social esteem social sanction	Heterogloss DIALOGIC EXPANSION entertain attribute	FOCUS PROTOTYPICALITY: sharpening/softening
APPRECIATION reaction composition valuation	DIALOGIC CONTRACTION disclaim proclaim	

Appraisal Theory is a very complex system and methodology to apply. For the purpose of this research only the categories shown above seemed to be necessary for the proposed objectives. The theory has been open to a number of observations and criticisms (see, for example, Thompson

2008, 174-184; Oteíza 2017, 464-466) and Martin and White themselves pointed out some of the problems involved, two of which are of particular interest in this analysis. Appraisal is very subjective and context-dependent, giving rise to the possibility of multiple interpretations (2005, 163). Furthermore, evaluation is not always inscribed directly in the discourse through the use of attitudinal lexis. At times, the simple selection of ideational meanings is enough to evoke evaluation (*ibid.*, 62) and elicit a particular evaluative reaction reflecting the shared cultural and ethical values of the expected readers. In this case, the expressions are referred to as 'tokens' of appraisal.

For the sake of simplicity, the analysis will not go deep into the different subcategories of each subsystem, but it will be sufficient to illustrate the main linguistic resources adopted in the different texts and by the different authors.

While Appraisal theory is applied to all the texts, both institutional and in the press, the analysis of the newspaper articles also draws on the work of Bell (1998) and van Dijk (1998). Bell provides a framework for analysing the discourse structure of newspaper articles, which is based on the journalists' five W's and an H, *who, what, when, where, why* and *how*, and also illustrates how the temporal sequence of events, usually a fundamental characteristic of narratives, is subordinate to news worthiness. Van Dijk's article on opinions and ideologies in the press examines the discursive strategies and devices that may be used to enhance the expression of opinions, including polarisation into ingroups and outgroups, Us vs. Them and description of these groups. Both these approaches will add interesting perspectives to the analysis of the media texts.

4. ANALYSIS

4.1. *Medical discourse*

It seems quite appropriate, in the context of knowledge dissemination, to look at a text in the form of *Frequently Asked Questions* that the Great Ormond Street Hospital (GOSH) published on line in response to the many requests received from the public asking for information about Charlie Gard. There were 12 questions in all, but there is space only for a small selection.

The first question was *Who is Charlie Gard?* The reader would probably expect the answer to read “He’s an 8-month old baby boy”, with information about his background, but here GOSH’s answer positions Charlie inside the hospital, as a patient, therefore as its responsibility and thus neutralising his family status:

- (1) Charlie Gard is a *GOSH patient* who is currently in our intensive care unit.

In answer to the next question, *What is his condition?*, there is a marked difference between the definition of Charlie’s illness given in highly technical terms and the description of his state of health given in everyday language in order to make it comprehensible to all readers. The severity of his present condition is conveyed through the use of GRADUATION, and more specifically intensification, realized by the words *exceptionally*, *struggle* and *severe(ly)*; the last adjective being repeated three times.

- (2) Charlie’s condition is *exceptionally* rare. He suffers from an inherited mitochondrial disease called infantile onset encephalomyopathic mitochondrial DNA depletion syndrome, referred to generally as “MDDS”. Charlie suffers specifically from the RRM2B mutation of MDDS. Charlie’s brain, muscle and ability to breathe are all *severely* affected. In addition, Charlie has congenital deafness and a *severe* epilepsy disorder. Charlie’s heart, liver and kidneys are also affected. Charlie has *severe* progressive muscle weakness and cannot move his arms or legs or breathe unaided. Charlie’s eyelids cannot stay open and his eyes point in different directions because of muscular weakness. Charlie’s retina would *struggle* to develop and his brainwaves suggest that he is not going to be able to lay down normal visual patterns that should be learned at an early age. Eyesight is not something you’re born with, it develops over time.

Bare assertions were generally used to answer questions about the possibility of treatment, as for example in (3) *there is no cure*, though occasionally there is an opening to other possibilities. It should be noted that the assertion “there is no cure” is, in fact, the conclusion of an argument (the assertion relies on reasoning based on what the doctors know both about Charlie’s illness and about the success – or failure – of existing treatments). Regardless of its status as the conclusion of an argument, the statement is presented matter-of-factly as an epistemically unchallengeable truth (presumably by virtue of the authority vested in the medical profession), which readers are not expected to question.

The text entertains the possibility of treatment, *GOSH explored*, before contracting, *GOSH concluded*, and proclaiming the treatment would not be useful. Indeed, the repeated positioning of *GOSH* as the collective subject reinforces its authoritativeness. There are no expressions of ATTITUDE.

- (3) Why is there no treatment available at GOSH?

There is no cure for Charlie's condition which is terminal. *GOSH explored* various treatment options, including nucleoside therapy, the experimental treatment that one hospital in the US has agreed to offer now that the parents have the funds to cover the cost of such treatment. *GOSH concluded* that the experimental treatment, which is not designed to be curative, would not improve Charlie's quality of life.

Once again in (4) there is a dialogic expansion to include the voice of the US clinician who, nevertheless, concurs with GOSH. The treatment is appraised through APPRECIATION (underlined), whilst JUDGEMENT (italics) is used to positively describe the UK medical experts as *highly experienced*, once again giving authority to the opinion³.

- (4) How did GOSH come to this decision about his treatment?

GOSH's clinicians had to balance whether this experimental treatment was in his best interests or not.

One of the factors that influenced this decision was that Charlie's brain was shown to be extensively damaged at a cellular level. The clinician in the US who is offering the treatment agrees that the experimental treatment will not reverse the brain damage that has already occurred. The entire *highly experienced UK team*, all those who provided second opinions and the consultant instructed by the parents all agreed that further treatment would be futile – meaning it would be pointless or of no effective benefit.

The last group of questions deals with ethical issues. The first two answers yet again are bare assertions, one simply reporting the decision of the two courts that it is not in Charlie's best interests, the other reinforced by the parallel structure, *on what, not what*. The last answer is more complex in that it concedes that Charlie's parents do have parental responsibility, but immediately counters the proposition and affirms that the law invests the court with overriding control, thus transfer-

³ This is an example of an argument from authority. For further reading on this point in terms of argumentation theory, see D. Walton, "Appeal to Expert Opinion" (1997), <http://www.psypress.org/books/titles/0-271-01694-9.html>.

ring the ultimate responsibility to others. The link offers the reader the opportunity to find further information.

- (5) The parents have raised money for the treatment, why can't it take place?

The High Court and the Court of Appeal have ruled it is not in Charlie's best interests to receive the experimental treatment in the US. Even if the treatment does not work for Charlie, won't it help other children in the future?

The courts base their decisions for treatment *on what* is in Charlie's best interests, *not what* is in the best interests of medical science.

What about the parental rights?

Although Charlie's parents have parental responsibility, overriding control is by law vested in the court exercising its independent and objective judgment in the child's best interests.

For more details on parental rights during medical treatment, please access the British Medical Association website.

The text presents the essential points of the decision in a language that obfuscates the complex argumentative reasoning which lies behind it. The hospital presents the events omitting the mention of counter-argumentation that may have led to different conclusions than the ones reached by the hospital and using very little attitudinal lexis. In contrast, a statement issued by the hospital at the end of the case when Charlie's parents had finally accepted that the life support should be withdrawn used very different linguistic resources.

- (6) **We deeply regret** that profound and heartfelt differences between Charlie's doctors and his parents have had to be played out in court over such a protracted period. It has been a uniquely painful and distressing process for all concerned. *Charlie's parents have tirelessly advocated* for what they *sincerely* believed was right for their son, and *nobody could fault them for doing so*.

All of us at Great Ormond Street Hospital get up every morning to care for sick children, not to cause further anguish to devoted parents like Chris and Connie [Token: JUDGEMENT]. *We have tried absolutely everything* [Token: JUDGEMENT] to accommodate their final wishes and engaged, not only with those who volunteered to treat Charlie, but also with experts from across the health service in close consultation with the NHS to make this happen. This included exploring the unprecedented step of delivering intensive life support away from a hospital intensive care unit.

Sadly, as the judge has now ruled, there is simply no way that Charlie, a patient with such severe and complex needs, can spend any signifi-

cant time outside of an intensive care environment safely. The risk of an unplanned and chaotic end [Token: AFFECT] to Charlie's life is an unthinkable outcome for all concerned and would rob his parents of precious last moments [Token: AFFECT] with him.

As the judge has now ruled, we will arrange for Charlie to be transferred to a specialist children's hospice, *whose remarkable and compassionate staff* will support his family at this impossible time. This is a very special place who will do all they can to make these last moments as comfortable and peaceful as possible for Charlie and his loved ones.

Great Ormond Street Hospital would like to reassure everyone who has followed this heart-breaking story that *we always put the best interests of every single one of our patients above all else* While *we always respect parents' views, we will never do anything that could cause our patients unnecessary and prolonged suffering*. [Token: JUDGEMENT].

The priority of our medical staff has always been Charlie. [Token: JUDGEMENT]

Our doctors and nurses have worked tirelessly and done their utmost for him in the months he has been in our care. Every single one of us wishes that there could have been a less tragic outcome.

Our thoughts and deepest sympathies go out to Chris and Connie, and we hope that their privacy is respected at this devastating time for their family. (Statement on GOSH patient Charlie Gard, July 27, 2017)

This text presents just one perspective and engages only in a limited manner with alternative views of the events, but it has a number of attitudinal expressions, mainly APPRECIATION (underlined) and JUDGEMENT (italics) praising Charlie's parents, but above all the medical staff. On two occasions we can also find expressions of AFFECT (bold), *we deeply regret* and *sadly*. However, if we look at some examples of APPRECIATION, we can see that they too refer to feelings, *profound and heartfelt differences, uniquely painful and distressing process, this heart-breaking story, this devastating time*. The difference between the two is that AFFECT is directly related to the emotion experienced by the person, whilst APPRECIATION (reaction) associates a quality that produces a reaction to the object being appraised, in these cases *differences, process, story and time*. It thus creates a certain distance from the writer and results in what may appear greater objectivity (Page 2003, 222), a characteristic we expect in professional discourse. There are a number of examples of tokens provoking (Thompson 2008, 174) positive JUDGEMENT, *All of us at Great Ormond Street Hospital get up every morning ... , the priority of our medical staff has always been Charlie* and *we always put the best interests of every single one of our patients above all else* and AFFECT, *chaotic end* and *precious*

last moments. These examples illustrate how difficult it can be to classify some evaluative items into a specific category (Thompson 2008).

The statement is not an apology, but the hospital takes up what seems to be a defensive position after the wave of protests and messages of contempt, emphasising the dedication and care of the doctors and nurses and putting the onus of the final decision to withdraw treatment on the courts.

This small sample of texts shows that linguistic resources are used to affirm the authority of the hospital as an institution, though for different rhetorical purposes – on the one hand, to state categorically its professional opinion of the state of Charlie Gard’s health, and on the other as an act of public relations through expressions of empathy.

4.2. *Legal discourse*

Court judgements are by their very nature and function heteroglossic, as they have to give a clear overview of the arguments and opinions put forward by the various parties involved in a dispute before pronouncing the decision. Argumentation plays a key role in legal discourse and the texts analysed below are no exception. In this section, however, I will focus on features of evaluation rather, than argumentative structuring.

When referring to the US doctor offering experimental treatment, the High Court judge stated:

- (7) Dr. I, who has not had the opportunity of examining Charlie, and who operates in what has been referred to as a slightly different culture in the United States where anything would be tried, offers the tiniest chance of some remotely possible improvement based on a treatment which has been administered to patients with a different condition. I repeat that nucleoside therapy has not *even* been tried on a mouse model with RRM2B. (Mr Justice Francis, [2017] EWHC 972 (Fam))

Here, GRADUATION plays an important role in the appraisal expressed through APPRECIATION, which in turn provokes negative JUDGEMENT. *Slightly different* softens the evaluation of *culture in the United States where anything would be tried*, in which *anything* sounds particularly derogatory, whilst the intensifiers *tiniest*, *remotely* and *even* reinforce the idea that the treatment would be ineffective.

AFFECT can also be found, perhaps surprisingly, in the decisions of the courts, though more often APPRECIATION is used to express feelings,

which may be considered more consonant with the context of a courtroom. As mentioned above, AFFECT foregrounds the emotional reaction of a person, whereas APPRECIATION describes the emotional impact of a situation, event or circumstance.

- (8) As the Judge whose sad duty it is to have to make this decision, I know that this is the darkest day for Charlie's parents who have done everything that they possibly can for him and **my heart goes out to them** as I know does the heart of every person who has listened to this tragic case during the course of the past week or so. (Mr Justice Francis, [2017] EWHC 972 (Fam))
- (9) For the parents, this is a devastating outcome. *They have gone more than the extra mile in trying to hold on to the hope that they have for their child.* The system requires any dispute to be determined by a judge. The judge did not agree with them. He, after giving what is clearly the most anxious consideration to the issues, determined that there really was only one course for young Charlie, and that was for his life to be brought to a close as a result of the orders that the court made. I can see no reason for disagreeing with that outcome or [...]. (Lord Justice McFarlane, [2017] EWCA Cir 31)
- (10) Any court is bound **to feel utmost sympathy** for *devoted parents who are desperate* to explore every possible way of preserving the life of their gravely ill, but much-loved baby son. As parents we would all want to do the same [...]. However, as judges and not as parents, we are concerned only with the legal position. (Lady Hale, Judgment delivered orally to the Supreme Court, June 8, 2017)

Given the personal and rhetorical style of judges in common law judgments, it is perhaps no surprise that the judges at all levels used a variety of linguistic resources, including AFFECT for evaluation as they ruled in favour of the hospital.

4.3. *Media discourse*

The press, with its non-stop, up-to-the-minute online presence, still represents one of our key sources of information. The following analysis will first discuss how the case was presented in newspaper reports and secondly in Comments.

4.3.1. Newspaper reports

In his analysis of the structure of news stories, Bell (1998, 90) says it is standard practice for them to be written as a series of one sentence paragraphs with little linkage between them. Each news sentence has its own paragraph, so there is no larger unit of text organization. The news stories under consideration here are not made up so much of events, but rather of what was said in court by different external voices, which is reported directly or indirectly. The structure is similar in all four newspapers despite their different styles.

The following extract is taken from the beginning of an article that appeared in the *Daily Mail* on May 23, 2017. Unlike the previous examples, the bold, italics and underlining are not used to indicate attitudinal expressions, but rather to represent the different voices in the text.

- (11) **Specialists at the UK’s most famous children’s hospital** say a sick baby at the centre of a life-support treatment dispute cannot see, hear, make a noise or move.

Lawyers representing Great Ormond Street Hospital have told Court of Appeal judges that the ravages of Charlie Gard’s illness make it hard for anyone to know whether he is pain.

Barrister Katie Gollop QC, who is leading the hospital’s legal team, suggested that further treatment would leave Charlie in a ‘condition of existence’.

Chris Gard and Connie Yates want permission to take son Charlie to America for a therapy trial.

Last month, a *High Court judge* ruled that doctors in Britain could stop providing life-support treatment.

Charlie’s parents now hope that the three appeal judges will overturn Mr Justice Francis’s decision, with a decision expected on Thursday.

Lord Justice McFarlane, Lady Justice King and Lord Justice Sales are analysing evidence at a Court of Appeal hearing in London.

Richard Gordon QC, who led Charlie’s parents’ legal team, told the three appeal judges that the case raised ‘very serious legal issues’.

‘They wish to exhaust all possible options,’ Mr Gordon said in a written outline of Charlie’s parents’ case.

‘They don’t want to look back and think “what if?”’. This court should not stand in the way of their only remaining hope.’

Mr Justice Francis decided that doctors could stop providing life-support treatment to nine-month-old Charlie on April 11, after analys-

ing the case in a hearing at the Family Division of the High Court in London. (*Daily Mail*, May 23)⁴

The voices represent the various parties involved in the case and within each group there are different actors. The bold refers to the medical voice, i.e. doctors, but also the lawyers representing the hospital in court, whilst the parents' voice is underlined and includes the parents, their lawyer and specialists in the US offering experimental therapy. And lastly, the voice in italics is the judge in the High Court and the three judges in the Supreme Court. There is a fairly equal distribution of the different voices throughout the article, alternating one group with the others, whilst the reporting verbs are generally neutral, *said, told, ruled*, and do not indicate any particular position of the authorial voice towards the proposition.

Although the *Daily Mail* has a reputation for sensationalism and therefore we could expect an extensive use of attitudinal evaluation in its news stories, there is in fact very little. All in all, the language is restrained, the evaluative language is more factual than subjective, as for example *the most famous hospital in the UK, very serious legal issues. Experimental treatment* could be evaluative, but all experts including the US doctor agreed on this point, whereas *condition of existence* and *the only remaining hope* are in reported speech, so not expressing directly an opinion of the paper, but just the hospital's and parents' opinions.

When evaluation is used in the articles, it is usually in the characterization of the people involved in the case (van Dijk 1998, 59-60). *Table 3* shows, for example, the left adjectival collocates of *parents* as used in the various papers.

Table 3. – Left adjectival collocates of 'parents'.

<i>Daily Mail</i>		<i>Daily Mirror</i>		<i>Daily Telegraph</i>		<i>The Guardian</i>	
AFFECT	JUDGEMENT	AFFECT	JUDGEMENT	AFFECT	JUDGEMENT	AFFECT	JUDGEMENT
anxious	defiant devoted	heartbroken	devoted loving		committed model	distraught	loving model
bereft	loving model	proud					
desperate	ordinary						
grieving	perfect						
heartbroken							

⁴ From "Doctors reveal Charlie Gard can no longer see, hear or move as his parents beg appeal judges not to 'take away our last hope'" by Alexander Robertson.

There is a much more frequent and varied use of evaluation in the *Daily Mail*, but the articles were generally much longer in any case. Although subjective, this type of evaluation corresponds to shared attitudes, as everybody was sympathetic to Charlie’s parents’ terrible plight, even if they did not agree with their legal battle.

The *Daily Mail* did, nevertheless, use very forceful language at times, as the following shows:

- (12) Ms Yates wept as she was led from the court, where she and the little boy’s father had argued that the state has no right to ‘*extinguish*’ their little boy’s life.

Outside court, the devastated mother cried out: ‘How can they do this to us? They are lying. Why don’t they tell the truth?’. (*Daily Mail*, June 8)⁵

Extinguish is a lexical intensifier, but the inverted commas suggest that it is the exact word used by Charlie’s mother. The reader is therefore able to interpret as he wishes: if he ‘sides’ with the parents he will align with the statement, but if he does not, then the paper is just doing its duty to report what was said in court.

As we have seen, these newspaper reports have little attitudinal evaluation and adopt a heteroglossic approach. Expressing opinions through evaluation creates the Us and Them, in-groups and out-groups (van Dijk 1998, 57-58), but such a net distinction is not possible here. The topic touches everybody in an individual and subjective way cutting across and irrespective of political newspaper alignments. There is no reflection or comment on the significance of what was said, they simply chronicle the court hearing. This chronicling style was very similar in all four papers and was accompanied, to a greater or lesser extent depending on the paper, by numerous photos from the family album of Charlie, as a new born baby, in hospital and with his parents, all of which evoke AFFECT and sympathy.

4.3.2. Comments

Another newspaper genre is the editorial or opinion column. As far as I have been able to find, this type of article only appeared towards

⁵ From “‘How can they do this to us?’ Charlie Gard’s devastated mother breaks down in tears and screams at judges as she loses her Supreme Court fight to take her sick baby son to the US for experimental treatment” by Martin Robinson and Lucy Crossley.

the end of the dispute and is referred to as ‘comment’, rather than ‘opinion’ or ‘editorial’. At that time, the issue was still dividing public opinion and newspapers had to avoid creating an Us and Them situation. They actually all argued in favour of withdrawing the life support, but the tabloids focused on the human aspects of the story, the suffering and the bleak outlook for Charlie, whereas the broadsheets put the case into a broader, social perspective. All, in any case, use more evaluation.

The headline of an article in the *Daily Mirror* clearly expressed an opinion supporting the GOSH medical experts, and that idea was developed throughout the text. However, the newspaper was able to maintain a certain distance from the story, because it is a personal narrative entertaining an alternative position to Charlie’s parents.

- (13) “Charlie Gard’s parents should let him die”. Mum whose baby’s life support was turned off tells of own agonising decision.

[...] Lisa says she appreciates Conor’s case is different to Charlie’s and thinks there is no right or wrong answer, but personally thinks life without independence and meaningful experience is a “living death” [Token: AFFECT].

[...] “It didn’t even occur to me or my husband to question their [doctors]’ advice. They’d done the tests, *they had the knowledge and experience*, and if they advised us that switching off the ventilator was best, then that was what we were going to do.

[...] I think it’s best for Charlie and his parents to let him slip away peacefully. But I also think there’s no right and wrong in terrible cases like this – it’s not black and white, and every case, every baby and family, is different. Charlie’s parents can only do what they believe is best, whatever the rest of us think”. (*Daily Mirror*, July 11)⁶

Similarly, in (14) the writer is expressing her point of view, but the negative form, *I can’t be alone in thinking*, acknowledges the possibility of differing opinions, but advocates the sad solution that was condemned by many.

- (14) Last week, it rejected an appeal by his parents Chris Gard and Connie Yates that their critically-ill baby should be allowed to undergo experimental treatment in the U.S. Now there is little anyone can do, except let nature take its terrible course.

⁶ From “‘Charlie Gard’s parents should let him die’: Mum whose baby’s life support was turned off tells of own agonising decision” by Lisa Salmon.

Yet, however distressing and deeply sad this might be, *I can’t be alone* in thinking that it is the right thing to do. (*Daily Mail*, July 5)⁷

Although the case was about Charlie Gard’s life, the broadsheets also connected it, and especially the public response, to broader social questions, condemning both *sentimental extremity* and the shunning of expert advice. Not only do we find numerous expressions of evaluation, but also intensification with non-core vocabulary, *beams down*, *pandemic*, *knee-jerk feelings*, *stoked*.

- (15) The global response to Charlie has indeed been spectacular. It has also been excessive, a troubling example of the sentimental extremity that beams down on an ever-rotating cast of individuals taken up and trended by global social media.

But what worries me most is that – in the midst of our obsession with individual stories like Charlie Gard’s – we seem to be losing the ability to grapple with the bigger picture entirely, a picture so complicated these days that we need all the specialists we can muster to guide us through it.

Instead, the opposite appears to be happening. A pandemic of emotional inflation, stoked by Twitter et al. means that experts are shouted down and knee-jerk feelings are deciding everything from attitudes towards Brexit to the handling of the Grenfell Tower disaster. (*Daily Telegraph*, July 16)⁸

In the previous examples, personalization or the writer’s subjectivity mean the paper can maintain a certain distance from the content. In contrast, the *Guardian* Comments tended to draw on shared values, presumably assuming that few among its readership would object to basic concepts such as parents’ duties to their children and children’s rights, as in the following example.

- (16) These are the steps. The first is to recognise that children do not belong to their parents. Second, when a claim is made that parents have rights over their children, it is important to step back and examine the language used. We need to remind ourselves that parents do not have rights regarding their children, they only have duties, the

⁷ From “Is it time to let Charlie go? Tragically yes. Sometimes true love means saying goodbye, not holding on no matter what” by Jan Muir.

⁸ From “The tragic case of Charlie Gard has become an exercise in competitive emoting” by Zoe Strimpel. Here the underlining is used to highlight the non-core vocabulary.

principal duty being to act in their children's best interests. This has been part of the fabric of our law and our society for a long time. Third, if we are concerned with the language of rights, it is, of course, children who have rights; any rights that parents have exist only to protect their children's rights. (*Guardian*, July 24)⁹

As shown in the examples, the language of the media is not particularly intent on supporting openly one or other of the points of view. They are rather interested in keeping the debate alive, using emotional attitudes and offering contrasting opinions or reflections on the dichotomies of rights and duties.

5. CONCLUDING REMARKS

As so often in this increasingly specialised world, the facts of the Charlie Gard case, the medical and scientific facts, were beyond people's understanding and ability to evaluate. They had to rely on the way information was presented to them in order to form an opinion. The findings of the analysis carried out with Appraisal Theory show some unexpected results.

Firstly, the institutional texts, both medical and legal, use the full range of resources, and particularly interesting is the use of AFFECT and APPRECIATION referring to feelings in the hospital statement. This suggests the language of institutions, not only legal but also medical institutions, has an increasingly personal and 'human' face. As the case challenged the decisions of experts, the statement issued by GOSH may have been an attempt to ward off some of the criticisms and accusations levelled against it, albeit within the constraints of privacy and professional decorum, to restore trust in the hospital and 'rehabilitate' its image.

Secondly, and in contrast, the press used less evaluation than might have been expected. In actual fact, there is still a lot of evaluation, but it is embedded in reported speech so that it can be attributed, thus allowing the papers to appear neutral. Public opinion is obviously influenced by newspapers that can select, highlight or ignore certain bits of information, but they also respond to readers' interests and concerns

⁹ From "Despite Charlie Gard's tragic story, we must respect the process of our courts" by Ian Kennedy.

and closely reflect those readers’ opinions and attitudes. On topics like migration which is politically loaded, a reader will have a fairly good idea of what s/he will find in the article and the type of opinions expressed (Turnbull 2018). But, in this case involving highly sensitive and personal issues, the press does not seem to be trying explicitly to influence readers in one direction or another, because it cannot reflect the readership of a paper as a whole. The assertions presented here as bare, with very little explicit evaluation and argumentation, leave the reader to use his knowledge, understanding, beliefs and ethics to form his own opinion or make his own interpretation of the words. It would seem in this case that newspapers do not lead their readers, but rather second the divergent opinions circulating on social media in a neutral, at times ambiguous, manner, so as not to lose their readers.

The case stimulated a serious debate among medical ethics experts, which is still ongoing. Discussions revolve around the meaning of a child’s best interests, thresholds for experimental therapy and parents’ rights to decide for children. Two eminent scholars, Wilkinson and Savulescu believe that “Ethics is not about personal opinions, but about argument, reasons and rational reflection” (2017, 1). Unfortunately, in this case there was little argumentation and reasoning about the ethical issues presented by experts or the press. Statements presented as epistemically certain and argumentatively indisputable, despite being themselves the conclusions of argumentation processes, were common. Evaluation was generally limited to the ‘safe ground’ of references to the expertise of the medical staff and expressions of sympathy and compassion when referring to Charlie’s parents, often leaving the question of the best interests of a child in the background.

Further research may include the analysis of texts related to more recent cases, such as Vincent Lambert. In this circumstance, the decision about the life and death of an adult, unable to express his will, opened a wide debate involving medical points of view, but also intertwined with contrasting opinions within his family (wife vs. parents). Ethical issues of this kind are becoming increasingly frequent and feed discussions which reflect the changing values of modern-day society, making them worthy of special attention.

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