

Preface

In the first season of Netflix's comedy *The Chair*, embattled English professor Bill Dobson is asked to work with the campus communications office in order to craft a letter of apology to his students for an offensive joke he used during a lecture. He refuses, stating, "I don't co-write." I imagine I was not the only applied linguist who heard this line, laughed a bit at the seemingly out-of-touch academic, and then said to myself, "That just wouldn't work in applied linguistics!" For many of us in the field, researching with colleagues, and, yes, in many cases, co-writing with them is central to our work and an aspect of our field that we both value and enjoy. Further, and as illustrated in the following chapters, we also know that working on teams is crucial in health research, education, and policy. In fact, moving from "bench to bedside and back again" with a team of health professionals and language experts is, in almost all respects, an *essential* aspect of applied linguistics work on health and healthcare-related issues.

In many ways, the book you are holding right now or reading on your computer screen is a product of these types of collaborations. In this case, the group formed in the summer of 2019 when Brett Diaz connected a group of researchers interested in presenting at an American Association for Applied Linguistics (AAAL) symposium with the same title as this book. Brett asked me to be the discussant on that panel along with the presenters: Emily Feuerherm, Peter Torres, and Abdesalam Soudi. I know we all were particularly excited by the specific focus of the symposium on the applied part of our work. As Brett wrote at the time, he wanted the symposium and discussion to be "as much about who as what." In other words, as we prepared our presentations and discussion points, he wanted us to emphasize not just the results of our work but, as Brett later wrote in the proposal for this volume, "the paths scholars take in applying their linguistic specializations." With this focus, we were all happy and excited to receive acceptance for AAAL 2020. Then, as is now a common story, COVID-19 delayed not just our conference symposium but also the work on this edited book that Brett was planning to use the symposium to jumpstart. Our initial conference plans were on hold, and like everyone else in the field, we had to recalibrate how we do conferences as well as how we perform all aspects of our professional lives, from teaching to research collaborations. With luck and hard work, AAAL was able to organize an online conference in March of 2021, and the symposium was accepted again for inclusion. The online, recorded presentations and discussion may have limited how we collaborated on the symposium, but the conversations and knowledge building about applied linguistics and health research presented during the symposium were as engaging for both presenters and audience members as they would have been in person. In the meantime, in the intervening

year, Brett recruited additional chapter contributors for this book. I mention this brief timeline of the collaboration on the symposium and edited book in order to emphasize the fits and starts that occur in most research and writing collaborations. In addition, the extended timeline needed for this book project also illustrates the perseverance and dedication needed to make research collaborations work under any conditions, and the excellent and varied chapters in the book, including the single-authored chapters, reveal the contributions that result from such extended and deeply engaged research collaborations.

This is not to say that the personal, reflexive, and collaborative aspects of applied linguistics research is simple or easy. The final chapter of this volume is a dialogue among chapter authors and lays out many of the frustrations and benefits of doing this work in collaboration with health professionals and community organizations. In particular, one of the fundamental tensions in applied linguistics – the desire to help solve “real-world problems” while also contributing to theoretical understandings of language, communication, and identity – appears in many of the chapters and the final chapter discussion. This balance is tricky and, perhaps, inevitable. Doctors and nurses want to know the best way to ask patients about their symptoms, health policy writers want to know the correct verbs to use when writing instructions for drug prescriptions, and medical translators want to know exact, one-to-one translations of key medical terminology. Health professionals often do not feel they have the time in their workdays to struggle with the complexities of language and want straightforward answers that we, as applied linguists, feel might leave out or ignore too much about how and what languages do. In addition, applied linguists working in health contexts often feel helpless in relation to bigger structural issues such as rising healthcare costs, hospital closures, and deteriorating public health infrastructure, all of which were exacerbated by COVID-19.

Despite the complexities and difficulties working on health research in applied linguistics, this book is an argument for why this research is so important and why these inter-disciplinary collaborations are so essential. In her opening keynote address at the International Association of Applied Linguistics (AILA) triennial world congress in 2021, Professor Diane Larsen-Freeman noted this about interdisciplinary research collaborations in applied linguistics: “To deal with a truly complex world we need transdisciplinary, maybe post disciplinary thinking . . . where the overarching definitions of knowledge are being broken down.” She cited as an example, a recent job posting at Northeastern University in the United States for an Assistant/Associate Professor in Environmental Cognition where the Psychology Department, Department of Marine and Environmental Science, and the School of Public Policy would share the position. Larsen-Freeman argued that

these types of collaborations across academic fields and disciplines represent “the sort of thinking, I believe, [that] may save us.”

In the same way, the focus in the following chapters on the interdisciplinary paths different researchers took in addressing their particular issues should continue to be at the core of future applied linguistics work. COVID-19 and the faltering responses of governments and communities throughout the world has made it clear that it is impossible to approach our work as applied linguists in health research alone as the isolated academic, thinking alone in our metaphorical tower. Researching in teams and, in many cases, co-writing as part of that team are simply required aspects of work in the field. Luckily, we have books like the current volume to continue pointing the way forward to this inter and post-disciplinary future.

Paul McPherron
Hunter College, City University of New York
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