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Determinologisation in Medical Texts Within the Framework of Community Translation: A Corpus-Based Study

Elina Symseridou[1,*,†], Elpida Loupaki[1,*,†]

Aristotle University of Thessaloniki, Thessaloniki, 54124, Greece.

*Contributing author(s). E-mail(s): elensyms@frl.auth.gr;
eloupaki@frl.auth.gr
†These authors contributed equally to this work.

Abstract

This paper presents the preliminary findings of an ongoing post-doctoral research investigating the phenomenon of determinologisation of medical terminology in texts intended for the general public, specifically targeting refugee women. Building upon research demonstrating that language barriers and low health literacy hinder their healthcare access, this corpus-based pilot study examines specialised and lay English medical texts on maternity (breastfeeding), aiming at identifying determinologisation strategies. This study seeks to contribute to a better understanding of how to effectively communicate complex medical information to diverse populations, thereby improving health literacy and promoting equitable access to healthcare.

Keywords: Community Translation, Determinologisation, Medical Texts, Corpora, Refugee Mothers, Health Literacy

1 Background of the Research

Access to quality healthcare is a fundamental human right. However, discrimination on the basis of ethnicity and the lack of translation services within healthcare settings significantly impede access for many, particularly refugee mothers. This is underscored by studies highlighting that refugee mothers face significant barriers to fair and effective healthcare, due to language and cultural differences, lower health literacy, and limited access to information (Gil-Salmerón et al., 2021; Samiotaki-Logotheti, 2023; Hirani, 2024).

Community translation or *translation for public services* (Taibi, 2011; Angelelli & Baer, 2015; Ruiz-Cortés, 2021; Gonzalez et al., 2023) is the provision of direct and reverse translation of texts produced by public institutions, hospitals, and non-governmental organisations, in any language combination, in order to facilitate relationships between foreign language speakers (Vyzas, 2017, p. 336). Notably, community translation encompasses a wide range of texts, including crucial medical information such as guides on disease prevention (e.g., vaccinations, hygiene rules, and prevention guidelines). Terminology is not the

main element determining community translation, as the textual genre and especially the communicative context, with its inherent power relations between the state and foreign language speakers, are very important parameters (Vyzas, 2017, p. 337). While the key role of community interpreting in addressing these challenges has been widely acknowledged, the importance of community translation in healthcare and refugee settings remains underappreciated. This oversight is evident in the limited attention given to the role of translation within broader language policies, despite numerous studies on language rights and migrant integration (e.g., Piller, 2016; Calvert, 2024). This gap is critical, as translation services can significantly complement and support interpretation services in overcoming communication barriers and improving access to healthcare for refugee populations.

Popularised medical texts are informative texts (Reiss, 1981) that address health issues to build further knowledge in health promotion, prevention, control of unhealthy behaviours, and the understanding of basic information for the layperson. These texts, whether in print or digital form, aim to empower individuals with different levels of education and health literacy to make informed decisions about their health (Smith et al., 2009).

2 Theoretical Framework

Determinologisation is a complex and multidimensional linguistic phenomenon that is closely associated with semantic shifts and term variation, exemplifying the interaction between general and specialised language. In fact, the concept of determinologisation encompasses two distinct meanings, in relation to the theoretical standpoint used.

The primary meaning is grounded in the disciplines of terminology and lexicography, and refers to the increasing integration of specialised terms into every day non-specialised discourse (Ungureanu, 2006; Renouf, 2017; Humbert-Droz et al., 2019). Nová, in her study of determinologisation, argues that during this process a term "loses its accuracy, gets new connotations, and the word can be even moved to refer to a completely different thing" (2018, p. 387). Illustrations are offered by Costa et al. (2022), who explore the determinologisation process using the term *COVID-19* as a reference for European Portuguese, and by Honová and Holeš (2023) in their study about psychiatric terminology used in non-specialised contexts.

The second meaning describes the process of simplifying terminology in a non-specialist context. On a lexical level, this process involves lowering the register and adapting textual genres for a non-expert readership through explicitation or replacement of scientific terms. In this second sense, the phenomenon is related to both interlingual and intralingual translation, which is why it is often examined within the theoretical framework of translation studies (Montalt & Shuttleworth, 2012; Jiménez-Crespo, 2017). In this sense, determinologisation–also referred to as "decrease-in-technicality" by Hill-Madsen (2015, p. 92) or "popularisation" by Lambrechts and Verplaetse (2018)–is closely linked to the target audience and the *skopos* of the translation.[1] On this basis, it is related to the strategies of vulgarisation and adaptation, aiming to facilitate the broader dissemination of knowledge and enhance comprehension among lay readers.

When providing health information to newly arrived refugees and asylum seekers, it is important to ensure that the content is clear, concise and culturally sensitive. To reduce the technicality of a text so that it can be understood by non-specialists, popularisation strategies can be used in the process of cross-language translation. Through these strategies, specialised scientific terminology can be transformed into lay terminology, to ensure what Hill-Madsen call "the skopos of enhanced accessibility" of the text (2015, p. 92).

In relation to intralingual translation from technical to non-technical texts, Hill-Madsen (2015) distinguishes four types of lexical strategies used when dealing with terms:

1) Decrease-in-technicality: replace the technical term with a non-technical one,
2) Decrease-in-formality: use of less official register,

[1] Introduced in translation studies by the German functionalist school, the concept of *skopos* (from the Greek word *σκοπός*, meaning *objective*) is the function of the target text (TT) with respect to the target audience, influencing the strategies chosen by the translator (Delisle et al., 1999).

3) Non-technical paraphrase: rendering the source text freely,
4) Explicitation: making explicit what is implicit in the source text.

This categorisation may offer valuable insights for translation studies, particularly regarding the strategies employed in translation. However, it remains too general for the specific objectives of our research. For this reason, we turn to the framework proposed by Lambrechts and Verplaetse (2018, p. 37-38), who outline a more targeted set of strategies. According to these authors, popularisation strategies can operate at the level of the term, replacing the scientific term with a popularised one. More specifically, Lambrechts and Verplaetse examined the method of popularisation in drug instruction leaflets, and distinguished the following strategies:

S.1 scientific term + popularised term,
S.2 popularised term + scientific term,
S.3 popularised term without the addition of a scientific term or explanation,
S.4 scientific term + explanation,
S.5 popularised term + explanation.

In this paper, the phenomenon of determinologisation is understood as the process of simplifying complex medical terminology to make it understandable for non-specialists, specifically within the context of medical information for refugee mothers. By analysing the strategies employed to simplify medical information, this research aims to contribute to the development of more effective and inclusive healthcare communication for diverse populations.

3 Research Aim and Questions

The general aim of this post-doctoral research is to study the phenomenon of determinologisation in medical texts written in English, French, and Greek, addressed to the general public, i.e., to non-specialists. More specifically, this research aims to identify, analyse, and compare the strategies employed in these three languages in medical texts, to simplify terminology for refugee mothers. For this reason, the following questions will be addressed:

- Are the strategies described by previous scholars (for instance Lambrechts & Verplaetse, 2018), observed in our study?
- What terms are popularised in our study?
- What linguistic and/or textual factors influence determinologisation?

4 Research Methodology

To study determinologisation strategies, and in particular the strategies of term substitution and explanation, this research employed a corpus-based approach to analyse a collection of medical texts, both technical and non-technical. The corpus-based approach utilised in this study leverages previous work of both authors with reference to terminology (Loupaki, 2018a, 2018b; Symseridou, 2018). As to the language studied, this paper has focused exclusively on the English language, as it presents the results of a pilot study.

4.1 Corpus Design

For this pilot, the corpus design involved the careful selection of two distinct text types to represent the target domain: specialised texts and lay texts.

- **Specialised texts**: Texts written by medical professionals for other professionals (an expert-to-expert communication setting), such as breastfeeding guides for the medical profession. As argued by Humbert-Droz et al. (2019), specialised texts "constitute the primary material on which linguistic analyses are carried out, mostly from a tool-based approach".
- **Lay texts**: Comparable texts, i.e., belonging to the same subject matter, intended for the general public, such as articles from breastfeeding-related websites and guides.

In both categories, the focus has been on texts related to breastfeeding, which is a crucial topic for infant health and immunity. Interruptions in feeding practices and poor complementary feeding dramatically raise the risks of malnutrition, illness, and death, especially in emergency situations.

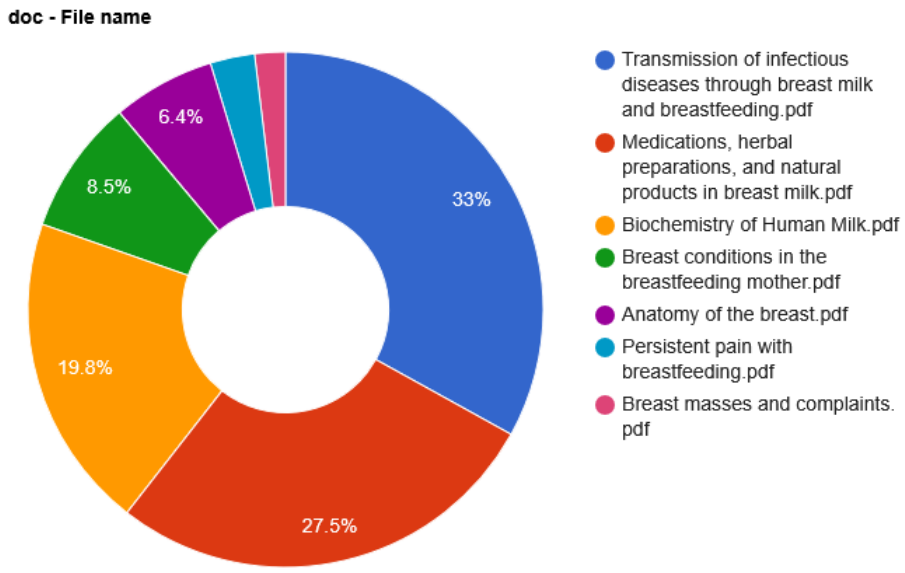

Fig. 1 Sub-corpus: Medical

The selection of texts for inclusion is based on their relevance to the subject matter and either the professional status of the author (such as a paediatrician or midwife) or the institutional authorship (such as an established organisation like the World Health Organisation or United Nations High Commissioner for Refugees).[2]

4.2 Corpus Compilation

Following the collection of texts, a specialised and a lay text corpus were constructed using Sketch Engine. Prior to uploading the guides, the PDF files were processed to exclude extraneous pages containing images, tables, and references, as well as chapters irrelevant to the research topic. This was accomplished by splitting the PDFs using TinyWow, manually removing the extraneous pages, and then merging the remaining pages back into a single file with the same tool.[3] The specialised corpus was based on the subject-specific publication *Breastfeeding: a Guide for the Medical Profession* (Lawrence & Lawrence, 2021), and served for extracting terminology frequently used in the subject matter. This corpus of 296,226 words has been divided into two sub-corpora (Figure 1 and Figure 2):

- **Medical** (199,557 tokens, ~162,807 words, 55%), which focuses on breast conditions (anatomy and diseases), and
- **Practical** (163,535 tokens, ~133,418 words, 45%), which focuses on practical breastfeeding matters (lactation/milk production, milk types/composition, and breastfeeding practices).

The corpus of lay texts contains articles from La Leche League International, La Leche League Great Britain, Health Nexus Santé, the Office on Women's Health (OASH) and guides from the WHO, the Infant Feeding in Emergencies (IFE) Core Group, and UNHCR. This corpus of 229,120 words has been divided into two sub-corpora (Figure 3 and Figure 4) according to the addressee:

- **General Public** (94,948 tokens, ~79,963 words, 34,9%): Texts written by experts (such as midwives and paediatricians) or semi-experts (lactation consultants) for non-experts (English-

[2] Hereinafter WHO and UNHCR.

[3] TinyWow is a free, AI-powered online platform offering a comprehensive suite of over 200 digital tools for tasks like editing PDFs, manipulating images, generating text, and compressing videos. (https://tinywow.com/)

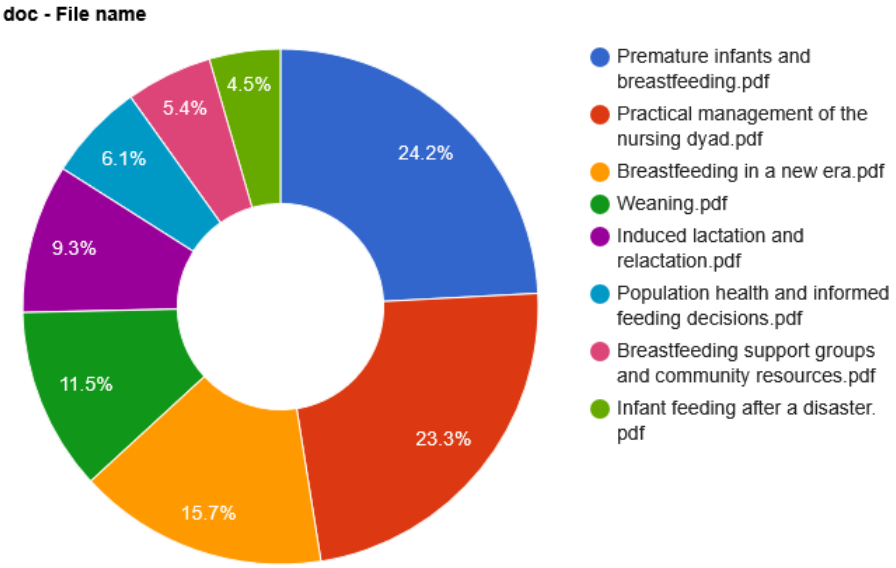

Fig. 2 Sub-corpus: Practical

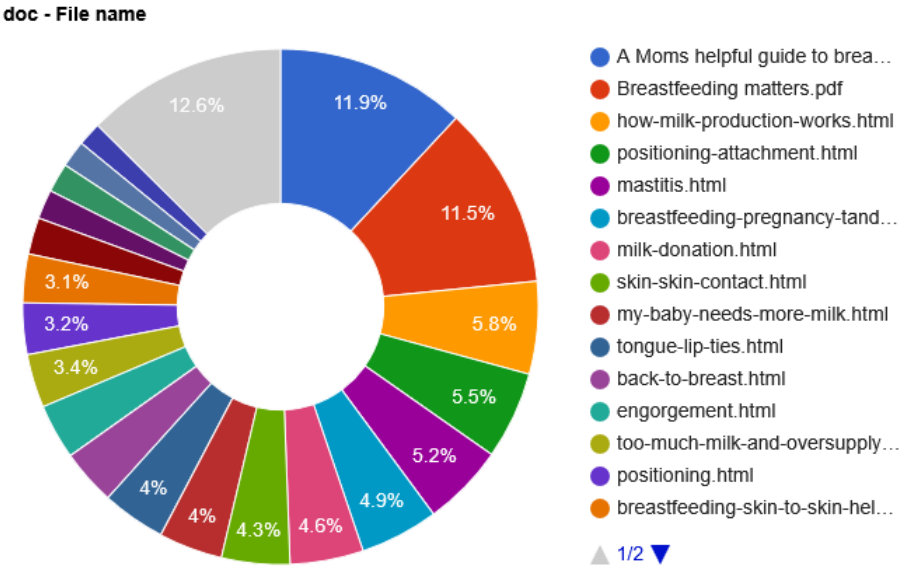

Fig. 3 Sub-corpus: General Public

speaking mothers all over the world) facing no displacement, trauma or poor sanitation challenges.

- **Refugees** (177,107 tokens, ~149,157 words, 65.1%): Guides published by international humanitarian organisations for their staff, i.e., non-experts, supporting refugee mothers in camps, addressing challenges like displacement, trauma, or poor sanitation.

These two sub-corpora, which deal with the same subject matter, were both compared to the corpus of specialised texts to identify determinologisation strategies, as well as to each other. The

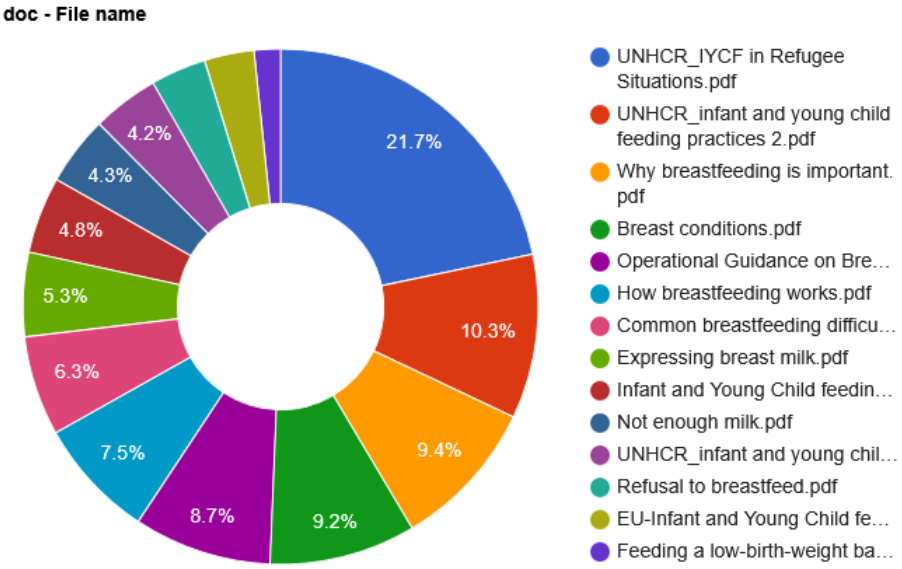

Fig. 4 Sub-corpus: Refugees

Table 1 Examples of single-words

	Word		Word		Word		Word
1	relactation	8	milk-ejection	41	tongue-tie	61	suckling
2	cross-nursing	9	mpinc	42	side-lying	62	skin-to-skin
3	bedsharing	10	rooming-in	43	bottle-feeding	63	feedings
4	lactogenesis	11	infant-feeding	44	dhm	64	chlorpromazine
5	galactagogues	12	postfeed	45	lactated	65	psychologic
6	wellstart	13	babyfriendly	46	vlbw	66	usbc
7	thyroliberin	14	breast-milk	47	primiparous	67	ibclc

inclusion of texts addressed to different audiences is expected to provide a more comprehensive representation of determinologisation in non-specialised texts. Regarding the period considered, the study is primarily synchronic, focusing on the present and the recent past. The texts included in both sub-corpora and the corpus of specialised texts date specifically from 2015 to 2024.

4.3 Data Analysis

To identify breastfeeding-related terms, we employed Sketch Engine's keyword extraction. From the specialised corpus, which was divided into Medical and Practical sub-corpora, we generated lists of both single-words and multi-word terms (Table 1 and Table 2). For each sub-corpus, this process yielded four distinct lists: a list of 300 single-words, a list of 300 multi-word terms, a list of 400 single-words, and a list of 400 multi-word terms. To ensure less noisy results during extraction, different settings for the "focus on" (1 and 0.1) and "frequency" (3 and 5) options were utilised.

Table 2 Examples of multi-word terms

	Term		Term		Term
1	expressed breast milk	18	relative infant dose	35	appropriate risk benefit
2	expressed breast	19	breastfed infant	36	lactiferous sinus
3	mother infant	20	subacute mastitis	37	breast-milk level
4	mother infant dyad	21	breast-milk sample	38	lactation risk classification
5	infant dyad	22	lactating breast	39	donor human milk
6	anatomy of the breast	23	risk benefit	40	postnatal infection
7	lactiferous duct	24	formula-fed infant	41	breastfeeding dyad

Once the lists of keywords/terms were extracted, they were saved in Excel format and subsequently uploaded to MaxAI for comparative analysis.[4] This enabled the precise identification of both common and unique terms across the two lists of 300 and 400 single and multi-words derived from each sub-corpus. Following this comprehensive comparison, candidate terms were carefully selected, and an Excel file containing 100 single and multi-words, presenting thematically organised breastfeeding-related terms, was manually created.

In the following step, we analysed the corpus of lay texts. During this stage, the terms identified in the corpus of specialised texts were examined within the General Public and Refugees sub-corpora. Finally, we have manually constructed a sample table (Table 3) yet presenting thematically organised common terms across the four sub-corpora, along with direct links to their Sketch Engine concordances, i.e., the contextual environment within which these terms were identified and analysed. To construct this table, we analysed the corpus with particular attention to the frequency of lexical items and their thematic categorisation. Drawing on the framework of thematic classification proposed by L'Homme (*classements thématiques*, 2004, p. 85), we organised the terms into four distinct sub-domains:

- Milk production,
- Milk types,
- Breastfeeding methods,
- Breast conditions.

Within each sub-domain, we identified and compiled the most frequently occurring terms that were semantically relevant to the respective category. This approach allowed for a structured representation of the lexical data, facilitating both quantitative and qualitative analysis of term distribution across the different corpora.

In the provided Table 3, the absence of a Sketch Engine link in certain cells in the Medical or Practical sub-corpora columns only means that the term has already been mentioned in a subject-related chapter of the book *Breastfeeding: A Guide for the Medical Profession* (Lawrence & Lawrence, 2021). This chapter was included in either the Medical or the Practical sub-corpus and, consequently, the term is not repeated in both sub-corpora. These sub-corpora divisions were implemented for practical reasons, specifically to differentiate texts related to medical conditions from those concerning breastfeeding practices. However, it is crucial to reiterate that all texts, regardless of their sub-corpus classification, originate from the same primary source.

[4] MaxAI is an AI-powered browser extension that acts as a personal AI assistant, helping users read, write, and search faster online (https://www.maxai.co)

Table 3 Sample of terms

		Corpus of lay texts		Corpus of specialised texts	
		General public	Refugees	Practical	Medical
Milk production					
1	Hyperlactation	https://ske.li/8gt		https://ske.li/8gu	https://ske.li/8gv
2	Oversupply (syn.)	https://ske.li/8gr	https://ske.li/8r2	https://ske.li/8gx	https://ske.li/8gw
3	Relactation	https://ske.li/8g4	https://ske.li/8g3	https://ske.li/8g7	https://ske.li/8g6
4	Let-down reflex	https://ske.li/8hj	https://ske.li/8hi	https://ske.li/8hl	https://ske.li/8hk
5	Induced lactation	https://ske.li/8hn	https://ske.li/8hn	https://ske.li/8hm	
6	Milk /breastmilk expression	https://ske.li/8hp	https://ske.li/8r4	https://ske.li/8hr	https://ske.li/8hq
Milk types					
7	Colostrum	https://ske.li/8g2	https://ske.li/8hh	https://ske.li/8g1	https://ske.li/8gz
8	Foremilk	https://ske.li/8hu	https://ske.li/8r6		https://ske.li/8hv
9	Hindmilk	https://ske.li/8hw	https://ske.li/8r7	https://ske.li/8hy	https://ske.li/8hx
10	Milk bank	https://ske.li/8h2	https://ske.li/8h3	https://ske.li/8hz	https://ske.li/8h1
11	Donor human milk	https://ske.li/8h5	https://ske.li/8h4	https://ske.li/8h7	https://ske.li/8h6
12	Transitional milk	https://ske.li/853	https://ske.li/852	https://ske.li/855	https://ske.li/854
Breastfeeding methods					
13	Cross-nursing	https://ske.li/8h0		https://ske.li/8h8	https://ske.li/8h9
14	Wet-nursing (syn.)	https://ske.li/8ib	https://ske.li/8ia	https://ske.li/8ic	https://ske.li/8id
15	Skin-to-skin	https://ske.li/8hc	https://ske.li/8hg	https://ske.li/8ha	https://ske.li/8hb
16	Nursing strike	https://ske.li/8if	https://ske.li/8ig	https://ske.li/8ie	
17	Mother-infant dyad	https://ske.li/8ih	https://ske.li/8ih	https://ske.li/8ij	https://ske.li/8ii
18	Suckling	https://ske.li/8ip	https://ske.li/8iq	https://ske.li/8in	https://ske.li/8io
19	Kangaroo mother care	https://ske.li/8il	https://ske.li/8ik	https://ske.li/8im	
20	Weaning/Wean	https://ske.li/8ix	https://ske.li/85w	https://ske.li/8iv	https://ske.li/8iw
21	Latch	https://ske.li/8i3	https://ske.li/8i4	https://ske.li/8i1	https://ske.li/8i2
22	Hand expression	https://ske.li/8i5	https://ske.li/8i6	https://ske.li/8i8	https://ske.li/8i7
Breast conditions					
23	Engorgement	https://ske.li/8jd	https://ske.li/8jc	https://ske.li/8jf	https://ske.li/8je
24	Candidiasis/thrush	https://ske.li/8jj	https://ske.li/8r8	https://ske.li/8jg	https://ske.li/8jh
25	Bleb	https://ske.li/8jk		https://ske.li/8jm	https://ske.li/8jl
26	Abscess	https://ske.li/85e	https://ske.li/85h	https://ske.li/85j	https://ske.li/85i
27	Inverted nipples	https://ske.li/85k	https://ske.li/85l		https://ske.li/85m
28	Sore nipples	https://ske.li/85o	https://ske.li/85p	https://ske.li/85r	https://ske.li/85q
29	Blocked ducts	https://ske.li/85u	https://ske.li/85v	https://ske.li/85s	https://ske.li/851
30	Crack (fissure)	https://ske.li/858	https://ske.li/859	https://ske.li/857	https://ske.li/856

In addition to the terms identified and analysed across the four sub-corpora, a specialised list of terms was compiled exclusively from the Refugees sub-corpus to address issues specific to refugee situations (Table 4). These terms do not occur in the other three sub-corpora. This supplementary list focuses on nutrition-related terminology pertinent to these contexts.

Table 4 Sample of nutrition terms (Refugee sub-corpus)

Nutrition		
1	Marasmus	https://ske.li/867
2	Kwashiorkor	https://ske.li/868
3	Marasmic kwashiorkor	https://ske.li/869
4	Acute malnutrition	https://ske.li/87a
5	Wasting	https://ske.li/87b
6	Chronic malnutrition	https://ske.li/87m
7	Stunting	https://ske.li/87c
8	Nutritional oedema	https://ske.li/860
9	Undernutrition	https://ske.li/87l
10	Micronutrient deficiencies	https://ske.li/87k
11	Therapeutic milk	https://ske.li/863
12	Cup feeding	https://ske.li/87d

Table 5 Examples illustrating S.1 and S.2

Sub-corpus General public	**Sub-corpus Refugees**
ex.1: colostrum (first milk)	ex.5: early milk (colostrum)
ex.2: colostrum (early milk)	ex.6: first milk Colostrum
ex.3: milk ejection reflex (MER) or let-down reflex	ex.7: let-down or milk-ejection reflex
ex.4: milk ejection reflex (let down)	

5 Result Presentation and Discussion

The primary objective of analysing the English corpus was to compare lay-oriented texts intended for the general public with those specifically targeted at refugee and migrant populations, as typically disseminated by international organisations. Accordingly, the terms presented in Table 3 were examined in relation to the popularization strategies (S.1-S.5) outlined in Section 2. During this stage, various methods were employed to identify relevant lexical items within each of the two sub-corpora. These included searches for exact terms and acronyms, as well as for synonyms, near-synonyms, and layperson variants. To compile this lexical information, we consulted reference materials such as PubMed[5] and the Merriam-Webster Medical Dictionary and Thesaurus,[6] and extracted synonyms or alternative expressions from the definitions provided. Additionally, to identify popularised or simplified versions of the target terms, we utilised generative AI tools, for instance ChatGPT (GPT-5), by applying informational prompts to generate accessible reformulations based on the original definitions. Formal external expert validation of the terminology list was not conducted for this pilot study. This decision was informed by the intrinsic design characteristics of the corpus, and the fact that the final target language is Greek, for which external expert validation is planned in subsequent stages. Preliminary findings from this analysis are as follows.

With reference to the first strategy (S.1), in which the scientific term is followed by the popularised term, there is a difference observed between texts aiming at the general public and those aiming at refugee populations. In fact, in texts aimed at the general public, the term is typically introduced using its medical (Latin-derived) denomination, with the popularised equivalent provided in parenthesis, as shown in examples 1 and 2 (Table 5). In contrast, the texts for refugee populations display a reversed pattern, exemplifying the second strategy (S.2), in which a lay term precedes the medical one (example 5). In particular, in example 6, a hybrid form is used, coining a new term that integrates both the popular and

[5] https://pubmed.ncbi.nlm.nih.gov/

[6] https://www.merriam-webster.com/medical

Table 6 Examples illustrating S.3

Sub-corpus General public	Sub-corpus Refugees
ex. 8: too much milk [for hyperlactation]	ex.10: mother-infant pair [for mother infant dyad]
ex.9: mother and baby pair [for mother infant dyad]	ex.11: letdown reflex [for milk-ejection reflex]
	ex.12: let-down reflex [for milk-ejection reflex]

Table 7 Examples illustrating S.4

Sub-corpus General public	Sub-corpus Refugees
ex.13: cross-feeding usually means an arrangement when friends, sisters, grandparents and aunties in a relationship of equality share breastfeeding duties	ex.17: wet-nursing means a women breastfeeding another woman's baby
ex.14: hand expression is using your hands to get colostrum and breast milk out of your breasts	ex.18: an abscess is when a collection of pus forms in part of the breast
ex. 15: The milk available at the start of a feed (often referred to as foremilk) has a lower level of fat than the milk at the end of the feed (often referred to as hindmilk)	ex.19: breastmilk substitutes (including infant formula, follow on/follow-up milk, growing-up milk, other milk products, including bottle-fed complementary foods)
ex.16: experts refer to induced lactation as the process of establishing a milk production without a recent pregnancy	

medical designations, with the latter highlighted in a capital letter. Furthermore, in examples 3 and 4, the medical term is prioritised, with the acronym introduced in parenthesis, followed by its popularised equivalent. Conversely, in texts for refugee populations, this pattern is reversed and the acronym is not used at all (example 7).

The third popularisation strategy (S.3), which involves the use of a popularised term without the equivalent scientific term or explanatory content, is observed in both sub-corpora. No significant differences are evident between lay texts addressed to the general public and those directed at refugee populations, as illustrated by the following examples (examples 8-12) (Table 6). The corresponding medical terms, drawn from our specialist-to-specialist corpus, are provided in brackets.

The examples which illustrate the fourth popularisation strategy (S.4), based on the typology proposed by Lambrechts and Verplaetse (2018) in which a scientific term is supplemented by an explanatory phrase, are observed in both corpora equally (examples 13, 14, 17, and 18) (Table 7). Such explanations are most commonly introduced by verbs like *mean*, *is* or *refer to*. In example 15, we observe a variation of the same strategy, where the explanation precedes the scientific term, which is placed in parentheses. In example 16, the scientific term is linguistically introduced by reference to experts and is then explained. Finally, in example 19, the scientific term is explained through exemplification of the various products associated with 'breastmilk substitutes'. In the following set of examples, we illustrate the fifth popularisation strategy (S.5), involving both the use of a popularised term and an accompanying explanation (Table 8). It is worth noting that the popularised terms 'skin-to-skin contact' (example 20), 'nursing strike' (example 21), and 'hunger' (example 22) are semantically transparent, yet the authors deemed additional clarification necessary. When evaluable, the corresponding medical terms drawn from our specialist-to-specialist corpus are here provided in brackets.

An additional category identified in both sub-corpora corresponds to what we propose as

Table 8 Examples illustrating S.5

Sub-corpus General public	**Sub-corpus Refugees**
ex.20: skin-to-skin contact (baby in only a diaper against your bare chest) [for kangaroo mothercare]	ex.21: refusing to breastfeed (nursing strike) [for breast rejection]
	ex.22: hunger (not getting enough milk, growth spurt)

Table 9 Examples illustrating S.6

Sub-corpus General public	**Sub-corpus Refugees**
ex.23: increased milk supply (hyperlactation)	ex.24: re-establish lactation (relactation)
	ex.25: chronic malnutrition (stunting)

Strategy 6 (S.6), in which a (semi) scientific explanation precedes a scientific term. In this new category proposed here, the scientific term is placed in parentheses, and is preceded by an explanation formulated in scientific or semi-scientific language. This case could be related to the category "Decrease-in-formality: use of less official register", proposed by Hill-Madsen (2015). In examples 23-25 (Table 9), drawn from lay texts, the author appears to acknowledge the technical nature of the terms and compensates it by providing explanatory additions, though these are not fully popularised. The lexical items selected for paraphrasing–such as 'increased', 'lactation', and 'chronic'–retain a scientific register.

In relation to the research questions originally posed, some initial findings can be outlined as follows.

In the Q1, "Are popularisation strategies observed in our study?", the findings indicate that all popularisation strategies previously identified by Lambrechts and Verplaetse (2018) were also observed in our pilot study, and a new, 6th strategy was also identified. These findings support our preliminary hypothesis that lay texts concerning breastfeeding are likely to illustrate strategies of popularisation.

In the Q2, "What types of terms are popularised?", while we initially expected that scientific terms related to anatomy and/or disease would be predominantly popularised within our corpus of lay texts, the data revealed a different pattern: terms associated with breastfeeding techniques and types of milk were more frequently simplified. A plausible explanation for this outcome is that the lay texts examined in our study–targeted at both the general public and refugee populations–primarily focus on practical aspects of infant feeding, while offering limited detail on anatomical or pathological topics. This analysis will be rigorously developed through future cross-linguistic work extending to French and Greek lay texts, to validate this pattern and identify underlying socio-linguistic factors. Another interesting finding is that even terms associated with relatively "simple" or familiar subject matters, such as 'hunger' or 'skin-to-skin-contact', were further popularised. This could also be explained by the purpose, or *skopos*, of the intralingual translation. It can therefore be argued that, within health literacy contexts, explicitation strategies are extensively employed when the subject matter is considered vital. In the examples discussed (examples 20, 21, and 22), the focus is placed on infants who refuse to breastfeed or receive insufficient milk intake, which is deemed critical for these vulnerable populations.

In the Q3, "What linguistic and/or textual factors influence the choice of strategy?", results demonstrated that the choice of popularisation strategy appears to be influenced primarily by textual and communicative factors, particularly those related to the intended audience of the texts analysed. For instance, our preliminary results indicate that the authors of lay texts–whether aimed at the general public or refugee audiences–employ the full range of available popularisation strategies. With the exception of strategies S.1 and S.2, which show differing frequencies across the two sub-corpora, all other strategies appear to be used consistently. This observation may be supported by the fact that English

functions as a *lingua franca*, given that the lay texts under examination are not exclusively intended for native English speakers. Finally, another communicative factor that we should take into consideration is that English-language materials intended for refugee mothers are often not directly addressed to them. In most cases, the information is conveyed by intermediaries such as volunteers, social workers, midwives, or administrative personnel. Providing popularised versions of medical information supports these intermediaries in recognising the linguistic and conceptual challenges faced by the end recipients, thereby underlying the necessity of determinologisation strategies.

6 Further Perspectives

As already demonstrated, our piloting showed evidence of determinologisation strategies in both sub-corpora of English texts. Our future research is expected to shed light on the phenomenon of determinologisation and the strategies used when communicating medical information to non-specialists in French and Greek languages. Furthermore, another expected outcome will be the development of lists of lay-friendly terms related to breastfeeding, which could be used when addressing populations unfamiliar with specialised medical terminology. These lists could serve as a valuable tool when translating interlingually and/or intralingually within the framework of public services. In this regard, the study is expected to further highlight the role of community translation in healthcare and refugee settings, particularly for languages where research on community translation remains limited.

Future work will also be extended to French and Greek medical texts, to provide a cross-linguistic perspective on popularisation strategies.

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