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## DIALECTOLOGY AS ENGAGED HUMANITIES USING THE EXAMPLE OF THE NINJAL'S RESPONSE TO 2011 TŌHOKU EARTHQUAKE

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### Abstract

This research paper explores the potential of dialectology as engaged humanities using as an example the response of the National Institute for Japanese Language and Linguistics to the 2011 Tōhoku earthquake. Following the events of 11 March 2011, Kōko Takeda from the NINJAL created a publication dedicated to health-related expressions characteristic for the Tōhoku region to help medical professionals in their efforts in the disaster area. The paper evaluates the publication's real-life impact by analyzing both the publication itself and the response of the local community. The findings indicate that *Tōhoku hōgen onomatope yōreishū* (Usage examples of mimetic vocabulary in Tōhoku dialects) not only helped to improve doctor-patient communication, but also has potential to be used in future activities aimed at language revitalization and restoring community ties.

**Keywords:** dialectology, engaged humanities, Tōhoku dialect, 2011 Tōhoku earthquake

### LA DIALECTOLOGIA COM A HUMANITATS COMPROMESSES A PARTIR DE L'EXEMPLE DE LA RESPOSTA DEL NINJAL AL TERRATRÈMOL DE TŌHOKU DE 2011

#### Resum

Aquest treball d'investigació explora el potencial de la dialectologia com a humanitats compromeses a partir de l'exemple de la resposta de l'Institut Nacional de Llengua i Lingüística Japonesa (NINJAL) al terratrèmol de Tōhoku de 2011. Després dels esdeveniments de l'11 de març de 2011, Kōko Takeda del NINJAL va crear una publicació dedicada a les expressions relacionades amb la salut,

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característiques de la regió de Tōhoku, per ajudar als metges en els seus esforços en la zona del desastre. L'article avalua l'impacte de la publicació en la vida real i analitza tant la mateixa publicació com la resposta de la comunitat local. L'estudi indica que *Tōhoku hōgen onomatope yōreishū* (exemples d'ús de vocabulari mimètic en dialectes de Tōhoku) no sols va ajudar a millorar la comunicació metge-pacient, sinó que també té potencial per fer-se servir en futures activitats destinades a la revitalització de la llengua i a la restauració dels llaços comunitaris.

**Paraules clau:** dialectologia, humanitats compromeses, dialecte de Tōhoku, terratrèmol de Tōhoku del 2011

#### LA DIALECTOLOGÍA COMO HUMANIDADES COMPROMETIDAS UTILIZANDO EL EJEMPLO DE LA RESPUESTA DE LOS NINJAL AL TERREMOTO DE TŌHOKU DE 2011

##### Resumen

Este trabajo de investigación explora el potencial de la dialectología como humanidades comprometidas utilizando como ejemplo la respuesta del Instituto Nacional de Lengua y Lingüística Japonesas (NINJAL) al terremoto de Tōhoku de 2011. Tras los acontecimientos del 11 de marzo de 2011, Kōko Takeda del NINJAL creó una publicación dedicada a las expresiones relacionadas con la salud, características de la región de Tōhoku, para ayudar a los profesionales médicos en sus esfuerzos en la zona del desastre. El artículo evalúa el impacto de la publicación en la vida real analizando tanto la publicación misma como la respuesta de la comunidad local. Los hallazgos indican que *Tōhoku hōgen onomatope yōreishū* (ejemplos de uso de vocabulario mimético en dialectos de Tōhoku) no solo ayudó a mejorar la comunicación médico-paciente, sino que también tiene potencial para usarse en futuras actividades destinadas a la revitalización de la lengua y a la restauración de los lazos comunitarios.

**Palabras clave:** dialectología, humanidades comprometidas, dialecto de Tōhoku, terremoto de Tōhoku de 2011

## 1. Introduction

At the time when the importance of academic disciplines other than sciences is often disregarded, engaged humanities can be viewed as a response to the ongoing crisis of the humanities, providing evidence that they can also “make contribution to the quality of human life, civic engagement, and public value that is so essential that they deserve maximum support from our universities and our societies” (Davidson & Goldberg 2004: 45-46). Consequently, some scholars have urged academic institutions to seek connections with local communities and take part in projects with a real-life impact (Jay 2010: 55).

This change of mindset has also influenced sociolinguistics, where the old-fashioned way of studying language varieties for research purposes only and detaching

them from their speakers is gradually being replaced by a more engaged approach. For instance, many representatives of the discipline got involved in activities aimed at maintenance and revitalization of endangered languages. In order to ensure that needs of the communities will be prioritized, projects such as *Endangered languages. Comprehensive models for research and revitalization* (2013-2016), carried out by the Faculty of “Artes Liberales” of the University of Warsaw and the Zacatecas Institute for Teaching and Research in Ethnology were situated within Community-Based Participatory Research (CBPR), which requires equal partnership and engagement of scholars, local language activists and organizations during every stage of the project. The result of the research conducted under this new paradigm was not only more effective language revitalization, but also the empowerment of the speakers and overall improvement of the community welfare (Olko & Sullivan 2016: 346). It also has led to a discovery that language, especially for minority groups, is directly connected with their general well-being. Various studies have shown that using heritage language improves one’s mental and physical health and might even help in a trauma healing process, which can be explained by its crucial role in community, culture and identity building (Grenoble 2021: 19-20). Thus, working with minoritized varieties, whether by way of documenting, studying or revitalizing them, can have an undeniable impact on lives of numerous individuals as well as help to create a more just and inclusive world.

This paper focuses on a very particular example of linguists’ engagement in an extreme situation – the response of the National Institute for Japanese Language and Linguistics (Kokuritsu Kokugo Kenkyūjo, NINJAL) to the 2011 Tōhoku earthquake. Following the reports about communication problems between medical professionals and dialect-speaking patients, dialectologists developed the publication titled *Tōhoku hōgen onomatope yōreishū* (Usage examples of mimetic vocabulary in Tōhoku dialects) which contained health-related expressions characteristic of the Tōhoku region. The aim of this paper is to evaluate the real-life impact of the publication by analyzing its content and the press reports featuring the responses of the local community in order to establish potential of dialectology as engaged humanities.

## 2. Publication's origins

On 11 March 2011, the northeastern part of Japan known as Tōhoku region was hit by the most powerful earthquake ever recorded in the country, followed by a tsunami which caused the Fukushima Daiichi nuclear disaster. According to the Fire and Disaster Management Agency report (2021), almost twenty thousand people were killed and six thousand injured as a result of the catastrophe, while more than two thousand are still considered missing. Moreover, numerous villages, towns and cities were heavily damaged, which resulted in the evacuation of many others who lost their houses and property (Mimura, Yasuhara, Kawagoe & Kazama 2011: 808). Some of them, especially from radiation-affected areas in the Fukushima prefecture, have not returned to their homes even ten years after the events and are now trying to rebuild their lives in the locations (Kwok 2021).

Following the earthquake, Japan immediately received donations that reached 520 billion yens by March 2012, as well as offers of assistance from governments, non-governmental organizations and companies (Ministry of Foreign Affairs 2012). The ordinary Japanese rushed to help too – the media even gave accounts of streams of volunteers coming from all over the country to shovel mud, clear debris, clean homes flooded by tsunami waves or use their skills and knowledge in any other useful way (Fujita 2011). That nationwide movement to support the survivors was also joined by the National Institute for Japanese Language and Linguistics, an independent administrative institution, established in 1948 for the purpose of studying, surveying and promoting the Japanese language. The Institute's research interests also include non-standard varieties, and they are known as creators of only two linguistics atlases that cover all of Japan: *Nihon Gengo Chizu* (Linguistic Atlas of Japan, 1966-1974) and *Hōgen Bunpo Zenkokuchizu* (Grammatical Atlas of Japanese Dialects, 1989-2006). Thus, in 2011, inspired by Kaoru Imamura's call to "provide materials that will help medical professionals understand the local dialects in order to facilitate their efforts in the disaster area", the NINJAL's Associate Researcher Kōko Takeda began working on a

publication dedicated to health-related expressions characteristic for of Tōhoku region (Takeda 2011: 9).

Kaoru Imamura, Associate Professor of linguistics at Hirosaki Gakuin University in Aomori, was the first to notice communication problems between local patients and medical professionals from other regions, which were caused by differences between the varieties spoken in Aomori, Fukushima, Iwate and Miyagi, and standard Japanese. Despite the history of language-based discrimination, it belongs to the most prevalent of the Japanese dialects – according to the NINJAL’s survey from 2015 more than 50% of the Tōhoku population still declare using it on a daily basis instead of the standard language (Tanaka et. al 2016). One of the reasons why the medical staff might not have been familiar with them is the general lack of representation and stigmatization of the Tōhoku dialect in the media (see: Tanaka 2011, Kumagai 2019). Thus, it is hardly surprising that medical practitioners reported communication problems, especially in with older citizens who required the most assistance. *Tōhoku hōgen onomatope yōreishū* (Usage examples of mimetic vocabulary in Tōhoku dialects) was thought as an attempt to solve this problem and contribute to better patient care (Takeda 2012: 9). The first and second preliminary editions appeared in September and October 2011, and after consultations with scholars, medical personnel and local residents, the final version was published in March 2012. In the same year, an iOS application was also launched (Qlife 2012).

### **3. Content of *Usage examples of mimetic vocabulary in Tōhoku dialects***

While the Tōhoku dialect has many distinctive phonetical and grammatical features, the author decided to focus on mimetic expressions which are frequently used by the Japanese. Grammatically speaking, they can function as adjectives, adverbs or even verbs, when an auxiliary verb is added, making them a versatile and vital part of language. Moreover, unlike English where such words are limited to imitations of natural sounds, many types of ideophones exist in Japanese. They are

usually divided into three classes: *giseigo* and *giongo* (phonomimes, resembling sounds), *gitaigo* (phenomimes, mimicking the outer appearance or state) and *gijōgo* (psychomimes, expressing inner feelings or mental conditions) (see Shibatani 1990, Hasada 2001). In order to include all of them, the word of Greek origin “onomatopoeia” was used in the title of the NINJAL’s publication. Every dialect has its own set of mimetic expressions and they are often considered bearers of the regional culture. One can be amazed by the number of existing onomatopoeias: although due to the publication’s purpose only the ones that are directly related to health issues were chosen, still, over one hundred appeared in the book.

*Usage examples of mimetic vocabulary in Tōhoku dialects* is divided into three main parts. First, there is a dictionary of the mimetic expressions. It was structured in accordance with *goujon*, i.e. a traditional Japanese system of ordering kana by their component phonemes and assigned to three categories: “physical condition”, “mood” and “other”. The description of each linguistic item contains a list of its existing variants (depending on the location, the expressions may vary due to absence, addition or change to some vowels or consonants), its meaning, information about geographic distribution as well as usage examples (see Figure 1). For instance, the onomatopoeia *serasera*, which is used in the prefectures of Aomori and Iwate, describes the unpleasant feeling of phlegm in one’s throat. It has many forms, such as *shierashiera*, *shieroshiero*, *zerazera*, *zeirozeiro*, and can even be turned into a verb by adding the suffix: *megu*.

**せらせら** lemma

しえらしえら, しえろしえろ, せらせら-ずう (形容詞), せら-めぐ (動詞), せれかれ, せれせれ, せろせろ, ぜいろぜいろ, ぜえら-めぐ (動詞), ぜらせら, ぜら-めぐ (動詞), ぜれがれ, ぜれぜれ, ぜれんぜれん

meaning

意味: 痰がのどにからまって鳴るさま。のどの不快感。  
地域: 青森県, 岩手県

local variants and possible forms

あかさ  
たなは  
まやわ

geographical distribution

usage examples

①「のどあ ぜらせら, せぎも つよいつよい。」  
(のどはせらせら, 咳もちよいちよい)

②「やだら のどあ せらめぐ。」  
(やたらのどが鳴る)

③「のどあ せれがれずうくて, あんべあ わりい。」  
(のどがせらせらして, 具合が悪い)

④「のどあ ぜれんぜれんと 鳴ってきたってあ, せぎあ 出るんだっけねえ。」  
(のどがせらせらと鳴ってきたら, 咳が出るのだったねえ)

translation of example

category

意味  
体調  
気分  
その他

translation of other dialect words used in the examples

単語帳

③あんべあ=具合, 状態  
④出るんだっけねえ=出るのだったねえ

Figure 1. A sample page of “Usage examples of mimetic vocabulary in Tōhoku dialects”. Source: Takeda 2012: 65.

The second part is devoted to other useful vocabulary, with emphasis on body parts, symptoms and sensations *せらせら*. Some of them are accompanied by pictures to make them more accessible. The third one describes the general characteristics of the Tōhoku dialect. Takeda starts by placing this language variety in the classification developed by Misao Tōjō who divided mainland Japanese into three groups: the Eastern, Western and Kyūshū dialects. Tōhoku, along with the Tōkai–Tōsan, Kantō and Hokkaidō dialects, belongs to the first group, as their share some of the linguistic features. The author then explains the characteristics of the Tōhoku dialect, starting with the most distinctive one: the neutralization of high vowels /i/ and /u/, to which it owns its popular name *zūzū-ben*. As a result, words like *susu* (soot), *shishi* (lion) and *sushi* (sushi) all became pronounced *suisui*. Other phonetic features of this dialect include, i.a., replacing a single vowel with a diphthong or voicing of unvoiced consonants in the middle of words, especially /k/ to /g/ and /t/ to /d/. Moreover, before every voiced consonant, a very short or nasal sound is pronounced, making *mado* (window) become *mando*. In some parts of the region, such as Aomori and Iwate prefectures, the pitch accent in certain words may be different from the one used in standard Japanese. When it comes to grammar, particles such as *wa* or *o* can be

omitted or replaced, and volitional, conditional and passive forms are made by adding a different suffix. The publication explains all the complexities of the Tōhoku dialect, illustrating them with examples, which makes it a comprehensive compendium of knowledge about this language variety.

#### 4. Community response to the publication

According to Takeda (2013), the reactions to *Usage examples of mimetic vocabulary in Tōhoku dialects*, of which a thousand volumes were sent to major medical and welfare facilities in Iwate, Miyagi and Fukushima prefectures as well as medical colleges and nursing schools, were overwhelmingly positive. Many doctors reached out to her to share their experiences from working with dialect-speaking patients. One of them, Yoshiyuki Yashima, Director of Iwate Prefectural Ofunato Hospital, even wrote a preface to the second edition of the book. Although in his hospital most of the staff come from Iwate and know the local dialect, he remembers hearing about situations in which doctors and nurses did not know what a patient was talking about but did not want to embarrass them by asking. Yashima's comment draws attention to the fact that conversations between medical professionals and patients are a sensitive matter that should be handled with great care. Recently, there has been plenty of new research done on doctor-patient communication, showing the importance of language in the process of diagnostics and treatment (see Franz & Murphy 2018; Kasimtseva, Kiseleva & Dzhabrailova 2019). Ranjan, Kumari & Arora (2020) claim that a good clinician needs to pay attention not only to their own and their patients' words, but also the body language, posture, gestures and para-verbal components. Thus, they advocate for using patients' language in order to avoid potential miscommunication and correctly assess their needs, perceptions and expectations. These conclusions can also be applied to the case of different varieties of one language, which may also constitute a linguistic barrier. For this reason, *Usage examples of mimetic vocabulary in Tōhoku dialects* can be regarded as a valuable contribution to the improvement of standards of medical care, as it was intended by



the author. Even if the medical staff does not learn to speak a dialect fluently, using one or two words may help to build trust and encourage patients to speak more openly. Unfortunately, it is not possible to find any articles or comments featuring the patients' perspective, so fieldwork would probably be necessary to learn more about the experience of the local communities.

Nevertheless, one can still assume that the publication might be beneficial for the inhabitants. First of all, it documents many expressions and words used in the Tōhoku area, which may help them to survive in a situation when the existence of local dialects is threatened not only by demographic changes, globalization and urbanization that forces younger people to abandon lesser-known varieties, but also due to the consequences of the 2011 earthquake itself. Many people suddenly died, taking their linguistic knowledge to the grave, which may stand in the way of intergenerational transmission. Some of the villages simply ceased to exist while others had to be abandoned, causing the community to fall apart and scatter throughout the whole country. The users of the Tōhoku dialect had been ridiculed and discriminated against even before the catastrophe, but now another stigma was added as a result of the nuclear disaster, one of the biggest Japanese fears since the Hiroshima bombing. Many people believe that those who were exposed to radiation are contagious and will contaminate others around them. The press even reported on cases where evacuated children were bullied and avoided by their peers, while gas stations refused to provide service to drivers with Fukushima license plates. Therefore, many survivors decided to hide their identity for fear of being excluded (Heath 2013: 50). Even those who returned also find it difficult to rebuild the community spirit. One of the survivors featured in South China Morning Post documentary for the 10<sup>th</sup> anniversary of the Fukushima Daiichi nuclear disaster complained about the changes in his town Namie: before the catastrophe people used to be very close with each other, but now everyone hides in their homes and he does not even know the names of his neighbors (Kwok 2021). There is no denying that all the inhabitants of the region suffered from the trauma related to the tragic events of March 11 that has not fully healed although 10 years have passed. According to the Fukushima Health Management Survey

conducted in 2020, a majority of residents still displayed nonspecific psychological distress, depressive symptoms, post-traumatic stress symptoms, and anxiety symptoms (Shigemura et al. 2020: 14). This is not surprising as the sudden calamity took their loved ones and destroyed their homes, their source of income and overall life stability. Taking into consideration the findings of Olko & Sullivan (2016) or Grenoble (2021), it seems that engaging in the revitalization of the local varieties with the help of the NINJAL's publication may improve their well-being by giving them back their sense of agency and restoring the connection to the community. Furthermore, thanks to Takeda's project, the topic of the Tōhoku dialect appeared in the press, on television and on most major internet portals, arousing interest of not only dialectologists such as Kawagoe (2012) or Saito (2018) who continue to study the mimetic expressions, but also of ordinary citizens. This new representation may even help to change the negative perception of this variety among the inhabitants of other regions or convince them to visit, which would be helpful for Tōhoku's economic recovery.

## 5. Conclusion

The NINJAL's response to the 2011 Tōhoku earthquake has shown the potential of dialectology as engaged humanities. The scholars who, like Kōko Takeda, own a lot to the members of speech communities they used as informants can repay them by using their expertise in the hour of need. What is more, this specific project was carried out in cooperation with local institutions, such as medical and welfare facilities and schools in order to ensure that the needs of survivors were being addressed. As a result, the publication *Usage examples of mimetic vocabulary in Tōhoku dialects* was not only a helpful solution to the problem of doctor-patient miscommunication but can also be used in future activities aimed at language revitalization and restoring community ties. Moreover, the book has contributed to bridging the gap between the academy and the society, leading to the development of a brand new subdiscipline of engaged linguistics referred to as welfare linguistics. Both the project initiator Kaoru

Imamura and Takeda herself continued to work on topics such as communication with victims of natural disasters and the role of language in medicine, inspiring others to share their committed approach to linguistics. According to Heinrich (2021: 23), a welfare linguist must acknowledge that language diversity is always related to some kind of inequality as well as try to identify and combat the mechanism of exclusion. Therefore, if this type of research is continued in the future, it will not only be beneficial to the population of Tōhoku, but also all the other communities that face language-based discrimination.

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