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Plain and Easy Language as a means to increase health literacy on COVID-19

A contrastive analysis of English and German texts

Abstract

During the current health crisis, access to medical information is paramount. However, specialized content needs to be handled carefully in order to be understandable outside circles of experts, and this is all the more so for certain categories. In this context, Easy and Plain Language – both forms of intralingual translation – texts are being used as a means to increase comprehensibility and thus foster health literacy on COVID-19. The present paper aims at analyzing some instances of these texts in English and German, so as to pinpoint their characteristics and highlight their crucial role in information democratization, not only with respect to this pandemic, but well beyond it. In fact, despite sharing the same purpose, such language varieties have different traits and traditions in distinct countries. Furthermore, the analysis also highlights that the abovementioned varieties have different realizations in the framework of the same designation, as well.

1 Introduction

[...] Within a few more days, the team had electron microscope images of round viral particles, each particle encircled by a corona of knobs. This was so unexpected that one microscopist on the team had recourse to what amounted to a field guide; he browsed through a book of viral micrographs, looking for a match, as you or I might do for a new bird or wildflower. He found his match among a group known as the coronaviruses, characterized by a corona of knobby proteins rimming each viral particle. (Quammen 2012)

This excerpt from *Spillover: Animal infections and the next human pandemic* by David Quammen, an unfortunately far-sighted book, is a clear instantiation of popularization of science and medicine. The writer, in fact, addressed his work to a wide audience: As shown by these few lines, it is not a scientific article or a manual for doctors, but a narration which can be understood by laypeople, too. It was therefore deemed to be an appropriate introduction to this paper, which aims at discussing the ever-current – and nowadays particularly topical – issue of making medical information available and comprehensible even beyond circles of experts.

As a matter of fact, information democratization has played a crucial role for quite some time. In Italy, for instance, a series of books called *Libri di base* (“Basic books”) was

published in the 70's and 80's on the basis of basic vocabulary, so as to make scientific information of various fields available to all readers, even those with low levels of education. This matter has become even more topical in the current pandemic, since *everyone's* health literacy on COVID-19 and their consequent behavior have impacted not only their own safety, but also that of other people.

Communication in this field, in spite of being paramount, has raised critical points recently. Already existing health disparities risked being – and in some cases were – exacerbated due to the difficulty for certain groups to access information during the pandemic. A self-evident instance is given by minority language speakers, for whom, in some cases, translations of resources to enhance health literacy have to be provided *ad hoc* (“intrasocial translation”, cf. Jiménez-Crespo/Sánchez 2017: 413) in order to overcome the language barrier (cf. Rink 2018: 31). In fact, it has been highlighted – with regards to the USA – that “access to relevant information that is communicated in the language spoken by many reservation residents may play a key role in the spread of COVID-19 in some tribal communities” (Rodriguez-Lonebear et al. 2020). With respect to the translation of medical information, in Australia the Aboriginal Medical Services Alliance Northern Territory (AMSANT 2021) guaranteed access to information in several Aboriginal languages, such as Warlpiri, Yolngu Matha, and Yanyuwa, just to mention a few.

Furthermore, linguistic barriers (more specifically language and cognitive barriers, referring to the categorization of communication barriers put forward by Rink 2018: 31) may hamper communication with other target groups, too, e. g. people with cognitive and intellectual disabilities, dementia-type illnesses, dyslexia, ADHD (attention deficit and hyperactivity disorder), aphasia, prelingual hearing impairment, functional illiteracy, etc. Needless to say, some of these categories may suffer from underlying health disparities which could be worsened by the pandemic.

The present paper will analyze communication concerning COVID-19 aimed at these target groups, as well as, more generally, non-experts in the medical field, through two types, or degrees, of simplified language which have seen a remarkable surge of interest lately, i. e. Easy (or Easy-to-Read¹) and Plain Language, thereafter referred to respectively as “EL” and “PL”.² While the former foresees a limited set of linguistic characteristics, the latter, aimed at a wider audience and used to make specialized texts (for instance in medical and administrative settings) understandable, is “conceived as a continuum that bridges the gap between Easy Language on the one side and expert language (or standard language respectively) on the other” (Maaß 2020: 12) and is not subject to such strict rules. Also the sociologist Kellermann (2014: 7) attempted at providing a definition for PL, opposing it to EL and stating that it is characterized by a more complex language style; in addition,

¹ This term, although not deemed to be as appropriate as “Easy Language” by some scholars (cf. e. g. Maaß 2020: 52–56), has a high frequency of use; therefore it was added here so as to enable readers who may be more familiar with this variant to identify the concept.

² Both labels are hyponyms of the term “Easy to Understand”, or “E2U” (e. g. Perego 2020a,b).

she pointed out that its formulation possibilities and design are established less specifically.

It should also be mentioned that EL, while designed mainly to cope with the needs of the aforementioned target groups, i. e. people with cognitive and intellectual disabilities, may also respond to the needs of language learners and foreign people with a low level of proficiency, thus solving – or at least mitigating – the issue of minority language speakers. The same holds true for PL, which, *inter alia* in the German National Action Plan Health Literacy (Nationaler Aktionsplan Gesundheitskompetenz 2018), is regarded as a means to enhance health literacy in migrants and refugees (cf. Schaeffer et al. 2018; Maaß 2020: 62–63). As highlighted by the mention of a continuum,³ EL and PL are not always completely distinct concepts, since they have somewhat blurred boundaries. Both are instances of what Jakobson (1959: 233) calls “intralingual translation” (or “rewording”) in his well-known trichotomy of translation types (the others being “interlingual translation” or “translation proper” and “intersemiotic translation” or “transmutation”), since they consist in adaptations in the same language as their source text, or, using his words, in “an interpretation of verbal signs by means of other signs of the same language”. In this respect, it is also interesting to mention the dichotomy “translation”/“adaptation” (originally ‘Übersetzung’/‘Bearbeitung’) proposed by Schreiber (1993). According to this distinction, translation is based on an invariance requirement – except for language variance; adaptation, on the contrary, is based solely on variance requirements, with the exception of a single text characteristic which should be maintained as in the source text (Schreiber 1993: 125). Schreiber distinguishes between several types of adaptation: augmentative, adapting, and diminutive (Schreiber 1993: 263–316, originally ‘augmentative Bearbeitung’, ‘adaptierende Bearbeitung’ and ‘diminutive Bearbeitung’). Language simplification is included by the author in the latter type (Schreiber 1993: 294).

2 Method and materials

The analysis was carried out on English and German texts concerning COVID-19 labelled either “EL” or “PL” (in German “Leichte Sprache” and “Einfache Sprache”, respectively). The EL content to be analyzed in English was selected from the website of the Easy Health organization, a UK charity which provides accessible information concerning health issues. The leaflet in question was written by the Down’s Syndrome Association and shared by Easy Health on a page with a wide offer of information on COVID-19. In German, the analysis was performed on content from the *Bundesregierung* (Federal Government) website, which also provides information in *Leichte Sprache* pursuant to the BITV 2.0, i. e. *Barrierefreie Informationstechnik-Verordnung* (2011, Accessible Information Technology Regulation), which requires that the websites of all Federal ministries have an EL

³ Beside Maaß (2020: 12), also Bock (2018: 21) as well as Hansen-Schirra and Gutermuth (2018: 15) regard the variation between EL and PL as a continuum.

section. In some cases, similar material (texts or, in one instance, a video) in standard language was consulted from analogous sources, as well, so as to make a comparison between the linguistic resources used.

With respect to PL, the analyzed content was produced by AIR (American Institutes for Research) as a FAQ document to increase COVID-19 health literacy. Similarly, the German PL text under examination was retrieved from the *Koordinierungszentrum Krisenmanagement in Brandenburg* (Coordination Centre for Crisis Management).

In addition to these texts in *Leichte* and *Einfache Sprache* in German, another type of source will be analyzed for this language, as well: it is content from the website *Apotheken-Umschau*, where a list of pages contains information in what is defined as *Einfache Sprache*, but actually tends far more towards *Leichte Sprache* (cf. “Easy Language Plus” in Maaß 2020: 227–262). In general, it should be noted that the diatopic dimension did not play a relevant role in the choice of materials to analyze, since it was not an aim of this study to discuss this factor.

With regard to methodology, the abovementioned texts were evaluated on the basis of their content and linguistic form. Textual and paratextual, syntactic, morphological, and lexico-terminological aspects were analyzed, also considering previous studies in the field of EL and PL, as well as existing guidelines. Thus, the qualitative analysis is not of a merely descriptive nature, since problematic aspects will be highlighted, too, if needed.

3 Analysis

3.1 German *Leichte Sprache*

With respect to textual and paratextual aspects, the analyzed content in *Leichte Sprache* is characterized by the traditional EL layout, left-justified and with little information in each line; it is written in Arial, a sans-serif font, with a font size of 18 and thus increased perceptibility. On one of the two pages under analysis, dealing with risk groups, headings are always made up of questions, while on the other some of the headings are nominal phrases. In the latter case, some questions are introduced at the beginning of the text in order to give an overview of the content to be found below. Another important point consists in allocutives: the German courtesy form “Sie” is used instead of the informal, though more direct, “du”. In fact, the latter should be avoided so as not to lead to patronizing, asymmetrical communication (cf. Netzwerk Leichte Sprache 2009), which in turn may cause stigmatization. Incidentally, with respect to acceptability, it must be mentioned that Maaß (2020: 97) discusses the issue of foreign word pronunciation and maintains that an “intuitive phonetic transcription” (as found in the instance “Covid spricht man so aus: Ko-wit”, see the translation below) is not an option, since it provokes rejection from readers.

As far as syntax is concerned, EL guidelines recommend the use of independent sentences only. In general, this recommendation was followed, for example: “Das Corona-Virus kann eine Krankheit auslösen: Die Krankheit wird Covid-19 genannt. Covid spricht

man so aus: Ko-wit. Covid-19 ist sehr ansteckend” (‘Corona-virus can cause a disease: The disease is called Covid-19. You pronounce Covid like this: Ko-wit. Covid-19 is very contagious’⁴). Another example is the following case of reported speech, where the complement clause was avoided by inserting a colon: “Im Moment denken die Ärzte und Ärztinnen: Covid-19 wird nicht durch eine Schwangerschaft schlimmer” (‘At the moment doctors think: Covid-19 does not get worse during pregnancy’). However, in other paragraphs sentences were not broken down into independent ones, mainly in case of conditional clauses, such as “Wenn Sie Fieber, Halskratzen oder Husten bekommen, nehmen Sie Kontakt zu Ihrem Arzt auf” (‘If you have a fever, a hoarse throat, or a cough, contact your doctor’). In these contexts, Bredel and Maaß (2016a: 391–393) suggest using alternative structures, such as questions, or breaking down the proposition with a colon, as in: “Haben Sie Fieber, Halskratzen oder Husten bekommen? Dann nehmen Sie Kontakt zu Ihrem Arzt auf” (‘Do you have a fever, a hoarse throat, or a cough? Then contact your doctor’) or “Sie haben Fieber, Halskratzen oder Husten bekommen: Dann nehmen Sie Kontakt zu Ihrem Arzt auf” (‘You have a fever, a hoarse throat or a cough: then contact your doctor’). Also Jekat, Hagmann and Lintner (2020: 184) point out that a high syntactic complexity is counterproductive in EL. In this respect, they cite a research conducted by Bütikofer and Chau (2019: 47), who aimed at evaluating the reception of EL texts. This study showed that in a paragraph containing several conjunctions such as “wenn” and “weil”, more than half of the test subjects did not understand the content correctly, although the sentences had been kept short.

With respect to the morphological level, *Leichte Sprache* generally foresees a case system reduction, since the use of the genitive case is to be avoided. This rule is followed here, too: Synthetic realizations are replaced by analytic ones with prepositions, such as “von dem Virus” in lieu of “des Virus”. However, there is no consensus among scholars on this point. For instance, Bock (2018: 52–55) does not recommend avoiding the genitive case altogether, but rather states that common forms may be used and that, in some contexts, a paraphrase with the preposition “von” could even sound childish and create stylistic inconsistencies. As far as verbal morphology is concerned, according to EL guidelines the subjunctive mood should be avoided as well. Yet, sometimes it occurs here, as in “Gehen Sie nicht gleich persönlich zum Arzt. Sie könnten andere anstecken” (‘Do not go immediately to your doctor. You could infect others’), where it is used as a hedging strategy. Similarly, the passive voice is banned by EL guidelines. Nevertheless, several instances are to be found here, such as “Das wird gerade erforscht” (‘That is being studied right now’) or “Die Krankheit Covid-19 wird durch das neue Corona-Virus ausgelöst” (‘The disease Covid-19 is caused by the new coronavirus’). Jekat, Hagmann and Lintner (2020: 177) detected passive use as one of the frequent violations of EL rules, too (along with nominalization and recourse to long sentences). Also Bock (2017: 22) points out

⁴ All English translations of the German instances quoted in the text are mine. In this case (as well as in paragraph 3.3), *coronavirus* was translated with a hyphen in order to point to the presence of this character in the German text. In general, translations were as literal as possible so as to highlight the style and syntax of *Leichte* as well as *Einfache Sprache*.

that passives with the auxiliary “werden” occurred in about half of the texts of a corpus in EL that she analyzed. Furthermore, sometimes passive forms also included modal verbs, which increased their complexity (cf. also Lange/Bock 2016: 129). However, as seen for genitive use, Bock is less strict with respect to passive use in EL. She states that sometimes passives are so usual in a certain context that they may not cause comprehension issues (Bock 2018: 51). In the EL text analyzed in the present article also other impersonal structures, such as the German pronoun *man* – which, according to some scholars, should be avoided in favor of more direct forms (cf. Bredel/Maaß 2016b: 135–137) – were used: “Auch wenn man einen kranken Menschen getroffen hat, muss man zuhause bleiben” (‘Also if you have met an ill person, you have to stay at home’) may have been replaced by “Haben Sie einen kranken Menschen getroffen? Dann müssen Sie zuhause bleiben”. Likewise, Bredel and Maaß (2016b: 135) suggest avoiding adjectives with the suffix *-bar*, since they do not make the agent explicit. Thus, the quite abstract formulation “Über die Mutter-Milch ist der Krankheits-Erreger aber nicht übertragbar” (‘But the pathogen is not transmissible through breast milk’) could have been rendered as a more active sentence, such as “Die Mutter-Milch kann den Krankheits-Erreger aber nicht übertragen” (‘But breast milk cannot transmit the pathogen’).

With regard to lexis and terminology, technical terms are explained: “Virus”, “COVID-19”, “Quarantäne” are defined. Colloquial words, such as “schlapp”, are used, while in other videos in the *Alltags-Sprache* (‘everyday language’) pages of the *Bundesregierung* the adjective “abgeschlagen” occurs. Synonyms are avoided: as recommended by EL guidelines, the same word is used to refer to a concept. Of course, this leads to redundancy, also owing to the ban on pronominal anaphora. Finally, in order to solve the issue of long compound words, hyphens are used, as in “Krankheits-Erreger” or “kurz-atmig”. Although their use is indicated by BITV 2.0, too, some scholars (e. g. Bredel/Maaß 2016a, 2016b; Maaß 2020) put forth the use of a mediopoint (e. g. Krankheits-erreger), since it has a lesser impact on German orthographical rules. Also Hansen-Schirra and Gutermuth (2018: 10) state that the mediopoint is conceived as a reading aid and should be used where a hyphen would lead to orthographical mistakes.

3.2 English Easy Language

The English EL text under analysis has a really different layout from the German one analyzed in 3.1. It consists of many text boxes, each of them usually containing only a left-justified sentence and including a picture, too. The font size is even bigger, which enhances perceptibility. The pictures integrate and reiterate what is stated in the text, so as to improve comprehensibility through multimodality. Some instances are the illustration of a syringe next to the paragraph referring to vaccine injection, or the shield pushing back the coronavirus to illustrate the abstract concept of “safer”. The unambiguity of pictures is particularly important in EL texts, since, as highlighted *inter alia* by Magris and Ross (2015: 21), they should support and simplify the reading process rather than adding further interpretation possibilities and distracting from the main message. A further impor-

tant function of pictures, highlighted by Bock (2018: 77), is to motivate target group readers. Another EL trait which has to do with information organization consists in the presence of lists (although here no bullet points are used) instead of coordinate clauses, as in “Keep on: Washing your hands. Wearing a mask. Staying a safe distance from other people”.

With respect to morphosyntax, passive voice and subordination occur here as well. For example, “People who have Down’s syndrome will be offered a vaccine soon”, “What happens when you are given a vaccine?”. In the case of a conditional clause, in particular, the problem was addressed by breaking down the proposition into two parts with a period: “If you are not sure or worried. You can talk”. However, Bredel and Maaß (2016a: 385–386) advise against the use of such structures for causal and conditional clauses, since they do not enhance comprehensibility. In fact, they claim that a similar use of punctuation may lead to acceptability issues in the light of its agrammaticality and should therefore be avoided (Bredel/Maaß 2016b: 107). These recommendations for German may be applied, *mutatis mutandis*, to the English language, as well.

As regards lexis and terminology, a tendency for explicitation and exemplification may be observed. Concepts like *vaccines* or *viruses and diseases* are illustrated: “Vaccines protect you and other people from catching viruses and diseases. Things like the flu”. This instance also serves the purpose of pointing out the use of very general, almost colloquial words, such as *things*, that is an aspect observed in German, too (cf. 3.1).

Finally, another important pragmatic feature consists in the allocutives: addressing the reader directly, especially in the section where the choice of having the vaccine is discussed, is a call to action. This factor is crucial, since Maaß (2020: 47–48) points out that the ultimate aim of EL is to be action-enabling.

3.3 German *Einfache Sprache*

At first sight, the German text in *Einfache Sprache* differs considerably from the ones in *Leichte Sprache* analyzed above (3.1 and 3.2). It does not contain any pictures and its layout is more similar to standard texts, with several sentences in each line. This tendency corresponds to what was observed by Bock (2014: 21), who already noted that, unlike EL texts, PL texts do not differ substantially from their original version as far as their layout is concerned. However, the examined text is left-aligned rather than fully justified.

On the textual level, a clear information organization, which helps readers better understand and memorize the text’s content, can be noticed. The main title is followed by a subtitle consisting of three questions, which anticipate the content of the whole text. In the running text, each paragraph deals with a specific topic.

Sentences are short, with a tendency towards monopropositional structures: “Viren sind winzige Krankheits-Erreger. Sie dringen in Körperzellen ein und vermehren sich dort. So ist das auch bei dem Corona-Virus. Es verursacht die Lungenkrankheit *Covid-19*. *Covid-19* ist die Abkürzung für *Corona Virus Disease-19*” (‘Viruses are tiny pathogens. They invade cells and reproduce there. It is so also with the corona-virus. It causes the lung disease *Covid-19*. *Covid-19* is the abbreviation of *Corona Virus Disease-19*’).

Both coordination and subordination are therefore quite rare. This tendency towards a really simple syntax corresponds to what is recommended by Baumert (2020: 22), who rightfully points out that, in certain cases, a perfectly correct grammar may still be incomprehensible (more precisely, he states that “in German you can write sentences which oppose any brain elaboration”, my translation).

Concerning morphology, a lower frequency of passive voice than in the *Leichte Sprache* texts was observed. The only instance is “Die Krankheit wird von Mensch zu Mensch übertragen” (‘The disease is transmitted from person to person’), where reformulations, such as “Die Krankheit ist von Mensch zu Mensch übertragbar” (‘The disease is transmittable from person to person’) would only have made the concept more abstract. In this respect, refer to Section 3.1 above regarding adjectives containing *-bar* suffixes.

On the lexical and terminological level, it must be noted that basically all words are quite simple. Technical terms are explained in detail here, as well: for instance, viruses are described as “winzige Krankheits-Erreger. Sie dringen in Körperzellen ein und vermehren sich dort” (see translation above). The concept of “pandemic”, instead, is illustrated through a cataphoric definition: “Viele Menschen stecken sich in vielen Ländern gleichzeitig an. Das nennt man eine *Pandemie*” (‘Many people get infected at the same time in many countries. This is called a pandemic’). Acronyms are explained, too: the extended term for Covid-19 is provided together with its German translation. Technical terms which are not absolutely necessary are avoided: for instance, the paraphrase “kaum Luft bekommen” (‘can hardly breathe’) is used for “dyspnea”. It should also be noted that some compound words, like “Krankheits-Erreger”, “Schutz-Maßnahmen”, “Körper-Abwehr”, are separated by a hyphen like in the *Leichte Sprache* texts. This, again, is all in line with what was pointed out by Baumert (2020: 22), i. e. that it is important for words to be quite easy so that they may enter the long-term memory.

In sum, the characteristics of this text resemble closely those of the *Leichte Sprache*. In the abovementioned continuum from standard language to EL this text tends therefore towards the latter. The same may not be claimed for other PL texts, which tend visibly towards the standard language prototype (e. g. layperson summaries of clinical trials, cf. Schindler 2018; Pedrini 2021).

3.4 English Plain Language

First of all, this text stands out from the others for being a FAQ document, hence its structure is very different from theirs. What they do have in common is the frequent presence of lists, which serve the purpose of highlighting information. In fact, as pointed out by Cutts (1995/2020), not particularly attentive readers can process information contained in lists better than in a single sentence.

Compared to the *Einfache Sprache* text analyzed for German, this text’s syntax is more similar to that of standard language. It is not extremely complex, of course, but that is a characteristic inherent in the English language, which, unlike other verbose, wordy languages, usually tends to be concise (cf. Wierzbicka 2012: 438).

On the morphological level, the passive voice is indeed used, but in certain cases agents are explicitly mentioned or active forms are preferred, as in “Health professionals believe people may have COVID-19 and not have symptoms for a few days. But experts at the Centers for Disease Control (CDC) don’t think this is the main way COVID-19 spreads” or “It may be possible to get COVID-19 this way, but health professionals don’t think this is the main way the virus spreads”. In a situation of great insecurity and so-called “infodemic”, the mention of medical experts rather than an impersonal structure such as “it is believed” may have a positive impact on readers.

From a lexical and terminological viewpoint, technical terms (often of Greek and Latin origin) were replaced by their popular counterpart or by paraphrases: “drowsiness” was used instead of “somnolence” and “vomit” in lieu of “emesis”, while the paraphrase “difficulty breathing” replaced the technical term “dyspnea”, and “bluish lips or a bluish face” was used instead of “cyanosis”. Many definitions are provided, too: some of them are structured as list points, since the corresponding FAQ was to illustrate their meaning (see “isolation”, “quarantine”, “social distancing”, “shelter in place”, “pandemic”, “outbreak”, and “epidemic”). An example of this type of definition is the following: “Shelter in place means staying in your home and leaving only if you must. Shelter-in-place instructions differ based on information from your state leaders”. Other instances, instead, are cataphoric definitions, serving a didactic purpose (cf. Magris 2009: 92): “Other times, a person tests positive for COVID-19, but they can’t pinpoint a connection to others who tested positive. They’re not sure where they were exposed to the virus. This is called ‘community spread’”. Finally, another important characteristic for comprehensibility is the presence or absence of acronyms and initialisms. Here, several of them occur: “COPD” is used without its extended term, “chronic obstructive pulmonary disease” (the authors may have taken for granted that people suffering from this disease would know the initials, but it would have been better to introduce the extended term, too), and “TB” without the extended pathonym “tuberculosis”. In my opinion, in this text the only initialism which does not pose any issues is “HIV”, as it is by far the most widely used label for this pathology (certainly more frequent than the extended form “human immunodeficiency virus”). For the other two pathologies, instead, the extended form is still more frequent and clearer than the corresponding initialism.

3.5 German Easy Language Plus

This text is part of a collection written by *Apotheken Umschau* together with the Research Centre for Easy Language at the University of Hildesheim, which, by creating texts in Easy Language Plus (EL+), attempts at increasing health literacy, but without the stigmatization risks associated with EL (Maaß 2020: 233–262). Hence, some traits of EL are modified to achieve a variety closer to PL. On the whole, it may be claimed that the model of EL+ is to a certain extent similar to Bock’s conception of EL (cf. *inter alia* Bock 2018), with less restrictions compared to traditional Easy Language guidelines and a wider array of linguistic resources.

First of all, the analyzed text's layout does not differ from that of standard texts. Therefore, the rule that requires the presence of a sentence per line does not apply here. Furthermore, there are no pictures typical of EL, and headings are written in capital letters (which is not recommended in EL), so as to adhere to the format of standard texts by *Apotheken Umschau* (cf. Maaß 2020: 266). As far as anaphoric chains are concerned, however, EL rules were usually followed, with the frequent repetition of nouns in order to avoid anaphora resolutions. Yet, a few cases of use of 3rd person pronouns were observed.

EL rules are followed on the syntactic level, too, since a predominance of independent clauses was observed. Subordination is generally avoided through structures like the ones mentioned above (cf. 3.1) with respect to conditionality. Another instance is the following, where an object complement clause with an indirect question was avoided: "Aber die Ärzte wissen noch nicht: Helfen die Medikamente gegen COVID-19?" ('But doctors do not know yet: Do drugs help fight COVID-19?').

From the morphological viewpoint, EL+ allows the presence of the passive voice (Maaß 2020: 245), which is indeed to be found here.

On the lexical and terminological level more words are presupposed to be known by readers than in EL (cf. *ibid.* 275). Yet, technical terms are still explained, as is the case in PL: some instances are the compound word "Schmierinfektion" ('smear infection') and the acronym "SARS", which is introduced together with the German translation of its extended term. In many popular scientific texts, terms of Germanic origin are juxtaposed to the more technical Greek/Latin variant. Here, on the other hand, only the former terms are kept (cf. *ibid.* 269): for instance "Muskelschmerzen" ('muscle pain') instead of "Myalgie", "Gelenkschmerzen" ('joint pain') in lieu of "Arthralgie", or the paraphrase "Häufig können infizierte Personen nichts mehr riechen oder schmecken" ('Infected people often no longer smell or taste anything') for "Anosmie" and "Ageusie". The only exception is the word "Prävention", which is kept and explained through its more transparent synonyms of Germanic origin; yet, it is listed only as part of the name of the European Centre for Disease Prevention and Control, mentioned earlier. Finally, no mediopoints are used here: compound words are hyphenated, but respecting standard orthographical rules.

4 Conclusion

Scholars like Maaß and Rink (2017, 2018), Perego (2020b), or Luttermann and Rawinsky (2020: 154–158) already discussed the importance of intralingual translation and simplification as means to enhance health literacy.⁵ EL and PL are playing a crucial role also in the current pandemic, as can be inferred on the basis of the present texts. The analysis was conducted on a small sample, but it nevertheless gives interesting insights into these two types of communication. As has been shown, these language variants have different

⁵ In these works they refer mainly to EL, but their considerations clearly hold true for PL, too.

realizations even in the framework of the same designation.⁶ As a matter of fact, although they were not considered in the present examination, also many English texts under the label of “PL” found in the preliminary phase of text selection tended towards EL, and several of them were written by associations supporting people with disabilities. This tendency was even more marked in German. This may be due to the longer experience with *Leichte Sprache* in Germany (Maaß 2020: 13) in comparison to *Einfache Sprache*, which is not as common. Another explanation might be that, compared to other PL texts, these are aimed at an even more general public, maybe also without any particular interest in the medical field (as would be the case, instead, for the abovementioned layperson summaries), but who should nevertheless be informed for their own as well as everyone else’s sake. Moreover, the undeniable advantage of such simplified and summarized formulations is that they can be understood even if the reader is not particularly attentive and is just scanning the text to catch its gist. Therefore, these texts serve an invaluable function in increasing health literacy, in particular compared to the frequently complicated, convoluted institutional information that readers often have to face, full of “foggy language”, which “obscures meaning and muddles the mind” (Cutts 1995/2020).

In this respect, it should be noted that the degree of success that intralingual translation enjoys in English- and German-speaking countries is yet to be achieved in many other areas. Hence, these more deeply rooted traditions may serve as a model for other languages on their way towards an increasingly understandable communication, well beyond discourse around the pandemic.

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⁶ Also Bock (2017: 20) points out that, although the label “EL” is relatively well-known, what is meant by it differs considerably; she states something similar also in another publication (Bock 2015: 86), where she notes that both *Leichte Sprache* and *Einfache Sprache* (and also *bürgermahe Sprache*, which, however, was not of importance in the present article) are characterized by heterogeneous realizations and degrees of professionalism. In a similar vein, Baumert (2018: 2) states that there is not just one *Einfache Sprache* or plain language, since both are extremely diversified.

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