
Sociolinguistic Studies on Language Identity Construction in TCM International Communication

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Abstract

Purpose – This paper explores the cross-cultural communication challenges in TCM internationalization, and investigates the core role of language identity in enhancing its overseas cognition and cultural recognition.

Design/Methodology/Approach – Adopting social identity theory, cross-cultural discourse analysis and language power theory, this paper examines the challenges in TCM international communication, involving discourse conflicts, non-standard terminology, Western discourse monopoly and identity barriers. It explores the multidimensional mechanism of language identity construction and proposes feasible optimization strategies.

Findings – This study clarifies that language identity construction is a decisive factor in overseas audiences' acceptance of TCM, identifying core challenges in discourse, terminology, and power relations. It also reveals how language identity is constructed across multiple dimensions, providing targeted solutions for enhancing TCM's cross-cultural recognition.

Research Implications – This study proposes feasible paths to enhance TCM's cross-cultural language identity and international discourse power, including terminology unification, localized discourse construction, media narrative optimization and multilingual landscape building. It establishes a referable framework for the high-quality international dissemination of TCM culture.

Keywords: TCM international communication; language identity; sociolinguistics; discourse system; terminology standardization

JEL Classifications: Z19,Z13,F59

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I. Introduction

Traditional Chinese Medicine (TCM) is an important part of China's excellent traditional culture, and it is also the core carrier of China's foreign cultural dissemination and the construction of a human health community. Against the background of the continuous promotion of Chinese culture's "going out" and the internationalization strategy of TCM, the overseas dissemination of TCM continues to increase, but the communication dilemma in the cross-cultural context is increasingly prominent. There are significant differences in the discourse system of TCM and Western medicine, coupled with the strong influence of Western mainstream medical discourse, TCM often faces problems such as cultural misreading, speech aphasia and insufficient identification in international communication (Li & Wang, 2022; Zhang, 2022). As the core medium of cultural communication and identity expression, the choice and use of language deeply affects the cognitive attitude and cultural identity of overseas audiences. Therefore, solving the identification problem of TCM communication from the linguistic level, and building a TCM discourse system has important practical value and significance for promoting the dissemination of TCM culture.

At present, the research on the international dissemination of TCM in the academic community focuses on translation strategy, communication channels and media operation. The research perspective is relatively single and lacks in-depth exploration at the sociolinguistic level (Chen, 2015; Zhu, 2013). Existing studies pay less attention to language practice, discourse characterization and identity construction mechanism in the process of TCM dissemination. The formation law of language identity and the cross-cultural consultation process are insufficiently explored, and a systematic theoretical research paradigm has not been formed. Based on this, this study takes sociolinguistics as the theoretical perspective, focuses on the construction of language identity in the dissemination of TCM, and explores the impact mechanism of language characterization on cultural identity, which can not only make up for the gaps in existing research, but also provide theories for optimizing the international discourse system of TCM and improving the effect of overseas cultural communication and identity (Zhang, 2020; Tian, 2019).

II. Core Concepts and Theoretical Basis

2.1 Definition of Core Concepts

Cross-cultural communication of TCM is the core connotation of TCM culture, traditional diagnosis and treatment theory, health philosophy and cultural value. It crosses different countries, ethnic groups and cultural boundaries, and realizes the process of transmission, communication, acceptance and integration in a multilingual environment and social context. This process is not only the dissemination and exchange of medical knowledge, but also China's excellent traditional culture is an important practice of external dissemination and the realization of cross-cultural identity, and it also has the dual attributes of medical communication and cultural export (Piller, 2017). In the practice of specific communication, the original philosophical terms such as the five elements of yin and yang and the essence, qi and spirit in the Huangdi

Neijing, as well as the characteristic expression of the concept of integrating traditional Chinese and Western medicine and the idea of longevity and maintaining health in *The Theory of Concurrent Treatment of Heart and Brain* edited by Zhao Buchang and Wu Haiqin in 2020, are all very representative language symbols in the cross-cultural communication of TCM.

Language identity belongs to the core category of sociolinguistics. It is the emotional attribution, value recognition and identity consensus generated by social individuals or groups for specific language symbols and discourse systems (Chen, 2015; Zhu, 2013). Specifically in this study, that is, the acceptance attitude, cultural belonging and identity of the overseas audience to TCM terms such as yin and yang, qi and blood, as well as the original medical concept and health discourse in the concurrent treatment of heart and brain, are the key indicators for measuring the results of cross-cultural communication of TCM (Wu & Zhang, 2023).

Social discourse practice is not simply the use of language symbols and information transmission, but language behavior embedded in specific social culture, power structure and ideology (Fairclough, 2013; Tian, 2019). In the context of international communication of TCM, the English translation narrative construction of the classic terms of Huangdi Neijing and the external discourse output of the characteristic medical concept of *The Theory of Concurrent Treatment of Heart and Brain* are all typical cross-cultural social discourse practices, which is the external language presentation form of TCM cultural identity and values (Li & Wang, 2022; Zhang, 2022).

2.2 Theoretical Basis

The social identity theory provides core support for analyzing the formation logic of TCM language identity. It believes that the construction of group identity relies on language and symbol carriers, and individuals complete the group attribution division through the recognition of a specific discourse system (Tajfel & Turner, 1979). Taking the classical philosophical terms of the Huangdi Neijing and the original medical discourse of *The Theory of Concurrent Treatment of Heart and Brain* as an example, overseas audiences are very likely to have differentiated language identities such as acceptance, rejection or cognitive ambiguity due to differences in Chinese and Western cultural backgrounds. Therefore, the current research can intuitively reveal the differences in group cultural identity behind language identity and Attribution mechanism (Tajfel & Turner, 1979; Wu & Zhang, 2023).

The theory of cross-cultural discourse analysis focuses on the construction and interpretation of meaning in different cultural contexts. By analyzing the communication text, narrative logic and discourse strategy, it explores the reconstruction, deviation and consultation laws of cultural connotation in cross-language communication (Piller, 2017; Hall, 1976). Whether it is the cross-cultural translation of the classical terminology of the Huangdi Neijing or the international interpretation of the concept of integrating traditional Chinese and Western medicine in *The Theory of Concurrent Treatment of Heart and Brain*, the research can rely on the semantic shift and cultural misreading in the process of analysis and dissemination of this theory to provide theoretical guidance for optimizing the expression of foreign discourse (Piller, 2017; Hall, 1976).

The theory of language power relationship clarifies that there is a competition of power and the distribution of speech behind language (Fairclough, 2013; Tian, 2019). In the global medical communication field, Western modern medical discourse has long occupied a dominant position, making the classical terms and original concepts of TCM at a disadvantage. The original discourse of the Huangdi Neijing is difficult to obtain reciprocal international academic recognition, and the international dissemination of the characteristic medical concept of concurrent treatment of heart and brain is insufficient, which fully confirms the constraints of language inequality on cross-cultural communication (Zhang, 2022; Li & Wang, 2022), and can deeply explain the deep social power motives formed by the language identity barriers of TCM. .

III. Practical challenges of Linguistic Representation and Identity in TCM International Communication

Under the background of globalized cross-cultural communication and the pluralistic coexistence of medical discourse, the international communication of TCM not only faces the real challenge of popularizing medical knowledge, but also encounters multiple obstacles at the level of language system, cultural connotation, discourse power and audience identity. From the perspective of sociolinguistics, Chen (2015) and Zhu (2013) purposed that the differences in language characterization, the imbalance of discourse order, the confusion of the terminology system and the misalignment of cultural context together constitute deep barriers to the overseas dissemination of TCM, and also directly lead to the cognitive deviation, understanding gap and insufficient recognition of the discourse system of TCM by overseas audiences. At present, the language dilemma and identity crisis in the international communication field of TCM are concentrated in the four dimensions of heterogeneous conflicts in the discourse system, the lack of terminology norms, mainstream discourse suppression and cultural identity barriers, which deeply affect the depth and long-term effectiveness of the international dissemination of TCM culture (Li & Wang, 2022; Zhang, 2022).

3.1 Underlying Cognitive Gaps and Understanding Misalignment Caused by Heterogeneous Discourse Systems of TCM and Western Medicine

TCM and Western modern medicine belong to two completely different cognitive paradigms and knowledge systems. There are essential differences between the two in terms of philosophical foundation, thinking logic, expression and value core. Li and Wang (2022) hold that the resulting heterogeneous discourse system is the most fundamental and most difficult language and cognitive barrier in the cross-cultural communication of TCM. The theory of TCM is rooted in the traditional Chinese philosophical thought of the unity of heaven and man, the balance of yin and yang, and the overall discrimination. Its discourse system is based on the core concepts of yin and yang, five elements, qi and blood, deficiency and excess, and other core concepts laid down by the Huangdi Neijing. It emphasizes systematicity, relevance and dynamic balance, and the language

expression is both philosophy. Sexuality, imagery and empirical nature do not simply refer to anatomical structure and pathological indicators. Western medicine is based on modern empirical science, reductionist thinking and anatomy. The discourse system pursues accurate definition, quantitative standards, linear logic and empirical verifiability. The discourse rules, meaning generation methods and interpretation paths of the two are completely different.

This fundamental difference in the discourse system makes it difficult for the core concepts of TCM to achieve equal translation and complete interpretation within the discourse framework of Western medicine. Take the core terms in the *Huangdi Neijing*, the source of the classic theory of TCM, as an example. Concepts such as “yin and yang”, “qi circulation”, “meridians and collaterals” and “syndrome differentiation and treatment” carry the overall view and philosophy of life, which cannot be accurately corresponded through the organs, tissues, indicators, pathology and other words of Western medicine; and in the practice of contemporary TCM innovation and communication, The overall diagnosis and treatment concept of concurrent treatment of heart and brain put forward by Zhao Buchang and Wu Haiqin’s *The Theory of Concurrent Treatment of Heart and Brain* also take the overall balance, physical and mental health care, and the combination of prevention and treatment as the core logic, and there is a significant separation from the discourse mode of Western medicine’s specialized diagnosis and treatment and targeted intervention. Overseas audiences have been infiltrated in the linear thinking and empirical discourse system of Western medicine for a long time, and lack the cognitive foundation of traditional oriental philosophy and holistic medicine. In the face of the imageization and holistic language expression of TCM, it is convenient to have deviations in meaning interpretation, logical understanding faults and cognitive acceptance difficulties, and finally forming a cross-cultural recognition that is difficult to break through. Knowing the gap directly restricts the formation of language identity (Wu & Zhang, 2023; Hall, 1976).

3.2 Semantic Loss and Communication Deviation Caused by Chaotic TCM CultureLoaded Terminology System

The terminology system of TCM is highly condensed and has a heavy connotation. Most of the core words are culturally loaded words, which not only contain the point of medical diagnosis and treatment, but also carry traditional culture, philosophical thinking and values. It is the core carrier of the language identity and cultural connotation of TCM. However, in the current practice of international dissemination of TCM, Zhao and Liu (2021) argued that the authoritative and unified foreign terminology norms have not been fully established. The English translation expressions in various classics, works, academic texts and media propaganda are messy and different. The phenomenon of multiple versions of the same concept coexisting and the misalignment of the connotation of the same term is widespread, which seriously undermines TCM. The rigor and stability of medicinal discourse also directly cause the loss of cultural connotation, semantic deviation and audience cognitive confusion.

On the one hand, the translation of classical medical terms lacks a unified standard. The expression of the

core concepts in classic documents such as the Yellow Emperor's Inner Classics is significantly different in different translations and different communication scenarios. Some literal translations or simplified translations only retain the superficial literal meaning, completely stripping away the philosophical connotation and cultural logic behind it, resulting in overseas audiences. You can only get in touch with fragmented and one-sided language symbols, and you can't understand the full meaning of the term. On the other hand, the external expression of the innovative theory and practical achievements of contemporary TCM also lacks normative guidelines. The original diagnosis and treatment concept, health discourse and characteristic expression put forward in The Theory of Concurrent Treatment of Heart and Brain are mostly fragmented and arbitrary translation methods in international communication, which has neither fixed academic expression nor authority. With the support of interpretation, it is difficult for overseas audiences to form a stable, clear and unified conceptual cognition (Zhao & Wu, 2020; Zhao & Liu, 2021). The chaos of the terminology system not only reduces the professionalism and credibility of the international dissemination of TCM, but also cuts off the stable connection between language symbols and cultural connotations, making it impossible for overseas audiences to establish a complete understanding of TCM through a standardized and consistent discourse system, and it is difficult to form a stable and positive language identity.

3.3 Disadvantaged TCM Discourse and Restricted Voice Due to Monopoly of Mainstream Western Medical Discourse

In the field of global medical communication and public health discourse, modern Western medicine has long occupied an absolute dominant position, forming a highly monopolistic mainstream discourse order and academic power structure. The publication rules of international medical journals, the academic evaluation system, the narrative paradigm of health communication, and the rules of public health discourse are all based on the Western medicine system. The discourse system of TCM has long been in a disadvantaged position of marginal, subordinate and passive interpretation, and lacks the right of reciprocal discourse, communication and definition (Li & Wang, 2022; Zhang, 2022). This imbalance in the relationship of language power is the structural dilemma faced by the international dissemination of TCM.

Under this unequal discourse pattern, the theoretical system, diagnosis and treatment value and cultural connotation of TCM can often only be "selectively interpreted" or "passively adapted" within the framework of Western medicine, and it is difficult to achieve independent dissemination and value interpretation with its own complete discourse logic. The classic theoretical system of TCM represented by the Huangdi Neijing is difficult to enter the core vision of the international mainstream medical academic discourse. Its overall view, outlook on life and diagnosis and treatment thinking are often labeled as "unscientific" and "non-empirical"; even if it integrates the advantages of TCM and Western medicine and has solid clinical The supported contemporary innovative achievements also face the real problems of limited vocal channels, insufficient academic recognition, and squeezed narrative space in international communication. The strong suppression of mainstream medical discourse makes it impossible for TCM to participate in global health dialogue as an

independent, complete and independent discourse, and can only be in a vulnerable position of being judged, defined and screened, which not only restricts the effective transmission of the cultural value of TCM, but also hinders overseas audiences from the discourse of TCM from the root. The acceptance, respect and deep recognition of the department (Fairclough, 2013; Zhang, 2022).

3.4 CrossCultural Context Differences and Stereotypes Solidify Overseas Audiences' Language Identity Barriers

The formation of language identity is highly dependent on specific cultural contexts, value consensus and cognitive habits (Hall, 1976; Piller, 2017). The generation and inheritance of the discourse system of TCM has always relied on traditional Chinese philosophy, life culture, health concept and social life context. Overseas audiences not only lack the support of the corresponding cultural background, but also have long been influenced by the stereotyped narrative and one-sided cognition of Western media, forming a solidified prejudice and labeling cognition of TCM. Finally, it forms a barrier to cross-cultural language identity that is difficult to break through (Wu & Zhang, 2023).

For most overseas audiences, the language symbols related to TCM are both strange and alienated. The core words such as yin and yang, meridians, emotions, vitality, and overall balance are out of their familiar cultural context and thinking framework, and it is difficult to produce emotional resonance and value recognition. At the same time, some Western media and health communication contents carry out fragmented, curious and one-sided narratives of TCM, which further strengthens stereotypes such as “unscientific”, “alternative therapy” and “experience bias”, making overseas audiences suspicious, alienated and even reject the discourse system of TCM from the cognitive starting point. Against this background, whether it is the traditional medical cultural discourse carried by the Huangdi Neijing or the innovative discourse of contemporary TCM conveyed by The Concurrent Treatment of Heart and Brain, it is difficult to break through the shackles of stereotypes, and it is impossible to obtain the rational cognition and equal view of the audience. The misalignment of cultural context, the solidification of prejudiced cognition and the existence of emotional distance make it difficult for overseas audiences to have a sense of belonging, trust and identity for the language system of TCM. The establishment of language identity lacks the necessary cognitive and emotional foundation, which also makes the international dissemination of TCM stay on the surface for a long time, and it is difficult to Realize deep cultural identity and value consensus (Hall, 1976; Wu & Zhang, 2023).

IV. Multi-dimensional Construction Mechanism of Language Identity in the Context of TCM Communication

Language identity in the international communication of TCM is not a single-dimensional language acceptance process, but a dynamic construction process of multi-subject, multi-level and multi-path synergy

based on terminology symbols, media narrative, cross-cultural interaction and social power context.

4.1 Construction of Terminology Symbols: Traditional Cultural Connotation and Language Identity Expression

Terminology symbols are the basic carriers of TCM language identity construction. As the smallest language unit of TCM theory and culture, each core term carries exclusive medical connotations, philosophical ideas and cultural identities, and is a direct entry point for the audience to establish cognition and form identity. According to Zhao and Liu (2021) The construction of TCM terms and symbols is essentially to establish the unique language identity of TCM through standardized, accurate and cultural expression, so that overseas audiences can perceive the value core of TCM through terminology symbols, thus forming preliminary language cognition and symbol identity.

The traditional terms of TCM are based on the yin and yang, five elements, meridians, qi and blood, Tibetan elephants, etc. in the Huangdi Neijing. These terms are not simple medical names, but the concrete language expression of the overall oriental outlook on life and the philosophical thought of the unity of heaven and man, which contains the unique theoretical system and cultural identification of TCM from Western medicine. In international communication, such classical terms should be constructed by taking into account the cultural authenticity and cross-cultural understandability, retaining their core cultural connotation and standardizing their external expression forms, which can make term symbols become the direct endorsement of the cultural identity of TCM and help the audience establish an exclusive understanding of the language system of TCM. Contemporary innovative concept of concurrent treatment of heart and brain is the language crystallization of the modernization and practicalization of TCM theory. It not only inherits the core logic of the overall balance of TCM, but also meets the contemporary global health needs. Its term symbol construction can connect tradition and modernity. The discourse barriers between TCM and Western medicine allow the audience to perceive the contemporary value of TCM through concrete and practical language symbols. Through the systematic symbol construction of traditional classic terms and contemporary innovative terms, the uniqueness, standardization and recognition of TCM language symbols can be strengthened, so that the audience can clearly identify the linguistic identity and cultural attributes of TCM, and lay a solid symbolic foundation for the formation of language identity.

4.2 Media Discourse Construction: Overseas Narrative Tendency and Audience Attitude Orientation

Media is the core channel for the language communication of TCM. The narrative tendency, content expression logic and value orientation of overseas media directly shape the audience's cognitive impression of TCM and dominate the formation direction of language identity. It is the key external thrust for the construction of TCM language identity (Zhang, 2020; Fairclough, 2013). In the context of global communication, the

discourse narratives of overseas media, academic journals, health communication platforms and other media determine the communication content, presentation mode and interpretation perspective of TCM language symbols, which in turn deeply affects the attitude judgment and identity trend of the audience.

The narrative framework of overseas media discourse directly affects the dissemination effectiveness and audience acceptance of TCM language. When the media presents the theoretical value and cultural connotation of the Huangdi Neijing with an objective, neutral and comprehensive narrative, as well as the clinical practice of the concept of concurrent treatment of heart and brain, it can restore the integrity and professionalism of the TCM language system and avoid one-sidedness, standardization. Sign interpretation, guide the audience to rationally recognize the terminology and discourse logic of TCM, and gradually dispel cognitive bias. On the contrary, if the media adopts curious, fragmented and one-sided narratives to strip away the cultural context and theoretical support of TCM discourse, it will aggravate the cognitive bias and misunderstanding of the audience. At the same time, the local translation and adaptive expression of the language of TCM can also effectively bring the psychological distance closer to the overseas audience. Under the premise of retaining the core connotation, the narrative can be carried out with the language logic that is easy for the audience to understand, which can lower the cognitive threshold and let the audience gradually accept the TCM discourse system. Through positive, objective and localized media discourse construction, it conveys the theoretical value, practical achievements and cultural charm of TCM, which can continuously guide the audience to form positive cognitive and attitude tendencies, and promote the transformation of language identity from surface cognition to deep recognition (Zhang, 2020; Piller, 2017).

V. TCM Cross-cultural Language Identification Improvement and Optimization Path

Based on the perspective of social linguistics, in view of the practical challenges such as the gap in discourse system, the lack of terminology norms, the weakness of discourse power, and insufficient audience recognition in the international dissemination of TCM, combined with the multi-dimensional construction mechanism of TCM language identity, it is necessary to take into account the adaptation of cultural authenticity and cross-cultural communication, gradually break down the barriers of language identity, improve the recognition, acceptance and identity of the discourse system of TCM by overseas audiences, and promote the high-quality overseas dissemination of TCM culture (Chen, 2015; Zhu, 2013).

5.1 Unify the International Terminology of TCM and Consolidate the Foundation of Language Identity

The normativeness and uniformity of the terminology system is the prerequisite for realizing effective cross-cultural communication and establishing audience language identity. In view of the current confusion in the

expression of the core terms of TCM and the loss of cultural connotation, Zhao and Liu proposed that it is necessary to build an authoritative, cultural and universal international terminology normative system to build a solid symbolic root of TCM language identity.

On the one hand, take the classics of TCM as the core, and establish standardized English translation rules for terms. In view of the traditional core terms such as yin and yang, five elements, meridians, qi and blood in the Huangdi Neijing, the scholar should abandon the fragmented and arbitrary translation methods, organize experts in the fields of linguistics, TCM and cross-cultural communication, and formulate a standard translation method that takes into account the authenticity of culture and cross-cultural understandability, and not only to retain the traditional philosophy behind the terms. The connotation should also be adapted to the cognitive logic of overseas audiences to avoid semantic misunderstandings caused by translation deviations. On the other hand, it is necessary to improve the terminological expression norms of the innovative achievements of contemporary TCM, integrate the original and characteristic diagnosis and treatment and health care words such as concurrent treatment of heart and brain into the international terminology system of TCM, and clarify its academic definition, core connotation and standard foreign expression. Let the innovative discourse of contemporary TCM and traditional classic terms form a coherent and unified language system (Zhao & Wu, 2020; Zhao & Liu, 2021). At the same time, promote the international promotion and popularization of terminology standards, apply them to various scenarios such as classics translation and introduction, academic exchange, popular science dissemination, etc., to form a stable and unified TCM language symbol system, so that overseas audiences can accurately grasp the core connotation of TCM through standardized and clear terminology expression, and for the establishment of language identity. Lay a solid foundation for symbols.

5.2 Build a Localized Autonomous Discourse System and Weaken Cross-cultural Cognitive Misreading

Breaking the monopoly shackles of Western medical discourse and building a localized autonomous discourse system that has both the cultural background of TCM and adapts to the needs of international communication is the core measure to improve the power of TCM discourse and eliminate the cross-cultural cognitive gap (Li & Wang, 2022; Zhang, 2022). It can help TCM get rid of the weak position of passive adaptation and convey core values with independent discourse. .

In the process of discourse construction, the scholar should not only adhere to the core culture of TCM, but also take into account the adaptability of cross-cultural communication, and realize the organic integration of traditional discourse with modern expression, Eastern thinking and Western cognition. Deeply explore the core ideas of the overall view, dialectical governance, and the unity of heaven and man in the Huangdi Neijing, distill the core of discourse with recognition and communication power, abandon the obscure and rigid academic expression, and transform into a logical and popular international discourse logic, so as to avoid cognitive conflict caused by the complete heterogeneity of the discourse system. At the same time, based on the innovative practice of contemporary TCM, we will amplify the advantages of the integration concept of

traditional Chinese and Western medicine and the discourse of health practice represented by The Theory of Concurrent Treatment of Heart and Brain, create a modern TCM discourse that meets global health needs and has Chinese characteristics, and break the stereotype of overseas audiences about TCM. In addition, adhere to the autonomy of discourse, refuse to blindly cater to Western medical discourse standards, explain the theoretical logic and practical value of TCM on the basis of equal dialogue, so that the autonomous discourse system becomes a carrier for conveying the cultural identity of TCM and highlighting cultural confidence, reducing cross-cultural discourse conflicts, and weakening cognitive misreading from the root cause. Help overseas audiences establish a rational identity with the discourse of TCM (Fairclough, 2013; Zhang, 2022).

VI. Conclusion

The construction of language identity in TCM international communication is a systematic project related to cultural communication, academic research, and international exchanges. Based on the context of TCM international communication and combined with the discourse characteristics of classics such as Huangdi Neijing and Treating Brain and Heart Simultaneously for a Century Old Dream, this study theoretically clarifies the connotations, mechanisms, and practical challenges of TCM language identity, analyzes the linguistic characteristics, discourse shortcomings, and identity rules of TCM communication, and explains the internal logic of TCM communication and identity construction. The study shows that the formation of TCM language identity relies on multidimensional support of professional terms, cultural discourses, and communication contexts, affected by both individual language identity and social discourse order and cultural communication ecology. In the global context, TCM should adhere to its own language identity, improve the communication discourse system, balance cultural connotations and international communication adaptation, strengthen the systematicness, standardization, and communication power of TCM discourse, continuously enhance discourse power in international communication, consolidate the theoretical foundation for TCM crosscultural communication and identity construction, and provide theoretical support for subsequent relevant research and practical promotion.

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