



# Interpersonal and Family Communication in Health Behaviours: A Review of Associate Professor Li Crystal Jiang's Lecture at MHM 2025

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## Abstract

This paper presents key insights from Associate Professor Li Crystal Jiang's lecture on Interpersonal and Family Communication in Health Behaviours, delivered at the MHM 2025 Special Seminar Series. The lecture systematically examined health communication through four dimensions: (1) Dyadic Perspectives, analysing bidirectional interactions in physician-patient and family relationships; (2) Provider-Patient Communication, highlighting challenges like didactic communication styles and proposing empathy-based solutions; (3) Motivational Interviewing (MI), detailing its client-centered principles for behavioural change; and (4) Family Systems, exploring how Family Communication Patterns (FCP) and the Social Cognitive Approach shape health behaviours. The discussion integrated theoretical frameworks with applied contexts, including AI-assisted tools like Peking University's *EasyHealth* program.

## Keywords

Provider-patient relationship, Dyadic perspective, Motivational interviewing, Family communication patterns

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## Introduction

On July 9, 2025, the MHM 2025 Special Seminar Series featured its third lecture delivered by Associate Professor Crystal Li Jiang from City University of Hong Kong's Department of Media and Communication, who presented her research on Interpersonal and Family Communication in Health Behaviours. Professor Jing Xu, director of the Health Communication Master's Program at Peking University, opened the session by contextualizing the lecture within the broader curriculum. She highlighted how previous seminars had examined health communication through sensory studies and scientific methodologies, stressing theoretical frameworks' vital role in shaping research questions from observable phenomena. Xu also encouraged student involvement in the Journal of Medicine, Humanity and Media's editorial process as formative scholarly training before introducing Jiang's academic trajectory, while acknowledging health communication's growing academic prominence.

Jiang's lecture systematically analysed dyadic interactions in health contexts through four integrated dimensions. She first established the conceptual foundation of dyadic perspectives, emphasizing reciprocal communication dynamics before reviewing 2013 to 2019 interpersonal communication theories categorized by individual, interaction, and relationship-centered approaches. The theoretical discussion transitioned into applied contexts, particularly doctor-patient relationships, where motivational interviewing techniques address asymmetrical power dynamics and cultural barriers. This segued into family health ecosystems, where Family Systems Theory illuminated how kinship structures and communication patterns mediate health behaviour adoption. A distinctive pedagogical element involved students conducting real-time user research via the *EasyHealth* mini program, bridging theoretical frameworks with empirical investigation. The lecture particularly underscored how dyadic analysis reveals multilayered influences from micro-level interpersonal negotiations of health beliefs to macro-level cultural impacts on family decision-making processes. By integrating classic communication theories with contemporary digital health tools, the presentation demonstrated health communication's interdisciplinary nature while maintaining methodological rigor in examining interactional complexities within medical and familial contexts. This approach not only reinforced theoretical models' practical utility but also modelled emerging research paradigms for analysing China's evolving health communication landscape.

## Dyadic perspectives

The dyadic perspective examines how bidirectional interactions within interpersonal and family relationships influence health behaviours. This analytical framework encompasses several critical dimensions, including physician-patient communication, the negotiation of health beliefs between individuals, family health decision-making processes, interpersonal health information seeking, and spousal influence on behavioural modifications—all of which collectively form essential components for understanding relational dynamics in health contexts.

Building upon this foundation, Jiang guided students through a systematic review of predominant interpersonal communication theories from 2013 to 2019, categorizing them into three distinct paradigms: individual-centered, interaction-centered, and relationship-centered approaches. These theoretical frameworks, which varied in their frequency of application across studies, collectively provided multidimensional explanations for the complex dynamics inherent in social interactions.

The dyadic perspective demonstrates substantial practical utility across multiple domains. In clinical settings, it facilitates nuanced analysis of physician-patient relationships by elucidating divergent expectations, shared objectives, and the mediating effects of individual differences and sociocultural factors—thereby informing strategies to enhance therapeutic communication. When applied to family health ecosystems, this perspective integrates with Family Systems Theory and Family Communication Patterns Theory to reveal how familial structures, collectively held health beliefs, and communicative climates operate as interconnected mechanisms that shape both health information dissemination and the adoption of health behaviours within kinship networks.

## **Provider-patient communication**

The provider-patient relationship represents a distinct type of interpersonal relationship characterized by differing expectations alongside shared objective. Crucially, effective provider-patient communication has been demonstrated to positively influence both healthcare outcomes and the therapeutic relationship. Jiang developed four simulated clinical communication scenarios to help students directly experience different interaction patterns in medical settings. However, current practice reveals several challenges, including physicians' tendency toward didactic communication styles, unmet patient expectations, and low retention rates of medical instructions. These issues can be addressed through strategic improvements in communication approaches emphasizing participation, empathy, education, and collaboration. For example, involving patients in shared decision-making, demonstrating empathetic understanding of patient needs, explaining medical information in accessible terms, and establishing mutually trusting therapeutic partnerships.

## **Motivational interviewing**

Motivational Interviewing (MI) is a client-centered, goal-oriented approach that originated in the 1980s within addiction treatment. It aims to enhance an individual's intrinsic motivation for change by exploring and resolving ambivalence. MI operates on four core principles: (1) expressing empathy; (2) developing discrepancy to evoke motivation; (3) rolling with resistance rather than confronting it; and (4) supporting self-efficacy. Unlike traditional directive approaches, MI fosters a safe and accepting environment, allowing clients to autonomously explore their paths to change. It is also related to this method has demonstrated significant effectiveness in improving treatment adherence and facilitating lifestyle modifications.

## Family communication in health behaviours

From a family systems perspective, Family Communication Patterns (FCP) are initially shaped by parental influence but may evolve over time through intergenerational learning. The Social Cognitive Approach further elucidates the dynamic interactions among personal factors, environmental influences, and behavioural outcomes—particularly how individual goals, family communication styles, and health behaviours mutually shape one another. FCP consists of two key dimensions: conversation orientation and conformity orientation. An individual's health-related behaviours are significantly influenced by their perceived family communication patterns.

In the concluding segment of the lecture, Jiang initiated a research recruitment drive, inviting students to interact with *EasyHealth*—a WeChat Mini Program powered by AI—and share their user experiences. Developed exclusively by faculty and students in the Health Communication Program at Peking University, *EasyHealth* AI leverages large language models to deliver intelligent health communication applications. Integrated with DeepSeek's advanced AI models, the platform provides free services including AI-powered health Q&A, health data analysis, and emotionally intelligent interactions. Since its launch in May 2024, *EasyHealth* AI has gained widespread recognition both domestically and internationally, earning accolades such as China's Outstanding Health Communication Case. Currently, the platform is open for academic collaborations, partnering with university research teams to investigate topics such as AI-mediated communication efficacy and mental health interventions in the field of health communication.

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## Declaration of conflicting interests

The author(s) declared no potential conflicts of interest with respect to the research, authorship, and/or publication of this article.

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## Note

This article is based on a lecture delivered by associate professor Jiang at Peking University on July 9, 2025, titled “Interpersonal and Family Communication in Health Behaviours”.