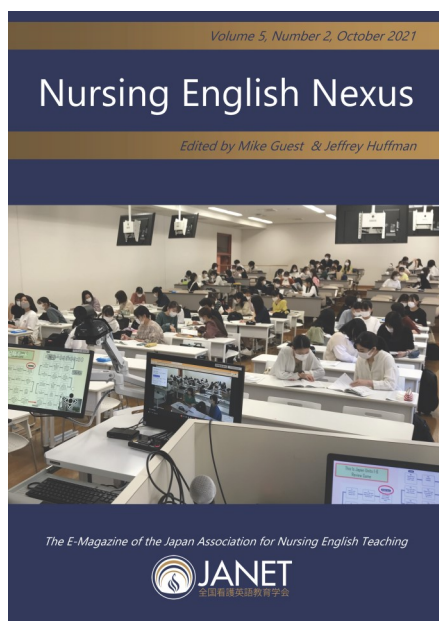


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Fluency First in Practical Nursing English Course Design and Development

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Abstract: *When teaching and evaluating an English language learner's level of spoken proficiency, the most traditionally and commonly used indicators include accuracy of grammar, vocabulary, comprehension, and pronunciation. The fact that spoken tests have a time limit makes the element of speed another important factor. Through three experiential case descriptions, this discussion paper will argue that, of all these factors, adopting a "fluency first" focus is the most realistic and effective when considering the question as to which component would serve best to guide teaching practice and test design in developing spoken language proficiency.*

Keywords: EFL fluency, spoken language proficiency, TEFL course design, study abroad, second language testing

When planning a curriculum to teach practical English-speaking skills to nursing students, medical vocabulary and English phrases used for nurse-patient scenarios immediately and naturally come to mind. This tendency is further reinforced by the prevalent language teaching and testing methods in Japan which have traditionally placed primary focus of study on memorization of grammatical formulae and vocabulary. Although this has often been proffered by specialists and laypersons alike as the reason for Japanese students' lack of communicative ability (Falout & Falout, 2005; Falout et al., 2009; Kikuchi & Sakai, 2009; Carrigan, 2017; Lai, 2017; Moritz, 2020), it is easy to see why teachers tend to fall back on this language structure-based method in the teaching and learning of English. Organizing lessons by key grammar points or a thematic group of vocabulary words is very concrete, easy to identify, and simple to test and score.

However, as my observations from the following three experiences will illustrate, using the goal of fluency development, rather than primarily focusing on mastery of language structure and vocabulary, to guide instruction can serve well as an all-encompassing strategy that naturally stimulates practice in the necessary subskills to prepare students for success in various contexts requiring practical English skills and communicative competence for real life

situations. While our program does not have the expectation that students must achieve a level of competency that enables them to do all their nursing activities in English, I would like to see students at least be able to interact spontaneously and effectively in English for simple communicative exchanges not only limited to nursing, but also in daily life.

At this point, I must be quick to note that I am not advocating abandoning the teaching of vocabulary and grammar as an either-or argument about accuracy versus fluency. However, it is easy to fall into the trap of following textbook vocabulary activities and model conversation practice so carefully that most of the limited class time and focus of practice activities center on the memorization and recitation of terminology and phrases with comparatively less attention given to fluency.

There are many aspects and definitions of the term *fluency*. When someone is said to be fluent in a language, the usage denotes what Lennon (1990) refers to as the "broad definition" of the term, meaning to possess "oral proficiency," or simply, conversational skill or ability. In another common usage, as when we say a person delivers a speech fluently, Lennon's "narrow definition" of the concept of smoothness as "an impression on the listener's part" is implied, and this kind of fluency is considered as "one, presumably

isolatable, component of oral proficiency" (pp. 381, 389).

In this paper, I will refer to the following definition of oral fluency which includes both the concepts of timeliness and appropriateness (including accuracy) of language use: "[H]ow efficiently a speaker is able to mobilize and temporally integrate, *in a nearly simultaneous way*, the underlying processes of planning and assembling an utterance in order to perform a communicatively acceptable speech act" (Segalowitz, 2010, p.165).

Taken together, Segalowitz's and Lennon's definitions of fluency can be applied to the following three example cases, based on my own experience, and can be used to guide teachers and students in instruction and assessment of learning outcomes, namely, whether the student was able to complete the task quickly, smoothly, and appropriately.

Three Exemplar Cases

1. In the nursing English lab

The following is a typical scenario that I have observed through firsthand experience and from discussion with other language teachers in typical training programs for nursing English courses at my current university, as well as others. Students often study the pronunciation and meaning of various medical terminology from their nursing English textbooks in the classroom and are tested on the vocabulary and key phrases. They also practice role playing nurse-patient dialogues provided in the textbook. After several lessons following such a pattern of study and practice, students are occasionally given a practical English test in their ability to conduct the role play, sometimes in the nursing lab, complete with medical equipment and other props.

While the progression of such a course of study seems logical in the lesson planning stage, I have observed the uncertainty and hesitation of students as they struggled to recall the correct

English phrase or medical terminology and their mechanical way of reciting a memorized dialogue. This led me to the conclusion that the English terms and phrases would have been better acquired by students if practice had been meaning-based rather than language-based from the start. Further, a time limit should be put on the students' practice as well as in the final nursing English simulation role play to give students fluency-based practice. In real situations, students must communicate immediately and clearly. In response to this, students should be taught and encouraged to use and be able to understand layman terms when appropriate (for example, "high blood pressure" instead of "hypertension", "tap" instead of "percuss"), especially when dealing with patients, rather than struggling to recall a technical word that patients might not be familiar with.

Finally, students must also be able to handle unexpected situations that are off-script. Inclusion of the aforementioned points would help create more effective scenarios for nursing English training which would more closely reflect the circumstances that nurses are likely to face in the real world when working with English-speaking patients. The key consideration in communication skills testing should be that of the students' ability to manage the many variables in the nurse-patient interaction in order to accomplish the task quickly, naturally, and effectively, in other words, to demonstrate fluency.

2. During travel and study abroad programs

It is not uncommon for universities in Japan with nursing English programs, including my own, to have a study abroad or overseas exchange component. When overseas, students will naturally have off-campus experiences where they will be required to interact with the community for daily necessities such as dining and shopping. One summer, I led a group of students on a summer study tour to the United States. On our

first full day there, we went to a fast-food chain restaurant that also has outlets in Japan. I was certain of the students' ability to place a simple order in English since they were already familiar with the menu from their experience in Japan. To my dismay, however, students were unable to "pass" this seemingly simple real-life test of spoken communicative English ability. For the sake of efficiency, and so as not to further inconvenience the other customers whom I feared might be waiting with growing impatience to place their orders after us, I eventually had to ask the students one by one what they wanted to order, and then place a group order for all of us.

Here again, the problem was not one of vocabulary or language structure, but of communicative fluency. In a classroom practice situation, given enough time, students would have eventually been able to place their own orders. However, in the real world, they were unable to place their orders quickly enough. This caused congestion at the order counter as the line of other customers behind us grew, along with my level of anxiety while waiting for my students to complete their order. From this experience, I gained the insight that the problem was not with vocabulary or familiarity with menu items or content. Students were simply not well-versed or fluent enough in the immediate use of the necessary strategic competencies (such as asking for repetition or clarification) in the process of negotiating meaning. This experience strongly impressed upon me the importance of focusing on fluency in English language instruction, especially for use in real-life situations, whether in healthcare settings or daily life activities.

3. In language proficiency testing

There are times when nursing students want to study in a foreign university to obtain, as one example, an advanced degree such as a master's in nursing. If their chosen university is in an English-speaking country, they are usually

required to take a test of English language proficiency such as the TOEFL to gain admission. The TOEFL iBT (Test of English as a Foreign Language internet-Based Test) is a three-hour test which includes sections on reading, listening, speaking, and writing. It is the most used and commonly recognized test for international students seeking entrance to English speaking universities. There are 4,500 testing sites worldwide and more than 5,000 institutions in the US among more than 11,000 institutions globally that accept the TOEFL, compared to 1,200 testing sites for IELTS, which is accepted by more than 3,000 schools in the US (Keystone Education Group, 2019; Educational Testing Service, 2021). With this background, it would not be an overstatement to say that the TOEFL is one of the most well-known high-stakes test of academic English proficiency.

As such, the TOEFL poses an immense challenge for Japanese university students, especially those such as nursing students who are not majoring in English as their main subject of study. In fact, the average TOEFL score of Japanese examinees ranked third from the bottom among students from 29 Asian countries who took the exam in 2019 (Educational Testing Service, 2020, p. 22). From my experience in tutoring students for the TOEFL, I have found that the major determining factor for success in the TOEFL was fluency. I have observed that only those students who had reached a sufficiently high level of English language fluency to the point where instructor feedback, explanation, and teacher-student interactions could be conducted or given completely and immediately in English were those who were able to "pass" the TOEFL.

In the portions of the test that required candidates to demonstrate expressive linguistic abilities, namely speaking and writing, students who had not reached that threshold of being able to process ideas and information to express themselves solely in English could not attain a

high enough score to qualify for entrance into their desired university for overseas study. I have observed that only when students were able to take in and process the wealth of information almost instantaneously, and to be able to synthesize it to construct and express their response effectively in English within the relatively short time limit of the test, did they have a chance of getting a passing score.

Students who needed teacher explanations and suggestions to be given or supplemented in Japanese during their tutoring sessions or required time to think about the language structure instead of content and meaning when receiving instruction and feedback could not pass the test, despite devoting an excessive amount of time to practicing sample test questions. Communicative fluency enabled successful students to obtain an accurate overview and understanding of the purpose or intended meaning of the test questions which, in turn, helped them to know what to address or include in their response. Students with a high level of fluency tended to have better discourse competence. They were able to better grasp what was being asked of them, and so, could quickly and accurately formulate a purposeful and appropriate response within the given time limit.

The following is a case in point. I had helped a student whom I will refer to as SA, who had increased her TOEFL iBT score, after two months of intensive tutoring, to a level that was high enough to gain her acceptance into a European university for graduate study. Specifically, she had obtained a score of 79 when she first took the test in October, but was later able to obtain a score of 86 in December (the minimum overall score required by her university of choice was 83). Later, upon hearing of SA's success, other students, including one very serious student whom I will refer to as SO, came to ask me for similar help. I held several sessions with them to check and give feedback on their essays and suggested strategies

on their practice test questions. SO never missed these formal tutoring sessions, yet she was not interested in attending the free conversation events called English Café (Chang, 2017) which I held once or twice per month that were open to all students to provide meaningful English communication exchange opportunities and natural speaking fluency practice. On the other hand, SA had attended the English Cafés regularly throughout all her years of university study, where she eagerly met and interacted with other Japanese and international students, and actively invited new participants to the Cafés. SA readily volunteered to help other students in need while seeking out opportunities to meet and interact with students from not only our university but also other universities in the area. This key difference in attitude between SA and SO in how they regarded structured language-based study versus meaning-based practice and experience accounted for the difference in the amount of exposure they had and time they committed to oral-aural fluency skill activities. Without sufficient fluency practice, SO showed limited improvement in her TOEFL score and eventually abandoned her goal of studying abroad.

Discussion and Conclusion

In all three cases presented above – as students practicing potential nurse-patient scenarios that require English in the healthcare setting, when traveling or studying abroad, or in preparing for a standardized test of English proficiency – fluency was the ultimate underlying common denominator that determined success or failure in accomplishing the task at hand. Students need to attain a level of fluency where they are able to shift from a focus on language structure and form to a focus on meaning, and be able to give an appropriate and timely response to the task at hand when functioning in English as the language of interaction.

Nation introduced “a framework for looking at

language courses to see if they provide an appropriate balance of opportunities for learning” based on the “time-on-task principle” which he defined as “the more time you spend doing something, the better you are likely to be at doing it” (2007, p.1). His framework, which he introduced as simply “the four strands,” identified the following four areas of activity, which he stated should each be given approximately equal time and attention in a balanced language course:

1. Learning through *meaning-focused input* [emphasis added]; that is, through listening and reading...
2. Learning through deliberate attention to *language items and language features* [emphasis added]; that is, through attention to the sounds and spelling..., vocabulary..., and... discourse features.
3. Learning through *meaning-focused output* [emphasis added]; that is, through speaking and writing...
4. Developing *fluent use* [emphasis added] of known language items and features over the four skills of listening, speaking, reading, and writing; that is, becoming fluent with what is already known (Nation, 1996, p. 7)

Nation and Yamamoto (2012) later elaborated on the fluency strand as follows: “The definition of fluency used in the fluency development strand simply relates to being able to receive and produce language at a reasonable rate” (Nation & Yamamoto, 2012, p. 174).

Using this four strands framework, one can see that only 25 percent of the language course is to be spent on the study of language structure and features such as grammar and vocabulary, with the remaining 75 percent of time and effort to be given to meaning-based activities and fluency development. Yet in teaching nursing English courses, it is very easy for teachers to inadvertently spend much time and focus on study of medical terminology, phrases, and explanations of language structure and

vocabulary etymology. As mentioned earlier in the case of English language proficiency testing, the student SO wanted to focus exclusively on practicing language items and features without devoting time for fluency practice and activities such as the English Café. However, if she had participated in the Café activities she would have had opportunities to experience meaning-focused input and output-based learning and fluency development which, according to the four strand model, should have accounted for 75 percent of her program of study.

Fujiwara (2018) brings up the importance of noticing and consciousness-raising in both helping students develop expressive language skills and keeping them motivated. In this process of helping students to notice and to become more aware or conscious of various aspects of communication as they endeavor to develop proficiency and fluency, I would liken the role of the teacher to the image of a guide or helper, rather than that of an expert or authority. Nation (2012) also alludes to the non-teacher-centered quality of effective and balanced language instruction in his four strands approach which “sees the teacher's most important role as being a planner, not a teacher” (p.178). This behind-the-scenes planning and supporting role of the teacher is similarly found in the English Café activity approach for developing fluency (Chang, 2017). In studying the efficacy of communication-focused curricula, which came about from educational reforms in Japanese secondary schools established in the late 1980s prompted by the accuracy-fluency debate, Tokunaga (2021) concludes, “Instead of switching the focus from grammar to communication, balanced grammar instruction and fluency practice are needed” (p. 163). Taken as a whole, this would indicate that effective learning for communicative competence should be student-centered, meaning-focused, and fluency-based with a healthy, but not overpowering, dose of grammar and structure-

based instruction or guidance.

Almost 40 years ago in the early days of second-language acquisition research and theory development, one researcher asked a similar question:

Students not only need instruction and practice in the overall skill of conveying information using the target language; they also need instruction and practice in the use of communication strategies to solve problems encountered in the process of conveying information. That is, if the expressions learned in, for example, a notional-functional syllabus fail the learners in their attempt to convey information, they have been given no instruction to help them to find alternative means of expressing that same information content. How might such instruction and practice be provided? (Tarone, 1983, p. 124)

In conclusion, my immediate response to this key observation and timeless question for English educators would be to make “fluency first” the guiding purpose for meaning-focused learning and to balance it with only sparing amounts of language-focused instruction.

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