

# APPLYING GROUP WORK ACTIVITIES TO IMPROVE ENGLISH SPEAKING SKILLS FOR NURSING STUDENTS AT DANANG UNIVERSITY OF MEDICAL TECHNOLOGY AND PHARMACY

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**Abstract** - Challenges in teaching and learning English for specific purposes (ESP) in Vietnamese universities have attracted much attention and have been mentioned in a variety of scientific papers as well as in national and local newspapers. Teachers and students of Danang University of Medical Technology and Pharmacy (DUMTP) are facing the same problem. This paper is to investigate DUMTP nursing students' drawbacks in their learning English speaking skills. The data for the study was based on questionnaires for DUMTP's 250 nursing students, and 11 English teachers, and the pilot application of some group activities to teaching English speaking skills to 50 nursing students. Throughout the analysis and conclusion, the authors introduced some useful group work activities and how to use them effectively in order to enhance students' English speaking competence. Also, the researchers have made some suggestions for the government, the management and the teachers on how to improve English speaking skills for nursing students of DUMTP in specific and of Vietnamese medical universities in general.

**Key words** - group work; pair work; English for specific purposes; speaking skills; nursing

## 1. Introduction

Every student wishing to get the benefits from modern education, research, science, trade, etc., knows that it is impossible without a working knowledge of the English language and good communication skills. A person without oral communication skills will suffer in this era of competition and may find it difficult to achieve a higher position (Morozova, 2013).

In Vietnam, enhancing quality of teaching and learning English for Specific Purposes (ESP) in universities and colleges in national wide has been a great concern. It is almost a must for graduates to communicate well in English if they want to succeed in their career on every field. However, not many of them can do this. Like in various countries, communicative skills in English, especially in ESP are the biggest challenge for every teacher and student in Vietnam in general and of the DUMTP in specific. One reason why the problem of speaking skills in Vietnam is crucial is that Vietnamese students have not been provided appropriate textbooks as well as have not applied active learning methods right from the start of learning English at primary schools. As a result, their reaction to English speaking gradually disappear over the years due to the fact that they have not been given chance to speak inside and outside the class, even they do not know how to pronounce a word correctly. Another reason is that students' English knowledge has been assessed based on writing papers without any oral test so students set up wrong purpose and do not have any motivation of speaking English when learning it. These are the main reasons why speaking English in nursing profession is almost an unfeasible mission

towards nursing students of the DUMTP. To illustrate this point, let us take an example in one speaking hour, the teacher raised a question "*what is the nurse's role?*" and asked the students to work in a group of six to give the answer. It took the students about 30 minutes to practise the pronunciation of only the followings: *checking temperatures, taking pulse rates, taking respiration rates, checking blood pressures, changing dressings, giving injections and removing sutures*. However, when the time was out, no students had been confident enough to speak out until the teacher called them and they gave no completely correct answer due to wrong pronunciation. As most problems have a variety of causes, there are likely many solutions rather than one possible solution to this problem.

From this perspective, this article focuses on investigating the difficulties in speaking English of the nursing students of the DUMTP and the effectiveness of applying group work to improve their speaking skills as well as tries to suggest a package of complementary solutions to the problem.

## 2. Previously works related to the study

Meng (2009) showed that the advantages of group work, the application of the various group work activities, the viewpoint of learners' proficiency for speaking, feasible conditions for speaking activities in groups all contribute a lot to improve speaking skills for learners in a large class.

A number of researchers investigated this field and came to the conclusion about students' low level of speaking ability and their inability to speak confidently and fluently. One among the many reasons to take into consideration might be the lack of confidence and anxiety about making errors as stated by Trent (2009) and in other related studies. Most college students are not confident in their ability to learn to speak; teachers must help them overcome their reluctance in order to change this situation.

Lo (2012) carried out a research on ESP towards vocational high school students of tourism in Taiwan. The study drew a conclusion of both theoretical and pedagogical implications for ESP education for vocational high school students.

Do and Cai (2010) analyzed the current situation and some challenges which learning and teaching ESP is facing. They suggested some feasible solutions in order to reach the goal set up by institutions. They also added that effective, long-term vision, consistent and comprehensive managerial solutions to some extent helped improve learning and teaching ESP in the new current situation.

Do (2006) stated that the improvement of teaching and learning English as a foreign language (EFL) or English for Specific Purposes (ESP) is drawing a lot of concern. This article reflected the result of a research project on teaching and learning EFL and ESP in accordance with the social needs. It also pointed out that learners' needs analysis was a crucial element to the planning of strategic policies for more fruitful training of EFL and ESP at Hue University.

International and national research has shown that teaching and learning English opens many opportunities but a number of challenges. However, most research touched on general issues about English for specific purposes, while little attention has been paid to recommending some implications for learners to improve their English for specific purposes, especially improve English speaking skill for nursing students.

### 3. Some theoretical concepts

#### 3.1. Group work and pair work

##### 3.1.1. Group work

Groups may be defined in many ways, indeed providing an absolute definition of a group, as with much of the theory around group work, is highly problematic and contestable.

In group work, the teacher divides the class into small groups to work together (usually four or five students in each group). All the groups work at the same time (it is sometimes called "simultaneous group work"). (Doff, 1988)

Gibbs and Habeshaw (2001) recommended the following simple techniques to improve the quality of small group work:

First, *ground rules help the group work better*. These ground rules should state at the start what the teacher wants these rules to be.

Second, *paying attention to the "tone" can help the group to work better*. The quantity and quality of interaction between people in a small group is greatly influenced by its "atmosphere" and "tone". Third, *structure is as important for small group work as it is for lectures*. If the teacher prepares group work activities in a well-organized way and has a clear statement of aims and objectives for the small group work, students will feel happy and respond positively in their learning group.

Fourth, *variety sustains interest and involvement*. There are many different ways of working in small groups which may be used to facilitate the achievement of an equally wide range of goals. As Doff (1988) mentioned group work is not a teaching method, it is a way of organizing the class. Group work can be used for a substantial number of different activities, and is naturally suitable for some activities than for the others. Fifth, *students can do it themselves*. Small groups can operate effectively without the teacher's presence since many of the roles which the good facilitator performs in a group can be performed adequately by students if they are clearly briefed.

Finally, *if students are helped to make effective presentations in small groups it has great benefits for their self-esteem – and for their future work*.

##### 3.1.2. Pair work

In pair work, the teacher divides the whole class into pairs. Every student works with his or her partner, and all the pairs work at the same time (it is sometimes called "simultaneous pair work"). Remember that this is not the same as 'public' or 'open' pair work, with pairs of students speaking in turn in front of the class. (Doff, 1988)



Penny Ur (2000) considers pair work to be a kind of collaboration. She has listed types of interaction patterns in order from the most teacher dominated to the most student active: teacher talk, choral response, closed ended teacher questioning, open end teacher questioning, student initiates and teacher answers, full class interaction, individual work, collaboration, group work.

Apart from "open pairs", where students talk to one another across the class under your control, there are according to Byrne (1989) two main kinds of pair work. These are *fixed pairs* and *flexible pairs*. *Fixed pairs* are originated when the students work with the same partner (usually the student on the left or the right) in order to complete a task of some kind. In *flexible pairs*, the students keep changing partners. Teacher must decide whether he can let the students stand up and move around the classroom freely. This will make the activity more interesting for them because they can choose the person they want to talk to. If the classroom is too small, the students will be able to interact with those around them without getting up.

#### 3.2. Advantages and disadvantages of using group work and pair work

According to Bilash (2009), the differences between pair work and group work are:

**Table 1.** Pair work and group work

Type	Benefits	Challenges
 Pair	Students have the chance to work with and learn from their peers; struggling students can learn from more capable peers; it is especially useful for students who prefer interpersonal learning settings.	If students are not matched up well (i.e. low students together, high students together, a higher student with a low student but they don't work well together, etc.) pair work won't be useful; the ability of the students to work in this way needs to be taken into consideration.
 Group	Group work provides more opportunity for practice, an increased variety of activities is possible, increased student creativity, the Zone of Proximal Development increases.	As with pair work, the groups must be carefully selected to ensure students can work productively; not all students are able to work to their full potential in this situation; assessment of student progress can be challenging.

#### 4. Advantages and disadvantages of using group work to teach English speaking skills for nursing students of DUMTP

There is quite a large input level disparity among the nursing students because their general English background is different from area to area. Before being enrolled in this university, some have learned English for 7 years, others have

done it only for 3 years. Moreover, the 4 language skills are variously focused in different schools. It is advantageous to use group work with these students who will support, cooperate with each other. Instead of sitting alone trying to understand something difficult, the less able students can rely on their more able friends who will be able to solve a problem so both may feel a sense of achievement while completing a task. Though it is more demanding and time consuming for the teacher to prepare appropriate tasks for different students' levels, it gives a lot of satisfaction and motivates the students.

Another advantage of applying group work to improve speaking skills for the nursing students is that they will try their best in groups to practice as much speaking as possible because all speaking tasks are about their nursing profession. They are eager to practice what they have learned in their mother tongue. They find it exciting to learn their professional knowledge in English one more time. That they set up a clear objective of learning speaking English is the most beneficial factor because they do know they will certainly be using it in their career for the whole life.

Nevertheless, there are some drawbacks facing the teacher and the students. First, most of the students are from rural areas where English was not taught in a proper way and in less amount of time compared with those in urban areas. The development of the language skill for the students was limited because the teachers focused on teaching reading and writing skills without paying much attention on speaking and listening skills. The speaking level of those students is almost zero. Second, based on the curriculum framework stipulated by the Ministry of Education and Training, the amount of time allocated is limited with only 75 periods for ESP module (one period is 45 minutes). The teacher is not able to give the students enough oral practice through the whole class work. Third, the teacher is facing with large class which causes such problems as physical constraints, lack of individual attentions or difficulty on assessment. Finally, teaching facilities are short of audio-visual laboratory. The language classrooms close to other classes make the nursing students' speaking practice restricted due to the noise.

## 5. Research methodology

From the beginning of the ESP module which covers 15 nursing professional units of the book *"Nursing 1"* by Tony Grice delivered within 75 periods of real learning in class, the authors have applied group work to improve speaking skills for third-year nursing students of DUMTP.

This study has been carried out based on an instrument of 250 questionnaires including 22 questions each distributed to 250 third-year nursing students randomly picked up from 500 peer students as a whole of DUMTP as soon as they completed the final test of their ESP module. The data has been calculated percentage and analyzed to find out difficulties the students face as a basis to make some suggestions to teachers on improving speaking skills for nursing students at DUMTP.

The authors have also collected the opinions from all English teachers of DUMTP about nursing students' English learning.

A pilot teaching of some group work activities has also

been conducted on 50 nursing students to take into consideration the efficiency of these activities.

The study is quantitative and qualitative.

## 6. Findings

### 6.1. The nursing students' background

More than half of the nursing students come from rural areas where English has not been focused as much as in urban area because of a variety of reasons. However, 84% of participants have learned English for 7 years before they enroll in DUMTP. That is they follow the same curriculum and textbook at high schools.

Their purpose of learning ESP is unclear, 85% said they study it just because it is a compulsory subject. A few participants said their purpose is to communicate ESP while the others said they want to read medical texts or materials.

They do not make much progress in ESP partly because they do not spend enough time on practicing it. 47% said they spend less than 3 hours a week, 41% said from 3 to 6 hours a week and the rest said they spend more than 6 hours learning English every week. A substantial number of participants (81%) said they answer the teacher's questions only when they are called, only 15% volunteers to raise their hands and give the answers, the rest 4% said "I do not have the answer." when the teacher called them. Another reason is that there are a large number of students in a class. While an ideal class of learning a language has around 20 students, the class of the participants has more than 50, making correcting mistakes for each individual impossible.

ESP is even more difficult for the participants if they do not have motivation to learn it. Only 37% answered they like the subject, 44% said they neither like nor dislike, 9% said they do not like it meanwhile only 10% said they like it very much.

Regarding the English input level, 83% assessed their English as unsatisfactory at the start of the ESP course. Only 17% thought their English is satisfactory. No one said they are very good at general English. This demonstrates that the nursing students must spend sufficient time and make big efforts so that they can fulfill ESP module's requirements. 65% said that they did not acquire such basic knowledge as grammar rules, vocabulary, daily conversations when they learned general English at high schools. Therefore, they found it too tough to catch up with ESP course.

### 6.2. Application of group work's to improve the nursing students' speaking skills

It can be clearly seen that most nursing students of DUMTP have low background of English. Over several years of teaching English for specific purposes, the authors understand their drawbacks in learning English. One of the biggest barrier for them to reach a good English level is the speaking skill.

Before starting ESP course, 84% of the participants knew what group work is but only 46% have been taught group work before. This means group work teaching method is still quite new to a majority of the students. However after the course, 64% said they like group work teaching method; 11% like lecturing and 25% like the

method of “teacher asks, students answer”. Applying group work in the ESP module has been a great success because 98% stated that it helps them improve their speaking skill. 47% said they are now more confident to speak English out, 38% said they have practiced and adjusted their pronunciation during group work time. 15% of the participants answered that another advantage of group work is to reduce the pressure due to large class.

Nevertheless, there are some drawbacks of applying group work reported by the participants. 35% participants said students speak Vietnamese more than English. Some students do not speak out because they are so shy and afraid of making mistakes. 15% said group work is applied just for good students. A lot of noise made during group work time is also inconvenient upon implementation of this activity.

48% agreed that the teacher should create a friendly atmosphere, give compliments or award to those who speak frequently and fluently when working in small groups. This encourages not only good but also weak students to get involved in the activity. 37% said the teacher should go around to provide them with guidance or correction when necessary. It takes a large amount of time for students to look up new medical terms and pronounce them so the teacher should give them sufficient time to fulfill the tasks.

The participants found the most difficulty in speaking English is that they are short of vocabulary, not only medical terms but also general vocabulary. They said it is very demanding for them to remember professional words because they are completely new and multi-syllable. The second most difficulty is that they do not know how to pronounce a word correctly even if they look at its phonetic symbol. It is obviously due to their previous learning method. This is the key factor explaining why so many Vietnamese students cannot speak or communicate simple English conversations though their writing and reading are satisfactory. The most interesting find-out is that many of them said they have never spoken out a single English sentence. Most of these students are from rural areas where English was not set priority so their English level is low as a whole but their speaking skill is the worst. They also reported they do not know what to speak because they do not understand what the others say, that is, their listening skill is weak, too. Some other factors that make the nursing students “dumb” during group work are that they do not understand the question, the medical context, the grammar as well as they do not master their professional knowledge. They also stated they lack confidence and motivation of learning English for specific purposes.

## 7. Comments from English teachers of DUMTP about the nursing students’ English learning

All the teachers participants said the nursing students rarely prepare the lessons before class. The reason might be that the nursing students have more pressure on time than those of other major due to the fact that they are on duty in hospitals at night time. 90% of the teachers said the students never speak out their answer until they are called. Only 1 teacher said about 3 good students in a class often contribute their ideas during all sessions. A majority of the

students are inactive or passive in their English learning, said all interviewees. The students’ English input level, especially speaking skill, is very low. They added most of the students show their aspiration for ESP module because of its practicability but admitted that learning ESP is an onerous task for them.

When being asked about applying group work activities to enhance English speaking skills for the nursing students, 11 teachers agreed that it’s a necessary and effective method, 3 of them wondered how to proceed it in class. They suggested that the teachers should go around constantly to correct their mistakes and pronunciation, give more pair work and group work to improve the students’ speaking skill.

In addition, they have other recommendations: equipping more facilities such as 2 microphones for 1 class (3 teachers), strengthening class observation to learn experience from each other (2 teachers), organizing workshops on group work and pair work (5 teachers), training teachers (11 teachers).

## 8. Pilot teaching

To find out solutions for improving nursing students’ speaking skills, the researchers decided to apply some group work activities to teaching speaking skills for third-year nursing students.

Lesson plans including group work activities have been designed to improve their English speaking skills from the beginning of the ESP course. The researchers have introduced group work as a main activity in teaching speaking skills during the course. The teachers have explained to the students how groups would operate and how they would be graded individually and in groups as well as established ground rules for participation and contributions.

The pilot teaching has been applied to a class of 50 students within 75 learning periods.

At the start of the module, the International Phonetic Alphabets and the way to pronounce words correctly by looking at their phonetic symbols were introduced to the students. They were given about 20-30 minutes to practice speaking in small groups every five-period session.

Some group work activities, introduced by Grice (2001), were given to the nursing students to improve their speaking skills as a pilot:

1. Stump the partner. The task was: “Students A describe their picture and listen to students B describe their picture without looking at each other’s pictures, find ten differences between them. Speak out ten differences in front of the whole class.”



*Figure 1. The nurse is taking care of the patient*

2. Think-pair-share. The teacher posed a question: "Five minutes ago a poisonous snake bit a child. The parent phones an emergency helpline and explains the situation to a helpline nurse. Suppose you are a nurse working on a telephone helpline. Use the notes and discuss with your group to tell the caller what to do and answer any questions."

Students took a few minutes to think through an appropriate response, then turned to a small group and shared their responses. The teacher took this a step further by asking students to find someone who arrived at an answer different from their own and to convince their partner to change their mind. Finally, student responses were shared with the entire class during a follow-up discussion.

3. *Fishbowl debate*. The researchers asked the students to sit in groups of three and described a hospital admission procedure. Student A gave the order of a hospital admission procedure in her/his' opinion. Student B gave a different one. Student C took notes and decided which side was the most convincing and provided an argument for his or her choice. The teacher debriefed by calling on a few groups to summarize their discussions.

4. Work in small groups. A list of medical terms about elderly care (incontinence, signs of confusion, cognitive function, confinement, mobility aid, shuffling, gait, degenerative, frail) were given, the students took turns to say these terms in a small group of 5. The best student of the group decided which was more correct and provided an accurate pronunciation by looking at phonetic symbols and tried to adjust his/her friends' pronunciation. The teacher debriefed by calling on a few students to say these medical terms aloud.

5. Pyramid. The teacher asked the students to work alone to say hospital jobs by looking at pictures (anaesthetist, pharmacist, cardiologist, physiotherapist, consultant, porter, lab technician, radiologist, midwife, receptionist, scrub nurse, surgeon, paediatrician, paramedic), put them in pairs to discuss what these people do, then in fours to describe routines and current activities. Finally, a full group discussion was held to compare the conclusions drawn.

6. *Leave the room*. The teacher asked the students to work in groups of 5 to speak out as far as they knew about the nursing profession, briefed them and left the room. The teacher came back after 30 minutes and asked a few groups to present their discussion to the entire class.

The following form was used to get feedback from the students after pilot application. They were asked to rate from A to E (from the best to the worst) for the six different group work activities and give their comments.

**Table 2.** Feedback form

FEEDBACK FORM		
Group work activities	Rating	Comments
Stump the partner		
Think-pair-share		
Fishbowl debate		
Work in small groups		
Leave the room		

A majority of students have chosen grade A for *Working in small groups* because they have been able to get support from their friends and felt more confident working with their friends and easy to accept their friends' correction or criticism. Surprisingly, the second largest group of students has given grade B to the activity of *Leave the room*. They enjoyed the opportunity of uninterrupted discussion and said that this activity had involved more of the students than when the teacher was present. *Think-pair-share* and *stump the partner* have been mostly given grade D and E. They found it difficult if two students had a big gap of English ability to get involved in these two activities because they did not understand what their partner said so they could not give the appropriate answers.

## 9. Conclusion and suggestion

After having taken all the pros and cons of group work activities into consideration, it is advisable to use these techniques to improve English speaking skills for nursing students. As long as the teacher is properly prepared to introduce and facilitate group involvement and participation, group work can produce very positive and lasting results. The researchers would recommend the two group work activities of *Work in small groups* and *Leave the room* to be applied to nursing students who are old and independent enough to take responsibility for their study.

As can be seen in the findings, a wide range of students have never worked in small groups before or lack the skills to work with others. Below are some suggestions to improve the situation:

First, in order to design and implement group work effectively to improve English speaking skills of the nursing students, the teacher should make sure that each student understands the assignment. Before group work, students should know the purpose of the project, the learning objective as well as know how the assignment is related to the course content and what the final product is.

Second, the teacher needs to reinforce listening skills as most nursing students cannot speak anything if they do not understand the question or they cannot continue the conversation if they do not know what was mentioned previously.

Third, as to create motivation for students to speak, the teacher should have a clear idea of how he/she wants to evaluate the group work of speaking English for specific purposes. Some faculty members assign each member of a group the same grade, which may promote unhappiness if some members devote more time and effort to the group and get the same grade. Some instructors assign each group member an individual grade, which may or may not foster competition within the group and may undermine the group solidarity. Because this is speaking class, in-class process evaluation is recommended. The teacher should assess the work individually and give compliments to good speakers. The important thing in the aspect of assessment is that the students know and understand how they will be evaluated.

Fourth, the quality of teaching ESP at universities is not effective partly because of English teachers' level of proficiency. They are unqualified both in the English language

itself and the pedagogical method. Organizing training courses in order to foster English teachers who are teaching ESP or sending them abroad to learn about technical terms and teaching methodology are strongly suggested.

Finally, in order to improve speaking skills for nursing students, language classrooms should be placed in quiet buildings separately from other classrooms. In meantime, audio-visual labs should be equipped to help students practice the language among their peers.

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