

# An Investigation of Effective Teaching for Medical English in EFL Context

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**Abstract:** *English has become an indispensable part of educational curriculum all over the EFL context countries. With an increase in English-medium courses in universities in non-English speaking countries, various concerns have been raised such as difficulty of students' lecture comprehension and ineffective interaction between lecturers and students. This study scrutinized relationships among Saudi medical students' at Prince Sattam Bin Abdu Al Aziz University (PSAU) comprehension of and satisfaction with English-medium lectures. A great body of research has proved that different factors are involved in this process. The researcher made an attempt to examine all the possibly existing researches which investigated/focused on the problems of teaching English in Saudi medical context to elicit these factors and to scrutinize the existing problems. It is also an attempt to highlight what can be done to improve the situation significantly.*

## 1. Introduction

Teaching English as a foreign language is a challenging task in developing countries in general and in Saudi Arabia in particular. English has been included in the curriculum of Saudi universities and considerable attention has been paid to this language for the following reasons: first of all, access to and use of the latest technological and scientific resources mainly written in English calls for an efficient amount of English language proficiency. Secondly, coping with the demands of the era of information explosion and the efficient use of the Internet makes learning English as a necessity. Thirdly, mastery of English facilitates cultural exchange among nations including the proposal of the dialog among civilizations. In spite of all these, some studies show that teaching and learning English in Saudi universities has not been able to satisfy the specified goals. Thus, due to the shortcomings of the formal EFL program at schools to fulfill the practical needs of the learners on the one hand, and the need for learning English to satisfy these communicative needs on the other hand, an increasing number of EFL institutes have been developed throughout the country.

English teachers in the universities should help students to develop their English proficiency within the period of university study. However, it remains a serious problem, which challenges the teachers at all times as to implement what teaching materials to satisfy the students' needs in English learning and to enable the students to acquire English in English for Foreign Learners (EFL) context. Although the majority of English teachers hold the view that the materials with learner-centered and task-based learning focusing on communication will be of most benefit for students, the prevailing materials of teaching medical English course is still dominated by a teacher-centered approach and with mechanic patterns of medical vocabulary learning (Zhang, 2002). At present some teachers who teach English for Special Purposes (ESP) lack the necessary content knowledge in specialized areas, so it is hard for them to use the appropriate materials in class teaching (Zhao, 2008). ESP teaching, of which the medical English course is a compulsory course for medical students in their university learning. The teachers who have previous experience in teaching English as a Foreign Language (EFL), the first

question on receiving his current assignment to teach ESP may be: "How is ESP different from EFL?" The major difference between ESP and EFL lies in the learners and their purposes for learning English. ESP students are adults who already have some familiarity with English and are learning the language in order to communicate a set of professional skills and to perform particular job-related functions. An ESP program is therefore built on an assessment of purposes and needs and the functions for which English is required. ESP is part of a larger movement within language teaching away from a concentration on teaching grammar and language structures to an emphasis on language in context. ESP covers subjects ranging from accounting or computer science to tourism and business management. The ESP focus means that English is not taught as a subject divorced from the students' real world; instead, it is integrated into a subject matter area important to the learners. EFL and ESP differ not only in the nature of the learner, but also in the scope of the goals of instruction. Whereas in EFL all four language skills; listening, reading, speaking, and writing, are stressed equally, in ESP a needs assessment determines which language skill the learner need. Medical English has developed quickly over the past few years (Zhang & Wang, 2006). This course provides students with sufficient medical vocabulary to help them to develop the communication skills necessary for conversing with English-speaking doctors and patients, and to acquire important academic information for their future careers. However, the students have almost no time and no chance to practice speaking in class, because of the teaching materials lacking the speaking practice and exercises. One striking challenge of this issue is that what materials in medical course can be used to emphasize the development of communicative competence and gives priority to the learning of spoken English in medical English course. Various projects have also been undertaken to explore different ways of teaching medical terminology. Structural and traditional methods such as teaching term formation of medical terminology as a vocabulary teaching strategy and grammar translation have also been found in the literature.

To begin with, in content-based classes, in general, students practice English language skills while they are studying one subject area. In these classes, learners use language to do

real tasks in authentic contexts. Bailey (2000, chap. 10) describes a course organized through the concept of health to enhance the students' learning in an ESL context. The course starts with journalistic writing, making use of Time magazine, and then reading books on health-related topics, academic texts and autobiographies. Finally, dramas are performed after watching movies about medical issues. According to Bailey their communicative skills improved with the interaction created through discussing controversial issues in the field of health. Bailey concludes that the learners experienced the pleasure of learning in groups while focusing on real and engaging health issues. Another approach which has been suggested in the literature in the teaching of medical English is problem-based learning. As it is an approach mainly applied in medical education (Connelly & Seneque, 1999; Huey, 2001; Maxwell, Bellisimo & Mergendoller, 2001; Norman & Schmidt, 2000) and in order to better understand its application in EAP courses of medical courses of medical faculties, it is necessary to understand the reasons for using it in medical teaching, and its common application procedures and aims. In terms of its origins, Maxwell et al. (2001) state that as the conditions of medical practice changed during the 1960s and 1970s, medical educators questioned the ability of traditional medical education to prepare students for professional life. In response, faculty at a number of medical schools introduced 'Problem-Based Learning' to promote student-centered learning in a multidisciplinary framework, an approach that was believed to promote lifelong learning in professional practice. In this approach, students work in groups discussing a problem, then students do research for the problem situation, and try to come up with reasonable solutions to that problem, suggesting their solutions and discussing whether they are appropriate to the situations they discussed. Then students evaluate this learning process and their contribution to the group (Maudsley, 1999, cited in Wood & Head, 2004) and Maxwell et al. (2001). Huey (2001) describes the aims of PBL as better acquisition and school integration of scientific and clinical knowledge, improved clinical thinking and other skills, and more effective life-long learning skill. The researchers claim that in this approach the tasks of the students derive from the general problem to be solved rather than being generated by the teacher, and are thus a simulation of what happens in the medical field. They further maintain that this approach responds directly to these students' needs. Kimball (1998) also proposed PBL tasks as a useful tool for the simulation of medical target settings and also supports teaching through the web. In his course design, teachers structure lessons in the context of medical concepts and case studies and problem based tasks, which enable the students to contextualize medical concepts, simulating real world clinical thinking. He concluded that the syllabus designed with problem-solving tasks using internet web pages not only provided students with authentic sources but also reflected the foreign language needs of the medical students, as the concepts about new findings, and the treatments are in English, and the medical resources the students need to use are all written in English. These studies indicate that through the web and problem-based, learner centered activities, learners were able to experience real world discourse which other printed materials could not have reflected so efficiently. Along with the use of the internet, video cameras

have proved invaluable for contextualized learning in EMP curricula (Belcher, 2004). Some researchers have tried to bring real life communication into the classroom medium using video tape For example, a study to design a course, using authentic videotaped communication data for medical students at the University of Hong Kong was conducted by Shi, Corcos and Storey (2001) using authentic videotaped communication data. The researchers used them to assess the difficulties learners face when making diagnostic hypotheses with doctors and to identify the discourse of diagnostic linguistic skills students needed, in order to achieve various cognitive objectives. They used video-taped ward teaching sessions over three months at two hospitals, along with teaching tasks, to raise students' awareness of some of the discourse and to improve students' performance through practice. In the study they tried to analyze and use performance data as teaching material in the classroom in order to meet the special needs of the medical students. Shi et al. concluded that the use of videotaped data is not only useful for the design of an EMP course but also useful as teaching materials by involving the students in the process of curriculum design, thereby enhancing the students' motivation. In order to teach medical terminology more effectively, some projects and research studies have been conducted. In 1991-1992, for example, the Institute for the Study of Adult Literacy in Pennsylvania developed and field-tested an innovative curriculum with instructional materials to teach specific health care vocabulary for vocabulary for beginning licensed practical nurses. In this project, the staff were trained in the use of materials and then they implemented the curriculum and materials at two sites in Pennsylvania. In order to train students to use structural analysis to understand medical vocabulary, the materials were designed in the form of a narrative about a woman learning medical vocabulary from a friend. First, learners took a pretest and began using materials in the classroom and used them over a three month period. The post test scores indicated that the learners made great progress. In addition, when interviewed, both the instructors and the learners who used the new materials commented positively on them. Another attempt at teaching medical terminology came from Essex Community College, MD., where a manual was prepared for introduction to medical terminology for the Claritin Medical Center Worker Education Program of Northeastern Illinois University's Chicago Teachers' Center in Partnership with the Union of Needle trades, Industrial, and Textile Employers. This manual, published in 1996, consists of glossaries and descriptions of medical terminology for use in a workplace literacy program for hospital workers. In teaching medical terminology, Laar (1998) points out the need for systematic presentation of term-forming elements like prefixes and suffixes in medical texts in his study. He assumed that words of Latin origin could be successfully taught via integrated teaching in the English and Latin courses designed for the Medical Faculty of Tartu State University in Estonia. As for the terms of multilingual usage, which are found in several languages in phonetically, grammatically and semantically similar forms, they could be included in English courses to improve text comprehension. The aim of his study was to examine the teaching of this vocabulary to medical students for their courses of Latin, English, and medical subjects and to what extent Latin courses could enhance the learners'

comprehension of English medical texts. In the study, the stems and affixes of Latin and Greek origin were systematically presented to medical students learning English at advanced levels. The Latin and Greek stems and affixes frequent in multilingual terms were listed and their definitions were given in English, as were the practice exercises. At the end of the courses the feedback from students was very positive. Laar concludes that as the English language is enriched by Latin borrowings, the English course is the most reasonable framework within which to teach Latin and Greek elements found in medical terms to students studying medicine. The other approach to EMP teaching is the grammar-translation method world which is probably still a common feature of language courses throughout the (Maher, 1986b). Also in Saudi, the grammar translation method has remained a commonly practiced method of ELT. In fact, translation is an important field in Saudi as recent scientific discoveries and treatments in medicine are usually made accessible to readers via translations, and in ELT, the translation method is used to make the medical texts more understandable to the students. However, it is worthwhile noting some possible problems encountered in the field of professional medical translation. Very early on, Newmark (1976, 1979 cited in Maher, 1986b) pointed out some of these main difficulties as follows: The medical language register in European languages has a lot of synonyms, and there is the problem of standardized lexis (terminology, agreed hospital jargon, etc.) and the difficulty of technical usage, which he regards as the most difficult problem for the translator who is neither medical nor paramedical himself. A further evidence against translation came from Maher (1986b), who supposed that in EMP classrooms, learners are already supposed to have mastered medical texts in other ways, such as comprehension checks and exercises. He also argues that translation of medical texts may not be so effective in improving English competence but merely encourages dependence upon the practice of translation itself. He identified three problems in the use of translation in an EMP context: accuracy, quality of translation and being very time consuming and distracting for the students because of the equivalence problem with some languages. Nevertheless, translation continues as a popular approach in Saudi. In the field of medical translation, the most recent and notable work is that by Asalet Erten, who published the book (Medical Terminology and Translation of Medical Texts). In her book, the characteristics and formation of medical terminology, approaches to the translations of medical texts, example translations from English to Arabic, and criticism of some translated texts can be found. For those who see benefit in translation, this book can provide good guidance to them. Skills are most needed by the students, and the program is focused accordingly. An ESP program, might, for example, stress the development of reading skills in students who are preparing for graduate work in engineering; or it might stress the development of conversational skills in students who are studying English in order to become tour guides. Some of teachers have experience in teaching English as a Foreign Language (EFL). The experience draw on their background in language teaching, help them identify ways in which their teaching skills can be adapted for the teaching of English for Specific Purposes. In addition, they will need to seek out content-area specialists for assistance in designing

appropriate lessons in the subject matter field they are teaching. If the teachers are a subject-area specialist with no experience in teaching EFL, here are some techniques suggested to see how their subject-matter knowledge can be used in the teaching of language skills. The Peace Corps ESP teacher must fill many roles. They are responsible for organizing courses, for setting learning objectives, for establishing a positive learning environment in the classroom, and for evaluating student progress.1. The teachers will set goals for the students and then translate those goals into an instructional program with hourly, daily, and weekly activities.2. One of their primary tasks will be management; selecting and organizing course materials, supporting the students in their efforts, and providing them with feedback on their program. The teachers arrange the conditions for learning in the classroom and set long-term goals and short-term objectives for student achievement. Their awareness of students' capabilities is a crucial factor in designing a program with realistic goals that takes into account the students' contribution to the learning situation. The teachers communication skills establish the classroom atmosphere. Language is acquired by students when they have opportunities to use the language in interaction with other speakers. As the teacher, they are the only native speaker of English available to students, and although their time with any one student will be limited, they can model good communication skills in the classroom. This means that in their interactions with students they should listen carefully to what they are saying (or trying to say) and reflect their understanding or lack of understanding back at them through their responses. Language learning is a great risk-taking endeavor for students in which they must make many errors in order to succeed. Language learners are handicapped in the classroom because they are unable to use their native language competence to present themselves as knowledgeable adults. Instead, they have to take on the role of inarticulate learner. The teachers should create an atmosphere in the language classroom which supports the students. The non-native speaker of English must be self-confident in order to communicate, and they have the responsibility to help build the learner's confidence. Finally, the teacher is a resource person who helps students identify their language-learning problems and find solutions to them they identify the skills that students need to focus on, and take responsibility for making choices which determine what and how the students learn. They will serve as a source of information to the students about how they are progressing in their language learning. The most significant point about teachers of EMP is to improve their knowledge of medical terminology and structures used in medical texts. The most efficient one is "predictive evaluation" that investigates potential performance of a textbook. There is also "textbook Evaluation Instrument Based on the ACTFL standards" (Kazem & Fatemeh,).2014). (Considering a given situation and based on the type of evaluation, the most suitable teaching material could be selected for teaching medical English. In an EFL context where classrooms are the only source of English, textbooks play a critical role in exposing students to learning (Riazi, 2003) and this makes the significance of choosing the right teaching material even more prominent. A teacher of English for academic purposes always tries to meet the needs of students, yet textbooks that fully satisfy all needs and objectives are rare. Therefore, it is

suggested that supplementary materials be used to support the main textbook Kazem)Renewing old fashioned curricula and pedagogic approaches of teaching medical English Almost fifteen years ago, it was reported that language barriers block the globalization of health resources and the problem has continued to present (Sabbour et al., 2010). This limitation is also extended to medical students and confronted them with a lot of challenges mainly because they know limited vocabulary and slow reading speed (Lu & Corbett, 2012). In a very brief time, medical students need to learn a great number of medical terms, improve their reading and listening skills and enhance their writing ability (Lu & Corbett, 2012).In some universities, formal training is provided for diagnosing language barriers in medical education. Language learning programs are also integrated within the medical curriculum to overcome these obstacles (Tucker, Chen, & Glass, 2012).Some of the language difficulties that make medical education struggling for students include understanding lectures, reading comprehension, correlating written material with verbal lectures, taking notes and academic writing (Starkey, 2015).A recent study summarized the most common language difficulties in areas of oral communication, reading, understanding and writing (Starkey2015).A number of strategies could promote students' English proficiency including increased exposure to English, motivating students to become competent in English and providing opportunities for interaction with English speaking peers (Heming & Nandagopal, 2012). According to some scholars, such opportunities could be provided using technology innovation for instance utilizing podcast and video These studies clarify that online learning resources can be developed with a modest budget based on existing university resources. However, little research has been carried out on the impact of online technologies on students' learning outcomes (Rogan & San Miguel, 2013).Recent surveys indicate that if language learners are taught how to integrate different learning strategies, they could become more efficient and independent learners (Al- Qahtani, 2013). The language learning strategies include meta cognitive, cognitive and social strategies. Students should attend workshops on how to adopt a mixture of these strategies as they are used to employing mainly cognitive strategies most of the time (Al-Qahtani, 2013).last, it is important to enhance medical students' motivation during the process of English language learning. Motivation is a crucial instrument of learning (Milosavljevic, 2008).Creating multi factorial programs that provide students an all-English instruction would give them access to innovative medical science (Milosavljevic, 2008).It also increases students' integrative motivation which in turn has a great impact on second language learning (Al-Qahtani 2013), Afsoon Piroozan, Elham Boushehri, Ramin Fazeli. Based on the challenging areas of language for medical students, their demands and learning strategies that benefit medical education, it would be favorable to review and renew the existing programs every now and then. Finally, according to all that went on, teachers, textbook developers and educational authorities could improve the quality of learning and teaching by considering the influencing factors of medical English learning such as overcoming language barriers, reviewing medical English curricula providing extracurricular programs to enhance both the teachers and students' medical English proficiency, choosing optimal

teaching materials, the efficacy of which have been confirmed through evaluation, and last but by no means least, modifying medical education context based on the assessed needs of students. Textbook ) Kazem & Fatemeh, 2014Renewing old fashioned curricula and pedagogic approaches of teaching medical English Almost fifteen years ago, it was reported that language barriers block the globalization of health resources and the problem has continued to present (Sabbour et al., 2010). This limitation is also extended to medical students and confronted them with a lot of challenges mainly because they know limited vocabulary and slow reading speed (Lu & Corbett, 2012). In a very brief time, medical students need to learn a great number of medical terms, improve their reading and listening skills and enhance their writing ability (Lu & Corbett, 2012).In some universities, formal training is provided for diagnosing language barriers in medical education. Language learning programs are also integrated within the medical curriculum to overcome these obstacles (Tucker, Chen, & Glass, 2012).Some of the language difficulties that make medical education struggling for students include understanding lectures, reading comprehension, correlating written material with verbal lectures, taking notes and academic writing (Starkey, 2015). A recent study summarized the most common language difficulties in areas of oral communication, reading, understanding and writing (Starkey 2015), A number of strategies could promote students' English proficiency including increased exposure to English, motivating students to become competent in English and providing opportunities for interaction with English speaking peers (Heming & Nandagopal, 2012). These attempts to develop specific courses using technologies and instructional methodologies like content- based, problem- based and grammar translation for teaching medical English to medical students and health care staff indicate that English for medical purposes teaching is demanding job for the instructors. The instructors, therefore, should first analyze the students' unique needs in their contexts and then consider which of these approaches can be suitable. In this sense, needs analysis, as the first step of appropriate course design for the students, is important. Graves (2001) assumes that when needs analysis is implemented into the teaching methodology as an ongoing process, it helps the learners to better evaluate their learning process, to become more aware of their needs, and thus "gain a sense of ownership and control of their own learning process" (p. 98). Similarly Hutchinson and Waters (1987) regard needs analysis as not a once and for all activity but a continuing process. Nunan (1988) recommends that need analysis procedures should occur not only in the initial stages but also continuously throughout the courses. If English among medical students is most likely to be used in EIL settings, the educational context of the targeted medical students should adopt features of this variety.

#### Statement of the problem

The process of teaching English as a foreign language in medical faculties of a Saudi-medium university (PSAU) is not satisfactory. The students are not able to understand lectures; they are not able to apply what they learn in their English classes to their major field of study. Also there is no effective interaction between lecturers and students.

## Instruments

Data were collected via questionnaires which are designed to perceptions of the currently enrolled students and the academicians at the medical faculty of a Saudi-medium university Prince Sattam Bin Abdu AL Aziz University (PSAU). The questionnaire data were analyzed quantitatively, and the interview data were analyzed qualitatively using SPSSII method. An interview was held with the Academician of the Medical Faculty to obtain better information about their perceptions towards the English language problems of the medical students. Questionnaires were administered to students enrolled in the first and through sixth classes at the faculty, who were available at the week when the questionnaires were distributed.

## 2. Data Analysis

Data were analyzed using the Statistical Package for Social Science (SPSSII). As there are three questions types- likert-scale, multiple choice and ranking questions- different statistical technique were used. First, means and standard deviations for the likert scale items were calculated and analyzed. The question for ranking the priority order of the language skills difficulties was analyzed. Finally, the interview data were analyzed qualitatively by going over the transcript and looking for answers that corresponded to certain questions from the questionnaires.

## 3. Finding & Discussion

**Table 1:** Descriptive statistics for perceptions about materials and instructions

Items	M-Acd	M-All	M-G-I	M-G-II	SD. Acd	SD. All	SD. G-I	SD. GII
1. medical students' English courses should be relevant to the medical field	3.82	4.17	4.15	4.18	1.19	1.01	0.99	1.03
2. English Language instructors should use a Method of teaching in which the students can Learn English interactively in groups.	4.55	4.18	4.15	4.21	0.63	1.03	1.07	0.98
3. PBL should be adapted to use in English For medical purposes courses.	3.98	3.29	2.99	3.49	1.06	1.44	1.54	1.21
4. The medical students at PSAU have the Language capacity to read the English Language medical sources in the library.	2.20	2.37	2.29	2.45	0.83	1.10	1.09	1.12
5. In order to make use of the medical sites On the internet, one should have a high level Of English.	4.14	4.07	4.22	3.93	0.74	0.93	0.83	1.06
6. Translation skills are important to develop Learners' overall language competence for Medical studies.	4.33	4.40	4.50	4.30	0.87	0.69	0.67	0.70
7. There are adequate English resources and Textbooks translated into Arabic.	2.40	2.52	2.56	2.48	1.14	1.14	1.16	1.12
16. It is important for medical students to be Able to read the original English texts.	4.48	4.33	4.35	4.30	0.60	0.77	0.84	0.65
8. English Language instructors are Knowledgeable enough to teach English for Medical purposes courses.	3.03	2.57	2.61	2.52	0.97	1.04	1.07	1.01
9. At present, English Language instructors At PSAU consider medical academic English Language needs when selecting the Materials for their lessons.	3.03	2.59	2.58	2.60	0.88	1.08	1.12	1.03
10. English Language instructors should use the internet in their courses.	3.86	3.86	3.82	3.90	0.94	0.98	1.07	0.89
11. At PSAU there is adequate Technological equipment (TV, video, radio, internet, D.V.D.) available for language Teaching	2.67	2.73	2.76	2.69	0.94	1.25	1.30	1.20
12. At PSAU instructors use the Technological equipment effectively.	2.65	2.36	2.19	2.52	0.87	1.11	1.14	1.08

**Note:** M: Mean SD: Standard Deviation GII= Students at 4<sup>th</sup> - 6<sup>th</sup> classes All= All students

The teaching materials (see Table 1 above). For question 5, 1<sup>st</sup> & 3<sup>rd</sup> year students currently enrolled in English classes and the 4<sup>th</sup> 6<sup>th</sup> students who are not, agree (M=4.15 and 4.18) that the instructional materials in English classes should be related to medicine. However, the mean value of question 12 indicates that students feel they have inadequate English to read them (M=2.37). They also agree that there are not enough medical books translated into Arabic (Q-15), and they perceive it very important to read the original English resources (Q-16, M=4.33). The result of question 13 indicates (4.10) they also agree that to be able to access the

medical sites in the Internet they should have high levels of English, and they are in consensus on this point (SD=0.93). According to question 19, they generally agree (M=3.86) that the internet should be used in English classes. Question 18 indicates the negative attitude (M=2.59) of the students towards the selection of the materials by the instructors. While question 20 indicates that the students are unsure about the adequate availability of technological equipment (M=2.73), question 21 reveal the students' negative perceptions about their usage by the instructors at PSAU (M=2.36).

**Table 2:** Descriptive statistics for perceptions about materials and instructions

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13. medical students' English courses should be relevant to the medical field	3.82	4.17	4.15	4.18	1.19	1.01	0.99	1.03
14. English Language instructors should use a Method of teaching in which the students can Learn English interactively in groups.	4.55	4.18	4.15	4.21	0.63	1.03	1.07	0.98
15. PBL should be adapted to use in English For medical purposes courses.	3.98	3.29	2.99	3.49	1.06	1.44	1.54	1.21
16. The medical students at PSAU have the Language capacity to read the English Language medical sources in the library.	2.20	2.37	2.29	2.45	0.83	1.10	1.09	1.12
17. In order to make use of the medical sites On the internet, one should have a high level Of English.	4.14	4.07	4.22	3.93	0.74	0.93	0.83	1.06

18. Translation skills are important to develop Learners' overall language competence for Medical studies.	4.33	4.40	4.50	4.30	0.87	0.69	0.67	0.70
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21. English Language instructors are Knowledgeable enough to teach English for Medical purposes courses.	3.03	2.57	2.61	2.52	0.97	1.04	1.07	1.01
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23. English Language instructors should use the internet in their courses.	3.86	3.86	3.82	3.90	0.94	0.98	1.07	0.89
24. At PSAU there is adequate Technological equipment (TV, video, radio, internet, D.V.D.) available for language Teaching	2.67	2.73	2.76	2.69	0.94	1.25	1.30	1.20
25. At PSAU instructors use the Technological equipment effectively.	2.65	2.36	2.19	2.52	0.87	1.11	1.14	1.08

**Note:** M: Mean SD: Standard Deviation GII= Students at 4<sup>th</sup>- 6<sup>th</sup> classes All= All students Academicians also feel that the instructional materials in English classes should be related to medicine (Q-5, M=3.82), and they also do not find the students' proficiency level adequate to read the English medical sources in the medical library (Q-12, M=2.20, SD=0.83). In order to access the medical sites on the internet they feel that the students should have high levels of English and they also would like to see the internet being used in English classes. The instructors disagree with the idea that there are enough medical books translated into Arabic and they perceive it is very important that the students be able to read the original English resources (M=4.48, SD=0.60). For question 18, about whether English language instructors choose materials considering the academic English needs of the students, they do not have as negative feelings as do the students (M=3.03), and like the students, they are not sure about whether there is adequate availability (M=2.67) and usage of technological materials (M=2.65). On the other hand, as for the Dean's opinion of this question, during the interview, he stated that there is adequate technological equipment for language teaching. In terms of instructional methods, while the students give importance to translation for their studies (Q-14, M=4.40) with remarkably high agreement (SD=0.69), they find interactive ways of learning English also important. For example, both groups appreciate the use of group work (Q-10 M=4.15 for G-I and M=4.21 for G-II). However, they were unsure about question 11, adaptation of problem based learning (PBL) -an interactive method of teaching- to the English classes (M=3.29). To be precise, the upper level classes reacted positively to this question (M=3.49), while the lower level classes were not sure. In terms of the academicians' opinions, they also give importance to translation for the medical students' studies (M=4.33, SD=0.87), yet they too feel that interactive ways of learning English are very beneficial (M=4.55, SD=0.63). The academicians reacted more positively than the students to the adaptation of PBL to the English (classes M=3.98). The content instructors and English language instructors should cooperate to more properly conduct PBL, as the students need to do research using English sources and discuss the medical issues in groups in PBL classes. In terms of question 17, asking the respondents' perceptions of the English language instructors' knowledge to teach medical English, the academicians express a more mixed attitude

(M=3.03) than do the students, (M=2.57) who disagree that the instructors have adequate knowledge.

**Table 3:** Chi square results of the student groups and academicians' perceptions

Question	x <sup>2</sup>
1. It is important for medical students to learn English for general purposes	13.857*
2. It is important for medical students to learn English for medical purposes.	16.750*
3. English for medical purposes instructions should start from the preparatory Year classes.	21.860*
4. Medical students should be allowed to continue during the medical courses In preparatory Year classes.	17.192*
5. English classes should continue during the medical students' academic medical education.	18.933*
6. Problem based learning method should be adapted to use in English for medical purposes.	19.767*
7. The medical students at PSAU have the language capacity to read the medical resources I English.	10.315*
8. At present, English language instructors at PSAU consider academic English language needs of the students when selecting the materials for Their lessons.	17.653*
9. At PSAU there is adequate technological equipment (TV, video, Computer, D.V.D).	20.994*
10. At PSAU, the instructors use the technological equipment effectively.	21.269*

**Note:**  $\chi^2$ = Chi square \*\*= $p < .01$  \*= $p < .05$

Although both groups perceive English for general and medical purposes as important, the results from several questions revealed that academicians give it more importance than the students, suggesting perhaps that the students may not appreciate the importance of English while they are still at university, but after they have graduated and become academicians, they come to understand how important it is for their professional lives. In parallel with this, for the 4<sup>th</sup> question, academicians more strongly agree with the idea that specific medical English instruction should be started in the preparatory classes. On the other hand, for the 7<sup>th</sup> question, even though the students are more in favor than the academicians of the condition that they are able to go on to their medical education without passing the preparatory class, the academicians also express agreement with the idea (M=3.67). The results for the 9<sup>th</sup> question again indicate the stronger feelings of the academicians about English education, however as they report wanting English education to be continuous throughout the students' medical

training, while, ironically, the students seem to be indecisive about it. Although the medical students regard English as important for their academic studies, they are not that positive about continuing English studies during their medical education. As I have commented previously for the students' groups part, their lack of enthusiasm for ongoing English language lessons may be because of their harder work at higher classes. Although they find English important, they may not want to take it as a formal lesson at school. In terms of their opinions about the use of PBL method (Q-11), academicians support PBL much more strongly than the students, possibly as they have been given training about the potential benefits and are thus more informed than the students. The responses to question 12 indicate that although both parties find the English language capacity of the medical students to read medical resources very low, the academicians's perceptions are more negative than those of the students. This negative assessment is in line with the academicians' strong support for medical English instruction. For question 19, about whether English instructors consider students' academic English needs when selecting materials, the academicians are more positive than the students. They may be trying to be colleague-friendly and not wanting to criticize other teachers to a researcher- especially to a researcher who is also a PSAU instructor. While both the students and the academicians are not sure about the availability of the technological equipment for language teaching at PSAU (Question 20), the students openly disagreed with the idea that the instructors use the technology effectively, and the academicians remained unsure (Question 21). It may again indicate that the academicians are trying to avoid criticizing their colleagues.

**Table 4:** Chi square results of the student groups' perceptions Questions

Questions	$\chi^2$
1. The current amount of English lessons at PSAU is enough to meet the Medical students' academic and professional English Language needs.	10.007**
2. Problem based learning method should be used in English for medical Purposes classes.	12.894*
3. It's important for medical students to read the original English Resources.	7.866*
4. At the moment the English language instructors consider the academic English language needs of the students when selecting the instructional Materials.	12.510**

Note  $\chi^2$ : Chi- square \*\* $p < .01$ , \* $p < .05$ .

**Table 5:** Some suggestions about English language learning

No	How would you prefer English being introduced for medical students?	S	Acd
1	Focusing on the four major skills	20%	0%
2	Focusing on practice and communication skills	18%	0%
3	Using technology i.e. computers, Internet and laboratories	18%	2%
4	Focusing on medical terminology	12%	2%
5	A specific course for every year to suit every stage	12%	2%
6	English speaking teaching staff must be involved	10%	0%
7	Focusing on Grammar	10%	0%
8	Self-training	10%	0%
9	Highly qualified specific courses in the medical field	8%	0%

10	Through communication and discussion	8%	2%
11	Through communication and discussion	8%	0%
12	Use of English in daily life communication	8%	0%
13	Chatting with foreigners who speak English	4%	0%
14	Travelling overseas to English speaking countries	4%	0%
15	Interactive courses	0%	4%
16	Communicative language teaching approach	0%	4%

S= Students, Acd= Academician

Finally, all participants were asked to suggest their preferable ways in teaching and learning English for medical students. Some medical students suggested that all English language skills should be included in English class and that matches what was revealed in similar needs analysis studies (Yeniçeri 2008; Chia et al. 1999). Others suggested that English curriculum should also include medical topics and medical terminology that might be helpful for their professional training in the medical field. These suggestions were in consensus with findings of some previous research studies (Narunatwatana 2001; Tasçi 2007; Yeniçeri 2008; Sari 2003). Accordingly, it is believed that specific English courses such as EMP which are mentioned in this study could be the ones that should be used. However, some participants suggested that these specific courses need to be divided throughout the years of medical study according to their relevance to each stage; besides, general English should also be taught in the pre-medical year to ensure that all students can handle the EMP courses. One teacher said "First, we have to offer GE with focus on grammar, then we teach special medical English". This is also what other research has revealed in this respect as in (Chia et al. 1999; Hwang and Lin 2010). Moreover, other students proposed that English language course should focus on communication skills or use communication as a method of teaching to help students interact effectively in English. That is indeed what they mentioned by students consistently as their needs. It is also suggested by some teachers that both interactive language teaching and communicative language teaching should be employed intensively for English teaching in medical education. This is also what has been found in other similar studies regarding medical students' English language needs (Hwang and Lin 2010; Chia et al. 1999; Narunatwatana 2001; Tasçi 2007). Furthermore, using technology such as computers, the Internet, language lab and audio-visual techniques, were all preferred by most participants focused on both language labs and the Internet. The researcher is really keen in using such techniques in language teaching particularly in medical contexts. That can be attributed to the fact that technology can facilitate the students' English language learning where everything is reachable and applicable. This is also what has been discovered and suggested by many other studies in the field such as (Tasçi 2007; Hwang and Lin 2010; Sari 2003; Kimball 1998; Tarnopolsky 2009). Based on the findings of this section, the current duration of teaching English for medical school was perceived as not sufficient to enhance the students' English ability. Therefore, most teachers as well as half of medical students suggested that English should be taught from very beginning up to the final year. In fact, the respondents' views about teaching English continually could be attributed to the fact that Saudi medical students really need an extra language instruction to enhance their English. In contrast, different views were revealed in

other studies such as (Narunawatana 2001; Tasçi 2007) in which students showed that learning English continually may affect their medical study because they do not have enough time to attend English classes. In some cases, medical students are satisfied with only one year of English language education, as in (Narunawatana 2001).

The other opinion is to teach English for the first stage of medic study which includes 1<sup>st</sup>, 2<sup>nd</sup>, and 3<sup>rd</sup> years, besides the pre-medical year. That is in consensus with other studies such as (Hwang and Lin 2010; Chia et al. 1999). Regarding the content of English language curriculum, it is found that most respondents preferred a program which includes both General English and English for medical purposes. This is exactly what has been shown in different studies, as in (Tasçi 2007). It was also found that some students suggested that English curriculum should not be the same at all levels; instead, it should be given in different volumes according to every year of medical study to meet the students' needs at that stage. That matches the findings of (Chia et al. 1999; Hwang and Lin 2010) in which general English was suggested to be taught for freshman year and followed by three years of English for medical purposes. Almost all the participants were in agreement regarding the use of technology in English language teaching and considering that as quite helpful. Many studies in the field of medical English suggested using the Internet in particular to enhance medical students' English language proficiency in many ways (Tarnopolsky 2009; Kimball 1998; Chen, Belkada, and Okamoto 2004). Other needs analysis studies revealed that medical students prefer using Internet in their English learning as in (Tasçi 2007), while some others revealed that students also prefer using TV, CDs and DVDs, e.g. (Hwang and Lin 2010).

#### 4. Conclusion

It can be said that teaching English for medical students in Saudi Arabia is relatively new, and no studies have been conducted to provide a basis for appropriate English language curriculum for this context in particular. Therefore, this study aimed to find an effective teaching of English for medical students in EFL context and challenges in regard to their use of English and to suggest the most applicable way of English language instruction. Based on findings of this study, it is quite obvious that there is a mismatch between the existing curriculum of English language course in the faculty of Medicine, at Prince Sattam Bin Abdu Al Aziz University (PSAU) in Al Kharj. Accordingly, the following suggestions should be considered carefully in order to implement any program for teaching English.

1. Any suggested curriculum should include all major English language skills, namely, speaking, listening, writing and reading, as well as English grammar and medical vocabulary. Due to the fact that teaching English for medical students in Saudi Arabia is still new, the researcher believes that all different skills could be better taught correspondingly at the current stage; then, adaptations to be made afterwards according to further needs analysis. Chia, et al. (1999) stated that "a systematic assessment of students' needs should be an on-going process" (p. 116).

2. It could be better to begin with general English classes at the pre-medical year just to ensure that all students can cope with specific English language materials (EMP) which can be given for subsequent years of medical study. To begin with, it is suggested that three years after the pre-medical could be fine for teaching EMP.

3. The materials of EMP should be taken directly from the medical subjects to enhance the authenticity which can increase students' motivation and willingness for learning.

4. Teachers of English should improve their knowledge in medical subjects such as terminology and structures used in medical texts by attending training sessions and workshops. Their knowledge of the discipline could be quite helpful to achieve their educational objectives in teaching EMP (Chang 2007).

5. Technology should be used increasingly as it might be helpful in providing the English speaking environment for local use. Also, it can help in providing different authentic materials to be used by medical students in the class (Kimball 1998). Students should be encouraged to have some basic knowledge of how to use technology such as computers and the Internet for the purpose of language learning. 6. It is suggested that Communicative language teaching (CLT) should be used for teaching English in the medical context. The main purpose is to develop the different components of communicative competence. According to Savignon (2005), she stated that "The essence of CLT is the engagement of learners in communication to allow them to develop their communicative competence" (635). Finally, it might be considered a limitation that no particular materials have been suggested yet for this educational context. However, the researcher aims to conduct another research study in which some theoretical frameworks will be suggested and certain materials will be experimented. Expectantly, that will be based on the results of this study and hopefully others in different medical faculties.

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