

An Investigation into Language Communicative Competences for Nursing Students

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IJASR 2022
VOLUME 5
ISSUE 3 MAY – JUNE

ISSN: 2581-7876

Abstract: The purpose of this research was to establish the degree of English competences required of nursing students during their training and to prepare them for future work as international nurses. The research was descriptive qualitative in nature. To collect data for this study, in-depth interviews were employed to address the study's goal. Six students from a Vietnamese university's nursing department took part in the research. According to the results of the data analysis, there are ten major competencies that nursing students must master in order to succeed in the field. Giving basic treatment explanations, providing health counseling, explaining pathology and its treatment, translating data collection, medical records, and report data, executing basic treatment, using communication skills in healthcare, approaching the patient, listening, questioning, and diagnosing, giving explanation and advice, and communicating in terms of involving the patient in management were among the competencies. Lecturers, the head of the department, and the university's academic council were given some implications and recommendations based on the findings.

Keywords: communicative competences, nursing students, English, qualitative research, health sciences.

1. Introduction

English has been said to as "both a global and a local language" (Crystal, 1997, p. 34). As a result, the manner in which English is taught "should be tailored to the learner's environment and requirements" (Kachru, 1997, p. 41). Mastering English language is the main success "condition for individual, society (local), and Vietnam in answering the era challenge in a global level". (Diep & Phuong, 2021, p. 7).

According to Austin (1976), a nurse is a health care practitioner who practices nursing. Nurses are men and women who, in collaboration with other health care professionals, are responsible for the treatment, safety, and recovery of people who are acutely or chronically ill or injured, as well as the health maintenance of the healthy and the treatment of life-threatening emergencies in a variety of settings. In order to fulfill their obligations for providing care, a nurse needs communication skills and abilities in order to establish positive relationships with others. Because the students were not used to utilizing English in their prior formal education, learning English in the nursing department is a difficult endeavor. It's all too easy for teachers to become the sole models for learning. If students merely function as "good spectators" and "listeners" without engaging in interactive discussion, the learning process would become tedious. This lesson will develop inactive pupils, which is in direct opposition to the language learning premise of being engaged in order to gain more practice. Passive pupils are also a result of a classroom learning scenario in which the teacher occupies a significant amount of space.

The university's efforts to establish and improve students' English proficiency should get a favorable response from students, allowing the institution to achieve the goals it seeks. Students, on the other hand, may hold various viewpoints. As a result, it's worthwhile to investigate the importance of English proficiency from the students' perspective. And, in order to define the study's focus, using English for specified reasons is appropriate in this situation. Hopefully, the findings of the study will provide useful information and serve as a springboard for additional investigation.

The main topic of discussion in this study was students' need for English proficiency, with the study's primary goal being to enable students to perform well in both the classroom and the workplace through the medium of English. The content and other aspects must be in accordance with the communication demands of nursing department students in terms of their English learning activities and future job, as well as the essential skills to successfully conduct those communication tasks. As a result, the curriculum must be included in the communication activities as well as the needed English communicative competencies.

2. Literature review

2.1. *Communicative Competences and Communicative Approach*

The ability to communicate successfully in English as a foreign language (EFL) is a key difficulty for EFL nursing students. Assessment of language proficiency for the nursing program, language assistance throughout the program, and measures taken by faculty to reduce materials and test bias and facilitate materials and test-taking by EFL students were among the strategies used at the institution to help students meet this challenge.

The term 'communicative' has an evident ring of truth to it, implying that we 'learn to communicate through conversing' (Larsen-Freeman 1986, p.131). Most instructors today profess to employ a communicative approach in some fashion (Mustard, 1996), and it's understandable that no one wants to be labeled a non-communicative teacher.

The instructor is expected to assume a "less dominant position" in strong variants of CLT, while learners are urged to be "more responsible managers of their own learning" (Larsen-Freeman 1986: 131). The communication approach strives to make communicative competence the objective of language instruction and to establish techniques for teaching the four language skills that recognize language and communication's interdependence. A communicative approach, founded on the idea that language is "a vehicle for the presentation of functional meaning," stresses the semantics and communication component of language rather than only the grammatical ones (Richard & Rodger, 1987, p.17).

Littlewood (1981, p.1), as cited in Richard & Rodger (1986:66), adds "one of the most characteristic features of communicative approach is that it pays systematic attention to functional as well as a structural aspect of language". It means that language teaching should include not only grammar but also the elements of communication function. "The belief, so widely held and so frequently repeated that "language is (a means of) communication "is wrong in a way that has been devastating to any adequate conception of what humans are and how they differ from other species. Communication is just one use to which language can be put (and distinguishing between a thing and its uses should surely form the most basic step in any analysis.)" (Maher, 1996).

2.2. *Development of Communicative Competences*

Humans, as social organisms, cannot exist without the desire to communicate and integrate with their surroundings. Humans developed language to describe their thoughts and feelings in order to engage and assimilate with their surroundings. A language is a form of verbal communication that humans employ as the most effective and efficient mode of communication in society. According to Nababan (1993, p.5), "language serves as a tool of social communication in general."

'Competence' relates to what speakers-hearers know, while 'performance' refers to how they communicate using that information (Chomsky in Rod Ellis, 1990). In its definitions, the concept of performance presents methodological issues concerning how or what a person can accomplish in relation to what he or she understands. Some competence aspects, including as the development of learners' personalities, skills, and scientific, masterpiece, behavioral, and interactional cultures, were established by Gonczi (1994). To put it another way, competencies are a description of the essential skills, knowledge, attitudes, and behaviors required for the effective performance of a real-world task or activity. Some competency elements have evolved into structural programs, such as the development of learners' personalities, skills, and scientific, masterpiece, behavioral, and interactional societies.

Ashworth and Morrison (1991) argued that in addition to skills and knowledge, the notion of competence was broad and involved a diverse set of qualities including attitudes, motives, personal interests, perceptiveness, receptivity, maturity and aspects of personal identity. Therefore, was it appropriate to label these different qualities as competencies and to what extent would this facilitate learning.

2.3. *Elements of Communicative Competences*

Celce-Murcia, Dornyei, and Thurrell (1995) suggested a model of communicative competencies in language education literatures that is congruent with the theoretical idea that language is communication, not merely a set of

rules. The consequence is that the defined communicative competence prepares learners to communicate using language in order to engage in the language community. This model is formulated as Communicative Competence represented in Celce-Murcia et al. (1995) as follows:

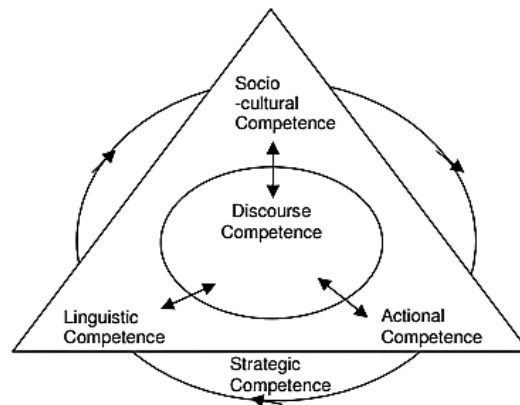


Figure 1. Communicative competence model (Celce-Murcia et al., 1995)

In Figure 1, according to Celce-Murcia et al., (1995), Communicative competence includes (i) Discourse Competence concerns with the interpretation of individual message elements in terms of their interconnectedness and of how meaning is represented in relation to the entire discourse or text (Canale & Swain in Richards & Rodgers, 2001); (ii) Actional Competence is referred as to actional competence because when someone says something, he/she actually do something. He/she may ask for services, give a compliment, ask for information, etc; (iii) Linguistic Competence is the ability to speak and understand language in a grammatically correct manner. Linguistic performance refers to the actual use of language in concrete situations, but under the idealization quoted by Lyons performance cannot directly reflect competence and nor can it have any major effect on it (Brown et al., 1996); (iv) Sociocultural/Sociolinguistic Competence is considered as effective and appropriate use of the target language (Shumin in Richard & Renandya, 2002). It helps learners know the social context in which communication takes place, i.e. the roles relationships, the shared information of the participants and the communicative purpose for their interaction (Canale & Swain in Richards & Rodgers, 2001); and (v) Strategic Competence is the way learners to manipulate language in order to communicative goals. It is the ability to compensate for imperfect knowledge of linguistic, sociolinguistic, and discourse rules. (Shumin in Richards & Renanya, 2002).

Communication strategies are psycholinguistic plans that are included in the communication competence of the language user. They can be aware of and act as stand-ins for production plans that the learner is unable to carry out (Ellis, 1990). Furthermore, numerous variables have different effects on communication approaches depending on the level of skill, the source of the problem, the individual's personality, and the learning setting. When a speaker is unable to communicate his initial communicative aim in the manner in which he intended, he is obliged to lower the goal or find alternate methods of expressing it. As a result of the first inability to implement a production plan, communication techniques emerge (Ellis, 1990). Strategic competence, according to Savignon (Celce-Murcia, 2001), is the adoption of coping techniques in unexpected situations. 'Strategic competence,' defined as 'how to deal in an actual communication situation and how to keep the communicative channel open,' is an important aspect of a language user's total communicative competence, according to Ellis (1990).

3. Methodology

The research employed descriptive-qualitative method. The research was conducted from September 2021 until January 2022 at a nursing department of a university in Hanoi, Vietnam to identify the English Competency needed by nursing students related to the communication activities. It was done by conducting the interview guideline with six students from a nursing department of a university in Hanoi, Vietnam. The interview guide contained a number of questions and the questions were used to dig the data needed based on the research problems. Every question can develop in such a manner, based on the deepness and broadness of data wanted. The interviewer decided the sequence and the wording of the questions. To help in conducting the interview, an interview blueprint was made

including (i) the definition of English competency; (ii) the importance of English competence; (iii) English competence for nursing; (iv) things needed in learning English; (v) problem faced in English learning process; and (vi) purpose for learning English.

The collected data was then analysed through an interactive model of analysis as suggested by Miles and Huberman (1992) including data reduction, display data, and drawing the conclusion.

4. Findings and Discussion

The interview specifically targeted nursing competence in terms of English communication. Nursing must possess 10 primary competence or actions. These included explaining basic treatments, providing health counseling, explaining pathology and its treatment, translating collected data, medical records, and report data, executing basic treatments, utilizing communication skills in healthcare, approaching the patient, listening, questioning, and diagnosing, providing explanation and advice, and communicating in terms of patient involvement in management.

Giving the explanation of basic treatment

In explaining basic treatment as a process of interaction with the patient, family, and other officers in taking over the activity of a patient in a treatment room, in explaining the concept of elementary treatment, treatment ethics, stress and adaptation, human being, healthy and unhealthy, environmental, and the arrangement of health service in Vietnam. It aims to carry out service activities in a ward, to ensure that patients are aware of their rights and duties throughout a hospital treatment process, to ensure that patients feel comfortable and secure in a ward, and to ensure customer satisfaction.

Giving the health counseling

The competency standard in providing health counseling was able to communicate, both verbally and in writing, via the use of appropriate and acceptable field, tone, and style of language related to providing health counseling. In providing health counseling, nursing activities are performed in conjunction with communication services in the course of interaction with patients, families, and other officers in order to provide communication guidance standard in a hospital treatment unit and to provide explanation of basic treatment such as ethics treatment in order to accomplish clear information about providing treatment, handling miscommunication of information or service.

Giving the explanation of pathology and its treatment

The competency criterion for explaining pathology and its treatment was able to communicate, both verbally and in writing, via the use of an appropriate and acceptable field, tone, and manner of language for explaining pathology and its treatment. In providing an explanation of pathology and its treatment, which is accomplished through interaction with the patient, family, and other officers while performing medical/nursing treatment, such as explaining the types of disease for mother/family planning and their treatment, the types of internal disease and their treatment, the types of surgical disease and their treatment, the types of psychiatry and their treatment, and the treatment of health soul. The objectives are to provide accurate information about treatment, to resolve miscommunications about information or services to the patient, family, and other officers, to provide discharge instructions, to provide advice on lifestyle, health promotion, or risk factors, and to ensure customer satisfaction.

Translating the data collection, medical record and report data

Translating data collecting, medical record maintenance, and reporting data activities is the process of interacting with patients, family members, and other officials in order to help the doctor visit and complete the medical record. The competence standard for translating collect data, medical records, and report data was able to communicate, both verbally and in writing, via the use of an appropriate and acceptable field, tenor, and mode of language for translating collect data, medical records, and report data. These actions are carried out to provide service in a ward, to provide information to the patient during the course of treatment, to provide service that enables the patient to feel comfortable and secure in a ward, and to increase customer satisfaction.

Executing the basic treatment

Executing the basic treatment is a process of interaction with the patient, family, and other officers in order to utilize communication skills in executing the basic treatment, which may include explaining the basic concept of treatment action, conserving individual hygiene and the environment, meeting oxygen and nutrition requirements, dilution and electrolyte requirements, as well as meeting sonde requirements (installation of infuse and transfusion), and meeting other requirements. The competence standard for administering the basic treatment was able to communicate, both verbally and in writing, via the use of an appropriate and acceptable field, tenor, and style of language for administering the basic therapy.

Using communication skills in a healthcare

The competency using communication skills in healthcare is a process of interaction with patient, family, and other officers in order to give the information such as explaining the diagnosis, making investigation and treatment, involving the patient in the decision-making, communicating with relatives, communicating with other health care professionals, breaking bad news, seeking informed consent/clarification for an invasive procedure or obtaining consent for a post-mortem, dealing with anxious patients or relatives, giving instructions on discharge, giving advice on lifestyle, health promotion or risk factors, and create the customer's satisfaction. The competence standard in using communication skills in healthcare was able to communicate, spoken, and written, by the use of a proper and acceptable field, tenor, and mode of the language which concern with using communication skills in healthcare.

Approaching the patient

Approaching to the patient is a process of interaction with patient, family, and other officers in order to build a good relationship between patient and nurse and create the customer's satisfaction. The communicative competence activities such as introducing and orientating the patient and nurse, establishing an attentive, respectful and non-judgmental relationship; acknowledge the patient's emotions and concerns. The competency standard for approaching the patient was able to communicate, both verbally and in writing, via the use of an appropriate and acceptable field, tenor, and manner of language for approaching the patient.

Listening, questioning and diagnosing

The communicative competence in listening, questioning and diagnosing is a process of interaction with patient, family, and other officers in order to ensure the nurse has understood the patient's symptoms/problem and concerns and summarize and clarify understanding. The competency standard for enabling electrolyte and liquid needs listening, questioning, and diagnosis was able to communicate, both verbally and in writing, via the use of an appropriate and acceptable field, tenor, and manner of language for listening, questioning, and diagnosing. They performed certain language functions while engaging in listening, inquiring, and diagnostic tasks.⁹ Giving explanation and advice

Giving explanations and advice is a process of interaction with the patient, family, and other officers. Its goal is to help the patient grasp the problem/situation, reassure them properly, summarize and explain their understanding, and satisfy the customer. The competence standard in providing explanation and guidance was able to communicate, both verbally and in writing, using appropriate and acceptable field, tenor, and manner of language for providing explanation and advice.

Communicating in terms of involving patient in management

Communicating in term of involving patient in management is a process of interaction with patients, families, and other officers. Its goal is to include patients in management, to implement the essential idea of therapy in medical action, to preserve individual hygiene and the environment, to fulfill the need to feel secure and comfortable, and to increase customer satisfaction. The competency standard in communicating in terms of including patients in management was able to communicate, both verbally and in writing, using appropriate and acceptable field, tone, and method of communication in terms of involving patients in management.

5. Conclusion

The purpose of this study was to determine the English proficiency required of nursing students for communication activities. The interview and observation both addressed the nursing competences in terms of English communication clearly and implicitly. The data analysis revealed that nursing students needed to master 10 primary abilities in order to perform well in the nursing profession. They included 'explaining basic treatment', 'health counseling', 'translating the collect data, medical record, and report data', 'executing basic treatment', 'using communication skills in healthcare', 'approaching the patient, listening, questioning, and diagnosing', 'explaining and advising', and 'communicating in terms of involving the patient in management'.

This study examines how teachers may direct foreign language instruction in the classroom in such a way that nursing students can speak in a conscious manner, taking into account their real-world experiences. English should be used as the medium of instruction throughout the educational process. This matter is intended to provide not only a favorable environment for students to improve their English proficiency, but also to accomplish the objectives of English for nursing students.

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