English Cafe Activity for Nursing Students to Improve English Communication Skills

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Abstract

This study evaluated the impact of an elective English learning program on first-year nursing students. This program was an effort to help students achieve one of the goals mentioned in the Diploma Policy (requirements for the degree and the expected learning outcomes) of the Faculty of Global Nursing in Otemae University: becoming competent English-language communicators. Among eight study participants, two made three-minute speech presentations after participating in the spring and fall semester activities. We analyzed three role plays and one speech video recorded in terms of verbal and non-verbal communication skills. WPM (words per minute) results did not reveal a noteworthy increase, however, at the final speech session, both Student A and Student B spoke English for about a minute without having a glance at their notes. In the first task, neither Student A nor Student B changed their facial expression in response to conversation topics or reactions of others. However, they exhibited these positive nonverbal communication cues in the second and third sessions. Students improved their English communication skills through a role play and a speech presentation. Our program helped students to speak for a longer time without reading notes.

Keywords: English education, Global Nursing, Nursing student, Communication skills

Introduction

Cultivating cultural and linguistic competencies is a core part of nursing education in the globalized world (Committee for Fostering Human Resource in Nursing Education. MEXT Japan, 2017). In Japan where the numbers of foreign residents and tourists are rapidly growing, nursing education should be designed to foster cross-culturally competent nurses. In an Interim Report of The Council on Promotion of Human Resource for Globalization Development, the following pillars constitute the educational backbone of globally minded nursing professionals are mentioned: I) foreign language and communication skills, II) commitment, motivation and willingness to take challenges, partnership and flexibility, responsibility and sense of mission, and III) cross-cultural understanding and identity in Japanese culture (The Council on Promotion of Human Resource for Globalization Development, 2011). Pillar I underscores the need for nursing students to acquire English skills as a global communication tool, which helps them interact with people of different value systems and cultural backgrounds. A recent study showed that practicing nurses often have communication problems with non-Japanese patients (Kambayashi et al., 2020). To improve linguistic and communication skills of nursing college students, new and improved teaching tools and methods were applied to lectures, exercises, and practices. Although most of these efforts were useful for expanding technical vocabulary, they did

not equip students with a good command of speaking, writing, or communicating in English (Suzuki & Mori, 2017). Lessons on practical English skills with a focus on (i) memorizing basic phrases (input) and (ii) using them to express oneself (output) should be included in the first-year nursing curriculum.

At the Otemae University Faculty of Global Nursing, Practical English Class I for Nurses and Practical English Class II for Nurses are compulsory. In addition to these, English teaching activities (referred to as the "English Cafe") are provided as non-credit electives: These activities are held once a week. The main purpose of this non-credit program is to expose participants to opportunities of building vocabulary and expressing themselves in English. This study reports the effects of this education program on the participants' English communication skills.

This study was conducted to inform methods for nurturing globally competent professionals who speak English as a second language. In the first report of the series, we analyze the changes in English communication skills of the students who participated in this learning program.

Methods

1. Participants

Eight undergraduate students of the Otemae University Faculty of Global Nursing signed consent to participate in this study. Those students were among 12 first-year students who were assessed as having poor English skills based on the results of placement tests (of reading and listening comprehension, similar to the TOEIC Bridge), conducted before the start of English classes.

2. Activities

1) Frequency

One weekly session lasted for 90 minutes, and 13 and 12 sessions were held in the spring and fall semesters, respectively in 2019.

2) Program contents

The activities were designed to help students attain the objectives of "becoming globally competent professionals" and "becoming competent communicators by cultivating English conversation and communication skills," stated in the Diploma Policy of the Faculty of Global Nursing in Otemae University. The potential target population of this study was 12 first-year Faculty of Global Nursing students who were assessed as having poor English proficiency based on the results of English placement tests conducted at their entry to the university.

In the spring semester of 2019, activities included role play or skits, where students acted as a person giving directions to a foreign tourist or as a guide introducing Japanese culture. Students were asked to create the skit scripts in English, the purpose of which was to improve their writing skills. Role play also included scenarios aimed to improve students' medical English skills, where students assumed the role of a nurse interviewing patients with abdominal pain, fever, or respiratory symptoms. Moreover, students were exposed to opportunities to interact with non-Japanese individuals, such as overseas students and tourists. In one occasion, students made an outreach trip to the Osaka Castle, where they volunteered to introduce Japanese culture to sightseeing visitors. In the fall semester, activities included medical English quizzes to help build participants' vocabulary and "sugoroku," a type of dice board game, played in English to activate their verbal responsiveness.

One of the major tasks required of the students was to make a three-minute English speech at the end of fall semester. Students were asked to talk about their experience in the Fundamental Nursing Practicum Care I they participated in. In their preparation for the three-minute presentation, students received guidance on speech writing and instructions for presentation, including correct English pronunciation, articulation, and fluent deliv-

ery.

For this one year activity, we set four tasks. The four tasks were (Task 1) role play of "giving directions to a foreign tourist" conducted at the beginning of the program, (Task 2) role play of "speaking to a tourist suffering from abdominal pain" held around the end of the spring semester, (Task 3) role play of "inquiring about symptoms at a clinic: fever" conducted around the end of the spring semester, and (Task 4) three-minute speech made at the end of the program. To minimize participants' burden, we set the goal step by step. For the first step, participants started with daily conversation. For the second step, participants tried a conversation using few medical words. For the third step, participants tried conversation at a clinical setting. For the last step, participants made the three-minute speech, therefore, they had to speak longer than task 1, 2, and 3.

At the beginning of the teaching program, Japanese language was occasionally used to help participants overcome psychological barriers to and familiarize with English. This was based on the consideration that the Practical English Class I for Nurses and Practical English Class II for Nurses Courses were tutored by native English speakers.

This program was run and managed by three non-English native faculty members of the Faculty of Global Nursing, including those who received their academic degrees or had work experience in English-speaking countries.

3) Evaluation of Communication Skills

In this study, participants' verbal and non-verbal communication skills were evaluated. Verbal communication skills were evaluated based on the number of words per minute (WPM) as French (2015) reported WPM as an evaluation tool of free-conversation. Regarding non-verbal communication skills, friendly and displeasing non-verbal cues were listed taking note of the studies by Oxford & Findley (2013) and by Nakano et al. (2020) (Table 1). Based on these literatures, we decided to count words per minute for role-play sessions and the three-minute speech, and extracted non-verbal cues from video-recorded activities. About data collection, the role-play and speech performance of individual students was video recorded and analyzed for verbal and non-verbal communication. All 12 students were video recorded, but only the 8 students who provided consent to study participation were analyzed for their performance. Moreover, participants were asked to submit the written responses after the end of each activities to reflect their perceptions of improvement regarding of English communication skills.

Table 1.　Non-verbal communication cues indicating friendliness and displeasure

Signs of Friendliness	Signs of Displeasure
・Eye contact ・Looking into each other's eyes ・Looking and smiling at each other ・Reaching out to another ・Smiling face ・Smooth bodily movement ・Eyebrow flash ・Shining eyes ・Talking at eye level ・Changing facial expression in response to conversation topics or reactions of others ・Head nodding while listening ・Clear and well-paced speech ・Speaking with hands and gestures	・Turning the face away ・Frowning ・Apathetic look ・Frequent blinking ・Downturned mouth ・Touching head, hair, or other parts by hand ・Scowling ・Tightly shut eyes ・Pouting lips ・Approaching silently with a tense face ・Talking without eye contact ・Bowing in an equivocal manner ・Speaking with arms crossed ・Speaking from a distance or bringing one's face within 15 cm of the person who is speaking ・Bodily motions not responding to the other person's reactions ・Unnatural head nodding irrelevant to the conversation ・Shy smile unrelated to the conversation ・Monotonous speech ・Covering one's mouth with hand while speaking

3. Data analysis

The following activities were analyzed: (Task 1) role play of "giving directions to a foreign tourist" conducted at the beginning of the program, (Task 2) role play of "speaking to a tourist suffering from abdominal pain" held around the end of the spring semester, (Task 3) role play of "inquiring about symptoms at a clinic: fever" conducted around the end of the spring semester, and (Task 4) three-minute speech made at the end of the program. Three study researchers watched the video recorded activities and independently evaluated the verbal and non-verbal communication skills of the study participants.

Verbal communication skills were evaluated in terms of WPM. Study researchers compared the results of their assessment of individual study participants. If there were discrepancies in their assessments, they were required to reassess. They repeated the process of evaluation and comparison until all of them reached the same results. Non-verbal communication skills were evaluated in terms of the types and numbers of non-verbal cues denoting friendliness and displeasure. Study researchers discussed the results of evaluation until they all reached the same conclusions. Individual video recorded sessions were approximately three minutes long. The study researchers checked whether the specific cues listed in Table 1 were present or not. Moreover, study researchers analyzed the written responses that students made after the end of major activities.

Ethical Considerations

On the first day of the program, students were given detailed explanations about the study purpose, objectives, methods, data handling procedure, and confidentiality. They were also told that they were free to choose to participate or decline and that they could discontinue study participation or withdraw consent at any time. Moreover, they were told that their refusal to participate would involve no penalty or loss of benefits to which they were otherwise entitled.

All these matters were specifically stated in the Study Participation Request Sheet and its accompanying document. Willing volunteers provided their consent in writing. All these consent was informed after ethical approval obtained.

Attention was paid to minimize implicit coercion to participate in this study because this program was run by faculty members although it was non-credit after-school activities. Specifically, this study was explained at the first session (in April) using documents. Students were given ample time to decide on participation or refusal until the last July session, when this study was explained again for students to make their decisions. Informed consent forms were distributed along with an envelope for return. Students entered their decisions in the form, and returned it in the envelope provided. Ethical approval for the study (No. 20190422) was obtained from the University Ethics Committee at Otemae University, Japan.

Results

Among eight study participants, two made three-minute speech presentations after participating in the spring and fall semester activities (hereinafter designated as "Student A" and "Student B"). Only these two students completed all four tasks. Other 6 students dropped out because these activities were elective, not compulsory. Changes in "Student A" and "Student B" English communication skills were analyzed over the course of the program.

1. Verbal Communication Skills (Table 2)

In the first role-play activity, students performed a 50-second skit and came across a foreign tourist who lost his/ her way and was looking for directions (triadic conversation). Both Student A and Student B had a 10-second time frame to say something. However, neither said a word without the script. As sessions continued, Student A spent an increasing amount of time speaking without the script or speech

Table 2. Verbal Communication Skills

Student	Results	Task			
		1	2	3	4
		Giving directions to a foreign tourist	Speaking to a tourist suffering from abdominal pain	Interviewing a patient suffering from fever	Three-minute speech
A	WPM No. of words spoken without script	0	90 24words/16sec	58 49words/50sec	70 95words/81sec
	Total No. of words in the whole script/speech	9words/9sec	24words/16sec	49words/50sec	336words / 278sec
B	WPM No. of words spoken without script	0	50 15words/18sec	82 22words/16sec	62 56words/54sec
	Total No. of words in the whole script/speech	10words/4sec	15words/18sec	22words/16sec	282words/262sec

WPM: word per minute.

manuscript: 16, 50, and 81 seconds. Similarly, Student B's amount of time speaking without the script or speech manuscript generally increased with practice: 18, 16, and 54 seconds. At the final speech session, both Student A and Student B spoke English for about a minute without having a glance at their notes. Student A and Student B made their 3-minute presentations at a WPM of 70 and 62, respectively. These WPM results did not reveal a noteworthy increase from the role play of "speaking to a tourist suffering from abdominal pain" held during the spring semester.

2. Non-verbal Communication Skills (**Table 3**)

Table 3 shows the non-verbal communication profiles of Student A and Student B. Gray shades indicate the elements observed in each of the video recorded sessions. The numbers of communication cues denoting friendliness and displeasure were counted for individual sessions. Both Student A and Student B showed friendly cues more frequently than unpleasant cues. Although Student B often exhibited unpleasant cues in the first and second tasks, their frequencies decreased in the third and fourth sessions, in which friendly cues were more frequently noted than in the first task. Common unpleasant cues included unnatural head nodding irrelevant to the conversation, shy smile unrelated to the conversation, and touching a part of one's body. In the first task,

neither Student A nor Student B changed their facial expression in response to conversation topics or reactions of others. However, they exhibited these positive nonverbal communication cues in the second and third sessions. In their speech presentations, Student A and Student B demonstrated the following friendly cues: eye contact, smiling, smooth bodily movement, eyebrow flash, shining eyes, and clear and well-paced speech.

3. Written Responses from the Study Participants

After the first role-play task (i.e., giving directions to a foreign tourist), Student A and Student B provided the following written responses: "I want to learn English more actively" and "At first, I thought I would never be capable of giving directions without preparation. Today's class made me realize that simple English will do, and this made me more interested in speaking English." After the second and third role-play sessions (i.e., in health-related situations), they wrote that: "I wish to speak simple English to make them feel easy," "I am ready to speak to someone feeling ill," and "I am determined to learn more." After the last session (i.e., three-minute presentation), their responses were: "This was my first time to speak many long English sentences. I could not memorize them all by heart, but I am happy that I challenged it" and "I am confident that I can make English

Table 3. Non-verbal Communication Profiles

			Task 1 — Giving directions to a foreign tourist	Task 2 — Speaking to a tourist suffering from abdominal pain	Task 3 — Interviewing a patient suffering from	Task 4 — Three-minute speech
A	Signs of Friendliness	· Eye contact	■	■	■	■
		· Looking into each other's eyes	■	■	■	
		· Looking and smiling at each other	■			
		· Smiling face	■			■
		· Smooth bodily movement		■		■
		· Eyebrow flash				■
		· Shining eyes				■
		· Changing facial expression in response to conversation topics or reactions of others		■	■	
		· Head nodding while listening	■			
		· Clear and well-paced speech	■	■	■	■
		· Speaking with hands and gestures	■	■	■	■
		total 13	7	6	5	7
	Signs of Displeasure	· Touching head, hair, or other parts by hand			■	
		· Speaking with arms crossed			■	
		· Shy smile unrelated to the conversation	■			
		total 19	1	0	3	0
B	Signs of Friendliness	· Eye contact	■	■	■	■
		· Looking into each other's eyes		■	■	
		· Looking and smiling at each other			■	
		· Reaching out to another		■		
		· Smiling face		■	■	■
		· Smooth bodily movement				■
		· Eyebrow flash				■
		· Shining eyes				■
		· Talking at eye level		■		
		· Changing facial expression in response to conversation topics or reactions of others		■	■	
		· Head nodding while listening	■		■	
		· Clear and well-paced speech	■		■	■
		· Speaking with hands and gestures		■	■	
		total 13	3	7	8	6
	Signs of Displeasure	· Touching head, hair, or other parts by hand		■		
		· A tense face	■			
		· Talking without eye contact	■			
		· Unnatural head nodding irrelevant to the conversation	■	■		
		· Shy smile unrelated to the conversation		■		
		· Monotonous speech	■	■	■	■
		· Covering one's mouth with hand while speaking		■		
		total 19	4	5	1	1

presentations if I have sufficient time to prepare for them."

Discussion

1. Training-Induced Changes in Communication Skills

WPM is a metric indicator for linguistic proficiency. Native speakers of English have a WPM of 111 to 291 (Yuan et al., 2006). Also, French (2015) reported Japanese University students had a WPM of 73-115. Both Student A and Student B had WPM counts ranging from 80 to 90, approximately half the average speed of native English speakers. The slow speed of their speech was attributable to the fact that these students spoke as they recalled their scripts. Our study did not show a large change in WPM before and after the English lessons, although WPM was used as an evaluation tool for a free-conversation (French 2015). However, both students made a considerable progress in their linguistic skills; they could not memorize a 10-second speech at the start of the program but successfully recited a one-minute monologue at the end of it. Our results suggest that students should learn to recite by heart a 100-word monologue over one minute, if they hope to gain confidence in speaking English. Fuyuno et al. (2014) reported recitation was effective for Japanese University students on improving their pronunciation, public speaking skills, listening skills and comprehension. This is a more practical goal than setting a certain target WPM count.

Although our study enrolled students who were intimidated about or had psychological barriers to speaking English, they frequently exhibited friendly nonverbal cues, even during the first role-play task. This finding is supported by the fact that students who seek admittance to nursing education programs are aware of the significance of having a positive interaction with other people, considering that communication skills are integral part of their future profession. The finding that students frequently showed friendly communication cues when they spoke English helps them develop confidence in their English communication skills. Student A and Student B were rated as successful in (i) changing their facial expressions in response to conversation topics and reactions of others and (ii) speaking with hands and gestures. Nakano et al. (2008) consider that these non-verbal cues play a critical role in signaling that the sender is interested in the receiver because these cues represent the sender's willingness to adapt to the person in communication. Health-related scenarios allowed the students to present facial expressions more clearly in response to the reactions of the suffering person. In their three-minute presentations, both students used their nonverbal communication skills, such as eyebrow flash and shining eyes, to relate to the listening audience.

These role-play practices contributed to building students' confidence in their English communication skills. They found that simple English can deliver a caring message and they were willing to utilize what they learned. Moreover, student B was confident that she would be able to deliver a relatively long monologue (lasting for a minute) if she had sufficient time for its preparation. In a role-play study whereby first-year nursing students simulated a situation of measuring vital signs of an English-speaking patient, students reported that single words and fragmented phrases can be an effective means of communication (Ochiai et al., 2017). They also reported that although it was not difficult to read out the English notes they had prepared, they could not satisfactorily attend to the responses of the patient in a quick and flexible manner. In our study, students realized from role play that simple English phrases can be a powerful tool of communication in interacting with someone suffering from abdominal pain in the street and interviewing patients in a clinical setting. However, students in our study did not receive feedback from the native English speakers to check that their messages were correctly received as they were meant to be. Moreover, students were not prepared when their stock of expressions was not sufficient for assembling the

language they wanted to communicate. These points should be taken into consideration when designing future training programs.

2. Evaluation of Program Effectiveness and Educational Implications

The teaching program studied here had the following characteristics: (i) occasional use of Japanese language was permitted, (ii) students created their own scripts in English, (iii) exercise themes gradually shifted from general to specific (nursing) topics, (iv) students made an oral presentation in English, and (v) the level of linguistic difficulty gradually increased. English education programs can be divided into two types: English for Occupational Purposes (EOP) and English for General Purposes (EGP). Our program was a hybrid of the two. In the role-play sessions, students demonstrated non-verbal communication skills more frequently in health-related scenarios than others, which suggests that the EOP model may be a suitable approach to the needs of our students. In a study by Kambayashi et al. (2020), on the other hand, practicing nurses had the strongest need for general conversation training. In light of the need for EGP training among practicing nurses. Therefore, one of our program characteristics (iii) exercise themes gradually shifted from general to specific (nursing) topics is quite effective. Future language programs should incorporate both EOP and EGP models.

In our role-play sessions, a variety of topics and scenarios were used to keep students stimulated. Some scenarios included dyadic conversations, whereas others included triadic conversations. The three-minute speech presentation was a monologue. These differences in speech settings may have prevented students from realizing improvements in their linguistic skills. In future programs, a single pattern of communication, such as triadic, may be applied consistently to help students recognize and evaluate improvements in their conversation skills.

This study had a very small number of partici-

pants. Only two students made their three-minute speeches to fulfil the one-year program requirements. The results of this study are therefore limited in their generalizability. Moreover, linguistic skills profiles determined for dyadic conversation, triadic conversation, and monologue cannot be compared directly with each other.

Conclusions

This study evaluated the impact of our English training program on first-year nursing students. This program was an effort to help students achieve one of the goals mentioned in the Diploma Policy: becoming competent English-language communicators. Our program focused on building English vocabulary (input) and using it to express themselves (output). Students improved their non-verbal communication skills through role play of tourist and health-related scenarios. Our program helped students to speak for a longer time without reading notes. Taking into consideration the suggestions for improving the language skill evaluation methods, we will revise the current program for future use.

Acknowledgements

Conflict of Interest

The authors declare that they have no conflict of interest.

References

Committee for Fostering Human Resource in Nursing Education. MEXT Japan. (2017) Moral Core Curriculum for Nursing Education in Japan Learning Objectives aiming for acquiring "core abilities of nursing practice in bachelor's degree program". Retrieved https:// www. mext. go. jp/ component/ a_menu/ education/ detail/ __icsFiles/ afieldfile/ 2017/ 10/

31/1217788_3.pdf (accessed 10 December 2020).

French, N. (2015) English Conversation at Native Speeds: A Preliminary Study on the Effects of Using Variable Sentence Response and Conversation Cards in a Japanese University. GAKUEN, 894, 82〜98.

Fuyuno, M., Hama, N., Myall, J., & Yukimaru, N. (2014) Effects of the Experience of English recitation on Japanese EFL learners: towards multi-modal English speaking skills education. Seinan Gakuin University Center for Language Education, 3, 15-28.

Kambayashi, C., Kondou, A., Koizumi, M., & Futami, A. (2020) Needs and motivation of hospital nurses regarding training on how to care foreign patients in Japan. Journal of International Health, 35(1), 27-38. DOI: https://doi.org/10.11197/jaih.35.27:

Nakano, M., Tsuji, S., & Mizuta, M. (2008) Characteristics of Non-verbal Communication of First Grade Nursing Students. *Bulletin of School of Health and Nursing Science Wakayama Medical University*, 4, 77-89.

Ochiai, R., Matsumoto, Y., Okochi, A., Miyauchi, K., Tsukagoshi, M., Katayama, N., Nakamura, S., Watanabe, T., Sato, T., Kanoya, Y., & Watabe, S. (2017) English Education program for the first-year nursing students.

Yokohama Journal of Nursing, 10(1), 29-35.DOI: info: doi/10.15015/00000526

Oxford. M, L. & Findley, D, M. (Eds.). (2013) NCAST Caregiver/ Parent-Child Interaction Teaching Manual (2nd ed.), Seattle: NCAST Programs, University of Washington, School of Nursing

Suzuki, S. & Mori, H. (2017) Examining the Improvement of Medical Vocabulary. *Japanese Red Cross Toyota College of Nursing*, 12(1), 43-50.

The Council on Promotion of Human Resource for Globalization Development. (2011) An Interim Report of The Council on Promotion of Human Resource for Globalization Development. Retrieved https:// www. kantei. go. jp/ jp/ singi/ global/ 110622chukan_matome. pdf (accessed 10 December 2020).

Yuan, J., Liberman, M., & Cieri, C. (2006) Towards and Integrated Understanding of Speaking Rate in Conversation. *Proceedings of Interspeech*, 541-544.
URL https:// www. semanticscholar. org/ paper/ Towards-an-integrated-understanding-of-speaking-in-Yuan Liberman/494507cb6b92e4ded5eac7849199f3202a 9430d5