# Benefits of Student-Centered Tandem Teaching in Medical English

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#### **SUMMARY**

This paper addresses some of the key notions about English for special purposes with special regard to English for medical purposes. The content was determined by observations and based on authors' professional experience. The starting point of a medical English course is a thorough analysis of students' needs, which is then used in course design and definition of appropriate learning goals. The student is at the center of learning and it is necessary to establish a positive cooperation between students and teachers. As medical English course is highly context-based, the inclusion of medical teachers can offer many opportunities for a successful learning process.

**Keywords:** learner-centered approach; problem-based learning; student autonomy; teacher's role; tandem teaching

#### INTRODUCTION

The expansion in scientific, technical and economic activity on an international scale has brought about the development of career-specific language – English for special purposes (ESP). Consequently, the language teaching profession has also changed in the sense that new methodological principles are now needed in order to meet the specialized needs of language learners.

The traditional, authoritative teaching styles are a thing of the past. Nowadays, more attention is paid to interactive methods. As a result, discussing, consulting and reacting critically have become indispensable part of student-teacher encounters. Teachers are no longer seen as the fountain of knowledge, they have to learn to listen to students and be willing to respond to their subjective learning needs. This calls for considerable personal sensitivity from the teacher, flexibility in terms of teaching styles and mastery of a wide range of methodological alternatives [1].

It is fulfilling for a teacher to work with medical students on the skills they need to perform better in English. In a modern medical English classroom, there is less emphasis on coursebooks. What is considered highly important is learners' material as a basis of the course. The material could be documents, medical papers, emails, presentations or conversations about their medical experiences. With this kind of relevant material, lessons are entertaining and, most of all, useful for the learner.

Teaching medical English also offers the opportunity to establish a successful cooperation with medical teachers. They bring in their highly specialized medical knowledge, which provides a suitable professional context utilized in language learning situations.

Medical English lessons can be unpredictable and exciting. They offer an opportunity to experiment with various approaches, which will most effectively help learners to achieve their needs-based goals.

The aim of this paper is to discuss some of the basic ideas of teaching English for medical purposes (EMP), to present the benefits of tailoring the lessons according to student needs and authentic occupational situations, and to explore the opportunities offered by close professional cooperation with the medical teachers.

## BASIC CHARACTERISTICS OF TEACHING ENGLISH FOR MEDICAL PURPOSES

#### Learner-centered approach

The nature of learners is central to modern language for special purposes teaching. When developing a learner-centered curriculum and course design, it is essential to examine the issues of learner prior knowledge, language processing and conceptions of tasks that influence classroom practices. In learner-centered approaches, course design and teaching often become negotiated, dynamic processes, since needs, expectations and student resources vary within each group and within a single course sequence. This does not mean that students are in total control. It suggests that teachers must take into account student learning styles, strategies and language processing approaches. Students benefit from expanding their learning strategies, so ESP teachers should assist students in becoming more flexible and more aware of their own learning styles and approaches.

The student-centered approach to teaching ESP brings to the fore the importance of needs

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Zorica ANTIĆ Medicinski fakultet Univerzitet u Nišu Bulevar dr Zorana Đinđića 81 18000 Niš Srbija englishformedicine@gmail.com analysis. In a word, the student, with his needs, is placed at the center of the course design [2]. ESP focuses on the learner and refers to the whole range of language resources. An ESP course is directly concerned with the purposes for which learners need English. It is based on a rigorous analysis of students' needs and should be 'tailor-made'.

#### **Needs analysis**

Whereas English had previously decided its own destiny, it now became subject to the wishes, needs and demands of people other than language teachers [3]. It is very important to start the course-designing process with an analysis of the target group of students. Many problems in English as a foreign language classes are the result of teachers not paying attention to learners' interests and ignoring students as a source of essential information.

Students' analysis can give two kinds of information. The first reflects what the learners 'possess' – their current level in English, motivation, methods of learning they have experienced. The second kind of information will shed light on what the students want to achieve. This information is very helpful for the teacher to fulfill his role as the teacher of ESP/EMP.

There are many methods of performing a needs analysis. Some of them are entry tests on arrival, pre-course or diagnostic tests, self-placement tests, observation of classes, questionnaires, interviews, final evaluation and feedback, previous researches. For a complete and accurate picture, several methods should be used whenever possible. Identifying the learners' needs is tricky and we must beware of imposing on him the needs which we think he should have but of which he is unaware [4]. It is also important to have in mind that needs may change. While both learners and teachers may have a full and clear picture of needs at the start of the course, priorities will change as current needs are satisfied or modified, and new needs emerge. Needs analysis is an ongoing process and it is not confined to the beginning of the course.

Medical students are motivated by the desire to learn English for professional and academic purposes. They want to communicate in English with certain groups of people about fairly specific topics. They have a desire to publish medical articles in respected journals; they want to participate in international conferences. But first of all, when they graduate, they want to be able to speak medical language. They want to learn the material which will be useful and relevant to their professional lives [5]. The syllabus attempts to meet students' expressed needs and interests, which are determined through a pre-course needs analysis questionnaire and progressive observation. Understanding of student needs changes as the teaching tasks are carried out. Needs analysis also includes suggestions from teachers of medical subjects. Conversations and interviews revealed that medical teachers expected the course to improve mainly the speaking skills. Communication in English (presentations, conferences) presented a problem especially in the discussion phase of presentations

because discussions can be highly unpredictable, they imply active communication and answering and asking questions. Reading and understanding specialist texts, e.g. articles, medical literature, case studies, medical reports, was also considered very important, as well as writing skills, such as articles for medical journals.

Medical students are adult learners who are highly conscious of themselves and their purpose. For this reason, it is important to make use of what they bring to the class, as well as to nourish their interests and motivations. Medical English is taught from the perspective of medicine and health care first and foremost while reinforcing vocabulary acquisition, grammar and structure secondly. Students' interests are maintained because they can readily appreciate the relationship established between the English class and what goes on at the workplace, such as medical laboratory or in doctor-patient encounters. In this way the authentic world is brought to the students and they learn to interact with the language as it is spoken and written in target situation. In order to make this possible, the EMP teachers must be willing to interact with both experts in the target situation and with the students.

#### **Material development**

A coursebook cannot answer all the needs that each new generation of students may have. For that reason, it is necessary to include other relevant additional material having in mind that *medical skills* are of utter importance and the course has to include them as well. Medical skills involve the practical things that medical professionals have to do in their working lives – talking to patients, giving presentations, participating in meetings, telephoning, writing emails and socializing with colleagues. Medical skills lessons include teaching the following elements of language:

- Functional language specific to the medical skills, e.g. standard phrases for talking to patients, consulting, advising, writing emails or talking in meetings and discussions
- Language skills specific to that medical skill, e.g. listening skill or fluency
- *Language systems* specific to the medical skill, e.g. pronunciation for giving presentations or modal verbs for being polite or expressing compassion.

Teaching medical skills also involves looking at aspects of register – different levels of formality are applied when talking to colleagues at a formal meeting, as opposed to talking to patients.

Medical vocabulary that learners need when doing their jobs is taught at the beginning of the course. It is typically divided into general and specialist vocabulary. The *general vocabulary* is related to organs, systems, diseases, and it also includes terms used for describing movement, position, location, structure and function. It can be said that these are words familiar to the English language speakers even if they do not have a background in medicine. The *specialist vocabulary* is composed of words very specific to learners' jobs, e.g. terminology used by an anesthesiologist

or names of different surgical procedures. The material is often obtained from expert medical articles, medical documentation, case studies and reports that student encounter during their studies.

It should be pointed out that the amount of grammar taught depends on the learners' needs and these needs are best served by integrating grammar into the language skills. For example, when asking for information, we can focus on polite questions; when explaining treatment options and outcomes, we can focus on modals verbs; the use of tenses will be part of exploring different medical case studies.

#### **Problem-based learning**

Problem-based learning is an approach in language teaching which consists of carefully selected and designed problems that demand from the learner acquisition of critical knowledge, problem solving proficiency, self-directed learning strategies and team participation skills. The process replicates the commonly used systematic approach to resolving problems or meeting challenges that are encountered in life and career.

In problem-based learning, the traditional teacher and student roles change. The students assume increasing responsibility for their own learning, giving them more motivation and more feelings of accomplishment, setting the pattern for them to become successful life-long learners.

Students involved in problem-based learning acquire knowledge and become proficient in problem solving, self-directed learning and team participation. Students are offered opportunities to own their own learning experiences and develop independence in inquiry.

One of the ways to apply the problem-based approach is the use of medical case studies. Case study is a basic diagnostic method in medicine. It revolves around a patient and his problem. However, it can also be used in medical English classes as it offers numerous language learning opportunities, such as revision of tenses, asking and answering questions, word formation (in terms of both affixes and word derivation). Since the basis of a case study is medical interview, the students also have a chance to practice their communicative skills related to medical context, such as initiating conversation with a patient, exploring signs and symptoms, presenting treatment options, advising and suggesting. The academic context refers to preparing presentations and discussions, exploring the problems referred to in the case and writing research papers concerning a specific topic. The case study method is also suitable for developing team-working skills as it is conducted in groups and pairs and it also enables shared learning.

#### Autonomy and a good language learner

In a traditional classroom, both learners and teachers were accustomed to a high degree of teacher control. Students may have deeply rooted beliefs about the roles of teachers and students, which may slow down the process of achieving independent learning. It is crucial to show students the range of autonomous options and raise their awareness of the different learning strategies that are open to them. Students need to take responsibility for their own language development, which would in turn prove useful when they have to use English in their professional lives.

The most successful language learning is connected with assuming responsibility for learning [6]. Taking responsibility for learning is the first step towards autonomy. A 'good language learner' [7] is one that finds his way, asks a lot of questions, makes guesses, organizes his information, takes every chance to use the language. Learners are individuals with very different learning styles and needs. Learner strategies aim to help learners acquire the knowledge and skills they need to plan and implement effective language learning, help them discover how they learn and apply the most effective method for them. Learner strategies can also help teachers maximize their input and increase the chance of long-term learning. Students' autonomy presents a necessity in society which puts great emphasis on lifelong learning. Since teachers cannot provide the students with all the skills and knowledge they would like to have, the best way to help students is by providing them with strategies on how to learn by themselves. The first step towards autonomy is encouraging the students to take responsibility for their own learning.

Strategies that promote learner autonomy – to equip learners with the skills they need so that they can effectively continue to learn outside the classroom – are increasingly recognized as important features of a medical English course. Some of the strategies for promoting student autonomy include constructive dialogue between the teacher and students, preparation of adequate teaching materials, cooperation with medical teachers, continuous evaluation as well as self-evaluation. Autonomy comes into play when students are allowed to choose what topics to deal with in details and what activities to engage in, when setting problem-solving tasks or when familiarizing students with appropriate learning strategies that enable them to learn independently after finishing the course.

In a modern society, which is ever-changing, education is perceived as a continuing process. The goal of education is the facilitation of learning. An educated person knows how to learn, adapt and change and is always seeking new knowledge. It can be expected that language teaching responds to the demands and hence shifts the authority away from the teacher and hands it to the learner [8]. Teachers cannot learn for students and in order to increase learner independence and responsibility for learning, the traditional roles need to change [9].

#### **NEW ROLE OF THE TEACHER**

The shifting of authority from teacher to student is the most important thing that ESP teachers must learn and accept. Such a situation inevitably imposes a change of the role of language teachers. In this context the teacher is to

take on the role of an *organizer*, a facilitator whose task is to create conditions and opportunities for learning, who is responsible for giving the students help with acquiring the knowledge and skills necessary to reach their goals. The teacher is an organizer and a coordinator rather than a director of learners' activities. He is an advisor and a consultant who understands and supports students. He has to create the most favorable conditions under which learning may take place. The teacher shows great patience, makes all the students participate and has the same interest in all students. The teacher listens to the students and respects them, inspires confidence and empathizes with students' problems.

Probably the most important issue is developing in teachers the understanding and techniques for delivering effective learner strategy instructions to students [10]. Learning how to learn a language is a complex skill to acquire. It involves focusing on the process of learning as well as on the content of learning. It is concerned with being informed about the language itself, about oneself as a learner – through self-assessment, reflection and experimentation – and therefore involves training in independence.

In EMP, teachers should teach communicative function of language and insist on fluency. Grammar is not taught traditionally with explanations of grammatical rules – students should be allowed to discover the rules by themselves. Students take an active part in designing the syllabus. As we have said, the modern English language course is student-centered, which helps develop student autonomy and learning continues even after the end of the course. Language teaching should be based on the process itself, not on the final product. If the teaching process is in accordance with the students' needs, the final product, communication in English, will be successful.

The teacher should make the lectures interesting. Only interesting lectures attract students' attention and raise their motivation for participating and learning. Even though the teacher is no longer the center of the classroom, he should maintain integrity and authority without being distant from the students. Students have more confidence in teachers who are open and honest, who do not hide their feelings and personality.

A teacher who assumes the role of the source of knowledge and who is accustomed to being the center point of the lesson can neither work efficiently nor can he make students develop the attitude that enables them to learn successfully. ESP courses present a challenge for teachers because they have to learn how to share their power with the students, to cooperate in decision-making and constantly adjust to changes.

The relationship between the EMP teacher and the students is different than in general English classroom: the student is an expert in the field in which the teacher has very little knowledge. This special relationship influences the methodology. For instance, in EMP, communication is more often initiated by the student. Contrary to the general English, the EMP teacher holds a background position and this is one of the most difficult lessons he has to learn.

#### Teacher education and tandem teaching

The question that inevitably arises concerns the level of knowledge that language teachers should have about their students' medical subjects. It is believed that an EMP teacher should have some general knowledge of medicine and rely predominantly on his linguistic knowledge which is then put in the medical context. EMP teachers have great responsibility. They should be more flexible and willing to cooperate with both experts in the field and students.

Interdisciplinary tandem or team teaching is another characteristic of EMP methodology and it is crucial for a successful EMP course. Tandem teaching introduces the necessary contents and promotes the relationship between medical teacher, EMP teacher and students. Such coordination, which can be represented in the form of a functional triangle, or a three-way dialogue, promotes the status of a foreign language as a university subject. The language teacher acts as an intermediary between the students and the medical teacher. In team teaching, the language teacher is knowledgeable about communication, about the way that the language works and he does not have to deal with the details of medical subjects. This approach integrates medical knowledge and English language teaching, students learn language in context and they are motivated to apply the medical knowledge they possess during language classes. The teacher does not have to be an expert in the field of medicine but should show interest and positive inquisitive attitude towards the medical content. The EMP teachers need to be flexible in teaching and prepared to take risks.

The analysis of the role of an EMP teacher has led us to the conclusion that the characteristics the effective EMP teacher should have are similar to those of a good doctor. Just like teachers, doctors should inspire confidence in their patients, who put their lives in doctor's hands. In order to justify this confidence, doctors are obliged to maintain high standard of work and respect for human life. Patient care must come first and each patient should be treated with prudence and caution, with utter respect for their dignity and privacy. A doctor should respect patients' rights, participate in decision-making concerning healthcare and provide clear and understandable information. Doctors must constantly develop their professional knowledge and skills but always be aware of the limitations of their professional competence. There is no place for bias, all patients should be treated equally.

Even though the areas of work are different, both doctor and EMP teacher have enormous responsibility and influence. Continuous development and improvement should be primary goals of their professional careers. Becoming an effective teacher of EMP requires 'more experience, additional training, extra effort, a fresh commitment' [11].

#### **CONCLUSION**

English is popularly acknowledged to be the international language of a wide range of occupations. It has also

emerged as an intranational and international language of medical communications; it is a prime vehicle for the transmission of information. The general effect of all this development was to exert pressure on the language teaching profession to deliver the required goods. Therefore, the analysis of learners' needs has become one of the key factors in course design and, consequently, teachers have lost their traditionally authoritative role in the classroom.

However, despite good knowledge of general English, students are not well prepared for linguistic tasks awaiting them in their professional future. For that reason, the course in medical English has to be based on relevant and useful material. The teaching of medical English can most certainly include this perspective when the teacher encourages, supports and mentors the students into the acquisi-

tion and use of English. Focus on the learners' needs and designing specific courses to better meet these individual needs became paramount. ESP classes are content-based. Content, in our case medicine, is integrated in language teaching. Content-based syllabus implies cooperation between language teacher and medical teachers. Also, students learning medical English are more motivated to learn, acquire and use language when the entire context of the learning is within the field of their interest, medicine and healthcare.

EMP teachers should increase their knowledge of the content area, find materials and resources that generate student interest and involvement and build intrinsic motivation and knowledge. Methodology of ESP/EMP puts great emphasis on student autonomy, on providing students, future doctors, with strategies for lifelong learning.

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### Тимско подучавање у настави енглеског језика за медицину

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#### КРАТАК САДРЖАЈ

Рад обрађује неке кључне појмове енглеског језика за посебне намене с посебним освртом на енглески језик за потребе медицине. Садржај је заснован на посматрању и професионалном искуству аутора. Полазна основа у настави енглеског језика за потребе медицине је детаљна анализа потреба студената, а подаци који се из ње добијају могу да се употребе у осмишљавању курса и дефинисању одговарајућих циљева учења. У центру подучавања је студент, па

је неопходно остварити позитивну сарадњу између наставника и студента. Имајући у виду и чињеницу да се учење медицинског енглеског заснива на контексту, цео процес може додатно да се унапреди укључивањем наставника стручних медицинских предмета.

**Кључне речи:** приступ заснован на студенту; учење засновано на проблему; аутономија студента; улога наставника; тимско подучавање

Примљен • Received: 07/07/2014 Прихваћен • Accepted: 10/02/2015