ANDRAGOGY IN TEACHING ENGLISH FOR MEDICAL PURPOSES

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INTRODUCTION

English for Specific Purposes has emerged worldwide in different fields of study keeping in mind the learners’ specific needs. EMP is the abbreviation of English for Medical Purposes that refers to the teaching of English to students of medical, paramedical, and health sciences. English is taught/learnt here for pragmatic purposes. Generally, the course is designed to meet the specific needs of learning English Language by the students of medical background. Topics related to the medical field are taken into consideration while progressing with the language and communication skills in the classroom. Grammar is not the primary concern; instead, it is used as a cognitive tool. More emphasis is given to scaffolding that refers to instructional techniques that involve stronger understanding and ultimately greater independence in the learning process of the learners.

Apart from comprehending texts related to Medical Science written in the English language, EMP is required for the modern communicative competence of the learners. English language is the lingua franca of the international medical community. Linguistic ability, interactional competence, and communication in the medical field are the three parameters on which the study of EMP’s fruition lies.

This paper is an empirical research study on the teaching and learning of English for Medical Purposes by specific learners. Malcolm Knowles’ theory of andragogy was kept in mind by the
author while teaching EMP to a bunch of 125 MBBS students of 1st year. The author believes that EMP cannot be taught using the same age-old methods used in the school curriculum. Since EMP is to be taught to adult learners with specific needs, contextual based learning using highly career-specific, technical language is to be taken into consideration. Grammar, syntax, vocabulary acquisition takes a backseat whereas the English language from the perspective of a medical professional’s job plays a pivotal role. The author did not play the role of a teacher but the facilitator during the entire duration of the course.

ANDRAGOGY AND ITS PRINCIPLES

According to Knowles’ theory of andragogy, the following assumptions are made while teaching any adult learners.

1. Adults need to know the purpose of their learning.
2. Adults learn experientially.
3. Adults approach learning as problem solving.
4. Adults learn best when the topic is of immediate value.

Andragogy principles that have been applied in the classroom while teaching EMP were:-

1. Explanation was made for the need of every topic taught, to help the learners be self-motivated.
2. Instructions given in the classroom were all task-oriented. Rote learning and memorization were avoided completely.
3. Different backgrounds and different levels of language learners were kept in account while giving instructions in the classroom.
Principles of andragogy that were kept in consideration were:-

1. Adult learning is problem-centered rather than content-oriented.
2. Experience provides the basis for learning activities.
3. Topics of immediate relevance to their job or personal life interest the adult learners.
4. Adults are involved in the planning and evaluation of their instruction.

MOTIVATION: KEY TO A SUCCESSFUL TEACHING-LEARNING

Any adult learner is motivated only when they find relevance and immediate value in the topic taught in the class. EMP, not being a subject of their main curriculum, holds less attention of the learners and therefore the responsibility of the author rocketed sky-high to delve in the study materials, to bring out interesting tasks for retaining the learners’ attention.

A teacher gets motivated to teach only when he/she gets the desired response from the learners. It is not easy for an English Language teacher to be interested in health care or medicine and teach language from that perspective. The perspectives of the teacher and learner could be quite different and hence it becomes difficult for the teacher to build up the interest of the learners.

LANGUAGE ACQUISITION AND APPLICATION

Students of EMP were believed to have started the class with a prior knowledge of the English language. The relevance of the fundamental learning of the language was given due importance by the author and the teaching methodology started with the expectation that the students were acquainted with the basic grammar and syntax of the language.
Language acquisition and application of the same should be the primary focus of an EMP learner rather than direct language learning. In the acquisition of a language, the language in use is evaluated through the proper context. The focal point is shifted from rote memorization, vocabulary, grammar, and structure to contextual learning. The instructor had consciously chosen the study materials by keeping the healthcare industry in mind. Real-world medical practice and medical research had been brought to the forefront in the form of tasks and less emphasis had been given to medical jargon that was to be dealt with later during the course. The use of EMP in the classroom helps them to come to terms with the usage of the English language in any common health-care related situation. Learners were taught in an interactive ambience where they could explore and discover the usage of language through tasks and exercises given to them, as well as open-ended discussions.

The behavioral method of language learning is the main method followed in the EMP classroom. A task such as role-play plays a very important role in contextual learning of EMP. During the teaching-learning period the author who acted as the primary facilitator of language enhancement made sure that situations related to health care were put forward where students were divided into groups and were asked to enact roles of healthcare professionals and laypersons. Debates and discussions on medical sciences and health conditions were encouraged among the learners. Writing skills were also enhanced by teaching them to write letters, emails related to the health care system, and case studies. Learners were encouraged to give talks on current medical issues.

The teacher and the learners played equally important roles in the EMP classroom. The teacher acted as a facilitator or a guide instructing, motivating, and guiding the learners. The students were encouraged to stand by their peers, assist them and support them morally in acquiring this EMP.
The teacher or the instructor used a top-down approach to disseminate the study topics in the class. The teacher formed suitable contextual tasks, which would be of immediate value for the students. Articles, audio files related to medical science were used as classroom aids to cover all four skills of communication. After every task and exercise, the teacher provided feedback to the students, rectifying wherever required. Art of communication was given priority over grammatical rules; hence, broken English was also accepted. Technical, career-specific language was used in the EMP classrooms. Importance was given to the relevance of the study materials in day-to-day lives of healthcare professionals so that they find the course important and of value.

EMP like any other ESP is highly contextual in having its relevant jargon. Like legal language, medical language has its own way which is highly career specific. The technical jargon of the medical field is best taught by a person originally from the medical field. Hence, language experts should sit with context experts and develop proper study material that would be beneficial for the learners.

METHODOLOGY:

It was taken into consideration that all learners had the basic knowledge of General English at an intermediate level when the course started. The real-life situations were brought in front of the students to make them acquainted with the use of the English language as it is used in target situations. All the study materials had been made by the author with the help of content experts. Thought-provoking activities and fun tasks were presented to the students to engage their minds. Presentation, conversations, dialogues pertaining to different healthcare-related situations were practiced by the students for enhancing their oral communication skills, and questions related to letters, emails, research articles, and case studies were provided to the students for practicing
written communication skills. The students were given a questionnaire on the last day of the course which showed their reflections on how they discovered themselves while weaving English into medical issues. Since it was not possible to put down all the excerpts, I would try to pick the ten most effective ones that have helped me to conclude that Malcolm Knowles’ theory of andragogy had helped in the teaching-learning process of EMP. Given below are the excerpts. The excerpts have been checked by the author for grammatical errors and modified where necessary, keeping the content and the meaning unchanged.

SAMPLE 1

“This language enhancement module of the foundation course helped me in enhancing my skills in the English Language, especially my speaking skills. Coming from a vernacular medium background, I was always apprehensive of the fact that I am a bad speaker and always took a backseat when it came to speaking in English. I was nervous on the very first day when I found out that we have to learn English in our MBBS course, but the very need of learning English brought out by my teacher helped me take interest in the classes and today I find I am much more confident and have gained the confidence in such an easy manner through interactive sessions.”

SAMPLE 2

“My favorite subject in school was English Literature and Biology. My love for English literature makes me quite efficient in the language. I always enjoyed writing stories and essays in my school and have won many competitions too. Naturally being confident in the language, I didn’t feel like getting up early in the morning and attend language enhancement classes. My batchmates’ feedback pulled me and brought me to this class and there has been no missing episode ever again.
I have thoroughly enjoyed all my classes. I was surprised to know about how differently and how contextually a language can be taught. I am impressed by our facilitator, as she loves herself to be called, who brought to the fore activities that made us use medical jargon and taught us how to communicate in a medical environment”.

SAMPLE 3

“English for Medical Purpose! A term I heard for the first time made me go crazy. How is this even possible? The role-plays and the debates on topics related to the medical field helped me to understand that how technical jargons play an important role in defining a well-framed conversation. A good amount of teamwork has helped us to identify specific situations related to the medical field. Grammatical knowledge was not of prime concern which helped many friends of mine to open up despite being grammatically incorrect.”

SAMPLE 4

This is the first time I found the teaching method to be learner-centric. This was a dynamic class where we were actively engaged in language enhancement. I also liked the fact that we ourselves acted as teachers at times checking out the activities of our peers. We not only evaluated our peers’ work but we also actively participated in planning out sessions. Our facilitator helped us not only in enhancing our English language but also taught us to be kind to different learners from different backgrounds.

SAMPLE 5
Grammar was taught to us as a tool to articulate our thoughts and ideas in the most effective manner. Oral forms (conversations, dialogues, roleplay) and written forms (letters, emails, research articles, case studies) of communication were treated differently by using authentic materials from the medical field. I loved the way ma’am gradually released the control in the classroom and allowed us, the learners, to take up challenges and responsibilities to engage our very self in attaining perfection.

SAMPLE 6

This course seemed very difficult for me at first as I come from a rural background but with the passing days, I felt learning the language for a specific purpose is much easier than the rigid language courses taught in schools.

SAMPLE 7

For the first time we learned how to use a language contextually. I would specially mention the role-play among the healthcare professionals and the laypersons that helped us understand not only how language should be used by a doctor but also the art of communication.

SAMPLE 8

After learning the English language for so many years in school, this was the first time someone had pointed out how important a skill is listening in mastering a language. EMP further taught me how to use the listening skill to deal with patients with patience.

SAMPLE 9
Reading some authentic medical articles gave us the idea of the vocabulary used in medical science. I feel research in medical science has become accessible to doctors from all parts of the world because of this EMP.

SAMPLE 10

Knowing the purpose of learning English in the MBBS course helped us to concentrate on the class lectures which otherwise would have been of no interest to students from a vernacular background. I enjoyed the classes because of the fun-filled activities.

CONCLUSION

Pennycook noted that language is a social act, not a sole linguistic feature to be learned and taught. The excerpts collected at the end of the course reveals that adult learners, in general, take on a course with much more focus and expectations than learners of the younger age group. It became very clear that the learners looked for a teaching approach that would align with their real-world needs. They took interest in learning EMP as they found this to be of some immediate value. A young learner generally learns to pass a test whereas an adult learner, as Malcolm Knowles’ theory of andragogy says, learns to be benefitted professionally. The author in this course had to intertwine both English language and content from Medical Sciences. As the theory of andragogy suggests, student autonomy played a big role in the successful completion of the course. This interdisciplinary teaching is a bit difficult on the part of the teacher as here (EMP course) the teacher has to teach students with contextual knowledge which is hardly known by oneself. Andragogy, as it implies educating the adult learners, makes the learning process move away from the age-old teacher-centric methods. The teacher becomes the facilitator of learning and is
responsible for organizing and coordinating the learners’ activities. One does not merely remain the only source of information or imparter of knowledge but besides being an advisor also creates the most favorable conditions for the learning to take place.

References


