English for Specific Purposes (ESP) Didactics: Content Knowledge and

Communicative Abilities

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Abstract

With the objective to show the need to connect content knowledge and communicative

abilities for teaching ESP, a bibliographical research was carried out, taking into

consideration the period from the emergence of ESP to nowadays, with a pedagogical

experience carried out in Las Tunas Medical School, Cuba, and in the Pontifical Catholic

University of Ecuador, Esmeraldas Campus, teaching English for Specific Purposes to

Physicians and Nursing Professionals. The Scientific method was used. The results show

that there is an urgent need to teach ESP in the Universities of the XXI century, linked

with different professions. It also shows the importance to make a connection between

the content knowledge of the profession and the main communicative abilities to develop

in the students: listening, speaking, reading and writing.

Key words:

English for Specific Purposes; teaching; content knowledge; abilities; universities

Introduction

The teaching of English for Specific Purposes has become crucial for universities, where

students have to finish with a high level of English. These students are generally taught

General English, and not the English of their specialties. Thus, after graduating, it is

sometimes difficult for them to use the English language about their professions because

they have lack of terminologies and communicative functions which are essential for their

work. It means a great demand for universities, mainly for English teachers, who first

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have to learn content knowledge on the students' field of professions and, at the same time, be able to develop the students' communicative abilities in English.

Development

Brief history of the emergence of ESP

ESP emerged because of three fundamental factors:

1- The demands of a New World:

It has to do with the Second World War in 1945, which led to great expansion on scientific, technical and economic activity internationally.

New people were wanting to learn English because they had a need to communicate:

Doctors wanted to read scientific books and journals only available in English, mechanics needed to read manuals, tourist guides needed to communicate with tourists, and in this way there came a need to learn specificities about the English language.

2-A revolution in Linguistics:

As a consequence of new aspirations for learning, researchers started to concentrate on language use in real communication (Widdowson, 1978). It allowed the view that the English needed for Commerce is different from the English needed for Medicine, for Nursing, for Tourism, for Informatics, etc.

The previous idea led to the development of some varieties of English. There appeared English for Science and Technology (EST), synonymous to ESP for some time.

There have been studies concerning learners 'needs for designing a course (Hutchinson and Waters, 1994) (Cameron, M 2009). The general idea that came to be the main principle of ESP was: "Tell me what you need English for and I will tell you the English that you need" (Hutchinson and Waters, 1994)

3-Focus on the Learner

Scientific contributions in educational psychology also led to the emergence of ESP, being the most important learners and their attitudes to learning (Rodgers, 1969). This

theory means teaching according to the students' learning needs and interests, what makes the didactic process more active, motivating and effective.

This led pedagogists of English language teaching design courses based on learners' needs (Hutchinson and Waters, 1994).

Definition of ESP: It is an approach to language learning which is based on learner need. (Hutchinson and Waters, 1994)

The foundation of all ESP is the question:

Why does this learner need to learn a foreign language?

What makes the difference now?

Since the Second World War scientific, technical development and economic development have continued, so at present in the 21st Century the introduction of ESP courses are a necessity in universities.

In the case of Medical, Nursing and Odontology English Communication some authors have written courses for ESP Teaching: Maclean, J. Santos, Z; Hunter, A. (2000); Concepción, J. (2005); Sánchez, D. (2007); Rodríguez, A. (2007); Puig, J. (2008); Suárez, J. (2009); Álvarez, M.E. (2011), Acosta, L. (2011), Ramírez, H (2012).

According to the laws that rule the didactic process, as pointed out by Álvarez, C. (2005), in the teaching process no didactic component can be in isolation. In this process there are personal components (the teacher and the students) and impersonal ones: content, objective, method, material aids, teaching organization form and evaluation. This law states: the relationship among the components of the didactic process. The other law is the relationship between school and life.

The previous assumption means that without content knowledge there cannot be any English language-teaching process at all. And in the case of ESP, the teacher should not only have general English linguistics knowledge, but also subject content knowledge of the professional field or the occupational field he/she is going to teach. This makes the relationship between school and life possible, i.e, teaching what the students need according to their specialties.

Apart from the laws observed in the ESP didactic process, there are also important principles that should be considered:

Validity: The contents, objectives, methods, material aids, teaching organization form and evaluation should be in agreement with the students' needs, it means their professional or occupational demands.

Authenticity: Tasks and materials to be used should be based on the real life of the profession, linguistically close to the language spoken by the native speakers.

e.g A case report in Medicine should be designed as it is really carried out by physicians in a real situation of the medical practice.

Reliability: If the language taught is real-life based either with contents and situations, based on the learners' needs, with objectives that can be achieved, with flexibility that can help the students be confident in success, the didactics of ESP will be reliable.

Specificity: Precisely, to be reliable, the teaching of ESP should be very much specific to the professional or occupational needs of the students. For example: Medical English for Medical doctors; Nursing English for Nurses; Odontology English for Odontologists; English for Tourism for Students of Tourism, and so on.

Consistency: To provide learning, the tasks should be taught systematically, either for teaching the speaking ability, the reading ability, the listening ability or writing, with a frequency of about 4 hours a week.

Practicality: To achieve the previous principles, the tasks should be very much practical. Teachers should teach exactly what the students need to know for language use.

e.g

Physicians need to interview patients, relatives, develop case presentations, discussions, give prescriptions (and write them), talk to other doctors, explain findings on x –rays, other lab tests, diagnosis, complications, management, publish scientific articles, etc.

Nurses and Odontologists need the same but with the specificity of their own specialties, so there is some linguistic variation.

Lawyers need to orient their clients, explain laws, etc.

Tour guides need a specific vocabulary to describe architecture, art galleries, business,

and attractions.

This specificity precisely makes content knowledge of each specialty crucial.

How to integrate language and subject studies?

Vavelyuk, O (2015) outstands the importance of the integration between language and

subject studies and states how it is often necessary to change the traditional approach

towards content demands when teaching a given speciality, it means that sometimes the

structures to be taught should be in a different order as when we teach a General English

course. In the case of her investigation she referred to the study of Mathematics for

working in the United States.

In the case of our previous investigations in relation to the teaching of English for Medical

Purposes, it happened the same, linguistic variations were made because of the specific

activities physicians needed to carry out in their daily work. In relation to grammatical

structures, in order to present patients' case reports, the teaching of the passive voice was

extremely necessary, together with the specific vocabulary in relation to the content of

each didactic unit.

To achieve this, it has been important to use the Task –Based Approach to language

teaching, which is very much effective to exercise the process of communication in the

classroom (Benítez, O. 2007). The mentioned approach emerged in the 80's of the XX

Century as an intent to look for real communication in the classroom.

According to many authors, (Nunan, D. (1987); Breen, M; Candling, C.N., y Waters

(1979), Arroyo, M. (1999) Willis, D., y Jane, W. (2001)), the communicative tasks are

helpful to solve problems or to complete any information gap at activating mental

processes using the foreign language. It is by means of those processes that the language

is acquired and a result is achieved by means of communication.

(example from the book Bedside English by Ramírez: 2012)

Unit. PEDIATRICS

Section 1. Listening

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Task 1

Skin lesions are common in children, mainly in summer. Through this task you are provided with a doctor-patient's relative conversation and different activities that will help you improve your listening skills.

Activity 1

Before listening, discuss with your partner the most possible bacteria that may cause skin lesions in children. PAIR WORK

Activity 2

While you listen to the conversation, complete the following report. Then discuss it with your partner.

| Albert Cl | ements is | a 9-year-c | old boy wh | no was l | orought | to th | ne emerg | gency | room (| compl | aining |
|------------|------------|------------|------------|----------|---------|-------|----------|-------|---------|---------|--------|
| of | | | fo | for | | | | | He | had | |
| | | | _ three | weeks | ago ar | nd v | vas | | | | |
| because of | of that. H | e was trea | ted with_ | | | | | at th | at time | . The o | doctor |
| thinks | he | has | an | | | | | | | _ | with |
| | | | | | . She | is | going | to | treat | him | with |
| | | 1 | for | | | | • | | | | |

Activity 3.

Below are four possible causes of the patient's problem. Decide which is the most likely, and give reasons for your decision. **PAIR AND GROUP WORK**

- a) He was admitted to hospital and got the infection at that time.
- b) He is immunosuppressed.

- c) He is allergic to penicillin.
- d) This infection is caused by Staphylococci resistant to aqueous penicillin.

How can the ESP English teacher learn this kind of vocabulary?

By having some meetings with specialists in the area, asking questions, analyzing details, attending to ESP courses, learning from the proper students, etc.

Eg. For an English teacher to know hoy a physician should interview a relative of a patient who comes with a pain in the center of the chest, necessary questions should be:

- -Does the pain go anywhere else?
- -Do you feel any pain on your left shoulder or arm?
- -When did the pain start?

The teacher of English knows that these questions should be included in the interview because when a patient is taken to the emergency room with central chest pain, the most common diagnosis is Myocardial Infarction, and it is accompanied by other symptoms such as radiation of the pain to the left arm and shoulder. Also, the duration of the pain is very important because if the pain lasts only 30 minutes it can be a case of Angina Pectoris, another disease, but if the pain lasts for more than 30 minutes the possibility to be a Myocardial Infarction is higher.

Does it mean that the English teacher has to be a physician?

Of course not, but he/she should have content knowledge about the subject when he/she is teaching ESP.

Many may ask this question, then why not train a physician to teach Medical English?

Really a physician does not have the methodologies to teach a foreign language as a teacher may have, because he/she has a different profession.

It is not meant that teachers should become physicians. Teachers should have content knowledge on the subject, what helps them teach, and for teaching they may use the support of the students of the profession, other professionals, but really without content knowledge ESP Didactics is impossible.

If the teacher has content knowledge, the tasks to develop communicative abilities can be carried out successfully, fulfilling the principles stated above: validity, reliability, authenticity, consistency and practicality.

How can the students make dissertations in the classroom about a disease, about a manual of informatics, about mechanics, about hospitality and tourism, if we as teachers do not know how to correct them, ask questions, or carry out a debate. How will we be able to check a piece of writing?

So without content knowledge on the part of the teacher there won't be development of communicative abilities on the part of the students: no listening, speaking, reading or writing abilities.

Strategies to benefit the ESP Didactics:

- -Arrange contacts with specialists on the theme you are teaching
- -Study the books and clarify any doubt on contents, pronunciation of terminology
- -Design the lesson carefully before teaching
- -Design the tasks in relation to the real life activities of the professions or occupations
- -Design material aids to provide activation of learning
- -Organize the students in pairs or groups to facilitate interaction
- -Provide linguistic stimulation
- -Let the students repeat the pronunciation of terms
- -Make the students learn and use the language
- -Use a communicative methodology so that the four main language abilities may combine: speaking, listening, reading and writing
- -Assess learning systematically

-Develop error correction at the moment students make mistakes when they are manipulating the language, doing the tasks in pairs or groups, in the focused practice session of the lesson. On the other hand, if the students are in the communicative practice, making use of the language already practiced, do not interrupt their communication, and jot down the mistakes detected for further correction.

-Be aware of grammar because if there is no grammar correction, there is no content knowledge, so whenever you present a content topic in a lesson, include the communicative function and the forms you are going to teach.

e.g Medical English

Hypertension.

Interview to patients. Asking and answering questions (Have you ever had a headache? Nausea?)

Hospitality and Tourism

Travel Agency

Have you ever visited Las Palmas Beach?

Would you like a room at the Kennedy's hotel?

Las Palmas Sea Wall is a very much pleasant place to visit in Esmeraldas, and it is very cheap.

From the psychological point of view, in order to achieve content knowledge and communicative abilities, the teacher should follow a Humanistic Approach to teaching, which is absolutely linked to Vygotsky's Socio-cultural approach and to the Communicative Approach to language teaching.

I agree with these recommendations provided by Williams, M and Burden, R. (2005) which are very useful. In the classroom:

- Create a sense of belonging;
- Make the subject relevant to the learner;
- Involve the whole person;
- Encourage a Knowledge of self;

- Develop personal identity;
- Encourage self-esteem;
- Involve the feelings and emotions;
- Minimize criticism;
- Encourage creativity;
- Develop a knowledge of the process of learning

The ideas stated in this lecture were evaluated in a course design and pedagogical experiment in Cuba in the teaching of English to Physicians. A medical English communicative course was designed. It was formed by two books entitled BEDSIDE ENGLISH, a student's book, a teacher's book and a cassette with recordings of native speakers of the language. The communicative tasks designed to teach the contents of every unit were carried out in the classroom and in the places of work of the professionals, either in the emergency room of a hospital or in the daily ward rounds. Excellent results were shown at the end of the experiment. The students developed their communicative abilities in Medical English and I, as a teacher, learned more medical English.

Findings concerning the needs of Nursing students and professionals, who have studied their specialty in the Pontifical Catholic University of Ecuador in Esmeraldas, have also shown their demands to learn ESP in order to communicate with English speaking patients who are assisted in health institutions in the province.

Conclusions

For ESP Didactics, content knowledge is a very necessary feature to help ESP students learn a language, what implies: vocabulary, pronunciation, communicative functions, forms, and communicative abilities: speaking, listening, reading and writing, in the specific professional or occupational field to be taught.

The English teacher can never be substituted by a professional of the field because of lack of methodological strategies to teach English of the latter.

English should be taught according to the learners' needs in a valid, reliable, authentic, systematic, specific and practical teaching-learning process.

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