

TEACHING SPEAKING THROUGH SIMULATION FOR BACHELOR STUDENTS OF NURSING PROGRAM SUAKA INSAN HEALTH COLLEGE BANJARMASIN

Tenny Murtiningsih

tenny_murtiningsih@yahoo.co.id

ABSTRACT

Teaching speaking for bachelor students of nursing program Suaka Insan Health College Banjarmasin is as an English for Specific Purposes (ESP) class. Therefore knowing and giving what the student's need in ESP class is the most important. As the researcher did in her previous researches, they showed that most students need English in Nursing for their English Class. So nursing as their speciality must be given in their speaking class and prepare them for their future job. This research is Classroom Action Research. The researcher had 2 cycles for this research. In every cycle, the researcher asked the students to perform their English simulation in a group according to the theme given. The result of cycle 1 was used to have planning for cycle 2. The data from Descriptive Statistics shows that the mean score at cycle 1 was 74.1509, the standard deviation was 5.23816 and the mean score at cycle 2 was 80.1698, the standard deviation was 4.42778. It means that there was an improvement in student's speaking score through simulation. Based on this result, the researcher states that teaching speaking for bachelor students of Suaka Insan Health College Banjarmasin can use simulation as one of the technique to meet with the student's need and to prepare them for their future job.

Keywords: speaking, English for Specific Purposes (ESP), simulation

1. INTRODUCTION

As oral communication, speaking has important role in communication. By speaking, people can give and get information, express their idea, or even their complain of anything. In line with this idea, Ulas (2008:876) in EWK, Ngestirosa states that speaking is the most common and important means of providing communication among human beings because the key to successful communication is speaking nicely, efficiently and articulately, as well as using effective voice projection. Futher more, Byrne (1986:9) states that the main goal in teaching the productive skill of speaking will be oral fluency: the ability to express one shelf intelligibly, reasonably accurate and without undue hesitation. It means that the important thing of speaking is to get oral fluency.

According to the researcher's previous research in 2013 and 2016, Most of the students agreed that speaking is the most important language skill for bachelor students of nursing program Suaka Insan Health College Banjarmasin. They think that having good speaking skill can support their future job. Besides that, the students also think that they need Nursing English. Meanwhile teaching speaking for bachelor students of nursing program Suaka Insan Health College Banjarmasin is as an English for Specific Purpose or ESP. ESP is an important approach to teach English. Smoak (2003) defines that ESP is a form of English instruction through the fundamental of student's actual, immediate needs who perform real life tasking by not focusing on passing the examination or test in the end of the learning. It means that teaching ESP for bachelor students of nursing program must give what the student's need in their future job, that is by giving real life tasking which has correlation with their future job in the class and not focus in the result of the test.

In line with this idea, Aryusmar (2012:166) states that ESP teaching is an approach to teach for non-English department students to meet their needs in studying English related to their specialties. According to her statement, we know that ESP is important as an approach to teach English for non-English department. As the approach, ESP teaching must help non-English department students get understanding and master in English in their specialties.

In detail, Strevans (1988) in Evans, T.D, and John, M.J (1998) state that:

ESP is as English language teaching which is designed to meet specified needs of the learner; related in content (that is in its themes and topics) to particular disciplines, occupations and activities; centered on language appropriate to those activities in syntax, discourse, semantics and so on, and analysis of the discourse; in Contrast with 'General English'.

It explains that in teaching ESP, the teacher should pay attention on the learner's need, why English should be learnt by the students, the relevancy of the themes and topics for the learner's activities as the target language. Furthermore, ESP is different with General English.

Suwandono (2005) in Sismiati and Latief (2015:45) states that right now, Indonesia has surplus nurses, and it makes a serious problem in the job market.

The government has taken steps to solve this problem by sending those “surplus” nurses aboard, but the difficulty is their weaknesses in mastery of English.

More detail Sismiati and Latief (2012) state that one of the requirements to get a job in international hospitals for graduates of nursing schools is the ability to communicate orally in English. Both of those statements support the idea that speaking as oral communication is important and must be developed well to prepare the nursing students to get success in their future job.

More detail, Evans and John (1998:189) state that at teaching learning process in ESP, the teacher must acknowledge and use the learners’ greater knowledge. They explained that there are taking and giving at the role between ESP teacher and ESP learners. ESP teacher should have the learners’ knowledge to support the ESP class and ESP learners bring their specialties to the class to help them master in English class.

Speaking is given for bachelor students of nursing program Suaka Insan Health College Banjarmasin as integrated material in one subject. It is called as English in Nursing. As oral communication skill, speaking must be developed well. The students must be prepared to have good speaking skill for their future job. Because one of the requirement in job market is able to speak English well.

Nursing college is as a vocational institution, needs to develop the student’s skill in nursing professional practices. It is meant to prepare the alumni to have better nursing skill so it can meet with what the stockholder’s need. In line with this idea, there are some nursing subjects needs to have simulation to explore the student’s skills. Edgecombe *et al.* (2013:1) state that simulation is a teaching and learning technique that is increasingly used in nursing education to prepare students for clinical workplace. Furthermore, Edgecomba *et.al.* explain that simulation is an innovative and technologically advanced teaching and learning approach that combines a problem-based approach with experiential learning. The students learn through ‘doing’ and ‘experiencing’, utilizing their knowledge base, psychomotor skills and clinical decision making based on the information before them (Edgecomba *et. al.*, 2013:14)

Teaching speaking for bachelor students of nursing program Suaka Insan Health College Banjarmasin must meet with the student's need. That is giving the student's immediate needs which perform real life tasking, related to their specialties and give more clinical learning experience to prepare the students in their workplace next. According to this explanation, the researcher uses simulation technique in teaching speaking. Harmer (1991:352) said that simulation and role play can be used to encourage general oral fluency or to train student for specific situations, especially where they are studying English for specific purposes (ESP). Hyland (1993:2) defines that a simulation is a problem-driven activity which occurs in a clearly described realistic setting. In simulation, students are given a task to perform or problem to solve together with the necessary background information and environment in which to do it. The learner respond to the task and ask within the constraints of the environment to complete it. He explains more that in simulation, the participants behave as themselves and it provides a realistic setting but for role play, the participants taking a part of characters which are not their own, it sets up to practice particular language functions in a highly controlled context and are relatively simple and short. This idea is supported also by Nunan (2003:57). He says that simulations are more elaborate than role play. In simulation, props and documents provide a somewhat realistic environment for language practice.

Teaching speaking through simulation can also invite student's motivation to involve in performing better simulation. The clinical workplace atmosphere which be created in the simulation can give motivation to them and it will call their background knowledge to be active in English simulation.

2. METHODS

This research is Classroom Action Research. In this case, the researcher intends to improve the students' speaking skill of bachelor students of nursing program Suaka Insan Health College Banjarmasin through simulation. Therefore, this research design is Classroom Action Research. According to Latief (2012:156) Classroom Action Research is a research especially designed for teachers so that classroom teachers can conduct research in their own classrooms for the purpose

of improving the quality of their classroom performance. In this research, the researcher has four stages. They are planning, acting, observing and reflecting.

2.1 Planning

In this step, the researcher prepared a suitable strategy to solve classroom problems that have been identified. According to the researcher's previous researches in 2013 and 2016, they showed that the student's need speaking to support their future job. Even though that speaking is important for them but in fact speaking is still a problem in their English class.

To cover this problem, the researcher tries to solve the student's speaking problem by using simulation for their English class. In this planning the researcher made Speaking Lesson Plan for English in Nursing III according to the current syllabus. She selected the material which focused in Nursing English and appropriate with the steps in Nursing Standard Operating Procedure. She also created the situation that matched with their future workplace, and asked the students to use the real things in their simulation, example: some medical equipments.

2.2 Acting

When the strategy above has been planned, so in this step, it starts to be implemented. Firstly, the researcher gave explanation to the students about the theme. There was a discussion also related to the theme. She also explained about the steps in their speaking simulation should meet with nursing intervention which states in Nursing Standard Operating Procedure. The steps in nursing intervention, namely questions to ask, explaining what the nurse is going to do, giving instruction, start to observe the patient. All of language expression which deal with the intervention above are given in drilling first to get the correct pronunciation and give more new vocabularies.

After it finished, then the researcher developed the class into a group of simulation. There were 3-4 students in a group. Then the researcher asked them to discuss the case given in 15 minutes. And finally, the students started to have simulation by exploring their nursing background knowledge and used some medical equipments related to the case given in a group.

2.3 Observing

Here, the researcher collects the data from qualitative and quantitative data. For the qualitative data, the researcher got the data from the speaking class atmosphere. That was about how student's participation in their simulation. They included: the appropriateness of the simulation with the steps in nursing intervention according to Nursing Standard Operating Procedure, how to give instruction, the familiarity of the nurse's duty and some medical equipments which were used in their simulation.

All of them should be shown in their English simulation. It was because, the purpose of teaching speaking through simulation is not only to improve the student's speaking skill but also to prepare the students for clinical workplace in their future job. So they should master all of those skills. In order to get the qualitative data above, the researcher prepared the observation checklist. In this case she filled the observation checklist when the students performed their role play by herself.

Table 1 : Observation Checklist

NO	OPTION	A	B	C	D
		%	%	%	%
1	The appropriateness of the simulation with the steps in nursing intervention according to Nursing Standart Operating Procedure				
2	How to give instruction (clear or not)				
3	The familiarity of the nurse's duty (according to the theme given)				
4	The familiarity of some medical equipments which were used in their simulation.				

Note:

A = Very good
B = Good

C = Fair
D = Poor

For quantitative data, the researcher got the data from speaking test score, in this case relate to the creteria of success in speaking class. The creteria of success in speaking class has approved by the head of Suaka Insan Health College Banjarmasin.

Table 2: *Criteria of success for English in Nursing III*

Range Score	Mark	Qualification
86 – 100	A	4,00
80 – 85	A-	3,76
76 – 79	AB	3,50
72 – 75	B+	3,25
68 – 71	B	3,00
65 – 67	B-	2,75
61 – 64	BC	2,5
58 – 60	C+	2,25
55 – 57	C	2,00
41 – 54	D	1,00

Note: The passing score for non nursing subject is 2.00 (C)

2.4 Reflecting

Reflecting is to analyze the data collected from the observing stage by comparing and checked the data with the criteria of success during the cycle. In reflection, the researcher also discussed how far the simulation technique can develop and improve the student's speaking skill. The last procedure in reflecting is getting the result of its reflection.

The result of the reflection determined whether the researcher needs to have the next cycle or not. In this case the researcher needed to see the criteria of success. Whether the result met with the criteria of success or not. If the result didn't meet with the criteria of success, as the consequence, the researcher should have next cycle again. This result also was made as the consideration for revising and having some improvement in speaking class.

3. RESULTS AND DISCUSSION

This section presents the results of the research which was conducted both in first and second cycle and also discusses the result of the research. Here, the researcher reports the result of speaking test through simulation.

3.1 Data Presentation of Cycle 1

3.1.1 Planning

Before teaching learning process was conducted, the researcher prepared the lesson plan first. She selected suitable material which met with the syllabus of English in Nursing III. That was Patient's Assessment: nose, sinuses, mouth and pharynx. She also created the situation according the theme given. In this case she asked the headclass to prepare the medical equipment which related to nose, sinuses, mouth and pharynx intervention.

3.1.2 Acting

At the first meeting, the researcher explained to the students about the theme, that was Patient's Assessment: nose, sinuses, mouth and pharynx. The researcher tried to dig the student's background knowledge about nursing intervention relate to the theme given. The researcher gave some questions about the theme to know the student's background knowledge. The questions were about kinds of assessment techniques relate to the theme and some medical equipments which were needed to assessment nose, sinuses, mouth and pharynx.

After that, the researcher explained some nursing intervention steps according to Nursing Standard Operating Procedure. They were namely: greeting, introducing the nurse' name, question to ask (question-answer), explaining what the nurse is going to do, giving instruction, start to do intervention, closing the intervention (when it is possible to have contract for the next meeting).

Furthermore, she explained that the students should show these steps when they did their English simulation and used the medical equipment appropriately. Next, the researcher drilled the students about some new language expressions dealing the theme. It was meant, to get correct pronunciation and to give some new English words and expressions related Patient Assessment: nose, sinuses, mouth and pharynx.

After those activities above, the researcher divided the students into a small group of simulation. They are 53 students completely. In one group, consists of 3-4 students only. It was because, the researcher wanted that the students had

more opportunity to speak up in their simulation. The researcher asked them to be the nurse 1, the nurse 2, the patient, or even the doctor. The researcher created the class situation as their workplace atmosphere and also prepared some medical equipments for the class.

To meet with simulation idea, the researcher asked the students to have the patient's case disease, but it was still in the frame of Patient Assessment: nose, sinuses, mouth and pharynx and discussed well in their group for 15 minutes. After all of the things were ready. The researcher asked them to perform their simulation in a group. One group only had 10-15 minutes to perform based on the appropriate steps in nursing intervention and using medical equipments well. Because of lack of the time, this simulation didn't finish in one meeting, so the simulation must be continued in the next meeting.

At the second meeting, the researcher called the groups that didn't perform last meeting to perform their simulation one by one until finish. The regulation to perform their simulation was still the same as the first meeting. The researcher asked them to perform until finish all of the groups.

3.1.3 Observing

The researcher analyzed the qualitative and quantitative data in this step.

Qualitative data:

As we know, teaching ESP class is not focusing on passing the examination or the test, but it is more focus on giving student's need and perform real life tasking. Base on this idea, the researcher tried to get the qualitative data. Firstly, before the students perform the simulation, the researcher discussed the theme with them.

At that time, she knew that the students were interested to the theme. It was showed that they gave pay attention during the researcher's explanation. When the researcher gave the questions, the students were motivated to answer the questions. They used their background knowledge to give answer. The interaction between the researcher and students were active. In conclusion, the speaking class atmosphere was life. More detail, the researcher tried to complete the observation list during the student's simulation. The result of the observation list is as follow:

Table 1 : Observation Checklist in Cycle 1

NO	OPTION	A		B		C		D	
		Total	%	Total	%	Total	%	Total	%
1	The appropriateness of the simulation with the steps in nursing intervention according to Nursing Standart Operating Procedure	3	60,37	1	28,30	6	11,32	--	-----
		2		5					
2	How to give instruction (clear or not)	1	20,75	2	43,39	1	35,84	--	-----
		1		3		9			
3	The familiarity of the nurse's duty (according to the theme given)	3	71,69	1	28,30	--	-----	--	-----
		8		5					
4	The familiarity of some medical equipments which were used in their simulation.	4	79,24	1	20,75	--	-----	--	-----
		2		1					

Based on the result above, the researcher concluded that giving the student's need and real work tasking in the simulation, can develop them to be motivated and have simulation smoothly. It is because they have already had background knowledge. The things that they have already gotten and practiced in nursing subject. Then they exploited their background knowledge to develop the simulation.

Meanwhile, giving instruction is important also in nursing intervention. By giving instruction to the patient appropriately and correctly, it can help the nurse to do nursing intervention. The result of observation checklist showed that only 20,76% students who got A for giving instruction. Here the researcher analyzed, it was because giving instruction has correlation with oral communication. Some of them seemed nervous in their communication. As the result, they didn't deliver English instruction appropriately. It meant the student's oral communication in this cycle still was needed to be improve.

Quantitative data:

The quantitative data was gotten from the score of the student's speaking test. That was from English simulation test.

The data of speaking test is as follow:

Table 2 : Student Simulation Score Cycle 1

Range Score	Score	Total	Percentage
86 – 100	A	-----	-----
80 – 85	A-	8	15,09
76 – 79	AB	12	22,64
72 – 75	B+	15	28,30
68 – 71	B	9	16,98
65 – 67	B-	6	11,32
61 – 64	BC	3	5,66
58 – 60	C+	-----	-----
55 – 57	C	-----	-----
41 – 54	D	-----	-----

From the table above, the maximum score was A-. There were 15.09% students who got A-. There was no student got A, C+, C, even D. And others got AB, B+, B, B- and BC. In conclusion there were no student fail for this speaking test. Because the passing score for non nursing subject is C (2.00).

3.1.4 Reflecting

After, the researcher analyzed qualitative and quantitative data in the observation above, she can conclude that:

1. English in Nursing simulation for speaking class ran well. The students were motivated and being good participant during the class. They can discuss and answer the researcher's question well.
2. Student's clinical workplace simulation for nursing subject helped them to develop English in Nursing simulation. So they can perform their simulation well. But having English in Nursing simulation became a new experience for them, that's why the researcher still found some of them were nervous, lack of self confident, difficult to express English instruction and having incorrect pronunciation, especially for the groups which performed in the first meeting.
3. Even though the passing score according to criteria of success is C, but the researcher thought that BC score should be revised, in order to get better

outcome for English in Nursing III. That's why the researcher decided to have cycle 2 for student's English in Nursing simulation.

3.2 Data Presentation of Cycle 2

3.2.1 Planning

Reflection in cycle 1 showed that some groups which performed at the first meeting didn't perform their simulation well. The problems occurred by the student's selves. Some groups which performed on the first meeting looked nervous on expressing English instruction and lack of self confident. It was relate to insufficient time for them to prepare the simulation in group. So this condition gave impact to their score.

Based on the explanation above, the researcher decided to give more time in preparing the next simulation. The theme which ask to develop at cycle 2, its self was more complex and need more concentration to prepare. It was about Patient Assessment: eyes and nose. As the researcher did in cycle 1, the researcher also created the situation which met which their workplace environment. The researcher prepared some medicals equipment for assessing eyes and nose. They were pen light, snellen card, some books to read, otoscope, and tuning fork.

3.2.2 Acting

At the first meeting, the researcher explained to the students about the theme, that was Patient's Assessment: Eyes and Nose. The researcher tried to dig the student's background knowledge about the theme given by giving some questions to know the student's background knowledge. The questions were about how to assess eyes and nose, and some medical equipments which were needed to assessment eyes and nose.

After that, the researcher explained that they should develop their simulation base on some nursing intervention steps in Nursing Standard Operating Procedure and used the medical equipment appropriately. The researcher knew that for this simulation was more complex instruction to be used. There were some techniques to assess eyes and ears. As those reasons, the researcher gave them some drilling about some new language expressions by giving example how to do it. The

purpose of this drilling was to get correct pronunciations, to give some new English words and expressions related to the theme.

Finally, the researcher divided them into simulation groups. There were 3-4 students in one group. The researcher asked them to have a certain disease case relate to the theme and discussed it well among their group until the class finish. Then they performed their simulation on the next meeting for all of the groups.

For the second meeting, the student must perform their simulation until finish. The regulation for this presentation was the same as the first simulation. In this step, the researcher called the group one by one to perform in front of the class. The students looked to have better preparation with their group and had some equipments to support their simulation. This class finished until all of the groups finished to perform their simulation.

3.2.3 Observing

Having cycle 2 for the student’s simulation was very surprising. The student performed their simulation better as the researcher expected. They could create clinical workplace better than the last one. The hospital environment came totally in their speaking class. They could act as real nurses and patient in this simulation.

Incorrectly in expressing English instruction which occurred in cycle 1, it wasn’t happen anymore in cycle 2. The researcher found that most of the groups could express English instruction well. They could deliver their instruction naturally. The obstacle of the student’s self confident in speaking English, especially in giving instruction was disappear. The researcher analyzed this situation, because they had more time to prepare their simulation before the simulation. More clearly, the researcher showed the observation checklist during the simulation at Cycle 2 below:

Table 2 : Observation Checklist in Cycle 2

NO	OPTION	A		B		C		D	
		Total	%	Total	%	Total	%	Total	%
1	The appropriateness of the simulation with the steps in nursing intervention	4	79,24	9	16,98	2	3,77	--	-----
				2					

according to Nursing Standart Operating Procedure									
2	How to give instruction (clear or not)	3	71,69	1	24,52	2	3,77	--	-----
		8		3					
3	The familiarity of the nurse's duty (according to the theme given)	4	84,90	8	15,09	--	-----	--	-----
		5							
4	The familiarity of some medical equipments which were used in their simulation.	4	79,24	1	20,75	--	-----	--	-----
		2		1					

The data showed that there were some increasing of the student's simulation. They were not only in giving instruction but also in the appropriateness of simulation with the steps in nursing intervention, the familiarity of the nurse's duty and also the familiarity of some medical equipments. It meant that giving more time to prepare simulation giving some influences in their simulation. They weren't nervous to express nursing instruction anymore and have more self confident during the simulation. So their simulation looked naturally as well as the nurse who did the duty at the hospital.

As the result of these improvements, of course it also gave effect to their speaking test score. Their score in this cycle increased. It was because that they could perform better simulation in this cycle. They could exploit more their nursing skill which they have already gotten in clinical nursing practice to English in nursing simulation. They could present nursing environment well at English simulation. In detail, the researcher showed the speaking test score is as follow:

Table 2 : Student Simulation Score in Cycle 2

Range Score	Score	Total	Percentage
86 – 100	A	6	11,32
80 – 85	A-	17	32,07
76 – 79	AB	21	39,62
72 – 75	B+	7	13,20
68 – 71	B	2	3,77
65 – 67	B-	-----	-----
61 – 64	BC	-----	-----
58 – 60	C+	-----	-----

55 - 57	C	-----	-----
41 - 54	D	-----	-----

Briefly, the researcher stated that there was no B-, BC, C+, C even D in the table above. When at cycle 1, the minimum score was BC, but at this cycle, the minimum score was B. So there was significant improvement at the student's score. This fact was as the researcher expected before. Furthermore, there were some students who got A. This score wasn't ever achieved before at cycle 1. Beside that, the improvement also was showed in the number of students who got A-, AB and B+ in this cycle.

This result also appeared from the statistic calculation. Here, it could be seen that there was improvement from cycle 1 to cycle 2. When at cycle 1, the mean was 74.1509, but it was 80.1698 at cycle 2. It proved that there was improvement for the student's speaking test for English simulation at cycle 2. In detail, it can be seen from the table below:

Table 3: Descriptive Statistics

Descriptive Statistics					
	N	Minimum	Maximum	Mean	Std. Deviation
cycle1	53	64.00	85.00	74.1509	5.23816
cycle2	53	70.00	88.00	80.1698	4.42778
Valid N (listwise)	53				

3.2.4 Reflecting

Based on the result on speaking test at cycle 2, the researcher may conclude that:

1. The student's speaking test through the simulation at cycle 2 has shown improvement. Giving more time to prepare their simulation, gave positive effect for their simulation. They could prepare their simulation and practice it among their friends in group before the speaking simulation test.

As the result, they could deliver English instruction well. English language environment ran smoothly in their simulation. According to the criteria of success, their speaking score test was very good. Their scores fulfill the

criteria of success for speaking class. Their scores were also better than cycle 1. It means that the students got success to perform simulation which has connection with their specialty at cycle 2.

2. According to the observation checklist also showed that the students able to performed better as they have in nursing clinical simulation. They could exploit more their specialties in the simulation. There were some improvements in performing the simulation than at cycle 1. Their simulation was as natural as the nurse at real clinical workplace even though they used English to communicate in the simulation.

4. CONCLUSION

Teaching speaking for bachelor students of Stikes Suaka Insan Banjarmasin is ESP program. It means, English should meet with the student's need and prepare their English skill for their future job. Speaking as an oral communication, is needed in job market. By using simulation in speaking technique can improve the student's speaking skill. The students learn to perform the nursing clinical workplace in English simulation to prepare their skill for their future job. And the last, they can be a professional nurse who are not only having a good nursing skill but also master in English.

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