

**AN ANALYSIS OF THE TEXTBOOKS FOR TEACHING ENGLISH FOR
MEDICAL PURPOSES IN THE FORMER DEGREE IN MEDICINE AT THE
UNIVERSITY OF LAS PALMAS DE GRAN CANARIA**

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ABSTRACT. *The process of building the European Higher Education Area has fostered the internationalization of higher education and placed special emphasis on the prominent role of learning foreign languages. The implementation of the new degrees has included the so-called language requirement that must be taken into account when developing new teaching materials for the grades. In this paper we analyse various methodological and educational aspects in the six textbooks that were used to teach English for Health Sciences, ten optional subjects of the former Degree in Medicine. The ultimate goal of the analysis of the aforementioned books is to develop a taxonomic model that serves for the creation of supporting materials to be used in the optional subject of the new Degree in Medicine at the University of Las Palmas de Gran Canaria.*

Keywords: English for Medical Purposes, Textbook evaluation, EHEA, Materials evaluation, ESP.

UN ANÁLISIS DE LOS LIBROS DE TEXTOS PARA LA ENSEÑANZA DE INGLÉS CON FINES MÉDICOS DE LA ANTIGUA LICENCIATURA DE MEDICINA DE LA UNIVERSIDAD DE LAS PALMAS DE GRAN CANARIA

RESUMEN. *El proceso de construcción del Espacio Europeo de Educación Superior ha fomentado la internacionalización de la educación superior y ha puesto un énfasis especial en el papel prominente del aprendizaje de lenguas extranjeras, especialmente de la lengua inglesa. La puesta en marcha de las nuevas titulaciones ha incluido el llamado requisito lingüístico que ha de ser tenido en cuenta al elaborar los manuales de los nuevos grados. En este trabajo analizaremos diversos aspectos metodológicos y didácticos de los seis libros de textos que se utilizaron en la antigua Licenciatura en Medicina para enseñar las diez asignaturas optativas de Inglés para Ciencias de la Salud. El objetivo final del análisis de los susodichos libros es elaborar un modelo taxonómico que sirva para realizar material de apoyo para la asignatura optativa del nuevo Grado en Medicina de la Universidad de Las Palmas de Gran Canaria.*

Palabras clave: Inglés para fines médicos, evaluación de libros de texto, EEES, evaluación de materiales, IFE.

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1 INTRODUCTION

The building the European Higher Education initiated by the Bologna process has placed special emphasis on the prominent role of learning foreign languages, and thus the implementation of the new university degrees requires students to attest a level B1 in a foreign language to complete undergraduate studies and enrol in a Master's degree. Although "individual plurilingualism and societal multilingualism are the principles which underpin the language policies of both the European Union and the Council of Europe" (Coleman 2006: 1), the Bologna process has placed special emphasis on the prominent role of English as the instrumental lingua franca for academic and professional exchange. Proficiency in the English language has become a global literacy skill, a commodity for communication and a vehicle for knowledge transfer (Modh Sidek 2012: 27).

While CLIL and technology are both included in the European agenda to promote language learning (Arnó-Macià 2014: 13), teaching English for Specific Purposes at university needs to reconsider how to meet students' communicative needs in a globalized world. This also means addressing recent methodological challenges ranging from the use of new technologies in the classroom to the matter

and the future of textbooks. According to Pérez Cañado (2009: 4), in the English teaching profession, we often tend to rely excessively on the textbook, the dictionary, or even the linguistic corpus and “these sources are no longer valid in making the link with the ‘real’ English language which is currently being used beyond the confines of the classroom.”

While books are written to be relevant to as large number of students as possible (McGrath, cited by Danaye Tous & Haghghi 2014: 56), ESP is predominantly student-centred, and consequently students’ considerations should be at the top of the list of the selection criteria. These considerations include whether the materials will be useful to the students, if they stimulate their curiosity, if the materials are relevant to the students and their needs, if they are fun to do, or whether the students will find the tasks and activities worth doing (adapted from Vičič 2011: 112). ESP textbooks focus on what students will need in their academic, vocational or professional environment.

With the creation of a new European Higher Education Area (EHEA) and the changes in the hitherto incompatible national systems of education, the former Degree in Medicine at the university of Las Palmas de Gran Canaria offered ten non-compulsory subjects on *English for Health Sciences*. Each of these 30-hour courses dealt with a different clinical specialty such as microbiology, ophthalmology, pharmacology, clinical pathology, or medical chemistry. The main goal of these subjects was that students were able to read medical literature and become familiar with specific vocabulary. Oral comprehension and oral expression were not a priority and as such the oral exam at the end of the course was optional.

In this paper, I will evaluate six textbooks used in the teaching of English for medical purposes taking into account Harmer’s materials evaluation form (1983) and McDonough and Shaw’s (2003) external and internal evaluation, but merging some criteria with others for simplicity’s sake. The paper is organised as follows: Section 2 reviews the use of textbooks, its benefits and shortcomings. Section 3 describes the corpus and method of research. The results of the analysis and the discussion of findings are offered in Section 4. Section 5 affords the conclusions drawn from the present study.

2. TEXTBOOK: FRIEND OR FOE?

Although there are many who refer to textbooks as straitjackets that diminish initiative and creativity in the classroom, fails to present appropriate and realistic language models, and show inadequate cultural understanding and lack of contextualisation in language activities, textbooks provide a clear framework

which both the teacher and the students can easily follow. They serve as a syllabus when including a carefully planned and balanced selection of language content, let students learn new material, review and monitor progress, and supply tasks and texts with appropriate level for most of the learners (Hismanoğlu 2011: 37). Usually designed for the general market, there is no such thing as an ideal book for your particular group of learners although they could be used as “an ideas bank, a source of practical examples of ideas for teaching that stimulate teachers’ creative potential” (Cunningsworth 1995: 139).

Until the emergence of English for Specific Purposes in the late 1960s students were taught more or less general English (Vičič 2011: 108), thus English for specific purposes professionals have often engaged in materials development as textbooks and other materials fail to address their students’ specific language learning needs. Oddly enough, the teaching of language for specific purposes can be the ideal situation in the communicative language approach as “there is genuine information gap and thus a real reason for communication” (Scrivener 2004: 187).

Finally, “ESP teachers should have at least some basic knowledge about the subject matter in question, which is ideally supported by a genuine interest in it” (Vičič 2011: 109). While learners are the ones who have the specific content knowledge, teachers have the ability to actively integrate student knowledge about the subject matter. According to Kantonidou (2008: 48), “what is crucial in ESP is the awareness of needs and not the mere existence of them, examining different types of learner awareness might also facilitate the formulation of suggestions for the syllabus to be developed.”

Textbooks are not the solution to all the problems or the cause of all evil. They may be a basic tool to help both teachers and students but it is essential for teachers to learn how to evaluate them beyond assessments based on subjective opinions.

3. ANALYSIS OF THE TEXTBOOKS

In the former Degree in Medicine at the University of Las Palmas de Gran Canaria there were ten optional subjects on *English for Health Sciences*. Each of these 30-hour courses dealt with a different topic, beginning with the hospital, the human body or the general practice, before continuing with different clinical specialty such as microbiology, ophthalmology, pharmacology, clinical pathology, or medical chemistry. Although students could enrol in the courses independently, they were advised to take the first two subjects in order, as they were basic to be able to follow the others.

The main objectives were:

1. To be able to read and understand English medical texts.
2. To introduce a wide range of vocabulary, both general and specific to the field of medicine.
3. To review some grammatical points which serve to understand the texts better.
4. To use different learning strategies to allow reflection on the functioning of the language system and to facilitate the learning of the English language.
5. To make students aware of the importance of the English language to be able to share their knowledge with foreign colleagues.

By and large, after studying these subjects, students should be able to read medical literature and become familiar with the specific vocabulary of the different specialties. With regard to the other skills, oral comprehension and oral expression were not a priority and as such the oral exam at the end of the course was optional.

The teachers of these ten subjects used the six textbooks I mention below by the year of publication:

Methold, K. y C. Methold. 1975. *Practice in Medical English*. London: Longman.

Tiersky, E. y M. Tiersky. 1992. *The Language of Medicine in English*. Englewood Cliffs: Prentice Hall Regents.

Alemán Torres, F. y S. Marrero Morales. 1994. *Technical English for Medicine Studies*. Las Palmas de Gran Canaria: ULPGC Publishing Services.

Glendinning, E. H. y B. A. S. Holmström. 1998 (1987). *English in Medicine*. Cambridge: Cambridge University Press.

McCarter, S. 2009. *Medicine 1*. Oxford: Oxford University Press.

McCarter, S. 2009. *Medicine 2*. Oxford: Oxford University Press.

To assess these textbooks, I have used McDonough and Shaw (2003) and Harmer's evaluation forms but blending some criteria with others for simplicity's sake. The McDonough and Shaw (2003) evaluation model consists of two stages: external and internal evaluation. In the first stage, the teacher obtains a general idea by scanning the blurb, contents and the introduction. The next stage, the internal evaluation, is an in-depth analysis of the materials. In turn, Harmer's materials evaluation form begins with the teacher drawing a profile of the students and their needs. The actual evaluation form has seven major headings: practical considerations, layout and design, activities, skills, language type, subject and content, guidance, and conclusion.

Ideally, pilot testing the new books on a small group of students and measuring the results is highly recommended (Harmer 1983: 237; Stoller *et al.* 2006: 176); although this is not always possible.

3.1. *METHOLD, K. Y C. METHOLD. 1975. PRACTICE IN MEDICAL ENGLISH. LONDON: LONGMAN*

This first oldest book is a compilation of extracts from different medical journals. The authors' main aim is to develop students' comprehension of medical literature and as such units always begin with the reading text that is usually between 400 and 1000 words. The text is followed by a glossary of the less common general words as the authors recommend students to consult a specialised dictionary for the medical terms. The glossary includes the pronunciation of the terms represented in the alphabet of the International Phonetic Association. Next, there is a comprehension exercise, followed by a vocabulary section, further comprehension activities, and three sections called composition, translation and final discussion. The section titled composition usually consists of an exercise to rewrite sentences and the uncommon dialogue or short piece of writing while in the translation section students are expected to translate a paragraph from the reading text or summarise the main ideas into the student's mother tongue. With these activities this textbook is clearly focused on three skills: reading comprehension, written production and some oral expression.

Concerning the topics there are twenty-six chapters divided into five blocks: medical history, the profession of medicine, preventive medicine, descriptive medicine, and case histories. Some of these contents are not relevant to the students' needs, but they are instructive although not especially motivating for our current students. There are no true grammatical explanations since it is understood that students already know English grammar. The type of language is authentic and appropriate for medical students who need the subject to be able to read specialty literature. There is no real progression concerning grammar or vocabulary. Finally, most chapters include a black and white photograph or a diagram related to the content.

As to the external evaluation of the book, it looks old-fashioned with its grey cover and the diagram of a cell. Its blurb and the introduction explain clearly the authors' aim and type of exercises.

3.2. *TIERSKY, E. Y M. TIERSKY. 1992. THE LANGUAGE OF MEDICINE IN ENGLISH. ENGLEWOOD CLIFFS: PRENTICE HALL REGENTS*

After performing an external evaluation of the blurb, contents and introduction, we read the authors' main aims, which are to give students of English an introduction to the English terminology of medicine and to improve their overall use of the language. The cover shows the *caduceus*, as a symbol of Medicine, with two snakes winding around a winged staff.

This textbook is intended for high-intermediate or advanced students who are acquainted with the common structural patterns of the language. Arranged into nine chapters, the topics are some highlights from the history of medicine; human anatomy; disease, its symptoms and treatments; common diseases and ailments; physicians and medical specialties, surgery; careers in health care; first aid in medical emergencies and high-tech medicine and its consequences. The contents are relevant to the students' needs while the vocabulary seems basic, more related to the practice of medicine and its specialties than to its research.

Each chapter begins with a reading text that is usually between 1400 and 2000 words. For easier reference, paragraphs have been numbered and special terms are boldfaced so that students can locate them easily. Following the text of each chapter is a glossary of 20 medical terms in which technical words and expressions are defined. The glossary includes the pronunciation of the terms represented in the alphabet of the International Phonetic Association and stress marks. Chapters include a black and white photograph related to the content of the unit.

The text is followed by some reading comprehension questions under the heading of vocabulary practice. Next, we find the exercises which include some questions to be discussed in class, some exercises on words and word parts, one section on pronouncing medical and general words, an activity to use the new words and phrases learnt in the chapter and a reading comprehension activity. There are not any grammatical explanations but each unit includes a section about prefixes, roots, suffixes, and inflected forms as the intended audience are medical students with a high-intermediate or advanced level who already masters essential English grammar. This textbook is focused mainly on vocabulary with students practicing three skills: reading comprehension, written production and some oral expression.

The type of language is authentic and appropriate for medical students who need the subject to be able to read specialty literature. There is no real progression concerning grammar or vocabulary, though the last reading text is longer than the rest.

3.3. *ALEMÁN TORRES, F. Y S. MARRERO MORALES. 1994. TECHNICAL ENGLISH FOR MEDICINE STUDIES. LAS PALMAS DE GRAN CANARIA: ULPGC PUBLISHING SERVICES*

Two of the many teachers who have taught these subjects in the past prepared this textbook. With a very simple cover and no blurb, the book is a compilation of five articles from different medical journals. It does not include photographs, which makes the text appear less attractive. The authors' main aim is to develop students' comprehension of medical literature and learn medical vocabulary. Arranged

into five chapters, the topics are clinical pathology in the community hospitals; unemployment, financial stress and mental well-being; use of virologic assays for detection of human immunodeficiency virus in clinical trials; the tumor suppressor; ant comparative morphology, cytochemistry and innervation of chromaffin tissue in vertebrates.

Each unit begins with the reading text that is usually between 1000 and 3000 words; paragraphs have been numbered so that students can do the exercises easily. The text is followed by some exercises on vocabulary and reading comprehension. Next, there is a grammatical section with a brief explanation and various exercises on the subject. The grammatical structures included in the book are relative clauses, the conditional sentences, the gerund and the different types of connectors. In some units there is a translation or a short piece of writing. The type of language is authentic and appropriate for medical students who need the subject to be able to read specialty literature.

The skills put into practice in this book are reading comprehension and written production and there are many activities related to working with specialized vocabulary; however, students do not practice any oral skill.

3.4. GLENDINNING, E. H. Y B. A. S. HOLMSTRÖM. 1998 (1987). ENGLISH IN MEDICINE. CAMBRIDGE: CAMBRIDGE UNIVERSITY PRESS

After the external evaluation of the cover, blurb, contents and introduction of this textbook, it could be said that the authors' aims and intended audience are clearly stated. On the cover there is a stethoscope and there some black and white photographs, diagrams with instructions for physiotherapists, drawings, charts, and extracts from books and articles.

The aim of this book is to develop speaking and listening skills primarily, though some attention is also given to reading skills, especially in the use of reference materials and journal articles, and to writing, with a range of medical documents. This textbook is intended for doctors, medical students in the clinical phase of their studies and other medical professionals who have to use English to communicate with patients and their relatives and with medical colleagues. The user profile of this textbook has restricted the contents as the authors focused on doctor-patient communication at the hospital.

The book is divided in seven units, each focusing on one area of doctor-patient communication from history-taking to treatment. Most units have four sections. Section 1 introduces new vocabulary and basic grammar related to the unit theme. The language focus activities included in section 1 are brief comments on key language items introduced by tasks. The focus is the language used in medical communication and grammar points without medical relevance are not included.

For example, unit 1 and 2 deal with asking questions; unit 3 and 4 with giving instructions, explaining and reassuring; unit 5 with explaining and discussing investigations; unit 6 with discussing a diagnosis and unit 7 with treatment. Section 2 provides further practice and introduces a variety of medical documents; it also includes some language focus comments for the student to be able to do the exercises. Section 3 focuses on reading. The reading passages from section 3 are varied and include a case history, a pharmacology reference, journal articles, textbook extracts and a wide variety of medical documents. All the texts are authentic. Section 4 brings together the language studied in the context of a case history with a wide range of activities to practice listening comprehension, reading or writing.

The language is meant to be authentic, real-life English for doctors and very appropriate and motivating for the students. According to the authors, the histories are based on authentic cases and were drawn from a range of specialisms as diverse as obstetrics, ophthalmology and neurology.

The methodology is intended to be communicative and post, communicative, according to the authors. The reading and listening tasks include before, during and after activities and many of these activities are recommended to be worked in pairs. The authors include some guidance in case the student is working alone as well as the tape-scripts and answer keys.

Finally, the textbook is completed with five appendices. Appendix 1 provides a checklist of useful language functions for medical communication; appendix 2 lists common medical British and American abbreviations; appendices 3 and 4 explain the different members of the British hospital system and their equivalence of positions in the American hospital systems. Appendix 5 lists addresses of professional bodies in the UK and USA.

A noteworthy detail about this text is that this is a second edition. Ten years after the first edition the authors considered that they had to update the text both in content of medical advances and language teaching. Likewise some listening tasks were rerecorded to ensure a better gender balance, and the list of useful addresses and the new UK hospital doctor categories were included.

3.5. MCCARTER, S. 2009. *MEDICINE 1 & 2*. OXFORD: OXFORD UNIVERSITY PRESS

This two-book course is aimed at preparing trained and trainee doctors and trained nurses to learn English for a career in medicine. From the external evaluation of the cover, the blurb and the format these books are contemporary. There are many coloured drawings, photographs, charts, diagrams and figures. The intended audience, the goal of this course and the different parts of the units are stated clearly in the introduction which is exactly the same for both books.

Lessons include realistic and communicative activities to practice all the different skills, as well as exercises on vocabulary, pronunciation and grammar. The language spot focuses on the grammar generated by the topic of the unit and concentrates on its practical application; students who need to revise can check the grammar reference section at the end of the textbook, and the teacher's resource book includes a photocopiable grammar test. The main items of medical vocabulary introduced in the unit are included in a list of key words of the unit, and defined in the final glossary at the end of the book. This glossary also includes the pronunciation in phonetic script and information about the part of speech for every word.

In the listening activities, students hear a variety of English accents, both native and non-native speaker to prepare students for real life communication. The situations for these activities are related to medicine including doctor-patient consultations, conversations with colleagues and presentations. There is a reading bank in the middle of the book to practice reading skills followed by the answer key to these exercises. In terms of the topics of the readings they are varied; the first book is mainly about how to deal with patients in general practice while the second discusses the different medical specialties. The length of the texts is also quite varied.

The methodology is unmistakably communicative beginning with the check-up introduction designed as a warm-up activity, and with many exercises intended for pair or group work. The possibility that students assess themselves at the end of each lesson is very interesting, especially with adult students. There is a checklist expressed in 'can do' statements for students to monitor their own progress. Another original feature of these books is the section called Project which can be set as homework assignments. In this section students are usually required to use search engines as well as other websites dedicated to medical issues.

Finally, there are three sections in the lessons that are directly related to the field of medicine: It's my job, Patient care, and Signs and symptoms. The first section is based on authentic interviews to people in different medical environments; its main goal is that students gain insight into the skills required to work in those places. The Patient care feature gives students practice in how to communicate with patients while Signs and symptoms section focuses on the vocabulary students will need to describe common diseases and conditions.

Furthermore, there are two CDs and some additional online resources that can be found on their webpage.

4. DISCUSSION AND CONCLUSION

The various textbooks that have served for teaching the English for health science subjects at the University of Las Palmas in almost twenty years reflects the evolution

of the main aims of these subjects, the change in the notion and importance of languages for specific purposes, and the advances in the publishing industry.

The subject of English for specific purposes has become more important with the development of English as an international language. It is no longer an ornament in the education of any qualified worker, but a real need in an increasingly globalised world. Of course, this has brought a change in the skills to be taught in class. As seen, these first books were primarily engaged in working reading comprehension and to a lesser extent the written and oral expression, while it is now essential to develop all the skills. The European Higher Education Area requires students a B1 level to study a master's degree and, even if it is true that that language does not have to be necessarily English, the latter is still the most popular.

On the other hand, a more communicative approach to language teaching has transformed textbooks into more than just a collection of readings. The most modern texts have a lot of different types of exercises to do in pairs or groups while new technologies are becoming more present in the teaching of foreign languages. Much has changed in the teaching of listening from the use of the cassette, to the CD-ROM and the Internet, and it is not just the audio format but also the inclusion of other accents and new and more realistic situations.

A feature where these innovations are highly evident is in the selection of texts because it has changed from fairly specialized technical readings, very much related to research in the field of medicine, to the use of language as a tool to communicate at a general practice. McCarter's textbooks even include a section on how to talk to patients; for example, by teaching to differentiate between technical and non-technical words to be able to speak to a patient avoiding difficult terms, or by practicing how to explain prescriptions or procedures in simple words.

Textbooks for the teaching of English for medical purposes have evolved considerably in recent years and will probably continue to do so due to the possibilities offered by the new technologies. Current books prepare students for the different skills they will need in their professional future with a great variety of communicative and motivating activities and tasks.

Textbook evaluation helps us to reassess the students' profile, their goals and the methodology that we are using in class. By studying the books used for teaching English for health sciences we will ultimately develop our own taxonomic model that will serve for the creation of supporting materials to be used in the optional subject of the new Degree in Medicine at the University of Las Palmas de Gran Canaria.

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