Reforming a Community to Serve the Underserved: ESP Modules for Midwifery Course at BRAC University

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Abstract: This paper examines the impact of an ESP course designed by BRAC Institute of Languages (BIL) for midwives to develop their English language skills, and to develop them professionally. The course is expected to reform midwives, to empower them with English language skills and professional development by taking part in global development. The community then will be able to reduce the maternal as well as newborn mortality in order to increase coverage of quality maternal and neonatal health services. The course is being offered by BRAC Institute of Global Health (BIGH) with the financial support from the United Kingdom Department for International Development (DFID). The paper shows to what extent an English language course can help midwives in their profession where they sometimes need to interact in English with foreign doctors, write prescriptions, and other official documents in English. The study is carried out among the course teachers with almost the same experiences, exposure, and education, and among course participants with Secondary School Certificate (SSC) and Higher Secondary Certificate (HSC) backgrounds. The data and information have been deduced from a questionnaire, focus group discussions with students, and observation of their performance. The paper shows that most of the participants, having limited English language proficiency, have been able to improve their basic English communication skills. It also shows that almost all students can maintain patients’ portfolio, write prescriptions, reports, discharge certificates, and so on in English. They even feel relaxed enough to speak in English when necessary. It is suggested that ESP modules should concentrate on needs assessment to make it more productive and target oriented.

Keywords: Midwifery, English for Specific Purposes, BRAC Institute of Global Health, BRAC Institute of Languages, BRAC University

Introduction

The concept of midwifery services in the context of Bangladesh is not something new though it was eclipsed from the common. The East Pakistan Nursing Council was fully constituted in 1952 as a Regulatory Body for Nursing Education and Services. After liberation, it was renamed as the Bangladesh Nursing and Midwifery Council (BNMC, 2015). According to the World Health Organization (2015),

midwifery encompasses care of women during pregnancy, labour, and the postpartum period, as well as care of the
newborn. It includes measures aimed at preventing health problems in pregnancy, the detection of abnormal conditions, the procurement of medical assistance when necessary, and the execution of emergency measures in the absence of medical help. (para. 1)

WHO (as cited in Bhuiya et al., 2015) has identified Bangladesh as one of the 57 countries facing a crisis in the supply of human resources for health (HRH). The density of professionally trained health personnel is only 7.7 (5.7 doctors and 2 nurses) per 10,000 individuals; this is coupled with the imbalance of urban (80%) and rural (20%) distribution while about 26% of the population lives in the urban areas and the remaining 74% lives in the rural area. The majority of the rural population relies on informal sectors, with untrained or semi-trained health service providers, where 71% of the deliveries still taking place at home. Of them, 95% births are attended by untrained providers. (p. 15)

BRAC Institute of Global Health (BIGH), BRAC University has started the Community-based Midwifery Diploma Programme (CMDP) in an attempt to further improve maternal and newborn health in Bangladesh. According to Bhuiya et al. (2015), the program targets to ensure availability of at least one midwife in all the 4,500 unions (consisting of several villages) of the country by 2030, starting from the hard-to-reach under served areas. In 2012, six academic sites were developed in five different districts (two sites in Sylhet and one each in Mymensingh, Khulna, Dinajpur and Cox’s Bazar) with the help and hosting of partner non-government organizations (NGOs) in each site. The program, with financial support from the United Kingdom Department for International Development (DFID) and technical support from a Johns Hopkins affiliated organization (Jhpiego) along with Bangladesh Nursing and Midwifery Council (BNMC) developed a competency-based curriculum targeting to meet national and global standards for midwifery education. Core courses or the modules of the program have been developed by the clinical team of the program using the latest and evidence based information. BRAC Institute of Languages (BIL) of BRACU has developed six English Language Modules focusing on the clinical modules of the respective semester. The clinical team of BIGH and faculty members of BIL have trained midwifery teachers in their respective modules.

The rationale of this paper is to bridge the gap between developing English language skills and implementing these skills for the economic and professional development of midwives. WHO, in a document presented in the newly updated Strategic Directions for Strengthening Nursing and Midwifery services (2011-2015), seeks to enhance the capacity of nurses and midwives to contribute to:

- universal coverage
- people-centered health care
- policies affecting their practice and working conditions, and the
- scaling up of national health systems to meet global goals and targets. (para.3)

BIGH, being a part of BRAC University, seeks to maintain a global standard of education and to help midwives contribute to the economic development of the individual and of the country as well. That is why BIGH has decided to incorporate supplementary English modules into midwifery core courses. EIA (as cited in Erling et al., 2015) writes the “English in Action” project, which is running in Bangladesh from 2008-2017, “aims to contribute to the economic growth of Bangladesh by providing English language as a tool for better access to the world economy.” Again, economic development is intertwined with the development of English language skills as well as professional development. As Erling et al. (2015) comments,

English language teaching projects in development contexts are often underpinned by a perceived relationship between English language ability and economic development. One national context in which the relationship between English and economic gain has been a prime motivator for international development initiatives is Bangladesh. (p.7)

To comprehend the midwifery curriculum, to contribute to the economic development, to develop professionally, and to meet and focus on the national and global standards for midwifery education, midwives must use English language skills. Keeping all these things in mind, BIL has developed an English for Specific Purposes (ESP) course for the Midwifery Diploma Programme. This paper will show to what extent ESP
modules can help the midwife community to reform and empower them with English language skills and professional development that will result in reducing the maternal as well as newborn mortality rate by increasing coverage of quality maternal and neonatal health services.

**Background**

The ESP movement, according to Dudley-Evans and St. John (1998), originated from the massive expansion of scientific, technical, and economic activities on an international scale in the 1950s and 1960s. According to Hutchinson and Waters (1987), when the Second World War ended, new scientific, technical, and economic demands grew and English became the international language. Therefore, language teachers were pressed to meet the demands of people outside the teaching profession. Furthermore, a dramatic change took place in linguistics, which demanded focus on communicative aspects of language and learners’ needs in specific contexts. Silva (2002) mentions that English for Specific Purposes reflects learners’ specific purpose in learning the target language, and is a response to learners’ needs and the acquisition of language relevant to communication outside the classroom, especially in their studies and future careers. Chien et al. (2008), browsing through teaching objectives of ESP education in Taiwan, affirm ESP “as a learner-centered and content/context-based approach that primarily involves professional and practical English, and next meets learners’ specific needs in utilizing English in their specific fields such as science and technology” (pp. 115-116).

Murray (2012) conducted a research on a pilot English language intervention model for undergraduate trainee nurses. His intention was to evaluate the efficacy of, and practicalities around, designing and delivering a range of different language proficiency intervention models. The process seeks, ultimately, to produce a workable and comprehensive English language strategy and finally he has been successful.

Mazdayasna & Tahiririan (2008) developed a profile of the ESP needs of Iranian nursing and midwifery students. Over one-third of the students expressed their dissatisfaction with the course and almost all the subject-specific instructors were dissatisfied with their students’ language skills. The paper shows the course to be ineffective as it does not sufficiently take into account students’ (1) learning needs, (2) present level of foreign language proficiency, (3) objectives of the course, (4) resources available in terms of staff, materials, equipment, finances and time constraint, (5) the skill of the teachers and the teacher’s knowledge of the specific area.

Ghalandari & Talebinejad (2012) analyzed ESP textbooks taught in Shiraz Medical College. The paper found that ESP textbooks in medicine are appropriate books for the purpose of medical English for Iranian physicians and compatible to students’ needs and achievement.

Studies conducted by Azam et al (2010) and Aslam et al (2010) show that knowledge of English among the common people, in particular rural people, brings economic value and development. Azam et al (as cited in Erling et al., 2015) used the India Human Development Survey of 2005 to quantify the effects of English-speaking ability on wages. Their findings show that being fluent in English (compared to not speaking the language at all) increased the hourly wages of men by 34 per cent. This paper will expose the impact of ESP modules in developing English language skills and professional development to contribute to the economic development of the community as well as of the nation.

**Methodology**

**Participants.** To carry out the research, the researchers interviewed 12 English teachers and about 295 students in six different hubs. All the teachers have their Bachelor of Science in Nursing from different private universities and government colleges. Among them, seven teachers are female and five are male and their age limit is 25-30 years. They are also trained in both Midwifery and English modules. So, all the teachers have almost the same level of experience, exposure, and education. On the other hand, students have diverse socio-economic, socio-cultural and educational background. Those from remote communities were selected and excluded students from the Dhaka hub. About 180 students, belonging to the first cluster, have completed five modules whereas others, belonging to the new cluster, have done only their first module. The students in the first cluster in all the hubs have mixed ability background with SSC and HSC education. Besides, some of them have long study break. As a result, their age ranges from 15 to 32 years. On the contrary, the students in the new
batches have the same educational background with HSC education without any study break and their ages range from 17-22 years.

**Data Collection**

The researchers visited six hubs in five different districts as mentioned above. They collected data and information from both teachers and students using a semi-structured questionnaire, Focus Group Discussion (FGD) with students, and observation of their performance. The researchers put students into different groups of 10-12 members and conducted the FGD. The researchers also went to different hubs to conduct tests on speaking skills with the prescribed rubric. While conducting assessment on speaking, they also observed their performances.

**Findings and Results**

The data have been analyzed on the basis of the questionnaire, FGD, and observation. After collecting and analyzing the data, it has been found that almost all students and teachers are satisfied with the English modules. As mentioned, English modules were expected to assist students to understand midwifery modules. Responses to the question “To what extent does the English course help you understand your midwifery module?” are given below:

- **Saroti Rani:** English course helps me understand our midwifery module 99%.
  
  (LAMB, Dinajpur)

- **Dulali Akter:** The English course helps me understand my midwifery module very much, because our midwifery education curriculum is in English.
  
  (Hope Foundation, Cox’s Bazar)

- **Dilara Khatun Dola:** Yes, of course the English course helps me understand my midwifery module very much.
  
  (Partners in Health and Development, Khulna)

- **Joya Roy:** English course help our midwifery module 100%.
  
  (LAMB, Dinajpur)

As supplementary modules, English modules therefore help students to understand their core modules. Midwifery students are also expected to communicate with foreigners as it has been written in the module outline of the midwifery course: “improvement of speaking and listening abilities with emphasis on initiating conversation with foreigners and constructing arguments” (Module outline, 2013, p. 3). Keeping this in mind, BIL has incorporated different types of speaking activities in contexts into the modules. Here are some responses to the question “Have you communicated in English with a foreigner or anyone else throughout this English course? If yes, how it was.”

- **Jesmin Akter:** Yes, I have communicated in English with many foreigners. It was very excellent and interesting moment and they understood what I say.
  
  (LAMB, Dinajpur)

- **Joya Roy:** I have communicated in English foreigner and my communication is interesting.
  
  (Partners in Health and Development, Khulna)

- **Ismat Ara Alam Rani:** Yes, I communicated with a foreigner in English. When I communicated in English with a foreigner, I felt proud and happy.
  
  (Partners in Health and Development, Khulna)

English modules have thus been successful in making students speak with foreigners at least to serve the basic needs. Sometimes, students need to maintain patients’ portfolio, write prescriptions, reports, discharge certificates and so on in English. About half of the students have claimed to be successful in these areas.
Even Midwifery Program stakeholders Bhuiya et al. (2015) commented that perspectives, are developing themselves linguistically and professionally with the help of the English modules. They have had a long study break and were less motivated. Still, both old and new students, from their own experiences, have graded them well. Here are two samples.

**Sayeda Begum:** I have written doctor’s advice in English. They have praised me very much.

(Hope Foundation, Cox’s Bazar)

**Jesmin Akter:** Yes, I have written a report according to doctor advice. I have been successful.

(Hope Foundation, Cox’s Bazar)

Students also need to write reflective clinical journals. Teachers are satisfied at students’ writing in the clinical journals and have graded them well. Here are two samples.

While conducting a speaking assessment, we have found from performance observation almost at all hubs that students in the new batch, i.e., those who have completed the first module performed much better than the old ones who had completed five modules. Besides, they seemed to be very enthusiastic and motivated. In investigating further, we discovered from teachers that all these students have similar backgrounds with HSC education and all of them are regular students. We also came to know that almost every day they speak with foreigners who are posted at the hubs. On the other hand, the old students’ performance was poorer because they have had a long study break and were less motivated. Still, both old and new students, from their own perspectives, are developing themselves linguistically and professionally with the help of the English modules. Even Midwifery Program stakeholders Bhuiya et al. (2015) commented that

The BRAC Institute of Language (BIL) has been responsible for developing the English language teaching modules for each semester, focusing on the clinical modules of the respective semester for the students and teachers. The textual comprehension exercises, case studies, role plays etc. have been set and prepared on maternal and newborn health.
issues, so that students can learn the language relevant for the context. This has made English language learning very effective. BIL has been very successful in developing the modules and the teaching methods from scratch, to cater to the needs of the midwifery students. (p.17)

Discussion and Recommendation

Empowering community, in particular empowering women, is a crying need today throughout the whole world. Midwifery education as well as midwives are crucial to reducing maternal and newborn mortality rates and increasing the coverage of quality maternal and neonatal health services. So, for quality education, quality modules for specific learners are needed. BIL has been successful in designing and developing ESP modules for midwives as it has maintained the criteria to develop ESP modules whereas Mazdayasna & Tahirian’s study (2008) has revealed that ESP modules for Iranian nursing and midwifery students failed to achieve the target due to lack of maintaining the criteria for students’ (1) learning needs, (2) present level of foreign language proficiency, (3) objectives of the course, (4) resources available in terms of staff, materials, equipment, finances, and time constraint, and (5) the skill of the teachers and their knowledge of the specific area. Hence, before designing and developing an ESP module, all the criteria should be considered by the resource personnel.

To make a course successful and learners equally efficient, students of similar proficiency need to be enrolled. Otherwise, an ESP course or the objectives of the course will fail. We recommend BIGH as well as stakeholders to select students of the same level for the utmost success of an ESP course.

As has been mentioned, teachers who teach the English modules have expertise in their own areas, that is, they have a Bachelor of Science in Nursing, but they are not as competent in the English language as they are in Midwifery modules. For English modules, BIGH can recruit teachers with English background. BIGH can even launch a language lab or at least provide computer access for students to develop listening skills from native speakers. To develop speaking skills, students can be encouraged to keep in touch with the foreigners posted at different hubs. For this, students might be given some kind of extra points. Though they have less opportunity to practice writing, students also sometimes need to do technical writing. More space for writing practice can be ensured when students stay at the hospital for practical classes.

Conclusion

Erling and Seargeant (as cited in Erling et al., 2015) comment that “improving English skills is viewed as an important means of advancing both individual wealth and the economy of a country” (p. 8). ESP modules for midwifery courses have been successful in improving English skills to contribute to the economic development of the country and to professional development to reduce maternal as well as newborn mortality in order to increase coverage of quality maternal and neonatal health services. According to a report published by bdnews24.com (2014), “nearly 70 percent women deliver at the hand of unskilled attendants in Bangladesh due to lack of skilled midwives. The government has recently started training them” (para. 2). Rubayet (2014), Save the Children Bangladesh’s Saving Newborn Lives project director, said “It’s important to know that many of these 93,000 deaths in Bangladesh could be averted simply by having a skilled health provider present to ensure safe delivery and to respond in case of a crisis” (para.4). Another report says Prime Minister Hasina (2010) “committed to train 3,000 midwives by 2015” in response to the UN Secretary-General Ban Ki-Moon’s initiative “Every Woman Every Child” (para.4). Therefore, to ensure the reduction of maternal and newborn mortality, we need skilled midwives who have midwifery education. BIGH has designed a competency-based curriculum targeting to meet national and global standards for Midwifery education for which ESP modules work as a supplementary, and BIL has been successful in designing and developing such supplementary ESP modules as has been claimed even by stakeholders of BIGH.
References


