

UNDERSTANDING ENGLISH LANGUAGE DEMANDS AND CHALLENGES AMONG HEALTHCARE PROFESSIONALS IN BATAM: A TARGET SITUATION ANALYSIS

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ABSTRACT

English proficiency is increasingly important for medical personnel working in multilingual healthcare environments. This study examines the English language needs and challenges faced by medical staff in Batam, Indonesia, using a Target Situation Analysis (TSA) framework. A qualitative case study design was employed, with data collected through semi-structured interviews with ten medical staff members, including nurses and midwives, who had at least five years of hospital experience and prior experience communicating with foreign patients in English. Data were analyzed using thematic analysis. The findings reveal that English is primarily needed for communicating with foreign patients and for professional interactions. Speaking and listening were identified as the most essential skills, with pronunciation clarity playing a significant role in patient safety. However, participants reported several challenges, including limited medical vocabulary, grammar difficulties, listening comprehension problems, pronunciation issues, and low confidence when speaking English. The study concludes that a gap exists between workplace communication demands and medical staff's English proficiency. Therefore, TSA-based English for Medical Purposes (EMP) training is recommended to address practical communication needs in healthcare settings.

Keywords: English for Medical Purposes; Target Situation Analysis; Medical Staff; Workplace Communication; Healthcare Communication

INTRODUCTION

The medical field is increasingly dependent on English as the primary language of global communication (Tweedie & Johnson, 2022). Medical

personnel must interact with patients and foreign colleagues, requiring fluency in English to enable effective collaboration (Chan et al., 2022). English for Medical Purposes (EMP) addresses this demand by covering clinical communication, recordkeeping, and medical terminology (Cao et al., 2022a, 2022b) (Cao et al., 2022). However, challenges persist. In Indonesia, factors such as peer recommendations, inexperience, and dissatisfaction with local medical services contribute to medical tourism, particularly among wealthier patients seeking specialized care like cardiovascular treatment (Batakis et al., 2023; Ratnasari et al., 2022).

English proficiency is also critical for accessing medical research, as English is the international language of scientific literature. Medical personnel must read, comprehend, and critically analyze medical publications to stay updated on advancements (Tsai, 2022). Additionally, English enables access to educational resources such as webinars, seminars, and online courses, which are essential for continuous professional development (Tseligka & Koik, 2021). Despite these expectations, medical professionals who lack English fluency often struggle with career advancement and miss opportunities for international collaboration (Doykova,

2023). Proficiency directly affects patient care, particularly in multicultural settings where staff must interact with multilingual patients (Roberts, 2023).

However, a significant research gap remains. Most existing studies on English for medical personnel are drawn from high-income or urban settings, leaving rural and regional contexts, such as Indonesia's Riau Islands, underexplored. While research highlights the need for English training for both clinical and non-clinical staff (J. Liu et al., 2023; Myers et al., 2022; Qadeer & Chow, 2023), there is limited exploration of how such training can be integrated into resource-constrained medical systems. Rahayu and Shalihah (2023) identified barriers caused by limited English proficiency among multilingual staff in Malaysian public hospitals as well as investigate specific regional challenges in Indonesia, where medical workers often serve diverse patient populations. Similarly, Al-Btoush & El-Bcheraoui (2024) examined professional integration challenges for migrant medical workers yet offered little insight into local medical workers in linguistically diverse regions like the Riau Islands.

Therefore, this study aims to address these gaps by exploring the specific English language needs and challenges of medical personnel in Batam, Riau Islands,

and proposing localized strategies for improving English proficiency. Specifically, this research focuses on interviewing medical personnel—including midwives and nurses—from two professional medicpublic and two private hospitals in Batam. The study seeks to answer the following research questions:

1. What are the English language skill needs for medical staff?
2. What difficulties do medical staff face when using English at work?

By identifying the specific language skills required and the obstacles encountered, this study aspires to contribute to enhancing healthcare services and patient outcomes. The findings may guide the formulation of customized language programs to augment English proficiency among healthcare personnel in this defined geographical locale.

English for Specific Purposes (ESP)

English for Specific Purposes (ESP) aims to equip learners with communication skills tailored to specific professional fields such as engineering, business, law, or medicine. Unlike general English programs, ESP focuses on successful communication within particular academic or workplace settings. The primary goal is to develop strategies including technical vocabulary and field-specific discourse

that meet learners' real-world communication needs (Ginaya et al., 2023)

In today's globalized workplace, where multilingual teams must collaborate in English, ESP plays a crucial role by bridging the gap between language acquisition and job performance (Guan & Asavisanu, 2023a). Effective ESP programs employ diverse teaching techniques such as role-playing, case studies, and active learning, while also leveraging online tools and digital platforms to provide flexible access to resources (Rifah et al., 2022; Sukmawati et al., 2023; Wannas, 2023).

However, the existing literature on ESP remains largely descriptive. While studies by Guan & Asavisanu (2023a) and Sukmawati et al. (2023) emphasize the importance of needs analysis and digital integration, they rarely examine how ESP programs fail when institutional support is weak or when curricula are not regularly updated. Furthermore, most ESP research focuses on business or academic English, leaving medical ESP, particularly in non-Western, resource-constrained setting, comparatively underexplored. This study addresses that gap by applying ESP principles to medical staff in Indonesian hospitals.

English for Medical Purposes (EMP)

English for Medical Purposes (EMP) is a specialized branch of ESP designed to prepare medical personnel for clinical communication. Its core objectives include helping learners understand medical terminology, interact with patients, and write clinical reports (Banafi, 2023a). Given the high stakes of medical communication, EMP is essential not only for patient safety but also for effective professional collaboration (Ly & Nguyen, 2024). Even minor communication errors can lead to serious consequences in diagnosis and case recording.

With the increasing globalization of healthcare, EMP also trains medical staff to communicate with linguistically diverse patients and colleagues (Tweedie & Johnson, 2022). Ideally, an effective EMP program mirrors clinical practice through case-based learning and real-world simulations, enabling students to gain practical, transferable skills.

Nevertheless, critical problems persist in EMP implementation. First, many EMP programs suffer from outdated or unsuitable curricula that lack practical components, leaving students unable to apply classroom knowledge in real clinical settings (Nugraha et al., 2026). Second, student motivation remains a significant barrier. Banafi (2023a) found that Saudi Arabian medical students perceive EMP

courses as difficult and irrelevant to their career needs, leading to demotivation. This finding is not isolated; it reflects a broader issue where EMP programs fail to align with learners' perceived professional requirements. Third, while Sukmawati et al. (2023) suggest that social media and online resources can boost engagement by creating informal learning environments, such approaches remain supplementary rather than integrated into formal EMP curricula.

A notable contradiction emerges in literature. On one hand, researchers emphasize the need for authentic, practice-oriented EMP training (Guan & Asavisanu, 2023b; Wannas, 2023). On the other hand, evidence from non-English-speaking countries shows that EMP courses continue to prioritize theoretical knowledge over practical communication skills (Karimkhanlooei et al., 2022; Outemzabet & Sarnou, 2023). This disconnect between pedagogical ideals and classroom realities suggests that EMP research has not sufficiently addressed implementation challenges in under-resourced or culturally distinct contexts which is a limitation the current study seeks to address by examining EMP needs in Batam's hospitals. The goal of the specialist ESL course English for Medical Purposes (EMP) is to get students and medical

personnel ready for clinical communication. EMP's main goals are to assist students in writing clinical reports, understanding medical terminology, and interacting with patients (Banafi, 2023b). Given the significance of effective medical communication, the EMP is necessary for

both patient safety and professional cooperation (Wannas & Hassan, 2023). Medical personnel need to be proficient in recording cases and making diagnoses, as even little communication errors can result in major issues.

REVIEW OF RELATED LITERATURES

Prior research in English for Specific Purposes (ESP) emphasizes the necessity of tailored language instruction to address industry-specific needs. However, a critical review of existing studies reveals three key patterns: (1) a predominant focus on clinical staff over non-clinical personnel, (2) consistent evidence of English proficiency gaps across diverse healthcare settings, yet (3) limited attention to regional and resource-constrained contexts such as Indonesia's Riau Islands.

First, studies consistently identify communication challenges across both clinical and non-clinical medical staff. Nugraha et.al (2020) investigated challenges faced by medical providers, including janitors and nurses, in multilingual medical environments, finding that industry-specific English training enhances communication and operational effectiveness. Similarly, Alvi (2023) emphasized the role of customized

English training for multilingual nurses and cleaners in public hospitals to improve productivity. Maleki et al (2021) examined essential medical personnel such as respiratory therapists and sanitation workers during the COVID-19 pandemic, noting that limited English skills increased workplace stress and communication errors. Alkathlan et al. (2023) further confirmed that English language barriers negatively impacted teamwork and communication among nurses and housekeepers during critical pandemic moments. Collectively, these studies demonstrate that English proficiency gaps affect all medical personnel roles, not only doctors or nurses.

Second, research highlights the critical need for English for Medical Purposes (EMP) to support specialized communication in healthcare, yet most studies are situated in high-income or urban settings. Rahayu & Shalihah (2023)

analyzed communication challenges among nurses and caregivers serving multilingual populations, identifying English proficiency as essential for equitable healthcare access. Pun (2023) focused on bilingual and multilingual hospital staff, including nurses and housekeeping personnel, recommending structured English training to address communication gaps and enhance cultural competence. Faltynkova et al., (2021) explored linguistic and cultural barriers in healthcare system, finding that foreign medical staff faced challenges delivering quality care due to insufficient English skills. While these studies provide valuable insights, their findings may not directly transfer to regions like Batam, where healthcare infrastructure, patient demographics, and educational resources differ significantly.

Third, a notable gap persists regarding non-clinical staff and resource-constrained environments. W. Liu et al., (2025) analyzed cases of limited English proficiency in hospital settings, advocating for institutional language support programs and yet their study did not examine how such programs could be implemented in low-resource contexts. Faltýnková (2020) investigated ESP applications in recruiting

and training underrepresented medical roles such as cleaning staff, revealing that fluency in English enhances workplace relationships. However, their research did not address the specific barriers to implementing such training in public hospitals with limited budgets. Al-Btoush & El-Bcheraoui (2024) highlighted challenges faced by multilingual migrant medical workers adapting to new healthcare systems, emphasizing tailored language support. Nevertheless, their focus on migrant workers leaves a gap in understanding the needs of local medical staff in linguistically diverse regions like the Riau Islands, where English is a foreign language rather than a second language.

Across all reviewed studies, a consistent finding emerges: English proficiency is critical for effective healthcare communication, teamwork, and patient outcomes. However, literature is characterized by three limitations: (a) most studies are descriptive rather than intervention-focused; (b) findings are derived primarily from high-income or urban settings; and (c) non-clinical staff (e.g., cleaners, janitors, housekeeping personnel) are often included as participants but not as central units of analysis. Consequently, there is limited

understanding of how ESP and EMP principles can be adapted to regional, resource-constrained healthcare contexts such as Batam, Indonesia—where medical staff serve diverse patient populations with varying language backgrounds. This study directly addresses that gap by examining the specific English language needs and challenges of both clinical and non-clinical medical personnel in Batam's public and private hospitals.

Target Situation Analysis

The Target Situation Analysis (TSA) framework, particularly Hutchinson & Waters' model (Hutchinson & Waters, 1987), provides a systematic foundation for designing English for Medical Purposes (EMP) programs based on learners' real-world workplace demands. Unlike generic language curricula that assume learner needs, Hutchinson & Waters argue that ESP course design must begin by answering a core question: *What will learners need to do with English in their target professional situation?* Their model identifies six specific dimensions of target needs: (1) why English is needed (e.g., patient communication, documentation), (2) how it will be used (speaking, writing, listening, reading), (3) what content areas are required (medical terminology, case

reporting, admission procedures), (4) where communication occurs (wards, emergency rooms, administrative offices), (5) when it is used (routine daily tasks versus crisis situations), and (6) who learners interact with (patients, colleagues, foreign medical staff, hospital management). This empirical approach ensures that EMP courses address authentic communication tasks rather than relying on assumed or decontextualized language content (Alvi, 2023; Guan & Asavisanu, 2023a; Tseligka & Koik, 2021).

However, critical issues persist in how TSA has been applied in EMP research. First, many studies use Hutchinson & Waters' model superficially—listing target needs without systematically analyzing how those needs translate into curriculum design, learning objectives, or measurable outcomes (Wannas, 2023). This descriptive tendency reduces TSA to a checkbox exercise rather than a generative framework for course development. Second, existing TSA studies often focus exclusively on clinical staff such as doctors and nurses, while overlooking non-clinical personnel including cleaners, janitors, and administrative staff. According to Hutchinson & Waters' framework, these

roles fall under the "who" and "where" dimensions, yet their communication needs remain underexplored (Sukmawati et al., 2023). Third, most TSA research is conducted in high-income or urban settings and rarely accounts for resource-constrained or regional contexts, where institutional support for EMP and access to digital tools may be limited. Hutchinson & Waters acknowledged the importance of "means analysis" (examining available resources and constraints), but subsequent studies have frequently ignored this crucial component.

This study directly addresses these gaps by applying the Hutchinson & Waters TSA model systematically. The researcher plans to use semi-structured interviews to

collect information from both nurses and midwives at public and private hospitals in Batam. Guided by the six-dimensional framework, data collection will identify specific communication challenges such as patient consultations, emergency coordination, and multilingual team communication as well as language needs including medical terminology and documentation skills. By moving beyond descriptive needs listing toward practical, context-sensitive EMP recommendations, this study aims to demonstrate how TSA can meaningfully inform curriculum development in resource-constrained healthcare settings (Guan & Asavisanu, 2023a; Wannas, 2023).

METHODS

Research Design

This study employed a qualitative case study research design to investigate the English language needs of medical staff and the difficulties they face in using English in the workplace. A case study design was chosen because it allows for an in-depth, contextualized exploration of a bounded system, in this instance, medical staff working in hospitals in Batam, Indonesia (Yin, 2018). Unlike broader

qualitative designs that may prioritize generalizability, the case study approach is particularly suitable for examining "how" and "what" questions within real-life contexts where the boundaries between phenomenon and context are not clearly evident.

The single case was defined as: English language needs and challenges among medical staff in Batam hospitals. To strengthen the design, embedded units of

analysis were included: (a) nurses and (b) midwives, drawn from both public and private hospital settings. This embedded case design allows for comparison across roles and institutional types while maintaining focus on the overarching case.

A qualitative case study approach was selected for three reasons. First, it enables rich, in-depth exploration of participants' experiences, perceptions, and actual language use in authentic medical settings (Creswell, 2018). Second, case study methodology is well-suited for needs analysis research in ESP, as it captures contextual factors such as institutional resources, patient demographics, and workplace hierarchies that influence language use (Hyland, 2022). Third, the case study design aligns with the Target Situation Analysis (TSA) framework (Hutchinson & Waters, 1987), as both emphasize understanding language demands within specific, real-world target situations rather than decontextualized language abilities.

Data were collected primarily through semi-structured interviews to capture authentic workplace communication practices. To enhance credibility through triangulation, where available, supporting documents (e.g.,

workplace communication forms, patient intake records) were also analyzed. The case study design does not aim for statistical generalizability but rather for analytical generalizability where findings are extended to broader theory rather than populations (Yin, 2018).

Participants

Ten medical staff (nurses and midwives) from two public and two private hospitals in Batam, Indonesia, participated in this study. Purposive sampling was used with three inclusion criteria: (1) current employment as a nurse or midwife, (2) minimum five years of hospital work experience, and (3) prior experience communicating with foreigners using English. These criteria ensured participants could provide rich, relevant data on English needs and challenges in medical settings. The small sample size (n=10) limits generalizability but is appropriate for an exploratory qualitative case study (Yin, 2018).

Instrument

The instrument used in this study was a semi-structured interview guide adapted from Lu (2018a) and designed specifically for medical workers. The interview guide consisted of seven open-ended questions that aimed to explore participants' English

language needs and challenges in medical settings.

The interview questions were categorized into three main aspects: profile, English language needs, and challenges in using English. Questions related to participants' profile focused on their professional role and length of work experience. Questions addressing English language needs explored the use of English as an oral communication tool, the contexts in which English is used, the most necessary English skills in the workplace, and the essential skills required when

caring for foreign patients. Meanwhile, questions related to challenges focused on difficulties encountered when using English in daily medical tasks.

All interview questions emphasized oral communication, as speaking and listening are central to medical interactions. The semi-structured format allowed flexibility for participants to elaborate on their responses and provide real examples from their workplace experiences, while still ensuring that the data collected were relevant to the research questions.

Table 1. Interview Questions for Medical Workers (Lu, 2018b)

No.	Question	Category
1.	What is your professional group (e.g., Practical Nurse, Registered Nurse, Specialist Nurse, Physician / Specialist Physician, Pharmacist / Doctor / Specialist Doctor, Midwife / Specialist Midwife.)?	Profile
2.	How many years of experience do you have in your current position at this organization (e.g., 0-5 Years, 6-15 Years, 16 Years or More.)?	Profile
3.	Do you need to use English as an oral communication tool in your job at this hospital? If yes, in what situations?	Needs
4.	In what contexts would you use English as an oral communication tool (e.g., providing clinical instructions, shifting reports, talking to foreign patients, communicating with doctors, explaining medication, handling emergencies.)?	Needs
5.	Have you ever encountered any problems or difficulties related to using English as an oral communication tool in your job?	Challenges
6.	Which English language skills do you feel are more necessary than others for you in order to manage your responsibilities in this hospital (e.g., listening comprehension, speaking (oral communication), reading comprehension, writing, vocabulary, grammar, pronunciation.)? What makes you think so?	Needs

No.	Question	Category
7.	Can you describe to me the most valuable skills needed when caring for foreign patients? What makes you think so?	Needs

Data Collection

Data were collected through semi-structured interviews using the interview guide adapted from (Lu, 2018b). The interviews were conducted individually with each participant to obtain detailed and authentic information regarding their English language use, needs, and challenges in medical settings. All seven interview questions were asked to each participant to ensure consistency of data across participants.

The interviews focused on participants' professional background, situations requiring the use of English, contexts of oral communication, essential English language skills, and difficulties encountered when using English at work. The interviews were conducted in a comfortable and natural setting to encourage participants to share their experiences openly. With participants' consent, all interviews were audio-recorded and later transcribed verbatim to maintain data accuracy.

The data collected in this study were limited to participants' interview

responses. No additional instruments such as questionnaires or observations were used, as the study aimed to capture in-depth qualitative insights directly from medical staff.

Data Analysis Method

The interview data were analyzed using thematic analysis with a manual and technology-assisted approach. First, all interview recordings were transcribed verbatim. The transcripts were then reviewed repeatedly to familiarize the researcher with the data.

Initial coding was conducted manually by identifying meaningful units related to English language needs and challenges. Google Excel was used to organize transcripts, codes, categories, and frequency counts systematically. This process helped the researcher manage the qualitative data, compare responses across participants, and identify recurring patterns.

In addition, ChatGPT was used as a supportive analytical tool to assist in organizing codes, refining theme labels, and checking consistency between codes

and themes. The use of ChatGPT was limited to supporting data organization and interpretation, while all final decisions regarding coding, theme development, and analysis were made by the researcher. This

approach ensured that the analysis remained grounded in participants' interview responses and aligned with qualitative research principles.

RESULTS AND DISCUSSION

Results

This chapter presents the findings obtained from semi-structured interviews with ten medical staff members working in two public hospitals and two private hospitals in Batam. Participants consisted of three midwives and seven nurses. As specified in the methodology, all participants met the inclusion criteria of having at least five years of hospital work experience and prior experience communicating with foreigners using English. Participants' years of experience ranged from 5 to 15 years, with an average of 8.4 years, ensuring that all participants possessed sufficient professional maturity to provide meaningful insights into English language needs and challenges in medical settings. To maintain confidentiality, participants were coded from P1 to P10. The interview data were analyzed thematically following Braun & Clarke's (2006) six-phase framework,

involving familiarization with transcripts, initial coding, theme search and review, and final theme definition. The findings are organized into three main themes: (1) English as a Workplace Communication Tool, (2) Essential English Skills in Clinical Practice, and (3) Challenges in Using English at Work.

English as a Workplace Communication Tool

Ten participants reported that English is used when communicating with foreign patients. They stated that English is needed to ask about symptoms, explain medical procedures, give medication instructions, and provide healthcare information. P9 expressed the notion of English for patient interaction as follows:

“I usually use English when communicating with foreign patients, for example to ask about their complaints, administer medication, and handle other needs related to healthcare services.”

P10 highlighted the necessity of English when serving foreign patients as follows:

“As I mentioned earlier, English is used when communicating with foreign patients. If there are patients from other countries, we use English to provide information or conduct examinations.”

P4 described the use of English in daily patient interaction as follows:

“Yes, sometimes I need to use English, especially when interacting with foreign patients. Usually, it is used to explain medications, give simple instructions, or calm patients who cannot speak Indonesian.”

Essential English Skills in Clinical Practice

Four participants stated that speaking and listening are the most necessary English skills in their work. They reported that oral communication is used during direct interaction with patients. P9 emphasized the importance of oral communication skills as follows:

“When caring for foreign patients, oral communication skills are the most valuable. Through direct communication, I can provide clearer explanations so that patients can understand more easily.”

P10 identified direct understanding and communication with patients as essential skills as follows:

“The most valuable skill is communication ability. When patients understand what I explain, I feel very relieved because we share the same understanding. If language use is inaccurate—even in Indonesian—it can lead to miscommunication that may result in errors. Therefore, communication is the most important element in giving guidance, explaining health conditions, and providing instructions related to medication.”

P4 expressed the importance of speaking and listening skills as follows:

“In my opinion, speaking and listening skills are the most important. Both are essential for explaining procedures and understanding patients’ needs quickly and accurately.”

P3 identified listening and speaking as crucial skills as follows:

“I think listening and speaking. Especially listening, because I need to quickly understand what the patients mean and avoid making mistakes in taking action.”

Four participants mentioned pronunciation as an important skill in workplace communication. They reported that correct pronunciation helps patients understand medical instructions. P9 explained the importance of pronunciation clarity as follows:

“In my opinion, pronunciation is the most important skill. With correct pronunciation, patients can

more easily understand the information or instructions that I provide.”

P5 emphasized the importance of accurate pronunciation as follows:

“In my opinion, pronunciation is the most important skill because incorrect pronunciation when explaining medications or procedures can cause misunderstandings for patients or doctors.”

Difficulties in Using English at Work

Six participants reported experiencing pronunciation difficulties when using English. They stated that pronunciation problems affect their confidence in speaking. P9 described his experience with pronunciation difficulty as follows:

“Yes, I sometimes experience difficulties when communicating in English, mainly because my pronunciation is not yet accurate. Therefore, I often use support tools such as Google Translate when speaking with foreign patients. This situation also sometimes makes me feel less confident.”

P8 explained pronunciation difficulties in workplace communication as follows:

“Yes, I quite often experience difficulties because my English skills are not yet fluent. I sometimes have trouble with pronunciation when interacting with foreign patients. At

times, patients do not immediately understand what I mean due to these limitations, which makes me feel less confident. Occasionally, I also need to use Google Translate.”

Three participants reported difficulty understanding spoken English, especially when patients speak quickly or use unfamiliar accents. P4 explained listening comprehension difficulties as follows:

“Yes, I have, especially in listening. I often find it difficult to understand foreign patients’ accents. For example, there was a patient from Australia who spoke very fast, and I had trouble understanding what he meant. I had to ask him to repeat himself several times. From that experience, I learned to be more patient and to continuously improve my listening skills by practicing through English videos or conversations.”

P1 explained difficulties related to vocabulary and patient accents as follows:

“Yes, I have. The difficulty is usually vocabulary. I know the medical terms in Indonesian, but I don’t always know the equivalent in English. Sometimes the patients’ accents also make it hard to understand them. Especially when they speak fast, that can be challenging, particularly in emergency situations.”

Discussion

This section interprets the findings in relation to the research objectives and theoretical frameworks of English for

Specific Purposes (ESP) and English for Medical Purposes (EMP). Rather than restating results, the discussion critically examines why certain patterns emerged, how they align with or contradict prior research, and what implications arise for EMP curriculum design in resource-constrained settings like Batam.

English as a Workplace Communication Tool

The findings indicate that English functions primarily as a task-oriented tool for interacting with foreign patients, including asking about symptoms, explaining procedures, administering medication, and providing healthcare information. This aligns with the core ESP principle that language instruction should address specific occupational needs rather than general mastery (Mao & Zhou, 2024; Sukmawati et al., 2023).

However, a critical observation emerges: participants reported using English almost exclusively for patient-facing tasks, with minimal use for professional collaboration or accessing international medical literature. This contrasts with findings from (Guan & Asavisanu, 2023b) and Nugraha et.al, (2026), where English served both interpersonal and professional development functions. The discrepancy

may be explained by contextual factors specific to Batam. Unlike Los Angeles County or Malaysian public hospitals, settings with high concentrations of international medical staff, Batam's hospitals may offer fewer opportunities for cross-border professional collaboration. Alternatively, participants' limited English proficiency may restrict their ability to use English for purposes beyond basic patient communication. This suggests that EMP programs in Batam should not only teach clinical communication but also actively create pathways for engaging with global medical knowledge.

Essential English Skills in Clinical Practice

Participants identified speaking and listening as the most necessary skills, with pronunciation emerging as particularly critical. This confirms EMP principles that prioritize oral communication for real-time clinical interactions (Banafi, 2023a; Wannas, 2023). Pronunciation was linked not merely to accuracy but to patient safety and confidence, a finding consistent with Guan & Asavisanu (2023b), who argue that ESP instruction must mirror workplace conditions where precision is essential.

A notable tension appears in the literature. While Banafi (2023a) and Farea & Singh (2024) emphasize cultural and linguistic sensitivity, most EMP studies (including the present one) focus on technical accuracy rather than the interpersonal dimensions of communication. Participants expressed concern that unclear communication could lead to errors, yet none mentioned training in empathy, rapport-building, or managing patient anxiety where skills are equally vital in multicultural healthcare. This gap suggests that existing EMP frameworks may overemphasize transactional language (e.g., giving instructions) at the expense of interactional competence (e.g., reassuring distressed patients). Future EMP programs should integrate both dimensions.

Difficulties in Using English at Work

Pronunciation difficulties were the most frequently reported challenge, closely tied to reduced confidence and hesitation. This finding aligns with Banafi (2023a), who notes that motivation and confidence significantly influence EMP learning effectiveness, and with Suhaimi & Hamid (2024), who report that pronunciation struggles discourage active English use.

Three critical issues require deeper analysis. First, the link between pronunciation and confidence is not merely individual but systemic (Purba et al., 2025). Participants' hesitation may reflect broader workplace cultures where English errors are stigmatized rather than supported. Second, listening comprehension difficulties which particularly with unfamiliar accents or rapid speech were reported but rarely addressed in existing EMP curricula. Twersky et al. (2024) warn that misunderstanding spoken information in clinical settings may lead to treatment errors, yet most EMP programs prioritize speaking over listening. Third, participants identified limited medical vocabulary as a barrier. However, Mao & Zhou (2024) argue that ESP should prioritize functional language over extensive vocabulary lists. The present findings suggest that Batam's medical staff need targeted vocabulary for specific tasks (e.g., medication administration, symptom inquiry) rather than exhaustive medical terminology.

Limitations and future directions. This study's small sample size (n=10) and focus on a single Indonesian city limit generalizability. Additionally, the reliance on self-reported data may not fully capture

actual communication breakdowns. Future research should employ observational methods to document real-time English use in clinical settings and examine whether structured EMP training reduces reported difficulties. Despite these limitations, the findings offer

CONCLUSIONS

This study examined English use by medical staff in Batam hospitals, the essential skills required in clinical practice, and the difficulties encountered when using English at work. The findings reveal that English functions as a practical communication tool for interacting with foreign patients, primarily to ask about symptoms, explain procedures, and provide medication instructions. Speaking and listening emerged as the most essential skills, with pronunciation highlighted as crucial for clarity and patient safety.

This research makes three contributions to ESP and EMP literature. First, it extends TSA frameworks (Hutchinson & Waters, 1987) to a previously underexplored context: resource-constrained, regional hospitals in Indonesia's Riau Islands. Second, it provides empirical evidence that non-clinical communication challenges that particularly pronunciation-related confidence issues are as significant as

concrete implications: EMP programs in Batam should prioritize pronunciation and listening comprehension, integrate confidence-building strategies, and focus on task-specific vocabulary directly tied to participants' daily clinical responsibilities.

vocabulary or grammar gaps. Third, the study demonstrates that EMP needs in Batam differ from those in high-income settings, emphasizing functional, task-specific oral skills over academic or written English.

Several limitations must be acknowledged. The small sample size (n=10) limits transferability, although it is appropriate for an exploratory case study (Yin, 2018). Participants were limited to nurses and midwives, excluding other essential roles such as cleaners, janitors, or administrative staff whose English needs may differ. Data were self-reported through interviews, which may not fully capture actual communication breakdowns occurring in real clinical interactions. Additionally, the study did not measure English proficiency objectively, relying instead on participants' perceptions.

Future studies should address these limitations by: (a) employing observational methods to document real-time English use

in clinical settings, (b) including a broader range of medical personnel (e.g., non-clinical staff, doctors, pharmacists), (c) developing and testing EMP interventions rather than only identifying needs, and (d) comparing English communication challenges across multiple regions in Indonesia to identify contextual variations.

Based on the findings, EMP programs in Batam should prioritize: (1) pronunciation training integrated with confidence-building strategies, (2) listening comprehension practice with diverse accents, (3) task-specific medical vocabulary directly tied to daily clinical

tasks (e.g., medication administration, symptom inquiry), and (4) workplace-based learning opportunities rather than decontextualized classroom instruction.

While English is undeniably important in healthcare settings, improving medical staff's communicative competence requires more than general English courses. Context-sensitive EMP training which grounded in systematic TSA and tailored to Batam's specific patient demographics and institutional resources is essential for enhancing both professional confidence and patient outcomes.

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REFERENCES

- Al-Btoush, A., & El-Bcheraoui, C. (2024). Challenges affecting migrant healthcare workers while adjusting to new healthcare environments: a scoping review. *Human Resources for Health*, 22(1), 1–11. <https://doi.org/10.1186/s12960-024-00941-w>
- Alkathlan, M. S., Alsuyufi, Y. A., Alresheedi, A. F., Khalil, R., Sheiq, P. A., Alotaieq, S. S., Almithn, A. A., Alissa, I. I., Alayyaf, H. F., Alharbi, R. M., Alkhamis, I. A., & Al-Wutayd, O. (2023). Healthcare adjustments and concerns: a qualitative study exploring the perspectives of healthcare providers and administrative staff during the COVID-19 pandemic in Saudi Arabia. *Frontiers in Public Health*, 11. <https://doi.org/10.3389/fpubh.2023.961060>
- Alvi, A. H. (2023). From Pedagogy to Andragogy in Post Covid-19 ESP Courses: A Customized Blended Learning Model for English in Medicine at a Saudi University.

World Journal of English Language, 13(2), 77 – 85.
<https://doi.org/10.5430/wjel.v13n2p77>

- Banafi, N. (2023a). Nursing Students' Self-Motivation, Attitude Toward Communicative Language Teaching, and Learning Style Preferences Concerning Medical English Language Skills. *Theory and Practice in Language Studies*, 13(5), 1287–1294. <https://doi.org/10.17507/tppls.1305.24>
- Banafi, N. (2023b). *Nursing Students' Self-Motivation, Attitude Toward Communicative Language Teaching, and Learning Style Preferences Concerning Medical English Language Skills*. <https://doi.org/10.17507/tppls.1305>
- Batakis, D., Sidiropoulos, S., Emmanouil-Kalos, A., Fouskas, T., Zopounidis, C., & Vozikis, A. (2023). Medical Tourism in the Region of Crete, Greece: Perspectives from Healthcare Providers, Hotel Managers, and Medical Tourists. *Sustainability (Switzerland)*, 15(24), 1–16. <https://doi.org/10.3390/su152416822>
- Cao, Z., Zhang, Z., Liu, Y., & Pu, L. (2022a). Exploring English for medical purposes (EMP) teacher cognition in the Chinese context. *Frontiers in Psychology*, 13. <https://doi.org/10.3389/fpsyg.2022.1003739>
- Cao, Z., Zhang, Z., Liu, Y., & Pu, L. (2022b). Exploring English for medical purposes (EMP) teacher cognition in the Chinese context. *Frontiers in Psychology*, 13. <https://doi.org/10.3389/fpsyg.2022.1003739>
- Chan, S. M. H., Mamat, N. H., & Nadarajah, V. D. (2022). Mind your language: the importance of english language skills in an International Medical Programme (IMP). *BMC Medical Education*, 22(1). <https://doi.org/10.1186/s12909-022-03481-w>
- Creswell, J. W. , & C. J. D. (2018). *Research Design ((5th ed.))*. SAGE Publications.
- Doykova, I. (2023). Developing English Language Skills for Professional Communication in Medicine. *Analele Universitatii Ovidius Constanta, Seria Filologie*, 34(1), 3 – 18. <https://www.scopus.com/inward/record.uri?eid=2-s2.0-85184909679&partnerID=40&md5=b807a716d27c0abc0640c33d9853b78d>
- Faltýnková, L. (2020). Implementation of Blended Learning into ESP for Medical Staff. *Smart Innovation, Systems and Technologies*, 188, 123 – 133. https://doi.org/10.1007/978-981-15-5584-8_11
- Faltynkova, L., Simonova, I., Kostolanyova, K., & Barot, T. (2021). Learners' Preferences in ESP Instruction for Higher Medical Staff. *Advances in Intelligent Systems and Computing*, 1328 AISC, 655 – 662. https://doi.org/10.1007/978-3-030-68198-2_60
- Farea, W. A., & Singh, M. K. M. (2024). A target English needs analysis on ESP course: Exploring medical students' perceptions of necessities at a Yemeni university.

Training, Language and Culture, 8(1), 20 – 37. <https://doi.org/10.22363/2521-442X-2024-8-1-20-37>

- Ginaya, G., Somawati, N. P., Chandra Handayani, L. N., Hudiananingsih, P. D., & Sukmawati, N. M. R. (2023). Task and Feedback-Based English for Tourism Subject Courses to Enhance Students' Character. *Theory and Practice in Language Studies*, 13(7), 1810 – 1816. <https://doi.org/10.17507/tpls.1307.26>
- Guan, W., & Asavisanu, P. (2023a). Medical English Course Quality: A Study of Student and Instructor Perspectives. *Journal of Education and Learning*, 12(6), 97. <https://doi.org/10.5539/jel.v12n6p97>
- Guan, W., & Asavisanu, P. (2023b). Medical English Course Quality: A Study of Student and Instructor Perspectives. *Journal of Education and Learning*, 12(6), 97. <https://doi.org/10.5539/jel.v12n6p97>
- Hutchinson, T., & Waters, A. (1987). (*Cambridge Language Teaching Library*) *Tom Hutchinson, Alan Waters - English for Specific Purposes - Cambridge University Press (1987)*.
- Hyland, K. (2022). ENGLISH FOR SPECIFIC PURPOSES: WHAT IS IT AND WHERE IS IT TAKING US? *ESP Today*, 10(2), 202 – 220. <https://doi.org/10.18485/esptoday.2022.10.2.1>
- Karimkhanlooei, G., Motamed, N., & Gharebaghi, H. (2022). Effective Factors in Medical Students' Willingness to Communicate in The Course of English for Specific Purposes. *Journal of Medical Education Development*, 15(45), 34–46. <https://www.scopus.com/inward/record.uri?eid=2-s2.0-85135756059&partnerID=40&md5=b7c96311aa8a08c7351367cc50798902>
- Liu, J., Cai, J., Guo, S., & Yang, X. (2023). Improving Chinese nursing undergraduates' nurse-patient clinical communication competence in English: A study based on a target situation needs analysis. *Heliyon*, 9(10). <https://doi.org/10.1016/j.heliyon.2023.e20441>
- Liu, W., Miao, X., Bai, W., Wang, Y., Cheng, Y., & Zhang, H. (2025). Evidence-based nursing practice readiness in tertiary hospitals in central China: a convergent parallel mixed methods study. *BMC Nursing*, 24(1). <https://doi.org/10.1186/s12912-025-03365-6>
- Lu, Y. L. (2018a). What do nurses say about their English language needs for patient care and their ESP coursework: The case of Taiwanese nurses. *English for Specific Purposes*, 50, 116–129. <https://doi.org/10.1016/j.esp.2017.12.004>
- Lu, Y. L. (2018b). What do nurses say about their English language needs for patient care and their ESP coursework: The case of Taiwanese nurses. *English for Specific Purposes*, 50, 116–129. <https://doi.org/10.1016/j.esp.2017.12.004>

- Ly, T.-M. T., & Nguyen, H. B. (2024). The Influence of the PERMA Model on EMP Students' English Speaking Performance. *International Journal of Learning, Teaching and Educational Research*, 23(9), 1 – 22. <https://doi.org/10.26803/ijlter.23.9.1>
- Maleki, P., Al Mudaris, M., Oo, K. K., & Dawson-Hahn, E. (2021). Training Contact Tracers for Populations With Limited English Proficiency During the COVID-19 Pandemic. In *American journal of public health* (Vol. 111, Number 1, pp. 20–24). <https://doi.org/10.2105/AJPH.2020.306029>
- Mao, F., & Zhou, J. (2024). A needs analysis of ESP courses in colleges of art and design: Consensus and divergence. *PLOS ONE*, 19(6), e0305210. <https://doi.org/10.1371/journal.pone.0305210>
- Mukhriz, I., Suhaimi, H. H., & Hamid, H. A. (2024). Care in Malaysia: Emerging Trends, Challenges and Opportunities. *Khazanah Research Institute*, (November). www.KRInstitute.org.
- Myers, M. W., Siriratsivawong, K., Hiraizumi, Y., & Hashimoto, M. (2022). Integrating Clinical English in Japanese Medical Education: Challenges, Successes, and Insights. In *STEM English in Japan: Education, Innovation, and Motivation*. https://doi.org/10.1007/978-3-031-11116-7_7
- Nugraha, H., & Chairunisa. (2020). Analysis Needed for Preparation of Teaching Materials in English for Medical Personnel in Batam City. *IdeBahasa*, 2(2), 133–140. <https://doi.org/10.37296/idebahasa.v2i2.46>
- Nugraha, H., Mustafa, D. Y., & Zaki, L. B. (2026). *Prescribing English , producing silence : How English classes in the medical vocational school systemically undermine communicative competence*. 7(1), 271–289.
- Outemzabet, B., & Sarnou, H. (2023). Exploring the significance of English-based communication for a community of medical academics in a public university teaching hospital in Algeria. *English for Specific Purposes*, 70, 116–130. <https://doi.org/10.1016/j.esp.2022.12.001>
- Pun, J. (2023). Developing an ESP workshop to promote handover practices in nursing communication: A case study of nurses in a bilingual hospital in Hong Kong. *English for Specific Purposes*, 71, 123 – 138. <https://doi.org/10.1016/j.esp.2023.04.002>
- Purba, R. P., Togatorop, S. A., Lady, T., Prasadjo, P., & Zaki, L. B. (2025). *ONE GOAL , MANY ROADS : INVESTIGATING INDIVIDUAL DIFFERENCES IN L2 WILLINGNESS TO COMMUNICATE AMONG UNIVERSITY FRESHMEN*. 13(4), 1713–1727.
- Qadeer, A., & Chow, U. T. (2023). English Language Difficulties of Pre-Clinical Medical Students and the Contributing Role of Foundation-Year English Language Course at a

- Medical College in Saudi Arabia. *Theory and Practice in Language Studies*, 13(6), 1360 – 1372. <https://doi.org/10.17507/tpsls.1306.04>
- Rahayu, S., & Shalihah, M. (2023). *Indonesian and Malaysian Nurses in English for Specific Purposes Course: A Multicultural Perspective*. 1–10. <https://doi.org/10.4108/eai.11-7-2023.2340610>
- Ratnasari, R. T., Gunawan, S., Pitchay, A. A., & Mohd Salleh, M. C. (2022). Sustainable medical tourism: Investigating health-care travel in Indonesia and Malaysia. *International Journal of Healthcare Management*, 15(3), 220–229. <https://doi.org/10.1080/20479700.2020.1870365>
- Rifah, L., Zunaidah, A., & Sari, C. C. (2022). Developing ESP-Based CLIL to Increase Students' Engagement in Higher Education. *Proceedings - International Conference on Education and Technology, ICET, 2022-October*, 147 – 152. <https://doi.org/10.1109/ICET56879.2022.9990659>
- Roberts, G. J. (2023). Tall trees; weak roots? A model of barriers to English language proficiency confronting displaced medical healthcare professionals. *Language Teaching Research*, 27(4), 820 – 836. <https://doi.org/10.1177/1362168820968366>
- Sukmawati, S., Syam, N. I. S., Jubhari, Y. J., Mardiani, M., Sasabone, L., & Sujarwo, S. (2023). Implementation of Technology on English for Specific Purposes (ESP) Students in Communicative Language Teaching Approach. *Ethical Lingua: Journal of Language Teaching and Literature*, 10(1), 88–97. <https://doi.org/10.30605/25409190.566>
- Tsai, P.-H. (2022). A PEDAGOGICAL DIALOGUE BETWEEN ENGLISH FOR GENERAL PURPOSES AND ENGLISH FOR MEDICAL PURPOSES: MARCHING FROM SHORT STORY READING AND ART PRACTICE TO THE WRITING OF A HISTORY OF PRESENT ILLNESS. *Taiwan Journal of TESOL*, 19(2), 65 – 106. [https://doi.org/10.30397/TJTESOL.202210_19\(2\).0003](https://doi.org/10.30397/TJTESOL.202210_19(2).0003)
- Tseligka, T., & Koik, K. (2021). THE BECOMING OF A MEDICAL PROFESSIONAL: INTEGRATING HUMANITIES-BASED RESOURCES IN A MEDICAL ENGLISH COURSE. *ESP Today*, 9(1), 50 – 62. <https://doi.org/10.18485/ESPTODAY.2021.9.1.3>
- Tweedie, M. Gregory., & Johnson, R. C. . (2022). *Medical English As a Lingua Franca*. De Gruyter Mouton.
- Twersky, S. E., Jefferson, R., Garcia-Ortiz, L., Williams, E., & Pina, C. (2024). The Impact of Limited English Proficiency on Healthcare Access and Outcomes in the U.S.: A Scoping Review. In *Healthcare* (Vol. 12, Number 3, p. 364). <https://doi.org/10.3390/healthcare12030364>

- Wannas, A. S. (2023). ISSN 2303 – 3037 (Print) ISSN 2503 – 2291 (Online) Social Media as a Platform for Acquiring Medical English : Measuring Perceptions of Non-native Healthcare Providers ISSN 2303 – 3037 (Print) ISSN 2503 – 2291 (Online). *ELT Worldwide: Journal of English Language Teaching*, 10(1), 132–151.
- Wannas, A. S., & Hassan, I. H. (2023). Social Media as a Platform for Acquiring Medical English: Measuring Perceptions of Non-native Healthcare Providers. *ELT Worldwide: Journal of English Language Teaching*, 10(1), 132. <https://doi.org/10.26858/eltww.v10i1.45034>
- Yin, R. K. (2018). Case study research and applications: Design and methods. In *Journal of Hospitality & Tourism Research* (Vol. 53, Number 5). <https://doi.org/10.1177/109634809702100108>