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THE CLINICAL SETTING ENGLISH ROLE PLAY METHOD TO IMPROVE THE MIDWIFERY STUDENTS SPEAKING ABILITY

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Abstract

Role-play for health science students can be done by applying clinical setting role play. The study aimed to find out the effect of clinical setting role play to improve the speaking skills of midwifery students using pre and post-test design. This is a classroom action research with one group before-after study. The 3rd-semester midwifery students were taken totally as samples, Paired T-Test shows an increase in the value of the pre and post-test results with a p-value of 0.003 and <p value of 0.05 which means there is a positive influence.

Keywords: Correlation, Personality, English Proficiency

INTRODUCTION

English courses are given in almost all university majors in Indonesia, including the midwifery department. This is because the need for midwives who are able to compete in the global era, especially facing the MEA, has become more real. With the MEA, midwife graduates who have the ability to speak English are very important. Students will later compete with many graduates from various universities to get jobs or work as medical personnel in clinics or hospitals both at home and abroad. If the opportunity to work as medical midwives will be limited later, students can get the opportunity to work as medical personnel abroad. Many developed countries provide opportunities to work as medical personnel in various international hospitals. The need for medical personnel abroad is very large, but the absorption is far below the standard due not to the aspect of clinical ability but to the aspect of the lack of ability to communicate in English.

English courses are given in the midwifery department with the hope that students



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are able to communicate well in English, especially according to their role as prospective medical personnel. From the observations made, it is known that the English learning application has started the ESP (English for Specific Purposes) learning model or English based on the majors taken but speaking practice applications have not applied setting-based conversations or clinical backgrounds directly. This phenomenon makes the English courses given need to be given with thematic conversations whose setting or concept is in the world of health care for patients which is identical to the world of hospital or clinic work with the speaking learning method, namely by playing a role or role play. (Baybakova & Hasko, 2020) mentions that imitational and role-play strategies can also be quite successful in ESP discourse training. Crookal in (Ferdian & Nirwana, 2021) states that role-play can be a quite simple and brief technique to organize which is also highly flexible, leaving much more scope for the exercise of individual variation, initiative, and imagination. Those aspects in role-plays can be set in a clinical situation for medical students or other health field majors such as midwifery.

For midwifery students, role plays need to be done by applying the clinical setting of services to patients or clinical setting role play to improve their speaking or communication skills. A research finding of (Ferdian & Nirwana, 2021) found that nursing students' reflections on role-play activities are suggested and considered for their professional careers. Nursing and midwifery are typically the same fields in relation to health care providers. The findings of (Ferdian & Nirwana, 2021) was used as one of the backgrounds for the research to be conducted on midwifery students on how clinical setting role play can improve their speaking skills.

RESEARCH METHODS

This is a quantitative experimental research using one group pre-test and post-test design. Role-play activities were conducted as pre and post-tests and the scores were presented and measured quantitatively using dependent T-test analysis with SPSS application to find whether or not the significant value of Sig (2 Tailed) T-test <0.05 meaning a significant difference between the pre and post-test-values. The 3rd-semester midwifery students of STIKES Madani Yogyakarta were taken totally as the populations and samples. They are 13 students in the class. The researchers conducted some steps in

the research namely observation, selection of research population and sample, giving pre-test, applying the concept of clinical role-play setting giving post-test, assessing and analyzing results, and writing the research report.

Observation and interviews are the data collection techniques to find out the students' experiments in a midwifery clinical setting role play. The treatment or experiment was given by providing material in the setting of English conversation-based material in the setting of midwifery health care services. The conversation settings are started from the beginning when a midwife is accepting a new client's admission, conducting the client's personal data, conducting physical assessments from the primary data of vital signs and health history to ANC or antenatal care, explaining procedures, assisting labor process, dealing with the postpartum woman, explaining health reproduction system and providing an immunization service as one of the child health cares. All of the settings of the situations are based on the midwifery competencies in Myles textbook for Midwives (Bannett, V. Ruth; Brown, 2014). To find out how the improvements of the scores, the students were given pre and post-tests. Analysis of the listening test results is analyzed using the T-test.

RESULTS AND DISCUSSION

The observation stage found that the previous semesters were conducted online caused by the Covid-19 pandemic. The speaking activities were conducted virtually and had not been given role play activities. For the role play speaking test in the pretest session, the students were divided into 4 groups and they had to play roles as a midwife, a client and her spouse, and the midwife assistant. The score gained by the students in the pre-test stage are below:

Tabel 1. Pre-Test Result

Group	Score	
Group 1	67	
Group 2	65	
Group 3	70	
Group 4	70	

The students were given conversation-based materials on the teaching-learning activities. The materials were English conversation-based material in the setting of midwifery health care services. The conversation settings were started from the beginning when a midwife is accepting a new client's admission, conducting the client's personal data, conducting physical assessments from the primary data of vital signs and health history to ANC or antenatal care, explaining procedures, assisting labor process, dealing with the postpartum woman, explaining health reproduction system and providing an immunization service as one of the child health cares.

The posttests were set in the midwifery laboratory where all the utilities are set as a mini clinic for the students to practice all the midwifery skills. The students conduced the role play by using the medical instruments needed during each scene such as using the observation chart, statoscope, thermometer, scale, sphygmomanometer when measuring vital signs, using examination bed when conducting ANC or antenatal care with other supported equipment such as Doppler, and using baby phantom in assisting labor. This medical equipment helped the students to be more expressive and comprehensive.

The post-test results indicate the improvement of the score

Tabel 2. Post-Test Results

Group	score	
Group 1	78	
Group 2	75	
Group 3	80	
Group 4	90	

The improvements of the score can be seen below:

Table 3: Students' Score Improvement

Group	Pretest	Post Test	Score
	Score	Score	Improvement
Group 1	67	78	11
Group 2	65	75	10
Group 3	70	80	10
Group 4	70	90	20

The above improvement scores during pre and post-tests can prove that clinical setting

role-play conducted in midwifery clinic by using the medical equipment needed for the role play can improve the speaking skill of the students. This is in line with the findings of (Umam, 2011) in his research stating role playing can improve the speaking ability as well as (Alzboun et al., 2017) who can prove the good effects of role-playing in improving the speaking ability significantly.

Based on the interview given to the students after the post-test, they mostly stated that the clinical setting could help them to know what to communicate since they were at the same time conducting the midwifery treatment to the client. The action can support them to remember what to say in communication when implementing midwifery actions. The students were able to be more expressive and comprehensive. This can be considered as the advantage of clinical setting role-play. In conducting the activity, he students found a slight problem in remembering the dialogue since they have to do some scenes of services from the beginning when they accepted a new client until the childcare services. But this was mostly helped by the real act of midwifery services so the communication could be done more naturally.

The significant result of the data analysis can be seen below:

Table 4. The Influence of Clinical Setting Role Play to Improve the Speaking Skills of Midwifery Students

No	Variable	Pre-test	Post-test	p-value
1	The Influence of Clinical Setting Role Play to Improve the Speaking Skills of Midwifery Students	2.44±68.00	6.55±80.75	0.013

Pre and post-test indicate an increase in value of Standard Deviation. T-test results of the analysis of the pre and post-test scores using SPSS 16 show a Sig value of 0.003 which means there is a significant difference in value between the pre and post-test results. Midwifery clinical setting role play can improve the speaking skills of midwifery students in STIKes Madani Yogyakarta. The data results indicate that the author can prove midwifery clinical setting role play can improve the speaking skills of midwifery

students.

This findings can support the goal value of Indonesian ASEAN Free Association (AFTA) and North Atlantic Free Treat Association NAFTA memberships as stated in (Nurhidayat et al., 2021) that opportunities and challenges for health school students, graduates, and lecturers to demand qualified health school students for qualified health workers. The medical laboratory becomes good place for not only practicing health care skills but also for practicing in English especially for the health science in particularly Midwifery.

CONCLUSION

The results of the study and data analysis show an increase in the value of the pre and post-test processes before and after giving treatment. This shows that there is a good effect of the clinical setting role-play method on improving the ability of the 3rd-semester students of midwifery at STIKes Madani Yogyakarta. The availability of the midwifery laboratory and its supporting equipment which are commonly used for midwifery students' practices is beneficial for midwifery English lectures. The implementation of English speaking practice in the form of role-playing is suitable for the midwifery major. Students' speaking skills, especially when speaking in the context of midwifery, will greatly assist them in preparing to compete in the global era where the need for medical personnel around the world is very wide, especially after the Covid-19 pandemic, the need for medical personnel is increasing almost all over the world.

Practicing English in the midwifery laboratory or in the context of clinical settings is obviously necessary for midwifery students to practice optimally in relation to the use of English midwifery technical terms. The author suggests conducting further research related to the perspective or review of student learning experiences in using the clinical setting role play method in midwifery English learning.

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