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# Spanish for nursing: A needs analysis for a Spanish for nursing course

Lindsay Helms ·  <https://orcid.org/0000-0001-8754-4307>

University of Memphis, Tennessee

530 Patterson Street. Memphis, TN 38111

Hannah Pitner<sup>1</sup> ·  <https://orcid.org/0009-0000-6299-6243>

University of Memphis, Tennessee

530 Patterson Street. Memphis, TN 38111

Rebecca Adams ·  <https://orcid.org/0000-0002-7592-5038>

University of Memphis, Tennessee

530 Patterson Street. Memphis, TN 38111

## ABSTRACT

Research has shown that language barriers can impede access to healthcare and impact healthcare outcomes. Traditional Spanish courses have been criticized for not effectively addressing learners' specific needs, while Language for Specific Purposes (LSP) courses on healthcare frequently lack a credible methodological foundation. The current study uses a Task Based Language Teaching (TBLT) framework to conduct a needs analysis exploring the most vital Spanish language needs of nurses while also evaluating the effectiveness of previous language teaching in satisfying those needs. Surveys and interviews among 45 nurses and advanced nursing students show that the majority of participants recognized a need for healthcare-based Spanish instruction. The analysis uncovered specific linguistic features and real-world tasks designated as essential needs for nurses.

*Keywords: Spanish, Language for Specific Purposes, Language for Healthcare, needs analysis, language for nursing.*

## RESUMEN

La investigación ha demostrado que las barreras del idioma pueden impedir el acceso a la atención médica y afectar los resultados de la atención médica. Los cursos tradicionales de español han sido criticados por no abordar de manera efectiva las necesidades específicas de los estudiantes, mientras que los cursos de Lenguaje para Fines Específicos (LSP) de atención médica a menudo carecen de una base metodológica creíble. El estudio actual utiliza un marco de enseñanza de idiomas basado en tareas (TBLT) para realizar un análisis de necesidades que explora las necesidades más vitales del idioma español de las enfermeras y, al mismo tiempo, evalúa la eficacia de la enseñanza previa del idioma para satisfacer esas necesidades. Las encuestas y entrevistas entre 45 enfermeras y estudiantes avanzados de enfermería muestran que la mayoría de los participantes reconocieron la necesidad de instrucción en español basada en la atención médica. El análisis descubrió características lingüísticas específicas y tareas del mundo real designadas como necesidades esenciales para las enfermeras.

*Palabras clave: español, lengua para fines específicos, lengua para la atención sanitaria, análisis de necesidades, lengua para enfermería.*

<sup>1</sup> **Corresponding author** · Email: [hannahpitner@gmail.com](mailto:hannahpitner@gmail.com)



## 1. Introduction

With a significant increase in the number of limited English-speaking households – particularly Hispanic households (U.S. Census Bureau, 2019) – in the United States, healthcare facilities have seen an unprecedented influx of Spanish-speaking, limited English proficiency (LEP) patients. Extensive research has shown that linguistic barriers in healthcare facilities often lead to unequal access to healthcare as well as medical errors (Showstack *et al.*, 2019; Bender *et al.*, 2004; Martinez, 2010). A common method for combating these negative impacts has been through the use of interpreters and online interpreting services; however, these services are often critiqued for being both time-consuming and costly as well as fracturing the provider-patient relationship (Al Shami *et al.*, 2020). Research shows that healthcare workers who are proficient in their patients' first language and familiar with their culture can help mitigate these impacts and provide more effective care (Altstaedter, 2017; Fernandez *et al.*, 2011) in a way that complements the role of medical translators and/or interpreters (Hardin, 2015).

Although there is a clear need for Spanish-speaking nurses in U.S. healthcare facilities, most nursing programs only require foreign language as an elective or, in many cases, no foreign language study at all (Amerson & Burgins, 2005; Hardin, 2015). Nevertheless, there have been several universities and medical schools that have taken the initiative to teach future healthcare workers Spanish as well as cultural competency skills (Bernal de Pheils & Saul, 2009; Bloom *et al.*, 2006; Cameron, 1998). Hardin (2015) reviews the literature on 35 recent Spanish for Healthcare programs and finds that, due to their limited reporting of methodology, it is difficult to both evaluate and therefore replicate such courses. Furthermore, the field of LSP which encompasses Spanish for Healthcare courses has been hitherto dominated by English language contexts, indicating a need for diversification of languages in research and implementation.

The current study uses a needs analysis (NA) to determine the most pressing Spanish language needs of nursing students and practicing nurses in order to inform a potential Spanish for Nursing course. Furthermore, the study attempts to circumnavigate many of the previously mentioned limitations of similar studies through transparent reporting and a focus on a non-English context.

## 2. Literature Review

### 2.1. Needs Analysis

A needs analysis (NA), also known as a needs assessment, is the process of determining the language needs of individuals in order to inform the design of the syllabus, content, materials, teaching approaches, and assessment measures of a curriculum that best meets those needs. One of the most popular definitions of the NA is by Brown (1995): a needs analysis is “the systematic collection and analysis of all subjective and objective information necessary to define and validate defensible curriculum purposes that satisfy the language learning requirements of students within the context of particular institutions that influence the learning and teaching situation” (1995: 36). The general idea of an analysis of needs dates back to India in the 1920s with Michael West who used the term to explain the foreign language skills that learners needed in order to participate in a target situation (Juan, 2014; West, 1994). Nevertheless, it wasn't until proponents of English for Specific Purposes (ESP) began to publish studies utilizing NAs that the term became more widely recognized in the field of Second Language Acquisition (SLA) (Munby, 1981; Richterich, 1972). Needs are transient and ever-changing, meaning that the results of an NA will never be truly conclusive

(Lambert, 2010). Just as there is not one single, agreed-upon definition of ‘need,’ there is not one way to conduct an NA; therefore, it is imperative that a needs analyst be knowledgeable about both the target situation and its learners. It is also important to survey previous NAs to understand the options available for conducting an NA and to avoid past mistakes (Long, 2005). Perhaps the most important aspect of an NA to consider is that conducting an effective and valid NA takes time and attention to detail. It is also important for the results of an NA to be useful. According to Juan (2014), an effective NA must meet the needs of learners, inform the organization of materials, teaching methods, and assessments, and result in more targeted and efficient teaching.

## 2.2. Language for Specific Purposes

LSP courses center their content, materials, and syllabus on a specific set of needs for a specific population (Zrníková, 2015). Beltrán *et al.*, (2012) call for LSP classes that provide students with a specialized education that enables them to communicate in both academic and professional fields. The majority of research on LSP is conducted in the context of ESP which classifies courses into two main branches: English for Academic Purposes (EAP) and English for Occupational Purposes (EOP) (Hutchinson & Waters, 1987). Spanish for Specific Purposes (SSP) is LSP applied to Spanish language contexts, a subfield that has gained popularity in the U.S. as more attention has been given to Spanish as a second language in recent years (Brown *et al.*, 2018). Despite the fact that there is a huge demand for SSP courses, there are very few studies investigating their effectiveness (Serafini & Torres, 2015). Studies on Spanish for Healthcare, a type of SSP course, have been criticized for a lack of reporting, leaving course designers with little empirical guidance in creating future courses (Hardin, 2015). Another hurdle for Spanish for Healthcare is the variability in learners’ needs. Most students who take Spanish for Healthcare courses are not majoring in healthcare-related studies. In fact, the largest population of students taking these specific courses are actually language majors who know little to nothing about the medical field (Hardin, 2015); therefore, the Spanish for Healthcare course is split in that it must teach healthcare to the language majors and language to the healthcare majors, often forcing programs to only consider students with intermediate to advanced Spanish proficiency and exclude medical students who are less proficient in the second language (Bernal de Pheils & Saul, 2009).

## 2.3. Research on Language for Healthcare

Studies that have investigated the efficacy of language courses specifically designed for healthcare providers have concluded that the linguistic needs of these learners are, as a whole, not being met (Crawford & Candlin, 2013). For example, Lear (2006) conducted a longitudinal, qualitative study examining five monolingual, English-speaking healthcare providers taking Language for Healthcare courses and discovered that their courses were inadequate, especially in regard to materials and resources. Other studies on Language for Healthcare have attempted to improve these courses by identifying the specific linguistic competencies necessary for healthcare providers. Many of these studies have observed that oral skills seem to be the most crucial in communicating effectively with patients (Lepetit & Cichocki, 2002; Khan *et al.*, 2019; Arumugam & Kaur, 2011). Medical vocabulary is another linguistic need for healthcare providers that has been determined by previous NAs (Canziani, 2021; Lai, 2019). For example, Dahm (2011) found that international medical graduates needed technical medical terminology in order to perform their duties. Not only do studies on Language for Healthcare strive to identify key competencies, but they also inform how

these competencies should be taught in the classroom. Boshier and Smalkoski (2002) and Pilnick (2018), for example, demonstrated the benefits of role play such as high student engagement (Boshier & Smalkoski, 2002), active reflection, and real-life connection (Pilnick, 2018). Finally, Language for Healthcare studies have documented the need for intercultural skills when educating healthcare providers (Lepetit & Cichocki, 2002; Wright *et al.*, 1997). Research has shown that building rapport with the patient is an integral aspect of healthcare and the provider-patient relationship (Lopez, 2017; Crawford *et al.*, 2017) that can impact a patient's health outcomes; therefore, it is worth seriously considering when creating courses specifically for this learner population.

The purpose of the current study is to conduct an NA to determine the most pressing linguistic needs of nurses and nursing students in order to inform a potential Spanish for Nursing course. This study adds to existing LSP literature that has been dominated by primarily English contexts (Hutchinson & Waters, 1987). It also demonstrates transparent reporting of NA methodology, the lack of which has been critiqued in prior studies on Spanish for Healthcare (Hardin, 2015; Serafini & Torres, 2015), for ease of future comparison and replication. Finally, the study indirectly addresses the unequal access to healthcare and the negative health impacts of the language barrier on LEP patients by informing a course that could empower healthcare providers to mitigate the issue (Showstack *et al.*, 2019; Bender *et al.*, 2004; Martinez, 2010).

### 3. Methods

This mixed methods study aimed to explore the Spanish language needs of practicing nurses and nursing students using a needs analysis as guided by the following research questions:

1. What are the Spanish language needs of nurses?
2. In what specific contexts and scenarios do nurses need Spanish?
3. What key vocabulary, topics, and grammatical concepts should be included in a potential Spanish for Nursing course?

#### 3.1. Participants

There were a total of 45 participants in the study. Participants were either registered nurses (RNs), nursing students or nurse practitioners (NPs) across the U.S. (primarily in the Southeastern region). Nursing students were recruited through an acquaintance of the researchers who shared the survey link with fellow nursing students. RNs and NPs were recruited in a similar way through another acquaintance of the researchers who shared the survey link with co-workers.

To be included in the study, all participants were required to have nursing experience in a U.S. hospital prior to or at the time of the study. Table 1 illustrates participant demographics from the survey data.

<b>L1 Background</b>	English	41
	English/Spanish bilingual	3
	English/Arabic bilingual	1
<b>Region</b>	South	44
	Midwest	1

<b>Prior Spanish Course*</b>	Yes	33
	No	11

\* One participant did not respond to this question.

Table 1. Participant demographics.

All participants were monolinguals except for four bilinguals who spoke a language other than English in the home. Information on the participants' demographics was collected through the survey and is included above in Table 1. We chose to include data from Spanish/English bilingual participants since the research questions specifically focus on specific contexts and scenarios which are experienced by all nurses regardless of linguistic knowledge. These participants were able to provide insights into when they found using Spanish helpful in the hospital setting.

All participants completed an online survey (Appendix A). The final question of the survey asked whether they were interested in participating in a follow-up questionnaire and interview. Table 2 below illustrates the demographics of questionnaire and interview participants.

Participant	Job Title	Job Location	L1 Background	Prior Spanish Course
Participant 1	Nurse Practitioner	Community Clinic	English	No
Participant 2	Nurse (Med Surg and Cardiac)	Children's Hospital	English	Yes
Participant 3	Nursing tech and student at Children's hospital	Hospital	English	Yes
Participant 4	ER nurse	Hospital	English	Yes
Participant 5	Nurse at a stem cell clinic	Hospital	English	Yes
Participant 6	ER nurse	Hospital	English/Arabic	Yes
Participant 7	ER nurse	Hospital	English	Yes
Participant 8	ER nurse PRN; Nurse Practitioner at a community clinic	Community Clinic	English	No

Table 2. Interviewee participant demographics.

Eight participants elected to participate in a semi-structured interview which was preceded by an online questionnaire (Appendix B). Of these eight, six were RNs, two were NPs, and one was a nursing student who worked as a nursing tech. Ninety-one percent of questionnaire and interview participants spoke English as their primary language; however, there were two nurses who spoke Spanish or Arabic at home. Ninety-seven percent of participants lived in the Southern US, and two percent lived in the Midwest. Seventy-five percent of participants had taken a Spanish course previously while 25 percent had not.

The majority of the participants worked in a hospital setting with the exception of two participants who worked in community clinics. All of the eight interviewees had taken some university-level Spanish courses. One participant had also taken a Language for Healthcare course while studying abroad. Information about the interview participants is included below in Table 2. We chose not to differentiate between types of nurses in order to provide a broad overview of the needs of all types of nurses for a potential Spanish for Nursing course that would serve a diverse group of learners.

### 3.2. Procedures

First, participants were sent a survey link through which they were asked to complete a consent form embedded in the survey. The survey results were anonymous and consisted of six questions with differing formats (free response, multiple choice, and checklist). The purpose of the survey questions was two-fold. Several questions focused on demographics of the participants such as home language, place of residence, and previous experience in a Spanish course. The other questions were directed more pointedly at the research questions such as interest in taking a Spanish for Nursing course, Spanish learning goals, and value placed on language skills.

All participants who completed the survey were then invited to complete an online, open-ended questionnaire followed by a virtual, 30-minute, semi-structured interview conducted via Zoom. Participants provided an email address to which the researchers sent an invitation to participate in the questionnaire. The participants that completed and returned a questionnaire were sent an invitation to the follow-up interview via email.

Eight participants chose to participate in the questionnaire and interview phase. Based on recommendations by Richards (2009), these participants were sent the online questionnaire which consisted of six open-ended questions (Appendix B). The questionnaire was sent in advance to allow participants to gather their thoughts prior to the interview and to spark discussion during the interview. Once participants completed the interview, they emailed it back to the researchers. The researchers then sent a Zoom link for the follow-up interview. During the interview, interviewees were asked to turn off their cameras and change their names to a pseudonym of their choice in order to protect their identities.

In the interview sessions, participants were encouraged to discuss in more detail their responses to the four questions (Appendix B) from the questionnaire. These questions asked participants about their experience with language courses, their specific needs for Spanish language skills in their current workplace, and what they would hope to see in a future Spanish for Nursing course.

### 3.3. Analysis

Findings from the survey were analyzed and converted into percentages. The semi-structured interviews were recorded, transcribed, and coded using partial broad transcriptions based on a study by Soyan (2022). Data was coded thematically using open coding methodology (Mackey & Gass, 2005) and salient themes were recorded. Qualitative data analysis software was not used since there were only eight interview participants. Researchers read through transcriptions together and collaboratively coded them for general themes in a peer debriefing session. Researchers then refined the list to prominent themes and determined frequencies.

## 4. Results

This section will detail the quantitative results of the survey and the qualitative results of the questionnaire and interview questions.

#### 4.1. Survey

All 45 participants completed the survey (Appendix A). The first section on the survey included the embedded consent form and demographic information. The next section of questions focused on participants' experiences and goals in regard to studying Spanish. Sixty-four percent of participants indicated that they were definitely interested in taking a Spanish course specifically for nursing, with an additional 33 percent indicating that they might be interested in such a course. In total 97% of the sample indicated some level of interest.

This section of the survey also included an item asking participants about their goals for learning Spanish. Participants could select multiple responses on this item. A visual representation of participants' Spanish learning goals is represented below in Figure 1.

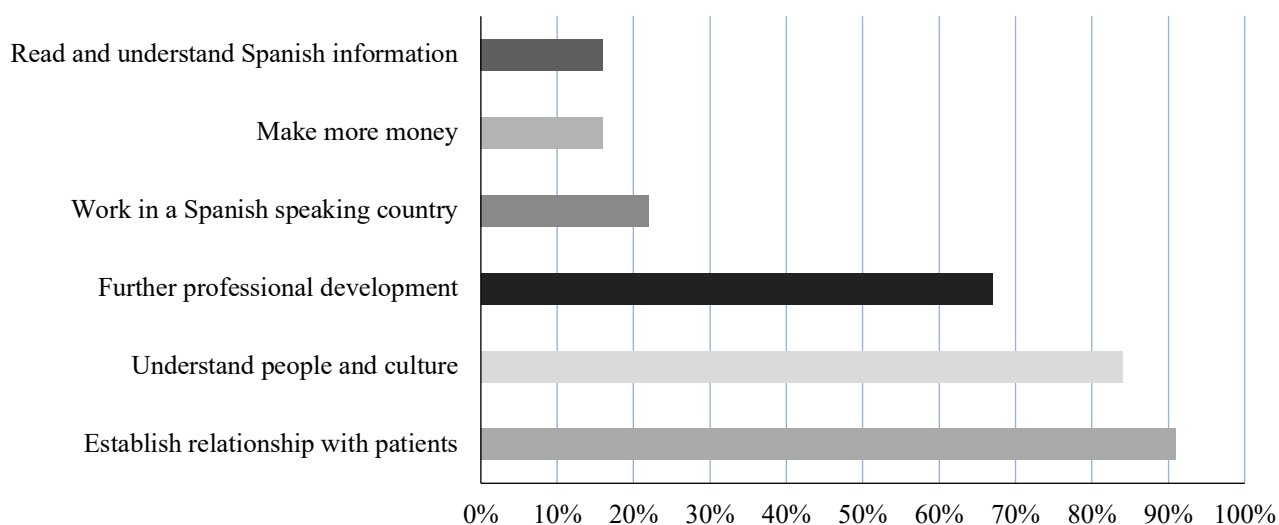


Figure 1. Spanish learning goals.

The most commonly selected goal was 'establish relationships with patients' with 91% of participants selecting this option. The second most commonly selected goal was 'understand people and culture' with 84% of participants choosing this goal. 'Further professional development' was also selected relatively often with 67% of participants choosing this option as a Spanish goal. The remaining options, 'work in a Spanish speaking country' (22%), 'read and understand Spanish information' (16%) and 'make more money,' (16%) were selected by fewer participants. The majority of the participants were not interested in learning Spanish for the sake of learning, but rather because of the ways it would allow them to connect with patients and better perform their jobs. Participants were also asked to indicate which aspects of language were most important to them, selecting up to two responses. The results for this item are displayed in Figure 2.

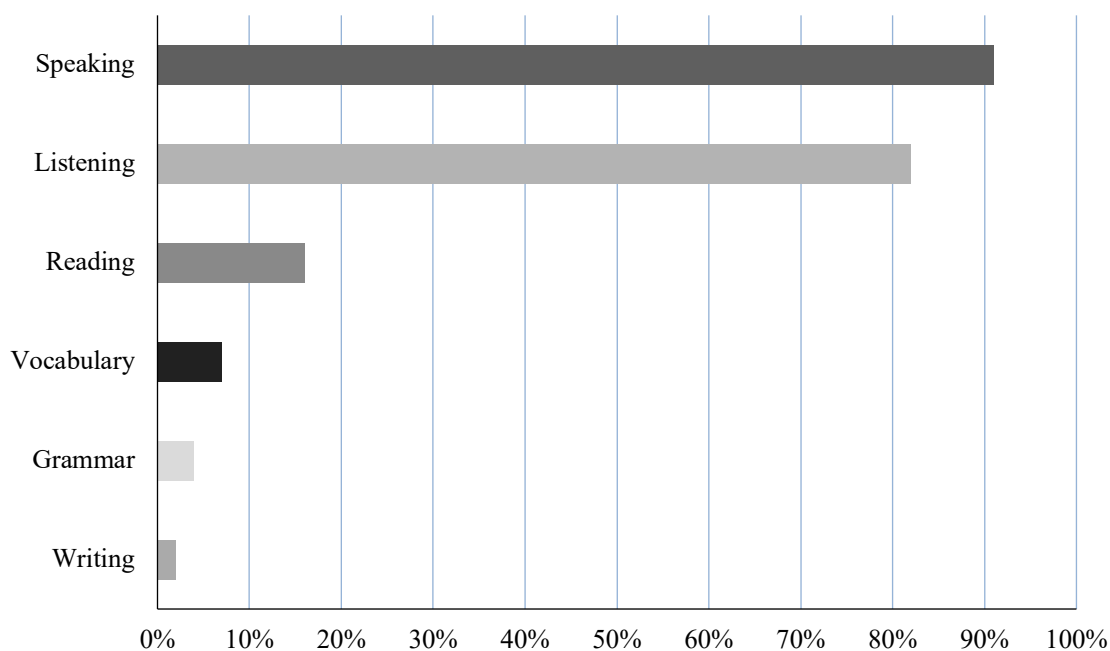


Figure 2. Spanish skills.

The majority chose ‘Speaking’ (91%) followed by ‘Listening’ (82%). There was a clear divide between oral communication skills and other skill areas and aspects of language, with the nurses in this sample overwhelmingly indicating that oral communication skills should be the focus of a Spanish for Nursing course.

#### 4.2. Questionnaires and Semi-Structured Interviews

Qualitative data was collected through questionnaires and semi-structured interviews, then coded thematically using open coding methodology. As explained above, the questionnaires and interviews used the same questions. The purpose of the questionnaire was to allow the participants to reflect on their experiences before participating in the interviews. Eight of the 45 total participants opted to participate in this part of the study. The analysis of this data uncovered multiple salient themes that build on information gleaned from the survey data.

For the eight participants that chose to participate in the questionnaire and interview phase, themes, nodes, and frequencies were collected as displayed below in Table 3.

Themes	Nodes	Frequency
The need for a Spanish for Nursing course	Unhelpful previous Spanish courses	5
	Helpful previous Spanish courses	2
Focus of a potential Spanish for Nursing course	Questions	12
	Commands	4



Themes	Nodes	Frequency
Building Rapport with LEP patients	Healthcare vocabulary	5
	Role Play	4
	Guilt	4
	Frustration	5
	Lack of connection	3

Table 3. Interview questions and theme frequencies.

Based on data gathered from both the questionnaire and interviews, three main themes were identified: ‘the need for a Spanish for Nursing course,’ ‘focus of a potential Spanish for Nursing course,’ and ‘building rapport with LEP patients.’ Frequencies were calculated for each theme according to the partial interview transcripts. There were five coded instances in which participants mentioned that past language courses were unhelpful. Two participants mentioned that past courses were helpful in some way, one referencing a Spanish for Healthcare course. In terms of a focus for a potential Spanish for Nursing course, perceived linguistic foci were questions (12), commands (4), and healthcare vocabulary (5). There were also four coded instances in which participants mentioned a preference for role play. The final key theme was ‘building rapport with LEP patients.’ Participants expressed that a lack of Spanish competency led to feelings of guilt (4), frustration (5), and lack of connection (3). The following section will discuss the implications of these themes.

## 5. Discussion

Findings from the data indicated that nurses were interested in and perceived a need for Spanish for Nursing courses by indicating that prior, general Spanish instruction was not applicable to their current workplace language needs. Participants indicated that their preferences for a potential Spanish for Nursing course were oral language, medical vocabulary, and role playing. Finally, results showed that participants placed an importance on building rapport with LEP patients. This section develops these themes with specific examples from the qualitative data in order to provide general recommendations and key topics for a potential Spanish for Nursing course.

### 5.1. Oral Language

Based on survey data and supported by questionnaire and interview data, participants preferred a Spanish for Nursing course that focuses on oral language. The participants in this study uniformly agreed that a Spanish for Nursing course should focus primarily on oral communication skills in opposition to grammar or written language. This finding was supported by survey data in which 41 participants selected ‘speaking’ as an important skill. Particularly, participants indicated a need to communicate orally with a LEP patient in emergencies and when interpreters or interpreting services were not available. For example, Participant #6, RN, shared an anecdote about an interpreting service failing during an urgent health crisis for one of her patients.

I had a fast-track patient and I didn't know what she was there for. She's trying to say something, but the phone is not connecting. She's trying to tell me that she's bleeding, but I can't understand.

Other times, nurses are forced to try to communicate with patients who are resistant to accepting interpreting services for various reasons. For example, Participant #5, an RN, explained a situation in which she desperately needed to communicate with a patient who had refused services.

The patient didn't know any English and he seemed super scared. He didn't want to use the blue phone and he was suffering. He was septic and didn't trust the nurses at all.

Both of these situations demonstrate how although it is not the role of the nurse to interpret for LEP patients, participants in this study felt the burden of interpreting because of either the lack of or the failure of the hospital interpretation services. Besides the fact that there is a larger need for reform in the area of medical interpreting, the interview data proved that oral communication is the most critical language need of nurses, and therefore, a vital aspect of any potential Spanish for Nursing course.

Specifically, participants explained that they needed to be able to communicate with patients by asking questions and giving commands in Spanish. 'Questions' was coded a total of 12 times during the interviews, indicating that this skill is vital for a nurse to perform.

Throughout the interviews, participants explained how they needed to ask their patient questions about their condition or health history. Participants explained that the inability to ask questions often led to confusion and even danger for the patient. For example, Participant #7, an RN, shared an experience where a patient had an allergic reaction because the patient was not asked about their medical history and allergies.

I had a patient who I gave morphine to. The patient was trying to tell me that she couldn't breathe, but I thought that she was saying she was hot which is a common side effect of morphine. The patient was having an allergic reaction. I felt really guilty about the incident and wished I could have understood what the patient was saying.

All eight participants also expressed the need to ask triage questions. As RN Participant 1 explained, "knowing basic triage questions would help determine the level of acuity quicker." Triage questions are used to get basic information about the patients' health to decide which patients need to be prioritized first. Participant #2, an RN, elaborated on the purpose of triage questions:

[Spanish is needed] while providing direct care, especially with a Spanish-speaking patient, Spanish skills would be very important while taking vital signs, explaining medications, doing physical assessments, and asking specific questions to the patients.

Another aspect of oral language mentioned by participants was the need to give simple commands. 'Commands' were coded four times during the interviews. For example, RN Participant 2 stated, "we need to be able to use simple short commands to tell patients [and] to help their safety."

Both asking questions and giving simple commands were examples of oral communication that participants prioritized as their most critical language need; therefore, a Spanish for Nursing should incorporate these competencies in its curriculum. Interview data from Khan *et al.* (2019) supported the need for medical professionals to be able to interact orally in the language of their patients. Success in their jobs was connected to oral communicative competence. Other studies have stated that oral skills are the most relevant skills to current and future healthcare providers and improvements in these can better patient outcomes (Lepetit & Cichocki, 2002).

## 5.2. Medical Vocabulary

The need for oral language usage, particularly medical terminology (Dahm, 2011) was a key finding in previous studies (Khan *et al.*, 2019; Lepetit & Cichocki, 2002). The participants of this study indicated that a potential Spanish for Nursing course should prioritize oral communication, but also the use of medical vocabulary. ‘Healthcare vocabulary’ was coded five times during the interviews. Specifically, participants mentioned vocabulary related to body parts, symptoms, and describing pain. Two participants, Participant # 2 and Participant #7, both RNs, gave a plethora of examples of useful vocabulary, respectively.

I would want them to learn specific medical vocabulary of medical supplies and body parts, simple short commands to tell patients to help their safety, and admission questions that are important such as have you ever had thoughts of harming yourself.

Health history vocabulary, basic introductions, body parts, bodily functions (i.e. urinating, vomiting), instructions (please step on the scale), empathetic terms for listening and responding to challenging news or pain.

A total of four out of seven participants, including the two examples above, mentioned body part vocabulary. The list of medical vocabulary that could be derived from the general categories provided by participants would be extensive and, therefore, impractical to tackle in a single course. A future study would need to determine which categories of vocabulary and phrases would be most needed. Nevertheless, since body part vocabulary was mentioned by a majority of the participants it would likely be beneficial to add in a potential Spanish for Nursing course. The need for medical language for healthcare courses is supported by previous NA’s (Canziani, 2021; Lai, 2019; Arumugam & Kaur, 2011). Dahm (2011) found the need for both lay and technical medical terminology. Canziani (2021) found that participants wanted to learn specialized vocabulary that was used in their regular tasks including analyzing physical symptoms, triage, and other standard testing.

## 5.3. Role Playing

Participants also indicated that they would prefer role play or interaction-based learning in a Spanish for Nursing course. ‘Role Play’ was coded four times during the interviews. Participant #8, a PRN, suggested using role plays or simulations in a Spanish for Nursing course.

Simulations are really common in nursing classes, so I would want the same from language classes-- literally acting out the process. We don't need to know how to write things, but rather how to navigate situations. We are very used to role playing in nursing school, so that would not feel out of place in a Spanish class.

The fact that role-play and simulation is already used in general nursing courses should be noted. Since nursing students are already familiar with this style of learning, it would translate well to the language classroom. Role-play can also facilitate nurses’ critical need for oral language in that it is primarily based on dialogue. Previous studies support these findings and have show that role playing is a way to actively engage students and develop key health-care communication skills (Bosher & Smalkoski, 2002). Pilnick (2018) found that role play activities were particularly beneficial for building communication skills for healthcare professionals as they build on medical training to help practitioners act on demand, receive feedback, and watch and reflect on how others mediate the same scenario.

## 5.4. Building Rapport

Building rapport was mentioned by all eight participants and the participant's feelings associated with that connection (guilt, frustration, lack of connection) were coded a total of twelve times. Establishing trust which is influenced by both cultural norms and power dynamics, is a key aspect of the provider-patient relationship (Lopez, 2009) that cannot be ignored when considering the language needs of healthcare providers, especially since a lack of trust can lead to poor health outcomes (Crawford *et al.*, 2017). Participants were aware that language barriers were hindering their ability to build trust with their patients such as Participant #3, a nursing tech, who mentioned "lack of full rapport being built with patients" as one of the most concerning negative impacts of the language barrier.

While participants indicated that having sufficient medical knowledge and training to meet the physical needs of their patients was most important, most of the participants also commented on how crucial a connection with the patient was to perform their job as a nurse. Participant #8, a RN, stated, "half of healthcare is trust and connecting with your patient." Because the participants placed so much emphasis on building rapport, it should be an integral part of a Spanish for Nursing course.

Research has shown that even a mere familiarity with the patient's culture can alleviate unequal access to healthcare and provide more effective care to Spanish-speaking LEP patients (Altstaedter, 2017; Fernandez *et al.*, 2011). The connection between rapport with patients and quality of medical care was explained by Participant #2, an RN:

Having the skills to speak with a Spanish-speaking client would be best, as it helps the client to be more comfortable and open up more, and therefore the best nursing care can be provided.

Research has shown that another effective way to build rapport is through discursive strategies such as conversational language, humor, comforting phrases, etc. (Crawford *et al.*, 2017). Although these strategies were not explicitly mentioned in the present study, attention to such tools for building rapport should be considered further when designing a potential Spanish for Nursing course.

Findings of this study showed that a Spanish for Nursing course should focus on oral communication, role play, medical vocabulary, and building rapport with the LEP patient. Participants claimed that speaking and listening were more important skills than reading and writing which are commonly focused on in general language courses. Specifically, participants mentioned asking questions about medical history, triaging patients, and giving simple commands were important aspects of their job. Participants indicated a desire to include medical vocabulary in a Spanish for Nursing course such as body parts and words and/or phrases to describe pain and assess a patient's condition. Participants preferred an interactive class structure that mimicked the role plays and simulations as are common in nursing education. Finally, participants expressed the importance of building rapport with their patients which is hindered in the case of LEP patients by linguistic barriers. One should consider these important aspects of nursing when designing a Spanish for Nursing course.

## 6. Conclusion

This research study determined the Spanish language needs of practicing nurses and nursing students using an NA. It provides significant contributions to the field of LSP research by offering a transparent reporting of NA methodology within a Spanish language context and offering general recommendations for a future

Spanish for Nursing course. This research also addresses the negative health impacts due to linguistic barriers and unequal access to healthcare (Showstack *et al.*, 2019; Bender *et al.*, 2004; Martinez, 2010).

The overall findings of this study inform the structure and content of a potential Spanish for nursing course by shedding light on nurses' goals for learning Spanish, linguistic needs, and course preferences. Based on survey data, the majority of participants indicated that they wanted to learn Spanish in order to establish relationships with patients. Speaking and listening were considered the most important skills by the participants as supported by previous research by Lepetit & Cichocki (2002).

Furthermore, qualitative data revealed a need for a Spanish course specifically for nursing. The focus of a potential Spanish for Nursing course should include questions, commands, healthcare vocabulary, and role play. Findings showed that the most common context in which nurses need Spanish is in emergency situations when translators aren't available, or technology isn't working. The present study revealed that nurses' lack of Spanish contributed to feelings of guilt and frustration. It also made it difficult to build connections with patients, a central aspect of the job of nurses as revealed by interview data.

From these findings, linguistic decisions can be made concerning a potential Spanish for Nursing course such as a focus on oral language, specifically questions and commands. Focus should also be placed on medical vocabulary—in particular, body parts, along with words and phrases related to symptoms and pain. The structure of the course should be interactive and include role plays and simulations as participants explained that such a learning style is congruent with real-life medical situations and their nursing education courses. Building rapport with patients was mentioned by all interview participants; therefore, intercultural skills should be an integral aspect of a course as well.

This study offers a foundation of research for future courses as well as further research. An NA is not effective unless the results can catalyze change in the classroom (Juan, 2014). The ultimate purpose of this research is to inform a future Spanish for Nursing course. Future research could consider the implementation of these curricular recommendations. While the findings are especially relevant to the US healthcare system, it is likely that similar needs would be found in other contexts to help nurses meet the needs of language minority patients. Future research could include more healthcare settings and different minority languages, as well as the preparation of immigrant nurses for work in second language settings. Future studies could also consider the perspectives of a wider range of stakeholders in healthcare, including healthcare experts such as medical school faculty as well as Spanish-speaking patients and hospital administrators.

These findings offer valuable considerations regarding the linguistic needs of nurses and provide direction in creating language learning opportunities for this population. Finally, the present study demonstrates how an NA can be used to make curricular decisions about a LSP course.

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## About the authors

Lindsay Helms is an Applied Linguist whose research focuses on Second Language Acquisition, specifically teaching foreign languages (Spanish). Her research interests include: TBLT (task-based language teaching), specifically needs analysis, and the intersection between TBLT and Languages for Specific Purposes (LSP).

Hannah Pitner is an Applied Linguist with interests in task-based language teaching (TBLT), language for specific purposes (LSP), genre-based language teaching, and innovative classroom design in interaction research. Her work examines the application and analysis of communicative language methodologies.

Rebecca Adams is an Associate Professor of Applied Linguistics at the University of Memphis. She has published widely on topics related to cognitive, sociocultural, and individual factors in task-based learning and teaching. Her publications include *Peer Interaction in Second Language Learning* (2014) and *Teaching through Peer Interaction* (2019), both published by Routledge.

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## Appendix

### Survey

Q1. The information you provide when participating in this questionnaire is important to assist us in our research on the effectiveness of language instruction for healthcare workers. Please note your participation is voluntary, however, we do strongly encourage you to participate as we feel the information is vital to helping us. It should only take you only 10-15 minutes to complete.

- Please read the instruction carefully
- The information you provide will be anonymous
- You may tick, circle, or cross the letter that corresponds to your answer

Q2. Are you interested in taking a Spanish course specifically for nursing? (multiple choice)

- Yes
- No
- Maybe

Q3. What are your Spanish learning goals? (Check 3)

- To pursue nursing in another Spanish-speaking country
- To further professional development
- To establish relationships with Spanish speaking patients
- To make more money
- To understand Spanish-speaking patients and their culture
- To be able to read and understand Spanish

Q4. What language do you speak at home? (Free response)

Q5. Where do you live in the U.S.? (multiple choice)

- South
- Midwest
- East Coast
- West Coast
- North

Q6. What Spanish skill do you consider most important? (Check 2)

- Reading
- Speaking
- Grammar
- Listening

- Vocabulary

Q7. Have you previously attended a Spanish course? (multiple-choice)

- Yes
- No

## Appendix B

### Questionnaire/Interview Questions

The following questions were open-response in the questionnaire. The same questions were used to guide semi-structured interviews.

- What was your experience in previous language classes? How has that knowledge translated into your field?
- What sorts of situations do you see the need to use Spanish on a daily basis?
- What sort of grammar needs do you have?
- What are your goals in learning Spanish?
- Describe one situation where knowing Spanish would have been helpful in your workplace?
- How important is learning the culture of the language? What role do you think that culture plays?

## Appendix C

### Specific Phrases

How long has it been going on?

Are you in pain?

Can you feel me touch you?

Can you breathe?

Can I help you do \_\_\_\_\_?

Where does it hurt?

What makes it better or worse?

What have you tried?

Have you had this problem before?

Is this a new problem?

Take your clothes off.

Leave a urine sample.

Lift your hands up.

Do you feel safe at home?

edit translation

should this be present tense?

This isn't pasting formatted into google so i'll format it in the final paper

[RA(4)]I don't think the table really makes sense. The themes are really disparate, and since it's qualitative data, it doesn't make sense to focus so much on frequencies. There are other ways that data can be salient. I recommend we remove this.

[RA(5)]Thinking of this question by question rather than holistically is making things redundant. The theme of asking questions shows up in response to two of these items, but you've looked at it separately. Rather than looking at how they responded to individual questions, look at overarching themes, much like we did in Lindsay's dissertation

[RA(6)]Major themes: 1. A Spanish for healthcare course is needed (combine themes from first and last question here, also stuff on translators not being available)

2. The course should focus on:

A. Oral language use

B. commands and questions (language functions)

C. Healthcare vocabulary

D. Should involve role play

[RA(7)]Also building rapport

[RA(8)]Then in the conclusion, discuss what that would look like

[RA(9)]See my comment above on the table. Rather than organizing around RQs, let's organize around the main themes. The subheadings can be

Necessity of Spanish for healthcare

Spanish language needs

1. Oral Language

2. Commands/Questions

### 3. Medical vocabulary

### 4. Building Rapport

Combine data across survey questions as needed to build on these themes

[RA(10)]See, this is why I don't like discussing this by interview questions—the lack of translators should be in the prior section with explains why the nurses themselves need some Spanish competence. The need to ask questions addresses a specific linguistic need.