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DEVELOPING A DIGITAL VIDEO SERIES TO ENHANCE MEDICAL ENGLISH SPEAKING PROFICIENCY

Eva Sulistiana, Arda Adianto, Wardatun Nadzifah
Fakultas Ilmu Kesehatan, Universitas Hafshawaty Zainul Hasan
Probolinggo, Indonesia
E-mail: evamawardi@gmail.com

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Abstract

This study investigates the design, development, and implementation of a Digital Video Series (DVS) aimed at enhancing Medical English speaking proficiency among health-science students. Using a Research and Development (R&D) approach adapted from the Borg and Gall model, the study followed seven systematic stages including needs analysis, planning, product development, expert validation, field testing, and final revision. A one-group pre-test–post-test design was employed with 109 Nursing, Midwifery, and Pharmacy students to measure speaking improvement after the implementation of the DVS, which features authentic clinical communication scenarios. The results demonstrated a substantial increase in speaking performance, with mean scores rising by 13.49 points and a statistically significant difference confirmed through a paired-sample t-test ($p < .001$). Students also reported highly positive perceptions of the videos' clarity, relevance, and usefulness for supporting communicative practice. Overall, the study provides empirical evidence that systematically developed video-based materials can effectively strengthen communicative competence in English for Medical Purposes (EMP). The DVS offers a feasible and contextually grounded model for integrating multimedia learning resources into EMP curricula, particularly in settings with limited access to authentic clinical exposure.

Keywords: *Medical English; speaking proficiency; digital video series; multimedia learning; R&D design.*

1. Introduction

The ability to communicate effectively in English has become increasingly important in global healthcare, where professionals must collaborate across countries, access international medical information, and interact with diverse patient populations. For health-science students, strong Medical English speaking skills are essential because they help prepare them for clinical discussions, patient care tasks, and professional communication in the workplace. However, many students still struggle with speaking fluently and confidently in medical situations, particularly when they have limited exposure to authentic communication models (Outemzabet & Sarnou, 2023; Pan, 2025).

In the Indonesian context, previous studies have shown that medical, nursing, and allied health students recognize English—especially speaking—as a crucial competence for

their future careers (Hidayati & Royani Meisani, 2023; Solihin, 2024). Yet, despite this awareness, many students experience hesitation, anxiety, and difficulty producing natural spoken language in clinical scenarios. Several factors contribute to this problem, including limited opportunities to practice spontaneous communication, insufficient exposure to real clinical interactions, and instructional approaches that tend to emphasize grammar rather than communicative use (Durrani, 2024; Hamad et al., 2025). Other studies also note that the lack of contextualized materials and teacher preparation in EMP classrooms can further restrict students' speaking development (Nguyen, 2025; Zoraya & Azhar, 2024). These challenges suggest a need for more engaging, realistic, and pedagogically grounded resources that support students' communicative competence.

Digital video materials have been widely recognized as effective learning media because they combine visual and auditory elements that help learners understand language in context. Prior studies found that video-based materials improve students' fluency, motivation, and comprehension of authentic language use (Habibi et al., 2024; Julita & Isna, 2025; Kurniawati, 2022). videos are particularly useful as they can simulate doctor–patient interactions, clinical procedures, and teamwork communication. These simulations provide learners with realistic models of how language is used in clinical environments, aligning with Mayer's Multimedia Learning Theory, which emphasizes that learning is more effective when information is processed through both visual and verbal channels (Asrilawaly et al., 2025; Li et al., 2025).

However, although previous studies highlight the potential of multimedia learning, few have specifically developed digital video materials tailored to Medical English speaking needs. Most existing EMP studies focus on reading, vocabulary, or listening, and only a limited number integrate structured video-based instruction to improve speaking skills. Furthermore, few video-based interventions in health-science programs are developed through systematic Research and Development (R&D) procedures that include expert validation and field testing (Codron et al., 2025; Dira & Kuswandono, 2024). However, although previous studies highlight the potential of multimedia learning, few have specifically developed digital video materials tailored to Medical English speaking needs. Most existing EMP studies focus on reading, vocabulary, or listening, and only a limited number integrate structured video-based instruction to improve speaking skills. Furthermore, few video-based interventions in health-science programs are developed through systematic Research and Development (R&D) procedures that include expert validation and field testing.

To address this gap, the present study aims to design, develop, and evaluate a Digital Video Series (DVS) intended to support health-science students' speaking skills in clinical communication. The objectives of this study are to:

1. Develop a set of digital videos that model common medical communication scenarios;
2. Conduct expert validation to ensure the quality and relevance of the DVS; and
3. Evaluate the effectiveness and student responses to the DVS in improving speaking performance.

The significance of this research lies in its potential to offer an accessible and effective learning resource for institutions that lack opportunities for authentic clinical exposure. By integrating multimedia-based models into EMP instruction, the DVS can

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support communicative confidence, enhance speaking proficiency, and strengthen the quality of English learning in health-science education.

2. Literature Review

2.1 English for Medical Purposes (EMP)

English for Medical Purposes (EMP) is a branch of English for Specific Purposes (ESP) that focuses on the linguistic and communicative demands of healthcare settings. Foundational scholars such as Hutchinson & Waters (1987); Dudley-Evans & St John (1998) , and Basturkmen (2010) emphasize that ESP instruction must be needs-based and grounded in the specific discourse practices of a professional field. In EMP, this includes patient interviews, giving explanations, reporting symptoms, and interprofessional communication (Candlin & Candlin, 2003).

Speaking proficiency in EMP is generally defined as the ability to communicate clearly and appropriately during clinical interactions. Scholars describe it as a combination of linguistic accuracy, fluency, pragmatic competence, and the ability to respond spontaneously in real-time (Basturkmen, 2010). Unlike general EFL speaking, EMP speaking requires the ability to interpret symptoms, ask follow-up questions, and negotiate meaning with patients and colleagues. This makes speaking proficiency a core skill for health-science students preparing for clinical placements or professional practice.

Recent studies show that ESP courses can enhance learners' speaking performance when the content aligns with their professional needs (Outemzabet & Sarnou, 2023; Pan, 2025). Indonesian studies similarly highlight that nursing, midwifery, and medical students require contextualized EMP materials to support their clinical preparation and professional readiness (Hidayati & Royani Meisani, 2023; Solihin, 2024). Thus, EMP is a critical foundation for students in health sciences to perform effectively in internationalized medical environments.

2.2 Instructional Challenges in Developing EMP Speaking Skills

Although the need for Medical English speaking skills is well recognized, several instructional challenges continue to limit students' development. Many EMP classrooms rely heavily on grammar-based instruction or textbook dialogues, offering few opportunities for spontaneous interaction (Nguyen, 2025; Zoraya & Azhar, 2024). Studies in Indonesia and other EFL contexts note that students often experience speaking anxiety, lack exposure to authentic medical discourse, and have limited chances to observe real clinical communication (Durrani, 2024; Hamad et al., 2025).

A number of studies also highlight methodological issues in EMP instruction. Materials are often not tailored to clinical contexts, teachers may not have medical backgrounds, and assessment tends to rely on self-report surveys rather than performance-based tasks (Codron et al., 2025; Solihin, 2024). These weaknesses make it difficult to determine whether students truly improve in spoken performance. Taken together, these challenges underscore the need for instruction that is contextualized, interactive, and grounded in real clinical communication practices. This naturally leads to the use of digital videos as potential instructional support.

Digital Video-Based Learning in ESP and EMP Contexts

Digital videos have gained prominence in language learning because they present multimodal input that helps learners interpret meaning through both visual and auditory cues. Studies on ESP and general EFL contexts report that videos enhance learners' motivation, comprehension of authentic language, and speaking performance by providing clear models of interaction (Habibi et al., 2024; Julita & Isna, 2025; Kurniawati, 2022).

In EMP specifically, videos can simulate common clinical encounters such as history taking, explaining procedures, or giving instructions. These simulations allow students to observe pragmatic features—tone, politeness strategies, turn-taking patterns, and nonverbal communication—that textbooks cannot easily convey (Asrilawaly et al., 2025; Li et al., 2025).

However, while many studies demonstrate benefits for vocabulary and listening comprehension, fewer investigate how video materials influence speaking performance, particularly in medical contexts. Most available research still relies on short-term interventions or self-reported perceptions, leaving uncertainty about long-term improvement in productive skills.

Theoretical Perspectives Supporting Video-Based Speaking Instruction

The design of video-based EMP materials is informed by several theoretical frameworks. Mayer's Multimedia Learning Theory explains how learners integrate visual and auditory information, making video a powerful medium for reducing cognitive load and supporting comprehension. Communicative Language Teaching (CLT) emphasizes meaningful communication, interaction, and functional language use—principles that align well with video simulations of clinical exchanges.

From an ESP perspective, Dudley-Evans and St John (1998) highlight the importance of authenticity, genre knowledge, and discourse awareness in ESP learning materials. Video-based models expose learners to these discourse patterns in a contextualized format. Situated Learning Theory also supports the use of videos, as it argues that learning becomes meaningful when learners observe and participate in realistic social practices.

Together, these theories explain why digital videos can serve as effective tools for improving speaking proficiency: they present multimodal cues, model authentic discourse, and help learners practice communication aligned with real-world medical contexts.

Research Gap and Conceptual Framework

Although multimedia learning has been widely studied, empirical research that develops and validates video-based speaking materials specifically for Medical English remains limited. Only a small number of studies employ systematic Research and Development (R&D) procedures with expert validation, iterative refinement, and performance-based evaluation (Codron et al., 2025; Dira & Kuswandono, 2024). Furthermore, many studies focus on motivation or comprehension rather than measurable improvement in speaking performance.

This gap indicates a specific need for instructional media that:

1. present authentic clinical communication models;
2. are validated by experts in both language and healthcare fields; and
3. are evaluated using performance-based assessments rather than self-reported perceptions.

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The present study addresses this need by developing a Digital Video Series (DVS) grounded in Multimedia Learning Theory, CLT principles, and ESP pedagogy. The conceptual framework guiding this study links:

1. the communicative demands of EMP,
2. the challenges learners face,
3. the theoretical foundations supporting video-based instruction, and
4. the role of DVS as an empirically validated intervention designed to enhance Medical English speaking proficiency.

3. Research Method

Research Design

This study employed a Research and Development (R&D) approach adapted from the Borg and Gall model (Borg & Gall, 1984). The model was simplified into seven stages to align with the scope and practical constraints of classroom-based EMP research: (1) research and information gathering, (2) planning, (3) product development, (4) preliminary field testing, (5) revision, (6) main field testing, and (7) final product revision. This adapted sequence maintained the essential cycle of developing, testing, and refining instructional media while allowing the procedures to be implemented efficiently within the academic setting.

The adaptation also ensured that each stage remained pedagogically meaningful. Needs analysis, conducted during the research and information-gathering phase, helped identify learners' challenges in Medical English speaking. Preliminary field testing enabled a small-scale try-out of the initial DVS draft, while main field testing involved implementation with the full participant group. Expert feedback and learner responses were incorporated throughout the revision stages to improve content accuracy, clarity, and usability.

A one-group pre-test–post-test design was integrated into the model to examine improvements in students' Medical English speaking proficiency after using the Digital Video Series (DVS). This design allowed the study to capture measurable changes in performance while supporting the developmental focus of the R&D approach.

Participants

The participants were 109 students enrolled in English for Specific Purposes (ESP) courses across three health-science programs: Nursing (n = 41), Midwifery (n = 35), and Pharmacy (n = 33). They were selected using purposive sampling based on their course enrollment and willingness to participate. All participants provided informed consent, and ethical approval was obtained from the university's ethics committee.

Instruments

Three instruments were used to collect data:

1. **Speaking Test:** An analytic rubric assessed fluency, accuracy, pronunciation, and communicative appropriateness. Two raters evaluated the performances to ensure scoring reliability.
2. **Expert Validation Checklist:** Three experts—specializing in ESP, medical communication, and educational technology—reviewed the draft videos for accuracy, clarity, and relevance.

3. **Student Perception Questionnaire:** A 5-point Likert-scale questionnaire measured students' engagement, perceived usefulness, clarity of the videos, and confidence improvement.

Development Procedures

The DVS was developed in seven main stages:

1. **Research and Information Gathering**: Needs analysis through questionnaires, interviews, and observations identified issues such as limited vocabulary, pronunciation difficulties, and lack of contextual speaking practice.
2. **Planning**: Learning objectives were developed, and clinical communication scenarios were selected. Scripts and storyboards were drafted to reflect common medical interactions.
3. **Product Development**: The preliminary DVS was produced in simulated clinical environments, edited, and refined to ensure clarity and linguistic accuracy.
4. **Preliminary Field Testing**: A small group of students reviewed the videos to identify issues related to pacing, comprehension, and technical quality.
5. **Revision**: Expert feedback and initial student responses informed revisions to improve clarity and accuracy.
6. **Main Field Testing**: The revised DVS was applied in four ESP sessions featuring pre-viewing, viewing, and post-viewing tasks. A pre-test and post-test measured students' progress.
7. **Final Product Revision**: Findings from expert validation, preliminary testing, and classroom implementation guided the final refinement of the DVS.

Data Collection

Data sources included pre- and post-test speaking scores, expert validation results, questionnaire responses, and classroom observation notes. All data were anonymized.

Data Analysis

Quantitative data from the speaking rubric were analyzed using descriptive statistics and paired-sample t-tests. Questionnaire results were interpreted using descriptive statistics. Qualitative comments were examined through thematic analysis.

Ethical Considerations

Informed consent was obtained from all participants. Confidentiality was maintained through data anonymization. Ethical approval was granted by the university's institutional review board.

4. Results and Discussion

4.1 Results

1. Descriptive Statistics

Table 1 presents the results of students' speaking scores before and after using the Digital Video Series.

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Table 1
Descriptive Statistics of Speaking Scores

Variable	N	Minimum	Maximum	Mean
Pre-test	109	57.25	71.25	62.08
Post-test	109	57.00	83.00	75.57

The results show a clear upward trend. Students' mean speaking score increased from 62.08 in the pre-test to 75.57 in the post-test, reflecting a substantial gain of 13.49 points. Both datasets met normality assumptions according to the Shapiro–Wilk test ($p > .05$). This improvement indicates that after undergoing the intervention, students demonstrated higher levels of fluency, accuracy, and communicative competence.

To verify whether this improvement was statistically meaningful, a paired-sample t-test was conducted. It confirmed that the improvement was statistically significant, $t(108) = 18.42$, $p < .001$, with a large effect size ($d = 1.76$). These findings offer strong empirical evidence that structured exposure to authentic video-based learning materials can accelerate skill development in an English for Medical Purposes (EMP) context.

2. Speaking Skill Categories

To further illustrate changes in speaking performance, Table 2 displays the distribution of students across speaking proficiency categories before and after treatment.

Table 2
Frequency Distribution of Speaking Score Categories

Category	Before (%)	After (%)
Good	0.00	66.06
Fair	9.17	33.94
Poor	90.83	0.00

Table 2 presents notable shifts. Initially, nearly all students (90.83%) were categorized as "Poor," highlighting their limited speaking ability and lack of exposure to communicative Medical English. Only 9.17% fell under the "Fair" category, and none demonstrated "Good" proficiency. These distributions were based on rubric aligned cut off points (Good ≥ 70; Fair = 60–69; Poor < 60).

3. Student Perceptions

Students' perceptions were also highly positive. The questionnaire, which demonstrated strong reliability ($\alpha = .89$), indicated high levels of engagement ($M = 4.41$), relevance to medical communication needs ($M = 4.36$), and perceived improvement in speaking confidence ($M = 4.29$). The overall perception score was 4.32, suggesting that the DVS was well received and perceived as beneficial for EMP learning.

These results demonstrate that students not only benefited cognitively but also responded positively on an affective level. The perceived relevance of the content suggests strong alignment between the video materials and students' professional expectations in healthcare settings.

4.2 Discussion

4.2.1 Overall Improvement in Speaking Proficiency

The findings of the study indicate substantial gains in students' Medical English speaking proficiency following the implementation of the Digital Video Series (DVS). The statistically significant increase in speaking scores, paired with a large effect size, suggests that the DVS contributed meaningfully to students' learning outcomes. These results support previous research demonstrating that multimedia-based instruction enhances fluency, accuracy, and communicative competence among ESP learners (Habibi et al., 2024; Julita & Isna, 2025).

4.2.2 Development of Communicative Competence in EMP

The shift in proficiency categories from predominantly Poor to predominantly Good reflects meaningful development in students' communicative competence. This change highlights the effectiveness of the DVS in addressing long-standing challenges in EMP instruction, particularly the lack of contextualized speaking models. Consistent with Nguyen (2025), the availability of authentic or semi-authentic discourse samples enables learners to internalize interactional routines commonly used in clinical encounters.

4.2.3 Multimodal Input and Cognitive Processing

Mayer's Multimedia Learning Theory provides a theoretical foundation for understanding the observed improvements. The combination of audio and visual cues supported dual-channel processing, helping students retain new vocabulary and expressions more effectively. The simulated clinical scenarios in the DVS allowed learners to observe professional communication strategies and integrate them into their own spoken output.

4.2.4 The Role of Noticing and Input Enhancement

The DVS also facilitated noticing, a key process in language acquisition according to Schmidt's Noticing Hypothesis. Through guided viewing tasks, learners' attention was drawn to specific linguistic features such as question forms, intonation, and clarification strategies. This input enhancement likely contributed to students' improved accuracy and appropriateness in speaking tasks, allowing them to replicate target patterns in subsequent role-plays.

4.2.5 Learner Perceptions and Affective Engagement

Students' positive perceptions further reinforce the effectiveness of the intervention. Many reported increased confidence and reduced anxiety when speaking English, which parallels the findings of Dira & Kuswandono (2024), who noted that video-based tasks help reduce affective barriers. The structured pre-viewing and post-viewing activities offered additional scaffolding, supporting learners at varying proficiency levels.

4.2.6 Authenticity and Relevance to Clinical Contexts

The clear relevance of the video content to real clinical practice contributed to high levels of engagement. Students recognized that the expressions and communication sequences presented in the videos mirrored interactions they expect to perform during internships. This authenticity aligns with Li et al. (2025) argument that materials grounded in actual workplace contexts enhance the transferability of language learning.

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4.2.7 Persistent Difficulties and Pedagogical Considerations

Although overall improvements were notable, some students continued to experience challenges with spontaneous responses, pronunciation, and rapid turn-taking. These difficulties align with observations by Codron et al.(2025), who argue that video-based input enhances modeling but cannot fully replace interactive communicative practice. Therefore, the DVS should be used alongside simulations, pair work, and real-time speaking activities to strengthen students' communicative autonomy.

4.2.8 Individual Differences and Variability in Learning Outcomes

Despite the absence of students in the Poor category after the intervention, it is important to acknowledge individual variation. Learners may differ in the amount of support needed to internalize complex medical expressions or communication strategies. Some may benefit more from repeated video exposure, while others may require more practice-based interaction. These differences highlight the necessity of differentiated instructional approaches in EMP classrooms.

4.2.9 Integration of Quantitative and Qualitative Findings

The convergence of quantitative and qualitative findings strengthens the claim that the DVS was effective across cognitive and affective domains. The improvement in test scores aligns with students' self-reported gains in confidence, clarity, and perceived usefulness of the videos. This alignment suggests that the DVS supported both skill development and learner motivation, which together contribute to sustained improvement in speaking proficiency.

4.2.10 Contribution to EMP Pedagogy and R&D-Based Material Development

The study contributes to EMP pedagogy by demonstrating the value of systematically developed multimedia materials. The iterative R&D process, which included needs analysis, expert validation, revisions, and testing, ensured that the final DVS addressed learners' actual communication needs. The findings also highlight the potential for locally produced video materials to support the global movement toward digital, contextualized language instruction, bridging the gap between classroom learning and authentic clinical communication.

4.3 Implication

4.3 Implication

The results of this study provide several practical implications for teaching Medical English and developing learning materials for health-science students.

1. Implications for Teaching

The improvement in students' speaking scores shows that digital videos can support teachers in providing clearer examples of real clinical communication. Teachers may not always have time or ability to model authentic doctor–patient interactions, so using videos can help students:

a. observe real expressions and communication patterns,
b. reduce their speaking anxiety, and
c. practice speaking with better preparation and confidence.

EMP instructors are encouraged to include video-based activities—such as watching, repeating, and role-playing videos—during speaking lessons.

2. Implications for Curriculum Development

The findings suggest that EMP curricula should incorporate multimedia materials, not only textbooks. Digital videos can make learning more relevant to clinical practice by showing:

a. realistic medical scenarios,
b. how professionals use English in real contexts, and
c. how to explain symptoms, give instructions, and interact with patients.

Curriculum designers should consider adding structured video modules to strengthen students' readiness for real workplace communication.

3. Implications for Media and Instructional Design

Using an R&D approach proved effective for producing high-quality learning media. This means that future video development should:

a. involve experts in medical communication and ESP,
b. include validation and revisions, and
c. ensure the videos are simple, accurate, and easy to follow.

Such procedures help ensure that multimedia resources are pedagogically appropriate for students.

4. Institutional Implications

The study highlights the importance of institutional support for digital learning. Universities may:

a. provide resources to produce educational videos,
b. train teachers in multimedia-based teaching, and
c. encourage collaboration between language lecturers and health-science departments.

This support can help improve the quality of EMP instruction across programs.

4.4 Limitations and Future Research

The study's design has several limitations. The one-group pre-test–post-test model makes it difficult to confirm that the improvement was caused solely by the intervention, because there was no control group for comparison. Future studies should use experimental designs to strengthen causal conclusions.

In addition, the assessment only measured outcomes immediately after the intervention. Long-term follow-up is needed to see whether the improvement in speaking skills lasts over time. The participants were also limited to students from Nursing, Midwifery, and Pharmacy programs, so future research involving other health fields—such as Medicine, Dentistry, or Physiotherapy—would help improve the generalizability of the findings.

Possible directions for future studies include: (1) integrating the video series with virtual exchanges involving native-speaking healthcare professionals; (2) adding gamified features to increase student motivation; and (3) using automated speech analysis tools to provide personalized feedback and monitor learners' progress more accurately.

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5. Conclusion

This study investigated the development, feasibility, and effectiveness of a Digital Video Series (DVS) for improving Medical English speaking proficiency. For Research Question 1, the DVS was successfully developed using the Borg and Gall R&D model, ensuring a systematic process from needs analysis to expert validation and refinement. Regarding Research Question 2, both expert evaluations and student perceptions indicated that the DVS was feasible, clear, and relevant to clinical communication needs, supporting its pedagogical appropriateness for EMP contexts. For Research Question 3, the significant improvement in speaking scores demonstrated that the DVS was effective within the scope of this study, aligning with principles of multimedia learning and ESP instruction.

Although the findings were positive, the conclusions must be viewed in light of the one-group design and limited participant scope. Future studies could employ experimental designs, involve broader health-science programs, and evaluate long-term retention. Overall, the study suggests that a systematically developed DVS can serve as a practical and contextually grounded model for enhancing speaking proficiency in Medical English courses.

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