



**Enhancing Nursing Students' 'EFL-Course-Missing'
Listening and Speaking Skills through '*Easy English*'
Website-Based Activities with Speech Analysis,
Sentence-Recital, and Simultaneous
Interpretation and through the Same Activities with the
Traditional Method and Assessing Students' Perceptions
of Both Instruction Methods**

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Abstract

This study aimed to enhance the nursing students' EFL-course-missing listening and speaking skills through 'Easy English' website-based activities with speech analysis, sentence-recital, and simultaneous interpretation and through the same activities offered in the traditional method and to assess students' perceptions of both instruction methods. A quasi-experimental approach with a two experimental group design was utilized. 'Easy English' website-based listening and speaking activities presented with speech analysis, sentence recital, and simultaneous interpretation formed the intervention in the first experimental group (G1). The same activities taught in the traditional method were the intervention in the second experimental group (G2). Both the G1 and the G2 participants were 5th-year nursing students at the Tumour Nursing Institute (n. 28) and the Medical Insurance Nursing Institute (n. 28), with a total of 56 participants. Three main instruments were designed and validated, and their reliabilities were checked and confirmed: a pre-post listening test, a pre-post-speaking test, and an on-action perception form (in two versions). *T* tests were used to assess the students' statistical changes in performance and the effect size levels for the two interventions. The results revealed that the listening and the speaking skills in both groups were enhanced by the two interventions. They indicated that G1 improved slightly higher in both the listening and the speaking skills than G2, and the listening skills in both groups improved higher than the speaking ones. At a group level, the results of the effect size levels showed that the two interventions were *largely* effective in improving the two skills ($p < 0.01$ in all cases). At the two-group level, the comparison between the two group intervention effects showed slightly more effects of G1 intervention on the listening skills ($p < 0.01$) and the speaking skills ($p < 0.05$) than the G2 intervention. The participants in both groups descriptively revealed positive views about and were thus satisfied with the instruction, but those in G1 showed *more* positive views and thus *more* satisfaction.

Key words: *Easy English website, activities, speech analysis, sentence recital, simultaneous interpretation, EFL, listening, speaking, nursing students, MoHP, perceptions, Egypt*

1. Introduction

EFL Listening and speaking are of particular meaning and value to nursing students. They need them not only for learning but also for on-the-job communication necessities during their pre-service nursing training and future workplaces. Curricula, including activities and material provided to nursing students should not overlook teaching listening and speaking skills (Lai, 2016) obviously missing in the Technical Health Institutes' EFL course offered to nursing students in Egypt (Albaaly, 2022a; Albaaly, 2022b).

Both English for General Purposes (EGP) and English for Specific Purposes (ESP) listening and speaking are indispensable to nursing students. In both, they need to be able to interact using the right pronunciation, structure, vocabulary, message, accuracy, and fluency. Instructors are required to use the right effective strategies to be employed in enhancing such nursing students' communication-boosting skills. Generally, EGP listening and speaking and related strategies are seen as essentially supportive of ESP usage. In other words, students, including nursing students, need the 'establishing skeleton and operating tools' of EGP to employ English for Nursing vocabulary well.

Future nurses need to ascertain that they can basically manipulate EGP communication: understand (native) English and speak English properly. The '*easy English*' website has not been employed in formal classroom teaching to improve listening and speaking before, to the best of the researcher's knowledge. It is full of everyday native conversations important to any EFL learner. It was thought that if activities were designed around the rich audio material on the website, they might offer opportunities to improve the nursing students' listening and speaking skills missing in their EFL course, as will be further analysed later. From another perspective, employing proper instructional techniques leads to the improvement of these skills. Speech analysis, sentence-recital, and simultaneous interpretation proved to be effective in speech recognition, production, and understanding, as will be discussed. The literature surveyed shows that they have not been used as a triple intervention anywhere, to the best of the researcher's knowledge.

Research indicates that nurses, including future nurses, cannot do their jobs properly without the listening and the speaking skills, e.g. Mulyadi et al. (2021) and Wulandari et al. (2019). The present paper examines research to date regarding English as a Foreign Language (EFL) listening and speaking skill-related specificities, implications, significance to the nursing students in particular, the reasons for this significance, and strategies used to enhance these skills to highlight the recent interventions, with a special focus on speech analysis, sentence-recital, and simultaneous interpretation. For the experimental part of this study, the method, material, related results and discussions, recommendations and directions for further research are finally addressed.

First, the importance and aspects of the listening skill are examined, and then, those related to the speaking one are highlighted. The aspects of each skill include the skill importance and the use of websites, other technologies, and strategies or approaches to enhance it. Next, specific benefits of the speech analysis, sentence-recital, and simultaneous interpretation (missing in literature as a triple intervention) are highlighted. Then, factors affecting both skills are clarified.

1.1. EFL Listening Skills and Related Importance to Nursing Students

EFL listening skills reflect the abilities to receive, comprehend, and interpret the spoken message accurately and effectively. They are vital to developments of early language (Newton & Nation, 2021). According to Brown (2007), Nation (2001), Ellis (2008), and Richards and Rodgers (2001), these skills include recognition and identification of sounds, comprehension of vocabulary and ‘specific’ vocabulary, understanding of the grammar, identification of ‘the main idea’, understanding of ‘specific information’ and ‘supporting details’, clear follow-on of spoken instructions, identification of the speaker’s purpose, and the transfer of the understood message to real life.

EFL listening skills are important to EFL nursing students as they boost their ability to effectively communicate in health settings, comprehend patient needs, and perform professional interactions. Research highlights the significance of listening skills for Taiwanese nurses, for example. Lai

(2016) points out that Taiwanese nurses prioritize speaking, listening, writing, medical terminology, and reading skills in their English-speaking work environments. This prioritization enhances the critical role of listening, together with the other skills, particularly speaking, in nursing practice, as the skills enable nurses to understand patient instructions, establish the basis for communication with workmates, and help nurses be involved in effective patient and healthcare. Additionally, the study advocates courses tailored to nurses' workplace needs, emphasizing the importance of strengthening listening skills to meet the various demands of the healthcare system.

There are certain specifications that nurses see as effective in their learning to benefit from in their future careers. Su (2013: 203) conducted a needs analysis and a student perception questionnaire and found that there was a necessity for cooperation between the language instructors and the nursing instructors and both should work together to make sure that the English specific to the needs of nurses is conveyed to them. Also, the study found that the nursing skill and language-conveying courses and material had to be based on the nurses' needs and their future careers. The study also stressed the need for instructor training to enhance teaching for the student's future profession.

Lai (2016) conducted a study on note-taking which increased the writing competence of 'nursing' university students. However, the study explored students' views and concluded that student nurses give priority to the skills of speaking and listening over the other language skills and also need medical terms in their university study. The study also concluded that academic subjects should integrate language learning, a variety of English should be practiced by students, and practical English suitable to their profession be adopted. Nurmainiati (2015) states that courses are required to be assessed regularly to ensure that satisfy the needs of future nurses.

In summary, because of their general and functional meaning, listening and speaking are important in the nursing students' learning and pre-service nursing practices. ESP appropriate for the student's needs is effective in preparing students for the language demands of their profession and enhancing their overall communication skills

(Lai, 2016; Nurmainiati 2015; Su, 2013).

The use of websites in English Language Teaching (ELT) is evident. Their roles are inescapable, and they can add benefit, engagement, and enjoyment. In the following section, the use of websites for addressing the two language skills of listening and speaking is highlighted.

1.2. Using Websites for Fostering EFL Listening

The effect of websites on EFL listening has been a topic of interest in recent research studies. Several studies address 'the website technique' on enhancing listening skills (e.g. Abdullah Almalki et al., 2023; Cruz et al., 2023; Massahzadeh & Pourmohammadi, 2018; Rohim & Fitariana, 2022; Sihombing & Simanjuntak, 2023):

1. Lyrics Training Website: Cruz et al. (2023) investigated the impact of a lyric- drilling website on the performance in listening skills in EFL classes. The website offered an interesting approach to fostering listening comprehension through song lyrics. Understanding the effectiveness of lyric training can provide valuable insights into English language teaching and learning.
2. ER-Central Website: Rohim and Fitariana (2022) used a website called 'ER-Central' as a distance learning program for extensive listening by EFL students during the COVID-19 pandemic. The study found a significant improvement in students' listening scores after using the website, indicating its effectiveness as a distance education program for extensive listening in a pandemic situation.
3. Transcription as a Pre-Listening Strategy: Massahzadeh & Pourmohammadi, (2018) explored the impact of 'transcription' as a pre-listening intervention on Iranian EFL students' listening comprehension abilities. The findings suggested that having learners transcribe in advance was beneficial for improving listening comprehension, indicating the usefulness of transcription as a pre-listening strategy in ELT.
4. Almalki et al. (2023) unveiled EFL learners' attitudes toward listening skills in virtual as compared to face-to-face classrooms. Moreover, it aimed to find out if EFL learners experienced listening anxiety in the aforementioned learning modes. The study used a questionnaire to obtain data from learners in an English-specialized Institute in Saudi Arabia. The findings revealed that listening anxiety was evident in students for

both learning modes. The findings, nonetheless, online learning slightly soothed the beginner and intermediate learners' listening anxiety levels. (Abdullah Almalki et al., 2023).

5. Digital Audio: Sihombing and Simanjuntak (2023) focused on the use of digital audio, specifically online podcasting on Spotify, to enhance EFL learners' listening proficiency. The findings showed that the group exposed to digital audio had a significant increase in listening proficiency compared to the group not exposed to that intervention, stressing the positive effects of digital audio on listening skills.

These studies jointly demonstrate the positive effects of websites, digital resources, and innovative strategies on EFL listening skills, providing valuable insights for educators and learners in enhancing listening proficiency in English language learning in various contexts.

1.3. EFL Listening Strategies

Since EFL listening is a critical ability for English language learners, research in this area has explored various factors influencing listening proficiency. To examine research findings, implications, and techniques to date and provide insights into studies enhancing EFL listening, the following studies address it from different perspectives. The studies surveyed first handle EFL listening to establish a general background but then move to issues related to the EFL listening of student nurses to examine the latest endeavors in this area.

Several studies stated below shed light on the various factors that influence EFL listening proficiency, including anxiety, self-regulation, technology, and metacognitive strategies. By exploring these factors, it is seen that researchers and educators can develop effective strategies to improve EFL learners' listening abilities.

Abdullah Almalki et al. (2023) explore EFL learners' anxiety when learning English, especially in listening skills, in both online and face-to-face classrooms. The findings indicate that despite the learning mode, EFL learners have listening anxiety, but online classrooms slightly decrease it for beginner and intermediate EFL learners. Abdolrezapour and Ghanbari (2021) focus on increasing learning scores in EFL listening comprehension and self-regulation through self-regulated dynamic assessment measures. Jia and Hew (2019) integrate 'WeChat', a

popular application for mobile instant messaging in China, into dictation practice to enhance EFL listening proficiency. The experimental group assigned in the study displayed significantly more improvement in listening compared to the control group.

Sihombing and Simanjuntak (2023) examine the use of digital audio in raising EFL learners' listening proficiency levels. The findings indicate that the group exposed to digital audio experienced a growth in their listening proficiency, while the group with no exposure to digital audio showed little improvement. The conclusions of Al-Azzemy and Al-jamal (2019) express the efficacy of certain strategies such as cognitive, metacognitive, and socio-affective strategies in enhancing EFL learners' listening.

Alamdari and Hosnbakhshan (2021) examine the comparative effect of L1/L2-mediated metacognitive intervention on the IELTS listening comprehension performance and metacognitive awareness of EFL learners in Iran. The results indicate that MI caused a substantial variance in the listening performance and the metacognitive awareness of learners in both experimental groups.

1.4. EFL Speaking Skills

EFL speaking skills refer to the ability of a non-native speaker to communicate effectively in English through oral language. These skills comprise pronunciation, fluency, vocabulary, grammar, and the ability to express thoughts and ideas coherently and confidently. EFL speaking skills are central for successful communication in an English-speaking environment, whether for personal or professional purposes.

Speaking skills in EFL encompass various abilities that enable effective verbal communication. The literature (Ahmed, 2020; Islam & Musdalifah, 2022; Campoy-Cubillo, 2016) indicates the key speaking skills:

1. Pronunciation: The ability to articulate sounds, words, and sentences both clearly and accurately to ensure effective communication.
2. Fluency: The capacity to speak smoothly, with neither hesitations nor interruptions, demonstrating a natural flow of language during conversations or presentations.

3. Vocabulary: The diversity of words and phrases a speaker possesses, showing an ability to effectively express ideas, thoughts, and feelings in different contexts.
4. Grammar: The understanding and application of grammatical rules and structures to construct sentences correctly and convey meaning accurately.

Other skills are related to the mechanisms of speaking rather than the components. These include

5. Coherence: The ability to organize ideas sensibly and present them clearly and cohesively to ensure the listener can follow the conversation or presentation easily.
6. Confidence: The self-assurance and belief in one's ability to communicate effectively in English, which is essential for engaging in conversations and expressing oneself fluently.
7. Expression: The capability to express emotions, thoughts, and information effectively through intonation, stress, and appropriate use of language features like idiomatic expressions and figurative language.

These skills mentioned above collectively contribute to proficient and effective communication in EFL, enabling learners to engage in conversations, discussions, presentations, and various communicative tasks with clarity and trust.

It is noteworthy that EFL speaking skills are crucial for learners to communicate effectively in English. Several approaches have been explored to see if they enhance EFL speaking proficiency. The following particularly reflects the main technological approaches highlighted in research:

1. Soliloquy Approaches: Hengki et al. (2023) investigated the impact of monologue approaches on digital EFL speaking skill instruction, emphasizing the importance of practicing acting and speaking English through soliloquies.
2. Task-Based Learning (TBL): TBL is effective in improving learners' speaking skills, particularly through the use of English conversation gambits (Estaji & Jonaidi-Jafari, 2022). Online task-based learning has also been shown to improve EFL speaking skills in secondary-stage students (Anjum et al., 2019; Mustapha, 2023).

3. Self-Directed Learning vs. Teacher-Led Instruction: Estaji and Jonaidi-Jafari (2022) approximated the effects of Self-Directed Learning and Teacher-Led Instruction on EFL learners' oral proficiency and speaking structural accuracy, revealing that learners at both levels benefited more from Self-Directed Learning.
4. Video Technology: Video technology has been integrated into EFL speaking pedagogy, enhancing students' engagement in the oral feedback provision process (Wau et al., 2023) and raising student participation (Julaihah, 2021); however, research shows that students prefer written feedback to video feedback as it is more efficient (Tseng & Yeh, 2019, p. 145).
5. Research also embarks on an innovative examination of the efficacy of vlogging as a didactic strategy to improve EFL students' speaking skills (Wau et al., 2023; Watkins, 2012).
6. Impromptu Speech Technique: An action research study investigated the effects of impromptu speech technique on first-year engineering students, revealing positive effects on speaking performance (binti Suradi et al., 2022), and it also indicated that there was an impact of constant Impromptu speaking and goal setting on' public speaking competency of college students (El Mortaji, 2018).
7. Wau et al. (2023) used a strategy called 'vlogging' as an instructional means for enhancing the EFL speaking skills of eighth-grade learners. The study results revealed that substantial improvement in the students' speaking skills, accentuating the success of the vlogging strategy in the instruction of speaking.

The studies above collectively highlight the importance and role of myriad approaches, including monologue, task-based learning, self-directed learning, video technology, and blended learning techniques, in improving EFL speaking skills.

1.5. Importance of EFL Speaking to Nursing Students

Speaking skills are crucial for nursing students as effective communication plays a pivotal role in the healthcare profession. In this

regard, recent literature addresses certain aspects:

1. Intercultural Communication: Nursing students need to communicate effectively with patients from diverse cultural backgrounds.

Prioritizing intercultural communication skills, including speaking, is essential to establish trust and cooperation between the caregiver and the patient (Xiao-Wei, 2009).

2. Language Barrier Bridging: Language barriers can impact the quality of care provided by nursing students. Understanding and effectively using language, especially when communicating with patients who speak different languages, is vital for building rapport and ensuring accurate information exchange in clinical settings (Engelbrecht, 2008).
3. Web-Based Learning Activities: Web-based activities can help nursing students, especially those with English as a second language, improve their speaking skills. Enhancing spoken language capacity and interaction through targeted strategies can boost students' confidence and competence in communication (Koch, 2011)
4. Electronic Role-Play Assessment: Utilizing electronic role-play assessments can enhance nursing students' ability to apply pathophysiology concepts in clinical scenarios. This initiative not only aids in learning but also helps students conceptualize the importance of bioscience knowledge in nursing practice, emphasizing the significance of effective communication in healthcare settings (Craft & Ainscough, 2015).
5. English Language Needs Analysis: English language skills, including speaking, are essential for nursing students and practitioners. While reading and writing are perceived as important, speaking and listening skills are also crucial for effective communication in the workplace. Improving English proficiency can empower nursing students in their careers and enhance their ability to provide quality care (Alinezhad, & Gholami, 2012).

1.6. Using Websites for Enhancing EFL Speaking

Using a website can be effective in improving speaking skills in EFL learners. The search results provide evidence of the effectiveness of various websites and technologies in enhancing speaking abilities.

1. GoEnglish.Me: Peyghambarian et al. (2014) found that using GoEnglish.Me, a virtual learning website, improved lower-intermediate EFL learners' speaking ability. Participants in the experimental group were allowed to use the material of

GoEnglish.Me to practice speaking, notably outperformed the control group in the post-test ($p < .05$).

2. Padlet and Google Classroom: Abdulaziz (2021) investigated the effectiveness of self and peer evaluation using Padlet and Google Classroom in fostering the conversational skills of EFL students. The program was based on self and peer evaluation and using these platforms lasted for 15 weeks (60 hours) and revealed significant differences between the pre and post-test administrations in favor of the post-test.
3. YouTube: Truong and Le (2022) found that EFL university students can improve their EFL speaking skills when learning with the YouTube platform. According to the study, students recognized YouTube as a helpful tool when they needed to practice and improve their speaking skills.
4. Facebook and Skype: Yen et al. (2015) conducted a case study in Taiwan and found that learners improved their speaking and writing skills Taiwanese business college learners enrolled in a conversation course via the learning tools Facebook (asynchronous online discussion) and Skype (synchronous online discussion). The results also revealed that learners could improve the learners' speaking and writing skills via peer-to-peer and self-correction behaviors.
5. Video Projects: Hasanah (2019) performed a study in Indonesia and found that video projects were used to improve the speaking performance of EFL college students. The study indicated that students emerged with confidence, fluency, positive collaboration, and excitement for speaking.

The studies above jointly demonstrate that various websites and technologies can be effective in improving EFL speaking skills. Also, they depict that teachers and learners can utilize the resources they utilize to enhance speaking abilities and generate engaging learning experiences.

1.7. Diverse Technological Approaches for EFL Speaking

Research also provides other evidence of the effectiveness of various approaches in improving EFL speaking skills. The following reflects the findings:

1. YouTube Videos and Listening Audio Tracks Imitation: Hamad et al. (2019) found that using YouTube videos and Listening Audio Tracks

Imitation in EFL speaking classes had positive effects on learners' speaking skills, fluency, and pronunciation.

2. Classroom Activities: Jonáková et al. (2023) highlighted the importance of teacher corrective feedback and the use of the mother tongue in brief beginner courses for refining speaking skills.
3. Videotaping: Mortaji (2018) reported that videotaping developed college students' public EFL speaking skills according to the perceptions of the learners, leading to improvements in content, verbal and non-verbal communication, and organization.
4. Narrative Techniques: Sedaghat and Biria (2016) studied the effectiveness of narrative techniques on educating critical thinking and refining oral proficiency of intermediate Iranian EFL learners, and significant improvements were reported to have been observed in the experimental groups involved compared to a control group.
5. Interactive Reading Comprehension Teaching: A study adopting the pre-and post-test quasi-experimental design found that Interactive Reading Comprehension Teaching was effective in boosting undergraduates' oral communication skills, improving the learners' confidence and motivation towards speaking English significantly (Shimray et al., 2021).
6. Authentic Videos: Ali and Celik (2019) explored English Language Teachers' perception of the effectiveness of using authentic videos to improve speaking. According to the study, the teachers reported that authentic videos motivated students to participate in speaking classes and aided in improving self-esteem.
7. Augmented Reality-Enhanced Teaching: Khodabandeh (2022) assessed the effect of augmented reality-based instruction on EFL learners' speaking skills in online flipped and face-to-face classes, with the online flipped group displaying a statistically significant difference in their speaking post-test.

To sum up, the effects of several approaches were investigated. The aforementioned studies collectively demonstrate that various approaches, such as technology use, teacher feedback, and interactive teaching methods, can improve EFL speaking skills.

1.8. The Speech Analysis Technique:

Prasad et al. (2017) state that speech is made of sentences made of words. Usually, words consist of phoneme sequences or syllables. The

study points out that speech analysis plays an important role in speech recognition and synthesis and that another name for speech analysis is feature extraction.

Tsai and Young (2010) concluded that speech analysis techniques, such as applying speech techniques in Computer-Assisted Language Learning, assisted EFL learners in listening and speaking practice effectively and that they provided learners with opportunities for self-practice and acted like quite an alternative for the inexistence of native speakers and helped reduce language anxiety.

Tsai and Young (2010) discovered that providing explicit instruction on English pronunciation and characteristics of connected speech led to developments in listening comprehension among Thai EFL learners of Airline Business.

1.9. Sentence-Recital

Sentence-recital is considered a valuable technique in speech analysis for examining the stability of temporal patterns in the production of speech, and assessing the individual's ability to reproduce specific linguistic constructions accurately. According to Kent and Forner (1977, p. S101), sentence recitation as a method aids the temporal stability and production abilities of speech. They prove that it allows children to imitate the acoustic properties of speech sounds, which is considered a significant step in developing accurate pronunciation. They also clarify that sentence recitation simplifies the organization of vowel sounds in the acoustic space. It involves the repetition of specific sentences by individuals to assess various aspects of their speech production abilities. Sentence recitals are utilized to analyze the consistency and accuracy of temporal segments in speech, providing insights into the individual's ability to reproduce speech patterns and structures (Prasad et al., 2017).

Literature provides valuable insights into the benefits of using sentence recital to retain a foreign language. Specifically, the investigation emphasizes the advantages of incorporating sentence recital techniques in language learning.

In summary, the practice of sentence recital in learning a foreign language presents a range of benefits, including enhanced learning processes, improved retention of vocabulary and grammar, language acquisition, and mental stimulation. Incorporating sentence recital techniques is a valuable tool in language learning, especially for developing speaking skills and fluency at premature stages.

1.10. Simultaneous interpretation

According to Abdellaoui (2023), moderate use of Arabic translation helps improve language skills. Literature shows that a case study in Saudi Arabia explored the effects of using Arabic in teaching and learning Chinese as a foreign language. The findings suggested that using Arabic for instruction and communication in foreign language classrooms, especially during the initial stages of learning, was essential and led to better language processing.

However, although literature generally indicates that the use of Arabic aids understanding in teaching English, it is a complicated issue with a long history of varying perspectives. From another perspective, nonetheless, findings suggest that moderate and strategic use of Arabic as a facilitator can be beneficial for language learners, particularly when combined with the integration of technology in the classroom (Aljojo, 2020).

According to Damanhoury (2024, pp. 159-163), the gains related to the benefits of using L1 in learning Chinese of Saudi students. They concluded the benefits of 1. Enhanced Learning Process: using Arabic enhances the learning process by providing learners with a structured approach to practice and internalize language patterns and vocabulary effectively. 2. Improved Retention: This means the use of L1 helps to improve retention as learners engage actively with the language, fostering their memory of vocabulary, grammatical structures, and pronunciation. 3. Language Acquisition: The use of L1 helps learners enhance their language acquisition processes, particularly in the early stages of learning a language. This active practice aids in developing fluency and proficiency in speaking and understanding the language. 4. Cognitive Benefits: Arabic offers cognitive benefits by motivating the

brain through active engagement with the language, promoting better comprehension, and aiding in language rule and structure internalization.

In summary, speaking skills are essential for nursing students as they guide clinical settings, interact with patients, collaborate with healthcare teams, and ensure effective contact in the healthcare environment. Proficient speaking abilities enable nursing students to build relationships, share information accurately, and provide compassionate care to patients from diverse environments.

1.11. Rationale for the Study

The evidence stated earlier confirms that both listening and speaking skills are significant to EFL learners in general and nursing students in particular. However, it is claimed that the amount of English spoken by the nursing students and their instructors at the (technical health) nursing institutes affiliated to the Egyptian Ministry of Health and Population (MoHP), and consequently, listening, is considerably *low* and that the students were thus weak in both skills. Specific evidence for this claim comes from Albaaly's study (2022a) which surveyed the technical nursing instructors' and students' views and clarified a wide-spread and prevailing use of Arabic in their nursing classes of *all* the subject matters. From another perspective, with the researcher being the students' instructor at all MoHP technical health institutes in the Governorate of Ismailia, several observations and discussions with students led to the informed conclusion that they had *not* been exposed to native EFL listening, nor had they performed much EFL speaking. The English course content analysis administered, i. e. by Albaaly (2022b), to the nursing students studying the same course of English revealed the '*entire inexistence*' of both listening and speaking skills in the students' course of English, and this led to the students' related *weaknesses* in these skills and related sub-skills. This all helped to form a strong basis for a rationale for conducting the present study as to finding new ways to improve the skills.

Documenting the problem with the students, the researcher held a recorded focus group semi-structured interview with the (Technical Health) Tumour Nursing Institute students (N. 26), as in Appendix A1 (Recorded Videos of the Interview). The students aired and confirmed

the previously raised problem, revealing causes and suggestions. In the interview, students expressed the importance of listening and speaking skills to them as future nurses but stressed that their course of English 'did *not* include them.' They pointed out that their "society doesn't have them", according to their words of mouth, by which they meant their original language in Egypt was not English and that was why they were not good at the EFL listening and speaking skills as they 'did not exist in their EFL course'. They also said that their instructors did *not* speak much in English and used Arabic instead though their courses were written in the English language. They also said that they needed the listening and speaking skills at their workplaces. They expressed their desire for the course of English to 'include the two major skills' and pointed out that they 'needed them to help them to be able to understand others, conversations, audios, and information in English.' They added that they 'needed to communicate with others in English and share ideas.'

To confirm the results even further, another recorded interview (Appendix A2) with the same set of questions was conducted with the (Technical Health) Health Insurance Institute Nursing students (n.25). It is noteworthy that the same course of English was taught at both institutions, according to the researcher's experience as an instructor of the two groups of students, and as courses were imposed centrally by the MoHP. The same results were reached, which meant the problem was widely spread and common.

From another perspective, the evidence screened earlier concluded that websites/ website-based activities could assist in enhancing the listening and the speaking skills. The 'Easy English' website (<https://www.youtube.com/channel/UCTRHeqh7UqWuKRymXoqzbzA>) was found to provide a bulk of native listening material that almost everyday situation EFL learners needed in managing listening and conversation in life was there. It was thought that if this material/audio content had been taught by a professional instructor who would prepare lesson notes stressing vocabulary, structures idioms, phrases, pronunciation, analyzing speech, and making sure the students would know the Arabic interpretation, leading to a full understanding of each

audio, and if this learning had been transferred by the learners to a later speaking context, this might have made a difference.

As surveyed earlier, using speech analysis, sentence-recital, and simultaneous interpretations generally have positive instruction effects on learning. Therefore, it was decided to experiment with their effects with their integration with new activities designed around 'the Easy English' website native-speaker audio material which had not been experienced as class teaching material before.

1.12. Aim of the Study

The **aim** of the present study was to enhance nursing students' the 'EFL-course-missing' listening and speaking skills through '*easy English*' website-based activities with speech analysis, sentence-recital, and simultaneous interpretation and through the same activities offered in the traditional method and to assess students' perceptions of both instruction methods. To achieve this aim and test the enhancement level and students' perceptions, 'four sub-aims' were set:

1. Assessing the effects of '*Easy English*' Website-based activities with speech analysis, sentence-recital, and simultaneous interpretation (i.e. designed by the researcher around the audio conversations on the website including the techniques) on nursing students' listening and speaking skills,
2. Assessing the effects of the same '*Easy English*' Website-based activities with normal listening presentation and without the three techniques mentioned earlier (i.e. in the traditional method) on nursing students' listening and speaking skills,
3. Comparing the effects of the two methods of instruction on the nursing students' listening and speaking skill performance, and
4. Investigating students' perceptions of and satisfaction with both methods of instruction.

1.13. Questions of the Study

Answers to the following **questions** were sought:

1. What are the listening and speaking skills required for nursing students?
2. What are the aspects of '*Easy English*' Website-based activities with speech analysis, sentence-recital, and simultaneous interpretation incorporating those skills?
3. How far are the '*Easy English*' Website-based activities with speech analysis, sentence-recital, and simultaneous interpretation effective in enhancing the 'listening' skills of the nursing students?
4. How far are the '*Easy English*' Website-based activities with speech analysis, sentence-recital, and simultaneous interpretation effective in enhancing and speaking skills of the nursing students?
5. How far are the '*Easy English*' Website-based activities with the traditional method effective in enhancing the listening skills of the nursing students?
6. How far are the '*Easy English*' Website-based activities with the traditional method effective in enhancing the speaking skills of the nursing students?
7. How far are the '*Easy English*' Website-based activities with speech analysis, sentence-recital, and simultaneous interpretation compared to those with the traditional method effective in enhancing the listening skills of the nursing students?
8. How far are the '*Easy English*' Website-based activities with speech analysis, sentence-recital, and simultaneous interpretation compared to those with the traditional method effective in enhancing the speaking skills of the nursing students?
9. How far are the nursing students satisfied with the '*Easy English*' Website-based activities with speech analysis, sentence-recital, and simultaneous interpretation?/ What are their perceptions of the instruction?
10. How far are the nursing students satisfied with the '*Easy English*' Website-based activities with the traditional method?/ What are their perceptions of the instruction?

2. Method

To collect and analyze data to achieve the aims of the study, certain procedures were followed. These procedures are reflected below.

2.1. Design of the Study

The study adopted a quasi-experimental approach, adopting two experimental groups of participants: the first one (G1) and the second one (G2). G1 was taught 'Easy English' Website-based activities with speech analysis, sentence-recital, and simultaneous interpretation, in addition to the regular procedures for teaching listening. G2 was taught via the regular method: without speech analysis, sentence-recital, and simultaneous interpretation, following the regular instructional listening procedures with the aid of a laptop and external speakers. Each group was twenty-eight participants. It is noteworthy that, to obtain power, both G1 and G2 had to be equal in number (Althubaiti, 2022, pp. 74-75). A listening pre-post-test and a speaking pre-post-test were planned, prepared, and designed by the researcher, and then administered separately to each group before and after teaching.

Each group of participants consisted of twenty-eight participants, with G1 belonging to the Tumour Nursing Institute, and G2 to the Medical Insurance Nursing Institute. The participants come from a diversity of backgrounds representing the same characteristics as the other institutes. They studied the same courses as all courses were imposed by the MoHP. They shared the same bulk of instructors from the MoHP. and from the Egyptian Universities. They were localized in the MoHP hospitals and received training there in the same way as the rest of the institutes did. Besides, they came from the same origins as the other participants and obtained almost the same marks to join their institutes (%85 or higher).

The sample was purposeful because the study design was quasi-experimental, not experimental and the results are limited to the whole participants in both institutes as they formed all the participants. However, it is argued that the sample represented a population of 277 students at other similar hospital-situated Tumour/Health Insurance Nursing Institutes in Egypt (the sample size exceeded %10 percent of the entire population and it represent the characteristics of other students in

other governorates). It is known that when the population is under 1000 with a power of %95 or over this estimate, a statistical significance of %5 or above (see hypotheses of the study stated later), a high effect size due to literature-informed expectations, ensured validity and reliability of instruments, then the sample size can be small or about %10 of the population (Hawley et al., 2019, pp. 197-201; Lenth, 2001, pp. 187-191).

From another perspective when the teaching intervention-rich activities were new, i.e. since the present participants had not been exposed to any similar training (Appendix A1 and A2 prove this), then it is appropriate to use a purposeful sample out of the entire population to explore the effects of the new interventions (Foo & Foo, 2022) or to provide in-depth studying.

2.2 Participants

The study comprised fifty-eight participants. Twenty-eight of them were students belonging to a five-year study Tumour Nursing Nursing Institute (Sometimes called Tumour Nursing School) supervised technically and staff-wise by the Technical Health Nursing Institute in Ismailia belonging to the Egyptian Ministry of Health and Population (MoHP). These participants were later assigned to the first experimental group (G1). The ministry textbooks were taught at all nursing institutes of all types. Approval to conduct research on the participants was obtained. This is expressed in the videos in Appendices B1 and B2 to ensure participants' consent to participate in the experiment from an ethical point of view.

The participants were training to be future nurses. They were in their final year of a five-year study, and this was the only level I was allowed to teach. They reside in Ismailia Governorate and come from different economic, cultural, social, and economic backgrounds.

It is worth mentioning that over eight schools following the same MoHP instructional, technical, and administrative systems and courses were established decades before the experiment. Therefore, the sample was representative and arbitrary in this regard as all characteristics of the other participants everywhere existed in them.

To carry out the experiment, approval of the supervisory institution was obtained. Evidence for this is in Appendix B3, as stated before.

The other twenty-eight participants, later assigned as second experimental group (G2) taught with the traditional method, comprised participants at the Health Insurance Nursing Institute studying the same courses and being in the same year of study (5th Year). Again, they were training to be future nurses. They reside in Ismailia Governorate, too, and come from the same economic, cultural, social, and economic backgrounds.

2.3 Instruments of the Study

Four instruments were prepared, designed, and conducted by the researcher to check the effects of the website-based designed activities on participants' listening and speaking. 1. a listening pre-post-test to help assess the effects of the listening activities 2. a speaking pre-post-test to help assess the effects of the speaking activities 3. An in-action session evaluation questionnaire to evaluate the instruction of each session for an in-action instruction improvement, and 4. An on-action evaluation form (in two versions) to assess participants' perceptions of (and thus satisfaction with) the activities.

2.3.1 & 2.3.2 The listening and the speaking pre-post-tests:

The listening and the speaking pre-post-tests (Appendices C1 and C2) were prepared, designed, and administered to both groups by the researcher. As the listening test aimed to assess the skills of listening for gist, listening for specific information, and listening for details, it contained six audios with questions handling the three skills, two for each one.

The audio for the listening test originated from one of the website's audio series which was saved and not taught to the participants. The aim of the test was to assess the participants' proficiency, not their achievement, in the skills of listening. For speaking, each two participants had to talk on three topics identified by the examiner, each for three minutes. For proficiency assessment, the participants were assessed on showing their *skills* in a new, unexpected task, not on presenting what they had learned (achievement), as there is a difference

between the two terms (Miley & Farmer, pp. 199-200). The range number of listening questions for the audio was from four to six questions per audio.

As the test of speaking also aimed to assess the speaking skills discussed earlier, it incorporated, again, three tasks asking each pair to speak over a particular pre-set everyday topic for three minutes each non-stop. (Related validity and inter-rater reliability are discussed below). To assess their speaking fully, each two participants was asked to interact with each other on a particular given task set by the examiner (i.e. in this context, the researcher). The test was recorded (for examples of the test, see Appendix D). The recorded events aided a later two-rater assessment in order to reach an average score. Overall, the test included twenty-five speaking tasks. Each two participants had to speak about three of them chosen by the examiner. One-minute preparation time was optionally given to the participants to prepare themselves after participants were informed of the speaking topic.

As to the listening test scoring, each question assessing listening for specific information and listening for details deserved one and a half marks, but the gist question deserved three marks and was delayed to the end as the audio had to be played only once for a rigid assessment of performance. The total listening score was fifty-one marks.

The scoring of the speaking section was calculated by the British Council criteria/rubric descriptors for speaking on the IELTS. Namely, they were Fluency, coherence, lexical supply, grammatical variety and accuracy, and pronunciation. This comes up with the six speaking skills taught in this regard and mentioned earlier. (https://takeielts.britishcouncil.org/sites/default/files/ielts_speaking_band_descriptors.pdf IELTS speaking Band-Descriptors – scoring criteria for Academic and General Training Tests. The reason this set of criteria was determined was that it included a thorough coverage of the skills addressed during the activities and needed to be assessed.

Twenty-one marks were allocated for the speaking test. Each component of the six assessed deserved 3 marks for the three tasks selected for the test, except fluency

which deserved six marks because of its special significance to a speaker (for a rationale, see below). Thus, there was a change in the British Council rubric which deserved six marks as the top mark; now, it was seven for each task or twenty-one for the three tasks.

Lennon (1990) pointed out that, in speaking exams, fluency differs from the other scores (e.g. accuracy or the other components) as it is perfectly a performance phenomenon and uniquely reflects easiness and proficiency on the part of the speaker. (p. 391).

The reliabilities of both the listening and the speaking tests were calculated by a test-retest method with an administration interval of two weeks. A sample of twenty-eight participants from the Technical Health Nursing Institute in Ismailia, studying the same courses in the same equivalent year of study, participated in a two-week-interval two test occasions, and scores were obtained. The correlation coefficient between the two test occasion scores was 0.983 for the listening test and 9.991 for the speaking test. This meant the two tests were reliable.

According to Soemantri et al. (2023) and Good (2013), the validity of assessment of productive skills, such as writing and speaking, is confirmed by an inter-rater-reliability procedure. In line with this, an inter-rater reliability was administered to the speaking test results. Therefore, an estimated Pearson correlation was administered. Table 1 (a) shows the results:

Table (1a) Inter-Rater Reliability with Pearson Correlation

		V1	V2
V1	Pearson Correlation	1	0.955
	Sig. (2-tailed)		<0.001
	N	28	28
V2	Pearson Correlation	0.955	1
	Sig. (2-tailed)	<0.001	
	N	28	28

As indicated in Table (1a) above, for both the set of marks of the first rater (V1) for 28 participants and the set of marks of the first second rater (V2) for the other 28 participants, the Pearson correlation is 0.955 at a significance level of <0.001 for both sets. This meant that the test was valid and reliable.

On the actual pre-post-test events, another examiner's assessments of the recorded test events were conducted. The two scores of the first and the second examiners were accumulated and divided by two, for an average score. The purpose was to eliminate the inter-rater bias of the speaking scores.

2.3.3 In-action session evaluation

To ensure ongoing session improvement in performance and student engagement in learning, and to aid the later interpretation of results, every session had an in-action (post-)session evaluation. Towards this end, questions were asked at the end of each session and included, inquiring about participants' enjoyment of the session, related advantages and disadvantages, details of benefits to the participants, and changes for better success. The following were the exact questions asked:

1. Did you enjoy today's session?
2. What did you enjoy about it?
3. What was good about today's session?
4. What was not good about it?
5. What should be changed to make the teaching better?

(The exemplary videos in Appendix F show the in-action session evaluation of the two groups.) Finally, there was an on-action perception of the activities/instruction to assess participants' general satisfaction in a mixed-method of inquiry (as discussed below) to ensure length and depth of investigation. This is discussed below.

2.3.4 Whole-instruction/ on-action perception form

A form (in two versions) was prepared, designed, and administered to assess the participants' perceptions of and thus satisfaction with the *Easy English* website-based activities (instruction) offered with the two methods. The form acted like a survey. Another aim behind it was also to double-assess and finalize the assessment of the effectiveness of

activities in both forms of instruction descriptively. Thirty items were prepared, twenty-seven of which had the Likert scale: never, occasionally, sometimes, often, and always (with points from 1 to 5), and three questions were open-ended questions asking participants to provide more information. Thus, the form was both scale-type and questionnaire-type to gather in-depth information from the participants. It is worth mentioning that it is recommended for on-action perception forms/surveys to use a mixture of both quantitative and qualitative methods, for example, rating scales and open-ended questions, to offer both numerical and narrative data to improve instruction (Soto-Estrada et al., 2018).

Two versions of the form were prepared to suit each group's intervention. When the two-version form items were designed, the guidance offered by Soto-Estrada et al. (2018) and DaRosa et al. (1996) was followed in terms of adding items related to instruction effectiveness, activity development, student participation, feedback, teaching process, learning benefits, assessment, and overall satisfaction.

To ensure the **Construct Validity** of the instrument, the form in the two versions was prepared and, then, submitted to two professors in ELT. No modifications were advised, which meant the form in its two versions was valid. The **reliability** was calculated using the 'Cronbach Alpha coefficient formula'. The result for both versions was %91.3, which indicated the two-version form was reliable. According to Bonett (2002), if the coefficient is above 0.7 or close to 1, then the items of the survey are reliable.

The form was sent electronically via Google Forms. Two versions of the form were designed by the researcher to suit each group's method of instruction and to assess each group's satisfaction with the instruction specific to each group. The two versions were identical except for items 26 and 27 which were group-specific and asked about the techniques/method of instruction used, depending on the group asked, and requested an explanation of the participants' responses. For the G1 version, it is available at <https://forms.gle/fRES7PuEiYUZW9qK8> and for the G2 one <https://forms.gle/dc3Rt2J8ShdWCpn59>. (Note that in order to open the two links and related ones, a Google account must be

opened first) The results for each version are documented at <https://forms.gle/mUL2nryUTHD2sshy8> and <https://forms.gle/PdjaHEPmSB5aWf9F6> and analyzed in Tables (9a) and (9b) shown and interpreted later in the Results and Discussion section of this study.

2.4 Two- Groups' Equivalency Procedures

To ensure that the two groups were equal in the performance of both the listening and speaking skills and to later obtain valid results, a *t* test was run twice to ensure that there were no statistically significant differences between G1 and G2, to compare the two group results once for the listening skills and another for the speaking ones. Both the *t* test results later showed no statistically significant differences between the two groups on the listening and speaking skills. These results (i.e. below) were thus determined to be the 'experiment's *dependable* pre-test results' for both the listening and the speaking skills because they had shown no statistically significant differences, as proven below.

Regarding the listening skills, Table (1b) below shows the mean scores and standard deviations of both groups on the 'listening pre-test'.

Table (1b) comparison of the two groups on the listening pre-test

Group	N.	Mean	Std. Deviation
Pre-test	28	14.18	6.549
Post-test	28	13.29	6.553

Table (1b) above demonstrates a statistical comparison related to G1 and G2 on the listening pre-test. The mean scores of the first and the second groups are 14.18. and 13.28., which even meant there was no initially considerable difference between the two groups on the listening pre-test (difference value=approximately 1). The difference in standard deviation was also slight (approximately 2), which meant the participants' scores were close. Thus, the score equal variance was assumed, and this is later confirmed in another way. To check whether the difference in mean scores was statistically significant, Table (1c) below provides the relevant data:

Table (1c) Independent Samples Statistics for G1 and G2 Listening Pre-test

	Leven's <i>F</i>	Sig	<i>t</i>	df	Probability of power (<i>p</i>)
Equal variances assumed	1.630	0.564	- 0.592	54	0.278

As shown in Table (1c) above when equal variances are assumed, F equals 3.630, F -related significance 0.564, t -0.827, degree of freedom 54, and probability of p 0.278, on one hand. The Leven's F and related significance imply that there is equality of variance/homogeneity between the two groups (Al-Ali & Shamaileh (2015)). The t value mentioned in Table (1c) informs that there is no significance of the difference. The probability of p also informs of no statistical significance of the difference between the two group mean scores for the listening pre-test.

Regarding the speaking skills, to confirm there were no statistically significance differences in the mean scores of the two groups on the speaking pre-test, Tables (1d) and 1 (e) provide relevant data.

Table (1d) Group Statistics for the Speaking Pre-Test

Group	N	Mean	Std Deviation
1	28	5.482	1.723
2	28	5.911	2.135

Table (1d) above demonstrates a statistical comparison between G1 and G2 on the speaking pre-test. The mean scores of the first and the second groups were 5.482 and 5.911 which even meant there was no initially considerable difference between the two groups (difference value=0.429) on the speaking pre-test. Even, the difference between the standard deviation of the mean in G1 (1.723) and that of G2 (2.135) was marginal (Std difference=1.587). To confirm whether the difference in mean scores is statistically significant or not, Table (1e) provides the conclusive data:

Table (1e) Independent Samples Statistics for the Speaking Pre-test

	F	Sig	t value	df	Probability of p
Equal variances assumed	3.658	0.061	-0.827	54	0.206

As shown in Table (1e) above, F equals 3.658, F -related significance 0.061, t value -0.827, degree of freedom 54, probability of p 0.206. The value of F and F -related significance inform of equal score variances. Most importantly, the t value in Table (1e) informs of 'no significance' for the difference. The probability of p further informs of no statistical significance of the difference between the two group mean scores in the speaking pre-test.

Therefore, it was concluded that the two-group performance on both the listening and the speaking skills was 'equivalent.'

2.5 Material, Teaching, and Teaching Implications

The Targeted listening and speaking skills were identified by the supervisory Technical Health Nursing Institute Quality Specifications for Technical Nursing Students (which also had grounds in literature). They were mainly three for listening: *listening for gist, listening for specific information, and listening for details*. For the speaking skills, the institution identified six (listed below). In essence, the targeted listening and speaking skills for the nursing participants were also those required by The General Administration for Technical Health Institutes Quality Specifications (2015).

Again, **the listening skills** taught were three: listening for gist, listening for specific information, and listening for details. Randomly or somehow purposefully,

The speaking skills targeted were 'also' stated in Ahmed (2020) and Campoy-Cubillo (2016). They were as follows:

1. The ability to pronounce words and sentences clearly and accurately for communication purposes (also mentioned in Campoy-Cubillo, 2016)
2. The capacity to speak with an appropriate amount of fluency
3. Using a range of words and phrases to effectively express ideas
4. using grammatical rules and structures in speech to construct sentences correctly and convey meaning accurately
5. having self-confidence in the student's ability to communicate effectively in English

6. Organizing ideas logically and presenting them clearly and cohesively for the listeners' ease of understanding (Ahmed, 2020). These lists of listening and speaking skills above answer the first study question: 'What are the listening and speaking skills needed for nursing students?' The listening and speaking activities were designed around the audio material represented in the content conversations of the Easy English Website

<https://www.youtube.com/channel/UCTRHeqh7UqWuKRymXoqzbxA>

and based on the listening and speaking skills mentioned above. The website is on YouTube and addresses topics handled in everyday English which is needed by any EFL learner. A synopsis of the conversation

topics handled and taught to the participants in both groups is mentioned below.

The number of sessions was twenty-four held during the second term of the academic year 2024, with the presentation of topic-handling listening activities followed by related speaking ones. Each skill development was steadily reflected in the objectives for every session and the whole of the activities was designed around the listening material on the website. The Exemplary Session Notes in Appendix E present the planning and dynamics of teaching each session common to both groups. This included objectives of the session, procedures, language taught (vocabulary and idioms), and questions asked to participants to aid participants' development in the related listening skills followed by a presentation of a related speaking topic. The teaching procedures were as follows:

In the classroom, after finishing a listening activity following normal procedures mentioned later, participants were asked to work in pairs to talk about a topic related to what they have listened to and then discuss it (i.e. using pronunciation, vocabulary, structures, idioms, and phrases, etc. learned from the listening activity). At times, the instructor administered a hole-group discussion after the pairs had finished talking followed by gentle awareness raising of corrections to mistakes the participants made.

Examples of listening and speaking topics included, but were not limited to, 'talking about yourself, my home, my family, my job, my hometown, my hobbies, on the street, getting candy, lost child, helping someone in need, at the airport, at the dentist's, at the police station, electronics, at a hotel, committing a traffic offense, at the bank, at the restaurant, ordering catering, at the farmer's market, plumbing issues, at the coffee shop, at the fast food restaurant, at the flea market, garage sale, at the gym, a dilemma, give me more clues, give me a big smile, starting a relationship, a manager at work, rejecting a relationship'. Several topics in particular embedded useful idioms, but all topics included new vocabulary which had to be presented before playing audio.

Other audio conversations on the website also handled grammar and tenses, vocabulary. The grammar included but was not limited to, 'used to', 'if', 'prepositions', and the main English tenses. The vocabulary section videos handled pieces related to places, clothes accessories, body parts, foods and drinks, feelings, and emotions, for example.

For the **Construct Validity of the activities**, a jury of three members from both Suez Canal University and Zagazig University examined the listening and speaking activities. No amendments were made, and thus, both the listening and the speaking activities were valid.

Participants lacked confidence and fluency in speaking at the beginning. To overcome this problem, they were told that they needed this skill/speaking for their work and that to speak more they also needed “to use the last piece of information in a sentence they produce and make use of it to about the coming point and to keep following the same technique to produce new sentences,” the instructor clarified. In this way, “you can talk nonstop,” the instructor maintained. This helped with their confidence and fluency.

The teaching adopted the active learning pair-work strategy in both groups with rich exposure to the audio material. After the warm-up followed by a question for gist, the participants were given time to discuss answers to the pre-asked question in pairs before giving their answers. Presentation of vocabulary blocking understanding was made to facilitate understanding before a second time listening preceded with information and objective questions. Again, participants discussed their answers in pairs before giving them. When speaking, they carried out the activity in pairs, too. Besides, a possible later whole-group discussion was conducted and followed by gentle corrections. Each group was allowed to further their learning of listening to material on the website at home, as extra-curricular activities and rehearsals.

2.5.1. G1 specifics

Though the normal sequence of teaching listening was followed in both groups, certain different procedures were included in the G1 instruction. These included the using the following techniques:

2.5.1.1. Speech analysis

The sentences and words were analyzed acoustically for the participants in G1. Much focus was on pronunciation: syllables, acoustic phenomena, etc.

2.5.1.2 Sentence-recital

the instructor stopped at the end of each sentence, asking participants to recite it as it was in English. When the participants could not follow, a re-play of the sentence took place.

2.5.1.3 Simultaneous interpretation

After reciting each sentence, the participants were asked to simultaneously interpret each sentence in Arabic.

This answers the second study question: What are the aspects of '*Easy English*' Website-based activities with speech analysis, sentence-recital, and simultaneous interpretation incorporating those skills?

2.6 Delimitations:

This study is delimited to the following conditions:

2.6.1 Nature and setting: The *Easy English* website-based activities were used to refer to 'instruction' that targeted the teaching of everyday English (EGP), not English for Nursing including medical terms (ESP). The listening conversations were played online. The related teaching settings were the Tumour Nursing Institute (i.e. for G1) and the Health Insurance Nursing Institute (i.e. for G2) during the second term of the academic year 2024-2025. Both institutes belonged to the MoHP technical health institutes.

2.6.2 Dynamics: G1 was taught '*Easy English*' website-based activities coupled with speech analysis, sentence-recital, and simultaneous interpretation techniques and taught via a single computer controlled by the instructor as a medium of playing the audio conversations, and in the second group, the same procedures were followed without conducting speech analysis, sentence-recital, and simultaneous interpretation. In both groups, participants were allowed to take notes, and the teacher used a whiteboard to present new material. Each group was allowed to further their learning listening to material on the website at home, as extra-curricular activities and rehearsals.

2.6.3 The targeted skills: The targeted listening and speaking skills for the nursing students were those required by Institute Quality Specifications

2.6.4 The listening skills taught were three: listening for gist, listening for specific information, and listening for details.

2.6.5 The speaking skills targeted were the ones required in the Institute Quality Specifications:

1. The ability to pronounce words and sentences clearly and accurately for communication purposes
2. The capacity to speak with an appropriate amount of fluency
3. Using a range of words and phrases to effectively express ideas
4. Using grammatical rules and structures in speech to construct sentences correctly and convey meaning accurately
5. Having self-confidence in the student's ability to communicate effectively in English
6. Organizing ideas logically and presenting them clearly and cohesively for the listeners' ease of understanding (Ahmed, 2020).

2.6.6 Sampling: The two experimental groups taught included fifty-six participants: twenty-eight participants each, with the first experimental G1 and the second G2.

2.6.7 Learning transfer: Listening was taught as a separate skill at the beginning. However, the participants were then encouraged to transfer the learning they gained from the listening activities to the speaking ones based on their listening.

2.6.8 The two-group commonalities: the teaching of listening material to both groups was carried out via a laptop connected to external speakers. The teaching of speaking was performed through pair interaction, sometimes followed by group discussion of the speaking topics. However, the assessment of speaking or the speaking pre-post-test only relied on pair interaction.

2.7 Hypotheses of the Study

Based on conclusions drawn from the literature and the rich evidence discussed earlier, the study expected to verify the following three hypotheses:

1. There is a statistically significant difference between the mean scores of G1 on the listening pre-test and those of the same group on the listening post-test in favor of those of the listening post-test.

2. There is a statistically significant difference between the mean scores of G1 on the speaking pre-test and those of the same group on the speaking post-test in favor of those of the speaking post-test.
3. There is a statistically significant difference between the mean scores of G2 on the listening pre-test and those of the same group on the listening post-test in favor of those of the listening post-test.
4. There is a statistically significant difference between the mean scores of G2 on the speaking pre-test and those of the same group on the speaking post-test in favor of those of the speaking post-test.

According to the literature surveyed earlier, many methods of instruction generally had effects on students' learning of listening and speaking. It was then expected that the two groups would perform higher on the post-test. Therefore, the differences in mean scores on the listening and speaking post-tests for both would not be significant. Thus, two null hypotheses were expected and thus added to express this presumption:

5. There is no statistically significant difference between the mean scores of G1 on the listening post-test and those of G2 on the same test.
6. There is no statistically significant difference between the mean scores of G1 on the speaking post-test and those of G2 on the same test.

2.8 Statistical Procedures

The Statistical Package for Social Sciences application (SPSS Version 28) was used in the computed statistical analysis of the results. To answer the study questions and verify hypotheses, particular targeted resultant operations were processed and they included means (and mean difference), standard deviations, *t* value, probability of power (*p*), Cohen's *d* point estimate, Cohen's *d* %95 confidence interval.

3. Results and Discussion

This section provides answers to the study's ten questions stated earlier and offers related interpretations. While the first two questions were answered during the experiment's preliminary method procedures, the remaining 'eight' questions are addressed below. Nonetheless, the answers to the last two questions of these eight ones are addressed

descriptively as they are different in nature. Answers to the first two questions are stressed below.

The **first** question ‘What are the listening and speaking skills required for nursing students’ is answered in the ‘Material, teaching, and teaching dynamics section’, settling on three listening skills and six speaking ones, as indicated earlier. The **second** question ‘What are the aspects of ‘*Easy English*’ Website-based activities with speech analysis, sentence-recital, and simultaneous interpretation incorporating those skills?’ is also answered during the course of the study procedures, i.e. in the sections: Material, teaching, and teaching dynamics and G1 specifics, as indicated earlier.

In order to answer the third-to-the-tenth questions, computerized statistical results were obtained and analyzed, having administered the computerized SPSS treatment. Answer to the third question is addressed below.

To answer the **third** study question, ‘How far are the ‘*Easy English*’ Website-based activities with speech analysis, sentence-recital, and simultaneous interpretation effective in enhancing the listening of the nursing students?’,

Tables (2a) and (2b) demonstrate the first group participants’ statistical difference in mean scores and related significance on the listening pre-post-test. Table (2a) below shows the group’s mean scores, group numbers, standard deviation, and standard error mean on the listening pre-post-test:

Table (2a)
G1 means and standard deviations on the listening pre-post-test

Occasion	N	Mean	Std Deviation
Pre-test	28	14.18	6.594
Post-test	28	33.79	7.890

Table (2) shows G1’s group numbers, mean scores, standard deviation, and standard error mean on both the pre-test and the post-test. On the pre-test, the values were 14.18, 28, 6.549, and 1.238, respectively. On the post-test, they were 33.79, 28, 7.890, and 1.491, respectively. It was observed that there was a significant difference in mean scores on both occasions. This happened as the participants benefitted much from the experiment intervention. This is even supported by participants’ feedback during the in-action session evaluation in Appendix F and their

responses to the first version of On-Action Perception Form; for results of this evaluation, see Table (9a) and related interpretation. This is also confirmed by the marginal difference in standard deviation, which meant approximately all the participants had closer scores and performed well. This was one the most important observations during the experiment.

To obtain the mean difference, its significance, statistical significance, effect-size level, in order to check the related hypothesis, Table (3) below shows the difference in means, standard deviation, t value, probability of p , Cohen's point estimate, and Cohen's d %95 Confidence interval.

Table (2b)

Statistical significance of the mean difference and effect size for G1 on the listening pre-post-test

Mean Difference	Std. Deviation	t value	Probability of p	Cohen's d point estimate	Cohen's d %95 Confidence interval
					Lower Upper
-19.607	5.705	-18.187	<0.001	3.437	-4.416 -2.448

Table (2b) above demonstrates G1's difference in mean scores, size of difference (using standard deviation, significance of difference using t value, effect-size level using Probability of p , and practical significance/effect-size using Cohen's d point estimate (Cohen, 1988). The values in the table above are -19.607, 5.705, -18.187, <0.001, 3.437, and -4.416 for the lower confidence interval and -2.448 for the upper, respectively. Since the difference in mean score (-19.61) appears to be quite big, this may pose a query over the difference between the participants' lowest and highest scores, and, since the standard deviation is 5.71, this cannot be considered a considerably big difference and fills this query gap. To determine whether the difference in mean scores was significant, the t -value (-18.187) is seen to prove this presumption (Cohen, 1988). The Probability of p determines the power of the experiment and shows a high statistical significance (< 0.001). Cohen's point estimate (1988) confirms that the difference is at a *high* practical significance level (3.437) and shows a *large* effect-size.

Because Cohen's d %95 Confidence interval does not include in its range a zero value (-4.416 lower and -2.448 upper), the alternative hypothesis is accepted (Amer, 2024; Cohen, 1988). Of this, as far as listening is concerned, it can be stated that 'There is a statistically

significant difference at <0.01 statistical significance level between the mean scores of G1 on the listening pre-test and those of the same group on the listening post-test in favor of those of the listening post-test.' This confirms the first study hypothesis at <0.01 statistical significance level.

To answer the **fourth** study question, 'How far are the 'Easy English' Website-based activities with speech analysis, sentence-recital, and simultaneous interpretation effective in enhancing and speaking skills of the nursing students?',

table (3a, 3b, 3c, and 3d) provide the statistical analysis needed for the answer. Table (3a) shows the mean scores and standard deviation of G1 on the pre-post-test occasions.

Table (3a)
Mean scores and standard deviation of G1 on the speaking pre-post-test

Group	N.	Mean	Std. Deviation
Pre-test	28	5.482	1.724
Post-test	28	12.571	2.456

Table (3a) shows the mean scores and standard deviation for G1 on the pre-post-test occasions. The means are 5.482 on the pre-test and 12.571 on the post-test, which informs of a considerable difference which can be referred to the intervention used. The standard deviation is 1.724 for the pre-test and 2.456 for the post-test. The inconsiderable difference in the standard deviation of both occasions is referred to the commitment of participants during the experiment which made close their scores. To examine the difference in the pre-post-test mean scores and to identify whether it is statistically significant to verify the hypothesis, statistics of mean, t , Probability of p , and %95 confidence interval of the difference were run and obtained. Table 3 (b) shows the results.

Table (3b)
Statistical significance of the mean difference and effect size for G1 on the speaking pre-post-test

Mean difference	Std. deviation	t value	Probability of p	%95 confidence interval	
				Lower	Upper
-7.089	1.826	-20.544	<0.001	-7.797	-6.381

Table 3 (b) shows the mean difference, standard deviation, t , probability of p , %95 confidence interval of the difference. They are -7.089, 1.826, -20.544, <0.001 , and -7.797 lower and -6.381 upper, respectively. As indicated in Table (3b) above, there is a considerable mean difference

referred to the intervention. The standard deviation also indicates a minor difference in participants' marks for reasons discussed earlier.

The t value in the table above indicates that the difference is significant and the probability of p (<0.001) indicates a statistical significance at the <0.001 level (Cohen, 1988). This can emphatically be related to the participants' enjoyment and passion for the speaking activities which they liked very much. The in-action session evaluation for G1 (Appendix F) prove this. The %95 confidence interval of the difference indicates the acceptance of the alternative hypothesis, as pointed out earlier, which strongly suggests the acceptance of the current hypothesis for this question.

To identify the effect-size, Table (3c) demonstrates the Cohen's point estimate (1988) on the pre-post-test occasions.

Table (3c)
Effect size for G1 on the speaking pre-post-test

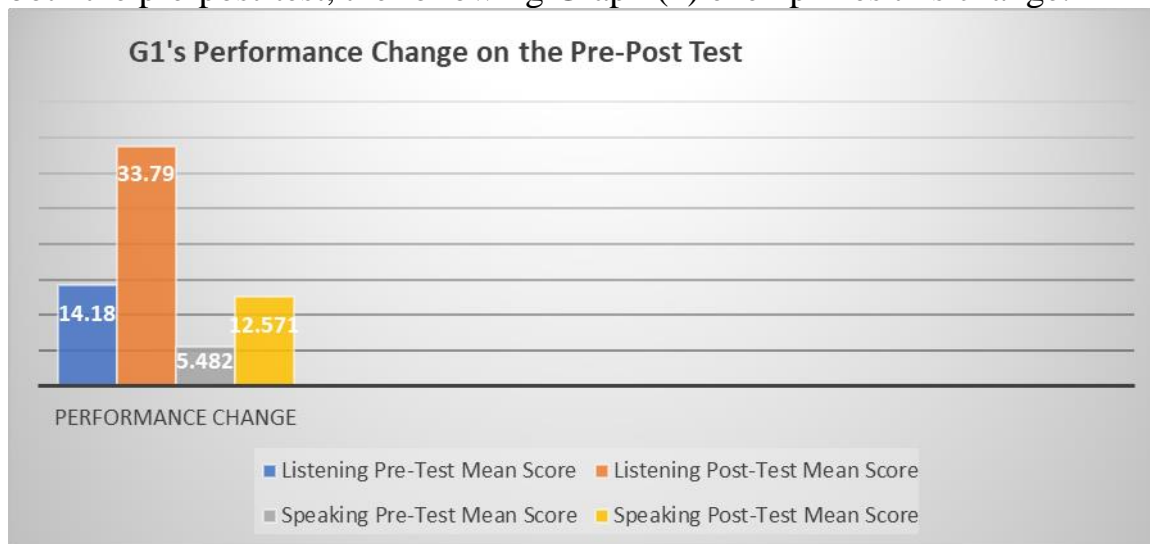
G1-G2	Point estimate	%95 confidence interval	
		Lower	Upper
Cohen's d (1988)	3.882	-4.971	-2.783

Table (3c) indicates the point estimate (3.882) which confirms there is a large effect size and the %95 confidence interval (-4.971 lower and -2.783 upper) which does not include a zero in this range and which, as discussed earlier, means the alternative hypothesis be accepted. The point estimate (3.882) indicates a *large* effect size or high-level practical significance (Cohen, 1988). This is, again, referred to the fact that the listening and speaking activities had not been introduced in the participants' course of English before the experiment, which affected the participants positively in their listening and then speaking. It can be inferred that the intervention worked well. A comparison between the pilot semi-structured interview videos (Appendix A1) supported by Albaaly's findings (2022b) on one hand and the in-action session evaluation of the group (Appendix F) and the on-action perception form results in Table (9a) and Table (9b) on the other proves this efficacy change.

Of the evidence in tables (3a), (3b), and (3c) and related interpretations, the second study hypothesis 'There is a statistically significant difference between the mean scores of G1 on the speaking pre-test and those of the

same group on the speaking post-test in favor of those of the speaking post-test.' is verified/ confirmed at <0.01 statistical significance level.

To show G1's positive change in listening and speaking performance on both the pre-post-test, the following Graph (1) exemplifies this change.



Graph (1) Performance Change Comparison

To answer the **fifth** study question, 'How far are the 'Easy English' Website-based activities with the traditional method effective in enhancing the listening skill of the nursing students?', the difference in mean scores and the effect-size were run. Tables (4) and (5) demonstrate the difference in mean scores of the participants' listening and related significance, and Tables (7a, 7b, and 7c) the statistical difference in mean scores of the participants' speaking on the speaking pre-post-test. Table (4) below shows the difference in G2's listening mean scores:

Table (4)
G2 paired sample statistics on the listening pre-post-test

Occasion	Mean	N.	Std. Deviation
Pre-test	13.29	28	4.55
Post-test	31.18	28	6.53

Table (4) shows G2's mean scores, group numbers, standard deviation, on both the pre-test and the post-test. On the pre-test, the values were 13.29, 28, and 4.55, respectively. In comparison, on the post-test, they were 31.18, 28, and 6.53, respectively. There is a far-extent increase in participants' mean score on the post-test as compared to that on the pre-test. This, in turn, again, meant that the intervention made a difference.

This was supported by the participants' views after both the In-Action Session Evaluation and the On-Action Perception Form feedback were obtained, i.e. as in Appendix F videos and as in the analysis and interpretation of Tables (9a) and (9b) addressed later. It was observed that there was a considerable difference in mean scores on both occasions. The standard deviation value on the post-test (4.55) was quite not big as the participants' levels were almost the same, but on the post-test, because several participants were not committed to attending all classes, this value increased (6.53).

To check the mean difference, significance, statistical significance, and effect size, Table (5) below shows the difference in means, standard deviation, t value, Probability of p , Cohen's d point estimate, and Cohen's d %95 Confidence interval.

Table (5)
Mean difference, statistical significance, and effect size for G2 on the listening pre-post-test

Mean difference	Std. deviation	t value	Probability of p	Cohen's d point estimate	Cohen's d %95 confidence interval	
					Lower	Upper
-17.893	5.222	-17.791	<0.001	3.362	-4.322	-2.358

Table (5) above indicates the values for G2's difference in mean scores, the standard deviation of this difference, the significance of the difference (using t value), the statistical significance of this difference (using probability of p), and effect-size (using Cohen's point estimate). The values in the table are -17.893, 5.222, -18.791, <0.001, 3.362, and -4.322 for the lower confidence interval and -2.358 for the upper, respectively. Since the difference in mean score (-17.893) appears to be quite large (but not as big as that of the first group which is -19.607), this informs of a substantial difference due to the new 'Easy English' website activities intervened. To determine whether the difference in mean scores was significant, the t value (-17.791) is seen to prove this supposition. Even clearer, the probability of p determines the power of the experiment (<0.001) and shows a statistical significance at < 0.001 level. Cohen's d point estimate proves that the difference is at a *high* practical significance level or *large* effect size level (3.362), according to guidance from Cohen (1988).

The evidence above then proves that ‘there is a statistically significant difference at <0.01 statistical significance level between the mean scores of G2 on the listening pre-test and those of the same group on the listening post-test in favor of those of the listening post-test’. Therefore, the third study hypothesis was verified at <0.01 statistical significance level.

To answer the **sixth** study question, ‘How far are the ‘*Easy English*’ Website-based activities with the traditional method effective in enhancing the speaking skills of the nursing participants?’ Tables (6a), 6(b), and 6(c) below show related statistics.

Table (6a) Mean scores and standard deviations for the G2 speaking pre-post-test

Occasion	Mean	N.	Std. Deviation
Pre-test	5.191	28	2.135
Post-test	11.875	28	1.724

Table (6a) above shows the mean scores and standard deviation for G2 on the pre-post-test occasions. The means are 5.911 on the pre-test and 11.875 on the post-test, which informs of a difference that is, again, referred to the intervention used for this group. The in-action session evaluation for G2 (Appendix F) supports this claim. The standard deviation was approximately 2.13. for the pre-test and approximately 1.72 for the post-test. There is not much difference in standard deviation. To verify the hypothesis for the present question, Table (6b) below addresses the statistical significance of the mean difference and effect size.

Table (6b) Statistical significance of the mean difference and effect size for G2 on the speaking pre-post-test

Mean difference	Std. deviation	<i>t</i> value	Probability of <i>p</i>	Cohen’s <i>d</i> %95 confidence interval	
				Lower	Upper
-5.964	1.810	-17.436	<0.001	-6.666	-5.262

Table (6b) shows the mean difference, standard deviation, *t* value, probability of *p*, %95 confidence interval of the difference. They are -5.964, 1.810, -17.436, <0.001 , and -6.666 (lower) and -5.262 (upper), respectively. As implied in the table above, there appears a considerable mean difference which can be referred to the intervention. The standard

deviation does not have a big difference from the mean in participants' marks.

The t value (-17.436), as in the Table (6b) above, indicates that the mean difference is significant and the probability of p (<0.001) informs of a statistical significance at the <0.001 level (according to guidance from Cohen, 1988). This can be attributed to the participants' enjoyment and passion for the speaking activities which they liked very much. The in-action session evaluation videos for G2 (Appendix F) prove this. The %95 confidence interval of the difference indicates the acceptance of the alternative hypothesis, as clarified earlier, which suggests the acceptance of the current (alternative) hypothesis for this question.

To identify the effect size to confirm the hypothesis even further, Table (6c) shows the point estimate for the pre-post-test occasions.

Table (6c)
Effect size for G2 speaking pre-post-test

G1-G2	Point estimate	%95 confidence interval	
		Lower	Upper
Cohen's d	3.295	-4.239	-2.341

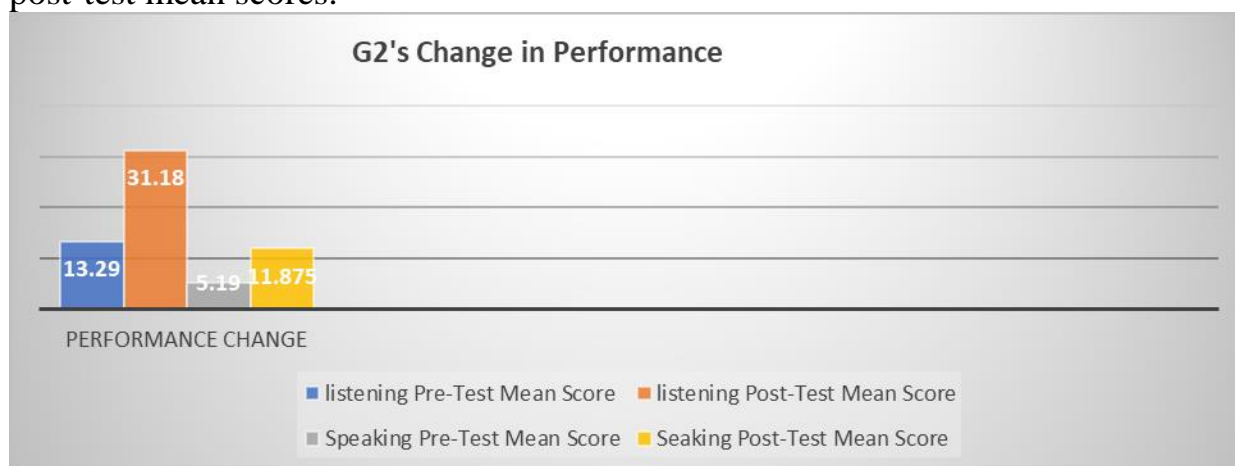
Table (6c) displays the point estimate (3.295) and the %95 confidence interval which has the range of -4.239 and -2.341. According to the guidelines of Cohen (1988), the point estimate (3.295) indicates a *large* effect size and the %95 confidence interval whose range is -4.329 and -2.341 suggests the acceptance of the alternative hypothesis, which is in the present case, the hypothesis related to the present question.

Of the statistical analysis and the following interpretation for Tables (6a), (6b), and (6c) related to detecting improvement in speaking skill, the fourth study hypothesis: 'There is a statistically significant difference between the mean scores of G2 on the speaking pre-test and those of the same group on the post-test in favor of those of the speaking post-test' was verified at <0.01 statistical significance level.

The finding above can be attributed to the fact that the speaking activities following the listening ones had not been introduced in the participants' course of English before the experiment. This positively affected the students in their listening and thus speaking. A comparison among the pilot semi-structured interview with the group later assigned

as control before the activities (Appendix A2) supported by Albaaly's (2022b) findings, the in-action session evaluation of G2 (Appendix F2), and the related on-action perception form results in Table (9b) prove this efficacy change.

To show the improvement in G2s' listening and speaking performance, graph (2) displays the comparison of their listening and speaking pre-post-test mean scores.



Graph (2) G2's Change in Performance

It is noteworthy that listening in both groups improved for several reasons. First, the participants had not been exposed to any kind of listening to native speakers before the experiment. Appendices A1 and A2 document this. Second, the participants enjoyed the everyday topics in the activities and felt they were necessary for their future jobs and communication in English at their workplaces as decided in Tables (9a) and (9b) interpreted later (for Qs. 24, 27, and 29). The in-action session evaluation sample video recordings for both groups (Appendix F) document this conclusion. Third, the meaning, pronunciation, structure, and development explanations – all helped with the overall improvement. Even clearer, as will follow later, especially G1, made a little bigger descriptive difference. This is attributed to the quadrable-intervention introduced to them: the new activities, speech analysis, sentence-recital and simultaneous interpretation.

The speech analysis used in G1, for instance, helped much in later correct pronunciation and understanding as well, i.e. as in the results and interpretation of question 26 whose results are in Table (9a) shown later.

This is in line with the findings of Tsai and Young (2010) concluding that speech analysis techniques assisted EFL learners in listening and speaking practice effectively. A dissimilarity was in the sample of Thai Airline Business learners, not Egyptian nursing students, and the sole intervention.

Similar to the speech analysis teaching in the present study, Tsai and Young (2010) discovered that explicit instruction of English pronunciation and characteristics of connected speech led to developments in listening and speaking comprehension among the Thai participants.

The sentence-recital helped with producing correct utterances and vowel pronunciation, which matches the findings of Kent and Forner (1977, p. S101) which concluded that sentence recitation aided the temporal stability and speech production and helped the sample to imitate the acoustic organization of sounds leading to correct pronunciation. However, the study differed in its sample of children. Also, the present study findings are similar to those of Prasad et al. (2017) concluding that repetition of specific sentences by the participants helped to assess various aspects of their speech production abilities and that sentence recitals analyzed the consistency and accuracy of temporal segments in speech, providing insights into the individual's ability to reproduce speech patterns and structures. A dissimilarity is in that the study of Prasad et al. (2017) was analytical and qualitative in nature.

Simultaneous interpretation, in turn, helped with creating a relaxing atmosphere, leading to full understanding and added confidence to the participants. This to an extent copes with the findings of Abdellaoui (2023) and of Damanhoury (2024) who concluded that a moderate use of Arabic translation helped improve language skills and led to better processing and enhanced learning and better retention and understanding aid. The study differed from the two studies aforementioned in their sample of Saudi learners learning Chinese, not English.

The most important observation was that the participants' speaking fluency improved much, although still there were issues mainly related to grammar and lack of vocabulary. On the post-test, almost all the

participants in both groups were able to talk for nine minutes: three minutes for each speaking task without relying on any source of assistance (Appendix D for videos of the post-test show this). Both prior to the beginning of the activities and on the pre-test, by contrast, the participants were shy and did not want to speak. They did not have confidence in themselves because they had not listened to nor spoken much English in their entire lives.

Hard work was exerted by the research/instructor, convincing them that their future job required their talking in English. When the activities had been employed and their motivation raised because they knew they needed listening and speaking in their jobs, they made a difference. Making notes might have helped the participants with this improvement during speaking, too. The participants could also convey their messages on the speaking post-test, which showed a reflection of their learning. Appendix D proves their documented improved performance on the post-test for both groups. The second dominant feature was their pronunciation which was quite acceptable. This could be referred to the amount of listening material they had been exposed to during the listening activities.

However, when it came to structures on the speaking post-test, the participants in both groups did not follow the correct ones on a number of occasions for the two groups alike. Even if after a considerable number of listening and speaking sessions, the information conveyed to the participants, and a three-month practice, the evidence tends to make prominent the conclusion that especially using correct structures in speaking needs much more practice and gentle corrections than three-month time.

To answer the *seventh* study question, ‘How far is ‘the *Easy English*’ Website-based activities with speech analysis, sentence-recital, and simultaneous interpretation compared to those with the traditional method effective in enhancing the listening skills of the nursing students?’, first, a comparison between the two groups’ difference in the post-test mean scores of listening (and whether this difference is statistically significant or not) was made in Table (7). Then, Tables (8a) and (8b) demonstrate the statistical difference in mean scores of

students' speaking on speaking on the two groups' post-tests. (As the two groups were statistically equal when the reliability of the listening and speaking tests was established, there is no point comparing the difference in mean scores and the related significance of the pre-tests.)

Table (7) indicates the mean difference, statistical significance, and effect size of the both groups on the post-tests by displaying the mean difference, t value, probability of p , Cohen's d point estimate, and Cohen's d %95 Confidence interval of both groups on the post-test:

Table (7)

The mean difference, t value, probability of p , Cohen's d point estimate, and Cohen's d %95 confidence interval for both groups on the listening post-test

Mean difference	t value	Probability of p	Cohen's d point estimate	Cohen's d %95 Confidence interval
				Lower Upper
-2.61	1.346	0.092	0.360	-0.170 -0.886

Table (7) above demonstrates the mean difference, t value probability of p , Cohen's d point estimate, and Cohen's d %95 Confidence interval of both groups on the listening post-test. The values are -2.61, 1.3346, 0.092, 0.360, and -0.170 (lower) and -0.886 (upper), respectively. The mean difference between the two groups (-2.61) is in favor of G1. The t value (1.35) confirms the conclusion that this difference is significant. The probability of p (0.092) indicates that the difference is statistically significant at <0.01 level. Cohen's d point estimate informs that the effect size is *weak*.

Of all above evidence, the fifth study hypothesis 'There is no statistically significant difference between the mean scores of the experimental group on the listening post-test and those of the control group on the same test' was then rejected, as 'there was a difference in mean scores at <0.01 statistical significance level in favor of G1 mean scores'. The effect size was slight, however.

To answer the **eighth** study question, 'How far is 'the *Easy English*' Website-based activities with speech analysis, sentence-recital, and simultaneous interpretation compared to those with the traditional method effective in enhancing the speaking skills of the nursing students?', to compare both groups' mean scores on the speaking post-test and to check whether this difference is statistically significant, Table

(8) shows the groups' mean difference, significance of difference using t value, and effect-size level using probability of p , and acceptability of the null/alternative hypothesis using %95 confidence interval of the difference lower and upper.

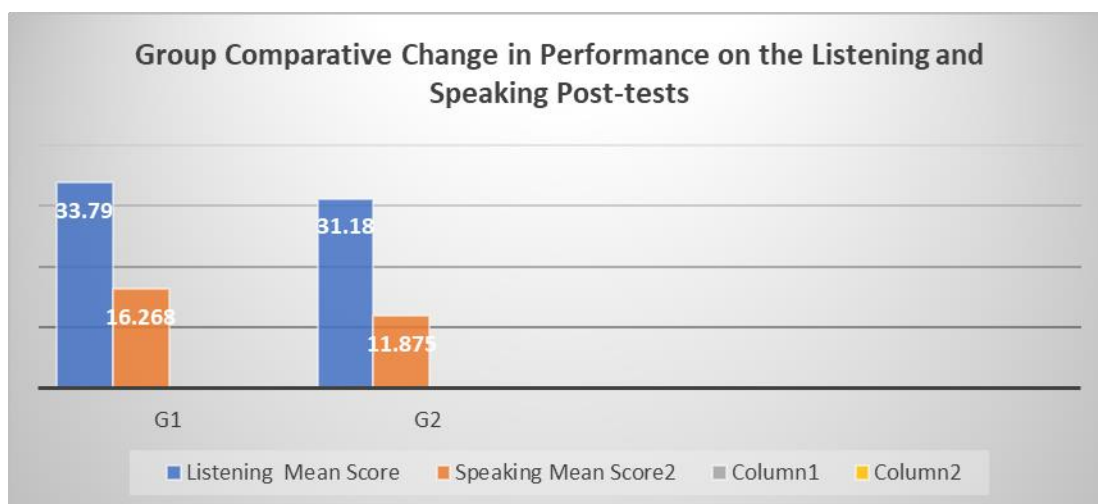
Table (8a) Comparison of the two groups' performance on the speaking post-test

Mean difference	t value	Probability of p	Cohen's d point estimate	Cohen's d %95 confidence interval
				Lower Upper
0.696	1.228	0.112	0.328	-0.201 -0.854

Table (8) above demonstrates the mean difference, t value, probability of p , Cohen's d point estimate, and Cohen's d %95 Confidence interval of both groups on the speaking post-test. The values are 0.696, 1.228, 0.112, 0.328, and -0.201 (lower) and -0.856 (upper), respectively. The mean difference between the two groups (0.686) is significant because the t value is 1.228. The probability of p (0.112) indicates that the difference is statistically significant at <0.05 level. Cohen's d -point estimate informs that the effect size is *weak* as it is below 0.5, according to the guidance of Cohen (1988). As clear in the table above, the Cohen's d %95 confidence interval does not include a 'zero' value in the range given. Of this, the null hypothesis must not be accepted (according to guidance from Cohen, 1988).

Therefore, the sixth study hypothesis which states that 'There is no statistically significant difference between the mean scores of G1 on the speaking post-test and those of G2 on the same test' was statistically rejected. Alternatively, actually 'There is statistically significant difference at <0.05 statistical significance level between the mean scores of G1 on the speaking post-test and those of G2 on the same test in favor of the G1 mean scores' was the hypothesis accepted.

To exemplify participants' comparative change in performance and to compare between G1 and G2 intervention efficacy on the listening and speaking post-tests, Graph (3) compares the differences in listening and speaking performances.



Graph (3) Comparison between Listening and Speaking Performances on the post-tests.

To answer the **ninth** study question, ‘ How far are the nursing participants satisfied with the ‘*Easy English*’ Website-based activities with speech analysis, sentence-recital, and simultaneous interpretation?/ What are their perceptions’, percentages of participants, i.e. making a certain response to a question on the scale 1-5 where 1 indicated ‘Never’ and 5 ‘Always,’ about the whole number of participants participating in responses were calculated. Nineteen participants filled out the online questionnaire out of twenty-eight. There was a two-week period ending in a deadline after the experiment, but because participants were studying for their final-term final year exams, not all of them could meet the deadline. Besides, a number of them were from remote areas where they had problems with the internet connection, thus not being able to satisfy the task. The results are displayed in G1 on-action perception results at <https://forms.gle/mUL2nryUTHD2sshy8>. (In order to be able to open all Google forms links, a Google account must be open first.) To make accumulative analyses, Table (9a) shows the percentages of participants selecting a certain option for each question.

Table (9a) G1 On-Action Perception Form Results

Question No.	Percentage of Participants' stating:				
	Never	Occasionally	Sometimes	Often	Always
1	1(%5.3)		2(%10.5)	5(%26.3)	11(%57.9)
2			1(%5.3)	5(%26.3)	13(68.4)
3	1(5.3)	1(5.3)		3(%15.8)	14.%73.7)

4	2(%10.5)		3(%15.8)	4(%21.1)	10(%52.6)
5				9(%47.4)	10(%52.6)
6			3(%15.8)	5(%26.3)	11(%57.9)
7	1(%5.3)	1(%5.3)		6(%31.6)	11(%57.9)
8		2(%10.5)	1(%5.3)	4(%21.1)	12(%63.2)
9			3(%15.8)	4(%21.1)	12(%63.2)
10			1(%5.3)	4(%21.1)	14.%73.7
11			1(%5.3)	5(%26.3)	13(68.4)
12	1(%5.3)	1(%5.3)	1(%5.3)	3(%15.8)	13(68.4)
13	1(%5.3)		2(%10.5)	5(%26.3)	11(%57.9)
14			1(%5.3)	5(%26.3)	13(68.4)
15		1(%5.3)	2(%10.5)	4(%21.1)	12(%63.2)
16			1(%5.3)	3(%15.8)	15(%78.9)
17		2(%10.5)	1(%5.3)	3(%15.8)	13(68.4)
18	1(%5.3)			3(%15.8)	15(%78.9)
19		1(%5.3)	2(%10.5)	3(%15.8)	13(68.4)
20	1(%5.3)			6(%31.6)	12(%63.2)
21			1(%5.3)	4(%21.1)	14.%73.7
22	1(%5.3)			5(%26.3)	13(68.4)
23			2(%10.5)	5(%26.3)	12(%63.2)
24				3(%15.8)	16(%84.2)
25			2(%10.5)	3(%15.8)	14.%73.7
26		1(%5.3)		7(%36.8)	11(%57.9)
28	1(%5.3)		1(%5.3)	5(%26.3)	12(%63.2)
Totals				121	310

As clear in Table (9a), all the questionnaire questions were answered on the positive side, either Often or Always, by the vast majority of the participants. The least majority which selected the highest and last two options on the scale (Often and Always) was 16 out of 19. This forms up %84.2 of the responding participants, which gives clear evidence of student's satisfaction with the activities and instruction. The least majority was for question 6, the instructor gave us time to ask questions. It was the lowest high probably because a minority of participants wanted much time to answer questions by nature, especially in listening activities. However, they would have forgotten the answer if the instructor had given them more time because the activities were new to them anyway.

The highest majority that selected the options Often and Always for a question was 19 (%100) for questions five and twenty-four. Question five asked if the instruction equipment was appropriate, and question

twenty-four asked if the participants felt like the activities had been suitable for their careers as future nurses. The speakers connected to the laptop were of good quality, and the activities were needed much by the student nurses as their studies had been based on the English language. Besides, they had not been exposed to any listening and speaking before the experiment (as proven in the pilot interview in Appendix A1).

Based on the evidence above, responses to questions no. 1, 2, 13, 14, 15, 18, 19, 20, 21, 22, 24, 25, and 28 (as in G1 questionnaire results at <https://forms.gle/mUL2nryUTHD2sshy8>) related to assessing the participants' views about the activities/instruction, the participants answered favorably, which meant they were satisfied with them. This in turn reflects the effectiveness of those activities in obtaining positive participant perceptions of the activities. This is even evident in the in-action session evaluation videos (Appendix F). Reasons for the positive views can be referred to the feeling that the participants needed such activities, not only for their future as nurses (i.e. as in responses to Q. 24 in Table 9a), but also for general communication in the language (as in answers to questions no 27, and 29 discussed below). This is supported by the in-session evaluation videos referred to above and by the participants' answers to the long-answer questions whose answers are discussed below.

Besides, the responses to questions no. 3, and 6-12 assessing the participants' perceptions of the effectiveness of the *instructor* reflected his effectiveness and teaching skills. The participants' responses to questions (17 and 26) related to the intervention used reflected the participants' satisfaction and effectiveness of the intervention for G1.

In the long-answer responses to question no. 27 which asked for advantages and disadvantages, (<https://forms.gle/mUL2nryUTHD2sshy8>), it was observed that the vast majority 17 (%89.5) participants mentioned benefits and two (%10.5) mentioned disadvantages. The majority mentioned the activities were “a new experience, developed by their listening and speaking, increased their vocabulary, encouraged teamwork (which they meant pair work), increased their vocabulary, improved pronunciation, and understanding”. Only two (%10.5) participants said that the sound

quality was not good. However, by contrast, all of the participants agreed that the equipment used was always appropriate, in response to question no 5. However, maybe because those two participants might have sat at the back and lost concentration for a reason they said that. Nonetheless, they are considered a small minority. One student said that ‘there are no disadvantages.’

In their responses to long-answer question no. 29, they expressed they benefitted from the (simultaneous) ‘translation’, improving listening and speaking, undergoing a new experience, instructor presentation of meanings, communicating with one another, increasing vocabulary, and practicing listening and speaking. The participants carried out simultaneous interpretation, as in, for example, Appendix (F2 -session 4), but because there were teacher corrections at times, they thought that all the ‘translations’ were the teacher’s.

In response to long-answer question 30 asking for additional comments, a majority 13 (%68.4) stated that they either liked that new experience or had no comments. One participant asked for a better sound quality and another asked for more time for rest to be considered (maybe in the future, if any). Truly, the activities were quite long but useful to them.

The whole evidence and interpretation concluded from the Final On-Session Perception Form results (i.e. as in Table (9a) lead to a conclusive conclusion. Since the least majority of participants (%84.2) selected the last two highest options on the questionnaire scale (Often and Always) for all questionnaire items, then, this reflects that ‘the nursing participants had positive views and were satisfied with the ‘*Easy English*’ Website-based activities with speech analysis, sentence-recital, and simultaneous interpretation to a *much* far extent. This answers the ninth study question posed earlier.

To answer the **tenth** study question, ‘How far are the nursing students satisfied with the ‘*Easy English*’ Website-based activities with the traditional method?/ What are their perceptions of the instruction?’, the results for the G2 survey which are displayed at <https://forms.gle/PdjaHEPmSB5aWf9F6> have been accumulated in Table (9b) below. (Again, in order to be able to open all Google forms links, a Google account must be open first.)

Table (9b) G2 On-Action Perception Form Results

Question No.	Percentage of Participants' stating:				
	Never	Occasionally	Sometimes	Often	Always
1	1(%5.3)	1(%5.3)	1(%5.3)	2(%10.5)	14. %73.7
2	1(%5.3)	1(%5.3)	1(%5.3)	2(%10.5)	14. %73.7
3	3(%15.8)			2(%10.5)	14. %73.7
4	1(%5.3)	2(%10.5)	2(%10.5)	5(%26.3)	9(%47.4)
5	2(%10.5)	1(%5.3)	2(%10.5)	2(%10.5)	12(%63.2)
6	2(%10.5)	1(%5.3)		1(%5.3)	15(%78.9)
7	3(%15.8)			3(%15.8)	13(68.4)
8	2(%10.5)	1(%5.3)		2(%10.5)	14. %73.7
9	3(%15.8)			3(%15.8)	13(68.4)
10	3(%15.8)			3(%15.8)	13(68.4)
11	2(%10.5)	1(%5.3)	1(%5.3)	3(%15.8)	12(%63.2)
12	4(%21.1)	1(%5.3)		2(%10.5)	12(%63.2)
13	3(%15.8)	1(%5.3)			15(%78.9)
14	3(%15.8)			3(%15.8)	13(68.4)
15	3(%15.8)		1(%5.3)	3(%15.8)	12(%63.2)
16	3(%15.8)			4(%21.1)	12(%63.2)
17	2(%10.5)	2(%10.5)			14. %73.7
18	2(%10.5)		1(%5.3)	3(%15.8)	13(68.4)
19	3(%15.8)			2(%10.5)	14. %73.7
20	3(%15.8)			2(%10.5)	14. %73.7
21	3(%15.8)	1(%5.3)		2(%10.5)	13(68.4)
22	2(%10.5)		2(%10.5)	3(%15.8)	12(%63.2)
23	2(%10.5)		2(%10.5)	4(%21.1)	11(%57.9)
24	4(%21.1)			2(%10.5)	13(68.4)
25	4(%21.1)		1(%5.3)	2(%10.5)	12(%63.2)
26	3(%15.8)	1(%5.3)		3(%15.8)	12(%63.2)
28	3(%15.8)			4(%21.1)	12(%63.2)
Totals				67	338

Table (9b) above shows that all participants responded favorably on all questionnaire items, quite similar to those of G1 participants. The least high-scaled response to question no 23. This was still a majority forming 15 (%78.9) of the total respondents. This means that approximately %80 or more responded favorably to all the items. This, in turn, leads to the conclusion that 'the nursing participants of G2 had positive views and were satisfied with the 'Easy English' Website-based activities with the traditional method to a *much* far extent, too. This answers the tenth study question posed earlier.

Comparing the results in Table (9a) and those in Table (9b), it is evident that G1 participants had slightly *more* positive views than those of G2. The reason is that the respondents of G1 tended to select the two highest positive options on the scale more (either Often or Always). The totals of G1 respondents for those options equal $310 + 121 = 431$, while those for G2 are $338 + 67 = 405$. This reflected that the intervention used for G1 was of more descriptive efficacy than that in the traditional method used for G2 participants, though both were effective. Again, this may be referred to the three techniques used in G1.

To summerise, the results, thus revealed that the listening and the speaking skills in both groups improved, G1 improved slightly higher in both the listening and the speaking skills than G2, and listening in both groups improved higher than speaking. At a group level, the results of the effect size levels showed that the two interventions were *largely* effective in improving the two skills ($p < 0.01$). At the two-group level, the G1 intervention had more effects in listening ($p < 0.01$) than in speaking ($p < 0.05$). The participants in both groups descriptively revealed positive views about and were thus satisfied with the instruction, but those in G1 showed *more* positive views and thus *more* satisfaction.

When speaking was concerned, both G1 and G2 had *large* effect sizes for their pre-post-test results. The reason can be attributed to the fact that, let alone the Easy English website activities employed in both groups, speech analysis, sentence-recital, and simultaneous interpretation for G1 and the traditional method for G2 worked well in participants hungry for listening to native speakers and speaking in the language, for the main reason was that the nursing students 'had **not** exposed to such interventions in both forms before'. When compared to each other on the post-tests, each group's intervention results showed statistical significance but weak effect sizes for both listening and speaking. This is normal because both groups improved to quite close levels due to the interventions they both underwent, as in Graph (2) shown earlier.

Two important observations on the participants' speaking skills were specifically noted. 1. Because the participants had not practiced speaking before the experiment, they had been afraid to speak at the beginning:

they lacked confidence and courage and were in most cases shy. During the speaking activities, they gained such abilities which enabled them to deal with the situation, having been told that “it is a skill you need to practice and you need at work, so face it and deal with the situation,” the instructor convinced them. “I know you can deal with it,” the instructor maintained. Later, they were to some extent confident and their speaking improved considerably, as observed. 2. At the beginning, they were not fluent and reluctant to talk. One technique that worked well with them was to tell them “to use the last piece of information in a sentence they produced and make use of it to talk about the next point in the following sentence and to keep doing the same practice to produce new sentences. “In this way, you can talk nonstop,” the instructor persuaded them. Later, their fluency and complete confidence were achieved, as observed.

This study and related findings are quite different from recent studies and their findings. As for the listening skill and the use of websites and related activities, it must be clarified that the website used in the present study was coupled with new activities that did not exist on the website, unlike the other websites used for teaching the skill where related listening activities are found on them. The present study's nature and, therefore, findings are also different from Cruz et al.'s (2023) in that they used a lyrics website to teach lyrics while the present one used a website's everyday English conversation. The findings are also different from Rohim and Fitariana's (2022) in that they used a distance-learning website, but the present study used online material on a website taught in the classroom. The present study's nature and related findings are furthermore different from Massahzadeh & Pourmohammadi (2018) in that they used transcription as a pre-listening strategy for improving listening, but the present study used another three teaching techniques. Besides, it is different from Almalki et al.'s (2023) which offered a comparison between views on online and Face-to-face teaching of listening. The difference is that the findings of the present study are only related to face-to-face instruction, not the virtual mode. However, the present study is a little similar to Sihombing and Simanjuntak's (2023) in that they used online podcasts and found effectiveness but it is different because the present one used intervention with online conversations.

Regarding the speaking skills, the current study's findings are different in that they are built on the indirect effects of listening on speaking improvement. To the best knowledge of the researcher, no recent study has focused on this aspect in the same way and no recent study has focused on such a triple intervention (i.e. speech analysis, sentence-recital, and simultaneous interpretation) in one study.

However, there are similarities in general implications, such as the use of websites and participants' views about this. A similarity was found between the present findings and those of Truong and Le (2022) in that EFL university students improved their EFL speaking skills when learning with the YouTube platform. When students' views are concerned, students recognized YouTube as a helpful tool for practicing and improving their skills, the same as those of the participants in the present study who considered the '*Easy English*' website-based activities useful. (However, the two studies are different in the specifics, such as the participants' major and the website.) Such similarities also encompass Abdulaziz (2021) but the difference is in the use of peer assessment, and Yen et al. (2015) in using Skype, and the difference from the present study is that the sample was business college students, and writing, not listening, was included together with speaking. It is also different from Peyghambarian et al. (2014) in using the GoEnglish.Me website. The present study findings were also similar to (Koch, 2011) in that participants' confidence and competence in communication were raised in both studies.

Shortly, the present study findings are different from those in the previous literature because they were based on 1. Designing activities around audio material to treat the EFL course-missing listening and speaking skills, 2. Employing three techniques together in website-based activities to enhance listening and speaking skills 3. Employing both quantitative and qualitative data to assess efficacy of activities based on these three techniques 4. The use of the '*Easy English*' website.

4. Conclusions

The '*Easy English*' website-based activities with techniques of speech analysis, sentence recital, and simultaneous interpretation were effective in enhancing the listening and the speaking skills of nursing students (i.e.

missing in their EFL course). The same activities offered in the traditional method were effective in enhancing these skills, too. When the nursing students' listening and speaking levels were compared across the two groups, the listening skills were found to improve higher in level regarding the two methods of instruction than the speaking ones. When compared to each other, the '*Easy English*' website-based activities with the techniques of speech analysis, sentence recital, and simultaneous interpretation were slightly more effective in enhancing the listening and speaking skills of nursing students than those offered in the traditional method, although both instruction methods were basically effective. Regarding students' views, although the students in both groups had positive views about both methods of instruction, the students who taught the activities with speech analysis, sentence recital, and simultaneous interpretation showed more positive views.

Thus, based on the study findings, it can be inferred that the '*Easy-English*' website-based activities for listening and speaking, for those who have not received any training on them before and who are eager to learn, as in the present case, have positive effects on these skills provided there are motivated students taught through desired appropriate activities with appropriate teaching methods managed by a capable instructor in an equipped environment. The slightest efforts in such circumstances can have real effects of a positive difference. Therefore, nursing students' English courses need more attention as for the inclusion of listening and speaking skills. Such a website as the '*Easy English*' should also be considered when designing language material. It contains a reservoir of authentic material for listening. While listening to the website, learners can make real progress learning the vocabulary, pronunciation, structures, idioms, and other language features which can positively be transferred to the production, fluency, and accuracy of speech.

The three techniques used in G1 generally had slightly higher effects and were of special *tasty* benefits to the students. The students largely enjoyed them. Particularly, they helped much with their correct pronunciation in an attractive and useful way. Thus, they should be integrated into any listening/listening for speaking instruction. Sentence recital of authentic material is seen as a pronunciation perfection-making

technique (e.g. Kent and Forner, 1977). It was even regarded by the researcher during the experiment as a ‘listening-sharpening tool’ as well. Thus, it should be utilized in ensuring the perfection of speech utterance production, especially when vowel sound groups are concerned. Simultaneous interpretations were beneficial in perfecting understanding and vagueness clearance, and what made them especially important to the students was that they needed them to do well on their exams. Accordingly, they should be used with nursing students as full understanding is indispensable for their present pre-service nursing learning and practice and for their future jobs as nurses.

Based on the observations during and after the experiment, nursing students can be fully competent in the area of speaking when the duration of learning is longer than three months. Nursing students’ fluency and pronunciation, excluding supra-segmentals, can be developed in three months. However, the perfection of structures may take longer.

Particularly, it was clear during the experiment that what EFL nursing students needed the most was the translation of sentences as they needed translations not only for understanding but also in their nursing practicum and exams. The ‘simultaneous interpretation’ which they called ‘translation’ helped them completely understand sentences and utterances. They came up with the interpretations, but, because there were always teacher’s corrections for them, the students thought that they were the teacher’s. Again, nursing students need interpretation from English into their language to help them understand their training jobs and implications better, in case they do not get them right in English. They need perfect and *fast* understanding as they deal with the lives of people.

Briefly, the ‘*Easy English*’ website-based activities with techniques of speech analysis, sentence recital, and simultaneous interpretation were statistically effective in enhancing the EFL-course-missing listening and speaking skills of nursing students, just as the same activities with the traditional method. The statistical two-group result comparison between the two methods of instruction showed slightly higher improvement and descriptive nuances in favor of the ‘*Easy English*’ website-based activities with speech analysis, sentence recital, and simultaneous

interpretation regarding the two skills. These findings are only generalizable over the (Technical Health) tumour and health insurance nursing institutes belonging to the MoHP and located in the Governorate of Ismailia, as the study covered all the students (5th Year level) from both institutions. However, generalizations of those findings over other Technical Health Nursing Institute students studying the same courses in other governorates in Egypt are argumentative.

5. Recommendations and Directions for Further Research

Based on the experiment findings, the following practice recommendations can be offered:

1. Listening and speaking skills are essential skills in language learning, and their integration into the curriculum 'must be performed'.
2. Nursing students were seen as representing a good type of eager-to-learn students; therefore, their needs regarding learning should be assessed from time to time in a way that accomplishes benefits to the instruction process.
3. The nursing students were pleased when they listened purposefully - and for the first time - to native English. Thus, extra-curricular activities, e.g. based on websites offering rich material such as the *Easy English* website, or the *ER-Central* website which is proven to be effective in teaching listening (e.g. according to Rohim & Fitariana, 2022), should be utilized to improve their listening.
4. In the classroom, students should be exposed to authentic material for listening with rich rehearsals and attention-drawing exercises.
5. The effects of *other* website-based activities on both reading and writing should be investigated.
6. The effects of activities/course/program presented with the techniques of speech analysis, sentence recital, and simultaneous interpretation, separately or collectively, on various language aspects should be investigated and more insights into them gained in the Egyptian context.
7. Training workshops must be held to train instructors on **a.** how to design listening and speaking activities based on website's authentic material and **b.** how to use speech analysis, sentence recital, and simultaneous interpretation in their teaching when appropriate.

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