

Developing English teaching and learning materials for nursing students of Universitas 'Aisyiyah Yogyakarta

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Abstract

The aim of this research and development study was to develop a set of English teaching and learning materials for nursing students. The development of the materials was carried out in three phases: planning, developing, and evaluating. The research findings revealed the nursing students' needs concerning media, language instruction, assignments, lecturer's and student's roles, setting of the class, learning activities, use of English for the students, students' intention to learn English, setting in which English was used, learning themes, input texts, students' English proficiency, target culture knowledge, appropriateness of the English book used, English skills the students want to improve, and layout of the materials. The means of materials were 3.95 in terms of the language teaching and 3.63 in terms of the content. The means of the three units were 3.43, 3.44, and 3.33. The means implied that the developed materials were appropriate to be used in the teaching and learning process as the materials met the nursing students' needs and interest.

Keywords: develop, learning materials, nursing students, units

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INTRODUCTION

Learning materials play important roles during the teaching and learning process. They make many contributions to the success of the class. Tomlinson (2011, p. 2) defines materials as "... Anything which is used by teachers or learners to facilitate the learning of a language." Cun-ninnsworth (Richards, 2001, p. 251) mentions the role of materials in language teaching such as a resource for presentation materials, a source of activities for learner practice, a reference source, a source of stimulation and ideas for classroom activities, and a support for less experienced teachers who have yet to gain confidence. Seeing their essential roles in the class, the availability of teaching and learning materials is compulsory.

However, as a matter of fact, irrelevant English teaching and learning materials are still used today. English teaching and learning materials to some extent are seen less important for non-English programs. The English materials are usually the same for non-English programs, for

example, English materials the midwifery students learn are same as those from nursing students as English course is non-main subject and learnt only in a certain semester. Therefore, it can be said that many students from non-English programs learn General English (GE) instead of English for Specific Purposes (ESP) which is not related to their major and which mostly emphasizes grammar, vocabulary, and reading strategies without paying attention to the importance of negotiating meaning (Aniroh, 2009; Bloor, 1998; Tomlinson, 2008).

In the Indonesian context, some previous researchers have discussed irrelevant English materials taught in university. Kosasih (2017, p. 23) analyzed English materials and their relevance to the needs of pharmacy students at a School of Pharmacy in Bandung. The result of the study shows that the syllabus is relevant to the students' needs, but the materials, generally, are not relevant to the students' needs, which suggests for the lecturer to select English materials that meet the students' needs. Hadijah (2010, p.

69) also analyzed the materials and students' needs in learning English at Institute of Higher Education of Economics in Bandung. The study shows that generally the learners' needs do not match to the materials provided by the lecturers that there are many reading texts taught to the students do not coincide with their field of study and the materials are categorized as General English. The irrelevant English materials can be also found in the English teaching and learning process at 'Aisyiyah University of Yogyakarta.

Based on the results on some observations and interviews done in 'Aisyiyah University of Yogyakarta, some problems occurred during the English teaching and learning process. *First*, the materials learnt in Nursing program were not suitable to the students' needs. The materials arranged for eight semesters were about information and technology published by National Institute of Information Technology (NIIT) from India such as presenting and promoting a new product, meetings and discussions, talking about your new organization and etc. As a result, the texts, expressions, and vocabulary learnt were far away from the needs of nursing students. In other words, the materials learnt did not support the qualification of nursing students who would work in the health field.

Second, the materials did not cover reading skills. The book and software were only consisted of grammar, vocabulary, listening, pronunciation, speaking, and writing activities. The input text was always listening in the form of dialog. The pictures used in the book were about IT. Since the input texts were about IT, students would do speaking activities related to IT, for example a dialog to plan a project and a presentation to promote a new IT product. The sequences of activities in the book also were not well arranged. The level of difficulty of the activities was not graded from the easiest until the hardest ones.

Third, the irrelevant materials made students unmotivated to learn the materials. They questioned about the teaching and learning materials which were not suitable to their needs. Some students asked the lecturers to teach about expressions and vocabulary used in the nursing field, since some students had a goal to work in international hospitals.

Fourth, the English lecturers did not have much time to modify the materials which were mostly about IT. Mostly, they were still doing their master while doing their permanent jobs to teach some classes. The overload works made

them difficult to adapt and adopt the teaching and learning materials.

Considering the problems above, developing English teaching and learning materials became a crucial decision to fulfill the students' needs on the English materials which are related to nursing. The objectives of this research study were to investigate the needs of nursing students of 'Aisyiyah University of Yogyakarta during the English teaching and learning process, develop the appropriate English teaching and learning materials, and apply the procedures in developing the appropriate English teaching and learning materials.

This research study was expected to give the academic evidence on developing English teaching and learning materials for nursing students of 'Aisyiyah University of Yogyakarta. Besides, the materials could facilitate the teaching and learning process at the class. The materials could also be used as one of sources to teach English for Specific Purposes (ESP).

METHOD

This research study is classified into educational research and development (R and D) category. The R and D model was suggested by Borg and Gall (1983) with some modifications.

This research study was conducted at 'Aisyiyah University of Yogyakarta from November 2014 until April 2016. The university is located at Ringroad Barat street No. 63, Mlangi, Nogotirto, Gamping, Sleman. The former's name of 'Aisyiyah University of Yogyakarta is 'Aisyiyah Health Sciences College. A convenience sample was used during the study. A class was chosen as the subject of the study as it suited the purposes of the study and was convenient: the researcher was familiar with the setting and taught the class (Gall et al., 2003). Twenty-three students of nursing class participated in the study. The students were semester six.

The procedures applied in this research study are based on the R and D model proposed by Borg & Gall (1983, p. 775) with some modifications. Three steps were undertaken during the research study: planning, developing, and evaluating.

Conducting needs analysis and studying relevant literature were done during the planning step. A needs analysis is procedures to collect information about learners' needs. It can be used for several purposes such as to find out what language skills a learner needs, to identify a gap between what students are able to do and what they

need to be able to do, and to collect information about a particular problems students are experiencing (Richard, 2001, pp. 51-52). Nursing students, the head of the nursing department, and nurses of JIH hospital were interviewed to collect some information related to the nurses' needs and how the product would be developed. In addition, some class observations and studying relevant literature were conducted to support the data needed. After gathering needed information, a questionnaire of the students' needs was made. The questionnaire was distributed to the nursing students to get the real data about their needs. It was expected that the data from the needs analysis could be a good base for the development of the product.

The course grid, lesson plans, formative and summative evaluation plans, educational media, and draft of the product were developed during planning step. The course grid was the first draft made as the basis for making other documents. The results of needs analysis were used to formulate the course grid. Then, the lesson plans, first draft of the product, and educational media were made based on the information in the course grid. To evaluate the first draft, a formative evaluation plan was arranged. Questionnaires were made for the experts to get the evaluation of the first draft of the product. Questionnaires, interview guidelines, and class observation checklist for summative evaluation were also prepared for the try-out.

Two kinds of evaluation were conducted to determine whether the product under development met the students' needs: formative and summative evaluations. The formative evaluation was done to evaluate the first draft of the product. Two experts concerning to the language teaching and the content of the product evaluated the first draft of the product. After getting the feedback from the experts, it was revised. Then, the revision of the first draft or the second draft of the product was used for the try-out. The try-out spent 7 meetings and was conducted in the 1 class. It was called the summative evaluation. The results from the summative evaluation were used as the basis to revise the second draft of the product and produced the final draft of the product.

Data Collection Techniques and Instruments

This study uses triangulation method to collect the data that is cross-checking the existence of certain phenomena and the veracity of individual accounts by gathering data from a

number of informants and sources and subsequently comparing and contrasting one account with another in order to produce as full and balanced a study as possible (Burns, 2009). Two kinds of data were collected in this study, namely qualitative and quantitative data. Qualitative data were collected through interview and observation, whereas quantitative data were collected through questionnaires. The research instruments used to collect the data were questionnaires, interview guidelines, observation checklists, and vignettes.

Some interviews were conducted with the nursing students, the head of the nursing department, the nurses in JIH hospital, and the collaborator. Interview guidelines were used and the interview sessions were recorded. Information concerning to the students' needs and problems in learning English was collected as a basis to develop the first draft of the product. Information concerning to the students' responses and collaborator's feedback towards the second draft of the product was gathered as a basis for the next revision (final product).

Class observation was held to support the findings. The collaborator observed the class during the try-out. The observation was related to the teaching and learning process such as the students' behavior, the way the researcher's delivered the materials, the students' responses towards the materials, the students' participation, technical problems regarding the materials and the like. An observation checklist and a video recorder were used to record the class situation. Vignettes were also made based on the class observation (try-out).

Questionnaires are used to collect the data about phenomena which are not directly observable, such as opinions, interests, value, inner experience and the like (Gall et al., 2003). The questionnaires were made for the needs analysis, formative, and summative evaluation. In the needs analysis stage, the questionnaires were filled in by the nursing students of 'Aisyiyah University of Yogyakarta. In formative evaluation stage, the questionnaires were filled in by the language teaching expert and the content expert to get their response towards the first draft of the product before it was implemented (try-out). Meanwhile, in summative evaluation stage, one class of nursing students filled in the questionnaires during the try-out. The results of the questionnaires during the try-out were used as the basis to make the next revision.

Data Analysis Techniques

Qualitative data were analyzed in four steps: data collection, data condensation, data display, and conclusions (drawing and verifying) (Miles et al., 2014, pp. 31–32). First, the qualitative data were collected through the interviews and observation. Second, data condensation was done. It refers to the process of selecting, focusing, simplifying, abstracting, and or transforming the data that appear in the full corpus (body) of written-up field notes, interview transcripts, and documents such as the students’ works. Third, the next step was data display. The data which had been simplified were then organized and compressed. The data display of this study was in the form of texts, vignettes, and interview transcripts. Then, the last step was making a conclusion (drawing and verification). The conclusion was gained based on vignettes, and interview transcripts.

In making a conclusion, the researcher and collaborators worked collaboratively to obtain the valid findings. The researcher and collaborators discussed the teaching and learning process, including the problems or central issues occurred during the class. If the interpretation of the data between the researcher and collaborators was different, the researcher checked again the data from vignettes, videos, and recordings before making the final interpretation of the data.

The quantitative data were gathered from the questionnaires. All questions in the questionnaires were scaled into Strongly Agree (4), Agree (3), Disagree (2), and Strongly Disagree (1). The questionnaires used four categories in Likert Scale to avoid the neutral response option. The neutral response option enabled people who were ignorant about or indifferent to a subject to select no opinion or neutral instead of being forced to choose a response that did not reflect their true beliefs. Additionally, picking a neutral option allowed people to avoid the cognitive effort needed to choose between their positive and negative feelings on an issue (Edwards & Smith, 2016). The total score of the questions was calculated to get mean. Then, the mean was categorized into some classification.

According to (Widoyoko, 2012, p. 110), to get the category classification, the number of intervals should be calculated. The formula to get the number of intervals is the range divided by the interval size. The formula to get the range is the highest score minus the lowest score. The formula can be seen as follows:

$$\begin{aligned} \text{Number of intervals} &= \frac{\text{Range}}{\text{Interval size}} \\ &= \frac{(\text{Highest score} - \text{Lowest score})}{\text{Interval size}} \end{aligned}$$

Based on the data from the questionnaires given, the highest score was 4 (Strongly Agree) and the lowest score was 1 (Strongly Disagree). In addition, the interval size was 4 (the number of options: Strongly Agree, Agree, Disagree, strongly Disagree). According to the formula, the calculation was 0.75 for the number of intervals. Therefore, the table of the category classification can be seen in Table 1.

Table 1. The Mean Category Classification

Mean	Category Classification
>3.25 up to 4	Strongly Agree (SA)
>2.5 up to 3.25	Agree (A)
>1.75 up to 2.5	Disagree (D)
1 up to 1.75	Strongly Disagree (SD)

The mean category classification shows that the product will be feasible to be used at ‘Aisyiyah University of Yogyakarta if the mean of the item is more than 2.5 or under categorization at least agree. If the mean of the item is less than 2.5 or 2.5, the product should be revised until it meets the students’ interest.

FINDINGS AND DISCUSSIONS

The Results of Needs Analysis

Brindley (Richards, 2001, p. 54) states the term needs is sometimes used to refer to wants, demands, expectations, motivations, lacks, constraints, and requirements. Based on the results of questionnaires distributed to the students at the needs analysis stage, thirty-five questions were answered by the students. The answers were their needs during the English teaching and learning process.

The results of needs analysis were related to media, language instruction at the class, assignments, lecturer’s and student’s roles, setting of the class, learning activities, use of English for the students’ future career, students’ intention to learn English, setting in which English was used, learning themes, input texts, students’ English proficiency, knowledge on the target culture, appropriateness of the English book used, English skills the students were eager to improve, and layout of the materials. Most students preferred the use of an LCD/projector and English and Bahasa in balance during the English class. Working in pairs, having an assignment every two meetings,

the lecturer's role to check the students' understanding, the students' role to pay attention during the class, and learning English in the classroom were most preferred. In addition, the activities of discussing the content of English monologues or dialogs, pronouncing words, finding difficult words in the texts, arranging jumbled words, writing compositions, and making sentences were most preferred in the class.

Learning English to find better jobs and learning English in order to be able to speak fluently were the students' objectives to learn English. They also used English in the English class and used English for the sake of continuing higher education. *Parts of the Body and Health Problems*, *Health Assessment*, and *Medical Equipment* were most preferred themes for the learning materials. Health articles, dialogs related to health, authentic texts, and difficult words were the most preferred input texts. The students were in Beginner level who were good at reading, but weak in listening skills. They were eager to improve their speaking skills, especially pronunciation sub skill. They had fair enough knowledge of the target culture. The relevancy between the used book and the students' needs was fairly appropriate. The students requested the use of real colorful human pictures for the animation and font *Calibri* in the learning materials.

The Course Grid

As had been mentioned previously, after obtaining the results of the needs analysis and studying the relevant literature (planning stage), the course grid was made in developing stage. The course grid was developed in accordance with the data obtained from the results of the needs analysis and the relevant literature. Then, it was used as the guideline in developing the materials. The course grid includes basic competency, topic, indicators, language function, language focus, input text, learning activities, and assessment techniques.

The course grid consists of three units. The first unit is on *Medical Equipment*, the second on *Parts of the Body and Health Problems*, and the third on *Health Assessment*. In line with Task Based Language Teaching (TBLT) concept which is under Communicative Language Teaching perspective (CLT), the course grid puts tasks at the centre of the teaching and learning process. It views the learning process as a set of communicative tasks that are directly linked to the curricular goals they serve, the purposes of which extend beyond the practice of language for its

own sake (Brown & Lee, 1994, p. 50). Nunan (2004, p. 10) says communicative task as a piece of classroom work involving learners in comprehending, manipulating, producing or interacting in the target language while their attention is principally focused on meaning rather than form. Therefore, the course grid consists of communicative tasks and pre-communicative tasks. It also ensures the integration of the four language skills.

The First Draft of the Product

Some elements such as layout, color, and picture, font size, teaching and learning media, and content of the material were considered during developing the first draft. The first draft of the product consists of some subtitles such as *Let's Get Ready*, *Let's Listen and Speak*, *Let's Read and Write*, *Let's Do More*, *Glossary*, and *Reflection*. The introduction of units such as the theme with its picture is presented at the beginning before tasks. The introduction describes the language focus, language function and text the students will study. Additional information and cultural notes are written in *You need to know*. The subtitles of each unit were described as follow.

Let's Get Ready

It is an initial activity to help the students get ready with the theme they will study. Some questions and pictures are provided to help them recall their memory about the subject they have learnt. In addition, the pictures help them focus on the theme.

Let's Listen and Speak

Listening and speaking are initial activities to be conducted before giving reading and writing activities. Various listening and speaking tasks are provided to support the teaching and learning process. The tasks could be done at the class or home as homework. In addition, relevant texts related to speaking and listening are introduced to the students.

Let's Read and Write

Reading and writing activities are given after the students finish the listening and speaking activities. Various reading and writing tasks are provided to accommodate the students' needs during the teaching and learning process. The tasks could be done at the class or home as homework. The tasks use relevant texts.

Summary

Summary consists of important information that have been presented from the beginning. It presents brief information about learning indicators. It summarizes language functions, the definition of some terms, kinds of texts, and grammar.

Let's Do More

Let's Do More consists of four tasks. The tasks are reinforced since the forms of the tasks are similar to the tasks at *Let's Listen and Speaks and Let's Read and Write*. The tasks are free guided.

Glossary

It consists of difficult vocabulary and its meanings taken from all tasks. The primary meaning according to the *context* of the task is written at the beginning and then followed by other meanings in different contexts. The vocabulary is supplied by phonetic transcription.

Reflection

It measures how far the students have learnt the materials. They reflect what they feel during the teaching and learning process. The learning indicators are presented and the students should measure how far they understand the learning indicators by ticking one of the options: little, enough, much, and very much.

The units were chosen by the students at the needs analysis stage. The units are *Medical Equipment, Parts of the Body and Health Problems, and Health Assessment*. Each unit consists of 20-23 tasks. Unit One focuses on recognizing the names of medical equipment; using the expressions of asking for the functions of medical equipment; using the passive sentence; and writing a descriptive text. Unit Two focuses on recognizing the parts of the body; using the expressions of asking for the patients' condition and explaining ourselves condition; using present tense; and writing and explanation text. Unit Three concentrates on kinds of symptoms and signs; using the expressions of asking for the dimensions of symptoms and signs; using the past tense; and writing the S.O.A.P Note.

The Result of the Product Evaluation

The product was evaluated in formative and summative evaluation. The language teaching and content experts evaluated the product in

formative evaluation. The language teaching expert evaluated the content of the materials; the language focus; the learning activities; the pictures, charts, and tables used; the language accuracy; and the layout. The general results of the questionnaire distributed to the language teaching expert can be seen in Table 2.

Table 2. The Results of the Evaluation of the Language Teaching Validation

No.	Aspect	Mean	Category
1.	The content of the materials	3.7	SA
2.	The language focus	4	SA
3.	The learning activities	4	SA
4.	The pictures, charts, and tables used	4	SA
5.	The language accuracy	4	SA
6.	The layout	4	SA
Total Mean		3.95	SA

As had been mentioned previously, if the range of the mean was between >3.25 up to 4, the mean was categorized Strongly Agree. Based on Table 2, it could be concluded that the language teaching expert strongly agreed with all aspects being evaluated. It means that all aspects of the developed materials are appropriate. However, some revisions were still done to make the product better. Therefore, some suggestions from the expert were used to improve the quality of the product as the basis for the revision. The suggestions and revisions from the language teaching expert were mostly related to grammar.

The content expert specializing nursing evaluated the materials too. Eight items related to the content of the materials were evaluated. The results of content validation can be seen in the Table 3. Table 3 shows the results of the evaluation for the content validation. The mean was 3.63. According to the mean category classification, the total mean for the eight items was categorized into Strongly Agree. It means that the expert strongly agrees with the content of the English materials or in other words the English materials are appropriate for the nursing students. Some suggestions were also given by the expert, however. The revisions were related to the content of the materials such as using appropriate pictures that were related to the text, giving appropriate meanings in *glossary*, making the instruction clearest, deleting some expressions that were not related to the theme, changing the theme of the unit, and adding some additional information for the medical abbreviations in the texts.

Table 3. The Results of the Evaluation of Content Validation

No.	Aspect	Score
1.	The content of the materials corresponds with the purpose of the teaching and learning.	4
2.	The content of the materials corresponds to the needs of nursing students.	4
3.	The content of the materials consists of the integrated skills.	4
4.	The content of the materials gives the students an opportunity to use the language (language practices).	4
5.	The content of the materials encourages the students to learn the science of nursing.	3
6.	The content of the materials consists of the authentic texts dealt with health.	3
7.	The health terms used in the English materials are appropriate.	3
8.	The pictures used in the materials correspond with the content of the teaching and learning materials.	4
Total Mean		3.63

Table 4. The Data of the Students' Opinions on All Tasks in Unit 1

Task	Mean	Category	Task	Mean	Category
Task 1	3.53	SA	Task 13	3.40	SA
Task 2	3.41	SA	Task 14	3.40	SA
Task 3	3.50	SA	Task 15	3.37	SA
Task 4	3.43	SA	Task 16	3.49	SA
Task 5	3.41	SA	Task 17	3.48	SA
Task 6	3.39	SA	Task 18	3.41	SA
Task 7	3.46	SA	Task 19	3.40	SA
Task 8	3.51	SA	Task 20	3.42	SA
Task 9	3.47	SA	Task 21	3.32	SA
Task 10	3.47	SA	Task 22	3.40	SA
Task 11	3.43	SA	Task 23	3.38	SA
Task 12	3.43	SA			
Total Mean				3.43	SA

The product that had been validated by the experts was ready to be evaluated in the summative evaluation. The try-out was conducted for seven meetings. The aim of try-out was to anticipate the problems related to the practical aspects of the product such as the wrong spelling of words, the unclear instruction and picture, and the ambiguity of the content. Besides, the try-out was useful to improve the quality of the teaching and learning process.

According to the academic affair, the English schedule was 2 times in a week. The meeting started at 1-5.30 PM. Each meeting lasted more or less 2 hours and 30 minutes break between each meeting. The teaching and learning process during each meeting or the try-out was described as follow.

Unit 1

Medical Equipment was the first unit that the students learnt during the try-out. The theme spent 3 meetings. Two meetings were at March 2, 2016 and 1 meeting at March 10, 2016. Overall, the process of try-out was good enough, even though some problems were occurring.

Task 1 was successfully completed by the students. Nineteen out of 23 students were present at the first meeting. They seemed enthusiastic to join the class since it was the first time for them to study English for Nursing. Some students made noises to discuss the answer of the task when the handout was still distributed to other students. They could mention the names of the medical equipment, but some answers were still in Bahasa. They were eager to know the names of medical equipment by consulting in the dictionary.

The students were more excited when doing Task 3 and 4 because they liked the activity of pronouncing and speaking. The class seemed crowded because of their participation in the class. Some students laughed at the misspelling words spoken by their friends.

The collaborator noticed a problem during the class. The students were confused with doing Task 5. It was about the way to answer the task. There were no numbers and letters in the statement inside the table that could ease the students to match 3 things: the name of medical equipment, the function, and the picture. They matched three things on the table by making some arrows

so that their answers looked illegible. Therefore, the researcher found some difficulties when discussing the answer of the task. Finally, at the end of the meeting, the collaborator suggested giving numbers in column function and letters in column picture instead of answering by making an arrow to match three things.

In Task 6 and 7, the students actively participated in answering the questions and asking the difficult words in the text such as weigh, visual acuity, optician, and curved. In general, the students were able to finish Task 1-9 at the first meeting, which were related to listening and speaking activities.

The next meeting was at 3.30 on the same day. They had 30 minutes break before the second English class. To freshen up the students' minds, the second meeting started with a game in Task 10. They were actively moving around to ask for the names and the functions of medical equipment to their friends. After doing the game, all pictures of the medical equipment were shown by LCD to measure how far the students learnt the materials. They could mention the names of medical equipment very well.

The next tasks were related to reading and writing activities. Some problems appeared. Some students felt tired at the second meeting so that they lost their focus to do the reading and writing tasks. To solve the problem, the tasks were done with a partner or in groups so that the students could do the tasks easily.

During the class, a mistake was found in Task 15. Lists of words were given and the students should find the synonyms of those words in the text. The task provided first letter of the word as a clue to find the synonym in the text. The clue given was wrong, however. The clues for number 1 should be started with letter 'e' not with the letter 'i'. Hence, most of the students were confused in finding the answer. To solve them, the researcher explained the mistake so that they could do the task.

Finally, before the time was over, the students finished Task 16, 17, 18. They were about grammar. They did it quickly as they had known the passive sentence well. Task 19 was homework since they needed more time to make a descriptive text. The rest of the tasks on the evaluation page were skipped as the types of the tasks were the same as the tasks they had done previously. At the end of the meeting, the questionnaire was distributed to get the students' feedback towards the materials for the next revision.

After filling the questionnaire, the interview session with some students was conducted. The students' feelings towards the teaching and learning process and their suggestions were collected to improve the quality of the next English classes. Based on the interview transcripts with the students, they were more excited doing listening and speaking activities. They liked listening to the recording and then pronouncing the words. They also liked making the dialog and performing it. The pictures helped them grasp the materials.

Table 4 is the results of the questionnaires distributed during the try-out. Table 4 shows that the mean range was from 3.32-3.53. Based on the mean category classification, all means in the table belonged to category Strongly Agree (SA). It means that the tasks are very good and the students strongly agree with the use of the tasks in the teaching and learning process. It also suggests that the tasks in Unit 1 meet the students' interest since the overall mean is 3.43. The highest mean, 3.53, belonged to Task 1. The task consists of many pictures of medical equipment. The students should mention the names of medical equipment in the presented pictures. Meanwhile, the lowest mean, 3.32, belonged to Task 21 where the students should make a dialog about medical equipment. Even though the students strongly agreed with all tasks, some revisions should be done to make the materials better.

In addition, some suggestions were given by the students from the questionnaires. They suggested the use of videos and games during the teaching and learning process. Besides, they wanted to have a missing lyric to entertain them at the class.

As what had been said previously, some problems were found in the class. The unclear instructions and the wrong spelling of the words in the tasks still existed. The students' motivation was getting lower in the second meeting as they have had classes since the morning and they should learn English two meetings in a day. Therefore, there should be some tricks to be applied to make them more spirit in the class, especially at the second meeting.

After considering the problems in the class and the suggestions given by the students and collaborator, some plans for the next meetings were arranged. They were making the instruction and the content of the task clearer, using a game or a missing lyric, or playing musics softly to overcome the students' tiredness at the class, asking the students to finish the task with a partner or

groups if the students felt tired or their motivation was getting low, and encouraging the students to engage more in reading and writing activity. Changing the English schedule two times in a day was impossible to be done.

Unit 2

Unit 2 is *Parts of the Body and Health Problems*. The unit spent 3 meetings. One meeting was on March 10, 2016 and two meetings on March 16, 2016. The meetings were used to discuss the homework from the previous meeting and the new unit.

Generally, the teaching and learning process was more conducive and only few practical problems appeared. The students were enthusiastic joining the class. They were more active than the previous meetings. The researcher made the activities livelier. She let one of the students come forward to touch his parts of the body while mentioning them one by one. The rest of the students corrected what had been said and added some parts of the body he had not mentioned. Besides, she made a competition of pronouncing words so that the students involved actively. During speaking activity, some students asked the pronunciation of certain words. *You Need to Know* in the materials helped the lecturer explain the rule of pronouncing some words. The students thought that it was something new for them as they could not find it in their previous English books. The students could refer to *You Need to Know* when doing listening and speaking activities. Furthermore, the phonetic transcription in the task helped them pronounce the words appropriately.

To anticipate the students' tiredness during the class, the researcher played some songs smoothly when they did the reading and writing tasks to freshen up their minds. The songs would

be stopped when the lecturer explained something. A missing lyric was given at the end of the meeting too. Furthermore, the students were asked to finish certain tasks in groups when the tasks were considered difficult and at the same time the students felt tired.

However, some problems appeared during the teaching and learning process. The time allocation was not enough to finish all the tasks in the materials. The lecturer finished some tasks in the class and a few of tasks were assigned as homework. Certain tasks with the same form with the previous tasks that the students had done were skipped.

In addition, some mistakes were found in the materials that should be revised. In Task 2, all names of the parts of the body should be written in small letter and numbers should be placed in left side. In Task 7, question number 5 should be written "State the parts of the body which are mentioned in the dialog" and question number 6 should be "Take a look at the expressions printed in bold. What kinds of expressions are they?" The instruction in Task 15 should be "Write down 3 sentences about the symptoms or signs people always feel when they have a certain disease. One is done for you as an example". The instruction in Task 16 should be "Develop the topic sentence below into a good paragraph. Work in pairs". The last, the order of the task in Task 19 was changed to keep the consistency with other tasks. Hence, the questions were placed at the beginning, then followed by the text. The instruction of the task was also changed into "Answer these questions based on the information in the text."

To support the data from the teaching and learning process, the questionnaires were distributed. The students' responses to the learning materials for Unit 2 are described in Table 5.

Table 5. The Data of the Students' Opinions on all Tasks in Unit 2

Task	Mean	Category	Task	Mean	Category
Task 1	3.45	SA	Task 11	3.50	SA
Task 2	3.44	SA	Task 12	3.47	SA
Task 3	3.52	SA	Task 13	3.35	SA
Task 4	3.43	SA	Task 14	3.40	SA
Task 5	3.50	SA	Task 15	3.37	SA
Task 6	3.50	SA	Task 16	3.40	SA
Task 7	3.49	SA	Task 17	3.33	SA
Task 8	3.48	SA	Task 18	3.34	SA
Task 9	3.52	SA	Task 19	3.43	SA
Task 10	3.45	SA	Task 20	3.42	SA
Total Mean				3.44	SA

Table 6. The Data of the Students' Opinions on All Tasks in Unit 3

Task	Mean	Category	Task	Mean	Category
Task 1	3.39	SA	Task 12	3.45	SA
Task 2	3.27	SA	Task 13	3.42	SA
Task 3	3.29	SA	Task 14	3.35	SA
Task 4	3.38	SA	Task 15	3.36	SA
Task 5	3.30	SA	Task 16	3.35	SA
Task 6	3.32	SA	Task 17	3.39	SA
Task 7	3.25	A	Task 18	3.38	SA
Task 8	3.27	SA	Task 19	3.22	A
Task 9	3.27	SA	Task 20	3.20	A
Task 10	3.34	SA	Task 21	3.43	SA
Task 11	3.30	SA	Task 22	3.38	SA
Total Mean				3.33	SA

Based on Table 5, the mean range was from 3.33-3.52 and the total mean for Unit 2 was 3.44. It means that the students strongly agree with the use of the tasks during the class since the tasks meet the students' interest. In other words, all of the tasks in Unit 2 are categorized as very good tasks. Furthermore, the highest mean, 3.52, belongs to Task 9. The task is about studying the expressions of asking patients' condition and the expressions of stating our condition. Meanwhile, the lowest mean, 3.33, belongs to Task 17. The task is listening activity in which the students circle the words they hear in the sentence. Even though the students strongly agreed with all tasks, some revisions should be done to make the materials better.

As had been mentioned earlier, the three meetings in Unit 2 were more conducive than the previous meetings. It means that the strategies that have been applied during the meetings give positive impacts. Therefore, playing songs softly to accompany the students when they studied would be still considered to be used during the class especially when the students felt tired. Giving a missing lyric would be also applied. The variation of doing tasks would be also maintained. In the next meetings, reading and writing activities that were always taught at the second meeting would be taught at the first meeting in order that the students could finish the task well. Listening and speaking activities which the students loved much, would be taught at the last meeting. It was done to see whether there was any difference of putting certain tasks in certain meetings with the students' motivation to accomplish the tasks or because of another factor such as the students' tiredness.

Unit 3

Unit 3 is the last unit talking about *Health Assessment*. It spent 2 meetings. The two meetings were on March 23, 2016. Seven students were absent because of heavy rain. The meetings were used to discuss the homework from the previous meeting and the new unit.

As what had occurred in the teaching and learning processes in the previous units, reading and writing activities were taught at the second meeting were mostly students felt tired. Therefore, the reading and writing tasks were not accomplished maximally. It happened because they had 2 English meetings in a day and they have had other classes since the morning. English was learnt from 1-5.30 PM. Therefore, it was impossible to avoid the students' tiredness at the second meeting (3.30-5.30 PM).

Based on the lesson plan that had been made previously, the first English meeting was used to teach reading and writing in order that the students could accomplish the tasks maximally. Many students participated actively in doing the tasks as their minds were still fresh at the first meeting. One of the students wrote her answer for Task 11 on the whiteboard. Some students answered the researcher's question related to the S.O.A.P note. Other students asked the meaning of abbreviations W and D in Task 11 and the meaning of any abbreviations in Task 12. Besides, all reading and writing tasks could be finished in the first meeting.

However, most of the students did not consult to the *Glossary* when they did not understand the meaning of some words. They consulted difficult words to their digital dicti-onary in their mobiles. They forgot the *Glossary* although difficult words and their meanings had been attached there. Finally, the researcher reminded the students again to read the *Glossary* whenever they found difficult words.

Finally, the last meeting or the second meeting was used for listening and speaking class. The students were more aware to use the *Glossary* when they wanted to find the meanings of difficult words. They only opened their digital dictionary when the words they searched did not exist in the *Glossary*.

Some problems related to the materials were found during the teaching and learning process. The materials should be revised. Question number 2 in Task 1 was replaced as the question was not related to the theme. Hence, the question was replaced with "Mention vital signs that need to be checked towards the patients' body." Next, a tagline, *Let's Listen and Speak* was placed before Task 2. The instruction of Task 4 was added. It became "Listen to a dialog between Rizal and a nurse in a health clinic. Complete the conversation with the words you hear from the recording. After that, practice the completed dialog with a partner.

Another practical problem was found in question number 5 in Task 6. The question was changed as the blank expression the students completed was too long. The students could not fill in the missing expression, even though the recording had been played more than 3 times. It was different with the previous listening tasks in which the students could finish the tasks after some repetitions of recording. The researcher decided to revise question number 5 that was putting the missing expression in the first expression spoken by Rizal. Besides, the punctuation hyphen (-) in Task 13 and 14 was replaced with a colon (:).

The same problem related to the students' tiredness occurred again at the second meeting. The students who studied in the morning were getting tired. The lecturer hardly ever raised the students' motivation to do the rest of the tasks maximally. As a result, the lecturer chose the task that should be done at the class and the task that should be skipped. It can be concluded that whatever the kinds of the tasks in the second meeting, whether they are listening, speaking, reading, or writing, the students hardly accomplish the tasks because of the tiredness. It is a good recommendation for the academic affair to change the English schedule for the next semester. Table 6 shows the students' opinions on all tasks in Unit 3.

Based on Table 54, the mean range was from 3.20-3.45. It means that the means of the tasks belongs to category Agree and Strongly Agree. However, the total mean for Unit 3 was 3.33 meaning that the students strongly agree

with the use of Unit 3 during the class. The tasks meet the students' interest. Task 7, 19, and 20 were considered as good tasks as the students agreed with the tasks. The rest of the tasks were considered as very good tasks as the students strongly agreed with the tasks. Task 12 got the highest mean. The task is about studying the explanation of the S.O.A.P note. Task 20 got the lowest mean. It is about making the dialog of health assessment. Even though some students agreed and some others strongly agreed with the tasks, some revisions should be made to improve the quality of the materials.

As had been mentioned previously, the students had their favorite and least favorite tasks. The students' favorite task in Unit 1 was Task 1, mentioning the names of medical equipment based on the pictures. This task is in *Let's Get Ready* or opening activity. The students' favorite task in Unit 2 was Task 9, studying the expressions of asking the patients' condition and stating our condition. This task is in *Let's Listen and Speak*. Meanwhile, Task 12 in Unit 3 related to studying the explanation of the S.O.A.P note was the most favorite task. This task is in *Let's Read and Write*. It can be concluded that the students' favorite tasks are distributed in different places: *Let's Get Ready*, *Let's Listen and Speak*, and *Let's Read and Write*.

Furthermore, the students' least favorite tasks were Task 21 in Unit 1, Task 17 in Unit 2, and Task 20 in Unit 3. Task 21 in Unit 1 is about making and performing the dialog of medical equipment. Task 17 in Unit 2 is about listening to some sentences and circling the words they hear in the sentences. Last, Task 20 in Unit 3 is about making and performing the dialog of health assessment. It can be concluded that the students' least favorite tasks are from the tasks in *Let's Do More*. The tasks are reinforcement tasks. During the teaching and learning processes, the tasks were mostly done by the students at the last meeting (second meeting) where most of them felt tired. Thus, they did not have the energy to accomplish the tasks. Therefore, the students considered them as least favorite tasks.

CONCLUSIONS

The research had followed several stages until it met the final conclusions. Based on the data analysis, some points were concluded. The results of the needs analysis, the description of the units developed, and the process of developing the materials was described briefly in the following paragraphs.

The results of needs analysis show the students' needs during the English teaching and learning process. Most students preferred the use of an LCD / projector and English and Bahasa in balance during the English class. Working in pairs, having an assignment every two meetings, the lecturer's role to check the students' understanding, the students' role to pay attention during the class, and learning English in the classroom were most preferred. In addition, the activities of discussing the content of English monologues or dialogs, pronouncing words, finding difficult words in the texts, arranging jumbled words, writing compositions, and making sentences were most preferred in the class. Learning English to find better jobs and learning English in order to be able to speak fluently were the students' objectives to learn English. They also used English in the English class and used English for the sake of continuing higher education. Parts of the Body, Diagnosing Diseases, and Medical Equipment were most preferred themes for the learning materials. Health articles, dialogs related to health, authentic texts, and difficult words were the most preferred input texts. The students were in Beginner level who were good at reading, but weak in listening skills. They were eager to improve their speaking skills, especially pronunciation sub skill. They had fair enough knowledge of the target culture. The relevancy between the used book and the students' needs was fairly appropriate. The students requested the use of real colorful human pictures for the animation and font *Calibri* in the learning materials.

Furthermore, the English materials consist of three units which are the integration of the four language skills. The themes of the units were chosen by the students in the needs analysis stage. The themes are *Medical Equipment, Parts of the Body and Health Problems, and Health Assessment*. Unit One focuses on recognizing the names of medical equipment; using the expressions of asking for the functions of medical equipment; using the passive sentence; and writing a descriptive text. Unit Two focuses on recognizing the parts of the body; using the expressions of asking for the patients' condition and explaining ourselves condition; using present tense; and writing and explanation text. Unit Three concentrates on kinds of symptoms and signs; using the expressions of asking for the dimensions of symptoms and signs; using the past tense; and writing the S.O.A.P Note. In addition, the units have several parts: *Let's Get Ready, Let's Listen and Speak,*

Let's Read and Write, Summary, Let's Do More, Glossary, and Reflection.

The materials development had followed some stages: planning, developing, and evaluating the product. Conducting needs analysis and studying relevant literature were done in the planning stage. Developing the course grid, lesson plans, first draft of the product, educational media, and formative and summative evaluation plan were done in the developing stage. The course grid was firstly made as a base to make lesson plans, first draft of the product, and teaching media. Conducting formative and summative evaluation and revision were done in the evaluating stage. Language teaching and content experts evaluated the first draft of the product. The language teaching expert gave some suggestions related to grammar. The content expert gave some suggestions related to the pictures used, the unit's title, the meaning of the word in *the Glossary*, the abbreviations in the medical context, and the health terms used. After the validations from the two experts, some revisions were done to produce the second draft. The second draft was used for the try-out at summative evaluation. The students' responses and the collaborators' feedback in the try-out, and the vignettes made based on the teaching and learning processes were used to revise the second draft to make the final draft of the product.

Furthermore, the results from the experts' validations show that the English materials made can be used for the teaching and learning process. The two experts strongly agreed with the use of the English materials at the class. In other words, the materials were considered very good. Based on the students' responses, the materials were also very good and they strongly agreed with the use of the materials in the class. It could be concluded that the materials were appropriate to the students' needs and interest.

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