A structured approach to developing the public speaking skill of Saudi nursing students

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Abstract

The study was inspired by the need to help the female Saudi nursing students become effective contributors to the health taskforce and get them ready for their future role in the community. The aim is achieved through training them on delivering a speech and increasing their language proficiency in English. A quasi-experimental, three-phase design was used. A placement test then a survey was done to collect background information from the participants: experience with public speaking and language level. The Tiebreaking Judge's Guide and Ballot (TJGB) from the Toastmasters International (TI) (2011) were used on three different occasions to measure the public speaking skill of the subjects- content, language and delivery. Data was collected over a period of two months. Sampling was from 70 female Saudi nursing students in KSA. Using descriptive statistics and ANOVA, there was considerable improvement in language output, content and delivery as evidenced in the results of the mid-test and posttest vs. the pre-test. The students overcame their fear of speaking publicly to a mixed audience and their language improved significantly. The study highly recommends the university curriculum designers to incorporate training on public speaking in all university departments and to bring awareness of its importance.

Keywords: Saudi, nursing students.

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1. Introduction

'Public speaking' is a skill by itself that needs to be developed by everyone irrespective of the language in which it is delivered. Its importance is actually acknowledged as the key difference between success and failure whether at home, at work or in the community. It forms the basis on which newly-graduated students are recruited. P'Rayan and Shetty (as cited in Yee & Abidin 2014) found that speaking well is crucial in getting a job, nearly half of American colleges and universities require a public speaking or communication course (p.130). Saudi nurses are no exception. They are expected to deal with patients and colleagues from different language and cultural backgrounds as Saudi hospitals have a multinational community where physicians, nurses and patients use English for communication. The nurses are also expected to participate in national and international scientific conferences. So using English in Saudi Arabia can be as low in scale as giving the history of a patient in front of a number of doctors, and can be as high in scale as attending or participating in conferences. However, these expectations are unfortunately not met as nurses are mostly impeded by their lack of public speaking skills which causes them to fear to confront a mixed audience because of their level of English. This results in miscommunication and compromises the patient-nurse relationship (Al-Khathami et al., 2010).

The fear to confront an audience is normal as it has been found by the National Institute of Mental Health (2016) that 75% of the worlds' population suffers from speech anxiety. Women and men are equally affected though statistics have shown that the number of men who suffer from speech-anxiety-related problems is slightly lower than women.

The female nursing students at the college of nursing, KSA, form part of a society where females are brought up in an environment that does not allow them to establish any kind of contacts outside the family circle especially with the other gender (Jawhar, 2012). This is reflected in their behavior at the university and at the workplace. Inside the classroom, a few students dare to speak up or to express their minds freely. They might do extremely well on written examinations, but much less on oral ones. Unfortunately, most female students are so afraid of becoming the laughing-stock of the class that they avoid any public interaction, and they experience health related problems whenever they are under any kind of stress. Such factors predict the female students' attitude towards public speech and the barriers that limit them. These students need to be trained to be able to use their language and to overcome the fear of facing a mixed audience. Hence, the idea of the public speaking training came.

'Public speaking skill' is generally defined as 'an individual's recognition of his or her own abilities (Kukulu et al., 2012) and it underpins nurses' competence to carry out care effectively (Crookes et al. 2005). No study to date has been carried on Saudi female nursing students to identify the impact of training them on public speaking to a mixed audience on both their language output and delivery levels.

2. Literature Review

Recent developments in Saudi Arabia indicate a clear strategic direction of policy makers and development plans towards an even greater role for women in public life and into top leadership positions in public domains (Al-Ahmadi, 2011). Women make only 28% of the workforce in the Middle East and North Africa and as low as 14% in Saudi Arabia and some of the Gulf countries, the lowest regional rate in the world (Lindsey, 2012). This low rate of Saudi female employment is in striking contradiction with the high percentage of Saudi female graduates which reached 60% of all college graduates, according to a recent census published in *The Guardian* in September 29, 2011. Daghestani (2010) has found that the reasons behind the relative absence of women from the Saudi market are mainly socially, not economically-related. In fact, the low rate of Saudi women employed in all fields except for the field of teaching reflects the outlook as to the kind of work that best suits women. They believe that teaching in girls' schools is a woman's natural place, whereas work in the health sector is not strongly approved because it involves dealing with men. For this reason, the health sector suffers from shortage of the Saudi female taskforce.

UNESCO (2016) reported that Saudi Arabia remains over dependent on foreign labor with only 1.4 million Saudis being employed in the private sector, compared with 8.2 million foreigners, according to the Ministry of Labor. The Saudi government is trying to invest in professional training and education as a way of reducing the number of foreign workers in technical and vocational jobs.

Expatriate nurses form a large proportion of the nursing workforce in healthcare facilities, with Saudis comprising only 29.1% (Almalki et al., 2011). This shortage has resulted in awakening the Saudi health decision-makers to the nature of nursing and its increasing respect as a skillful career for high school students (Jackson, 1991; Al-Omar, 2004). It has also stressed the need to increase the proportion of indigenous nurses so that culturally appropriate holistic care can be delivered (Aldossary et al., 2008). In other words, Saudis believe that only Saudi nurses are sensitive to their cultural issues and so they are preferred to expatriate nurses. This change in the attitude of the decision-makers has imposed new challenges on the university, i.e., to equip the Saudi nurses with the necessary tools to enter the workplace and help in the process of saudization.

One of the challenges facing the university is to develop the students' aptitude to speak publicly. Jahanpour et al. (2010) demonstrated that new graduates did not have clinical decision-making skills due to their low level of self-confidence. Chesser-Smyth and Long (2013) found that students' self-confidence affects their academic achievement. Al-Khathami et al. (2010) and Jirwe et al. (2010) pointed out a deficit in the nurses' experiences of communication in cross-cultural care situations where language and self-confidence can both be barriers. Another challenge facing the university is the language level of the nursing students. Koch et al. (2011) found that language is a barrier to achievement and self-confidence and that focusing on the spoken word increases interaction capacity and self-confidence. Thus, a strong correlation exists between the linguistic level of the students and their ability to deliver oral speeches.

3. Aim of the Study

The aim of the study is twofold: To teach the students how to organize and write a speech, and to train them on delivering that speech in a professional way. We assume that standing in front of a mixed audience and delivering a speech in good English implies that the presenter has gained control over most aspects of the language, namely, pronunciation, lexis, structure and communication in addition to overcoming the hurdle of speaking publicly. In this way, the Saudi nurses become predisposed to become active members of the much needed Saudi workforce.

The present study has the following questions to answer:

1-   Does the training on public speech have any positive effect on improving the female nursing students' public speaking skills?

2-   Does the training on public speech improve the female nursing students' linguistic level?

4. Methodology

4.1. Design & setting

It is a quasi-experimental study. A pre, mid and post-test design was used where the participants were evaluated at three points in time. The study took place at the College of Nursing, Saudi Arabia.

4.2. Participants

The population of the study is 70 female Saudi nursing freshman students (aged 18-20) taking an undergraduate level program in nursing. In fact, after high school, the students can hardly be considered post-beginners as per the entrance test and the interviews which they had on college admission. Therefore, they have to follow a two-semester pre-professional program aimed at raising their English language level with a rate of 20 hours/week. By the end of the program, the students are expected to reach an acceptable linguistic level. Nevertheless, most students remain unwilling to use

English spontaneously and in a sustained way especially in social settings. Besides, the survey done on the students revealed that these students have never had any experience in standing before a mixed audience or delivering a speech, nor have they had any real opportunity to improve their English.

4.3. Sampling

Convenient sampling technique was used to recruit the participants in this study. A placement test screened the population of the study. Forty students did not meet the candidacy criteria on the placement test as they scored <50%. They were excluded from the study and left to follow their traditional foundation course in English. Those who scored ≥50% were given a course which focused mainly on writing and organizing a speech and delivering it. We did not interfere with the excluded group.

It should be noted, however, that we had to use the convenient sampling technique in recruiting the participants because of the extremely low level of the students. After the pre-test, most of the students scored less than 50%, yet we did not exclude anyone of them and carried on with our training program.

4.4. Instruments of the study

Three tools were used: a placement test, a survey, and the Tiebreaking Judge's Guide and Ballot (TJGB) from the Toastmasters International (TI) (2011).

1-   The placement test was developed by the College of Nursing to test grammar, reading and listening in multiple choice question formats with the last section devoted to writing. The grade, out of 100, is equally distributed over the skills. We administered this placement test to 70 high school graduates with a little proficiency in English (3hrs/week).

2-   We devised the survey (Appendix I) and administered it to the population of the study inside the classroom. It mainly inquires about the subjects' age, GPA in High school, any experience in travelling, or in English language learning outside the school curriculum as well as any experience in public speaking.

3-   The third tool is the Tiebreaking Judge's Guide and Ballot (TJGB) (2011) developed by the Toastmasters International (TI) (Appendix II). We had to get a special authorization (Appendix III) from the Toastmasters International for the purpose of using their form to judge the public speaking skill of our medical students. The form lists criteria that measure the content of the speeches, the language as well as the delivery that reflects the participant's skill in public speaking. However, the TJGB is meant for a speech contest; and so it is graded out of 100 with 70 for the content and language criteria and 30 for the delivery. In this study, equal importance is given to all the items measured whether they are related to content, language or delivery, and since the aim is to compare the development of each criterion after the training, we adapted the Toastmasters' distribution of points to serve our aim. We kept the same criteria, but used the 5-point Likert scale ranging from 1 (Needs Improvement) to 5 (Excellent) to rate the students. This tool had been used in oral-communication classes and gains in various skill areas were reported (Yu-Chih 2008, Yee 2014).

We used descriptive statistics with SPSS (version 20) program to analyze the data (mean scores, standard deviation, frequency and percentages). We also used the ANOVA to test the differences among the variables. Finally we added the scores of the three levels and divided them to find out the highest.

5. Data Collection

The study started in mid-Sept. and ended in mid-Dec. The data was collected at three different points in time during the Fall Semester: Mid-Sept., mid-Oct. and mid-Dec. We launched the program with a placement test administered to the 70 nursing students admitted at the college of nursing KSA.

The aim of the placement test was to exclude the real-beginners and to include those who scored ≥ 50%. First, we administered the survey to the participants, the aim of which is to collect information from them. Analysis of the responses showed that none of the students had ever had any experience in speaking publicly to a mixed audience. Two of the participants had travelled to English-speaking countries for holiday. When asked about the activities undertaken there, they replied that they were not allowed to leave the family circle. Therefore, they did not practice their English, nor did they have the opportunity to develop their personalities. In reply to the question about the language courses, five participants had taken extra language courses in local language institutes, but the positive effect is practically minimal as these language institutes are commercially oriented and do not offer any real experience in the language.

The TJGB (Tiebreaking Judge's Guide and Ballot) was used in the pre-test through giving the students a passage to prepare and to deliver in front of the class without any training or intervention from the researcher.

The training program included a course in speech writing and organization, manner of delivering it in terms of the vocal variety, the posture, the body gesture and the voice aiming to produce a motivational and inspiring speech. We designed the training sessions to be friendly and motivating and carried out in a non-threatening environment. In the first phase of the program, the students proposed a number of topics which bear some kind of interest for them. Unfortunately, some of the topics were turned down because they were not society sensible such as *Why Aren't Women Allowed to Drive?* as broaching such a topic might cause disruption at the university. Therefore, they had to choose topics that were already overused such as, *why so much Use of the Mobile Phones? Sitting in front of the TV is the New Addiction, Why Don't We Read Anymore?* etc. However, the students tackled the topics from a new perspective to make them more interesting. This phase ended with the mid-test. The subjects performed in front of their peers, the judging committee which was made up of the Dean of the college (Saudi national), the Associate Dean (non-Saudi), and the Nursing Manager at the hospital (non-Saudi). The results of the mid-test were compared with the pre-test results. Then an additional 15 hours of training over another month was provided. It involved more development of the argument, refining of the language and more rehearsals. This phase ended with the post-test in which the students delivered their final speeches in front of a large audience from inside and outside the college in addition to the judging committee. This interval of one month between the two times of data collection was appropriate to measure the degree of development of the public speaking skill in terms of language output and delivery.

6. Data Analysis

Table (1) summarizes the results of the various tests administered to the students. Seventy students took the placement test, 42.85% of them (30 students) were admitted in the study, whereas 57.14% of them (40 students) were excluded. The results of the pre-test indicated that 23.33% of the participants (7 students) were potentially able to succeed in public speech, whereas 76.66% (23 students) needed intensive training, but none of the 30 participants was excluded.

The results of the mid-test evidenced the primary benefits of training female students on public speaking as 26.66% (8 students) performed extremely well, i.e., they scored ≥ 80% on the TJGB (Tiebreaking Judge's Guide and Ballot), whereas 53.33% (16 students) scored ≥50% and only 20% (6 students) scored <50%.

The results of the post test administered at the end of the training course were different. Those results revealed noticeable improvement on all the criteria and on the three levels: language output, content and delivery: 56.66% (17 students) scored ≥80% and 43.33% (13 students) scored between 50 and 79%.

Table 1. Results of the different tests

Tests	Total No of Students	Total No of Passing Students	Scores	Percentage
Placement Test	70	30	≥50%	42.85%
Pre-Test	30	23	<50%	76.66%
		7	≥50%	23.33%
		0	≥80%	0%
Mid-Test	30	6	<50%	20%
		16	≥50%	53.33%
		8	≥80%	26.66%
Post-Test	30	0	<50%	0%
		13	≥50%	43.33%
		17	≥80%	56.66%

Table (2) summarizes the results of the pre, mid and post-tests using descriptive statistics and ANOVA. Eight criteria were measured: three for the speech content level, namely, speech development, effectiveness and speech value; three criteria for the delivery level, namely, physical, voice and manner; and two criteria for language, namely, appropriateness and correctness. For all the eight criteria evaluated, there were statistically significant differences over the time of data collection with P values less than .005. Furthermore, the summed scores of the three levels indicated that the language output level was considerably higher than the content and delivery levels which were closer to one another.

Table 2. Results of language output and delivery levels using descriptive statistics and ANOVA test

		Mean	SD	Min	Max	F	Sig.
1. Speech Development	Pre-test	3.24	1.41	2.00	6.00	58.570	.000
	Mid-test	6.33	1.79	4.00	10.00		
	Post-test	7.51	1.49	4.67	10.00		
2. Effectiveness	Pre-test	1.83	0.64	1.00	3.00	48.22	.000
	Mid-test	3.50	1.04	2.00	5.00		
	Post-test	4.00	0.94	2.00	5.00		
3. Speech Value	Pre-test	4.80	1.86	3.00	9.00	39.865	.000
	Mid-test	9.50	2.84	6.00	15.00		
	Post-test	10.70	3.21	6.00	15.00		
4. Physical	Pre-test	6.57	2.13	4.00	12.00	50.09	.000

		Mid-test	13.20		3.48	7.33	19.33		
			Post-test	14.22	3.77	8.00	20.00		
5.	Voice	Pre-test	3.40	1.05	2.00	6.00	66.394	.000
		Mid-test	6.80	1.59	4.00	10.00		
		Post-test	7.44	1.65	4.00	10.00		
6.	Manner	Pre-test	1.63	0.76	1.00	3.00	52.31	.000
		Mid-test	3.16	0.91	2.00	5.00		
		Post-test	3.70	0.74	2.00	5.00		
7.	Appropriateness	Pre-test	3.44	1.09	2.00	6.00	79.891	.000
		Mid-test	6.64	1.37	4.00	9.33		
		Post-test	7.46	1.41	4.00	10.00		
8.	Correctness	Pre-test	2.90	1.09	2.00	6.00	81.636	.000
		Mid-test	6.23	1.63	4.00	9.00		
		Post-test	7.63	1.62	4.00	10.00		

7. Results and Discussion

The present study aimed to investigate whether training on public speaking could help the female Saudi nursing students boost their linguistic level and overcome their fear of speaking publicly to a mixed audience. Results of the survey revealed that the participants were almost homogeneous, no special experience in speaking publicly or in learning English. Results from the descriptive statistics using SPSS program and ANOVA revealed statistically significant differences among the variables with P values less than .005. In the content section, the highest score was speech development with 3.24 (SD=1.41) in the pre-test, 6.33 (SD=1.79) in the mid-test and 7.51 (SD=1.49) in the post-test. Speech value was the lowest among the content items with 4.80 (SD=1.86) in the pre-test, 9.50 (SD=2.84) in the mid-test and 10.70 (SD=3.21)in the post-test. As for effectiveness of the content, it was 1.83 (SD=0.64) in the pre-test, 3.50 (SD=1.04) in the mid-test and 4.00 (SD=0.94) in the post-test. In this section the choice of topics was reflected. The students were not given the freedom to choose their topics and so there was no originality in the ideas except for the way the topics were tackled such as using some kind of humor where necessary or involving the audience by asking questions. Moreover, the committee which contained non-Saudi members expected the students to explore untrodden territories in the Saudi society, but that was not possible.

As for the delivery level, it was generally impressive with the voice of the students being high and flexible scoring 3.40 (SD=1.05) in the pre-test, 6.80 (SD=1.59) in the mid-test and 7.44 (SD=1.65) in the post-test. The physical in terms of appearance, body language and speaking area was the lowest in the delivery criterion with 6.57 (SD=2.13) in the pre-test, 13.20 (SD=3.48) in the mid-test and 14.22 (SD=3.77) in the post-test. The manner of delivery came in-between with 1.63 (SD=0.76) in the pre-test, 3.16 (SD=0.91) in the mid-test and 3.70 (SD=0.74) in the post-test. These results were also expected because some of the students kept their faces covered and so their facial expressions were lost and their body language was limited. Moreover, some students were slightly distracted at the beginning of their speeches by the presence of a huge audience, so they faltered a little bit but soon managed to control themselves and delivered their speeches with much confidence and assurance.

The criteria measuring the language output revealed that language improved the most in terms of appropriateness and correctness. The mean score for appropriateness was 3.44 (SD=1.09) in the pre-test, 6.64 (SD=1.37) in the mid-test and 7.46 (SD= 1.41) in the post-test. The score for correctness was even higher with 2.90 (SD=1.09) in the pre-test, 6.23 (SD=1.63) in the mid-test and 7.63 (SD=1.62) in the post-test. These high scores were expected because the students were taking other courses which might have influenced their language output in addition to the recurrent corrections from the researcher throughout the training period.

The summed scores of the three criteria measured showed that language improved most (80.762), followed by delivery (56.264) and lastly by content (48.885). These results were not surprising because the students were about to finish the first semester, and their overall linguistic level was improving. The delivery level was outstanding compared to the level they started from. Furthermore, the progress witnessed at the delivery level was solely due to the training as the results of the survey done on the participants revealed no special experience in speaking publicly or in learning English, and none of the courses given at the university address the public speaking skill.

The forgoing results permit the following answers to the two research questions. In answering the first research question, the findings suggested that the students became readier to confront an audience. They presented their speeches with enthusiasm and assurance, showing interest in the audience and confidence in their reactions. Their voice was flexible, and so were their gestures, and posture. Most of the students succeeded in delivering their speeches in a relaxed way, while the others performed slightly less than anticipated. They might have been intimidated by the unexpected presence of many guests from outside the university among the audience. These results are higher than Kukulu et al.'s (2012) where 26% of their participants expressed hesitation while talking in a group, 32% were sometimes hesitant and 32% felt they were not assertive and only 22.9% felt free to communicate. This difference between the results of the two studies could be due to the fact that the participants in the current study had a training program; their output was amended on many occasions with feedback from their peers and from the researcher.

In answering the second research question, the study found that the students tried to use appropriate words in their speeches; with proper use of grammar and correct pronunciation. What was really astonishing about their speeches was that they improvised when they forgot parts of their speech. In fact, the intensive rehearsals and the constructive feedback from the researcher and their peers on their language helped a lot to improve their output. Consequently, they had better control over their language.

The results of the mid- and post tests also proved that the performance of the students was higher on the language output level than on the delivery level. This might be due to the fact that it was possible to control the language output of the students, whereas factors affecting them while they were on stage could not be predicted. However, it became clear that training on public speaking could bridge the gap between their upbringing in a segregated society and the necessary language and skills needed in the workplace.

In the current study, we were the ones to administer the placement test at the beginning of the study and to select the participants in the study based on their scores. We were also the trainer but not the evaluator. For the sake of objectivity, a committee was formed of the Dean of the College of Nursing, the Associate Dean for Academic Affairs and the Nurse Manager at the hospital to evaluate the participants in the pre, mid and post-tests. We had developed the program which took around 30 hours of tutoring and noted the students' progress step by step but we did not intervene in the evaluation.

Two researchers, Hofmann and DiBartolo (2000) recognized that, in spite of a number of contemporary theories that emphasize the importance of cognitive processes in social anxiety, there is no instrument available to assess fearful thoughts experienced during public speaking. Therefore, they developed a self-assessment tool and tested its psychometric properties in four studies. Their tool proved to have high internal consistency, good item validity and good factor analytic validity. In spite of that, we did not use it in our research because we believe that tools developed for self-assessment might not be objective enough as self-rating is usually biased especially with students. As the only tools available were self-assessment ones through filling out questionnaires (Chesser-Smyth & Long 2012, Kukulu et al., 2012), we had to rely on the one provided by the Toastmasters, the world leaders in public speaking. We adapted it to serve the goal of the program.

8. Conclusion and Recommendations

This study was inspired by the need to help the female Saudi nursing students become active members of the health taskforce and to get them ready for their future role in the community. It can be the first of its kind in Saudi Arabia as no previous attempts were made to introduce the females in Saudi Arabia to the world of public speaking especially in front of a mixed audience. In fact, if the Saudi nurses do not overcome their fears of public speaking, or improve their linguistic level, they have little chance to meet the demands of a multinational community in the health care sector. Hence, it is a challenge for the university to find strategies which foster the public speaking skill of the nurses and to raise their language level.

It is therefore highly recommended that English teachers should not only teach grammar and structure, they also need to be trainers on public speaking, helping the students to reach out to others rather than withdrawing from them. Training on public speaking should be incorporated not only at the College of Nursing but in all university departments and its importance should be highlighted.

Further research is needed to assess the long term effect of training on public speaking on the nurses in the workplace and to see whether the same findings are reached with different nationalities.

9. Limitations of the Study

The present study has the following limitations:
1- The students were taking other courses in English which might have contributed to the improvement of their language.
2- The sample size is too small
3- There is no comparison group

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