Designing an ESP Course for Medical Representatives in Pakistan

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Abstract

The aim of this research paper is to investigate professional needs of English language for Medical Representatives in Pakistan. For the purpose of finding out English language needs for Medical Representatives, mixed method approach has been applied. Three groups of research population are selected for gathering data considering them main stakeholders of this professional discourse community. These population groups: medical representatives, professional trainers and Ex-medical representative. A questionnaire was developed to collect data from medical representatives and interviews were conducted to gather relevant information from professional trainers and Ex-medical representatives. Quantitative data were analyzed using SPSS (Version 17) and qualitative data were analyzed through thematic analysis identifying common themes from respondents’ responses. The findings of this research paper indicate that proficiency in English language is a key factor for success in medical representatives’ profession. The study presents recommendations and directions to design ESP course for medical representatives in Pakistan.

Keywords: English for specific purposes (ESP), English for academic purposes (EAP), English for occupational purpose (EOP), needs analysis, course design.

1. INTRODUCTION

Yang (2006) describes that English has gained status of lingua franca for interaction in the global markets. It is an essential and recognized medium of communication in various professions such as business, engineering, law, medicine, science and technology. Csillia (2009) states that English is God-given, noble, rich and interesting language but other languages have not attained these characteristics. English is being used in most esteemed research journals to publish the renowned research studies related to technology, science, education, medicine and business. English is the only main language of international meetings, briefings, conferences and discussions. Owing to all aforesaid factors, it is inevitable for professionals to be expert in English language.

Consequently, English has gained indubitable status in Pakistani occupational and professional settings for every field. The medical representatives in Pakistan have strong needs and motivation to learn English language for numerous occupational activities. Presently, there are no such English courses which enhance the English language competence of the medical representatives in Pakistan and aimed at catering their specific language needs.

Rahman states that Pakistan is a multi-lingual country. But the languages of power domains, government, media, education, corporate sector etc. are Urdu and English. The official language of Pakistan is English and it has status of second language in Pakistan. Despite the fact that Urdu is the national language of Pakistan, the English language status is undoubtedly very high. According to Mansoor (2005:25-28), English has got higher status due to its following functions:

• English is the language of civil administration and bureaucracy.
• It is used for contact in legal system of the country at provincial and federal levels.
• It is the official language of country’s armed forces and language of correspondence for official work.
• English is also language of media, along with the Urdu language and the other regional languages.
• Together with Urdu, English is the language of educational field. In almost all the educational institutions of government, Urdu is adopted as medium of instruction and English is taught as a compulsory subject.
• In multilingual society of Pakistan, the learning of the most powerful language would not only mean better possibilities of survival but also a matter of attaining social status and prestige.
• The Pakistani government has recognized the significance of English as language of science and technology. That is why English is a compulsory subject up to Bachelor level and is used as medium of instruction at higher studies level but Urdu is taught as mandatory subject up to intermediate.

As the need of English has been increased, ESP courses are being introduced in a number of fields. These courses play significant role for strengthening the dominance of English language in the social fabric of Pakistan.
The working language for the field of the medical representatives in Pakistan is English. The medical representatives need to interact with the educated class in Pakistan. They introduce and promote their company products and persuade the most educated class of the country that these products are more effective. For this purpose, English is more useful than any other language. The medical representatives are required to perform their professional activities like presentations, meetings, briefings, written formal correspondence in English. It is very significant to note that they are required to communicate in writing and verbally with doctors, chemists, officers, customers, professional trainers and medical organizations (regional, national and international). As English has gained status of sole language of international communication, it is essential that Pakistani medical representatives must be competent in use of English for their occupational activities.

**Objective of Study**
The aim of the present study is to analyze medical representatives’ needs and provide proposals for designing an ESP course to cater their occupational language needs. It is expected that they will be able to comprehend specific profession related register of technical terms and expressions needed in occupational settings.

**2. LITERATURE REVIEW**

**2.1 Definition of ESP**
Hutchinson and Waters (1987) said “ESP is an approach to language teaching in which all decisions as to teaching content and teaching method are based on learner’s reason for learning” (p.19). Furthermore, Hutchison and Waters explained that “tell me what you need English for and I will tell you the English that you need” (ibid, p. 18). According to Schleppegrell and Bowman (1986), there were two major differences between ESP and ESL/EFL. The first main difference lies in the purpose for learning the language and nature of the learners. They explained that the ESP adult learners already are little familiar with English and purpose of their language learning is to interact and fulfill specific job-related functions. Schleppegrell and Bowman (1986) presented the second main difference is the scope of goals of instructions. They elucidated this by saying that four language skills are focused alike in EFL/ESL while process of need assessment points out what language skills are required to the learners in ESP. Hutchison and Waters (1987) assert that difference of GE from ESP is in theory nothing but in practice great deal. According to them, ESP is not a product but is an approach. It does not include particular methodology and materials for teaching. It may be referred as learner’s need based approach of language learning.

**2.2 Types of ESP**
It becomes evident studying aforesaid definitions that ESP focuses learners’ specific needs and uses need based teaching methodology, and utilizes task-based communicative approach. ESP also recognizes discourse and its certain linguistic features. It prepares learners to perform appropriately in academic and professional settings. As a matter of fact, content and language teaching in ESP are greatly motivating because learners can use what they learn in their classes to their main fields of study and work place settings. Carter (1983) divided ESP into three major types:
1. English as a Restricted Language
2. English for academic and occupational purposes
3. English with Specific Topics

Hutchinson & Waters (1987) presents ‘Tree of ELT’ in which ESP is subdivided into three branches:
- English for Science and Technology (EST)
- English for Business and Economics (EBE)
- English for Social Studies (ESS)

According to Jordan (1997), these subject areas can be further broken down into two branches: English for Academic Purposes (EAP) and English for Occupational Purposes (EOP). An example of EAP for the EST branch is ‘English for Medical Studies’ whereas an example of EOP for the branch of EST is ‘English for Technicians’.

According to Hutchinson and Waters (1987: 16), there is no marked distinction between EOP and EAP. They argue, “people can work and study simultaneously; it is also likely that in many cases language learnt for immediate use in a study environment will be used later when the student takes up, or returns to, a job”. This is the reason that Carter classified EOP and EAP under similar kind of ESP. According to him, final purpose of EOP and EAP is same but means to achieve end purpose is very different.

**2.3 Emergence and Different Phases of ESP Development**
English has been selected as the language of communication at international level. This fact justifies that English is the first language (L1) of the most advanced economic and technology powers of the modern world. Hutchinson and Waters (1987) pinpointed that “A great deal about the origins of ESP could be written. Notably,
there are three reasons common to the emergence of all types of ESP: the demands of a brave new world, a revolution in linguistics, and focus on the learner” (ibid, p.6).

ESP has undergone different stages of development. These are:
(1) Register Analysis
(2) Rhetorical Discourse Analysis
(3) Target Situation Analysis
(4) Skills-Centered Approach
(5) Learning-Centered Approach

Register Analysis in 1960s and early 1970s. This type of analysis was carried out because experts in ESP focused on determining the main characteristics of genuine language settings where learners use language. In late 1970s and early 1980s, second phase in the development of ESP known as Rhetorical Discourse Analysis started. The focus shifted from sentence level to beyond the sentence level.

The next phase aimed at analysis of the potential situations where the target language would be used. According to Hutchinson and Waters (1987) and John (1991), third stage of ESP development emphasized the Target Situation Analysis (TSA). Taking into consideration the learners’ reasons of foreign language learning, ESP courses are designed for helping the learners to act adequately in a target situation. For this purpose, first target situation is analyzed; second linguistic features of this target situation are identified. The process was named as ‘Needs Analysis’.

At the fourth stage of ESP development, Skills-Centered Approach was an effort for considering not the language itself but the reasoning and thinking processes underlying language usage (skills and strategies), which facilitate learners understand meaning of the discourse. Cognitive learning theories influenced this phase of ESP development.

The flaws in the preceding phases gave way for the fifth stage of ESP development which is termed as Learning-Centered Approach by Hutchinson and Waters (1987). The fifth phase shifted the emphasis from language use to language learning. According to John (1991), instead of focusing on discourse, communicative situations, learners’ communicative needs or purposes, the emphasis of fifth phase was on the strategies that students used for acquiring target ESP.

2.4 Status of ESP in Pakistan

Seven English Language Centers were established in the different universities of Pakistan. The Asian Foundation and The British Council collaborated to set up these language centers in mid-eighties. These language centers introduced concept of ESP teaching in Pakistan. Every center had the choice of designing a methodology and selecting teaching materials according to its requirements and needs.

NED University, Karachi, Bahauddin Zakariya University, Multan, Fatima Jinnah Women University, Rawalpindi and various other notable institutions of Pakistan have conducted a number of conferences on EST and ESP during the preceding few years. Concerned Pakistani teachers have participated to define ESP related issues and propose directions in these conferences. Researchers in Pakistan have shown greater interest in ESP during the past ten to fifteen years. Needs analysis and text analysis have been the major focus for Pakistani researchers. Furthermore, to some extent the areas of material development and evaluation have also been emphasized for pedagogical purposes.

Awan and Yahya (2016) disclosed that Business English Courses are being offered by each and every public and private university in Pakistan. Engineering universities like UET, Lahore, National University of Science and Technology, Rawalpindi, NED University, Karachi, Air University, Islamabad and UET, Taxila are offering ESP courses for technical communication. Agha Khan University, Karachi has designed an ESP course for the nurses of Agha Khan Hospital. Awan and Khalida (2015) said that English has become a part and parcel of modern life and new trends are emerging and scope of English is rapidly expanding. Awan and Aziz (2016) analyzed different methods of teaching English as a second language and revealed that Grammar Translation Method (GTM) is very effective in communicating ideas in real sense while other methods are complex and difficult to communicate the real meaning of words.

Qadir has proposed an English course for M.B.A. students to cater their communicative needs. Iqbal (1998) has suggested an English language course for Bachelor level (BCS). In their research works, both researchers explain the main features of course of English for their respective group of learners according to their needs and issues at university level. For students of B.Sc. agriculture (Honours), an ESP course was designed by Ahmad (2001:107). He focuses on defining aims and objectives of language teaching and developing language material according to them using authentic language corpus. English, Business Communication and Report Writing (BCRW), for students of M. Com was focused by Imtiaz (2002). In the same way, Jabeen (2005) has worked on English for Journalism. She has tried to identify the students’ language needs during M.A. Journalism at BZU Multan, and suggested an outline for the course.

Ahmad (2005) conducted a large scale and practical research on legal English. His findings pointed out inappropriateness in different aspects of academic and occupational settings. He designed a course of Legal English that can be introduced in several legal institutions of Pakistan. Aforesaid research projects make it quite clear that ESP course-designing projects have undergone a great development in various disciplines in Pakistan,
similar to other parts of the world. Though ESP has been vastly used and various recent researches have proved the efficacy of ESP in different fields, very few studies have been conducted for language of medical representatives in Pakistan.

3. Methodology

3.1 Research Method and Tools
Considering on my research questions, purpose of the study, the type of data and population, I have determined to join both the quantitative and qualitative research approaches. I have decided to use the following research instruments in this research paper:

Questionnaires
Interviews

Observation and other data collection tools could be used but they were not added due to problems in using these techniques during actual research setting.

3.2 Sample Selection
The purpose of my present research is to analyze professional English language needs and provide suggestions to design a course for the medical representatives. To fulfill this aim, I have selected the following population groups to collect relevant information:

Medical Representatives
Professional Trainers
Ex-Medical Representatives

In this study, I selected a group of medical representatives that consisted of 90 medical representatives from urban area of Punjab in Pakistan. As Punjab is the largest province of Pakistan. It has 36 Districts and I have chosen Multan, Khanewal and Sahiwal Districts for this study.

I have preferred medical representatives with 5, 7 and 10 year experience. I felt that as they had worked in the field for considerable time, they would point out their language needs in better way. They would be in a better position to express their opinions and views more confidently about importance and professional needs of English language.

At the time of this study, various organizations and individuals were conducting professional training courses for medical representatives in Punjab Pakistan. They provided training to new as well as in-service medical representatives. These instructors used different language materials and techniques to train medical representatives. The participants in this sample group were 6. As trainers have firsthand information of the level of linguistic competence and performance of the medical representatives, this group had been selected as sample population. The experience of this sample group ranged between 3 to 12 years.

The group of this population sample was consisted of 6 Medical Representatives who served in different urban centers of Punjab. Their service experience ranged from 3 to 15 years.

3.3 The Phase Data Collection
Questionnaires and interviews have been used as main data collection instruments in this study. As in this research study views and opinions of a number of participants (medical representatives, Ex-medical representatives, professional trainers) were required, the data have been collected on large scale and in three stages.

At the first stage, collection of data was started from the professional trainers, first using questionnaire and then interviews for details. At the second stage, questionnaires were used to collect data from the medical representatives relevant to their professional language needs and the existing English Syllabus. At the last stage, Ex-medical representatives were interviewed to identify the professional language needs and language problems of Ex-medical representatives.

4. DATA ANALYSIS
Nowadays, it is strongly proposed (Mansoor, 2005, Frankel and Norman: 2006) to use some kind of software for analysis of data. The use of software helps to reduce the analysis time and makes procedure systematic and ensures completeness (Mansoor, 2005:177). For accurate analysis of quantitative data of questionnaires, SPSS (version 17) has been used. Thematic analysis technique has been employed to analyze qualitative data. First, I developed a table with two columns. Then, I added the participants’ word by word responses in the first column and a short summary of the major points in the whole response was added in the second column. In the end, I grouped the related themes and identified common themes to analyze the respondents’ responses.

Most of the respondents 80.6% were males and the greatest number of participants 83.3% was from age group of 26-30. English was the medium of instructions at secondary school level for 65.7% respondents whereas 34.3% reported Urdu as medium of instructions at secondary school level. The 91.7% participants
reported English and 8.3% Urdu as medium of instructions at higher secondary level. It was found that 95.8% respondents studied in the English medium institutions at graduation level.

Table 1: Speech community and proficiency in English

<table>
<thead>
<tr>
<th>Mother tongue of speech community</th>
<th>Urdu</th>
<th>Punjabi</th>
<th>Seraiki</th>
<th>Others</th>
</tr>
</thead>
<tbody>
<tr>
<td>Proficiency in English</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Fully competent</td>
<td>12.5%</td>
<td>47.2%</td>
<td>36.1%</td>
<td>4.2%</td>
</tr>
<tr>
<td>Moderately competent</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Mildly competent</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Not at all</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

Most of the informants 47.2% were from Punjabi speech community and used Punjabi as mother tongue. As far as the proficiency in spoken English as concerned, 56.9% of the medical representatives considered themselves ‘moderately competent’ and 25% ‘mildly competent’. With regard to written proficiency, 68.1% of the participants opted for ‘moderately competent’ while 20.8% ‘fully competent’ category.

The participants were provided options to point out the importance of each reason for learning English language on the Likert scale.

Table 2: Causes of learning English language

<table>
<thead>
<tr>
<th>Reason</th>
<th>Strongly Agree</th>
<th>Slightly Agree</th>
<th>Not Sure</th>
<th>Slightly Disagree</th>
<th>Strongly Disagree</th>
</tr>
</thead>
<tbody>
<tr>
<td>Fulfilling language requirements as medical representatives</td>
<td>45.8%</td>
<td>37.5%</td>
<td>16.7%</td>
<td>0</td>
<td>0</td>
</tr>
<tr>
<td>To broaden outlook and acquire new ideas</td>
<td>61.1%</td>
<td>25%</td>
<td>1.4%</td>
<td>8.3%</td>
<td>4.2%</td>
</tr>
<tr>
<td>To make presentations at seminars and conferences</td>
<td>79.2%</td>
<td>15.3%</td>
<td>5.5%</td>
<td>0</td>
<td>0</td>
</tr>
<tr>
<td>Acquiring access to the information technology</td>
<td>48.6%</td>
<td>30.6%</td>
<td>20.8%</td>
<td>0</td>
<td>0</td>
</tr>
<tr>
<td>Access to international books and journals</td>
<td>41.7%</td>
<td>22.2%</td>
<td>6.9%</td>
<td>18.1%</td>
<td>11.1%</td>
</tr>
<tr>
<td>Achieving social status and acceptability</td>
<td>56.9%</td>
<td>25%</td>
<td>4.2%</td>
<td>5.6%</td>
<td>8.3%</td>
</tr>
<tr>
<td>To gain success in future professional life</td>
<td>76.4%</td>
<td>12.5%</td>
<td>0</td>
<td>8.3%</td>
<td>2.8%</td>
</tr>
</tbody>
</table>

A large number of respondents 45.8% opted for ‘strongly agree’ and 37.5% ‘slightly agree’ option when asked they learned English for ‘fulfillment of language requirements as a medical representatives. Most of the participants 61.1% selected ‘strongly agree’ and 25% ‘slightly agree’ category considering broadening of outlook and acquiring of new ideas as a reason. 79.2% of the respondents totally agreed that making presentations was the important reason for learning English language. A good number of the medical representatives 48.6% were strongly agreed that acquiring access to information technology was the main cause of English language learning. There were 41.7% participants who chose ‘strongly agree’ option of the reason ‘access to international books and journals’. According to 56.9% of the respondents, they had strong agreement on the cause ‘achieving social status and acceptability’. Majority of the medical representatives, 76.4% ‘strongly agreed’ and 12.5% ‘slightly agreed’ that they wanted to learn the English language for gaining success in future professional life.

The participants were provided options to identify the difficulties in English language.

Table 3: Language difficulties for medical representatives

<table>
<thead>
<tr>
<th>Difficulty Area</th>
<th>Most Difficult</th>
<th>Very Difficult</th>
<th>Quite Difficult</th>
<th>Somewhat Difficult</th>
<th>Not Difficult</th>
</tr>
</thead>
<tbody>
<tr>
<td>Attending and understanding meetings in English</td>
<td>0</td>
<td>1.4%</td>
<td>12.5%</td>
<td>20.8%</td>
<td>65.3%</td>
</tr>
<tr>
<td>Listening dialogues while watching English media</td>
<td>19.4%</td>
<td>26.4%</td>
<td>30.6%</td>
<td>15.3%</td>
<td>8.3%</td>
</tr>
<tr>
<td>Conversation with foreigners</td>
<td>27.8%</td>
<td>34.7%</td>
<td>16.7%</td>
<td>12.5%</td>
<td>8.3%</td>
</tr>
<tr>
<td>Participation in seminars, conferences and discussions</td>
<td>26.4%</td>
<td>36.1%</td>
<td>13.9%</td>
<td>13.9%</td>
<td>9.7%</td>
</tr>
<tr>
<td>Delivering presentations in English</td>
<td>9.7%</td>
<td>18.1%</td>
<td>34.7%</td>
<td>22.2%</td>
<td>15.3%</td>
</tr>
<tr>
<td>Writing professional reports and letters in English</td>
<td>0</td>
<td>2.8%</td>
<td>5.6%</td>
<td>31.9%</td>
<td>59.7%</td>
</tr>
<tr>
<td>Reading the materials related to professional in English</td>
<td>0</td>
<td>0</td>
<td>6.9%</td>
<td>25%</td>
<td>68.1%</td>
</tr>
</tbody>
</table>

It is noteworthy that 65.3% of the respondents did not feel any kind of difficulty while attending meetings and listening their officers. Majority of the medical representatives encounter difficulty in comprehending dialogues when they watch English movies or TV shows. The conversation with foreigners was categorized ‘most difficult’ and ‘very difficult’ by 27.8% and 34.7% of the respondents respectively. Participation in seminars, conferences and discussions was viewed ‘most difficult’ and ‘very difficult’ by 26.4% and 36.1% participants. Out of 72 medical representatives, 59.7% found writing professional reports and letters ‘not difficult’ and 31.9 % ‘somewhat difficult’. 68.1% respondents opted for ‘not difficult’ and 25% for
The respondents who returned the questionnaire, 52.8% found difficulty in ‘notes taking’. 44.4% participants found difficulty in ‘vocabulary’ while speaking in English and 19.4% found in ‘pronunciation’. When informants were asked their views about difficult aspect in reading skill, 55.6% opted for ‘vocabulary’ and 18.1% opted for ‘writer’s style’. The respondents were asked about difficulties in various aspects of professional writing. Out of all the respondents, 29.2% found difficulty in ‘ordering of ideas’ and 23.6% in ‘verb (tenses)’.

As preferences of the learners are essential to consider before designing a course, the items in this section aimed at identifying the skills which are important for medical representatives.

The questions in this section are included to gather information about existing English language syllabus, training courses and teaching methodology as perceived by the medical representatives.

Majority of the medical representatives were not satisfied with the existing English syllabus in terms of their professionals needs. Only 44.4% viewed existing English syllabus appropriate ‘to moderate extent’ for professional needs. The current English language training courses materials were rated appropriate ‘to moderate extent’ by 61.1% participants. Out of all, 44.4% opted the ‘elective method’ as preferred teaching method, 22.2% selected the ‘communicative method’. According to the responses of the respondents, 27.8% selected ‘practice of pronunciation’ as preferred English learning activity whereas 25% ‘discussions and debates’.

5. FINDINGS AND RESULTS
The responses of the participants indicated that utilitarian value was the main reason and motivation for learning
English language. It is apparent from their responses that they know the significance of English language in their profession. That is the reason that majority of the respondents (almost 83.3%) have expressed that they want to learn the English language for fulfilling their professional linguistics needs as medical representatives. As long as routine professional communication is concerned, the medical representatives usually use English language because it is official language in Pakistan. As a result, it becomes more essential for the medical representatives to learn English.

Integrative reasons for learning English language were reported by a large number of the respondents. They were of the view that they needed to learn English ‘to broaden outlook and to acquire new ideas’, ‘to have access to international books and journals’ and ‘acquiring access to the information technology’.

A vast majority of the medical representatives and Ex-medical representatives were well aware with social status and acceptance attached to the English language in Pakistan. They thought that the English learning is essential to gain social prestige and acceptability. On the other hand, the professional trainers did not consider ‘social status and acceptance’ a reason of any importance for learning the English language.

As English is the official language in Pakistan, the medical representatives and Ex-medical representatives expressed that they needed to learn English language ‘to gain success in future professional life’. It is inevitable for any medical representative to have proficiency in English to progress in professional carrier.

The findings point out that all the respondents think that the medical representatives need to learn all the four skills of language (listening, speaking, reading and writing). Many other aspects of language (vocabulary, grammar, syntax, comprehension, pronunciation etc.) are also required to learn by the medical representatives for participating in their occupational settings. All the respondents have rated the speaking and writing skills more important as compared to the listening and reading skills. However, listening and reading skills are also significant for the medical representatives because these are used by them extensively during professional lives.

On the whole, it is clear from the responses of the medical representatives and Ex-medical representatives that listening does not cause difficulty to great extent for the medical representatives during professional settings. The trainers have also expressed same views with regard to difficulty in the listening skill. However, the medical representatives have reported difficulty in notes taking, decoding and comprehending the unfamiliar accent while listening. Ahmad (2005) has reported the same obstacles in case of the lawyers.

Listening is not a matter of concern with regard to difficulty for the respondents. A small number of the medical representatives and Ex-medical representatives have reported that at times reduction in reading speed may occur due to lack of vocabulary. They have pointed out problems while reading technical and foreign professional literature. The professional trainers have shown satisfaction on the reading skill of the medical representatives but they think that the medical representatives feel difficulty in comprehension due to complex expressions in the text.

The medical representatives, Ex-medical representatives and professional trainers have reported the speaking skill main problematic area. Almost all the respondents have pointed out the use of grammar, accuracy of vocabulary and pronunciation as main areas of concern. Consequently, speaking skill is needed to be considered and focused for reducing problems of the medical representatives.

Similarly, the medical representatives, Ex-medical representatives and professional trainers have identified a number of difficulties regarding the writing skill. The respondents reported problems related to the writing skill are shortage of accurate vocabulary, proper use of tenses, organization of ideas, lack of originality and poor spellings. According to the respondents, all these problems are due to lack of practice in professional writing during educational carrier. They think that general writing practiced during academic carrier is quite different from professional writing.

The findings of this subsidiary question show that vocabulary is the major area of concern for medical representatives. They agree with view of Jordan (1998:149) that learners usually want to increase their vocabulary because they think it as yardstick of improvement in language. As a result, vocabulary seems to be the biggest cause of concern for the medical representatives in Pakistan.

The medical representatives and Ex-medical representatives have expressed dissatisfaction regarding their professional language needs through the existing syllabi of English taught to them during academic carrier. Although the variations are found in their responses yet majority of the respondents have expressed the view that the current syllabi of English do not cater their professional language needs completely. The medical representatives have criticized the existing syllabi because it is heavily literature-based which cannot help them learning the professional language skills required during their occupational settings. Furthermore, they have expressed the dissatisfaction with the teaching of vocabulary and grammar. They believe that functional and pragmatic syllabus can be more useful than literary syllabus.

The professional trainers expressed variant views about the capacity of existing English syllabi for catering the professional language needs of the medical representatives in Pakistan. A few of them have expressed satisfaction while others have shown dissatisfaction. The unsatisfied trainers have the view that current syllabi promote cramming and rote-learning. There is lack of pragmatic aspect with creativity in the
existing syllabi of English in Pakistan.

6. CONCLUSION

The medical representatives in Pakistan have a number of reasons to learn English for professional activities. They need English language in their professional settings in order to accomplish the various tasks. The current syllabi of English language in Pakistan are not adequate to cater the real needs of the medical representatives. The present research study identifies the fact that the medical representatives are more interested in aim-oriented courses of specific nature which can support them to improve language skills, communicative competence and communicative performance in the English language. This situation favours the need of designing and introducing ESP course for medical representatives in Pakistan.

7. RECOMMENDATIONS

The following recommendations and suggestions can be incorporated to design an ESP course for medical representatives in Pakistan.

It is proposed that the course must target the specific language needs of the medical representatives in Pakistan. The collaboration of different stakeholders is essential for devising an appropriate course. ESP practitioners, English language material designers, English language instructors, pharmaceutical managers, doctors, chemists, customers and other concerned members of medical representatives’ discourse community must be consulted to design more effective ESP course.

The ESP courses designed for other fields (tourism, hotel management, business and science and technology) can be instrumental in designing ESP course for the medical representatives.

Variation in linguistic, cultural and educational background can be matter of concern. These diversities must be taken into account while conducting needs analysis.

It is revealed through findings of the study that there is a need to improve the medical representatives’ proficiency in all the four English language skills (listening, speaking, reading and writing). Almost all the respondents think that productive skills (speaking and writing) are more important than receptive skills (listening and reading) required by the MRs in their occupational settings. There should be more focus on productive skills in content design for the medical representatives. However, as far as the English language needs of the medical representatives are concerned, the findings indicate marginal difference between productive and receptive skills. Therefore, ESP course contents for the medical representatives should take into account all four basic language skills due to their integrative roles.

The course contents should develop persuasive and communicative skills in the medical representatives so that they may take part confidently in the field related activities (e.g. general routine conversations, note taking skills etc.). Furthermore, this course should help the medical representatives in other related issues (e.g. report writing, participation in professional training courses, dealing with colleagues, letters, memos, applications, forms, meetings, phone conversation, e-mails, faxes and computer use etc.).

The vocabulary must be incorporated systematically in this course and must be taught in context and in meaning way. The practice and learning of vocabulary should include synonyms, antonyms, collocations, networks and semantic fields. It must also facilitate the medical representatives to devise their own techniques for inferring meaning from context and using dictionary.

The ESP course for the medical representatives should also include contents from general English. The authentic language teaching materials must be incorporated in this course. The selection of the material should be made with specific context in which these contents will be used. The students can easily adapt in accordance with the actual occupational settings. It would save language learners efforts and time. It will be strong motivating and interesting factor for the language learners and will produce better results if they find close connection between their general/professional needs and language course content materials. Consequently, it is proposed that subject specific/general language teaching material must be incorporated in the course instead of literature based content material.

This course should be taught through eclectic approach and it should not focus any specific approach of language teaching. But eclectic approach calls for hard work on the part of the teachers to prepare the lessons for fulfilling the demands of this approach. The language instructors will have to select and design authentic materials from various sources because no particular textbook is available which fulfills the specific occupational needs of the medical representatives in Pakistan.

Critical thinking and problem solving skills must be incorporated in the course because they are useful for promoting learner-centered environment and reducing the role of teachers as facilitator. In this way, these will make the learners independent and autonomous learners of English in the future.

Passive learning techniques are not in the best interest of the learners because these techniques encourage cramming and rote learning. Originality and creativity are proposed to be encouraged in this course for maximizing the active participation of the learners.
Multi-task activities in a variety of formats and approaches are highly recommended in this course because they might prove useful than lecture format.

Communicative use of language in target communicative situations should be focused for structuring this ESP course. The cramming and memorization of grammar rules and language structures should not be given undue focus.

The techniques for correct pronunciation and accent must be added to improve phonological deficiencies of the medical representatives. With these techniques, they would be able to participate in meetings, seminars and conferences. Moreover, it would be useful for them to understand and pronounce names of various diseases and medicines.

This course should maintain an appropriate evaluation system to monitor the English language proficiency of the medical representatives both during course and at the end of course. This evaluation and testing system should be based on research related activities.

REFERENCES