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The Efficacy of a Person-to-person Tutoring Program in a University Context

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How can language learning be promoted in a foreign language setting where outside exposure to the target language is minimal? The English Clinic is a person-to-person tutoring program designed to provide the opportunity for oral communication experience for students in an English program at a university. The efficacy of the Clinic was investigated by analyzing both student and teachers' perceptions of and satisfaction with the program. This article will argue for its necessity through relevant literature and data, provide a description of the Clinic, give an analysis of program efficacy, and give recommendations for development. The aim is to improve the program and help guide other institutions by providing insights in how tutoring clinics can be implemented successfully.

ターゲット言語に触れる機会がごく限られている状況においては、言語学習はなかなか捗らない。「イングリッシュ・クリニック」は、大学の英語プログラムにおいて、学生が口頭でのコミュニケーションを経験する機会を提供するために考案された一対一の対面チュータリングのシステムである。本調査では、学生及び教員が「イングリッシュ・クリニック」の効果についてどのように感じているか、また、その満足度について分析した。本論文は、まず文献及びデータから 「イングリッシュ・クリニック」の必要性について述べ、次に当大学の「イングリッシュ・クリニック」の説明、効果の分析、今後の発展への提案をする。当プログラムを改良するとともに、他大学等の機関におけるチュータリングシステムを首尾よく実施するための手がかりを提供することが、本論文の目的である。

F aculties and programs in universities across Japan face the challenge of creating global citizens who are willing and able to communicate effectively with people from different backgrounds and who can operate in international environments in English. However, the unfortunate reality is that the majority of students engaged in English learning at these institutions have limited exposure to any practical usage of the language. The implications of this lack deserve consideration by language teachers and institutions (Brown, 2007). The English program at our university, focusing on this issue, created a person-to-person tutoring lounge called the English Clinic.

The Clinic is designed as a secondary classroom, wherein the students get an opportunity to use English in a practical and intensive way. It is similar to language lounges at other educational institutions, providing students with a space where they can engage in active, social learning while targeting improvements in oral production (Murray & Fujishima, 2013). While this type of learning environment is still relatively new in Japan, they are starting to fill a role in creating a more effective language program (Mynard, 2016). Another trend is that due to the 2020-2021 pandemic, these kinds of social language spaces are being transformed and re-configured to make more use of online tools and digital environments (Murray & Fujishima, 2013).

The Clinic was established in 2012 and has grown in size over the years to its present form. However, as changes were implemented to the English program, little has changed in the Clinic, except in 2020 and 2021 when it went online in response to the pandemic. In this article, as well as describing the Clinic and its place in the program, the efficacy of the Clinic was investigated by analyzing the perceptions of and satisfaction with the program from all relevant staff and students. It then goes on to make recommendations for its future development.



Reasons for the Clinic

The reasons for the Clinic's initial and continued inclusion as part of the English curriculum stem from a combination of factors. First, the Clinic is considered to be an important part of achieving the program's objectives and goals. Second, it caters to the students' pedagogical needs. And last, it addresses the students' perceived wants and motivations. In this section, these three areas will be explained in detail.

One goal of the program is to promote communicative competence. The term encompasses four distinct competencies—grammatical, discourse, sociolinguistic, and strategic—that taken together, define a set of skills important for second language learning. These skills can be difficult to address in EFL programs in Japan due to the context in which the language is learned; hence, a focus on providing as much exposure to authentic English practice as possible. To do this, the program developed *stations*, including CALL classrooms, an extensive reading library, a movie theater, a DVD lab, and the Clinic.

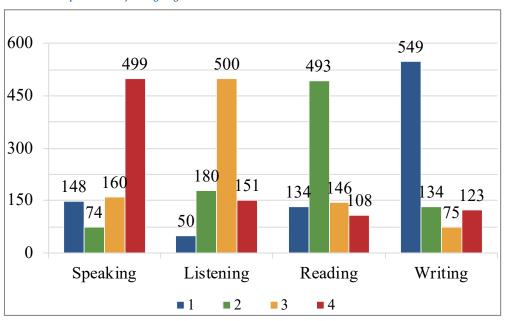
Addressing the students' pedagogical needs focuses on language contact and interaction opportunities beyond the classroom. As with many other English programs, the students generally have few chances to practice their English outside of the classroom because opportunities for genuine interaction with other English speakers are rare. This is often perceived as a factor that limits the students' ability to improve. Thus, the Clinic supplements the classroom and gives students the opportunity for personal guidance or extended interaction with a fluent speaker.

Ideally, the Clinic provides an opportunity to engage with the language in a way that stimulates an ongoing interest in using it. One way of doing this is to create a learning environment that stimulates student autonomy by allowing them to guide the learning process (Dörnyei & Csizer, 1998). Equally important is that the Clinic offers opportunities which are different from the more formal environments of the classroom. Students in the Clinic should be met with a trainer who is warm, engaging, and an active participant in the ensuing discussion. This has the effect of humanizing the lessons making it easier for students to produce a wider variety of language (Alison, 1993). If the goal is to have students think of themselves as English speakers, then communication with and between other speakers is necessary in a neutral, nonjudgmental, safe space where they can experiment with the language and its associated cultural attachments (McKay & Rubdy, 2009).

Now focusing on students' perceived needs and motivations, university survey data shows that the students think speaking is the most important language skill to

acquire. Typically, learners often evaluate their success in language learning as well as the effectiveness of the English program they are involved in by how much they have improved in spoken-language proficiency (Goh & Burns, 2012). From a mid-semester survey of all first-year students conducted in 2019 that rated their perceptions on the importance of English language skills, it was found that students generally regard speaking as the most important skill (see Figure 1).

Figure 1
Perceived Importance of Language Skills



Note. A score of 1 indicates less important and 4 more important. The numbers on the horizontal axis and above the bars indicate the number of students.

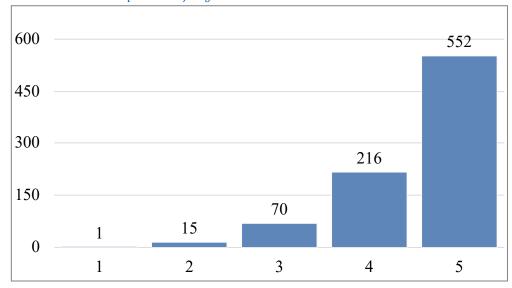
The survey results also showed that the vast majority of the students believed that they need to improve their English-speaking ability. Figure 2 shows student responses to the question of whether they think English speaking ability is important for their future. And





for many of the students educated in Japan, oral competency, it can be argued, has been one of the least developed skills in their English learning up until they entered university. Survey results in both 2020 and 2021 showed similar patterns.

Figure 2
Students' Perceived Importance of English

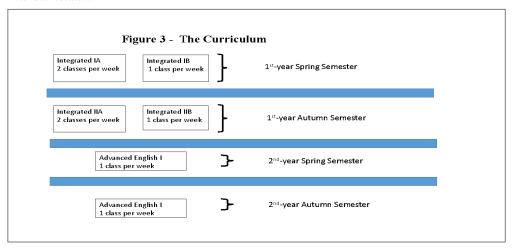


Note. A score of 1 indicates unimportant, while 5 is very important.

Present Situation

All first-year and second-year students in the university have to take certain basic education courses, including English, in order to graduate. The English program requires the students to take and pass a total of eight classes. The students take six classes in the first year, attending three lessons per week in each semester. In the following year, students take only one class during each semester.

Figure 3
The Curriculum



The Clinic has the following characteristics.

- Trainers are non-Japanese fluent English speakers.
- Lessons are conducted entirely in English.
- Lessons are 20-minute, person-to-person tutorials.
- Students reserve and take lessons when their schedules allow.
- Open Monday to Friday between 8:40 and 5:30.
- Attendance is recorded by Clinic trainers.

There is a simple mission statement: *To create opportunities for students to put the English they have studied to practical use and provide experience in international exchanges.* The trainers are encouraged to let the students guide the conversation or discussion. The students are similarly encouraged to prepare discussion topics or to ask the trainers for help with their English studies.

Going Online

Due to the COVID pandemic, in 2020 lessons and the reservation system went online. Lessons were conducted via Zoom. Zoom accounts were set up for the trainers and they



used their account's Personal Meeting Room (PMR), which students were able to join at the scheduled times, with the effect of creating an ad hoc online classroom. This system allowed the participants to attend the lessons from a place more preferential for their unique situations. The Clinic has remained online and it is planned to keep this system in place for the foreseeable future regardless of the COVID situation.

An online reservation system was also created as students were no longer able to enter the university. Before COVID, reservations were made via schedules posted outside the room used for the Clinic's face-to-face lessons. A number of options were considered before a reservation system usually used for sectors of the service industry called <u>coubic.</u> <u>com</u> was chosen. The students enter the system, make a reservation, and receive a confirmation e-mail that includes the relevant Zoom information. The system works well and will also be used in the foreseeable future.

Perceived Issues

Involved in both the day-to-day management and also as part of the teaching staff, it seemed to us that the Clinic was working well. The majority of students reserved and attended the lessons each semester with few specific incidents, and it was generally well-received by both the administration and the teaching staff. However, some issues were raised informally to us by the trainers and by the students in general comments to their class lecturers each semester and these included the following.

- Students were not using the lesson time efficiently. They were doing Clinic unprepared, letting the trainer lead the discussion, and being passive learners.
- Students were not challenging themselves or taking risks. This led to many students repeating well-versed and familiar language in all of their Clinic lessons. For example, repeating basic introductions.
- Some students were reluctant to participate due to confidence issues.
- Trainers were being perceived as less than friendly in their Zoom lessons (there appeared to have been no problems before going online.)

Therefore, it was decided to investigate the efficacy of the Clinic in order to evaluate these perceived issues and to see if any recommendations for future development were needed.

Participants, Methods of Inquiry

The study focused on three relevant but separate groups:

- First-year students taking the Clinic lessons via Zoom.
- The trainers that work in the Clinic.
- Course lecturers that teach the students how to use the Clinic, manage administration issues like no-shows and reservation problems.

Data was collected via surveys.

- During the fall 2020 and the spring 2021 semesters, as part of their mid-term survey, first-year students were asked a series of questions relating to the Clinic (see Appendix A).
- Clinic trainers and lecturers were asked to complete a survey about the Clinic (see Appendix B).

Institutional approval for this project was obtained. The student surveys were university-sanctioned mid-term questionnaires done by the program for all the university's first-year students. They were online, anonymous, voluntary, and only general data were used (no individual data). As well, students were informed about the possibility that the data might be used in research.

Data Analysis

Introduction

First, the data shows the positive impressions that the majority of its participants have of the Clinic. However, it also shows where improvements could be made. The responses from the data collection methods (e.g. the student surveys and the staff surveys) ran in similar directions. Therefore, they have been collated here for simplicity and to better show how the data points towards certain changes that could be made to the program for future development.

Impressions of the Clinic

The first point centers around the perceived usefulness of the Clinic. Both students and staff were asked questions designed to assess their view of how helpful it was for students to improve their English-speaking ability. Responses to these questions were generally positive for both sets of respondents; the Clinic is seen by both staff and students as helping achieve the student goals and objectives. Survey results showed that



624 students viewed the Clinic positively for improving their English speaking. However, 60 students reported that they felt their speaking ability did not improve.

However, the staff responses were more qualified than the student ones. For example, when asked whether they thought the Clinic helped students improve their English, although 25 percent said "yes", the most common response was "somewhat." When asked to explain their opinion (in a follow-up question) two themes became apparent: only two sessions a semester is insufficient to truly improve the students' speaking abilities and the conversations are often repetitive, covering the same topics with little opportunity for actual spontaneous output.

Improvements to the Clinic

In the next sections of the surveys, students and teaching staff were asked their opinions on how to improve the Clinic. Responses here provided insights into how the Clinic can be brought more in line with students' pedagogical needs by focusing on providing tools and information students could use to better drive their own learning. These responses can be divided into three main categories - information, opportunity, and content.

Information

The need for more and better information was shown by students' requests for trainer profiles. Students felt that they had no information regarding who would be assigned to them for any given lesson and that they would like to be able to choose, or at least have knowledge of, the trainer. It should be noted that the demand for this information was so great during the first semester (autumn 2020) that staff profiles were made available in time for the Spring 2021 semester. However, these profiles were on an unrelated website and students have continued to state the need for a quick reference guide connected to the reservation system. As to why students wanted these profiles, the stated reasons ran from simple curiosity to more serious issues, such as some female students being uncomfortable with male trainers in a one-on-one situation.

Opportunity

As stated in the previous section, students are required to attend the Clinic only twice a semester. In the surveys and interviews, both staff and students indicated that opportunities to spend more time in the Clinic would be beneficial to students' learning.

Some students suggested that attendance should be at least three times a semester, others stated their desire for sessions to be longer, or to change from one-to-one to two or three students together in one session while most staff suggested that the frequency of the sessions should increase so that students attend at least once a week if possible but at the minimum once a month.

Content

Many suggestions for improvements to the Clinic came from questions asking about the content of the lessons. At present, the clinic has an "open format" meaning that students can discuss anything they choose. However, students felt they had few ideas about what to discuss with their trainers. They suggested that the topic(s) be decided in advance. This would allow them to prepare better and to be more confident ahead of the lessons.

Staff likewise suggested that topics be pre-determined. Suggestions for topics included IELTs-style questions, topics related to the students' majors, and topics taken from their course books. However, in a crucial difference, some staff felt that students should be the ones to prepare the topic. This would promote student learning autonomy as well as allow the learners to gain more experience at directing conversational flow.

Issues with the Clinic Format

In the last section of the surveys and interviews, student respondents who gave the Clinic a low rating were asked to expand on the issue. Staff were also asked to identify any issues they would like to see addressed. The responses here were varied and more individual than in the previous sections, but several important issues were raised. *Student Stress*

Staff were asked to consider the issue of student stress in relation to the Clinic lessons. They felt that while the Clinic was a little stressful for students, it was not unreasonably so. However, when asked how trainers could reduce student stress, the ideas developed bore close resemblance to those discussed in the previous section.

First, staff felt that students would benefit (i.e. would find the Clinic less stressful) if clearer expectations and goals were set. Suggestions included having a list of topics students could choose from (as discussed in the previous section), a brief memo explaining that the trainer would not be grading the student during the lesson, and a notice describing what skills students should be utilizing during their sessions. And



second, some staff felt that the grading of 5% of the class total had a disproportionate weight given the lack of cohesion between Clinic lesson content and classroom lesson content.

On the student side, these questions of stress were framed as confidence issues. Some students indicated that they were nervous about speaking English, were hesitant or even unable to speak well, and they didn't know what to say or expect in the lessons. More tellingly, some students indicated that it was the trainer's responses, or lack thereof, that caused them to lose confidence in their abilities. Specific comments included references to the dark atmosphere of the lesson, meaning that the trainer was somewhat cool or reserved in their demeanor, while others interpreted vague or semi-verbal responses (e.g. "hmm") as a sign that the trainer was disinterested or bored. These perceptions, whether an actual issue or merely a perceived one, could increase the students' stress during the Clinic session, diminishing the educational value of the project as a whole.

Recommendations

The data revealed areas of the Clinic that could be improved. First, many of the staff and the students stated their preference for an expanded program, meaning more opportunities for students to take sessions, having longer sessions, or allowing more students in each session. Second, a clear structure for the sessions is needed. Students should have the ability to introduce their own topics or direct the sessions themselves, especially those students who are seeking help with their studies or advice about language learning. However, for students who default on preparations, providing an IELTS-style speaking activity ranging from questions and topics taken from the class content as well as extended answers and guided discussions can be meaningful practice. These conversation "guidelines" and topics could be distributed to students and trainers, thus setting clearer goals and expectations.

These "guidelines" could also be used to further integrate the Clinic to students' regular lessons by allowing students to choose from a number of selected topics related to content that would be covered and practiced in class. A single 20-minute session would proceed as follows:

- **Task 1:** The student will be asked to answer general questions about themselves on a range of familiar topics, such as home, family, studies and interests. (Approximately 5 minutes.)
- **Task 2:** The student will then choose or be assigned a topic from the official list and be asked to talk about it. They will have approximately one minute to prepare

- if necessary before speaking. The trainer then asks more questions based on the student's speech. (Approximately 10 minutes.)
- Task 3: The student will be asked further questions connected to the topic in Part 2. These questions provide an opportunity to discuss the topic interactively with the trainer. (Approximately 5 minutes.)

This lesson format follows certain international English-speaking tests, and it aims at practicing students' use of English in a structured but fun and informal environment. The students would be asked to self-assess themselves after the lesson in order to raise awareness and motivation as to what they need to work on to improve. It is hoped that the students would be able to see their development from the first session of the year to the final session.

There were a number of issues that came about when the program went online. For these, two possible solutions include revised staff training and a dedicated program website. A revised staff training program for online learning is needed. This program should include the basics of online tool use, including Zoom, Google Docs, and the reservation system so that trainers might then be able to trouble-shoot as needed. There is also a necessity to create a more positive learning environment over Zoom. Specifically, trainers should have a firm understanding of what it means to be an effective online trainer - they need to perform an active role in the lesson by responding to and interacting with the learner's questions and topics and also be aware of how their presence may be interpreted differently by students over Zoom. The data showed that there were common misunderstandings while teaching online. Basically, there is a need to adapt to create a positive environment and an awareness of how trainers can come across while teaching online.

At the moment, the clinic has no centralized information system online. However, for classroom management and lesson planning, a system called C-Learning is in place, which has the potential for us to directly address some of the students' requests by providing:

- easy-to-access trainer profiles
- a list of topics students can prepare for
- a link to the online reservation system
- contact between students and staff or feedback from trainers

A lot of the issues students stated they had with the online system was that they had to access the online system and the necessary information from multiple platforms.



Conclusion

Other tutoring programs in Japan have been successful due to the ability of their students to interact socially in the target language with other people (Mynard, 2016). These programs foster student needs, and provide an opportunity to use the language in a different way than what a classroom provides. The Clinic is one of those programs, and the teaching staff and many students perceived it as an important component in achieving the language program's goals. It is in line with student needs, and helps to improve student satisfaction.

However, in order to increase its efficacy, changes are needed. Data collected showed that although the program is viewed very positively from both students and staff, certain changes to the Clinic could potentially provide a more efficient approach and the necessary information to better drive student learning. The possible changes include providing students with more opportunities to attend, a more structured approach to the lessons, and dealing with the issues of online learning with more focused staff training and a centralized information system online where students can access all information related to the Clinic in one place.

Bio Data

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Appendix A

Survey Questions for Students

EPUU CLINIC SURVEY 2021

- 1. EPUUクリニックのレッスンでどんなことを話しましたか。
- 2. レッスンは受講しやすかったですかとても受講しにくかった1 2 3 4 とても受講しやすかった
- 3. 上の質問で、「とても受講しにくかった」(1)、「受講しにくかった」(2)と答えた方にお聞きします。それはなぜですか。
- 4. 上の質問で、「とても受講しやすかった」(4)、「受講しやすかった」(3)と答えた方にお聞きします。 それはなぜですか。
- 5. EPUUクリニックはスピーキングカアップのために役立っていると思いますか全くそう思わない 1 2 3 4 とてもそう思う
- 6. EPUUクリニックの予約システムはいかがでしたか。とても使いにくかった 1 2 3 4 とても使いやすかった
- 7. EPUUクリニックの改善のためにご意見をお願いいたします。

Appendix B

Survey Questions for Clinic Trainers

Clinic Survey

Hi, we are doing a research project on Clinic and would really appreciate your honest answers and insights. Could you please provide answers to the questions below?

- 1. We are considering changing the name of the clinic. Do you have any suggestions?
- 2. The purpose of Clinic is to improve the student's speaking ability and give the students an opportunity to use their English in a meaningful way outside the classroom. Do you think Clinic helps the students' speaking ability?



- Yes, it does
- Yes, to some degree
- Not really
- Not at all
- 3. If possible, please expand on your answer to the above question (regarding whether the Clinic helps the students' speaking ability) by explaining how you feel the clinic does/does not help students' speaking ability.
- 4. Is there anything you would like to see changed or improved regarding the focus on improving the students' speaking ability?
- 5. The clinic lessons are open, e.g. there is no set lesson plan. Do you feel this is (check all that apply):
 - Good for students
 - Neither good nor bad for students
 - Bad for students
 - Good for teachers
 - Neither good nor bad for teachers
 - Bad for teachers
- 6. Regarding the previous question, what would you like to see changed or improved regarding the lesson content?
- 7. What topics or themes do you usually use in your Clinic sessions?
- 8. Do you think taking Clinic sessions is stressful for students?
 - Yes, it is.
 - A little stressful.
 - Not so stressful.
 - No, it isn't.
- 9. If applicable to your previous question's answer, can you think of any way to make Clinic sessions (online or person-to-person) less stressful for students?
- 10. At the moment, students must take Clinic twice a semester in order to receive a grade in Integrated-B for a total of 5%. What would you like to see changed or improved regarding scheduling, lesson length, and frequency?

- 11. Do you have any recommendations to improve Clinic?
- 12. Would you prefer Clinic to remain online using Zoom or return to person-to-person sessions once the pandemic is under control? Why?