



Enhancing English Instruction for Japanese Nursing Students

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Reference Data:

Porter, M., Levine-Ogura, J. Y., MacCallum, H., Mathieson, P., Capper, S., & Pauly, M. (2025). Enhancing English Instruction for Japanese Nursing Students. In B. Lacy, M. Swanson, & P. Lege (Eds.), *Moving JALT Into the Future: Opportunity, Diversity, and Excellence*. JALT. <https://doi.org/10.37546/JALTPCP2024-29>

This paper provides a summary of the forum on English for Nursing Purposes (ENP), which was organized by the Japan Association for Nursing English Teaching. Six English instructors with experience teaching nursing students in Japan served as panelists and introduced their teaching contexts, which was followed by an introduction to factors influencing the teaching of nursing students to care for culturally and linguistically diverse (CALD) patients. These factors include Japan's growing population of foreign residents and tourists, initiatives by the Ministry of Health, Labour and Welfare to enhance care for CALD patients, and the low priority given to language studies within nursing programs. Panelists and participants then explored topics relevant to instructors of nursing English such as textbook selection, course content and classroom management, the integration of AI in language learning, and revision of the English curricula within nursing departments.

本稿は、日本看護英語教育学会が主催した看護英語教育 (ENP) フォーラムの概要をまとめたものである。本フォーラムには、日本で看護学生に英語を教えた経験を持つ6名の英語教員がパネリストとして参加し、それぞれの教育現場について紹介を行った。その後、文化的・言語的に多様な (CALD) 患者に対応できる看護学生の教育に影響を与えるさまざまな要因が話題に上った。これらの要因には、日本における外国人居住者や観光客の増加、CALD患者への医療の質の向上を目指す厚生労働省の取り組み、看護教育課程における語学教育の優先度の低さが含まれる。続いて、パネリストと参加者は、看護英語教育に関わる教員にとって重要なテーマである教科書選定、授業設計と運営、語学学習におけるAIの活用、看護学部における英語カリキュラムの見直し等についての意見交換を行った。

Established in 2016, the Japan Association for Nursing English Teaching (JANET) aims to enhance the quality of teaching, learning, and research in nursing English education in Japan (JANET, n.d.). With over 300 members, including English language educators, nursing faculty, and practicing nurses, JANET was officially recognized by the Science Council of Japan in 2022 and became a domestic affiliate of the Japan Association for Language Teaching (JALT) in 2023. Its first official event as a JALT affiliate

was a forum held at the JALT2024 conference in Shizuoka City. The forum successfully brought together educators with diverse levels of experience and interest in the subfield of English for nursing purposes (ENP), fostering a dialogue that aligned with JANET's mission of advancing nursing English education in Japan.

Following the structure of the forum, this paper consists of two sections. The first outlines the current landscape surrounding the teaching of ENP in Japan. It provides an overview of demographic trends, government initiatives, and education policies that have contributed to the growing need for foreign language proficiency and cross-cultural competency among nurses. This context helped forum participants better understand the broader factors shaping nursing English education in Japan. The second section focuses on the key themes and insights from the forum, offering valuable perspectives for educators and professionals working in this subfield.

Background

Demographic Trends

Policies and initiatives to attract foreign residents and tourists have significantly contributed to Japan's increasing cultural and linguistic diversity. Expansion of residential visa categories, driven by the growing workforce shortage, as well as initiatives like the Global 30 Program at public and private universities has fueled the continuing increase in medium- and long-term foreign residents. This population surpassed 3 million for the first time in 2022 and is continuing to grow, exceeding 3.5 million in June 2024 (Immigration Services Agency of Japan, 2024).

The Japanese government has also committed to making the country a popular tourist destination. The passing of the Tourism Nation Promotion Basic Law in 2007 led to the establishment of the Japan Tourism Agency (JTA) in 2008, positioning tourism as a core pillar of Japan's 21st-century economic strategy (JTA, 2024). Prior to 2007, annual inbound tourism numbers never exceeded 5 million, but increasingly ambitious 10-year targets have been set by the Japanese government, starting with 10 million by 2010, then 40 million by 2020, and 60 million by 2030 (JTA 2007, 2016).

Subsequent changes to visa regulations, particularly for travelers from China and other Asian countries, significantly eased access to Japan for foreign tourists, leading to annual record-breaking increases in the number of inbound tourists (Ministry of Land, Infrastructure, Transport and Tourism, 2016). While the COVID-19 pandemic brought global travel to a halt, Japan's borders have since reopened. Factors such as a weak yen, strong demand for international travel, and over a decade of strategic policies have

contributed to an all-time high of 35 million inbound visitors in 2024 (Ng, 2024; Japan National Tourism Organization, 2024).

Of particular relevance to this discussion here is the identification of medical tourism as a potential area of economic growth under the *New Growth Strategy* adopted by the Kan Cabinet on June 18, 2010 (Cabinet Public Affairs Office, 2010). In line with this strategy, a medical stay visa was introduced in early 2011, allowing foreign nationals and their companions multiple entries into Japan for medical examinations and treatment. This initiative served as a wake-up call for Japanese hospitals, highlighting the challenges of providing care for culturally and linguistically diverse (CALD) patients. According to the most recent data from 2023, a record 2,295 medical stay visas were issued, primarily to individuals from China and Vietnam (Ministry of Foreign Affairs of Japan, 2024). While this number remains relatively small, it underscores the growing impact of foreign tourists, and to a lesser extent foreign residents, on Japanese hospitals, emphasizing the need for further preparation to meet their needs.

Pressure on Health Facilities and Nurses

The increase in foreign-born individuals visiting and residing in Japan has led to a higher likelihood of health facility visits by people whose first language is not Japanese. To address these challenges, the Japan Medical Education Foundation established the Japan Medical Services Accreditation for International Patients (JMIP) on behalf of the Ministry of Health, Labour and Welfare (MHLW) in 2011. This accreditation scheme was designed to ensure the quality of medical institutions serving CALD patients by requiring measures such as multilingual signage, interpretation services, and culturally sensitive practices. In 2015, a second certification scheme, Japanese International Hospital (JIH), was introduced by Medical Excellence Japan, a foundation established with the support of the Ministry of Economy, Trade and Industry (METI) to promote the export of Japanese medical technology and develop Japan's inbound medical tourism industry.

The MHLW established the Commission on the Provision of Medical Care to Foreign Visitors to Japan in 2018, with one of its aims being to identify at least one hospital in each prefecture that could act as a hub in treating serious cases involving CALD patients and secondary hospitals capable of managing less serious cases (MHLW, 2018). In the following year, the commission began conducting an annual survey to assess the intake of CALD patients and hospital preparedness for their care. The most recent survey, covering the period from September 1-30, 2024, was distributed to the 8,190 hospitals registered with the Gathering Medical Information System (G-MIS). Of the

5,673 hospitals that responded (69.3%), 2,813 (54.3%) reported seeing at least one CALD patient during that period. Among these, the most common response was ‘fewer than 10 patients,’ reported by 1,273 hospitals. Additionally, 86.2% of the 608 hub hospitals and 97.1% of the 70 JMIP- or JIH-accredited hospitals reported seeing at least one CALD patient (MHLW, 2024).

On behalf of METI, Nomura Research Institute conducted a series of investigations between 2010 and 2015, examining, among other issues, hospital attitudes toward accepting CALD patients and the challenges associated with accommodating them (Nomura Research Institute, 2016). A survey was distributed to 9,420 healthcare facilities across Japan in late 2015, with 2,580 responses received (a response rate of 27%). Among these facilities, only 17.6% reported having made preparations for accommodating CALD patients. When asked about key accommodations, respondents frequently identified language-related measures as important, including foreign language documents (42.0%), bilingual healthcare workers (34.6%), access to external (28.9%) and internal (27.4%) interpreters, and multilingual signage (31.3%).

One question from the same survey asked respondents to rank up to five problems or issues from a list of 16 that contributed to hospital reluctance in accepting more CALD patients. Of the 2,509 respondents, the most frequently cited challenges were difficulties in dealing with patients from different linguistic and cultural backgrounds (72.7%) and a lack of doctors and nurses proficient in foreign languages (71.7%). Follow-up interviews were conducted with staff from 62 healthcare facilities, including both clinics and hospitals of various sizes. A common expectation expressed by respondents from these facilities was for government and healthcare organizations to increase the number of healthcare professionals with foreign language skills. As nurses spend the most time at the bedside with patients, their role in bridging linguistic and cultural gaps is especially critical, underscoring the importance of preparing nurses to care for CALD patients.

Nursing Programs and English Language Education

The basis for modern nursing education in Japan is the 1948 Act on Public Health Nurses, Midwives, and Nurses, which, among other provisions, outlined the roles of each profession, established national licensing exams, and specific eligibility requirements for candidates (Ministry of Justice, 2020). Becoming a nurse requires completing either a four-year course at a university or a three-year course at a junior college or nursing vocational school. Building on this Act, the Ministry of Education, Culture, Sports, Science and Technology (MEXT) and the MHLW issued a joint ordinance in 1951 to

regulate the curriculum at schools for public health nurses, midwives, and nurses. This clear definition of the training and roles of nurses can provide a foundation for English teachers, enabling them to identify relevant content for nursing-specific English classes.

The exponential increase in university nursing programs spurred by the enactment of a 1992 Act aimed at addressing the growing need for nursing professionals in an aging society raised concerns about the quality of these programs (MEXT, 2017). In response, MEXT established the Committee for Fostering Human Resources in Nursing Education, which issued a report in 2011 proposing five groups of fundamental abilities essential for nursing practice. The timing of the report coincided with initiatives to increase the number of foreign-born residents and tourists in Japan and the efforts to expand the inbound medical tourism industry. However, despite identifying communication skills as critical in nursing care, the report did not specifically address the anticipated rise in CALD patients (MEXT, 2011). Instead, it referenced a general foreign language goal for university graduates established by the Central Council for Education. Building on the 2011 report, the committee released the Model Core Curriculum for Nursing Education in 2017. For the first time, this model explicitly considered the care of CALD patients, as reflected in objective E-1-2-i: “Understand nursing in light of the cultural background of foreign residents in Japan” (MEXT, 2017). However, the core model curriculum makes no explicit mention of the need for foreign language education, leaving a critical aspect of communication with foreign residents and tourists unaddressed.

Despite the clear need for nurses who can communicate in English, the limited emphasis on foreign language training in nursing education, combined with demanding course loads and rigorous practical training schedules, makes it challenging to provide nursing students with adequate English instruction. Porter (2018) analyzed English courses in the 2017–2018 curricula of 159 nursing programs at 156 private universities, which accounted for 63% of all nursing programs and nearly 70% of the nation’s nursing students. Most programs offered English courses in the first (99.4%) and second years (80.5%), but offerings dropped significantly in the third (32.7%) and fourth years (26.4%). On average, students were required to take three English courses, with less than 2% of the programs requiring English courses in the third or fourth years. Among 1,052 syllabi reviewed, 42.4% included English for medical purposes (EMP), and 60.3% of nursing programs required at least one EMP course, predominantly in the first or second year. However, only 60.1% of these courses focused on oral communication, highlighting a gap in preparing nursing students for direct interactions with patients in English.

One final concern is the rapid increase in nursing programs. In 1991, there were only

11 nursing schools, but by May 1, 2023, this number had risen to 300 (MEXT, 2023). Porter also examined the employment status of instructors, finding that among 530 instructors identified across 140 programs, 317 (58.9%) were part-time. Additionally, 14 programs (9.1%) placed nursing students in English courses with other majors, taught by a mix of full- and part-time instructors. The rapid approval of new nursing programs has introduced many English teachers who may be unfamiliar with the specific needs and unique circumstances of ENP in Japan. Consequently, programs without dedicated English instructors or nursing faculty advocating for the integration of English instruction tailored to the care of CALD patients may struggle to improve the quality of their English courses and teaching methods. Academic organizations such as JANET can play a crucial role in addressing these challenges by providing a platform for educators to share experiences, resources, and strategies for improving English instruction in nursing education.

Discussion

The forum panel consisted of six JANET members, five of whom responded to a call for participation included in multiple issues of the JANET monthly newsletter, which reaches all 313 current members. The remaining panelist was the forum organizer. The panel represented a diverse range of nursing programs in Japan, including public and private institutions, 3- and 4-year programs, as well as general universities, medical universities, and nursing colleges. To begin, each panelist introduced their institution, offering detailed insights into the structure and unique characteristics of the English courses within their respective nursing programs.

The discussion was facilitated by one of the panelists and followed a semi-structured format. Prior to the conference, the panelists had collaboratively developed a list of eight discussion topics, which was narrowed to five due to time constraints. While the curated topic list provided structure, the format also allowed flexibility for relevant questions and comments from forum participants. What follows is a detailed report on the forum's key themes and insights.

Textbooks and Course Content

The discussion began with a focus on textbooks, which panelists noted have improved over the years. However, there remains an over-reliance on Japanese within these materials, which poses challenges for part-time teachers or those with limited Japanese ability. Additionally, textbooks produced outside of Japan often include scenarios that

may not be relevant to Japanese nursing students, such as interacting with English-speaking healthcare professionals, and are sometimes designed for students who are already licensed nurses in their home countries. To address this, suggestions were made to include supplemental materials—such as worksheets and practice activities—designed for the Japanese nursing context and incorporating language support. The conversation then turned to the role of general English in nursing programs. Panelists emphasized that general English is just as important as nursing English, as a solid foundation enables students to handle casual, day-to-day conversations with patients. With nurses interacting more frequently with patients in informal settings, general English becomes essential for building rapport and improving communication. In addition to English, panelists discussed the importance of exposing nursing students to other foreign languages, including both American and Japanese sign language, as well as introducing them to the concept of easy Japanese and its usefulness in healthcare.

The topic of role-play and patient simulations was also explored, with panelists agreeing that such activities are particularly beneficial in the later years of nursing programs. One panelist noted that first-year students often lack sufficient knowledge in nursing-related Japanese communication skills, making role-play impractical at an early stage. Moreover, time constraints in the third and fourth years of nursing programs often limit opportunities for patient simulation, despite its proven value in preparing students for real-life scenarios.

A participant raised a question about addressing students' concerns regarding the relevance of learning nursing English, particularly in rural areas of Japan. In response, one panelist described their approach of highlighting English as a global lingua franca that facilitates communication among speakers of diverse first languages. Another panelist questioned whether it is the responsibility of English language educators to promote this perspective, noting that it could be perceived as biased, particularly when conveyed by non-Japanese instructors. A suggestion was made that nursing faculty should take on the role of educating students about international nursing contexts, thereby underscoring the practical advantages of English proficiency in the field.

Classroom Management

The issue of mixed-level classes was also raised, with panelists agreeing on the importance of striking a balance: providing easier content for lower-level students to assist their learning while at the same time offering challenging content for those at a higher level. Managing large classes emerged as another significant hurdle, especially

when some nursing programs have English courses with over 100 students. Panelists shared strategies such as assigning group leaders or spokespersons to guide discussions, take notes, and provide feedback to the entire class. Some suggested using a student as an assistant language teacher (ALT) to facilitate classroom activities. Additionally, platforms like ZenGengo and Teams were recommended to monitor student progress more effectively and ensure that all students remain engaged.

Integration of AI

The topic of AI and its place in ENP was briefly addressed. One panelist described using AI to support patient simulation practice. However, as noted earlier, first-year nursing students lack the clinical knowledge even in Japanese to effectively utilize premade chatbots. To address this, a custom prompt was developed for use with ChatGPT. Using the smartphone application's voice chat functionality, students were able to interact with a simulated patient. This method has the advantage of catering to the needs of novice students by offering a tailored, accessible practice partner available anytime. On the other hand, challenges included a learning curve for students unfamiliar with setting up and using applications such as ChatGPT, as well as instances where ChatGPT switched roles or reverted to speaking in Japanese despite the prompt explicitly stating not to. As AI continues to play an expanding role in education, this topic will undoubtedly be explored in greater depth at future JANET events.

Placement of Courses in the Curriculum

Finally, panelists commented on the structure of English language courses in Japanese nursing programs, specifically the tendency to front-load English courses early in the curriculum. While this approach may seem logical from a nursing school's perspective, the forum brought up the potential advantages of introducing nursing English later in the nursing curriculum. Placing nursing English courses early in the curriculum often limits the effectiveness of learned content because first-year students lack the clinical knowledge and practical nursing experience needed to fully grasp or apply the specialized vocabulary. Without sufficient practical context, the nursing English lessons may feel abstract and less relevant. This could impair comprehension and retention, potentially leading to decreased motivation.

The value of focusing on general English during the early years of a nursing program was also noted. Panelists agreed that general English proficiency is essential for day-to-day interactions, particularly in informal settings where trust and communication is

critical. As such, it was seen as fundamental to building patient rapport—an essential component of nursing care. It was agreed that general English better prepares students to engage in casual, patient-centered communication.

As noted earlier with role-play and patient simulations, one panelist suggested that nursing English might be more beneficial if introduced later in the curriculum when students are more familiar with nursing practices and clinical scenarios. At this stage, students are better positioned to understand and apply the specialized vocabulary and communication strategies required in nursing (i.e., readiness). Matching nursing English with clinical hands-on training could also enhance its practical relevance and support immediate application in real-world settings.

Conclusion

This panel discussion on the teaching of ENP in Japan was insightful for both participants and panelists. By contextualizing the need for nurses to effectively communicate with Japan's growing CALD patient population, attendees were able to reflect on the importance of aligning English courses with the progression of clinical skills and enhancing communication practice through role plays, nursing simulations, and online tools, including AI. However, meaningful improvements in course placement, content, and student engagement will require intentional collaboration between English instructors and nursing faculty. Despite the limited presence of English instructors in these discussions, cooperation between language specialists and nurse educators will be crucial in preparing nursing students for the linguistic and cultural demands of modern healthcare in Japan. Overall, the forum reaffirmed the need for a thoughtful and adaptive approach to nursing English education, one that responds to the evolving demands of healthcare and supports students in becoming effective communicators in both local and international contexts.

Bio Data

Mathew Porter began teaching nursing students at Fukuoka Jo Gakuin Nursing University in 2015 and is a co-founder of the Japan Association for Nursing English Teaching. His research interests include the use of patient narratives to foster empathy and simulation training with English-speaking simulated patients. He hopes his patient narratives and simulation scenarios will prepare his students to engage more confidently and compassionately with culturally and linguistically diverse patients. <porter@fukujo.ac.jp>

Jonathan Yoh Levine-Ogura has taught nursing students since 2006 and is assistant

director of the Japan Association for Nursing English Teaching. His research focuses on motivation and grit, especially through internet-based technologies. His early experience as a medical office assistant in the U.S. with Japanese patients highlighted the importance of empathetic care that respects diverse values, and this perspective continues to shape his teaching today. <jylogura@iwate-med.ac.jp>

Hayley MacCallum has been the lead English instructor for the Nursing Department at Yokohama City University since 2017. Drawing on her background as a registered nurse, she has successfully redesigned existing Nursing English courses and developed innovative new curricula to meet the evolving needs of nursing students. With her clinical experience, Hayley brings a unique perspective to her teaching—and a particular frustration with the often unrealistic portrayal of CPR in TV and film. <hayley.maccallum@gmail.com>

Paul Mathieson is the head of the Department of Basic Medical English at Nara Medical University, where he has worked since 2016. Paul is the coordinator of the medical English and nursing English programs at Nara Medical University. Drawing upon his own experience learning multiple languages, Paul continually seeks to find ways to engage, inspire, and motivate his students. Paul's research interests include vocabulary acquisition, ESP, CLIL, and materials development. <mathieson@naramed-u.ac.jp>

Simon Capper has over 30 years of experience in Japanese universities. He is a co-founder of JANET and has been a professor at the Japanese Red Cross College of Nursing since 2004. Including the nursing English texts, Bedside Manner Beginner and Bedside Manner Intermediate, he has authored and co-authored more than 20 English textbooks. <capper@jrchn.ac.jp>

Martin Pauly has been teaching at Tsuchiura Kango Senmon Gakko for 5 years. He retired from Tsukuba University of Technology, Faculty of Health Sciences (Division for the Visually Impaired) after 23 years. He uses the textbook English For Nurses (Margaret Yamanaka, Asahi Press) and teaches the basics of JSL and ASL. He is president of the JALT Ibaraki Chapter. <pauly@k.tsukuba-tech.ac.jp>

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