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Exploring Nursing Students' Perceptions of English Learning for Palliative Care Communication

Linauli Happy Christina Zega[1*], Elyin Artha Karlina Lumban Gaol[2], Enni Juliani[3], Ribka Sabarina Panjaitan[4], Yarwin Yari[5], Resti Amalia[6]

[1,2,3,4,5] *Sekolah Tinggi Ilmu Kesehatan RS Husada, Indonesia*
[6]*Universitas Bangka Belitung, Indonesia*

**Corresponding e-mail: linaulihcz@gmail.com*

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ABSTRACT

Effective communication combining clinical competence with empathy and cultural sensitivity is central to quality palliative care. In globalized healthcare, English proficiency has become essential for nursing students, not only as a professional tool but as a medium for compassionate, ethical communication. This study aims to explore nursing students' perceptions of learning English for palliative care communication, identify the challenges they face in developing empathetic and clinical language competence, and propose pedagogical strategies to enhance English-for-Nursing curricula. A mixed-method research design was employed with undergraduate nursing students from STIKes RS Husada, Jakarta. Data were gathered through questionnaires of all 40 students, and semi-structured interviews were conducted online with 10 selected students. The results of the study showed that students' perception of the importance of English in palliative care communication was in the agree and strongly agree categories, with an average overall score of 81.5%. The highest indicator was the importance of English for the future career of a nurse. The result also highlighted that 42% of students experienced challenges in learning English for palliative care, namely expressing empathy, understanding vocabulary, role-playing, limited opportunities to practice, and cultural differences. Interview data confirmed that students recommend role-play, simulation, peer dialogue, and multimedia immersion for improvement, highlighting interactive and experiential learning strategies.

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INTRODUCTION

Palliative care, according to the World Health Organization (WHO, 2020), is a comprehensive approach focused on enhancing the quality of life for patients and their families dealing with life-threatening illnesses by preventing and alleviating suffering. It includes handling of physical symptoms along with emotional, psychological, social, and spiritual aspects of care (Ferrell & Coyle, 2015). In this multifaceted framework, communication acts as the foundation of successful palliative nursing. By utilizing effective communication, nurses establish trust, express empathy, facilitate collaborative decision-making, and offer comfort to patients and families during sensitive times (Back, 2019). Insufficient communication, on the other hand, can result in patient distress, confusion, and a decline in the quality of end-of-life care (Wittenberg-Lyles, 2020). In a progressively globalized healthcare landscape, English has become the primary means of professional communication, medical training, and research distribution. For nurses, proficiency in English is more than an academic advantage; it is a professional requirement facilitating collaboration internationally, access to global evidence-based practices, and

involvement in worldwide health initiatives (Allum & McGarr, 2016). In Indonesia, this worldwide change is bolstered by the Government-to-Government (G-to-G) overseas nursing initiatives and international hiring prospects that require proficiency in English communication (Husna & Hindriyastuti, 2023). Consequently, nursing programs have started to prioritize English for Specific Purposes (ESP) in their courses, aiming to equip graduates for global job opportunities and cross-cultural communication.

The *Kurikulum Inti Pendidikan Ners Indonesia* (AIPNI, 2015) establishes a national standard for nursing education, requiring students to master the four language skills listening, speaking, reading, and writing through health service simulations and professional communication contexts. However, in reality, English teaching in nursing programs frequently remains broad and lacks context. Numerous students have a theoretical understanding of grammar and vocabulary, yet find it challenging to use English efficiently in real clinical contexts, especially during emotionally intense interactions like palliative care. According to Husna and Murtini (2019), Nursing education's English proficiency should transcend mere linguistic correctness; it should also embody sensitivity, empathy, and professionalism in actual healthcare interactions.

Even with continuous attempts to incorporate English education into nursing programs, difficulties remain. According to Robinson (1991), English for Specific Purposes (ESP) necessitates a well-defined objective focus customized to the professional requirements of learners. Nevertheless, Indonesian nursing students frequently deal with anxiety and self-doubt while speaking English, struggle to grasp medical and palliative terms, and find it challenging to express empathy in a foreign language (Setyawati & Hapsari, 2022; Alghamdi, 2021). These obstacles show that learning English in nursing is not just a language task but also an emotional and cultural journey that influences nurses' ability to communicate with compassion.

Globally, there is an increasing academic focus on the importance of communication skills in palliative care (Ferrell & Coyle, 2015; Wittenberg-Lyles, 2020), but the connection between ESP education and palliative communication is still insufficiently examined especially in countries where English is not the primary language. Few studies have investigated nursing students' views on learning English as it relates to their readiness to communicate with patients and families in palliative care settings. Grasping these perceptions is vital, as they affect students' motivation, confidence, and involvement in both language and clinical training (Suikkala, 2022). Additionally, recognizing perceived challenges and expectations can aid in creating pedagogically relevant curricula that incorporate language learning with the humanistic aspects of nursing practice. Consequently, this research aims to fill this gap by examining nursing students' views on English learning in communication related to palliative care. The focus is on understanding how students perceive the significance of English in palliative care, the challenges they face in learning to communicate compassionately in English, and their hopes for enhancing the curriculum.

METHOD

This research aims to explore nursing students' perceptions of learning English for palliative care communication, identify the challenges they face in developing empathetic and clinical language competence, and propose pedagogical strategies to enhance English-for-Nursing curricula. Since this study combines a quantitative approach with numerical data and a qualitative approach with sentence-based data, the research design used a sequential explanatory mixed-methods design. This research enabled the examination of nursing students' views on English learning related to palliative care communication, a subject that encompasses both linguistic and emotional aspects. The design corresponded with the study's aim to produce actionable insights for improving the curriculum, rather than to create a new theoretical model.

The research took place at Sekolah Tinggi Ilmu Kesehatan (STIKes) RS Husada, Jakarta, Indonesia, as part of the nursing undergraduate curriculum. The participants included forty nursing students in their sixth semester who were presently attending the English for Nursing course. Data collection was carried out over twelve weeks, from 3 March to 30 May 2026. The

questionnaire was administered online via Google Forms for accessibility during the earlier part of this period; interview participants were subsequently identified from their questionnaire response patterns and interviewed individually to ensure privacy and depth, with data collection concluded. All participants were provided informed consent electronically before participation. They were guaranteed confidentiality and anonymity during the research process. Participation in both the questionnaire and the interview was voluntary, and students were informed that their decision to participate, or not to participate, would have no bearing on their academic assessment. This research received ethical approval from the research ethics committee of [No: 231/Int/STIKes-RSHSD/III/2026].

This group was selected as soon as they had previously finished basic English and introductory palliative care courses, which made them acquainted with both the linguistic and clinical aspects of the research focus. A purposive sampling method was utilized to guarantee that participants fulfilled the inclusion criteria and could offer pertinent insights (Creswell & Poth, 2018). The eligibility criteria included: (1) finishing at least two English for Nursing courses, and (2) previous exposure to the idea of palliative care via coursework or clinical observation. After completing the questionnaire, ten students were purposively selected for semi-structured interviews to gather more profound qualitative information. Consistent with the sequential explanatory design, the questionnaire was administered first; once responses were collected and reviewed, interview participants were selected based on their response patterns—particularly students who expressed neutral or lower agreement on items related to palliative care communication and English-learning challenges—so that the qualitative phase could explain and deepen the quantitative trends. Interviews were then conducted individually in the weeks following the questionnaire phase, within the overall twelve-week data-collection period. Selection also considered diversity in gender, English skills, and clinical experience, guaranteeing a range of viewpoints.

The data were gathered through a closed-ended questionnaire for quantitative insights and a semi-structured interview for qualitative information. To answer the first and second research themes, which contain quantitative data, this study adopted a closed-ended questionnaire developed by Takele et al. (2022). The questionnaire assesses nursing students' perceptions of the importance of English in palliative care and challenges in English learning, including difficulty expressing empathy, limited exposure to clinical English, linguistic anxiety, and cultural barriers. The questionnaire was categorized into 2 themes: the importance of English in palliative care communication and challenges in learning English in that context. Each questionnaire consisted of 5 statements with a four-point Likert scale, namely Strongly Agree (4), Agree (3), Disagree (2), and Strongly Disagree (1). The statements in the questionnaire were prepared based on the same four indicators as the interview guide so that the two instruments complement each other.

Prior to administration, item wording was linguistically and contextually adjusted for the Indonesian nursing education setting to improve comprehensibility for participants; however, no formal content validity assessment or reliability testing (e.g., Cronbach's alpha) was conducted for the adapted instrument in the present study, and the quantitative findings were interpreted with limitations. To obtain more comprehensive data in addressing the first and second research themes, in-depth, semi-structured interviews were conducted individually, via Zoom, with ten nursing students regarding their perceptions of English learning for palliative care communication. All interviews were recorded and transcribed verbatim to preserve accuracy, and transcripts were checked against the recordings for completeness before analysis. Interview data were analyzed using thematic analysis (Braun & Clarke, 2006).

Interview data were analyzed and transcribed. Each transcript was read repeatedly to achieve familiarity with the data before initial codes were generated using an inductive approach. Similar codes were then organized into potential themes, which were reviewed, refined, and clearly defined through an iterative analytical process; the final themes were developed based on their relevance to the research questions and were supported by representative participant quotations. To enhance the trustworthiness of the findings, the author maintained an audit trail

documenting the coding process, theme development, and analytical decisions throughout the study, providing a transparent record of the analytical process. The questionnaire data were analyzed quantitatively and descriptively by calculating percentage scores for each indicator. The results of the questionnaire analysis were then used to strengthen and confirm the findings from the interview data. The validity of the data is ensured through triangulation techniques, namely by comparing interview and questionnaire data to ensure the consistency of findings. The questionnaire's content validity was established through expert judgment by two lecturers in educational studies and four lecturers in nursing studies, who reviewed the alignment of each item.

RESULTS AND DISCUSSION

This section presents the results of data analysis from a questionnaire administered to 40 respondents, describing demographic characteristics and key findings of the study. It is known that 92.5% (37 respondents) are female, while 7.5% (3 respondents) are male. Based on demographic characteristics, only 27.5% (11 respondents) have experience learning English, particularly Medical English. It means they know about learning English in a medical context. It refers to the students' comprehension of the terms, vocabulary, and expressions used in nursing communication. While 65% (26 respondents) have learnt general English, which means they learnt English at school or any English course, and 7.5% (3 respondents) have no experience in learning English. Furthermore, the findings shown 77.5% (31 respondents) have clinical practice experience. Most of them get it in their apprenticeship. This program is conducted by the college for nursing students. Meanwhile, 22.5% (9 respondents) have no clinical practice experience. This experience refers to their understanding of how important English learning is in their practical activity. Students with palliative care clinical practice experience are more aware of real-world communication needs. It can be seen by how they see that building interactions with patients and families requires empathy, appropriate word choice, and sometimes involves English. In addition, they become more appreciative of the role of English: Because of exposure to clinical situations, students will feel that English language skills are not just academic theory, but are truly helpful in providing information and support. On the other hand, students without clinical practice experience have only a theoretical understanding. They may consider English important in general, but cannot imagine how critical its role is in sensitive conversations.

Perceived Importance of English in Palliative Care Communication

To answer the first and second research themes about nursing students' perceptions of the importance of English in palliative care communication, the collected data were gathered from a closed-ended questionnaire, which is presented in Table 1 below.

Table 1. Students' Perceptions of Relevance

Sub-themes	Students' Response					Total
	SA	A	N	D	SD	
English is important for a future career as a nurse.	27	10	3	0	0	40
English is essential for communicating with patients and families in palliative care.	13	13	14	0	0	40
English helps me access updated medical literature and research on palliative care.	19	14	7	0	0	40
Learning English increases my confidence in clinical communication.	19	14	6	1	0	40
English for Nursing should be integrated into the nursing curriculum.	17	17	5	1	0	40
Total	95	68	35	2	0	200
Percentage	47.5%	34%	17.5%	1%	0%	100%

The data show overwhelmingly positive perceptions of the importance of English in nursing and palliative care contexts. Out of 200 total responses, 47.5% strongly agreed, 34% agreed, while only 17.5% remained neutral and 1% disagreed. No respondents strongly

disagreed, indicating a consistent recognition of the role of English in nursing education and practice. Relating to English for Career Development, a significant majority (27 students strongly agreed and 10 agreed) considered English important for their future career as nurses. This aligns with the findings of Bosher and Smalkoski (2002), who emphasized that English proficiency is a critical skill for non-native nursing students in professional contexts, particularly as healthcare becomes increasingly globalized.

Regarding communication with patients and families in palliative care, responses were more evenly distributed: 26 students agreed/strongly agreed, while 14 remained neutral. This suggests that although students recognize the potential importance of English, many may not have had sufficient clinical exposure to directly experience these communication needs. (Wittenberg, 2017) argued that effective communication, including empathetic language, is central to palliative care, and limited proficiency can hinder the nurse–patient relationship. This pattern is consistent with the qualitative interview data, in which several participants described limited direct exposure to palliative care settings and expressed uncertainty or anxiety about using empathetic English expressions in real clinical encounters. Read together, the relatively high proportion of neutral responses on this item and the interview accounts of limited clinical exposure and language anxiety suggest that neutrality reflects inexperience rather than indifference. This integration illustrates how the qualitative phase of the sequential explanatory design helps explain the ambiguity observed in the quantitative results.

The third sub-theme shows English for Accessing Medical Literature. A total of 33 students (82.5%) agreed or strongly agreed that English enables them to access updated medical literature and research, highlighting awareness of English as the dominant language of science. Murphy and Rankin (2003) similarly noted that English proficiency gives nursing students better access to international evidence-based practices, which is particularly vital in specialized areas like palliative care. Responses on English for Confidence in Clinical Communication show that 33 students (82.5%) believed learning English increased their confidence in clinical communication, although one respondent disagreed. This is consistent with (Miao & Ma, 2023), who found that language training enhances students' self-efficacy in clinical interactions, reducing anxiety and improving overall competence.

Finally, 34 students (85%) agreed that English for Nursing should be formally integrated into the curriculum. This reflects a strong demand for systematic instruction, not just incidental learning. Suikkala (2022) stressed that embedding palliative care and communication training within undergraduate nursing curricula significantly improves students' readiness for real-world practice. Overall, the analysis reveals a high level of agreement that English proficiency is essential for nursing students, particularly in accessing medical literature, building career opportunities, and communicating in clinical and palliative care settings. The relatively higher number of neutral responses in the communication sub-theme suggests that a lack of clinical exposure may limit students' understanding of the practical role of English in palliative contexts. These findings reinforce the argument that integrating English for Nursing—especially in sensitive areas like palliative care—into the curriculum is both necessary and timely.

Challenges in Learning English for Palliative Care

After understanding nursing students' perception of the importance of English in palliative care communication, it continues with exploring the students' learning challenges in learning English for palliative care. The sub-themes of challenges are categorised into five parts. The collected data can be seen in Table 2 below.

Table 2. Challenges in Learning English for Palliative Care

Sub-themes	**Students' Response**					**Total**
	SA	A	N	D	SD	
Finding difficulties in using empathetic expressions.	2	11	22	5	0	40
Medical and palliative care vocabulary is difficult to understand.	3	12	22	3	0	40

Feeling anxious when role-playing.	1	11	22	6	0	40
Limited opportunities to practice English affect my learning.	8	14	15	3	0	40
Cultural differences make palliative communication harder.	7	15	15	3	0	40
Total	21	63	96	20	0	200
Percentage	10.5%	31.5%	48%	10%	0	100%

Analysis of students' perceptions regarding challenges in English learning for palliative care communication revealed several important patterns. As shown in the data, nearly half of the respondents (48%) selected *Neutral* across different items. A neutral response can have several possible sources, including genuine uncertainty, limited exposure to real-life situations where English is actively required, difficulty interpreting a given item, or a genuinely neutral view. Where the interview data offer a more specific explanation for a particular item, this is noted below as an interpretation drawn from the qualitative strand rather than as the inherent meaning of the questionnaire response itself. One of the most salient findings concerns the difficulty in using empathetic expressions in English. Although 32.5% of respondents agreed or strongly agreed, more than half remained neutral or disagreed. This indicates students have been aware of the importance of empathy, but often struggle to express it in a second language. Wittenberg (2017) emphasized that empathetic communication is central to palliative nursing, yet students frequently lack the linguistic resources to deliver compassionate messages effectively.

Similarly, the challenge of understanding medical and palliative care vocabulary was widely reported, with 37.5% of students acknowledging this difficulty. While this reflects recognition of the problem, the majority opted for a neutral response, which the interview data suggest may be attributable to insufficient exposure to palliative care terminology rather than to a lack of awareness of the problem: several interview participants explained that they encountered specialized vocabulary infrequently outside the classroom and preferred to learn such terms through contextual materials, such as clinical articles and dialogues, rather than isolated word lists. This aligns with the Vocabulary Building in Context theme in the interview data. This qualitative account is consistent with, and helps explain, the relatively high proportion of neutral rather than negative responses on this item. Chan (2021) highlighted that mastery of specialized vocabulary is a significant barrier for non-native English-speaking nursing students, particularly in clinical communication.

Language-related anxiety was also evident. Nearly a third of respondents (30%) reported feeling anxious during English role-plays, while more than half (55%) expressed neutrality, which may reflect hesitation to admit language anxiety openly, though it may also indicate genuine uncertainty about how they would respond in an unfamiliar situation. This pattern is consistent with interview accounts in which participants described role-play as initially uncomfortable but, over repeated practice, as one of the strategies they found most useful for building confidence. This aligns with Interactive and Experiential Learning theme in interview data, which suggests that the anxiety captured by the questionnaire item reflects an early-stage discomfort that structured practice can help address, rather than a fixed aversion to role-play itself. This finding resonates with Horwitz et al.'s (1986) theory of *Foreign Language Classroom Anxiety*, which suggests that nursing students may avoid active engagement in role-play due to fear of making mistakes.

Among the strongest agreements were related to limited opportunities for practice (55% agreed or strongly agreed) and the role of cultural differences (55% agreed or strongly agreed). These quantitative patterns are corroborated by the interview data, in which participants repeatedly attributed their lack of confidence to having few authentic opportunities to use English outside the classroom, and described daily conversation with peers, multimedia exposure, and immersive digital practice as the strategies they relied on, which aligns with the Suggested Improvements themes. Taken together, the two strands indicate that the challenge is less about awareness of what is needed and more about access to sustained, authentic practice. These findings reinforce the argument that experiential learning opportunities are critical for skill

development. Suikkala (2022) noted that practical exposure in clinical placements significantly enhances communication competence, while Kavalieratos et al. (2016) stressed that cultural sensitivity is crucial in effective palliative care communication. Overall, the results suggest that while students acknowledge the importance of English for palliative care, their challenges are rooted in three interrelated areas: (1) limited opportunities for authentic practice, (2) difficulties with empathy and specialized vocabulary, and (3) cultural and affective barriers such as anxiety. Addressing these issues within the curriculum through simulation, role-play, and intercultural communication training could help bridge the gap between theoretical knowledge and practical application in palliative care contexts.

Suggested Improvements in the Learning Process

Acquisition of English for palliative care communication is vital for nursing students, as it equips them with the skills needed to support patients and families in highly sensitive situations. Students' responses in this study highlighted several effective learning methods that extend beyond traditional classroom approaches. Thematic analysis revealed five major strategies that students perceived as most effective, each supported by illustrative quotes from respondents.

a. Interactive and Experiential Learning

The most frequently cited methods were role play, simulation, and case-based learning. These interactive activities allowed students to practice real-life scenarios, such as delivering bad news or offering comfort to families.

"Role-playing clinical scenarios is the most effective. Practicing conversations with a patient or family member in English, especially for difficult news or emotional support, helps a lot more than just memorizing words."

This finding aligns with the work of Wittenberg (2017), who argued that communication training in palliative care should incorporate simulation and structured practice because these approaches allow learners to develop empathy and patient-centered communication strategies. Similarly, Suikkala (2022) found that experiential learning enhances nursing students' confidence in addressing emotionally sensitive situations and improves their ability to communicate compassionately with patients and families. This shows that the prominence of role play, simulation, and case-based learning suggests that students value opportunities to engage in authentic communication rather than learning language through decontextualized exercises. Palliative care communication involves not only linguistic competence but also emotional intelligence, empathy, and interpersonal sensitivity. Therefore, experiential learning activities allow students to integrate language skills with professional nursing competencies in realistic clinical situations. Therefore, it can be stated that role-play activities provide a safe environment in which students can practice difficult conversations, such as discussing prognosis, responding to emotional distress, or supporting family decision-making, without the risk of causing harm to actual patients. Through repeated exposure to simulated scenarios, learners develop both communicative confidence and emotional preparedness.

b. Listening and Multimedia Exposure

Listening to authentic English input through movies, series, podcasts, and videos was another strategy that students perceived as helpful. Exposure to natural expressions, intonation, and accents provides learners with practical insights into real-world communication.

"When I watch English movies or listen to podcasts, I learn how real people express feelings. It helps me understand how to respond with empathy in English."

Students' emphasis on learning how people "express feelings" suggests that exposure to multimedia helps them acquire pragmatic competence the ability to use language appropriately in social and emotional contexts. According to Bosher and Smalkoski (2002), authentic listening materials enable nursing students to understand patient narratives and improve communication with individuals from diverse cultural and linguistic backgrounds. The finding also highlights the importance of emotional literacy in healthcare communication. By observing real-life interactions, students learn culturally appropriate ways to express sympathy, reassurance, and emotional support, skills that are critical in end-of-life care settings.

c. Daily Conversation and Peer Practice

Students highlighted the importance of practicing English in daily conversations with peers, teachers, or native speakers. These interactions were considered opportunities to build fluency, confidence, and spontaneity.

"Speaking with my friends in English even for small talk makes me less nervous when I have to use English in class or in front of patients."

The relevance of this finding is particularly significant in palliative care communication, where healthcare professionals must often respond spontaneously to patients' emotional needs. Regular conversational practice may therefore help students become more comfortable using empathetic language in unpredictable clinical interactions. Chan (2021) similarly reported that, peer-supported learning enhances both language confidence and the acquisition of empathetic communication skills among healthcare students. Moreover, this finding indicates that students view language learning as a social process that requires continuous practice and interaction. Frequent communication with peers allows learners to develop fluency, reduce anxiety, and gain confidence in using English spontaneously.

d. Vocabulary Building in Context

Another recurring theme was the need for consistent vocabulary development, particularly medical and palliative care terms. Students preferred contextual learning—such as reading articles, practicing with medical dialogues, and discussing clinical cases—over rote memorization.

"Learning vocabulary from palliative care articles is easier for me because I see how the words are used in real situations, not just from a list."

This finding reflects principles of contextualized language learning, which argue that vocabulary acquisition is more effective when words are encountered within authentic communicative situations. Contextual learning enables students to understand semantic nuances, collocations, and pragmatic usage, leading to deeper retention and more accurate application of vocabulary. For nursing students, this approach is particularly important because palliative care communication requires mastery of specialized terminology as well as sensitive language for discussing death, suffering, symptom management, and emotional support. Learning these expressions through authentic clinical materials helps students connect linguistic knowledge with professional practice.

The finding also supports Nation's (2013) view that vocabulary learning is most effective when learners repeatedly encounter words across multiple meaningful contexts. Repeated exposure through reading, discussion, and case analysis strengthens both receptive and productive vocabulary knowledge. Consequently, contextualized vocabulary instruction may better prepare nursing students for real-world communication than traditional memorization-based approaches. In other words, students' preference for learning vocabulary through clinical cases, articles, and authentic healthcare materials suggests that they recognize the limitations of isolated memorization. Rather than simply knowing definitions, students appear to value understanding how terminology is used in meaningful professional contexts.

e. Immersive and Technology-Assisted Learning

Several students reported that surrounding themselves with English through films, podcasts, books, or apps helped improve their learning outcomes. Immersive learning created a natural environment for language acquisition and fostered cultural sensitivity.

"I set my phone and social media to English. That way I'm exposed every day without feeling like I'm studying."

This finding reflects contemporary perspectives on autonomous learning, which emphasize learners' active responsibility in managing their own educational development. By integrating English into their daily routines, students create a language-rich environment that promotes incidental learning and sustained exposure. Such practices are particularly valuable in contexts where opportunities for direct interaction with native speakers may be limited. Technology-assisted learning also aligns with the principles of ubiquitous learning, whereby educational experiences occur anytime and anywhere through digital tools. Continuous exposure

to English content may facilitate the development of both linguistic competence and intercultural awareness, which are increasingly important in global healthcare environments. Chan (2022) found that digital learning resources enhance learner autonomy and contribute to long-term language development. In the context of palliative care communication, technology-assisted learning may further support students in accessing diverse perspectives on patient care, cultural attitudes toward death, and communication practices from different healthcare systems. Consequently, digital immersion serves not only as a language-learning strategy but also as a means of fostering culturally sensitive communication skills.

Research Limitations

Several limitations should be considered when interpreting the findings of this study. First, the research was conducted at a single nursing institution, STIKes RS Husada, Jakarta, Indonesia. Consequently, the findings may reflect the specific educational context and experiences of students within this institution. They may not be fully generalizable to nursing students in other regions of Indonesia or in different educational settings. Second, the study employed purposive sampling and included only sixth-semester nursing students who met specific inclusion criteria. While this approach ensured that participants had relevant academic exposure to both English for Nursing and palliative care concepts, it may have limited the diversity of perspectives represented in the data. Students from different academic levels, institutions, or educational backgrounds may hold different views regarding English communication needs in palliative care. Third, the findings relied primarily on self-reported questionnaire responses and interview data. Self-reported perceptions may be influenced by social desirability bias, personal confidence levels, or participants' subjective interpretations of their language abilities. As a result, the reported perceptions may not necessarily reflect actual English communication competence in clinical settings.

Future research could incorporate objective assessments, such as simulated patient interactions or communication performance evaluations, to provide a more comprehensive understanding of students' competencies. In addition, although the questionnaire items were adapted from Takele et al. (2022) and linguistically adjusted for the Indonesian nursing context, no formal content validity assessment or reliability testing (e.g., Cronbach's alpha) was conducted for the adapted instrument in the present study. This is an important methodological limitation, as adapting an instrument to a different linguistic, cultural, and disciplinary context can affect how items are interpreted; consequently, the quantitative findings, particularly item-level comparisons, should be interpreted with appropriate caution. Future studies should establish and report the instrument's psychometric properties when applied in new cultural and linguistic settings.

Finally, although most participants reported some clinical practice experience, a substantial proportion had limited or no direct exposure to palliative care communication in real-world clinical settings. This limited clinical exposure may have affected their ability to fully appreciate the complexity and practical demands of English communication in palliative care settings. Consequently, some responses may reflect anticipated rather than experienced communication needs. Further studies involving students with more extensive clinical placements or practicing nurses working in palliative care settings may provide deeper insights into the actual English communication requirements encountered in professional practice. Future studies involving multiple institutions from diverse geographic areas would provide a broader understanding of nursing students' perceptions of English learning for palliative care communication.

CONCLUSIONS

This study highlights that nursing students generally recognize the importance of English proficiency for their professional development, particularly in the context of palliative care communication. The findings indicate that students value English not only as a tool for career advancement and access to up-to-date medical literature but also as a means of building confidence in clinical interactions. However, limited clinical exposure appears to restrict their full

appreciation of English as a medium for patient and family communication in sensitive care settings. At the same time, several challenges were identified, including difficulties with empathetic expressions, specialized vocabulary, language anxiety, and cultural barriers. These issues are compounded by limited opportunities for authentic practice, underscoring the need for more experiential, context-based learning. Students themselves identified interactive approaches—such as role-play, simulations, multimedia exposure, peer practice, and contextual vocabulary development—as the strategies they perceived to be most helpful for building their competence and confidence, a pedagogical implication rather than a measured outcome of this study. Taken together, these findings suggest that integrating English for Nursing with palliative care communication deserves stronger curricular attention. By embedding experiential and culturally sensitive learning methods, nursing education can better prepare students to engage in compassionate, effective communication with patients and families in real-world clinical environments.

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AUTHOR COTRIBUTION STATEMENT

L.H.C.Z. contributed to the conceptualization of the study, research formulation, and preparation of the original manuscript. E.A.K.L.G., E.J., R.S.P., Y.Y., and R.A. contributed to the development of the research methodology, data analysis, interpretation of the findings, and critical review of the manuscript. All authors participated in reviewing and refining the manuscript, approved the final version for publication, and agreed to be accountable for the integrity and accuracy of the work.

AI DISCLOSURE STATEMENT

Generative artificial intelligence (AI) tools were used at several stages of manuscript preparation to support drafting, language refinement, textual organization, and improvement of clarity and academic presentation. All AI-assisted outputs were critically reviewed, verified, and revised by the authors before inclusion in the manuscript. AI tools were not used as substitutes for the authors' scholarly judgment and did not independently generate, collect, or interpret the research data. The authors retain full responsibility for the accuracy, originality, interpretation, and final content of the manuscript.

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